

Report on an unannounced inspection of

HMP Maidstone

by HM Chief Inspector of Prisons

8, 9, 15–19 October 2018

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Contents

Introduction	5
Fact page	7
About this inspection and report	9
Summary	11
Section 1. Safety	19
Section 2. Respect	29
Section 3. Purposeful activity	43
Section 4. Rehabilitation and release planning	49
Section 5. Summary of recommendations and good practice	55
Section 6. Appendices	61
Appendix I: Inspection team	61
Appendix II: Progress on recommendations from the last report	63
Appendix III: Care Quality Commission Requirement Notices	71
Appendix IV: Photographs	75
Appendix V: Prison population profile	79
Appendix VI: Prisoner survey methodology and results	83

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 Maidstone is a category C prison that holds exclusively foreign national prisoners, and has done since 2013. At the time of this inspection it held just under 600 prisoners. It had a young population, with some 40% being under 30 years of age. The prison itself dates back to 1819 and is situated near to the centre of Maidstone. In many respects it is like a typical Victorian jail, with high walls dominating the surrounding streets, and has been a feature of the life of the town for many generations. The current governor has been in post since 2013, which is a longer tenure than we often see. The prison was last inspected in August 2015.

In terms of safety, the prison was calm and well ordered but it was noticeable that the initial risk assessment of prisoners carried out on their arrival was not adequate and needed to be addressed as a matter of some urgency.

The use of force in the prison had increased since the last inspection but was lower than at other category C prisons and the seriousness of incidents was mostly low level. In terms of behaviour management, it was good to see what we have recorded as good practice in the use of incentives and earned privileges (IEP) forums, where the use of the IEP scheme was regularly reviewed and prisoner participation was included.

I would sound a note of caution about the situation at HMP Maidstone insofar as the impact of illicit drugs is concerned. The prison, unlike so many others, had not been destabilised by an influx of drugs, but there were some worrying signs. Despite the fact that the random drug testing carried out on prisoners was predictable, the positive test rate had risen and now stood at 14.5%. This was too high to be taken lightly. Shortly after this inspection some 15 parcels containing contraband, including drugs, were thrown over the wall into the prison in the space of a single night. Despite the clear indications that drugs were a growing problem, the response to intelligence was poor, with backlogs and suspicion searches not being carried out in a timely fashion or at all. There was clearly a need to refocus on the strategy for reducing the supply of illicit drugs, and there is certainly no room at all for complacency.

Generally speaking, we found that relationships between staff and prisoners were good, and a higher than usual proportion of prisoners told us they were treated with respect by staff. There were also good consultation arrangements with prisoners. The food in the prison was unusually well regarded by prisoners, with some 60% telling us it was good. However, as in too many prisons, it was served far too early, and we observed lunch being served at 11.20am and the evening meal at 4.20pm. A major issue for the prison was that much of the residential accommodation was old, shabby and in need of refurbishment. Living conditions were also adversely affected by the fact that the sports hall had been condemned and closed. There were serious problems with laundry arrangements, causing prisoners to have to wash and dry clothes in their cells. Overall, though, our judgement was that HMP Maidstone was a more respectful prison than when we last inspected, thanks in no small part to the quality of the relationships between staff and prisoners.

One of the most serious concerns brought to light by this inspection was the decline in terms of the purposeful activity available to prisoners. For those in employment the amount of time out of cell was perfectly adequate, but there were only sufficient activity places for around three-quarters of the population. There did not appear to be a strong culture of promoting teaching, learning or work within the prison. Indeed, inspectors concluded that much of the workshop activity was geared towards income generation for the prison rather than developing skills for prisoners to assist with their release and resettlement. Far too much of the work that was available was mundane and menial, and I was surprised to see large numbers of prisoners in workshops playing games rather than being engaged in work. In one case, prisoners were being allocated to an activity that did not actually exist. Ofsted judged the provision of education, work and skills to be inadequate in all of the

areas they inspected, and it was inevitable that our overall judgement in the area of purposeful activity declined compared to the last inspection to the lowest assessment, 'poor'.

In contrast, we found that rehabilitation and release planning had improved since the last inspection, although more still needed to be done. There was a need to develop a single, coherent system that would be capable of addressing the needs of each and every prisoner. The needs of foreign national prisoners can be very different from those of the majority of the prison population, and it is fair to say there had been some improvements in recent times, but there were still too many inconsistencies and errors, such as prisoners being incorrectly allocated to a Community Rehabilitation Company instead of to the National Probation Service, and it proving hugely difficult to get the error corrected. About half of prisoners did not have an up-to-date offender assessment system (OASys) assessment. More also needed to be done to support the significant number of prisoners who received no social visits at all.

Those prisoners who were destined to be held in detention under immigration powers at the conclusion of their sentence should have been told that this was going to happen sooner rather than later, and certainly not left until very close to the time when they anticipated that they would be released.

Although the problems with education and employment needed to be taken very seriously and resolved as soon as possible, it was good to see that there had been improvements in two of our healthy prison tests. The prison was completely aware of the distinct needs of their population, although more needed to be done to understand the more negative perceptions of their treatment and conditions held by prisoners with protected characteristics. The establishment also needed support in terms of investment to get the fabric of the buildings back to an acceptable standard and facilities such as the sports hall restored.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

December 2018

Fact page

Task of the establishment

Category C prison holding male foreign national prisoners

Certified normal accommodation and operational capacity¹

Prisoners held at the time of inspection: 595

Baseline certified normal capacity: 565

In-use certified normal capacity: 565

Operational capacity: 600

Notable features from this inspection

About 20% of prisoners had never received a social visit.

51% of the population were black and minority ethnic men.

The prison had a young population, with 40% of men aged under 30.

In our survey, 93% of prisoners said that they had a faith.

Prison status (public or private) and key providers

Public

Physical health provider: Oxleas NHS Foundation Trust

Mental health provider: Oxleas NHS Foundation Trust

Substance misuse provider: Forward Trust

Learning and skills provider: Novus

Escort contractor: GeoAmev, Serco, Mitie Care and Custody

Prison group

Immigration removal centres and foreign national prisons

Brief history

Maidstone prison was originally built in 1819. The prison underwent a re-role in 2013 and is now a designated foreign national prison.

Short description of residential units

There are four residential units and one segregation unit.

Kent unit	-	built in 1850, holds up to 178 prisoners in single cells
Medway unit	-	built in 1966, holds 101 prisoners in single cells
Thanet unit	-	built in 1909 and extended in the 1970s to hold 174 prisoners in single cells
Weald unit	-	built in 2009, holds 149 prisoners in single and double cells

Name of governor and date in post

Dave Atkinson, May 2013

¹ Baseline CNA is the sum total of all certified accommodation in an establishment except cells in segregation units, health care cells or rooms that are not routinely used to accommodate long stay patients. In-use CNA is baseline CNA less those places not available for immediate use, such as damaged cells, cells affected by building works, and cells taken out of use due to staff shortages. Operational capacity is the total number of prisoners that an establishment can hold without serious risk to good order, security and the proper running of the planned regime.

Independent Monitoring Board chair

Lynn Jessop

Date of last inspection

August 2015

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)*.² 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.³

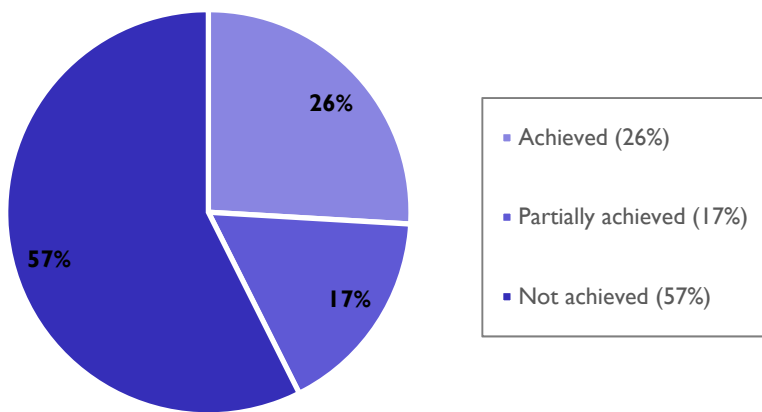
² <https://www.justiceinspectorates.gov.uk/hmiprisons/our-expectations/prison-expectations/>

³ 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 Maidstone in 2015 and made 54 recommendations overall. The prison fully accepted 43 of the recommendations and partially (or subject to resources) accepted 11.
- S2 At this follow up inspection we found that the prison had achieved 14 of those recommendations, partially achieved nine recommendations and not achieved 31 recommendations.

Figure 1: HMP Maidstone progress on recommendations from last inspection (n=54)



- S3 Since our last inspection outcomes for prisoners stayed the same for Safety, improved for Respect and Rehabilitation and release planning, and declined in Purposeful activity. Outcomes were reasonably good in the healthy prison areas of Safety and Respect, not sufficiently good in Rehabilitation and release planning and poor in Purposeful activity.

Figure 2: HMP Maidstone healthy prison outcomes 2015 and 2018⁴



⁴ 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 staff were polite but did not use telephone interpreting when necessary. First night staff did not assess prisoners' risks and there were no first night checks. Induction was adequate. The prison was orderly and calm and the number of violent incidents was low. The adjudication and incentives and earned privileges (IEP) processes were fair and the IEP forums were good practice. Force was rarely used and incidents were well managed. Men spent too long on the segregation unit awaiting transfer to category B prisons. Prisoners were not routinely invited to their segregation review boards. Security arrangements were generally proportionate but some practices were not. Drug use had increased but had not destabilised the prison. **Outcomes for prisoners against this healthy prison test were reasonably good.**
- S5** At the last inspection in 2015, we found that outcomes for prisoners in HMP Maidstone were reasonably good against this healthy prison test. We made 11 recommendations in the area of safety. At this inspection we found that three of the recommendations had been achieved, one had been partially achieved and seven had not been achieved.
- S6** Reception staff did not review cell-sharing risks when men arrived. Although reception was clean and in good repair, it was sterile and not informative. Reception staff were polite but rarely used professional interpreting services to communicate with prisoners who did not understand English. Some personal information was obtained from prisoners in front of other prisoners, which was inappropriate. Some newly arrived prisoners waited too long in reception before being taken to the first night unit. First night staff did not assess prisoners' risks and vulnerabilities and there were no additional first night safety checks. The induction, delivered by enthusiastic peer workers, was adequate but some areas of prison life were not covered. Peer workers provided good support to prisoners on the first night unit but their work lacked staff oversight.
- S7** The prison was reasonably calm and well ordered and most prisoners felt safe. Although the number of violent incidents had increased, it was lower than most category C prisons. The violence reduction strategy did not reflect current practice and actions to reduce violence were not yet embedded. A range of data was discussed at the safer custody meeting. The quality of investigations into violent incidents had improved but in the last six months only 10 perpetrators had been monitored.
- S8** The IEP scheme was generally used appropriately but not enough was done to reward positive behaviour. The IEP forum was good practice, as was the practice of giving written positive and negative IEP notifications to prisoners. The adjudication process was fair but some managers did not investigate the underlying cause of the charge.
- S9** Force was used more often than at our last inspection, but less often than at similar prisons. Most incidents were spontaneous and did not result in full control and restraint. Use of body-worn video cameras was good and spontaneous incidents were managed well. The very few planned interventions were video recorded, involved good briefings and de-escalation and were well managed. Documents justifying the use of force were detailed but not routinely reviewed by senior managers. The special accommodation cell was poor but rarely used. When furniture had been removed from cells because a prisoner was violent, it had been justified and appropriately authorised.
- S10** Segregation was used more often than at the previous inspection but numbers were not excessive. Some category B prisoners were segregated for too long before transfer. Prisoners were not routinely invited to attend review boards, which was unacceptable. Relationships between staff and segregated men were good but the regime was minimal. The

segregation unit was clean and cells were large and reasonably equipped. The exercise yard remained stark and unwelcoming.

- S11 For most prisoners, security arrangements were proportionate. However, all prisoners were routinely handcuffed when attending hospital and strip-searched on departure from the prison. The quality of intelligence reports was good but they were not always processed or communicated promptly. Too many intelligence-led searches and suspicion drug tests were late. More prisoners failed mandatory drug tests than at the last inspection but drug use was not destabilising the prison. The mandatory drug testing regime was weak and the supply reduction strategy underdeveloped.
- S12 There had been one self-inflicted death since our last inspection. Not all recommendations from the Prisons and Probation Ombudsman's investigation into the death had been effectively implemented. The quality of ACCT⁵ documentation required improvement and telephone interpreting was not always used in ACCT case reviews. The number of self-harm incidents in the last six months was low. Health care and the Home Office had not attended the safer custody meetings in the last six months and rarely attended ACCT case reviews. Serious incidents of self-harm and near misses were not investigated. The two constant watch cells remained inappropriately located in the segregation unit. We did not find men who should have been referred to local adult social services but safeguarding arrangements were weak.

Respect

S13 *Staff-prisoner relationships were generally good. Residential units were old and shabby but they were largely clean and tidy. Outside areas were good. Laundry services were poor and caused a lot of frustration. Food was good. Arrangements for consultation with prisoners were good. Responses to complaints had improved and were now adequate. Equality and diversity work still required development to address areas of potential discrimination. Faith provision was limited but attendance at corporate worship was excellent. Health services were reasonably good but dental services and the management of long-term conditions were inadequate. **Outcomes for prisoners against this healthy prison test were reasonably good.***

S14 *At the last inspection in 2015, we found that outcomes for prisoners in HMP Maidstone were not sufficiently good against this healthy prison test. We made 26 recommendations in the area of respect. At this inspection we found that nine of the recommendations had been achieved, three had been partially achieved and 14 had not been achieved.*

S15 Relationships between staff and prisoners were generally good and a strength of the prison. In our survey, 70% of prisoners said most staff treated them with respect. Newly appointed staff were generally confident and helpful when supporting prisoners. Many case note entries on Nomis lacked detail and personal officers rarely recorded their interactions with prisoners.

S16 Residential units were dated and shabby but communal areas were clean and tidy. The fabric of Kent unit was very poor and urgently needed extensive maintenance and refurbishment. Most prisoners had single cells but those on Medway were very cramped. Cells were reasonably well furnished but most toilets lacked privacy screening and some lacked lids. Some shower areas had been refurbished but many remained blighted by damp, mould and poor ventilation. The poor laundry service resulted in prisoners washing clothes in their cells

⁵ Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

or the showers. This caused great frustration and was unhygienic and inappropriate. Outside areas were good but rats were a problem. In our survey, 60% of prisoners said the food was good. The menus were not varied enough. The kitchen was clean but delays in repairing equipment were sometimes excessive. More prisoners than at our last inspection said they were able to access canteen in their first few days, but prisoners were critical of the range of available items.

- S17 Despite recent problems with the prison council, consultation arrangements were good. The applications process was effective. Complaint forms in other languages were not freely available. The timeliness of responses was improving but too many were still late. The quality of responses was adequate but quality assurance had only just started. Legal visits were still not confidential.
- S18 The prison had recently prioritised equality work with the appointment of an enthusiastic manager but the strategic approach remained underdeveloped. Helpful monitoring data were gathered but action was not taken to correct disparities in treatment. The quality of investigations into discrimination incidents was very poor. Responses were late and sometimes dismissive. Overall there was not enough provision for protected groups. Little signposting or information was readily available on wings in the most common foreign languages. Telephone interpreting was not always used for sensitive interviews. We were not confident that all prisoners' disabilities were identified, but we found no unmet need.
- S19 In our survey, 93% of prisoners said that they had a religion, an unusually high number. Despite some poor facilities, the stretched chaplaincy had maintained excellent attendance at corporate worship. Beyond worship and study classes, wider faith provision was limited.
- S20 Health service governance structures were adequate but there were some gaps, particularly in primary care. Governance meetings were well attended but integrated working required improvement. The appointment of a discharge coordinator was a positive initiative. The range of health promotion initiatives was reasonable, and these were being developed with the introduction of associate practitioners. Access to health services and visiting specialists was good. The management of long-term conditions was inadequate. The environment did not meet infection control standards despite the good efforts of staff. The mental health service and range of interventions were good. The Forward Trust⁶ provided good support for men with substance misuse needs. Medicines management was safe and effective, but concerns remained about the supervision of methadone administration. Men waited too long to see the dentist, in some cases six months for routine care. Social care needs were minimal, but it was unclear who the care provider was and no prison manager was responsible for social care. The prison lacked understanding of the occupational therapy assessment pathway for social care.

⁶ The Forward Trust was the contracted health care provider for substance misuse services.

Purposeful activity

S21 *Prisoners could spend a good amount of time out of their cells. The library service was limited but reliable. The loss of the sports hall severely limited men's physical education. Since our last inspection, most education, skills and work provision had deteriorated. Many courses did not meet prisoners' employment needs and many prisoners did little or nothing in workshops. Waiting lists to join the small number of vocational training courses were very long. Too few prisoners gained useful employment or personal skills and left the prison no better equipped than when they arrived.*

Outcomes for prisoners against this healthy prison test were poor.

S22 *At the last inspection in 2015, we found that outcomes for prisoners in HMP Maidstone were not sufficiently good against this healthy prison test. We made eight recommendations in the area of purposeful activity. At this inspection we found that no recommendations had been achieved, one had been partially achieved and seven had not been achieved.*

S23 Prisoners had a reliable weekday regime and could spend a good amount of time out of their cells. In our roll checks, 27% of the population were locked up. Retired and disabled prisoners and immigration detainees were now unlocked during the working day. Prisoners had good access to exercise in the open air, but exercise yards lacked physical training equipment. Men had limited but reliable access to the library. The range of foreign language books for the main nationalities was too limited. Efforts to promote literacy were very good. Physical education was severely limited by a lack of investment and the loss of the sports hall. The gym was also deteriorating. There was no population analysis to drive improvements in the gym or library.

S24 The education, skills and work provision had not improved since the previous inspection. All but a very few of the improvements planned then had not been achieved. The number of full-time activity places had reduced and was only sufficient for about three-quarters of the population. Managers were enthusiastic but most of their improvement initiatives were at early stages of implementation or only relevant to a very small number of prisoners.

S25 Arrangements to improve quality were ineffective. The analysis of data for performance monitoring and management required improvement. A full and thorough training needs analysis had not been completed, nor a full curriculum review. The provision did not meet prisoners' needs well enough. Most qualification-based courses did not meet the employment needs of the more able and occupationally-experienced prisoners. The effectiveness of careers guidance and pre-release arrangements was a work in progress.

S26 Far too many prisoners worked on the wings or in workshops where they had little or nothing to occupy them. In one case, prisoners were allocated to work that did not exist. In another, at least two-thirds of the 60 prisoners in the print shop did nothing but chat and play games. Work-related qualifications were now only available in horticulture and catering.

S27 Many prison industry staff did not see any value in developing prisoners' employability or work skills. However, one staff member had developed a useful initiative to offer basic qualifications in industries, but this needed a lot of management support and resource before it could be implemented.

S28 The English for speakers of other languages (ESOL), English, mathematics and vocational training provision was limited. The most popular education and vocational training courses all had long waiting lists, particularly English, bricklaying, peer mentoring and catering. Peer mentors were used well in most sessions to support prisoners' learning. Prisoners' attendance at education sessions had improved, but was not consistently high.

- S29 The quality of teaching and learning helped some prisoners to progress but it was not consistently effective. Training and coaching in catering and horticulture were effective. Too many courses did not run because of a lack of teaching staff.
- S30 Prisoners were well behaved and courteous to staff and each other and usually supported each other's learning well. The large majority of prisoners did not feel valued.
- S31 The achievement of information computing and technology and construction skills qualifications was high, but not consistently high enough on all ESOL and functional English and mathematics courses, particularly at higher levels. Too few prisoners developed useful employment or personal skills and left the prison no better equipped than when they arrived.

Rehabilitation and release planning

S32 *Visits arrangements were adequate. Work to support family ties had improved but was not yet fully developed. The strategic management of resettlement had improved since our last inspection. About half the prisoners did not have an up-to-date offender assessment system (OASys) assessment. Preparation for release had improved but not all resettlement needs were met. Some men were informed very late that they would be detained under immigration powers. In practice, almost no prisoners benefited from home detention curfew, temporary release or re-categorisation. No interventions were offered to manage offending behaviour. 'Steps to the gate' was a good initiative but the resettlement workshop was not yet effective. **Outcomes for prisoners against this healthy prison test were not sufficiently good.***

S33 *At the last inspection in 2015, we found that outcomes for prisoners in HMP Maidstone were poor against this healthy prison test. We made nine recommendations in the area of rehabilitation and release planning. At this inspection we found that two of the recommendations had been achieved, four had been partially achieved and three had not been achieved.*

- S34** Work to support family ties had improved but was not yet fully embedded. About 20% of men had never had a social visit, but the official prison visitor, prisoner voicemail, assisted visits and accumulated visits schemes were all underused. Visits arrangements were adequate.
- S35** There was much more strategic focus than at the last inspection on preparing people for release, whether in the UK or elsewhere, in line with the new national model of delivery. Policies, a needs analysis and an effective monthly reducing reoffending partnership meeting were now in place. Specialist departments were chronically understaffed, including immigration enforcement and the offender management unit, where staff were regularly deployed to other duties. This adversely affected outcomes across all aspects of case management, although less severely than at the last inspection. Contact with prisoners was reactive and driven by events rather than proactively planned. Working relationships and communication between resettlement and offender management teams were good, but not sufficiently well integrated at management level. Several good initiatives were in the early stages of development, and needed to be more firmly embedded. The immigration enforcement team worked closely with prison staff, but too many prisoners were still told too close to their release date that they would be detained under immigration powers.
- S36** About half the prisoners did not have an up-to-date OASys assessment. Actions to reduce their re-offending and manage their risks were therefore not sufficiently well informed. About a third of prisoners had been wrongly allocated to a community rehabilitation company when sentenced. The prison attempted to reallocate them but with little success.

This meant that too many men, including many high-risk of harm prisoners, received no contribution from their home area probation service.

- S37 Categorisation, home detention curfew and temporary release processes were properly carried out, but with almost no positive results. Prisoners resented the fact that no one had been transferred to open conditions in the last three years. Public protection processes were sound, but the interdepartmental risk management meeting was poorly attended by departments other than the offender management unit. MAPPA (multi-agency public protection arrangements) levels were often not notified to the prison within the required timescale.
- S38 There were no interventions to address offending behaviour. Prisoners were hardly ever able to move to another prison for a course. In the last year, 19% of those discharged from custody were released into the UK without work to reduce their risks. Citizens' Advice provided a good service and assisted many prisoners with financial and legal matters. The Forward Trust, Spurgeons and other partners liaised well with the resettlement team.
- S39 The Steps to the Gate resettlement passport was a good start. This process helped the prison to gather relevant needs information soon after arrival, informed allocations to activities and was reviewed three months before release. The virtual campus was well used as part of this process. Hibiscus Initiatives offered a one-day programme on resettlement to other countries, which was positive but not yet effective.

Main concerns and recommendations

- S40 **Concern:** There was not enough focus on the identification of immediate vulnerabilities, needs and risks during the reception and first night process. No additional overnight checks were routinely undertaken on new arrivals located on the first night wing.

Recommendation: Reception and first night processes should ensure that prisoners' immediate vulnerabilities, needs and risks are thoroughly assessed through a private interview with prison staff to ensure that appropriate support is offered. Additional night time checks should be undertaken on new arrivals.

- S41 **Concern:** Residential units were dilapidated and in need of refurbishment, as were other parts of the prison such as the sports hall and chapel. Cell windows were damaged and in need of repair.

Recommendation: Sufficient investment should be made to ensure that the prison provides a safe and decent environment for prisoners and facilities which are fit for purpose.

- S42 **Concern:** Prison leaders and managers had not improved most aspects of the education, skills and work provision and had only partially achieved one of our eight recommendations for improvement. Quality improvement arrangements were ineffective and the prison and education managers' self-assessment reports were inaccurate and led to incomplete quality action planning as a result.

Recommendation: Leaders, managers and staff should focus relentlessly on implementing effective new continuous quality improvement arrangements which are informed by a comprehensive and accurate evaluation of all areas of weakness in education, skills and work.

S43 **Concern:** The majority of work activity places involved undemanding activity at best. Managers recognised that the work available for prisoners was mostly menial and repetitive and was not developing prisoners' skills. However, they had not introduced more productive alternatives. Between one and two thirds of prisoners in work had little or nothing to do. In one workshop prisoners were routinely assigned to a work activity that was not operating.

Recommendation: Leaders and managers should ensure that all work activities develop prisoners' employment and personal skills and lead to qualifications and clear records of achievement.

S44 **Concern:** Prison and education managers had not conducted a thorough and accurate training needs analysis of the population, nor implemented a much-needed full curriculum review. Consequently, the range of provision did not meet the skills development needs of all prisoners.

Recommendation: Leaders and managers should implement a thorough and accurate training needs analysis of the population, use it to implement a full curriculum review and ensure that the provision of activities meets the needs of the majority of prisoners, including the more able and experienced.

S45 **Concern:** New initiatives had been introduced to facilitate rehabilitation and release planning, but they were not integrated into a single coherent system, nor did they include every individual. Some initiatives had not developed into a mature and sustainable pattern of delivery. There was no assurance that the rehabilitative needs of all prisoners were being met.

Recommendation: Organisation and delivery of rehabilitation and release planning services should be integrated into a single coherent system that identifies and addresses the risks and needs of each prisoner throughout their time at Maidstone. In particular, all prisoners should have an up-to-date OASys assessment and sentence plan and should be supported and motivated by regular and meaningful contact with offender supervisors.

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 During the previous six months, approximately 20 prisoners arrived at Maidstone each week and a similar number were released or transferred to another prison or immigration removal centre.
- I.2 GeoAmey was the escort provider for prisoners from public sector prisons and Serco for private sector prisons. Mitie Care and Custody escorted detainees who had completed their prison sentence and were being held under immigration powers. Escort vehicles that we inspected were clean and stocked with a first aid kit and welfare packs. Prisoners were not routinely strip-searched on arrival; the prison used a freestanding metal detector instead, which was good. However, all prisoners departing were strip-searched, including those who were being released, which was unnecessary and not based on individual risk.
- I.3 Person escort records (PERs) were not always completed well: some did not document risk and journey information in enough detail. Not all prisoners who had travelled long distances were offered food or drink during the journey. In one example, a prisoner had been transferred in a cellular vehicle for 3 hours 30 minutes but had not been offered food, water or a comfort break. Another transferring prisoner had been on the vehicle for 4 hours 50 minutes, and had not been offered a comfort break. In neither case did the PER indicate any reason for this based on risk. Prisoners alighted from the vehicles and were taken into reception quickly.
- I.4 Prison files and cell-sharing risk assessments (CSRAs) accompanied all new arrivals but CSRAs were not routinely reviewed on arrival. We found one CSRA which had not been reviewed for more than two years.
- I.5 The reception area had been refurbished since our last inspection and was brighter, but it still did not provide a welcoming and informative environment. For a foreign national prison there was a distinct lack of material in different languages. The holding rooms were clean but stark, with only a wooden bench to sit on and a small television to occupy prisoners. The holding rooms had no sanitation and prisoners had to ask staff to use the toilet. Reception staff could not easily observe prisoners in the holding rooms from the main staff desk and there was no CCTV. Prisoners were offered a sandwich and cold drink in reception, but no hot drinks were offered. Reception staff were polite, but rarely used the professional interpreting service for arrivals who did not understand English, relying on other prisoners to interpret for them. Some personal information, such as offence details and previous self-harming behaviour, was obtained at an open desk in earshot of other prisoners and staff, which was inappropriate.
- I.6 Newly arrived prisoners waited too long in reception before being located on to Weald wing, the induction unit. First night cells that we inspected were adequately equipped. Prisoners were seen by a member of the health care team on the unit (see paragraph 2.76).

First night staff did not conduct a private safety interview to address immediate needs and assess risks. Given the nature of the population, this was concerning. During our night visit, induction unit staff could not identify the new arrivals or their location. There were no additional first night safety checks on new arrivals.

- I.7** Induction started the day after arrival in a group room on Weald wing. The presentation was delivered by enthusiastic peer workers and contained useful information about life at Maidstone. However, it was not comprehensive and did not cover how to make a complaint or application or information on the official visitors' scheme. Prisoners' immigration status was their greatest concern but Home Office staff did not always see prisoners during induction which caused frustration. Prisoners spent too long locked in their cells between induction sessions.
- I.8** Prisoner peer workers provided good support to new arrivals in reception and on the first night unit, but their work lacked staff oversight. For example, the peer workers in reception asked arriving prisoners about previous self-harming behaviour and peer workers on the induction unit asked questions about protected characteristics, both of which were inappropriate.

Recommendations

- I.9 Prisoners on escort should be given adequate toilet breaks and this should be recorded.**
- I.10 Prisoners on the first night centre should be unlocked during the core day.**
- I.11 The induction programme should be clear, concise and relevant and should provide all prisoners with enough knowledge to access fully services and activities at Maidstone. This should include contact with Home Office staff.**

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** The prison was reasonably well ordered and calm. Despite a modest increase in the number of violent incidents since the previous inspection, very few were of a serious nature and the levels of violence remained lower than most other category C prisons. In our survey, 22% of prisoners said that they felt unsafe at the time of the inspection, which was similar to the comparator. In our prisoner groups and conversations with individual prisoners, most prisoners told us that they felt safe.
- I.13** The violence reduction strategy was comprehensive but largely aspirational and not underpinned by local data on violent incidents. There was no dedicated violence reduction action plan. While a recently published framework included actions to reduce violence, very few managers or staff were aware of it and it was not fully embedded.

- I.14** The deputy governor chaired the monthly safer custody meetings which included an item on violence reduction. Members of the safer custody team prepared a useful range of data to identify trends and patterns in violent incidents. There had been some inconsistency in identifying actions as a result of these data, but significant investment in staff resources to manage violence reduction had contributed to recent improvements.
- I.15** The safer custody team had identified shortfalls in the quality and consistency of investigations into violent incidents and, as a temporary measure, a designated violence reduction officer completed all investigations. The quality of investigations had improved and recommendations and outcomes were appropriate. Prisoners' confidence in the investigative process was reflected in our survey where 54% of prisoners against the comparator of 32% said they would report bullying or victimisation by other prisoners.
- I.16** Perpetrators of violence were monitored by a 'safer atmosphere for everyone' (SAFE) document. This was impressive and included elements of case management and interventions to address antisocial or violent behaviour. However, only 10 documents had been opened over the previous six months and staff did not use the SAFE process to full effect. Intervention targets were often generic and did not address the underlying causes of behaviour. Some SAFE documents were closed before all the identified concerns had been addressed.
- I.17** Support for victims was reasonable. Very few prisoners self-isolated and those who did were interviewed by the safer custody team to identify the support that was required.
- I.18** The incentives and earned privileges (IEP) scheme was used appropriately. Although there were few incentives to promote positive behaviour, very few men were placed on the basic regime. Prisoners on basic privileges could still access a reasonable regime and systems were in place to review basic levels regularly. Targets set for prisoners on basic were generic and did not address the behaviour that led to the removal of privileges. Prisoners were given written notification of negative and positive behaviour warnings which were entered on P-NOMIS (Prison Service electronic case notes).
- I.19** Managers had identified these shortfalls and had recently implemented a monthly IEP forum which was co-chaired by a senior manager and a prisoner representative. A range of issues relating to the incentives scheme were discussed and several anonymous documents scrutinised.

Recommendation

- I.20** **Procedures to monitor perpetrators of violence or antisocial behaviour should address the underlying causes of violent and antisocial behaviour and set targets specific to the prisoner.**

Good practice

- I.21** *A monthly forum, co-chaired by a manager and prisoner, reviewed the application of the incentives and earned privileges scheme. Staff gave prisoners a written note immediately after positive or negative behaviour which potentially influenced their status on the scheme. Both these measures helped to ensure that the scheme operated fairly and transparently.*

Adjudications

- I.22** The number of adjudications had increased since the previous inspection with 776 charges in the previous six months, which was similar to other category C prisons.
- I.23** Hearings that we observed were administered fairly and correctly. However, a high proportion of the documentation that we reviewed did not demonstrate investigation of the underlying cause for the prisoner committing the offence. Punishments remained proportionate and in accordance with the published tariffs. Telephone interpretation was sometimes used.
- I.24** Quality assurance was conducted by the deputy governor and adjudications were further monitored at the quarterly segregation management and review group meeting. Monitoring was limited to the outcome of charges rather than identifying themes or trends such as the protected characteristics of men who had been charged.

Recommendation

- I.25** **Detailed analysis of adjudications should be carried out to identify themes or trends and to reduce the quantity of laid charges.**

Use of force

- I.26** Incidents involving the use of force had increased since the previous inspection and there had been 64 incidents during the previous six months. Despite this increase, the use of force remained lower than in similar prisons. Most incidents were spontaneous and comprised low-level guiding holds with appropriate use of de-escalation by staff.
- I.27** Use of force documentation was comprehensive and of a good standard. Staff used body-worn video cameras effectively to de-escalate spontaneous incidents. There were very few planned interventions and those that did take place were well managed, with good briefing and appropriate focus on de-escalation.
- I.28** Batons had been drawn but not used on two occasions in the previous six months. Statements by staff demonstrated that the decisions to draw batons had been appropriate and had prevented further escalation.
- I.29** Prison managers did not routinely review filmed evidence or staff statements. Discussion of force at the segregation management and review group was limited and actions did not address the increase in force.
- I.30** Special accommodation had been used on eight occasions in the previous six months. This often occurred when furniture was removed from the cells of segregated prisoners who were attempting to cause damage. Records indicated that appropriate consideration had been given to removing cell furniture and, in most cases, this had been for a brief period.
- I.31** The special accommodation cell used at our last inspection had been decommissioned. A different cell was now designated for special accommodation. It lacked integral sanitation and a drainage area in the cell was not appropriately covered. The cell had not been used in the previous six months and it was not appropriate to use it in its current state.

Recommendations

- I.32 Prison managers should review and quality assure all incidents of force, associated video footage and documentation.**
- I.33 The special cell should be made fit for occupation or taken out of use.**

Segregation

- I.34** During the previous six months, 141 prisoners had been segregated compared with 114 at the previous inspection. The overall use of segregation was not excessive and most men were segregated as punishment following an adjudication hearing.
- I.35** Despite discussion on a range of data relating to segregation at the quarterly segregation group meeting (see paragraphs 1.24 and 1.29), the governance and oversight of prisoners segregated on good order were poor. Documentation authorising their segregation was often incomplete and the justification for segregation not detailed enough. Prisoners were not routinely invited to good order review boards and attendance by key departments such as health, chaplaincy and the independent monitoring board was poor. Staff and prisoners raised these concerns with us.
- I.36** The management of category B prisoners who were segregated on good order pending transfer was also a concern. Transfers took too long to organise and there was little support for men during prolonged periods of segregation pending transfer (see paragraph 4.23).
- I.37** The fabric of the segregation unit remained reasonable: cells were large with adequate levels of natural light and, other than limited graffiti on the rear of cell doors, the unit was clean. No attempt had been made to improve the grim exercise yard which had nothing to occupy prisoners. Two cells used for constant supervision were still located in the segregation unit, which was not appropriate (see paragraph 1.58).
- I.38** The regime on the unit was limited to exercise, use of the shower and telephone and collection of meals. Staff told us of plans for risk assessed shared exercise and limited activity off the unit but there was no evidence of this at the time of the inspection. Prisoners had reasonable access to a small library and, although distraction packs (small packs containing puzzle books and reading material) were available, these were all in English and there was very little for non-English speaking prisoners. Relationships between staff and prisoners on the unit were positive and we observed some good interactions.

Recommendations

- I.39 Good order or discipline and reintegration planning reviews should be attended by staff from relevant departments and should focus on the prisoner's individual circumstances. The prisoner should be invited to attend.**
- I.40 Cells for prisoners requiring constant supervision should not be located in the segregation unit.** (Repeated recommendation 1.54)

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.41** Physical security arrangements were proportionate and aligned to risks. However, some elements of procedural security were disproportionate, for example routine strip-searching of all prisoners departing (see paragraph I.2) and the routine use of handcuffs to escort prisoners to hospital. Health care considerations were not always available to managers determining the appropriateness and suitability of handcuffing, and risk assessments were not always fully completed. One prisoner, undergoing regular hospital treatment, was handcuffed each day with no apparent assessment of his individual risk. This was disproportionate.
- I.42** Monthly security meetings were not always well attended and not all key departments were represented. Health care staff had not attended for at least six months nor had the prison intelligence officer. The counter terrorism lead had only attended one of the last six meetings. The discussion of useful data resulted in positive outcomes but some actions recurred from month to month without resolution.
- I.43** The security department received an average of 425 intelligence reports each month. Reports were generally of good quality but they were not always processed or communicated swiftly to appropriate areas. Intelligence-led searching and suspicion drug testing were not always carried out promptly. However, actions that were completed resulted in positive outcomes. During the previous six months, searches had resulted in the recovery of 48 mobile phones, eight SIM cards and 102 drug packages. Shortly after our inspection, 15 parcels containing mobile phones and drugs were thrown over the perimeter wall in a single night. A scanner was used to test incoming mail for illicit substances and had yielded substantial finds.
- I.44** The supply reduction strategy was underdeveloped. During the previous six months, the positive rate for prisoners randomly tested for drugs was 8.4% compared with 2.6% at the previous inspection and this rose to 14.5% when new psychoactive substances (NPS)⁷ were included. Random drug testing took place on set days and remained predictable. During the previous six months, 15 of the 36 positive tests had gone unpunished because test results were processed too late. This was unacceptable. The mandatory drug testing suite was a poor environment and the lack of a designated key meant that the area could be accessed by anybody. This was inappropriate. Testing kits were not stored securely and the environment was not sterile or conducive to forensic testing. The holding rooms had no heating and were grubby.
- I.45** At the time of our inspection, three prisoners were subject to closed visits, all for visits related activities. They were appropriately reviewed each month.
- I.46** Processes to protect prisoners from illegal conduct by staff were good. The prison worked closely with the police who provided support. Work to identify and manage extremist prisoners was sound.

⁷ Generally refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vapourised and inhaled in e-cigarettes and other devices.

Recommendations

- I.47** The strip-searching of all men leaving the prison and the handcuffing of all prisoners going to hospital should be proportionate and based on an individual risk assessment.
- I.48** Intelligence-led searches should be carried out quickly in all cases where a need is identified. (Repeated recommendation I.33)
- I.49** The MDT suite should have a separate key and should only be accessible to those undertaking MDT work.
- I.50** The MDT suite should be sterile and conducive to forensic testing.
- I.51** The MDT suite holding rooms should be refurbished and heating installed.
- I.52** Random mandatory drug tests should be unpredictable, and suspicion and risk-based testing should be completed promptly in relevant cases. (Repeated recommendation I.34)

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.53** There had been one self-inflicted death since our last inspection. Not all the recommendations from Prisons and Probation Ombudsman's (PPO) investigation reports had been effectively implemented.
- I.54** During the previous six months, 64 acts of self-harm had been carried out by 42 prisoners, which was fewer than at comparator prisons. The quality of ACCT⁸ documents required improvement. Trigger factors for self-harm were incorrectly recorded, care maps were often incomplete, and some initial case reviews were late and were not multidisciplinary. Many recorded observations by officers lacked detail and evidence of meaningful interaction. In some cases, ACCTs had been closed before all issues had been addressed. In one example, an ACCT had been closed immediately after a close family bereavement had been disclosed at a review. Records did not indicate the use of professional interpreting services to support prisoners in crisis and we saw two examples of prisoners interpreting at case review meetings, which was unacceptable given the sensitive nature of the information discussed. There were very few management checks of ACCT documents.
- I.55** The strategic approach to suicide and self-harm work was underdeveloped and data analysis lacked sophistication. For example, most self-harm data attributed incidents to punishments in the prison. However, Listener⁹ call-out records and ACCT documentation indicated that immigration status and isolation from family were common factors in self-harming rather

⁸ Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

than punishments. Minutes of safer custody meetings indicated little reference to and no analysis of these factors.

- I.56** On-site Home Office immigration staff had not attended any safer custody meetings during the previous six months and health care staff rarely attended. Similarly, the sample of ACCT documents that we reviewed showed that Home office staff had not attended any reviews and health care contributions were often limited (see paragraph 2.90). Actions which could have been resolved quickly often rolled over to consecutive meetings. The safer custody policy still did not indicate the circumstances in which serious incidents of self-harm or near misses should be investigated to learn lessons and no such investigations had taken place.
- I.57** At the time of our inspection, there were 13 Listeners. Listeners we spoke to felt well supported by the Samaritans and were able to attend and contribute to part of the safer custody meetings.
- I.58** Constant watch had been used eight times in the previous six months. The two constant watch cells were still located in the segregation unit, which remained unacceptable. Defensible decision logs relating to the segregation of prisoners on ACCTs were poor.

Recommendations

- I.59 ACCTs should be of a consistently good quality, ensuring that individual prisoners receive appropriate care and support.**
- I.60 There should be a policy for the thorough investigation of all serious incidents of self-harm and action on learning points and recommendations. The policy should include implementation of recommendations in Prisons and Probation Ombudsman fatal incident reports, and these should be reviewed regularly.**
- I.61 There should be a coherent strategy to reduce self-harm, informed by the characteristics of the population at Maidstone, and meaningful analysis of data including contributions from key partners such as health care and the Home Office.**
- I.62 Prisoners on ACCTs should be located in the segregation unit or special accommodation only as a last resort and in exceptional circumstances. When prisoners are located in this area, defensible decisions logs should show full justification for the reasons and alternatives that have been explored.**

Protection of adults at risk¹⁰

- I.63** The safeguarding adults policy was weak and underdeveloped. It did not specify how prisoners would be supported and focused on the risks posed by prisoners rather than potential risks to them. There were no links to the adult safeguarding board and prison managers had not attended any meetings with the local authority. No referrals had been made during the previous six months. Many staff were unfamiliar with safeguarding policy and procedures, which increased the risk of needs being overlooked.

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).

Recommendation

- I.64 All staff should be trained in safeguarding procedures and be aware of their responsibilities.**

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 The relationships between staff and prisoners were generally good and a strength of the prison. In our survey, 70% of prisoners said they were treated respectfully by staff. We observed staff frequently referring to prisoners by their first or preferred names and there was a clear atmosphere of professional but relaxed engagement.
- 2.2 Staff exercised their authority in an appropriately calm and understated manner. Activities such as prisoner movement to work were well controlled and conducted in a cordial fashion, further supporting the development of positive relationships.
- 2.3 Residential staff were visible and prisoners were confident to approach them with any issues or concerns. In our survey, 74% of prisoners said there was a member of staff they could turn to if they needed help.
- 2.4 Many operational staff were inexperienced; about half had been in the Prison Service for less than two years. However, they were enthusiastic and helpful when supporting prisoners. Prisoners acknowledged that staff were improving as their experience and confidence grew. An experienced member of staff acted as mentor to new staff, which was a good initiative.
- 2.5 In our survey, 92% of prisoners said they had a personal officer, and 40% said they were useful. The delivery of key worker training was under way which would replace the personal officer scheme under the new offender management in custody (OMiC)¹¹ model.
- 2.6 Personal officer entries on prisoners' records were infrequent. Entries often concerned routine administrative tasks and many entries lacked detail. There was a focus on documenting negative behaviour rather than prisoner welfare and sentence plan progression. Management oversight was ineffective.

Recommendation

- 2.7 **Officers should make regular, detailed and informative case note entries which comment on sentence plan progression and welfare.**

¹¹ 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 gradually, from 2019.

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

- 2.8** The four residential units varied in design but they were all old and shabby. The fabric of Kent house in particular was in very poor condition and required urgent and extensive maintenance and refurbishment. On other units, communal areas were clean and tidy, although they needed redecorating (see main recommendation S41).
- 2.9** Unlike many establishments, there was not a high level of overcrowding. Only prisoners on the ground floor of Weald unit were required to share a cell. Most cells were in a reasonable condition, although those on Medway were particularly small and cramped. Only a small amount of graffiti and offensive material was observed. Although cells were generally adequately furnished, most had no privacy screening for the toilet. On Weald unit, toilets had no lids, which was unhygienic. A significant minority of cells had damaged and broken windows.
- 2.10** Some shower areas had been refurbished since our last inspection but many remained blighted by damp and mould caused by poor ventilation. Some flooring was in poor condition with cracked and broken tiles. Prisoners complained of excessive variations in water temperature which we observed to be the case. We were told that this was caused by temporary boilers.
- 2.11** In our survey, prisoners were more negative than at our last inspection about access to clean and suitable clothes and clean sheets each week. Prisoners expressed frustration about the lack of laundry facilities. The prison laundry was closed and washing was sent to a nearby establishment. Prisoners lacked confidence in this arrangement and cited instances of clothing coming back inadequately washed or being lost. Many prisoners had taken to washing their clothes in their cells which resulted in damp and mould in some cells and temporary washing lines in cells and shower areas. Clothes were also hung out to dry through damaged cell windows. These measures were unsatisfactory and unhygienic. This situation was exacerbated because, unlike in many other establishments, prisoners could not have items sent in by family and friends.
- 2.12** Units were reasonably quiet during our night visit. The system for recording cell emergency bells was not working, but we saw evidence of the temporary use of an alternative procedure to provide management assurance. Our observations indicated that staff were reasonably attentive and bells did not go unanswered for extended periods.
- 2.13** Access to personal property from reception was reasonable and most requests were fulfilled within seven days.
- 2.14** External areas remained good, with some attractive flower beds and very little litter being thrown from cell windows. Rats infested the prison despite the efforts of external pest controllers.

Recommendations

- 2.15 All showers should be adequately ventilated and decorated. All toilets should have lids and seats and be appropriately screened.**
- 2.16 Water should be at an appropriate and consistent temperature for taking showers.**
- 2.17 Adequate laundry arrangements should be in place for all prisoners.**

Residential services

- 2.18** In our survey, 60% of prisoners said the food was good against the comparator of 35%. Prisoners could choose in advance one of five options from a menu on a four-week cycle. Lunch during the week only provided cold options, with a hot meal available at all other times. Breakfast packs were distributed the evening before they were to be eaten. The food that we sampled was of reasonable quality, although the menus were not varied enough and had not been assessed for nutritional content.
- 2.19** We observed lunch being served at 11.20am and supper at 4.20pm which was too early. Staff supervision at wing serveries was appropriate and prisoners employed in the servery were correctly dressed. However, food comments books were not routinely made available to prisoners. Facilities for prisoners to eat together were limited. Microwaves and toasters were available but access to them was inconsistently managed across the residential units.
- 2.20** The kitchen was clean with appropriate food storage and preparation procedures in place. Up to 20 prisoners could help to prepare meals and food hygiene qualifications were available through the staff mess and education department. Some equipment, including freezers, had been broken for a considerable period, leading to costly temporary solutions. The catering manager consulted prisoners regularly, including through surveys. Response rates to surveys were low but led to some changes.
- 2.21** In our survey, 54% of prisoners said they were able to access canteen in their first few days against 27% at our last inspection and 38% at similar prisons. Prisoners were able to buy items from an abridged version of the national product list which was reasonably comprehensive. However, in our survey, prisoners were more negative than comparable prisons about whether they were able to purchase the items they needed.
- 2.22** Prisoners could order items from a small number of catalogues. An administrative charge continued to be applied for catalogue orders and prisoners were no longer able to make purchases via the internet.

Recommendations

- 2.23 Menus should be sufficiently varied and should be assessed for nutritional content.**
- 2.24 Meals should be served at times equivalent to those in the community.**
- 2.25 All catering equipment should be repaired quickly.**

Prisoner consultation, applications and redress

- 2.26** Despite some recent problems, consultation arrangements were good. In our survey, 59% of prisoners said that consultation took place and 31% that it resulted in changes. The prison had worked with User Voice¹² to set up a council which met monthly. Minutes of meetings indicated good attendance by prisoners, senior managers and representatives from User Voice.
- 2.27** The residential manager held a useful monthly surgery on each house unit when prisoners could freely raise issues or concerns with her, such as canteen, catering and the incentives and earned privileges scheme.
- 2.28** Application forms were widely available on wings and the system was effective. In our survey, 52% of prisoners who had made an application said they were dealt with fairly and 47% that they were dealt with within seven days. Applications were logged by staff on a central spreadsheet but these records indicated that not all applications had received a response. Peer workers on each wing helped prisoners to make applications. However, they had not received formal training and received little staff oversight of the accuracy of the information they provided.
- 2.29** During the previous six months, 500 complaints had been submitted, slightly less than at our last inspection. In our survey, 41% of prisoners who had made a complaint said that complaints were dealt with fairly against 18% at the previous inspection. However, complaint forms in other languages were not freely available and some complaint boxes remained poorly labelled and sited.
- 2.30** The timeliness of responses was improving, but over the previous six months 25% of replies were delayed, which was unacceptable. The quality of most responses that we looked at was adequate. Quality assurance of individual complaints had only recently started but data collection and analysis were sound and complaints were discussed at monthly senior management meetings and at the prisoner council.
- 2.31** In our survey, 42% of prisoners said it was easy to communicate with their solicitor but legal visits still took place in the main visits hall, offering little confidentiality. A small range of useful legal material was available in the library and Citizens' Advice, who attended the prison four days a week, were able to assist prisoners with general legal matters.
- 2.32** Prisoners still had no access to a computer to produce letters and statements to support their legal cases. Prisoners who were successful in their application to use an 'Access to Justice' laptop were required to transfer to a nearby establishment to use their facilities. This was unsatisfactory.

¹² User Voice is a charity which builds structures enabling productive collaboration between service users and providers. Their work is led and delivered by ex-offenders.

Recommendations

- 2.33** Information peer workers should receive formal training with appropriate staff oversight to ensure that accurate and consistent information is provided to prisoners.
- 2.34** Complaint forms should be available in a range of languages next to complaint boxes which are clearly labelled and prominently located. Responses to complaints should be timely.
- 2.35** Prisoners should be able to consult their lawyers in private. (Repeated recommendation 2.42)

Good practice

- 2.36** *A monthly surgery on each house unit afforded prisoners the opportunity to meet and discuss issues with the head of residence.*

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 characteristics¹³ 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

- 2.37** Equality work had recently been prioritised with the appointment of a dedicated manager who was assisted by an equality officer with some support from an administrator. The action plan was reasonable. The team were driven and enthusiastic but the strategic approach had yet to be embedded.
- 2.38** Equality meetings usually took place every two months, although there had been a four-month gap during the summer of 2018. The meetings were not chaired by the governor or his deputy, which was disappointing. Meetings tended to be discursive rather than identifying inequality and implementing actions. Helpful local monitoring data informed these meetings, which was promising. However, there was no analysis to identify over-representation of minority groups in key areas like segregation, complaints, the use of force and adjudications, nor was there evidence of corrective action to address disparities in treatment.
- 2.39** The number of reported incidents of discrimination remained low compared to similar prisons. Twenty discrimination incident report forms (DIRFs) had been submitted in the 12 months to September 2018. Access to the process for non-English speakers required improvement. Blank DIRF forms in other languages were not freely available on wings and had to be requested. None of the DIRFs submitted in the 12 months was in a foreign language and the equality peer worker told us he had never been asked to print a DIRF in another language.

¹³ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

- 2.40** Most incidents related to discrimination based on race or nationality. The concerns of prisoners and staff were taken seriously. The quality of investigations was very poor and sometimes the concerned parties were not even interviewed. Responses were typically months late and sometimes dismissive in tone. Quality assurance by a regional manager had identified all these failings. The new equality manager had made good efforts to start reforming the DIRF process but it was too early for change to be effected.
- 2.41** Not all protected groups had been identified so that support could be targeted. Our survey suggested that groups like Gypsy, Roma and Travellers were under-represented in the prison's own data. The equality team did not have a definitive list of men with disabilities. Crucially for a foreign national prison, nobody was able to tell us the exact number of non-English speakers.
- 2.42** An excellent group of well supported equality peer workers were active around the prison. They gathered data by interviewing all new arrivals, which meant that prisoners were unable to disclose protected characteristics in confidence.

Recommendations

- 2.43** **Local data should be routinely analysed to identify unfair treatment of protected groups in key areas, and corrective action should be taken to address inequality.**
- 2.44** **Investigations into discrimination incidents should be timely and comprehensive and subject to robust independent quality assurance.**
- 2.45** **Prisoners should be able to disclose their protected characteristics in confidence.**

Protected characteristics

- 2.46** Overall there was not enough provision for protected groups. There was little involvement by community organisations and, although consultation with minority groups had started to improve recently, it was still sporadic.
- 2.47** Black and minority ethnic prisoners made up 51% of the population. In our groups, their concerns focused on their treatment as foreign nationals rather than their ethnicity, but the issues raised in DIRFs suggested that managers needed to take complaints of racism seriously. There had been a recent well-received celebration of Black History Month. No support was in place for prisoners from a Gypsy, Roma and Traveller background.
- 2.48** Muslim men comprised a third of the population. They responded significantly more negatively in several areas of our survey. In our survey, 17% of Muslim prisoners said they had spent time in segregation compared with 3% of non-Muslim prisoners. A faith forum was due to take place during the inspection, but otherwise there was little in place and more work was needed to monitor outcomes for this group.
- 2.49** The exclusively foreign national population were not always well served. Many felt that the palpable lack of investment at Maidstone reflected their status as prisoners potentially facing deportation. Complaint forms and other important documents had been translated, but these were often only held by staff electronically, which was frustrating. Little signposting or information was readily available on wings in the most common foreign languages to tell prisoners how to complete basic tasks. Simple steps, like a notice welcoming men to the induction wing in different languages, were missing. Telephone interpreting was not always

used for sensitive interviews, for example for new arrivals in reception or during ACCT¹⁴ reviews. There remained an over-reliance on using other prisoners to interpret. Access to independent advice on immigration matters was limited to the Citizens' Advice worker. No Home Office surgeries took place on the wings.

- 2.50** We were not confident that all disabilities were identified, but we found no unmet need. Evacuation plans for men who had been identified were good and up to date, but there were no care plans. There was no formal buddy support scheme but the need was low. Two adapted cells were available for prisoners with disabilities.
- 2.51** No transgender prisoners were held at the time of the inspection. A few men had identified as gay or bisexual, but there was no formal support for them. One man we spoke to was living openly on his wing with no serious problems, which was encouraging.
- 2.52** The population was predominantly young, with nearly 40% aged under 30. Despite this, there was no dedicated provision for them, and the PE facilities typically valued by this group had been allowed to decline (see paragraph 3.6). Provision for the over 50s, who only made up 8% of the population, was better. Retired prisoners were unlocked during the working day and had access to a dedicated library session. There was a class for older prisoners in the gym.
- 2.53** Our survey suggested a significant veteran population, not all of whom had been identified by the prison. There was no engagement with community organisations to support this group.

Recommendations

- 2.54** **Material in the most common foreign languages should be freely available and well signposted across the prison.**
- 2.55** **Telephone interpreting should always be used for sensitive and confidential interviews.**

Faith and religion

- 2.56** In our survey, 93% of prisoners said they had a religion, an unusually high number. Facilities for worship were poor. The fabric of the chapel had continued to deteriorate and significant investment was required to restore the windows and roof which leaked (see main recommendation S41). The multi-faith room was drab, bare and musty with no ablution facilities. There had been gaps in staffing, but the newly arrived managing chaplain had now successfully recruited permanent Roman Catholic and Muslim chaplains.
- 2.57** Despite these challenges, the chaplaincy had maintained excellent attendance at corporate worship. About 120 prisoners regularly attended Friday prayers and about 80 went to the weekly Christian service. Most faiths were well catered for, often by sessional chaplains, but about 50 men from the different Orthodox faiths lacked any dedicated provision and had to make use of the Roman Catholic mass.
- 2.58** Wider faith provision, beyond worship and study classes, was too limited. The official prison visitor scheme was not well used (see paragraph 4.1). Significantly, there was no routine, systematic involvement by the chaplaincy to help men make contact with faith communities in their home countries when they faced deportation. However, the chaplaincy saw all

¹⁴ Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

prisoners within 24 hours of arrival and had good involvement in ACCT processes, as two chaplains were ACCT assessors.

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.

2.59 The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)¹ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. A number of areas have been identified that require improvement with subsequent notices issued by the CQC which have been detailed within Appendix III of this report.

Strategy, clinical governance and partnerships

- 2.60** Oxleas NHS Foundation Trust provided primary care and mental health services. The service included GP provision (Shepway Medical Centre), optometry (John Rose) and podiatry (Premier Healthcare). Dental services were separately commissioned by Kent Community Health NHS Foundation Trust and substance misuse services were contracted to the Forward Trust.
- 2.61** A review of the health needs assessment had been completed in March 2017 which had informed the most recent retendering process. Contract management meetings took place with commissioners quarterly and attendance was good. A local quality board met every two months but lacked appropriate reports, particularly audits and shared risks.
- 2.62** There was no regular clinical audit schedule for primary care managers to monitor the quality and safety of services. During the previous 12 months, 48 health care incidents had been reported, but these were not reviewed at the quality board or learning disseminated to staff.
- 2.63** Leadership across the services was stable, although separate contracts and leadership roles affected cross-disciplinary integration and strategic oversight. Since the new contract had started in April 2018, health care staff were on site from 7.30am to 7.30pm. Staffing levels were good in all areas except primary care where four vacancies were covered by temporary staff. This affected the planning of regular clinics. Access to supervision had improved and most health staff received regular recorded supervision. Compliance with mandatory training was good, and a recent training need analysis had informed staff development. Regular formal team meetings took place in most services but not primary care.
- 2.64** Service improvements were evident from patient consultation processes and access to most clinics was equitable except for dentistry and long-term conditions. The interactions that we observed between staff and prisoners were respectful and caring.
- 2.65** In spite of a previous recommendation, there was still no separate confidential health care complaints process. Most prisoners used prison non-confidential complaint forms and boxes. Responses were returned within the target of 10 days. Responses that we examined were

appropriate and reflected a duty of candour. Not all providers reviewed learning from complaints.

- 2.66** The health care environment was challenging for the maintenance of infection control measures, although cleaning staff were working hard to maintain hygiene levels. The primary care team had an action plan for improving infection, prevention and control arrangements and the health care room in reception had been fully refurbished.
- 2.67** All health care staff and 33 prison staff were trained in emergency responses. Not all custodial managers were trained in first aid at work but there was a plan to rectify this. Staff understood the code system to call for assistance in medical emergencies and the need for ambulances to be requested promptly. An emergency bag in health care was regularly checked but did not contain a hand suction pump or standard emergency drugs such as naloxone, aspirin, salbutamol, glucagon or rectal diazepam/buccal midazolam. This was raised with the health care team. An automated external defibrillator in health care was in good working order. Each wing, reception and the segregation unit also had a prison defibrillator in an easily identifiable alarmed cupboard which enabled rapid access. These were checked by health care staff.

Recommendations

- 2.68** **Regular clinical audits should be completed to assess and monitor the quality and safety of services.**
- 2.69** **A separate confidential health care complaints process should be clearly advertised and available on the wings.**
- 2.70** **Cross-disciplinary integration and strategic oversight should be implemented to achieve integrated working and stronger governance arrangements.**
- 2.71** **Health care clinical areas should be refurbished to meet infection control standards.**
- 2.72** **Emergency drugs and equipment should be in accordance with resuscitation council guidelines.**

Good practice

- 2.73** *Each wing, reception and the segregation unit had a defibrillator in an easily identifiable alarmed cupboard which enabled rapid access.*

Promoting health and well-being

- 2.74** The prison lacked an overall health promotion and well-being strategy and action group. The associate practitioners had recently been allocated to lead on health promotion activities and events. The range of health promotion literature in the library was impressive, but material displayed in waiting rooms and wings had not been translated into other languages. The gym offered remedial activity sessions to meet specific needs. Prisoners could access a reasonable range of smoking cessation support. There were no prisoner health trainers to offer support and information on healthy lifestyles. Prisoners could easily access screening and immunisation programmes, and there was good provision of sexual health services. Barrier

protection was available on request but not offered before release. Communicable diseases and outbreaks were well managed, but no local policies were in place.

Recommendation

- 2.75 There should be an overarching health promotion strategy and multidisciplinary action group to inform activities.**

Primary care and inpatient services

- 2.76** New arrivals received a prompt reception health screen from a nurse using a national template to identify immediate health needs, including mental health and substance misuse. Nurses used interpreting services to communicate with new arrivals. Oxleas and the commissioners had agreed to combine the secondary health screen and reception process which meant that men were not routinely seen again by a health professional. Access to health services for men who requested help was generally good.
- 2.77** GPs ran clinics every weekday morning. The waiting time for a routine GP appointment was one day, with urgent appointments available on the same day. Out-of-hours support was obtained through the NHS 111 system. Men could also receive prompt support from nurses, for example at special sickness and nurse triage clinics. However, the team struggled to implement a regular clinic schedule because of staff vacancies.
- 2.78** A primary care manager was responsible for managing all long-term conditions, supported by the GPs. However, there were no regular specialist nurse-led clinics to review men with conditions such as epilepsy and diabetes. Not all men with long-term conditions were reviewed promptly when their clinical history indicated ongoing need. There were still no care plans in place to inform ongoing care.
- 2.79** A broad range of visiting specialist services were available, including an optician, podiatrist and physiotherapist. Waiting times for these services were not excessive. The primary care team had developed good links with community specialist services, and visiting specialists delivered monthly HIV and hepatitis C clinics.
- 2.80** External hospital appointments were reasonably well managed with good support from prison staff.
- 2.81** Arrangements for release were appropriate, and the introduction of a discharge coordinator was a positive initiative. Men received adequate levels of prescribed medicines and could access copies of their clinical records.

Recommendation

- 2.82 Prisoners with long-term health conditions should receive regular reviews by appropriately trained staff, informed by an evidence-based care plan.**

Social care

- 2.83** Health care staff used the national reception screening tool to identify social care needs, The local authority had undertaken four assessments in the previous 12 months but there were no care plans in place.

- 2.84** Kent County Council had published a comprehensive regional policy for the management of prisoners who required social care. However, there was no local memorandum of understanding and a lack of understanding in the prison about social care and who was responsible for social care packages.

Recommendation

- 2.85** **There should be a whole-prison approach to improving the understanding and implementation of the social care pathway supported by a local memorandum of understanding.**

Mental health care

- 2.86** Mental health services were delivered on weekdays from 8am to 4pm. The service included interventions for patients with mild to moderate mental health needs and those with enduring and complex problems. The stepped care model was used to delineate between levels of care.
- 2.87** The mental health team had a regional and local structure and was fully staffed with a complement of three full-time mental health nurses, a support time and recovery worker (STAR), a psychiatrist for one session a week and a counsellor two days a week. The counsellor also delivered cognitive behavioural therapy and group work. The regional structure enabled access to a forensic and clinical psychologist for complex cases and trauma.
- 2.88** The mental health team was notified electronically of prisoners arriving in reception who had been prescribed medicines for mental health conditions. These prisoners were offered a physical wellbeing assessment. Prisoners could self-refer or be referred by staff. Initial risk assessments for all referrals were carried out within 10 days unless they were urgent. Discharge planning was undertaken for all prisoners being released (see paragraph 2.81).
- 2.89** The mental health team regularly attended the segregation unit to review all segregated prisoners. They also attended the ACCT reviews of prisoners on their caseload.
- 2.90** Primary health care and substance misuse service representatives did not attend reviews for complex cases.
- 2.91** During the previous six months, there had been four health care complaints and six compliments. The complaints process was not confidential (see paragraph 2.65).
- 2.92** One patient had been awaiting transfer to a secondary care mental health unit for more than four weeks. Excessive waits for transfers were escalated with commissioners each week.

Recommendation

- 2.93** **Transfers to hospital under the Mental Health Act should take place within Department of Health transfer target timescales.**

Substance use treatment¹⁵

- 2.94** The drug and alcohol strategy was underdeveloped. Designated meetings had only started in September 2018, and there was still no integration of supply and demand reduction initiatives (see paragraph 1.44).
- 2.95** The Forward Trust delivered clinical and psychosocial substance misuse services. A robust governance framework underpinned service delivery. The service was well advertised, information leaflets had been translated into many languages, and a peer worker contributed to induction.
- 2.96** Interventions had been adapted to meet the needs of the population and focused on peer support, mutual aid and well-being. At the time of the inspection, 71 prisoners were engaging with the team. A regular service user forum informed service promotion and provision.
- 2.97** Clinical need was low and patients requiring opiate substitute treatment (OST) were well managed. At the time of the inspection, eight patients were prescribed methadone or buprenorphine, mostly on a reducing basis. Substance misuse services were integrated and the prescriber, together with drug and alcohol practitioners, undertook regular clinical reviews. Health care services were not well integrated for prisoners with dual diagnosis or multiple pathologies.
- 2.98** A gate had been installed to the treatment room for OST administration, but the supervision of medicines remained inappropriate and unsafe.
- 2.99** Preparation for release included the provision of harm reduction information and naloxone training.

Recommendations

- 2.100 Methadone should be supplied in an environment that ensures the safety and security of staff.** (Repeated recommendation 2.80)
- 2.101 Prisoners with dual diagnosis or multiple pathologies should receive integrated care.**

Medicines optimisation and pharmacy services

- 2.102** Medicines were dispensed by the registered pharmacist at HMP Rochester and administered from pharmacy rooms in the health care centre by an on-site pharmacy technician and nurses. Men received supervised medication at 8.15am and 5pm daily and collected repeat medication at 11.30am.
- 2.103** We found that medicine administration was safe and well supervised by prison staff. However, no officer was present during the administration of controlled drugs, including methadone.
- 2.104** The pharmacy was well managed, and medicines stored safely. Some staff told us that a cabinet used to store prescription medication was not routinely locked, and managers addressed this during the inspection. Fridge temperatures were recorded daily and were within the safe range. The audit trail for the controlled drugs cabinet keys had improved

¹⁵ In the previous report substance use treatment was included within safety, while reintegration planning for drugs and alcohol came under rehabilitation and release planning (previously resettlement).

since our last inspection. Although there was a safe process for disposing of medicines, some staff required further guidance on recording this.

- 2.105** Most men received their prescribed medication in possession, which was informed by a standardised risk assessment during reception screening. Men were provided with secure in-cell storage for their medication. Men could order basic medicines such as paracetamol through the prison canteen.
- 2.106** Health staff could administer a reasonable range of medicines without a prescription, supported by up-to-date policies and patient group directions¹⁶. However, it was not clear that all staff responsible for administering medication had recently reviewed and confirmed their understanding of these documents.
- 2.107** There were no regular pharmacy-led clinics, but the pharmacy technician and a visiting pharmacist provided individual support for men who required additional information.
- 2.108** Oxleas had good oversight of medicines management through robust governance processes and was developing links with the prison to improve information sharing. A regular medicines management meeting was well attended.
- 2.109** Men being discharged from the prison were given an adequate supply of medication.

Recommendation

- 2.110 All health staff responsible for administering medication should review and sign any relevant policies and patient group directions.**

Dental services and oral health

- 2.111** Kent Community Health NHS Foundation Trust was directly commissioned to deliver a range of treatments equivalent to the community. A dentist held at least three sessions a week, supported by dental nurses.
- 2.112** Access to dental care was poor. Men waited up to 25 weeks for a routine dental appointment, which was unacceptable. Although the dental nurse made efforts to triage patients experiencing pain, no regular emergency appointments were available, and men often acquired pain relief through primary care services. Local performance reports were inaccurate and service managers were not aware of the actual waiting times. The provider had started to identify ways of working more closely with the prison to improve access to the service, including an additional triage clinic. However, improved service oversight was required to ensure that these plans were embedded and access improved.
- 2.113** Men who could see the dentist received an appropriate range of treatments. The dental suite met current infection control standards, and equipment was well maintained and certificated. All decontamination processes took place off site. Staff had access to an appropriate range of policies and procedures. Clinical records were detailed, and relevant information was shared more widely via SystemOne (electronic case notes). Although oral health promotion was evident in records that we reviewed, it was not integrated into prison-wide health promotion activities.

¹⁶ Authorise appropriate health care professionals to supply and administer prescription-only medicine.

Recommendation

2.114 Prisoners should have access to routine dental appointments within six weeks.
(Repeated recommendation 2.86)

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 Prisoners had a reliable weekday regime and could spend a good period out of their cells. Fully employed prisoners could expect about 10 hours out of their cell each day, part-time prisoners about seven hours and unemployed prisoners about four hours. During our roll checks, 27% of the population were locked up, similar to the previous inspection. Retired and disabled prisoners and immigration detainees were now unlocked during the working day, which was an improvement. The weekend regime was frequently still subject to curtailment because of staffing pressures.
- 3.2 Prisoners had good access to outside exercise at lunchtimes and, while daylight remained, in the evenings. In summer, prisoners could have as much as three hours' exercise a day. They could move freely between the yard and the wing. The lack of physical training equipment in exercise yards was a missed opportunity given the severely limited PE facilities (see paragraph 3.6). The weekly singing group was a very positive development.
- 3.3 Men had limited but reliable access to the library. Attendance was still restricted to a half-hour slot which interrupted the working day. The library was not open during the evenings or at weekends, so there was little opportunity to use it as a resource or for study.
- 3.4 Two-thirds of the population were registered as borrowers in the library. In our survey, 32% of prisoners against the comparator of 61% said that the library stocked a wide enough range of material to meet their needs. Although there was much stock in foreign languages, little was available for Albanian, Romanian and Polish prisoners, the most numerous nationalities who comprised about a third of the population. Nothing was displayed in different languages to welcome prisoners. There was no analysis of attendance to identify which protected groups were using the service and to drive improvement.
- 3.5 Efforts to promote literacy were very good. The Shannon Trust¹⁷ was active and 28 prisoners were currently being supported by mentors. There was a regular book club in the library, and the prison had won an award for the number of participants completing the Reading Ahead scheme. An ESOL (English for speakers of other languages) variation on this scheme had also been piloted for the last two years. The supply of easy read books was very good.
- 3.6 Physical education was severely limited by a lack of investment. The sports hall, leaking and in decline at the previous inspection, had now closed and was derelict (see main recommendation S41). The enthusiastic PE staff were unable to offer any indoor team sports which affected prisoners' ability to remain active. The only remaining indoor facility, the gym (containing weights and cardiovascular equipment), was also deteriorating, with buckets in place to catch water. The changing facilities consisted of a small room with three showers,

¹⁷ Provides peer-mentored reading plan resources and training to prisons.

which was inadequate. The astroturf pitch remained in use, but the goal posts had rusted and changing for outdoor team sports was very difficult. Troops from the local barracks continued to visit to play football against the prisoners, which was positive.

- 3.7** In our survey, 78% of prisoners against the comparator of 51% said they went to the gym twice a week. About 60% of the population accessed PE. With no sports hall, the gym had to operate at full capacity. It had been risk assessed for 30 prisoners but felt very crowded. There were sessions for the over-40s and for prisoners referred by the GP. There was no analysis of which protected groups were using the gym. Prisoners were still not able to access vocational qualifications in PE.

Recommendations

- 3.8 All prisoners should be unlocked for both the morning and afternoon at weekends.** (Repeated recommendation 3.4)
- 3.9 Attendance at the library and gym should be monitored and analysed consistently to develop provision.**

Education, skills and work activities (Ofsted)¹⁸

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.¹⁹

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

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

Management of education, skills and work

- 3.11** Prison leaders and managers had not improved most aspects of the education, skills and work provision since the previous inspection. They had only achieved one of the seven recommendations for improvement. Hardly any of the apparently well-advanced

¹⁸ 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.

¹⁹ In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

development and improvement plans noted at the previous inspection had been realised. Although prisoners' attendance at sessions had improved over the past three years, it was still not consistently high. Prison managers had worked in partnership with the education provider reasonably well, but had to deal with the disruptive impact of multiple changes in provider management. The education and skills provision delivered by Novus was inadequate.

- 3.12** Leaders and managers had not recognised that their quality improvement arrangements were ineffective. They used the quality improvement group (QIG) primarily as a forum to discuss operational matters and did not focus systematically on tackling the weaknesses in the provision. Although attendance was good, QIG meetings were not held frequently enough and the group had only met twice during 2018. Prison and education managers' self-assessment reports were inaccurate resulting in incomplete quality action planning. The range of data on the performance of the provision had been enhanced, but analysis and use of the data for performance monitoring, management and action planning were poor.
- 3.13** Prison managers were very enthusiastic about improvement and used a small amount of discretionary funding well to fund new courses. However, most of their most recent initiatives were at very early stages of implementation or only involved small numbers of prisoners. For example, an innovative course was offered in visual media but only two of the four prisoners who had started were still attending. A well-run and useful digital business enterprise course involved just six prisoners.
- 3.14** Managers had reduced the number of full- and part-time activity places since the previous inspection, primarily to reduce cost over-runs. There were now only enough activity places for about three-quarters of the population. The great majority of these places involved undemanding activity at best. Labour allocation board staff allocated many prisoners effectively but routinely allocated too many prisoners to wholly unproductive work activities. Managers had known for a long time that the work available was mostly menial and repetitive and was not developing prisoners' skills, but they had not introduced more productive alternatives. A tutor was developing a strategy to introduce a new work-based qualification, but this required significant management and staff support and resources to move beyond the planning stage.
- 3.15** Prison and education managers had not conducted a thorough and accurate training needs analysis of the population, nor implemented a much-needed full curriculum review (see main recommendation S44). The range of provision did not meet the skills development needs of the substantial proportion of more able and experienced prisoners. The classroom-based education and vocational training offered were narrow. The great majority of qualification-based courses and vocational training were only offered at level 1 and did not equip prisoners with qualifications that would gain them employment. The level 2 qualification in brickwork, which was recognised by construction employers as a gateway to employment, had not run for about 12 months. The two accredited courses operating in the gardens and catering only involved 12 prisoners. Far too many prisoners told us they did not value the education, skills and work currently offered, nor did they feel valued by the prison.
- 3.16** A lack of cover for staff absences and vacancies resulted in the cancellation of too many education and vocational training classes. Four planned sessions were not running at the time of the inspection. Neither of the level 1 vocational training courses in brickwork and construction multi-skills had run during the previous month or seemed likely to do so for several more weeks.
- 3.17** New careers advice and employment guidance arrangements were at an early stage of development. The main resettlement course offered was completely ineffective. Managers had almost no information on prisoners' outcomes following release, including to education, training or employment.

- 3.18** The learner voice forum, run by prisoners, was designed to hold education, skills and work managers to account, but its impact was limited. For example, forum delegates had long been expressing concerns about too many session cancellations, too few vocational training courses or qualifications (for example in tailoring), and a lack of distance learning opportunities and support.
- 3.19** Pay rates for education, skills and work were low but equitable and did not act as a disincentive to prisoners' participation.

Recommendations

- 3.20** Leaders should ensure that the available data are analysed in depth and form the basis of effective performance management and monitoring.
- 3.21** Staff absence or vacancies should be covered so that course cancellations are the exception.
- 3.22** Managers should ensure that appropriate and effective resettlement courses are available to all prisoners nearing release.
- 3.23** Managers should gather information on prisoners' entry to employment, training or education after release.

Quality of provision

- 3.24** Managers had long been allowing far too many prisoners to attend work activities on and off the wings where there was routinely very little or no work for them to do. Such activities formed about 80% of the provision. Consequently, these allocated prisoners developed no new skills and had minimal supervision. Prisoners were even being allocated to an activity, recycling boilers, which was not operating.
- 3.25** Prison instructors demonstrated no interest in developing a culture of teaching and learning in most industry workshops. The primary purpose of workshop activities was income generation for the prison. Between a third and two-thirds of prisoners in most workshops regularly sat around chatting, playing cards or dominoes for the duration of the session. Sanitary conditions in the print workshop were deplorable, including disgusting broken fixtures and an active rat hole a few metres from where prisoners were seated (see paragraph 2.14).
- 3.26** Teachers were experienced but teaching and learning in education and training sessions were not consistently good enough. Most teachers and vocational tutors used questioning effectively to check learning. However, the better practice of some teachers was not shared effectively to raise the standards of others. For example, a well-established peer mentoring scheme supported some prisoners and teachers effectively in classroom and training sessions, but not all teachers and tutors planned how best to use the mentors, too often leaving them unoccupied.
- 3.27** Not all teachers identified prisoners' personal development targets and planned accordingly. Too few education teachers planned or delivered lessons which inspired or excited prisoners. Too many sessions were dull and mundane. The pace of too many lessons was slow. Not all teachers checked thoroughly that prisoners understood a topic before moving to the next.

- 3.28** Too many prisoners did not make good progress during sessions compared to their starting points. Demands on the garden instructor's time prevented prisoners on the horticulture course from receiving enough instruction and they were making slow progress. Although teachers monitored progress closely, neither prison nor education managers had a clear idea of prisoners' progress, including whether they would complete a course within the planned timescale or before leaving the prison.
- 3.29** Too many teachers set targets for prisoners in education which focused on the completion of tasks rather than on the development of skills and not all prisoners were clear about how to improve. Feedback by vocational tutors on assessed work and in individual learning plans offered encouragement and praise but no suggestion of how prisoners could improve.
- 3.30** Teachers in ESOL lessons did not always correct errors in prisoners' spoken English. Vocational tutors did not reinforce English and mathematics skills in workshop activities or seek opportunities to reinforce the use and application of accurate language skills and to apply the principles of mathematics.
- 3.31** Teachers usually managed prisoners' behaviour in classrooms well, but in one session that we observed prisoners' behaviour was poor and classroom management chaotic.
- 3.32** Specialist staff identified prisoners with a declared learning disability or difficulty and planned well to provide appropriate support. Prisoners in the segregation unit were given useful in-cell packs to continue their learning.
- 3.33** Most prisoners who attended education and vocational sessions were involved in their learning and their work was of a standard appropriate to the level of study. Most tutors supported learning in vocational training well. The good vocational facilities and resources gave prisoners useful experience of different equipment and techniques. Punctuality at sessions was generally good. Following the arrival of new tutors, the information technology (IT) resources in the virtual campus²⁰ were being used increasingly well to develop prisoners' IT skills, run initial assessments and produce CVs. Despite this, the virtual campus was not used for its primary purpose.

Recommendation

- 3.34** **Leaders and managers should ensure that the quality of teaching and learning improves rapidly and becomes at least good.**

Personal development and behaviour

- 3.35** Prisoners' behaviour in sessions was mostly good. They were polite and respectful to staff and fellow prisoners and supported each other's learning well. Prisoners felt safe in education and vocational training sessions. Prisoners involved in catering and gardening took pride in their work and produced work to a good, often industry, standard.
- 3.36** Prisoners did not feel valued by most work instructors or the prison generally (see paragraph 3.15). The great majority of prisoners working on and off wing did not develop their personal, behavioural or employability skills.
- 3.37** Too many prisoners who were taking or had taken education courses did not think they had made any substantial progress while learning.

²⁰ Prisoner access to community education, training and employment opportunities via the internet.

Recommendations

- 3.38** Leaders and managers should ensure that prisoners have good opportunities to develop their personal and employment skills and behaviour.
- 3.39** Leaders and managers should ensure that prisoners value and participate fully in learning, skills and work and see it as the main route to rehabilitation.

Outcomes and achievements

- 3.40** During 2017 to 2018, a high proportion of prisoners who started information and communications technology and construction skills qualifications completed and achieved them. In too many cases, between a quarter and a third of prisoners who started qualifications at a range of levels in ESOL, functional English and mathematics did not complete and achieve their qualification. Those who did complete the course usually achieved their qualification.
- 3.41** Attainment rates were not high enough on lower level ESOL, higher-level English and level 1 mathematics courses. Prisoners from a few minority ethnic groups did not achieve as well as their peers.
- 3.42** Too few prisoners achieved any qualifications or developed any new employability skills for work and most left the prison no better qualified or employable than when they arrived.

Recommendations

- 3.43** Leaders and managers should ensure that the great majority of prisoners on accredited courses start, complete and achieve their qualification.
- 3.44** Leaders and managers should ensure that prisoners leave the prison better qualified and more employable than when they arrived.

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 Work to support family ties had improved recently but was not yet fully embedded or sufficiently focused on the needs of the foreign national population. About 20% of the population had never had a social visit, but several schemes designed to address this were underused. Only five prisoners had used the chaplaincy's official prison visitor scheme in 2018, only 22 were registered to use the prisoner voicemail and only one prisoner had used accumulated visits in the previous six months. The assisted visits scheme was advertised but hardly used. Storybook Dads²¹ was not well used either, potentially because it was not offered in foreign languages.
- 4.2 The 'email a prisoner' scheme was popular and well managed, with over 200 emails received each month. A substantial number of foreign national prisoners who had received no social visits during the preceding month were given a free five-minute telephone call to their home country. This was well managed. Some telephones on wings were broken or lacked privacy.
- 4.3 Only about a third of prisoners received a social visit in any given month. Maidstone was a national resource, so even families living in the UK often had long distances to travel. Visits were offered on five afternoons a week.
- 4.4 Visits arrangements were adequate. Spurgeons had taken over as the children and families provider within the last year and had reopened the visitors' centre after a period of neglect. It remained too basic, but at least offered a toilet, new seating and lockers. The visits process was mostly well managed but the tagging of babies and very small children with identifying paper bracelets was disproportionate.
- 4.5 The visits hall had new free-standing seating. Prisoners had to return to their wing if they wanted to use the toilet. The children's play area was minimal and there was no play worker. The café was good.
- 4.6 The recent addition of a full-time family worker was very positive and there were also well-attended monthly family days, which was an improvement. DVD Dads, a separate initiative to Storybook Dads using animation, had seen some encouraging results. There were advanced plans for two relationship courses and the introduction of goodbye visits for men being deported.

²¹ An independent, registered charity that helps prisoners to record a story for their children to listen to at home.

Recommendation

- 4.7 The various schemes designed to support prisoners who receive few or no social visits should be actively promoted in the most popular languages and their use monitored.**

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.

- 4.8** Management of resettlement had improved since the previous inspection: there was an up-to-date reducing reoffending strategy and offender management policy. A needs analysis had recently been carried out, using two prisoner surveys and summary criminogenic needs information from OASys (offender assessment system). The monthly reducing reoffending meeting was attended by all relevant stakeholders and effectively coordinated the seven main resettlement pathways. There were still major gaps in meeting rehabilitation needs, but a sound framework was now in place, reflecting the high-level guidance published in the recent national model of delivery for foreign national prisons. The offender management unit (OMU) and the resettlement team were separately managed, which hampered the integration of rehabilitation services. Despite this, joint working between the OMU and staff carrying out resettlement activity was much better than at the previous inspection. Further progress was needed in creating a clear, comprehensive and intuitive prisoner pathway towards rehabilitation and resettlement. Many of the building blocks were in place, but some were at an experimental and fragile stage.
- 4.9** The offender supervisors comprised three probation staff and five band 4 prison officers. Probation staff managed the higher-risk cases, with a few exceptions. Caseloads were high, up to 90 for uniformed staff, but were reducing as resources increased. Uniformed staff had been deployed to other duties for 21% of their time over the previous three months and, at the time of inspection, offender management still suffered from severe understaffing. There were prospects of more manageable caseloads and less cross-deployment with the implementation from January 2019 of the offender management in custody model²².
- 4.10** The expected level of contact between a prisoner and his offender supervisor was not defined, and many prisoners said they never saw their supervisor nor were they told how much contact to expect. Almost all prisoners were visited by an offender supervisor soon after arrival. Thereafter, contacts were driven by events such as a re-categorisation review date. The OMU had a low profile in the prison, and the level of contact was inadequate.
- 4.11** The Home Office immigration enforcement team was co-located with OMU staff which facilitated good joint working. The team was below strength: at the time of inspection there were five immigration enforcement officers rather than eight and regular wing surgeries and other contact work was not taking place.
- 4.12** About a third of prisoners had been allocated at court to supervision by a community rehabilitation company (CRC), in spite of the fact that all foreign nationals sentenced to 12 months' imprisonment or more were required to be allocated to the National Probation

²² 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 gradually, from 2019.

Service (NPS). These prisoners received a lower level of service and a sample of cases showed that seven out of 10 had an OASys assessment which was well out of date. One man with a 7.5-year sentence for supply of class A drugs had an OASys assessment more than three years old. OMU staff attempted to negotiate transfers of the affected prisoners from CRC to NPS supervision, but with very limited success.

- 4.13** Probation staff checked OASys assessments carried out by prison staff. A sample that we examined showed that several assessments were returned for further work before being signed off, demonstrating a good level of quality assurance. Sentence planning was adequate within the constraints of the interventions available at the prison, and risk management plans were good. Sentence plans tended to be formulaic in content, typically containing objectives based on behaviour in custody, education, co-operation with immigration enforcement and a victim awareness workbook.
- 4.14** In our sample of cases, even prisoners with the least offender supervisor contact were engaged in work and education and had received some resettlement support. About half the prisoners did not have an up-to-date OASys and therefore no relevant sentence plan. Offender supervisors kept systematic electronic files on each prisoner which to some degree mitigated the lack of an up-to-date OASys and plan. However, the service provided through the resettlement team was generally based on self-report of needs rather than the more objective analysis provided by OASys.
- 4.15** Prisoners could apply for home detention curfew, but it was granted very rarely when an individual was of no further interest to Home Office immigration enforcement. In the last year, it had only been granted once to a man who was very ill.
- 4.16** At the time of the inspection, three prisoners were serving life sentences and one an indeterminate sentence for public protection. Appropriate support was given to these men by probation staff. Two parole reviews had taken place in the previous 12 months.

Public protection

- 4.17** OMU staff checked appropriately that the originating prison had carried out correctly the necessary checks for child protection and harassment orders. The interdepartmental risk management team met monthly, but, other than the OMU, attendance by other departments was infrequent and the security department had been represented once in the previous six months.
- 4.18** Multi-agency public protection arrangements (MAPPA) were carried out reasonably effectively. In many cases the prison was not informed that a MAPPA level had been set at a date six months before release; the prison was chasing these notifications but the system was still falling short. Similarly, licence conditions and confirmed release addresses were often received from community probation services very late.

Recommendations

- 4.19** Immigration caseworkers should make decisions about a prisoner's removal or release promptly to help target and maximise the effectiveness of resettlement work.
- 4.20** There should be sufficient staff in the offender management unit to undertake regular, proactive casework with all prisoners.
- 4.21** There should be sufficient Home Office immigration enforcement officers to facilitate regular, proactive casework with all prisoners.
- 4.22** Foreign national prisoners should be risk assessed for category D status, open conditions, home detention curfew and release on temporary licence through processes which give them a fair chance of achieving these forms of progression in their sentence.

Categorisation and transfers

- 4.23** Each month, 80 to 120 categorisation reviews were carried out following standard procedures. Prisoners and staff were very frustrated that procedures for re-categorisation to category D were carried out thoroughly and prisoners were invited to make written representations, but it had not been granted once in the previous three years. At the time of the inspection, four men were held in the segregation unit awaiting transfer after being recategorised from B to C. Such men usually stayed at Maidstone for about a month before being transferred.

Interventions

Expected outcomes:

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

- 4.24** Offending behaviour programmes were no longer delivered at Maidstone. A prisoner very occasionally transferred out to do a programme, for example to HMP Rochester for the Resolve programme.
- 4.25** During the year to September 2018, 539 prisoners left Maidstone and were not transferred to another prison. Eighty-one per cent of these were removed and 19% were released into the UK. The lack of programmes meant that none of these prisoners had had help with reducing the risk of reoffending while at Maidstone. In addition, 144 were transferred at the end of their sentence to an immigration removal centre.
- 4.26** Release on temporary licence was not used at all, even within the prison grounds, because of the location of the prison in the town centre.
- 4.27** The contribution of Citizens' Advice had increased to four days a week. In the last six months they had seen 170 prisoners. They had written over 1,500 letters for prisoners, 44% of which concerned financial matters and 38% legal issues other than their immigration case. They also gave advice on accommodation. All men were released from the prison on licence and accommodation issues were resolved by the OMU.

Recommendation

- 4.28** There should be a range of programmes and one-to-one offending behaviour work, including victim awareness, to meet evidenced need. (Repeated recommendation 4.44)

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.

- 4.29** The ‘Steps to the Gate’ programme had been introduced. This started during induction when a resettlement peer worker gave the prisoner a ‘passport’ booklet to complete, including needs across the seven main resettlement pathways. This had been redesigned in the light of experience and was shortly to be republished in a more accessible format. The booklet was completed with the aid of a peer worker if necessary, in the virtual campus IT centre. Men were also introduced to the valuable Tracks online toolkit which gave practical information on resettlement in 22 countries. The resettlement office made referrals on the basis of information in the booklet. Three months before release, the booklet was reviewed and followed up as appropriate, especially in relation to practical release planning issues such as accommodation. The resettlement office liaised well with the OMU in this area.
- 4.30** Hibiscus Initiatives²³ had started to deliver a one-day course on the basics of resettlement in an overseas country. This was a very welcome initiative, but not yet effective in engaging and informing the wide range of prisoners who attended the courses.
- 4.31** The immigration enforcement team were now working to a target of informing every prisoner at least 30 days before their conditional release date whether they would be released or detained at that date. The target was not being met in many cases, and many prisoners were told that they would not be released very close to the date, even a day or two before it. The number of men held at Maidstone after the end of their sentence had reduced to single figures, and most of them remained for relatively short periods.

Recommendation

- 4.32** Preparation for release should be developed into a coordinated procedure available to all prisoners, including effective provision of information to support resettlement in another country.

²³ A charity supporting foreign nationals, black and minority ethnic and refugees serving a custodial sentence, especially in preparing for release or removal.

Section 5. Summary of recommendations and good practice

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

Main recommendations

To the governor

- 5.1** Reception and first night processes should ensure that prisoners' immediate vulnerabilities, needs and risks are thoroughly assessed through a private interview with prison staff to ensure that appropriate support is offered. Additional night time checks should be undertaken on new arrivals. (S40)
- 5.2** Sufficient investment should be made to ensure that the prison provides a safe and decent environment for prisoners and facilities which are fit for purpose. (S41)
- 5.3** Leaders, managers and staff should focus relentlessly on implementing effective new continuous quality improvement arrangements which are informed by a comprehensive and accurate evaluation of all areas of weakness in education, skills and work. (S42)
- 5.4** Leaders and managers should ensure that all work activities develop prisoners' employment and personal skills and lead to qualifications and clear records of achievement. (S43)
- 5.5** Leaders and managers should implement a thorough and accurate training needs analysis of the population, use it to implement a full curriculum review and ensure that the provision of activities meets the needs of the majority of prisoners, including the more able and experienced. (S44)
- 5.6** Organisation and delivery of rehabilitation and release planning services should be integrated into a single coherent system that identifies and addresses the risks and needs of each prisoner throughout their time at Maidstone. In particular, all prisoners should have an up-to-date OASys assessment and sentence plan and should be supported and motivated by regular and meaningful contact with offender supervisors. (S45)

Recommendation

To the Home Office

- 5.7** Immigration caseworkers should make decisions about a prisoner's removal or release promptly to help target and maximise the effectiveness of resettlement work. (4.19)

Recommendation

To the Home Office and HMPPS

- 5.8** There should be sufficient staff in the offender management unit to undertake regular, proactive casework with all prisoners. (4.20)
- 5.9** There should be sufficient Home Office immigration enforcement officers to facilitate regular, proactive casework with all prisoners. (4.21)

Recommendation

To HMPPS

- 5.10** Foreign national prisoners should be risk assessed for category D status, open conditions, home detention curfew and release on temporary licence through processes which give them a fair chance of achieving these forms of progression in their sentence. (4.22)

Recommendations

To the governor

Early days in custody

- 5.11** Prisoners on escort should be given adequate toilet breaks and this should be recorded. (1.9)
- 5.12** Prisoners on the first night centre should be unlocked during the core day. (1.10)
- 5.13** The induction programme should be clear, concise and relevant and should provide all prisoners with enough knowledge to access fully services and activities at Maidstone. This should include contact with Home Office staff. (1.11)

Managing behaviour

- 5.14** Procedures to monitor perpetrators of violence or antisocial behaviour should address the underlying causes of violent and antisocial behaviour and set targets specific to the prisoner. (1.20)
- 5.15** Detailed analysis of adjudications should be carried out to identify themes or trends and to reduce the quantity of laid charges. (1.25)
- 5.16** Prison managers should review and quality assure all incidents of force, associated video footage and documentation. (1.32)
- 5.17** The special cell should be made fit for occupation or taken out of use. (1.33)
- 5.18** Good order or discipline and reintegration planning reviews should be attended by staff from relevant departments and should focus on the prisoner's individual circumstances. The prisoner should be invited to attend. (1.39)
- 5.19** Cells for prisoners requiring constant supervision should not be located in the segregation unit. (1.40, repeated recommendation 1.54)

Security

- 5.20** The strip-searching of all men leaving the prison and the handcuffing of all prisoners going to hospital should be proportionate and based on an individual risk assessment. (1.47)
- 5.21** Intelligence-led searches should be carried out quickly in all cases where a need is identified. (1.48, repeated recommendation 1.33)
- 5.22** The MDT suite should have a separate key and should only be accessible to those undertaking MDT work. (1.49)
- 5.23** The MDT suite should be sterile and conducive to forensic testing. (1.50)

- 5.24** The MDT suite holding rooms should be refurbished and heating installed. (1.51)
- 5.25** Random mandatory drug tests should be unpredictable, and suspicion and risk-based testing should be completed promptly in relevant cases. (1.52, repeated recommendation 1.34)

Safeguarding

- 5.26** ACCTs should be of a consistently good quality, ensuring that individual prisoners receive appropriate care and support. (1.59)
- 5.27** There should be a policy for the thorough investigation of all serious incidents of self-harm and action on learning points and recommendations. The policy should include implementation of recommendations in Prisons and Probation Ombudsman fatal incident reports, and these should be reviewed regularly. (1.60)
- 5.28** There should be a coherent strategy to reduce self-harm, informed by the characteristics of the population at Maidstone, and meaningful analysis of data including contributions from key partners such as health care and the Home Office. (1.61)
- 5.29** Prisoners on ACCTs should be located in the segregation unit or special accommodation only as a last resort and in exceptional circumstances. When prisoners are located in this area, defensible decisions logs should show full justification for the reasons and alternatives that have been explored. (1.62)
- 5.30** All staff should be trained in safeguarding procedures and be aware of their responsibilities. (1.64)

Staff-prisoner relationships

- 5.31** Officers should make regular, detailed and informative case note entries which comment on sentence plan progression and welfare. (2.7)

Daily life

- 5.32** All showers should be adequately ventilated and decorated. All toilets should have lids and seats and be appropriately screened. (2.15)
- 5.33** Water should be at an appropriate and consistent temperature for taking showers. (2.16)
- 5.34** Adequate laundry arrangements should be in place for all prisoners. (2.17)
- 5.35** Menus should be sufficiently varied and should be assessed for nutritional content. (2.23)
- 5.36** Meals should be served at times equivalent to those in the community. (2.24)
- 5.37** All catering equipment should be repaired quickly. (2.25)
- 5.38** Information peer workers should receive formal training with appropriate staff oversight to ensure that accurate and consistent information is provided to prisoners. (2.33)
- 5.39** Complaint forms should be available in a range of languages next to complaint boxes which are clearly labelled and prominently located. Responses to complaints should be timely. (2.34)

- 5.40** Prisoners should be able to consult their lawyers in private. (2.35, repeated recommendation 2.42)

Equality, diversity and faith

- 5.41** Local data should be routinely analysed to identify unfair treatment of protected groups in key areas, and corrective action should be taken to address inequality. (2.43)
- 5.42** Investigations into discrimination incidents should be timely and comprehensive and subject to robust independent quality assurance. (2.44)
- 5.43** Prisoners should be able to disclose their protected characteristics in confidence. (2.45)
- 5.44** Material in the most common foreign languages should be freely available and well signposted across the prison. (2.54)
- 5.45** Telephone interpreting should always be used for sensitive and confidential interviews. (2.55)

Health, well-being and social care

- 5.46** Regular clinical audits should be completed to assess and monitor the quality and safety of services. (2.68)
- 5.47** A separate confidential health care complaints process should be clearly advertised and available on the wings. (2.69)
- 5.48** Cross-disciplinary integration and strategic oversight should be implemented to achieve integrated working and stronger governance arrangements. (2.70)
- 5.49** Health care clinical areas should be refurbished to meet infection control standards. (2.71)
- 5.50** Emergency drugs and equipment should be in accordance with resuscitation council guidelines. (2.72)
- 5.51** There should be an overarching health promotion strategy and multidisciplinary action group to inform activities. (2.75)
- 5.52** Prisoners with long-term health conditions should receive regular reviews by appropriately trained staff, informed by an evidence-based care plan. (2.82)
- 5.53** There should be a whole-prison approach to improving the understanding and implementation of the social care pathway supported by a local memorandum of understanding. (2.85)
- 5.54** Transfers to hospital under the Mental Health Act should take place within Department of Health transfer target timescales. (2.93)
- 5.55** Methadone should be supplied in an environment that ensures the safety and security of staff. (2.100, repeated recommendation 2.80)
- 5.56** Prisoners with dual diagnosis or multiple pathologies should receive integrated care. (2.101)
- 5.57** All health staff responsible for administering medication should review and sign any relevant policies and patient group directions. (2.110)

- 5.58** Prisoners should have access to routine dental appointments within six weeks. (2.114, repeated recommendation 2.86)

Time out of cell

- 5.59** All prisoners should be unlocked for both the morning and afternoon at weekends. (3.8, repeated recommendation 3.4)
- 5.60** Attendance at the library and gym should be monitored and analysed consistently to develop provision. (3.9)

Education, skills and work activities

- 5.61** Leaders should ensure that the available data are analysed in depth and form the basis of effective performance management and monitoring. (3.20)
- 5.62** Staff absence or vacancies should be covered so that course cancellations are the exception. (3.21)
- 5.63** Managers should ensure that appropriate and effective resettlement courses are available to all prisoners nearing release. (3.22)
- 5.64** Managers should gather information on prisoners' entry to employment, training or education after release. (3.23)
- 5.65** Leaders and managers should ensure that the quality of teaching and learning improves rapidly and becomes at least good. (3.34)
- 5.66** Leaders and managers should ensure that prisoners have good opportunities to develop their personal and employment skills and behaviour. (3.38)
- 5.67** Leaders and managers should ensure that prisoners value and participate fully in learning, skills and work and see it as the main route to rehabilitation. (3.39)
- 5.68** Leaders and managers should ensure that the great majority of prisoners on accredited courses start, complete and achieve their qualification. (3.43)
- 5.69** Leaders and managers should ensure that prisoners leave the prison better qualified and more employable than when they arrived. (3.44)

Children and families and contact with the outside world

- 5.70** The various schemes designed to support prisoners who receive few or no social visits should be actively promoted in the most popular languages and their use monitored. (4.7)

Interventions

- 5.71** There should be a range of programmes and one-to-one offending behaviour work, including victim awareness, to meet evidenced need. (4.28, repeated recommendation 4.44)

Release planning

- 5.72** Preparation for release should be developed into a coordinated procedure available to all prisoners, including effective provision of information to support resettlement in another country. (4.32)

Examples of good practice

- 5.73** A monthly forum, co-chaired by a manager and prisoner, reviewed the application of the incentives and earned privileges scheme. Staff gave prisoners a written note immediately after positive or negative behaviour which potentially influenced their status on the scheme. Both these measures helped to ensure that the scheme operated fairly and transparently. (1.21)
- 5.74** A monthly surgery on each house unit afforded prisoners the opportunity to meet and discuss issues with the head of residence. (2.36)
- 5.75** Each wing, reception and the segregation unit had a defibrillator in an easily identifiable alarmed cupboard which enabled rapid access. (2.73)

Section 6. Appendices

Appendix I: Inspection team

Peter Clarke	Chief Inspector
Colin Carroll	Team leader
Ian Dickens	Inspector
Martyn Griffiths	Inspector
Martin Kettle	Inspector
Tamara Pattinson	Inspector
Kam Sarai	Inspector
Emma Sunley	Inspector
Jonathan Tickner	Inspector
Tania Osborne	Health and social care inspector
Sigrid Engelen	Substance misuse inspector
Tim Byrom	Care Quality Commission
Nick Crombie	Ofsted
Chris Dearnley	Ofsted
Steve Lambert	Ofsted
Suzanne Wainwright	Ofsted
Sharlene Andrew	Researcher
Becky Duffield	Researcher
Rachel Duncan	Researcher
Emma Seymour	Researcher
Joe Simmonds	Researcher
Patricia Taflan	Researcher

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 2015, prisoners were generally positive about escort staff. New arrivals received good early days support from peer workers and induction was improving, but the reception area was too small and first night processes were underdeveloped. Most prisoners were positive about their safety but violence reduction procedures were not properly implemented. Care for prisoners at risk of self-harm was generally good. Safeguarding procedures were developing well. Security was proportionate and mandatory drug testing positive rates were low, but there was little suspicion and risk-based drug testing. The incentives and earned privileges (IEP) scheme was reasonably effective. Use of force was proportionate but there was high use of an inadequate special cell and governance was poor. Segregation was not used excessively and adjudications were justified. Substance misuse services were very good. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

The prison should develop and implement its safer custody strategy, planning and processes. This should be informed by consultation with prisoners and detailed analysis of violence and self-harm data. The strategy should ensure that serious self-harm incidents and near misses are investigated, and that Home Office staff are integrated into safer custody work. (S32)

Not achieved

Recommendations

Early days experiences for prisoners should be improved through a reception area that is fit for purpose, thorough reception and first night assessments, and systematic efforts by reception staff to retrieve missing property. (1.11)

Partially achieved

Security decisions about a prisoner's access to appropriate activities should be based on an accurate risk assessment. (1.32)

Not achieved

Intelligence-led searches should be carried out quickly in all cases where a need is identified. (1.33)

Not achieved (Recommendation repeated, 1.48)

Random mandatory drug tests should be unpredictable, and suspicion and risk-based testing should be completed promptly in relevant cases. (1.34)

Not achieved (Recommendation repeated, 1.52)

Prisoners' applications for the enhanced level of the IEP scheme should be considered quickly; those on the basic level should be reviewed regularly and given individualised objectives. (1.41)

Achieved

There should be detailed analysis of adjudications and the use of force to identify themes or trends. (1.45)

Achieved

The current special accommodation cell should be taken out of use, and all uses of special accommodation should be fully recorded. (1.48)

Achieved

Segregated prisoners should have systematic reintegration and care planning and a varied regime that can support their return to normal location. (1.53)

Not achieved

Cells for prisoners requiring constant supervision should not be located in the segregation unit. (1.54)

Not achieved (Recommendation repeated, 1.40)

There should be a robust supply and reduction action plan, with time-bound objectives, to support the drug and alcohol strategy. It should be monitored and reported on regularly. (1.61)

Not achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection in 2015, the environment was generally clean and the grounds were excellent. Showers needed refurbishment and most cells had inadequately screened toilets. Staff-prisoner relationships were generally good but the personal officer scheme was ineffective and some staff lacked understanding of the foreign national population. Strategic management of diversity was poor and there had been little focus on the needs of protected groups. Professional interpreting was underused, including during confidential interviews. Faith provision was good. Complaints were not dealt with consistently well. Many prisoners had complex legal needs but there was little legal advice. Aspects of health services were good but there were still some significant shortcomings. Catering and shop provision was adequate. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

A renewed strategic focus on equality of treatment should ensure that prisoners with protected characteristics are identified and supported. There should be comprehensive equality monitoring and consultation with protected groups. Translated information should be available in a range of appropriate languages, and professional interpreting should always be used for sensitive or confidential interviews and when accuracy is important. (S43)

Not achieved

Recommendations

A programme of refurbishment should include work to ensure that all showers are adequately ventilated and decorated, and that all in-cell toilets have lids and seats. (2.5)

Not achieved

All applications should be dealt with promptly. (2.6)

Not achieved

More meaningful engagement between prisoners and staff should be facilitated through personal officer work, which can help achievement of sentence plan objectives, and staff awareness of the particular needs and concerns of a foreign national population should be increased through specific training. (2.12)

Not achieved

Prisoners should be made aware of the discrimination incident reporting system, forms should be freely available in a range of languages, boxes should be emptied regularly, and investigations should be timely. (2.19)

Not achieved

Immigration detainees should not be held in prison solely under immigration powers other than in very exceptional circumstances following risk assessments that are reviewed monthly. Reasons for holding the detainee in prison rather than an immigration removal centre should be communicated to the detainee in writing. (2.25)

Achieved

Prisoners with disabilities who need them should have regularly reviewed multidisciplinary care plans and up-to-date personal emergency evacuation plans. Adapted cells should be ready for immediate use by disabled prisoners. (2.26)

Partially achieved

Older and retired prisoners, those with a disabilities and others unable to work should be unlocked during the core day and have access to more structured activities. (2.27)

Achieved

The fabric of the chapel should be sound and the roof watertight. (2.32)

Not achieved

Complaint forms should be available in a range of languages next to complaints boxes that are clearly labelled and located out of sight of staff wing offices. (2.37)

Not achieved

Senior managers should address any recurring problems identified in the monthly complaints report. (2.38)

Achieved

Prisoners should be able to borrow an 'access to justice' laptop and to use a computer for letters and statements to support their legal cases. (2.41)

Not achieved

Prisoners should be able to consult their lawyers in private. (2.42)

Not achieved (Recommendation repeated, 2.35)

Effective clinical governance should include a comprehensive health needs assessment that informs provision, regular clinical supervision and staff training, a confidential health care complaints system, and regular record-keeping audits. (2.57)

Partially achieved

The health centre should be refurbished and all clinical areas should fully comply with infection control standards. The health care room in reception should have a working computer, access to telephone interpreting services, an alarm and a sink. (2.58)

Partially achieved

Automated external defibrillator checks should be recorded daily, and prison staff with direct prisoner contact should be trained in first aid and resuscitation, including use of the automated defibrillator. (2.59)

Achieved

Prisoners should have prompt access to all primary care services, and action should be taken to reduce non-attendance rates for all clinics. (2.70)

Achieved

There should be adequate escort arrangements for external hospital appointments to avoid unnecessary cancellations. (2.71)

Achieved

The risk assessment policy for in-possession medicines should be fully implemented and available to all health professionals involved with the patient. (2.79)

Achieved

Methadone should be supplied in an environment that ensures the safety and security of staff. (2.80)

Not achieved (Recommendation repeated, 2.100)

There should be more patient group directions to enable nurses to supply a greater range of more potent medications and to avoid unnecessary consultations with the GP. (2.81)

Achieved

Prisoners should have access to routine dental appointments within six weeks. (2.86)

Not achieved (Recommendation repeated, 2.114)

The dental surgery should have a separate decontamination room to comply fully with infection control standards. (2.87)

Not achieved

All custody officers should receive regular mental health awareness training. (2.92)

Achieved

Prisoners' meals should be adequately spaced: substantial breakfast packs should be served on the morning of consumption, lunch between noon and 1.30pm, and the evening meal between 5pm and 6.30pm. (2.95)

Not achieved

The health care team should be consulted about the provision of special diets to ensure that all prisoners receive safe and appropriate meals. (2.96)

Not achieved

Purposeful activity

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

At the last inspection in 2015, time out of cell was reasonable for most prisoners. There were weaknesses in the management of learning and skills and work. There were enough activity spaces for most of the population, but there was some underemployment and too many unchallenging wing jobs. The quality of education provision was variable and achievement levels were low in some key subjects. There was insufficient monitoring and evaluation of the quality of provision. The library was adequate but underused. PE provision was adequate. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Recommendations

All prisoners should be unlocked for both the morning and afternoon at weekends. (3.4)

Not achieved (Recommendation repeated, 3.8)

The planned vocational training programmes should be introduced, and prisoners working in PE should also be able to obtain vocational qualifications. (3.12)

Not achieved

Data should be used effectively to monitor and improve all aspects of education, training and work. (3.13)

Not achieved

The allocation of prisoners to education, training and work should reflect the priorities agreed in their sentence plans, and they should have clear, challenging and specific learning targets. (3.14)

Not achieved

Workshops should have sufficient supplies of materials and workflows to provide continuous activity for prisoners. (3.17)

Not achieved

Staff in all activity areas should actively promote and record the development of prisoners' English, mathematics, other employability-related skills and their progress on distance learning courses. (3.24)

Not achieved

Prisoners should achieve consistently high success rates on English, English for speakers of other languages and mentoring courses. (3.29)

Partially achieved

Prisoners should have better access to the library without being forced to interrupt education, work or training. (3.33)

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 2015, the role of resettlement in the prison was unclear and strategic management was poor. Prisoners had very little contact with offender supervisors and about half had no OASys (offender assessment system) assessment. There were some weaknesses in public protection work. Re-categorisation was implemented reasonably well, although there were very few transfers to open conditions. There was some provision for indeterminate sentence prisoners. The prison did not address the resettlement needs of prisoners who were removed from the UK. Visits provision was adequate but not enough was done to promote family ties. Outcomes for prisoners were poor against this healthy prison test.

Main recommendation

NOMS should resolve systemic problems with offender management and resettlement, and prison managers should ensure that the prison meets prisoners' resettlement needs before their removal or release. In particular, all prisoners should have an up-to-date OASys assessment and sentence plan, throughout which they are supported and motivated by regular and meaningful contact with offender supervisors. (S44)

Partially achieved

Recommendations

There should be an up-to-date reducing reoffending strategy, incorporating offender management and resettlement pathways, which is informed by a current needs assessment and led by a senior strategic meeting. (4.6)

Achieved

Public protection procedures from the prisoner's arrival through to discharge should be robust and timely, and inter-departmental risk management team meetings should be regular, well documented, and have sufficient input from all relevant parties, with timely follow up of actions. (4.18)

Partially achieved

Immigration caseworkers should make decisions about a prisoner's removal or release promptly, and the prison should address prisoners' identified resettlement needs, irrespective of their immigration status. (4.26)

Partially achieved

All prisoners should receive appropriate information, advice and guidance to agree accurate skills action plans that meet their resettlement needs. (4.31)

Partially achieved

The virtual campus should be used to support prisoners' search for support and employment in their countries of destination on release. (4.32)

Not achieved

Work under the children and families pathway should be informed by analysis of data on prisoner visits, family connections and self-harm triggers in ACCT documentation. (4.40)

Not achieved

There should be a family support worker, and all prisoners and their families should have access to family days, a well-promoted assisted visits scheme, and accumulated visits. (4.41)

Achieved

There should be a range of programmes and one-to-one offending behaviour work, including victim awareness, to meet evidenced need. (4.44)

Not achieved (Recommendation repeated, 4.28)

Appendix III: Care Quality Commission Requirement Notices



Requirement Notice

Provider: Kent Community Health NHS Foundation Trust

Location: Dental Department HMP Maidstone

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

Action we have told the provider to take

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

Regulation 17 – Good governance

17 - (1) Systems or processes must be established and operated effectively to ensure compliance with the requirements in this part.

17 - (2) (a) In particular to assess, monitor and improve the quality and safety of the services provided in the carrying on of the regulated activity.

How the regulation was not being met:

Management and oversight of dental services required improvement:

- Patients waited up to 25 weeks for a routine dental appointment.
- Local reporting on waiting times, and subsequent information provided to NHS England, was inaccurate. During our inspection, managers initially told us that the waiting time for routine care was approximately four to five weeks.
- Triage of the dental waiting list was not always effective. We found evidence of patients who had reported dental pain but had not been offered any support from the service after being added to the waiting list.

- No regular emergency appointments were available, and patients often acquired pain relief through primary care services.

Requirement Notices

Provider: Oxleas NHS Foundation Trust

Location: HMP Maidstone (registered as Bracton Centre Medium Secure Unit)

Location ID: RPGAB

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

Action we have told the provider to take

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

Regulation 9 – Person-centred care

9 - (1) The care and treatment of service users must
 (a) be appropriate,
 (b) meet their needs, and
 (c) reflect their preferences.

How the regulation was not being met:

Management of patients with long-term health conditions required improvement:

- Patients with long-term health conditions, such as epilepsy and diabetes, did not have personalised care plans in place to inform their on-going care.
- Not all patients arriving with long-term health conditions received a prompt initial review of this condition, or were prioritised when their clinical history indicated on-going need.
- There were no regular specialist reviews of men with long-term health conditions such as epilepsy and diabetes.

Regulation 17 – Good governance

17 - (1) Systems or processes must be established and operated effectively to ensure compliance with the requirements in this part.

17 - (2) (a) In particular to assess, monitor and improve the quality and safety of the services provided in the carrying on of the regulated activity.

How the regulation was not being met:

There was no systematic management for prisoners with long-term health conditions. The pathway for patients was unclear, and there was little evidence of patients being prioritised based on need.

There was no regular clinical audit schedule for primary health care managers to assess and monitor the quality and safety of services being provided.

Review of incidents at a local level and dissemination of learning to staff was not in place. A lack of formal staff meetings in primary care meant that an opportunity to disseminate learning to staff was missed.

Appendix IV: Photographs



Prisoner's clothing drying outside cell



Prisoner's clothing drying outside cell



Prisoner's cell



Water damage and structural defects in the chapel



The visits hall

Appendix V: Prison population profile

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

Status	18–20-year-olds	21 and over	%
Civil prisoners	0	0	0
Convicted unsentenced	0	0	0
Detainee	0	0	0
Immigration detainee	0	6	1
Indeterminate sentence	0	4	0.7
Recall	0	0	0
Remand	0	0	0
Sentenced	0	584	98.2
Unknown	0	1	0.2
Total	0	595	100

Sentence	18–20-year-olds	21 and over	%
Unsentenced	0	7	1.2
Less than six months	0	1	0.2
six months to less than 1 year	0	5	0.8
1 year to less than 2 years	0	40	6.7
2 years to less than 3 years	0	94	15.8
3 years to less than 4 years	0	116	19.5
4 years to less than 10 years		291	48.9
10 years or more and less than life	0	37	6.2
Life – non ISPP	0	3	0.7
Life – ISPP	0	1	0.2
Total	0	595	100

Age	Number of prisoners	%
Please state minimum age here:	21	
Under 21 years	0	0
21 years to 29 years	231	38.8
30 years to 39 years	184	30.9
40 years to 49 years	130	21.8
50 years to 59 years	35	5.9
60 years to 69 years	14	2.4
70 plus years	1	0.2
Please state maximum age here:	70	
Total	595	100%

Nationality	18–20-year-olds	21 and over	%
British	0	2	0.3
Foreign nationals	0	591	99.3
Not stated	0	2	0.3
Total	0	595	100

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced	0	0	0
Uncategorised sentenced	0	0	0
Category A	0	0	0
Category B	0	4	0.7
Category C	0	590	99.2
Category D	0	0	0
Unclassified	0	1	0.2
Total	0	595	100%

Ethnicity	18–20-year-olds	21 and over	%
White	0	291	48.9
British	0	6	1.0
Irish	0	2	0.3
Gypsy/Irish Traveller	0	0	0
Other white	0	283	47.6
Mixed	0	27	4.5
White and black Caribbean	0	5	0.8
White and black African	0	5	0.8
White and Asian	0	3	0.5
Other mixed	0	14	2.4
Asian or Asian British	0	76	12.8
Indian	0	21	3.5
Pakistani	0	8	1.3
Bangladeshi	0	8	1.3
Chinese	0	1	0.2
Other Asian	0	38	6.4
Black or black British	0	144	24.2
Caribbean	0	36	6.1
African	0	78	13.1
Other black	0	30	5
Other ethnic group	0	55	9.2
Arab	0	49	8.2
Other ethnic group	0	6	1
Not stated	0	2	0.3
Total	0	595	100

Religion	18–20-year-olds	21 and over	%
Baptist	0	0	0
Church of England	0	30	5
Roman Catholic	0	140	23.5
Other Christian denominations	0	153	25.7
Muslim	0	190	31.9
Sikh	0	9	1.5
Hindu	0	11	1.8
Buddhist	0	12	2
Jewish	0	1	0.2
Other	0	17	2.9
No religion	0	31	5.2
Not stated	0	1	0.2
Total	0	595	100

Sentenced prisoners only

Length of stay	18–20-year olds		21 and over	
	Number	%	Number	%
Less than 1 month	0	0	70	11.8
1 month to 3 months	0	0	144	24.2
3 months to six months	0	0	159	26.7
six months to 1 year	0	0	124	20.8
1 year to 2 years	0	0	88	14.8
2 years to 4 years	0	0	3	0.5
4 years or more	0	0	0	0
Total	0	0	588	100

Unsentenced prisoners only

Length of stay	18–20-year olds		21 and over	
	Number	%	Number	%
Less than 1 month	0	0	0	0
1 month to 3 months	0	0	0	0
3 months to six months	0	0	2	28.6
six months to 1 year	0	0	3	42.9
1 year to 2 years	0	0	1	14.3
2 years to 4 years	0	0	1	14.3
4 years or more	0	0	0	0
Total	0	0	7	100

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.

HMIP researchers have developed a self-completion questionnaire to support HMIP 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 prison²⁴.

The questionnaire is available in 14 languages and can also be administered via a telephone interpreting 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 HMIP researchers from a P-NOMIS prisoner population printout ordered by cell location. Using a power calculation, HMIP researchers calculate the minimum sample size required to ensure that the survey findings are representative of the entire population of the establishment.²⁵

Distributing and collecting questionnaires

HMIP researchers distribute and collect the questionnaires in person. So that prisoners can give their informed consent²⁶ to participate, the purpose of the survey is explained and assurances are given about confidentiality and anonymity. Prisoners are made aware that participation in the survey is voluntary; prisoners who decline to participate are 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 8 October 2018 the prisoner population at HMP Maidstone was 598. Using the sampling method described above, questionnaires were distributed to 198 prisoners. We received a total of 169 completed questionnaires, a response rate of 85%. Nine prisoners declined to participate in the survey and 20 questionnaires were either not returned at all, or returned blank.

²⁴ Qualitative analysis of these written comments is undertaken by HMIP researchers and used by inspectors.

²⁵ 95% confidence interval with a 7% margin of error. The formula assumes a 75% response rate (65% in open establishments).

²⁶ For further information about the ethical principles which underpin our survey methodology, please see 'Ethical principles for research activities' which can be downloaded from HMIP's 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 Maidstone. For the comparator analyses, each question was reformulated into a binary ‘yes/no’ format and affirmative responses compared.²⁷ Missing responses have been excluded from all analyses and for some questions, responses from a sub-group of the sample are reported (as indicated in the data).

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 Maidstone 2018 compared with those from other HMIP surveys²⁸

- Survey responses from HMP Maidstone in 2018 compared with survey responses from the most recent inspection at all other category C training prisons.
- Survey responses from HMP Maidstone in 2018 compared with survey responses from other category C training prisons inspected since September 2017.
- Survey responses from HMP Maidstone in 2018 compared with survey responses from HMP Maidstone in 2015.

Comparisons between different residential locations within HMP Maidstone 2018

- responses of prisoners on the induction unit (Weald wing) compared with those from the rest of the establishment.

Comparisons between sub-populations of prisoners within HMP Maidstone 2018²⁹

- white prisoners’ responses compared with those of prisoners from black or minority ethnic groups.
- responses of prisoners from Traveller communities compared with those of prisoners not from Traveller communities.
- British nationals’ responses compared with those of foreign nationals.
- Muslim prisoners’ responses compared with those of non-Muslim prisoners.
- responses of prisoners who reported that they had a disability compared to those who did not.
- responses of prisoners who reported that they had mental health problems compared with those who did not.
- 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.³⁰

In the comparator analyses, statistically significant³¹ differences are indicated by shading. 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 are no valid comparative data for that question.

²⁷ Using the Chi-square test (or Fisher’s exact test if there are fewer than five responses in a group).

²⁸ 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.

²⁹ These analyses are carried out on summary data from selected survey questions only.

³⁰ A minimum of 10 responses which must also represent at least 10% of the total response.

³¹ 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 houseblock are you currently living on?	
	Kent	41 (24%)
	Medway	31 (18%)
	Thanet	47 (28%)
	Weald	47 (28%)
	Segregation unit	3 (2%)
I.2	How old are you?	
	Under 21	4 (2%)
	21 - 25	28 (17%)
	26 - 29	34 (21%)
	30 - 39	51 (31%)
	40 - 49	34 (21%)
	50 - 59	9 (5%)
	60 - 69	4 (2%)
	70 or over	1 (1%)
I.3	What is your ethnic group?	
	White - English/ Welsh/ Scottish/ Northern Irish/ British	3 (2%)
	White - Irish	0 (0%)
	White - Gypsy or Irish Traveller	2 (1%)
	White - any other White background	63 (39%)
	Mixed - White and Black Caribbean	2 (1%)
	Mixed - White and Black African	4 (2%)
	Mixed - White and Asian	6 (4%)
	Mixed - any other Mixed ethnic background	5 (3%)
	Asian/ Asian British - Indian	6 (4%)
	Asian/ Asian British - Pakistani	1 (1%)
	Asian/ Asian British - Bangladeshi	2 (1%)
	Asian/ Asian British - Chinese	2 (1%)
	Asian - any other Asian Background	10 (6%)
	Black/ Black British - Caribbean	7 (4%)
	Black/ Black British - African	14 (9%)
	Black - any other Black/ African/ Caribbean background	16 (10%)
	Arab	3 (2%)
	Any other ethnic group	17 (10%)
I.4	How long have you been in this prison?	
	Less than 6 months	75 (46%)
	6 months or more	88 (54%)
I.5	Are you currently serving a sentence?	
	Yes	156 (96%)
	Yes - on recall	2 (1%)
	No - on remand or awaiting sentence	0 (0%)
	No - immigration detainee	5 (3%)

1.6	How long is your sentence?	
	Less than 6 months.....	3 (2%)
	6 months to less than 1 year.....	13 (8%)
	1 year to less than 4 years.....	69 (42%)
	4 years to less than 10 years.....	65 (40%)
	10 years or more.....	9 (5%)
	IPP (indeterminate sentence for public protection).....	0 (0%)
	Life.....	0 (0%)
	Not currently serving a sentence.....	5 (3%)
Arrival and reception		
2.1	Were you given up-to-date information about this prison before you came here?	
	Yes.....	38 (23%)
	No.....	104 (63%)
	Don't remember.....	23 (14%)
2.2	When you arrived at this prison, how long did you spend in reception?	
	Less than 2 hours.....	108 (64%)
	2 hours or more.....	50 (30%)
	Don't remember.....	10 (6%)
2.3	When you were searched in reception, was this done in a respectful way?	
	Yes.....	141 (84%)
	No.....	20 (12%)
	Don't remember.....	6 (4%)
2.4	Overall, how were you treated in reception?	
	Very well.....	64 (38%)
	Quite well.....	75 (45%)
	Quite badly.....	15 (9%)
	Very badly.....	9 (5%)
	Don't remember.....	4 (2%)
2.5	When you first arrived here, did you have any of the following problems?	
	Problems getting phone numbers.....	25 (15%)
	Contacting family.....	29 (18%)
	Arranging care for children or other dependants.....	4 (2%)
	Contacting employers.....	6 (4%)
	Money worries.....	34 (21%)
	Housing worries.....	16 (10%)
	Feeling depressed.....	39 (24%)
	Feeling suicidal.....	11 (7%)
	Other mental health problems.....	23 (14%)
	Physical health problems.....	18 (11%)
	Drug or alcohol problems (e.g. withdrawal).....	6 (4%)
	Problems getting medication.....	23 (14%)
	Needing protection from other prisoners.....	7 (4%)
	Lost or delayed property.....	36 (22%)
	Other problems.....	11 (7%)
	Did not have any problems.....	59 (36%)
2.6	Did staff help you to deal with these problems when you first arrived?	
	Yes.....	41 (26%)
	No.....	60 (38%)
	Did not have any problems when I first arrived.....	59 (37%)

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.....	64 (40%)
Toiletries / other basic items	96 (60%)
A shower.....	84 (53%)
A free phone call	46 (29%)
Something to eat.....	115 (72%)
The chance to see someone from health care	81 (51%)
The chance to talk to a Listener or Samaritans.....	36 (23%)
Support from another prisoner (e.g. Insider or buddy).....	46 (29%)
Wasn't offered any of these things	13 (8%)

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

Very clean	14 (8%)
Quite clean	64 (39%)
Quite dirty	43 (26%)
Very dirty	42 (25%)
Don't remember	2 (1%)

3.3 Did you feel safe on your first night here?

Yes	126 (76%)
No.....	37 (22%)
Don't remember	3 (2%)

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

	Yes	No	Don't remember
Access to the prison shop / canteen?	85 (54%)	63 (40%)	10 (6%)
Free PIN phone credit?	52 (35%)	89 (60%)	8 (5%)
Numbers put on your PIN phone?	88 (60%)	46 (32%)	12 (8%)

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

Yes.....	116 (71%)
No.....	45 (27%)
Have not had an induction.....	3 (2%)

On the wing

4.1 Are you in a cell on your own?

Yes.....	135 (82%)
No, I'm in a shared cell or dormitory.....	29 (18%)

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

Yes.....	66 (40%)
No.....	70 (42%)
Don't know.....	29 (17%)
Don't have a cell call bell.....	1 (1%)

4.3 Please answer the following questions about the wing or houseblock you are currently living on:

	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	104 (65%)	55 (34%)	2 (1%)
Can you shower every day?	144 (88%)	19 (12%)	0 (0%)
Do you have clean sheets every week?	121 (73%)	40 (24%)	4 (2%)
Do you get cell cleaning materials every week?	104 (64%)	53 (33%)	5 (3%)
Is it normally quiet enough for you to relax or sleep at night?	115 (71%)	44 (27%)	4 (2%)
Can you get your stored property if you need it?	51 (32%)	74 (46%)	36 (22%)

4.4 Normally, how clean or dirty are the communal / shared areas of your wing or houseblock (landings, stairs, wing showers etc.)?

Very clean	14 (9%)
Quite clean	90 (55%)
Quite dirty	38 (23%)
Very dirty	22 (13%)

Food and canteen

5.1 What is the quality of food like in this prison?

Very good	15 (9%)
Quite good	84 (51%)
Quite bad	42 (26%)
Very bad	23 (14%)

5.2 Do you get enough to eat at mealtimes?

Always	25 (15%)
Most of the time	57 (35%)
Some of the time	55 (33%)
Never	28 (17%)

5.3 Does the shop / canteen sell the things that you need?

Yes	66 (40%)
No	91 (55%)
Don't know	8 (5%)

Relationships with staff

6.1 Do most staff here treat you with respect?

Yes	115 (70%)
No	50 (30%)

6.2 Are there any staff here you could turn to if you had a problem?

Yes	121 (74%)
No	43 (26%)

6.3 In the last week, has any member of staff talked to you about how you are getting on?

Yes	44 (27%)
No	121 (73%)

6.4	How helpful is your personal or named officer?	
	Very helpful.....	26 (16%)
	Quite helpful.....	34 (21%)
	Not very helpful	21 (13%)
	Not at all helpful.....	39 (24%)
	Don't know.....	30 (18%)
	Don't have a personal / named officer	14 (9%)
6.5	How often do you see prison governors, directors or senior managers talking to prisoners?	
	Regularly.....	21 (13%)
	Sometimes.....	50 (31%)
	Hardly ever.....	71 (44%)
	Don't know.....	21 (13%)
6.6	Do you feel that you are treated as an individual in this prison?	
	Yes.....	69 (43%)
	No.....	90 (57%)
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	
	Yes, and things sometimes change.....	30 (18%)
	Yes, but things don't change.....	66 (40%)
	No.....	39 (24%)
	Don't know.....	28 (17%)

Faith

7.1	What is your religion?	
	No religion.....	11 (7%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	93 (58%)
	Buddhist.....	1 (1%)
	Hindu.....	4 (3%)
	Jewish	0 (0%)
	Muslim.....	48 (30%)
	Sikh	1 (1%)
	Other	2 (1%)
7.2	Are your religious beliefs respected here?	
	Yes.....	110 (71%)
	No.....	15 (10%)
	Don't know.....	20 (13%)
	Not applicable (no religion).....	11 (7%)
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	
	Yes.....	98 (62%)
	No.....	12 (8%)
	Don't know.....	38 (24%)
	Not applicable (no religion).....	11 (7%)
7.4	Are you able to attend religious services, if you want to?	
	Yes.....	127 (79%)
	No.....	9 (6%)
	Don't know.....	13 (8%)
	Not applicable (no religion).....	11 (7%)

Contact with family and friends

8.1	Have staff here encouraged you to keep in touch with your family / friends?	
	Yes	58 (36%)
	No	101 (64%)
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	92 (56%)
	No	71 (44%)
8.3	Are you able to use a phone every day (if you have credit)?	
	Yes	145 (87%)
	No	21 (13%)
8.4	How easy or difficult is it for your family and friends to get here?	
	Very easy	9 (6%)
	Quite easy	36 (22%)
	Quite difficult	46 (28%)
	Very difficult	52 (32%)
	Don't know	20 (12%)
8.5	How often do you have visits from family or friends?	
	More than once a week	7 (4%)
	About once a week	23 (14%)
	Less than once a week	63 (39%)
	Not applicable (don't get visits)	69 (43%)
8.6	Do visits usually start and finish on time?	
	Yes	50 (58%)
	No	36 (42%)
8.7	Are your visitors usually treated respectfully by staff?	
	Yes	66 (80%)
	No	17 (20%)

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	90 (56%)
	Yes, but these times are not usually kept to	63 (39%)
	No	8 (5%)
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	12 (8%)
	2 to 6 hours	78 (49%)
	6 to 10 hours	54 (34%)
	10 hours or more	7 (4%)
	Don't know	7 (4%)
9.3	How long do you usually spend out of your cell on a typical Saturday or Sunday?	
	Less than 2 hours	14 (9%)
	2 to 6 hours	111 (69%)
	6 to 10 hours	32 (20%)
	10 hours or more	0 (0%)
	Don't know	5 (3%)

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		2 (1%)
	1 or 2		19 (12%)
	3 to 5.....		36 (22%)
	More than 5.....		99 (61%)
	Don't know.....		5 (3%)
9.5	How many days in a typical week do you get association, if you want it?		
	None		4 (3%)
	1 or 2		15 (9%)
	3 to 5.....		31 (19%)
	More than 5.....		96 (60%)
	Don't know.....		14 (9%)
9.6	How many days in a typical week could you go outside for exercise, if you wanted to?		
	None		6 (4%)
	1 or 2		19 (12%)
	3 to 5.....		22 (13%)
	More than 5.....		107 (66%)
	Don't know.....		9 (6%)
9.7	Typically, how often do you go to the gym?		
	Twice a week or more		127 (78%)
	About once a week.....		22 (13%)
	Less than once a week.....		3 (2%)
	Never		11 (7%)
9.8	Typically, how often do you go to the library?		
	Twice a week or more		22 (13%)
	About once a week.....		84 (52%)
	Less than once a week.....		34 (21%)
	Never		23 (14%)
9.9	Does the library have a wide enough range of materials to meet your needs?		
	Yes		44 (28%)
	No.....		93 (58%)
	Don't use the library		23 (14%)

Applications, complaints and legal rights

10.1	Is it easy for you to make an application?			
	Yes.....		119 (74%)	
	No.....		34 (21%)	
	Don't know.....		8 (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?	71 (49%)	66 (45%)	9 (6%)
	Are applications usually dealt with within 7 days?	65 (44%)	73 (50%)	9 (6%)

I0.3	Is it easy for you to make a complaint?				
	Yes.....			93 (58%)	
	No.....			39 (24%)	
	Don't know.....			29 (18%)	
I0.4	If you have made any complaints here, please answer the questions below:				
		Yes	No	Not made any complaints	
	Are complaints usually dealt with fairly?	36 (24%)	52 (35%)	61 (41%)	
	Are complaints usually dealt with within 7 days?	27 (19%)	54 (38%)	61 (43%)	
I0.5	Have you ever been prevented from making a complaint here when you wanted to?				
	Yes.....			29 (19%)	
	No.....			77 (52%)	
	Not wanted to make a complaint.....			43 (29%)	
I0.6	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?	53 (35%)	43 (28%)	31 (20%)	26 (17%)
	Attend legal visits?	45 (31%)	28 (19%)	41 (28%)	30 (21%)
	Get bail information?	20 (14%)	56 (38%)	45 (31%)	25 (17%)
I0.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?				
	Yes.....			61 (39%)	
	No.....			50 (32%)	
	Not had any legal letters.....			46 (29%)	

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	21 (13%)	46 (29%)	48 (30%)	34 (21%)	11 (7%)
	Nurse	30 (20%)	54 (35%)	33 (22%)	23 (15%)	13 (8%)
	Dentist	8 (5%)	9 (6%)	18 (12%)	99 (66%)	17 (11%)
	Mental health workers	10 (7%)	19 (13%)	12 (8%)	30 (21%)	73 (51%)
I1.2	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	19 (12%)	62 (39%)	25 (16%)	28 (17%)	27 (17%)
	Nurse	28 (18%)	58 (38%)	16 (10%)	25 (16%)	26 (17%)
	Dentist	13 (8%)	23 (15%)	17 (11%)	42 (27%)	59 (38%)
	Mental health workers	9 (6%)	27 (19%)	8 (6%)	16 (11%)	84 (58%)
I1.3	Do you have any mental health problems?					
	Yes.....					30 (19%)
	No.....					127 (81%)
I1.4	Have you been helped with your mental health problems in this prison?					
	Yes.....					10 (6%)
	No.....					20 (13%)
	Don't have any mental health problems.....					127 (81%)

11.5	What do you think of the overall quality of the health services here?	
	Very good	12 (8%)
	Quite good	49 (31%)
	Quite bad	39 (24%)
	Very bad	37 (23%)
	Don't know.....	23 (14%)
Other support needs		
12.1	Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?	
	Yes	28 (18%)
	No.....	127 (82%)
12.2	If you have a disability, are you getting the support you need?	
	Yes	6 (4%)
	No.....	17 (11%)
	Don't have a disability	127 (85%)
12.3	Have you been on an ACCT in this prison?	
	Yes	11 (8%)
	No.....	134 (92%)
12.4	If you have been on an ACCT in this prison, did you feel cared for by staff?	
	Yes	6 (4%)
	No.....	6 (4%)
	Have not been on an ACCT in this prison.....	134 (92%)
12.5	How easy or difficult is it for you to speak to a Listener, if you need to?	
	Very easy	33 (21%)
	Quite easy	20 (13%)
	Quite difficult	16 (10%)
	Very difficult	10 (6%)
	Don't know.....	69 (45%)
	No Listeners at this prison	7 (5%)

Alcohol and drugs

13.1	Did you have an alcohol problem when you came into this prison?	
	Yes	12 (8%)
	No.....	146 (92%)
13.2	Have you been helped with your alcohol problem in this prison?	
	Yes	8 (5%)
	No.....	4 (3%)
	Did not / do not have an alcohol problem	146 (92%)
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	20 (13%)
	No.....	137 (87%)
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	11 (7%)
	No.....	145 (93%)

13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	12 (8%)
	No	141 (92%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	13 (9%)
	No	11 (7%)
	Did not / do not have a drug problem.....	123 (84%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy	16 (11%)
	Quite easy	5 (3%)
	Quite difficult	5 (3%)
	Very difficult	4 (3%)
	Don't know.....	121 (80%)
13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy	13 (8%)
	Quite easy	12 (7%)
	Quite difficult	19 (11%)
	Very difficult	5 (3%)
	Don't know.....	119 (71%)

Safety

14.1	Have you ever felt unsafe here?	
	Yes	70 (43%)
	No	94 (57%)
14.2	Do you feel unsafe now?	
	Yes	36 (22%)
	No	125 (78%)
14.3	Have you experienced any of the following types of bullying / victimisation from other prisoners here? (Please tick all that apply to you.)	
	Verbal abuse	29 (19%)
	Threats or intimidation.....	18 (12%)
	Physical assault.....	9 (6%)
	Sexual assault.....	2 (1%)
	Theft of canteen or property.....	25 (16%)
	Other bullying / victimisation	13 (8%)
	Not experienced any of these from prisoners here.....	102 (66%)
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	
	Yes	81 (54%)
	No.....	70 (46%)

14.5	Have you experienced any of the following types of bullying / victimisation from staff here? (Please tick all that apply to you.)	
	Verbal abuse	29 (19%)
	Threats or intimidation.....	22 (14%)
	Physical assault.....	13 (9%)
	Sexual assault.....	1 (1%)
	Theft of canteen or property.....	7 (5%)
	Other bullying / victimisation	11 (7%)
	Not experienced any of these from staff here.....	108 (71%)

14.6	If you were being bullied / victimised by staff here, would you report it?	
	Yes	94 (64%)
	No.....	54 (36%)

Behaviour management

15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	
	Yes	69 (45%)
	No.....	41 (27%)
	Don't know what the incentives / rewards are	43 (28%)

15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	
	Yes	55 (35%)
	No.....	52 (34%)
	Don't know.....	24 (15%)
	Don't know what this is	24 (15%)

15.3	Have you been physically restrained by staff in this prison in the last 6 months?	
	Yes	18 (12%)
	No.....	138 (88%)

15.4	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	5 (3%)
	No.....	8 (5%)
	Don't remember	3 (2%)
	Not been restrained here in last 6 months	138 (90%)

15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	
	Yes	13 (8%)
	No.....	143 (92%)

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?	8 (62%)	5 (38%)
	Could you shower every day?	6 (46%)	7 (54%)
	Could you go outside for exercise every day?	6 (55%)	5 (45%)
	Could you use the phone every day (if you had credit)?	6 (50%)	6 (50%)

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	88 (59%)	34 (23%)	27 (18%)	1 (1%)
Vocational or skills training	42 (30%)	49 (35%)	42 (30%)	6 (4%)
Prison job	79 (54%)	42 (29%)	23 (16%)	3 (2%)
Voluntary work outside of the prison	7 (5%)	33 (25%)	48 (36%)	46 (34%)
Paid work outside of the prison	9 (6%)	33 (24%)	43 (31%)	54 (39%)

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	86 (59%)	34 (23%)	27 (18%)
Vocational or skills training	54 (39%)	32 (23%)	53 (38%)
Prison job	55 (38%)	65 (45%)	24 (17%)
Voluntary work outside of the prison	23 (17%)	22 (16%)	90 (67%)
Paid work outside of the prison	26 (19%)	19 (14%)	91 (67%)

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

Yes	86 (59%)
No.....	52 (35%)
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	68 (46%)
No.....	80 (54%)

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

Yes	51 (77%)
No.....	7 (11%)
Don't know what my objectives or targets are.....	8 (12%)

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

Yes	22 (38%)
No.....	28 (48%)
Don't know what my objectives or targets are.....	8 (14%)

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	16 (28%)	7 (12%)	35 (60%)
Other programmes	14 (24%)	9 (15%)	36 (61%)
One to one work	13 (23%)	6 (11%)	38 (67%)
Being on a specialist unit	7 (12%)	7 (12%)	43 (75%)
ROTL - day or overnight release	7 (12%)	6 (11%)	44 (77%)

Preparation for release

18.1	Do you expect to be released in the next 3 months?			
	Yes			55 (35%)
	No.....			75 (48%)
	Don't know.....			26 (17%)
18.2	How close is this prison to your home area or intended release address?			
	Very near.....			1 (2%)
	Quite near.....			8 (16%)
	Quite far.....			9 (18%)
	Very far.....			31 (63%)
18.3	Is anybody helping you to prepare for your release (e.g. a home probation officer, responsible officer, case worker)?			
	Yes			21 (44%)
	No.....			27 (56%)
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	8 (17%)	17 (37%)	21 (46%)
	Getting employment	6 (14%)	19 (44%)	18 (42%)
	Setting up education or training	8 (19%)	17 (40%)	17 (40%)
	Arranging benefits	4 (10%)	17 (40%)	21 (50%)
	Sorting out finances	6 (15%)	16 (40%)	18 (45%)
	Support for drug or alcohol problems	3 (8%)	9 (23%)	28 (70%)
	Health / mental health support	5 (12%)	8 (19%)	29 (69%)
	Social care support	4 (10%)	9 (23%)	26 (67%)
	Getting back in touch with family or friends	9 (20%)	14 (32%)	21 (48%)

More about you

19.1	Do you have children under the age of 18?		
	Yes		69 (44%)
	No.....		87 (56%)
19.2	Are you a UK / British citizen?		
	Yes		18 (12%)
	No.....		136 (88%)
19.3	Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?		
	Yes		16 (11%)
	No.....		136 (89%)
19.4	Have you ever been in the armed services (e.g. army, navy, air force)?		
	Yes		30 (19%)
	No.....		125 (81%)
19.5	What is your gender?		
	Male		155 (99%)
	Female.....		1 (1%)
	Non-binary.....		0 (0%)
	Other		1 (1%)

19.6	How would you describe your sexual orientation?	
	Straight / heterosexual.....	146 (98%)
	Gay / lesbian / homosexual.....	2 (1%)
	Bisexual.....	1 (1%)
	Other.....	0 (0%)
19.7	Do you identify as transgender or transsexual?	
	Yes.....	8 (6%)
	No.....	137 (94%)

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.....	14 (9%)
	Less likely to offend.....	78 (53%)
	Made no difference.....	56 (38%)

HMP Maidstone 2018

Survey responses compared with those from other HMIP surveys of category C training prisons and with those from the previous survey

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

- Summary statistics from most recent surveys of all other category C training prisons (39 prisons). Please note that we do not have comparable data for the new questions introduced in September 2017.
- Summary statistics from surveys of category C training prisons conducted since the introduction of the new questionnaire in September 2017 (12 prisons). Please note that this does not include all category C training prisons.
- Summary statistics from HMP Maidstone in 2018 are compared with those from HMP Maidstone in 2015. 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 Maidstone 2018)

HMP Maidstone 2018	All other category C training prisons	HMP Maidstone 2018	All other category C training prisons surveyed since September 2017	HMP Maidstone 2018	HMP Maidstone 2015
169	6,694	169	2,106	169	162

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION								
1.2	Are you under 21 years of age?	<i>n</i> =165	2%	4%	2%	9%	2%	1%
	Are you 25 years of age or younger?	<i>n</i> =165	19%		19%	31%	19%	
	Are you 50 years of age or older?	<i>n</i> =165	9%	18%	9%	11%	9%	13%
	Are you 70 years of age or older?	<i>n</i> =165	1%	2%	1%	1%	1%	1%
1.3	Are you from a minority ethnic group?	<i>n</i> =163	58%	26%	58%	30%	58%	59%
1.4	Have you been in this prison for less than 6 months?	<i>n</i> =163	46%		46%	32%	46%	
1.5	Are you currently serving a sentence?	<i>n</i> =163	97%	100%	97%	100%	97%	99%
	Are you on recall?	<i>n</i> =163	1%	8%	1%	9%	1%	1%
1.6	Is your sentence less than 12 months?	<i>n</i> =164	10%	6%	10%	7%	10%	6%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n</i> =164	0%	7%	0%	3%	0%	2%
7.1	Are you Muslim?	<i>n</i> =160	30%	14%	30%	16%	30%	37%
11.3	Do you have any mental health problems?	<i>n</i> =157	19%		19%	44%	19%	
12.1	Do you consider yourself to have a disability?	<i>n</i> =155	18%	27%	18%	34%	18%	9%
19.1	Do you have any children under the age of 18?	<i>n</i> =156	44%	48%	44%	48%	44%	55%
19.2	Are you a foreign national?	<i>n</i> =154	88%	9%	88%	6%	88%	89%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n</i> =152	11%	4%	11%	5%	11%	1%
19.4	Have you ever been in the armed services?	<i>n</i> =155	19%	6%	19%	5%	19%	8%
19.5	Is your gender female or non-binary?	<i>n</i> =157	1%		1%	0%	1%	
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n</i> =149	2%	4%	2%	4%	2%	1%
19.7	Do you identify as transgender or transsexual?	<i>n</i> =145	6%		6%	2%	6%	
ARRIVAL AND RECEPTION								
2.1	Were you given up-to-date information about this prison before you came here?	<i>n</i> =165	23%		23%	16%	23%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n</i> =168	64%	55%	64%	44%	64%	53%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n</i> =167	84%	85%	84%	82%	84%	76%
2.4	Overall, were you treated very / quite well in reception?	<i>n</i> =167	83%		83%	86%	83%	

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	HMP Maidstone 2018	All other category C training prisons	HMP Maidstone 2018	All other category C training prisons surveyed since September 2017	HMP Maidstone 2018	HMP Maidstone 2015
Number of completed questionnaires returned	169	6,694	169	2,106	169	162
<i>n=number of valid responses to question (HMP Maidstone 2018)</i>						

2.5	When you first arrived, did you have any problems?	n=162	64%	66%	64%	73%	64%	68%
2.5	Did you have problems with:							
	- Getting phone numbers?	n=162	15%	19%	15%	27%	15%	19%
	- Contacting family?	n=162	18%	21%	18%	28%	18%	18%
	- Arranging care for children or other dependents?	n=162	3%		3%	2%	3%	
	- Contacting employers?	n=162	4%	2%	4%	2%	4%	4%
	- Money worries?	n=162	21%	14%	21%	17%	21%	12%
	- Housing worries?	n=162	10%	13%	10%	13%	10%	9%
	- Feeling depressed?	n=162	24%		24%	30%	24%	
	- Feeling suicidal?	n=162	7%		7%	9%	7%	
	- Other mental health problems?	n=162	14%		14%	21%	14%	
	- Physical health problems?	n=162	11%	14%	11%	14%	11%	12%
	- Drugs or alcohol (e.g. withdrawal)?	n=162	4%		4%	12%	4%	
	- Getting medication?	n=162	14%		14%	22%	14%	
	- Needing protection from other prisoners?	n=162	4%	5%	4%	6%	4%	4%
	- Lost or delayed property?	n=162	22%	21%	22%	23%	22%	26%
	<i>For those who had any problems when they first arrived:</i>							
2.6	Did staff help you to deal with these problems?	n=101	41%	35%	41%	31%	41%	32%
FIRST NIGHT AND INDUCTION								
3.1	Before you were locked up on your first night, were you offered:							
	- Tobacco or nicotine replacement?	n=160	40%	67%	40%	66%	40%	57%
	- Toiletries / other basic items?	n=160	60%	51%	60%	50%	60%	62%
	- A shower?	n=160	53%	32%	53%	41%	53%	37%
	- A free phone call?	n=160	29%	41%	29%	43%	29%	27%
	- Something to eat?	n=160	72%	61%	72%	75%	72%	61%
	- The chance to see someone from health care?	n=160	51%	67%	51%	59%	51%	70%
	- The chance to talk to a Listener or Samaritans?	n=160	23%	32%	23%	25%	23%	32%
	- Support from another prisoner (e.g. Insider or buddy)?	n=160	29%		29%	23%	29%	
	- None of these?	n=160	8%		8%	7%	8%	
3.2	On your first night in this prison, was your cell very / quite clean?	n=165	47%		47%	34%	47%	
3.3	Did you feel safe on your first night here?	n=166	76%	77%	76%	72%	76%	73%
3.4	In your first few days here, did you get:							
	- Access to the prison shop / canteen?	n=158	54%	30%	54%	38%	54%	27%
	- Free PIN phone credit?	n=149	35%		35%	45%	35%	
	- Numbers put on your PIN phone?	n=146	60%		60%	46%	60%	
3.5	Have you had an induction at this prison?	n=164	98%	92%	98%	94%	98%	94%
	<i>For those who have had an induction:</i>							
3.5	Did your induction cover everything you needed to know about this prison?	n=161	72%		72%	54%	72%	

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HMP Maidstone 2018	All other category C training prisons	HMP Maidstone 2018	All other category C training prisons surveyed since September 2017	HMP Maidstone 2018	HMP Maidstone 2015
169	6,694	169	2,106	169	162

ON THE WING								
4.1	Are you in a cell on your own?	<i>n=164</i>	82%		82%	61%	82%	
4.2	Is your cell call bell normally answered within 5 minutes?	<i>n=166</i>	40%	33%	40%	27%	40%	46%
4.3	On the wing or houseblock you currently live on:							
	- Do you normally have enough clean, suitable clothes for the week?	<i>n=161</i>	65%	69%	65%	66%	65%	80%
	- Can you shower every day?	<i>n=163</i>	88%	88%	88%	87%	88%	93%
	- Do you have clean sheets every week?	<i>n=165</i>	73%	67%	73%	61%	73%	88%
	- Do you get cell cleaning materials every week?	<i>n=162</i>	64%	63%	64%	57%	64%	76%
	- Is it normally quiet enough for you to relax or sleep at night?	<i>n=163</i>	71%	68%	71%	66%	71%	73%
	- Can you get your stored property if you need it?	<i>n=161</i>	32%	25%	32%	25%	32%	27%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	<i>n=164</i>	63%		63%	60%	63%	
FOOD AND CANTEEN								
5.1	Is the quality of the food in this prison very / quite good?	<i>n=164</i>	60%		60%	35%	60%	
5.2	Do you get enough to eat at meal-times always / most of the time?	<i>n=165</i>	50%		50%	31%	50%	
5.3	Does the shop / canteen sell the things that you need?	<i>n=165</i>	40%	55%	40%	61%	40%	36%
RELATIONSHIPS WITH STAFF								
6.1	Do most staff here treat you with respect?	<i>n=165</i>	70%	76%	70%	68%	70%	80%
6.2	Are there any staff here you could turn to if you had a problem?	<i>n=164</i>	74%	72%	74%	70%	74%	77%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<i>n=165</i>	27%	30%	27%	27%	27%	27%
6.4	Do you have a personal officer?	<i>n=164</i>	92%		92%	81%	92%	
<i>For those who have a personal officer:</i>								
6.4	Is your personal or named officer very / quite helpful?	<i>n=150</i>	40%		40%	42%	40%	
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	<i>n=163</i>	13%		13%	10%	13%	
6.6	Do you feel that you are treated as an individual in this prison?	<i>n=159</i>	43%		43%	41%	43%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	<i>n=163</i>	59%		59%	50%	59%	
	If so, do things sometimes change?	<i>n=96</i>	31%		31%	30%	31%	
FAITH								
7.1	Do you have a religion?	<i>n=160</i>	93%	69%	93%	66%	93%	93%
<i>For those who have a religion:</i>								
7.2	Are your religious beliefs respected here?	<i>n=145</i>	76%		76%	68%	76%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	<i>n=148</i>	66%		66%	70%	66%	
7.4	Are you able to attend religious services, if you want to?	<i>n=149</i>	85%		85%	87%	85%	

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Number of completed questionnaires returned

HMP Maidstone 2018	All other category C training prisons
169	6,694

HMP Maidstone 2018	All other category C training prisons surveyed since September 2017
169	2,106

HMP Maidstone 2018	HMP Maidstone 2015
169	162

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

CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	n=159	37%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	n=163	56% 47%
8.3	Are you able to use a phone every day (if you have credit)?	n=166	87%
8.4	Is it very / quite easy for your family and friends to get here?	n=163	28%
8.5	Do you get visits from family/friends once a week or more?	n=162	19%
<i>For those who get visits:</i>			
8.6	Do visits usually start and finish on time?	n=86	58%
8.7	Are your visitors usually treated respectfully by staff?	n=83	80%
TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=161	95%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
9.1	Are these times usually kept to?	n=153	59%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	n=158	8% 13%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	n=158	4% 15%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=162	9%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=162	0%
9.4	Do you have time to do domestics more than 5 days in a typical week?	n=161	62%
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=160	60%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=163	66%
9.7	Do you typically go to the gym twice a week or more?	n=163	78%
9.8	Do you typically go to the library once a week or more?	n=163	65% 45%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	n=137	32% 61%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	n=161	74% 79%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	n=137	52% 56%
	Are applications usually dealt with within 7 days?	n=138	47% 39%
10.3	Is it easy for you to make a complaint?	n=161	58% 59%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	n=88	41% 32%
	Are complaints usually dealt with within 7 days?	n=81	33% 27%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=106	27%

37%	25%
56%	59%
87%	86%
28%	38%
19%	17%
58%	46%
80%	73%
95%	91%
59%	54%
8%	19%
4%	8%
9%	22%
0%	3%
62%	54%
60%	62%
66%	65%
78%	51%
65%	46%
32%	57%
74%	73%
52%	51%
47%	36%
58%	61%
41%	29%
33%	25%
27%	28%

37%	
56%	45%
87%	
28%	
19%	
58%	
80%	
95%	
59%	
8%	8%
4%	9%
9%	
0%	
62%	
60%	
66%	
78%	
65%	50%
32%	27%
74%	81%
52%	52%
47%	40%
58%	50%
41%	18%
33%	23%
27%	

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For those who need it, is it easy to:						
10.6	Communicate with your solicitor or legal representative?	n=127	42%		42%	
	Attend legal visits?	n=114	40%		40%	
	Get bail information?	n=121	17%		17%	
For those who have had legal letters:						
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=111	55%	50%	55%	42%
HEALTH CARE						
11.1	Is it very / quite easy to see:					
	- Doctor?	n=160	42%		42%	
	- Nurse?	n=153	55%		55%	
	- Dentist?	n=151	11%		11%	
	- Mental health workers?	n=144	20%		20%	
11.2	Do you think the quality of the health service is very / quite good from:					
	- Doctor?	n=161	50%		50%	
	- Nurse?	n=153	56%		56%	
	- Dentist?	n=154	23%		23%	
	- Mental health workers?	n=144	25%		25%	
11.3	Do you have any mental health problems?	n=157	19%		19%	
For those who have mental health problems:						
11.4	Have you been helped with your mental health problems in this prison?	n=30	33%		33%	
11.5	Do you think the overall quality of the health services here is very / quite good?	n=160	38%		38%	
OTHER SUPPORT NEEDS						
12.1	Do you consider yourself to have a disability?	n=155	18%	27%	18%	9%
For those who have a disability:						
12.2	Are you getting the support you need?	n=23	26%		26%	
12.3	Have you been on an ACCT in this prison?	n=145	8%		8%	
For those who have been on an ACCT:						
12.4	Did you feel cared for by staff?	n=12	50%		50%	
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=155	34%		34%	
ALCOHOL AND DRUGS						
13.1	Did you have an alcohol problem when you came into this prison?	n=158	8%	15%	8%	11%
For those who had / have an alcohol problem:						
13.2	Have you been helped with your alcohol problem in this prison?	n=12	67%	60%	67%	67%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=157	13%	26%	13%	15%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=156	7%	13%	7%	7%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=153	8%		8%	
For those who had / have a drug problem:						
13.6	Have you been helped with your drug problem in this prison?	n=24	54%	56%	54%	59%
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=151	14%		14%	
13.8	Is it very / quite easy to get alcohol in this prison?	n=168	15%		15%	

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SAFETY								
14.1	Have you ever felt unsafe here?	n=164	43%	42%	43%	47%	43%	41%
14.2	Do you feel unsafe now?	n=161	22%	19%	22%	22%	22%	16%
14.3	Have you experienced any of the following from other prisoners here:							
	- Verbal abuse?	n=155	19%		19%	35%	19%	
	- Threats or intimidation?	n=155	12%		12%	31%	12%	
	- Physical assault?	n=155	6%		6%	18%	6%	
	- Sexual assault?	n=155	1%		1%	2%	1%	
	- Theft of canteen or property?	n=155	16%		16%	26%	16%	
	- Other bullying / victimisation?	n=155	8%		8%	17%	8%	
	- Not experienced any of these from prisoners here	n=155	66%		66%	53%	66%	
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	n=151	54%		54%	32%	54%	
14.5	Have you experienced any of the following from staff here:							
	- Verbal abuse?	n=152	19%		19%	31%	19%	
	- Threats or intimidation?	n=152	15%		15%	23%	15%	
	- Physical assault?	n=152	9%		9%	10%	9%	
	- Sexual assault?	n=152	1%		1%	2%	1%	
	- Theft of canteen or property?	n=152	5%		5%	9%	5%	
	- Other bullying / victimisation?	n=152	7%		7%	16%	7%	
	- Not experienced any of these from staff here	n=152	71%		71%	58%	71%	
14.6	If you were being bullied / victimised by staff here, would you report it?	n=148	64%		64%	48%	64%	
BEHAVIOUR MANAGEMENT								
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	n=153	45%		45%	39%	45%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	n=155	36%		36%	36%	36%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	n=156	12%	10%	12%	13%	12%	6%
<i>For those who have been restrained in the last 6 months:</i>								
15.4	Did anyone come and talk to you about it afterwards?	n=16	31%		31%	19%	31%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	n=156	8%		8%	9%	8%	
<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>								
15.6	Were you treated well by segregation staff?	n=13	62%		62%	58%	62%	
	Could you shower every day?	n=13	46%		46%	78%	46%	
	Could you go outside for exercise every day?	n=11	55%		55%	79%	55%	
	Could you use the phone every day (if you had credit)?	n=12	50%		50%	65%	50%	

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EDUCATION, SKILLS AND WORK							
16.1	In this prison, is it easy to get into the following activities:						
	- Education?	n=150	59%		59%	57%	59%
	- Vocational or skills training?	n=139	30%		30%	38%	30%
	- Prison job?	n=147	54%		54%	44%	54%
	- Voluntary work outside of the prison?	n=134	5%		5%	4%	5%
	- Paid work outside of the prison?	n=139	7%		7%	3%	7%
16.2	In this prison, have you done the following activities:						
	- Education?	n=147	82%	81%	82%	79%	82%
	- Vocational or skills training?	n=139	62%	74%	62%	68%	62%
	- Prison job?	n=144	83%	84%	83%	80%	83%
	- Voluntary work outside of the prison?	n=135	33%		33%	33%	33%
	- Paid work outside of the prison?	n=136	33%		33%	32%	33%
<i>For those who have done the following activities, do you think they will help you on release:</i>							
	- Education?	n=120	72%	58%	72%	61%	72%
	- Vocational or skills training?	n=86	63%	61%	63%	68%	63%
	- Prison job?	n=120	46%	43%	46%	40%	46%
	- Voluntary work outside of the prison?	n=45	51%		51%	55%	51%
	- Paid work outside of the prison?	n=45	58%		58%	59%	58%
16.3	Do staff encourage you to attend education, training or work?			n=138	62%		62%
PLANNING AND PROGRESSION							
17.1	Do you have a custody plan?			n=148	46%		46%
<i>For those who have a custody plan:</i>							
17.2	Do you understand what you need to do to achieve your objectives or targets?			n=66	77%		77%
17.3	Are staff helping you to achieve your objectives or targets?			n=58	38%		38%
17.4	In this prison, have you done:						
	- Offending behaviour programmes?	n=58	40%		40%	46%	40%
	- Other programmes?	n=59	39%		39%	39%	39%
	- One to one work?	n=57	33%		33%	36%	33%
	- Been on a specialist unit?	n=57	25%		25%	18%	25%
- ROTL - day or overnight release?	n=57	23%		23%	13%	23%	
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>							
	- Offending behaviour programmes?	n=23	70%		70%	70%	70%
	- Other programmes?	n=23	61%		61%	64%	61%
	- One to one work?	n=19	68%		68%	67%	68%
	- Being on a specialist unit?	n=14	50%		50%	47%	50%
	- ROTL - day or overnight release?	n=13	54%		54%	35%	54%

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PREPARATION FOR RELEASE								
18.1	Do you expect to be released in the next 3 months?	n=156	35%		35%	24%	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?	n=49	18%		18%	46%	18%	
18.3	Is anybody helping you to prepare for your release?	n=48	44%		44%	59%	44%	
18.4	Do you need help to sort out the following for when you are released:							
	- Finding accommodation?	n=46	54%		54%	61%	54%	
	- Getting employment?	n=43	58%		58%	61%	58%	
	- Setting up education or training?	n=42	60%		60%	48%	60%	
	- Arranging benefits?	n=42	50%		50%	67%	50%	
	- Sorting out finances?	n=40	55%		55%	57%	55%	
	- Support for drug or alcohol problems?	n=40	30%		30%	42%	30%	
	- Health / mental Health support?	n=42	31%		31%	48%	31%	
	- Social care support?	n=39	33%		33%	35%	33%	
	- Getting back in touch with family or friends?	n=44	52%		52%	40%	52%	
18.4	Are you getting help to sort out the following for when you are released, if you need it:							
	- Finding accommodation?	n=25	32%		32%	37%	32%	
	- Getting employment?	n=25	24%		24%	22%	24%	
	- Setting up education or training?	n=25	32%		32%	25%	32%	
	- Arranging benefits?	n=21	19%		19%	27%	19%	
	- Sorting out finances?	n=22	27%		27%	23%	27%	
	- Support for drug or alcohol problems?	n=12	25%		25%	49%	25%	
	- Health / mental Health support?	n=13	39%		39%	30%	39%	
	- Social care support?	n=13	31%		31%	23%	31%	
	- Getting back in touch with family or friends?	n=23	39%		39%	30%	39%	
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?	n=148	53%		53%	50%	53%	

HMP Maidstone 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

- responses of prisoners from black and minority ethnic groups are compared with those of white prisoners
- Muslim prisoners' responses are compared with those of non-Muslim prisoners

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

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
95	68	48	112

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	19%	16%	28%	16%
	Are you 50 years of age or older?	11%	6%	2%	11%
1.3	Are you from a minority ethnic group?			85%	47%
7.1	Are you Muslim?	43%	11%		
11.3	Do you have any mental health problems?	25%	10%	27%	16%
12.1	Do you consider yourself to have a disability?	20%	16%	17%	18%
19.2	Are you a foreign national?	81%	100%	82%	93%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	9%	11%	9%	12%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	79%	91%	71%	90%
2.4	Overall, were you treated very / quite well in reception?	79%	90%	71%	88%
2.5	When you first arrived, did you have any problems?	74%	51%	70%	62%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	39%	46%	48%	37%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	73%	82%	67%	81%
3.5	Have you had an induction at this prison?	100%	96%	98%	98%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	69%	77%	74%	70%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	36%	47%	35%	41%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	60%	70%	57%	68%
	- Can you shower every day?	84%	96%	83%	90%
	- Do you have clean sheets every week?	65%	86%	52%	82%
	- Do you get cell cleaning materials every week?	66%	62%	70%	60%
	- Is it normally quiet enough for you to relax or sleep at night?	73%	70%	72%	70%
	- Can you get your stored property if you need it?	28%	36%	20%	35%

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Number of completed questionnaires returned

Black and minority ethnic	White
95	68

Muslim	Non-Muslim
48	112

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	44%	61%
5.3	Does the shop / canteen sell the things that you need?	32%	49%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	65%	79%
6.2	Are there any staff here you could turn to if you had a problem?	69%	82%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	22%	33%
6.6	Do you feel that you are treated as an individual in this prison?	35%	56%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	83%	67%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	71%	60%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	37%	38%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	63%	48%
8.3	Are you able to use a phone every day (if you have credit)?	85%	92%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	78%	82%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	8%	8%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	6%	3%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	21%	43%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	75%	74%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	49%	57%
10.3	Is it easy for you to make a complaint?	54%	64%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	41%	42%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	28%	25%

33%	58%
36%	42%
56%	76%
63%	79%
10%	33%
30%	47%
76%	76%
75%	62%
37%	37%
63%	54%
85%	89%
70%	85%
2%	10%
7%	4%
24%	33%
72%	77%
31%	60%
52%	60%
23%	50%
27%	28%

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

	Black and minority ethnic	White	Muslim	Non-Muslim
	95	68	48	112

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	45%	38%	45%	43%
	- Nurse?	61%	46%	55%	54%
	- Dentist?	11%	12%	6%	12%
	- Mental health workers?	20%	19%	21%	19%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	43%	13%	33%	35%
11.5	Do you think the overall quality of the health services here is very / quite good?	38%	37%	31%	41%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	19%	43%	0%	40%
SAFETY					
14.1	Have you ever felt unsafe here?	48%	32%	51%	39%
14.2	Do you feel unsafe now?	23%	19%	30%	19%
14.3	Not experienced bullying / victimisation by other prisoners	59%	75%	67%	65%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	49%	58%	49%	55%
14.5	Not experienced bullying / victimisation by members of staff	60%	86%	67%	72%
14.6	If you were being bullied / victimised by staff here, would you report it?	61%	67%	59%	65%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	44%	48%	39%	49%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	37%	34%	33%	37%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	14%	8%	15%	10%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	13%	2%	17%	3%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	56%	73%	51%	67%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	47%	44%	42%	47%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	32%	50%	28%	44%
PREPARATION FOR RELEASE					
<i>For those who expect to be released in the next 3 months:</i>					
18.3	Is anybody helping you to prepare for your release?	43%	50%	59%	36%
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?	55%	49%	43%	57%

HMP Maidstone 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:
 - responses of foreign national prisoners are compared with those of British national prisoners
 Please note that these analyses are based on summary data from selected survey questions only.

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

Foreign national	British national
136	18

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 25 years of age?	19%	29%
	Are you 50 years of age or older?	7%	12%
1.3	Are you from a minority ethnic group?	53%	100%
7.1	Are you Muslim?	28%	53%
11.3	Do you have any mental health problems?	15%	56%
12.1	Do you consider yourself to have a disability?	17%	35%
19.2	Are you a foreign national?		
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	10%	12%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	84%	71%
2.4	Overall, were you treated very / quite well in reception?	84%	65%
2.5	When you first arrived, did you have any problems?	63%	71%
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	38%	36%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	78%	59%
3.5	Have you had an induction at this prison?	99%	100%
<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	73%	53%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	44%	18%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	65%	40%
	- Can you shower every day?	89%	81%
	- Do you have clean sheets every week?	74%	59%
	- Do you get cell cleaning materials every week?	63%	63%
	- Is it normally quiet enough for you to relax or sleep at night?	70%	80%
	- Can you get your stored property if you need it?	33%	19%

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

	Foreign national	British national
Number of completed questionnaires returned	136	18

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	47%	47%
5.3	Does the shop / canteen sell the things that you need?	38%	38%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	69%	59%
6.2	Are there any staff here you could turn to if you had a problem?	74%	71%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	27%	19%
6.6	Do you feel that you are treated as an individual in this prison?	45%	33%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	75%	67%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	65%	67%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	34%	35%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	57%	67%
8.3	Are you able to use a phone every day (if you have credit)?	88%	78%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	78%	78%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	6%	12%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	5%	6%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	31%	27%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	77%	53%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	53%	31%
10.3	Is it easy for you to make a complaint?	58%	47%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	42%	17%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	26%	35%

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

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

	Foreign national	British national
Number of completed questionnaires returned	136	18

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	46%	17%
	- Nurse?	59%	20%
	- Dentist?	11%	7%
	- Mental health workers?	21%	13%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	24%	50%
11.5	Do you think the overall quality of the health services here is very / quite good?	37%	35%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	28%	20%
SAFETY			
14.1	Have you ever felt unsafe here?	40%	72%
14.2	Do you feel unsafe now?	20%	47%
14.3	Not experienced bullying / victimisation by other prisoners	69%	47%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	55%	36%
14.5	Not experienced bullying / victimisation by members of staff	77%	35%
14.6	If you were being bullied / victimised by staff here, would you report it?	67%	43%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	47%	40%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	36%	31%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	10%	24%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	3%	41%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	60%	67%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	45%	63%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	40%	22%
PREPARATION FOR RELEASE			
<i>For those who expect to be released in the next 3 months:</i>			
18.3	Is anybody helping you to prepare for your release?	42%	67%
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?	52%	61%

HMP Maidstone 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

- responses of prisoners who reported that they had mental health problems compared with those who did not.
- responses of prisoners who reported that they had a disability compared with those who did not.

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

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

	Green shading shows results that are significantly more positive than the comparator
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* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

Mental health problems	No mental health problems	Have a disability	Do not have a disability
30	127	28	127

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	32%	18%	18%	20%
	Are you 50 years of age or older?	7%	10%	11%	9%
1.3	Are you from a minority ethnic group?	79%	55%	64%	58%
7.1	Are you Muslim?	45%	29%	30%	32%
11.3	Do you have any mental health problems?			64%	11%
12.1	Do you consider yourself to have a disability?	53%	7%		
19.2	Are you a foreign national?	69%	94%	79%	91%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	10%	11%	25%	7%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	71%	87%	85%	84%
2.4	Overall, were you treated very / quite well in reception?	75%	85%	82%	84%
2.5	When you first arrived, did you have any problems?	90%	56%	82%	58%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	40%	40%	36%	42%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	55%	83%	75%	78%
3.5	Have you had an induction at this prison?	96%	100%	93%	100%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	52%	78%	65%	73%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	38%	41%	39%	41%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	48%	71%	64%	66%
	- Can you shower every day?	75%	91%	78%	91%
	- Do you have clean sheets every week?	59%	76%	79%	72%
	- Do you get cell cleaning materials every week?	52%	67%	54%	65%
	- Is it normally quiet enough for you to relax or sleep at night?	61%	73%	73%	71%
	- Can you get your stored property if you need it?	21%	33%	41%	29%

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

Number of completed questionnaires returned

	Mental health problems	No mental health problems	Have a disability	Do not have a disability
	30	127	28	127

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	38%	53%	44%	51%
5.3	Does the shop / canteen sell the things that you need?	43%	40%	37%	41%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	76%	69%	78%	70%
6.2	Are there any staff here you could turn to if you had a problem?	69%	75%	74%	75%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	28%	27%	43%	23%
6.6	Do you feel that you are treated as an individual in this prison?	32%	45%	46%	42%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	60%	81%	71%	77%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	69%	67%	57%	68%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	28%	37%	41%	35%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	70%	53%	67%	55%
8.3	Are you able to use a phone every day (if you have credit)?	80%	90%	82%	90%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	78%	78%	100%	75%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	14%	7%	11%	7%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	7%	4%	7%	4%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	32%	33%	38%	31%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	60%	78%	68%	77%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	44%	54%	55%	52%
10.3	Is it easy for you to make a complaint?	47%	61%	63%	57%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	37%	42%	47%	40%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	36%	26%	35%	26%

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

Number of completed questionnaires returned

	Mental health problems	No mental health problems		
	30	127	Have a disability	Do not have a disability
			28	127

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	32%	45%	42%	42%
	- Nurse?	44%	58%	70%	52%
	- Dentist?	7%	13%	28%	7%
	- Mental health workers?	33%	17%	44%	15%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	36%		31%	36%
11.5	Do you think the overall quality of the health services here is very / quite good?	37%	38%	43%	37%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	29%	22%	29%	
SAFETY					
14.1	Have you ever felt unsafe here?	69%	35%	56%	39%
14.2	Do you feel unsafe now?	43%	18%	25%	22%
14.3	Not experienced bullying / victimisation by other prisoners	50%	69%	64%	66%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	44%	57%	48%	56%
14.5	Not experienced bullying / victimisation by members of staff	52%	76%	68%	71%
14.6	If you were being bullied / victimised by staff here, would you report it?	58%	65%	65%	62%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	37%	47%	44%	46%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	31%	36%	41%	34%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	31%	7%	26%	9%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	26%	5%	11%	7%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	67%	60%	67%	62%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	43%	45%	58%	44%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	25%	40%	42%	36%
PREPARATION FOR RELEASE					
<i>For those who expect to be released in the next 3 months:</i>					
18.3	Is anybody helping you to prepare for your release?	33%	43%	50%	40%
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?	59%	50%	57%	52%

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

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
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Number of completed questionnaires returned

25 and under	Over 25
32	133

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION		
1.2	Are you under 21 years of age?	13%
	Are you 50 years of age or older?	0%
1.3	Are you from a minority ethnic group?	62%
7.1	Are you Muslim?	42%
11.3	Do you have any mental health problems?	29%
12.1	Do you consider yourself to have a disability?	17%
19.2	Are you a foreign national?	83%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	10%
ARRIVAL AND RECEPTION		
2.3	When you were searched in reception, was this done in a respectful way?	84%
2.4	Overall, were you treated very / quite well in reception?	75%
2.5	When you first arrived, did you have any problems?	74%
	<i>For those who had any problems when they first arrived:</i>	
2.6	Did staff help you to deal with these problems?	35%
FIRST NIGHT AND INDUCTION		
3.3	Did you feel safe on your first night here?	75%
3.5	Have you had an induction at this prison?	100%
	<i>For those who have had an induction:</i>	
3.5	Did your induction cover everything you needed to know about this prison?	63%
ON THE WING		
4.2	Is your cell call bell normally answered within 5 minutes?	31%
4.3	On the wing or houseblock you currently live on:	
	- Do you normally have enough clean, suitable clothes for the week?	67%
	- Can you shower every day?	94%
	- Do you have clean sheets every week?	66%
	- Do you get cell cleaning materials every week?	71%
	- Is it normally quiet enough for you to relax or sleep at night?	63%
	- Can you get your stored property if you need it?	19%

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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

25 and under	Over 25
32	133

Number of completed questionnaires returned

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	41%	52%
5.3	Does the shop / canteen sell the things that you need?	42%	39%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	53%	74%
6.2	Are there any staff here you could turn to if you had a problem?	72%	74%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	22%	27%
6.6	Do you feel that you are treated as an individual in this prison?	40%	44%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	73%	77%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	79%	62%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	31%	37%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	61%	56%
8.3	Are you able to use a phone every day (if you have credit)?	84%	89%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	79%	79%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	10%	7%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	10%	3%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	25%	34%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	79%	73%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	39%	56%
10.3	Is it easy for you to make a complaint?	58%	57%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	42%	40%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	29%	27%

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
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	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

	25 and under	Over 25
Number of completed questionnaires returned	32	133

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	36%	45%
	- Nurse?	61%	53%
	- Dentist?	7%	13%
	- Mental health workers?	27%	19%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	50%	25%
11.5	Do you think the overall quality of the health services here is very / quite good?	26%	41%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	40%	22%
SAFETY			
14.1	Have you ever felt unsafe here?	48%	40%
14.2	Do you feel unsafe now?	30%	19%
14.3	Not experienced bullying / victimisation by other prisoners	72%	66%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	40%	57%
14.5	Not experienced bullying / victimisation by members of staff	62%	74%
14.6	If you were being bullied / victimised by staff here, would you report it?	61%	66%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	30%	50%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	17%	40%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	17%	10%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	14%	6%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	60%	63%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	50%	45%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	39%	39%
PREPARATION FOR RELEASE			
<i>For those who expect to be released in the next 3 months:</i>			
18.3	Is anybody helping you to prepare for your release?	33%	47%
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?	38%	57%

HMP Maidstone 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:
 - responses of prisoners from traveller communities are compared with those of prisoners not from traveller communities
 Please note that these analyses are based on summary data from selected survey questions only.

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

	Green shading shows results that are significantly more positive than the comparator
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Number of completed questionnaires returned

Traveller	Non-traveller
16	136

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 25 years of age?	20%	20%
	Are you 50 years of age or older?	0%	8%
1.3	Are you from a minority ethnic group?	53%	58%
7.1	Are you Muslim?	25%	31%
11.3	Do you have any mental health problems?	20%	21%
12.1	Do you consider yourself to have a disability?	47%	16%
19.2	Are you a foreign national?	87%	89%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)		
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	93%	82%
2.4	Overall, were you treated very / quite well in reception?	93%	81%
2.5	When you first arrived, did you have any problems?	60%	64%
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	40%	38%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	88%	75%
3.5	Have you had an induction at this prison?	100%	99%
<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	69%	70%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	50%	40%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	79%	61%
	- Can you shower every day?	81%	89%
	- Do you have clean sheets every week?	81%	71%
	- Do you get cell cleaning materials every week?	73%	61%
	- Is it normally quiet enough for you to relax or sleep at night?	94%	67%
	- Can you get your stored property if you need it?	44%	30%

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Number of completed questionnaires returned

	Traveller	Non-traveller
	16	136

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	50%	46%
5.3	Does the shop / canteen sell the things that you need?	50%	37%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	56%	69%
6.2	Are there any staff here you could turn to if you had a problem?	81%	74%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	44%	25%
6.6	Do you feel that you are treated as an individual in this prison?	40%	44%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	75%	74%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	50%	67%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	44%	33%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	44%	59%
8.3	Are you able to use a phone every day (if you have credit)?	94%	86%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	100%	77%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	20%	5%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	0%	5%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	40%	28%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	73%	74%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	47%	50%
10.3	Is it easy for you to make a complaint?	69%	56%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	38%	38%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	36%	26%

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	Traveller	Non-traveller
Number of completed questionnaires returned	16	136

HEALTH CARE		
11.1	Is it very / quite easy to see:	
	- Doctor?	60% 39%
	- Nurse?	64% 54%
	- Dentist?	21% 9%
	- Mental health workers?	31% 18%
<i>For those who have mental health problems:</i>		
11.4	Have you been helped with your mental health problems in this prison?	50% 31%
11.5	Do you think the overall quality of the health services here is very / quite good?	50% 34%
OTHER SUPPORT NEEDS		
<i>For those who have a disability:</i>		
12.2	Are you getting the support you need?	50% 21%
SAFETY		
14.1	Have you ever felt unsafe here?	50% 43%
14.2	Do you feel unsafe now?	38% 22%
14.3	Not experienced bullying / victimisation by other prisoners	67% 66%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	43% 55%
14.5	Not experienced bullying / victimisation by members of staff	80% 71%
14.6	If you were being bullied / victimised by staff here, would you report it?	71% 64%
BEHAVIOUR MANAGEMENT		
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	44% 46%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	31% 36%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	38% 9%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	20% 7%
EDUCATION, SKILLS AND WORK		
16.3	Do staff encourage you to attend education, training or work?	69% 60%
PLANNING AND PROGRESSION		
17.1	Do you have a custody plan?	43% 48%
<i>For those who have a custody plan:</i>		
17.3	Are staff helping you to achieve your objectives or targets?	40% 37%
PREPARATION FOR RELEASE		
<i>For those who expect to be released in the next 3 months:</i>		
18.3	Is anybody helping you to prepare for your release?	42% 44%
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?	38% 55%

HMP Maidstone 2018

Comparison of survey responses from different residential locations

In this table responses from the induction unit (Weald wing) are compared with those from the rest of the establishment.

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

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Number of completed questionnaires returned

Induction (Weald wing)	Rest of the establishment
47	119

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	2%	2%
	Are you 25 years of age or younger?	15%	20%
	Are you 50 years of age or older?	6%	10%
	Are you 70 years of age or older?	0%	1%
1.3	Are you from a minority ethnic group?	44%	64%
1.4	Have you been in this prison for less than 6 months?	70%	39%
1.5	Are you currently serving a sentence?	98%	97%
	Are you on recall?	0%	2%
1.6	Is your sentence less than 12 months?	16%	8%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	0%
7.1	Are you Muslim?	17%	35%
11.3	Do you have any mental health problems?	16%	20%
12.1	Do you consider yourself to have a disability?	18%	19%
19.1	Do you have any children under the age of 18?	39%	47%
19.2	Are you a foreign national?	96%	86%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	9%	12%
19.4	Have you ever been in the armed services?	22%	19%
19.5	Is your gender male or non-binary?	0%	2%
19.6	Are you homosexual, bisexual or other sexual orientation?	5%	1%
19.7	Do you identify as transgender or transsexual?	7%	5%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	28%	22%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	68%	64%
2.3	When you were searched in reception, was this done in a respectful way?	89%	83%
2.4	Overall, were you treated very / quite well in reception?	85%	83%

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Number of completed questionnaires returned

	Induction (Weald wing)	Rest of the establishment
	47	119

2.5	When you first arrived, did you have any problems?	65%	62%
2.5	Did you have problems with:		
	- Getting phone numbers?	20%	14%
	- Contacting family?	26%	15%
	- Arranging care for children or other dependents?	0%	4%
	- Contacting employers?	4%	4%
	- Money worries?	37%	15%
	- Housing worries?	9%	11%
	- Feeling depressed?	20%	25%
	- Feeling suicidal?	9%	6%
	- Other mental health problems?	15%	14%
	- Physical health problems?	20%	8%
	- Drugs or alcohol (e.g. withdrawal)?	7%	3%
	- Getting medication?	22%	11%
	- Needing protection from other prisoners?	9%	3%
	- Lost or delayed property?	33%	18%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	43%	38%
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	48%	38%
	- Toiletries / other basic items?	72%	56%
	- A shower?	57%	51%
	- A free phone call?	30%	28%
	- Something to eat?	63%	76%
	- The chance to see someone from health care?	46%	54%
	- The chance to talk to a Listener or Samaritans?	22%	23%
	- Support from another prisoner (e.g. Insider or buddy)?	22%	32%
	- None of these?	9%	7%
3.2	On your first night in this prison, was your cell very / quite clean?	64%	40%
3.3	Did you feel safe on your first night here?	83%	73%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	47%	57%
	- Free PIN phone credit?	32%	35%
	- Numbers put on your PIN phone?	64%	58%
3.5	Have you had an induction at this prison?	100%	97%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	76%	71%

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Number of completed questionnaires returned

Induction (Weald wing)	Rest of the establishment
47	119

ON THE WING			
4.1	Are you in a cell on your own?	55%	93%
4.2	Is your cell call bell normally answered within 5 minutes?	53%	35%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	64%	65%
	- Can you shower every day?	92%	88%
	- Do you have clean sheets every week?	78%	72%
	- Do you get cell cleaning materials every week?	65%	64%
	- Is it normally quiet enough for you to relax or sleep at night?	69%	70%
	- Can you get your stored property if you need it?	34%	32%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	64%	64%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	80%	53%
5.2	Do you get enough to eat at meal-times always / most of the time?	61%	46%
5.3	Does the shop / canteen sell the things that you need?	38%	40%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	75%	69%
6.2	Are there any staff here you could turn to if you had a problem?	72%	75%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	19%	30%
6.4	Do you have a personal officer?	91%	92%
<i>For those who have a personal officer:</i>			
6.4	Is your personal or named officer very / quite helpful?	31%	44%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	11%	14%
6.6	Do you feel that you are treated as an individual in this prison?	47%	41%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	61%	58%
	If so, do things sometimes change?	54%	23%
FAITH			
7.1	Do you have a religion?	94%	93%
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	76%	77%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	54%	72%
7.4	Are you able to attend religious services, if you want to?	86%	85%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	30%	40%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	57%	56%
8.3	Are you able to use a phone every day (if you have credit)?	94%	86%
8.4	Is it very / quite easy for your family and friends to get here?	26%	29%
8.5	Do you get visits from family/friends once a week or more?	13%	21%
<i>For those who get visits:</i>			
8.6	Do visits usually start and finish on time?	60%	59%
8.7	Are your visitors usually treated respectfully by staff?	90%	75%

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Number of completed questionnaires returned

Induction (Weald wing)	Rest of the establishment
47	119

TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	91%	96%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
9.1	Are these times usually kept to?	79%	51%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	7%	7%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	5%	4%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	7%	10%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	0%	0%
9.4	Do you have time to do domestics more than 5 days in a typical week?	73%	57%
9.5	Do you get association more than 5 days in a typical week, if you want it?	61%	60%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	76%	62%
9.7	Do you typically go to the gym twice a week or more?	80%	77%
9.8	Do you typically go to the library once a week or more?	63%	67%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	31%	33%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	71%	75%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	63%	48%
	Are applications usually dealt with within 7 days?	60%	42%
10.3	Is it easy for you to make a complaint?	52%	61%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	44%	40%
	Are complaints usually dealt with within 7 days?	30%	35%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	29%	28%

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Number of completed questionnaires returned

Induction (Weald wing)	47	Rest of the establishment	119
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<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	34%	46%
	Attend legal visits?	33%	43%
	Get bail information?	16%	17%
<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?	50%	57%
HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	39%	44%
	- Nurse?	49%	59%
	- Dentist?	14%	11%
	- Mental health workers?	14%	22%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	38%	56%
	- Nurse?	47%	60%
	- Dentist?	9%	29%
	- Mental health workers?	17%	28%
11.3	Do you have any mental health problems?	16%	20%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	13%	43%
11.5	Do you think the overall quality of the health services here is very / quite good?	27%	44%
OTHER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	18%	19%
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	14%	31%
12.3	Have you been on an ACCT in this prison?	5%	7%
<i>For those who have been on an ACCT:</i>			
12.4	Did you feel cared for by staff?	100%	25%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	23%	39%
ALCOHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	4%	9%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	0%	80%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	13%	12%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	9%	7%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	4%	10%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	33%	65%
13.7	Is it very / quite easy to get illicit drugs in this prison?	7%	18%
13.8	Is it very / quite easy to get alcohol in this prison?	13%	15%

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Number of completed questionnaires returned

	Induction (Weald wing)	Rest of the establishment
	47	119

SAFETY			
14.1	Have you ever felt unsafe here?	34%	46%
14.2	Do you feel unsafe now?	20%	22%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	13%	21%
	- Threats or intimidation?	7%	14%
	- Physical assault?	2%	6%
	- Sexual assault?	0%	2%
	- Theft of canteen or property?	20%	14%
	- Other bullying / victimisation?	16%	5%
	- Not experienced any of these from prisoners here	69%	65%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	55%	53%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	13%	21%
	- Threats or intimidation?	11%	16%
	- Physical assault?	7%	8%
	- Sexual assault?	0%	1%
	- Theft of canteen or property?	4%	4%
	- Other bullying / victimisation?	9%	7%
	- Not experienced any of these from staff here	78%	69%
14.6	If you were being bullied / victimised by staff here, would you report it?	64%	63%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	50%	43%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	30%	39%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	11%	11%
	<i>For those who have been restrained in the last 6 months:</i>		
15.4	Did anyone come and talk to you about it afterwards?	0%	36%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	2%	9%
	<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>		
15.6	Were you treated well by segregation staff?	0%	70%
	Could you shower every day?	0%	60%
	Could you go outside for exercise every day?	0%	75%
	Could you use the phone every day (if you had credit)?	0%	67%

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Induction (Weald wing)	Rest of the establishment
47	119

Number of completed questionnaires returned

EDUCATION, SKILLS AND WORK		
16.1	In this prison, is it easy to get into the following activities:	
	- Education?	58% 61%
	- Vocational or skills training?	33% 30%
	- Prison job?	51% 56%
	- Voluntary work outside of the prison?	2% 7%
	- Paid work outside of the prison?	2% 8%
16.2	In this prison, have you done the following activities:	
	- Education?	68% 88%
	- Vocational or skills training?	55% 67%
	- Prison job?	70% 91%
	- Voluntary work outside of the prison?	26% 38%
	- Paid work outside of the prison?	19% 41%
<i>For those who have done the following activities, do you think they will help you on release:</i>		
	- Education?	70% 72%
	- Vocational or skills training?	65% 62%
	- Prison job?	33% 51%
	- Voluntary work outside of the prison?	64% 47%
	- Paid work outside of the prison?	75% 54%
16.3	Do staff encourage you to attend education, training or work?	60% 66%
PLANNING AND PROGRESSION		
17.1	Do you have a custody plan?	33% 52%
<i>For those who have a custody plan:</i>		
17.2	Do you understand what you need to do to achieve your objectives or targets?	77% 77%
17.3	Are staff helping you to achieve your objectives or targets?	46% 36%
17.4	In this prison, have you done:	
	- Offending behaviour programmes?	33% 42%
	- Other programmes?	39% 40%
	- One to one work?	33% 34%
	- Been on a specialist unit?	33% 23%
	- ROTL - day or overnight release?	17% 25%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>		
	- Offending behaviour programmes?	50% 74%
	- Other programmes?	40% 67%
	- One to one work?	75% 67%
	- Being on a specialist unit?	50% 50%
	- ROTL - day or overnight release?	50% 55%

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

Induction (Weald wing)	Rest of the establishment
47	119

Number of completed questionnaires returned

PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	38%	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?	6%	24%
18.3	Is anybody helping you to prepare for your release?	33%	49%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	44%	60%
	- Getting employment?	47%	64%
	- Setting up education or training?	43%	68%
	- Arranging benefits?	43%	54%
	- Sorting out finances?	39%	63%
	- Support for drug or alcohol problems?	21%	35%
	- Health / mental Health support?	20%	37%
	- Social care support?	23%	39%
	- Getting back in touch with family or friends?	33%	62%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	29%	33%
	- Getting employment?	14%	28%
	- Setting up education or training?	33%	32%
	- Arranging benefits?	0%	27%
	- Sorting out finances?	0%	35%
	- Support for drug or alcohol problems?	0%	33%
	- Health / mental Health support?	0%	50%
	- Social care support?	0%	40%
	- Getting back in touch with family or friends?	40%	39%
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?	49%	54%