

Report on an unannounced inspection of

HMP & YOI New Hall

by HM Chief Inspector of Prisons

25 February–8 March 2019

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



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

Printed and published by:
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Canary Wharf
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Glossary of terms

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

Introduction

HMP & YOI New Hall is a women's prison near Wakefield. It is capable of holding 425 prisoners, but at the time of our inspection 395 prisoners were in residence. In keeping with most women's establishments, the prison fulfilled multiple functions and held prisoners ranging from those still on remand (about 13% of the population) up to those serving life (about 10% of the population). Over one-third (39%) were serving more than four years in prison.

At this inspection, our first since 2015, we found a prison that continued to be safe, respectful and purposeful, and where work to resettle and rehabilitate prisoners was improving.

Recorded violence in the prison was quite high, but nearly all incidents were very minor and overall most prisoners felt safe. Work to intervene and support those perpetrating threatening or anti-social behaviour, and the victims of such incidents, was effective. There had been three self-inflicted deaths since we last inspected. Most recommendations made by the Prisons and Probation Ombudsman following its enquires had been implemented, although one had, in our view, been interpreted disproportionately and was limiting prisoners' reasonable movement around the prison. Those at risk of self-harm and those with complex needs received good oversight and case management and those we spoke to were positive about the care they received.

A seeming over-reliance on the use of formal disciplinary processes was emergent and some punishments seemed excessive to us. Use of force had also increased substantially and several women had been in 'special accommodation' conditions on the house units, although records failed to adequately justify these decisions. The segregation unit was a clean but austere facility with a basic regime. One woman was held in segregation at the time of our visit.

The environment in the prison was good but the quality of accommodation was more variable, although reasonable overall. Staff-prisoner relationships were good although some prisoners expressed frustration at their inability to get some simple tasks done by staff. The prison would have benefited from greater visibility and support from managers. It was also our observation that the proportion of female staff was too low and was something that was a very stark and particular feature of the senior team. Work to promote equality was limited despite the best efforts of the equalities officer who was too often redeployed. Outcomes for minorities despite this, remained broadly consistent with others, and the mother and baby unit was excellent. Health care was similarly good but mental health provision was undermined by staff shortages among the mental health team. Substance misuse services were reasonable.

Prisoners experienced good time out of their cells, including association on Friday evenings which we now rarely see. The provision of learning, skills and work was improving with plans for a new curriculum and strong partnership working evident. Our colleagues in Ofsted assessed the overall effectiveness of provision as 'good', but undermined in part by quite poor levels of attendance. The coordination of resettlement work had improved greatly and offender management was clearly focused on risk reduction. Work in support of the resettlement pathways was also effective, including a range of offending behaviour initiatives – most notably Rivendell House, a self-contained unit that catered for women with a personality disorder.

New Hall remains a good prison, delivering effective outcomes for those held there. At the time of our inspection the prison was experiencing something of an interregnum with a temporary governor in post and new permanent governor about to be appointed. Our report highlights both the strengths and weaknesses of this prison. We trust the findings we detail will help the new governor to ensure momentum is maintained and continuous improvement sustained.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

April 2019

Fact page

Task of the establishment

A women's resettlement and local prison

Certified normal accommodation and operational capacity¹

Prisoners held at the time of inspection: 395

Baseline certified normal capacity: 416

In-use certified normal capacity: 416

Operational capacity: 425

Notable features from this inspection

According to the prison's data, 48% of prisoners had committed their offence to support the drug use of someone else.

Of the prisoners using the counselling service, only 4% said they had not suffered some form of abuse and 56% said they had experienced more than one kind of abuse. For example, 53% said they had suffered domestic violence and 44% said they had been raped.

In our survey, far more prisoners (60%) than in other prisons for women (48%) described themselves as being disabled and 78% of prisoners disclosed they had a mental health problem.

71% of the population were receiving services from the substance use psychosocial team.

39% of prisoners were serving long sentences of over four years.

Prison status and key providers

Public

Physical and mental health provider: Care UK Clinical Services Limited (Care UK)

Substance use provider: Care UK (clinical), Midland Partnering Foundation Trust (psychosocial)

Learning and skills provider: Novus

Community rehabilitation companies (CRCs): West Yorkshire CRC and South Yorkshire CRC

Escort contractor: GEOAmev

Prison department

Women's estate

Brief history

New Hall, which opened in 1933, was originally populated by prisoners from HMP Wakefield who were soon due to be released. In 1961, it became a senior detention centre for male young offenders. It became a young offender institution in the 1980s, and in 1987, a women's prison.

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.

Short description of residential units

Sycamore House	Segregation unit with 12 cells
Holly House	For 12 prisoners with complex issues
Rivendell House	30 en-suite rooms for women with personality disorders and those on the enhanced regime
Larch House	A 40-bed, semi-open unit for those aiming to progress to open conditions
Maple House	Mother and baby unit for up to nine women and 10 babies
Oak House	Mainstream residential unit and detoxification unit for some prisoners
Poplar House	First night centre (Poplar 1) and mainstream residential unit (Poplar 2)
Willow House	A and B wings – mainstream residential accommodation; C wing for residents serving life and long-term sentences.

Name of governor and date in post

Natalie McKee, October 2018

Independent Monitoring Board chair

Tony Ogden

Date of last full inspection

8–19 June 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
Resettlement	prisoners are prepared for their release into the community and effectively helped to reduce the likelihood of reoffending.

A4 The 2010 'Bangkok Rules'² set out internationally agreed standards that should govern the treatment of women in prison. These standards are directly applicable to women's prisons in England and Wales. Since September 2014 we have Expectations which specifically address the outcomes we expect for women in prison.

A5 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 the National Offender Management Service.

- **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.

² United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders.

- **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.
- A6 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.
- A7 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.
- A8 Since April 2013, all our inspections have been unannounced, other than in exceptional circumstances. This replaces the previous system of announced and unannounced full main inspections with full or short follow-ups to review progress. All our inspections now follow up recommendations from the last full inspection.
- A9 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

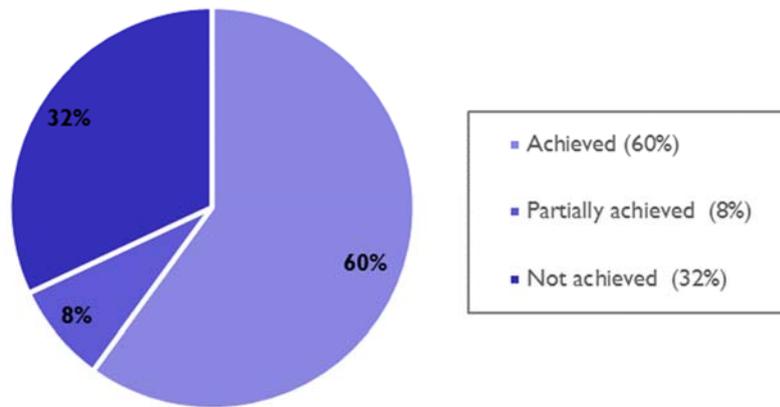
- A10 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow five sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of and conditions for women in prisons*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 6 collates all recommendations, housekeeping points 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.
- A11 Details of the inspection team and the prison population profile can be found in Appendices I and III respectively.
- A12 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix IV of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.³

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

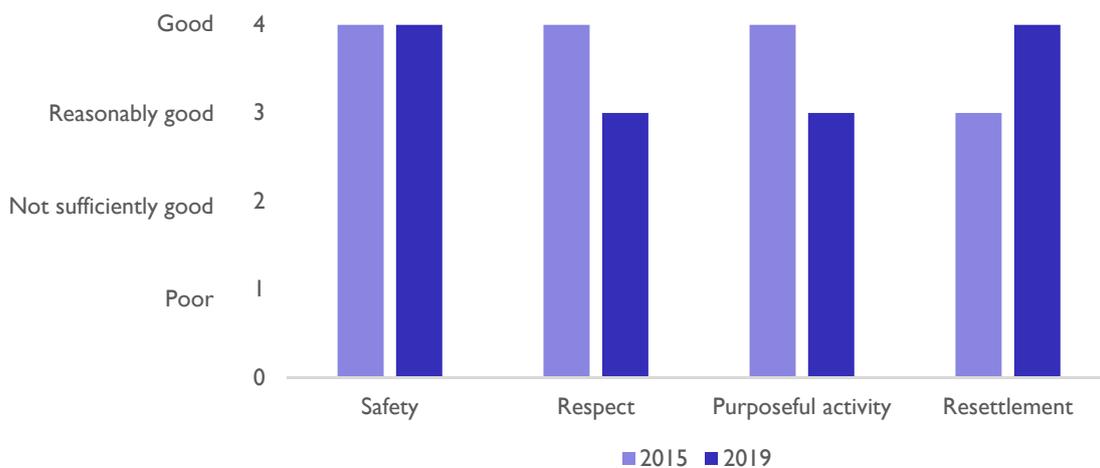
- S1 We last inspected HMP & YOI New Hall in 2015 and made 50 recommendations overall. The prison fully accepted 38 of the recommendations and partially (or subject to resources) accepted 10. It rejected two of the recommendations.
- S2 At this follow up inspection we found that the prison had achieved 30 of those recommendations, partially achieved four recommendations and not achieved 16 recommendations.

Figure 1: HMP & YOI New Hall progress on recommendations from last inspection (n=50)



- S3 Since our last inspection outcomes for prisoners stayed the same in the Safety healthy prison area and improved in the Resettlement healthy prison area. Outcomes had declined in the Respect and Purposeful activity healthy prison areas. Outcomes were good in Safety and Resettlement and reasonably good in Respect and Purposeful activity.

Figure 2: HMP & YOI New Hall healthy prison outcomes 2015 and 2019



Safety

S4 *Escort staff treated prisoners well, but cubicles in the secure vehicles were dirty and contained graffiti. The reception experience was helpful, and prisoners received reasonably good first night support. Most prisoners felt safe and, although levels of violence had increased, hardly any incidents were serious. Antisocial behaviour was managed well, but the incentives and earned privileges (IEP) scheme was not effective. Prisoners at risk of self-harm were positive about the support they received and those with complex personal needs were managed well. Some aspects of security were disproportionate and the use of force was high. The use of special accommodation needed better oversight and the regime in the segregation unit was limited. Illicit drugs were too easily available, but measures to address drug use had improved and were good. **Outcomes for prisoners were good against this healthy prison test.***

S5 *At the last inspection in 2015 we found that outcomes for prisoners in New Hall were good against this healthy prison test. We made 11 recommendations in the area of safety. At this follow-up inspection we found that four of the recommendations had been achieved, one had been partially achieved and six had not been achieved.*

S6 Fewer prisoners arrived in reception late in the evening compared with our previous inspection, and prisoners had more time to settle in before being locked up on their first night. Escort staff treated prisoners well, but cubicles in the secure vehicles were dirty and contained graffiti. Person escort records did not contain sufficient detail on prisoners' potential risks. In our survey, almost all prisoners said they had problems when they first arrived and almost two thirds said they felt depressed. However, almost three-quarters said they felt safe on their first night. Overall, reception processes were efficient and well delivered. Hand-cuffing and searching were proportionate. Initial safety risk assessments were robust and first night procedures were reasonably good. Induction started promptly and a tracking system ensured all prisoners completed it. Although we thought the induction was comprehensive, less than half of prisoners said it covered everything they needed to know.

S7 The prison remained safe and only 16% of prisoners felt unsafe at the time of our inspection. Although the level of recorded assaults was high, almost all incidents were minor. Violent incidents were recorded well, but trend analysis was insufficient and had not informed the violence reduction strategy. In our survey, 46% of prisoners said they had felt threatened or intimidated by other prisoners and much of this was linked to debt. Challenge, support and intervention plans (to help manage the most violent prisoners and support those who are most vulnerable) were used effectively to address a range of behavioural issues. Plans included interventions for perpetrators of violence or victimisation and support for victims. However, peer support was not well developed. The IEP scheme was not effective and too few prisoners said it encouraged them to behave well.

S8 There had been three self-inflicted deaths since June 2015. Most of the Prisons and Probation Ombudsman recommendations had been addressed, but we were concerned that the response to one recommendation was disproportionate. There was no specific strategy or action plan for managing self-harm, but data were analysed so trends and themes could be monitored. A small number of prisoners was responsible for a significant proportion of self-harm incidents and a third had been carried out by those with complex needs living in Holly House. Most staff knew about the issues linked to prisoners' self-harming, and assessment care in custody and teamwork (ACCT) case management for prisoners at risk of suicide or self-harm had improved. Prisoners we spoke to who were subject to ACCT case management were positive about the support and care they received. There were too few

Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners), making access problematic.

- S9 Prisoners at risk of abuse and those with complex personal needs continued to be identified. The specialist intervention meeting provided good multidisciplinary oversight. Prisoners involved with the offender personality disorder pathway (a programme that provides psychologically informed services for highly complex and challenging offenders) were well managed. However, the therapeutic nature of Holly House, which also managed prisoners with complex needs, was being undermined because prisoners spent too little time out of their cells. Multidisciplinary involvement in the unit had improved as a result of greater input from health care staff.
- S10 The security committee, which met every month, was effective, but too many incidents were not recorded on the incident reporting system. Some disproportionate security arrangements affected the way prisoners were treated, for example, their movement to and from activities was overly restricted. Our survey results showed that drugs were too easily available and the mandatory drug testing positive rate was high. However, too few suspicion drug tests were requested or undertaken.
- S11 The number of adjudications had trebled since our previous inspection and sanctions were not always proportionate. The number of incidents involving force had doubled since our previous inspection. A quarterly review of use of force data was carried out, but little action was taken as a result. Written records of use of force were good and showed clear attempts to de-escalate the situation. However, we were concerned by the techniques used in one case, which the prison's review had not acknowledged. Some prisoners had been in special accommodation conditions in the house units, but the rationale for holding them there was not adequately recorded or monitored. The segregation unit was reasonably clean, but the regime was limited. Segregation reviews were well attended, but staff did not always implement reintegration plans.
- S12 Substance use services were reasonably good, prescribing was safe and regular reviews were carried out. The range of psychosocial support had improved and was now good.

Respect

S13 *Living conditions and access to many basics amenities were good, and in-cell phones were being installed. Responses to applications were not monitored to ensure they were timely. Working relationships between staff and prisoners remained a strength, but some prisoners described their frustration at not being able to resolve simple requests with staff. Outcomes for those from minority groups remained good, despite insufficient strategic support and a lack of needs analysis and data monitoring. The mother and baby unit was excellent. Complaints were well managed. Many aspects of health care remained good, but staff shortages in the mental health team significantly undermined the provision. The food and shop provision were both good. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S14 *At the last inspection in 2015 we found that outcomes for prisoners in New Hall were good against this healthy prison test. We made 22 recommendations in the area of respect.⁴ At this follow-up inspection we found that 16 of the recommendations had been achieved, one partially achieved and five had not been achieved.*

⁴ This included recommendations about the incentives and earned privileges scheme which, in our updated Expectations (Version 4, 2012), now appear under the healthy prison area of safety.

- S15 The prison's external areas remained pleasant. Living conditions were variable but good overall, and most prisoners lived in single cells. Access to many of basic amenities were good and in-cell phones were being installed. In our survey, significantly fewer prisoners (66%) than in other prisons (95%) said they could shower every day, but we could not find a reason for this. Laundry facilities were very good. Emergency call bells in cells were answered promptly. The application process had improved, but the timeliness of responses was still not monitored.
- S16 Working relationships between staff and prisoners remained positive and in our survey, most prisoners said there was a member of staff they could turn to and most staff were respectful. Interactions we saw were polite and friendly. However, some prisoners expressed frustration about not being able to get simple tasks done, and there was often a lack of management oversight and supervision of staff on the wings. Staff in the specialist units (Rivendell, Maple and Holly houses) knew about the prisoners in their care and showed exceptional understanding and patience. The proportion of female prison officers was too low.
- S17 Far too little strategic priority was given to promoting equality and diversity across the prison. For example, there was no equality action team, no up-to-date needs analysis and very limited ongoing data monitoring. Prisoners were positive about the work of the equality officer, but persistent redeployment to other duties, limited the amount of work undertaken. Replies to discrimination incident reporting forms were of a reasonably good quality, but too many investigations were delayed, which undermined the system's effectiveness. Prisoner equality representative roles were being developed and some support groups were in place, but attendance at the forums was often poor.
- S18 Our survey showed very few negative outcomes for prisoners from minority groups, and those we spoke to were generally positive about how they were treated. Most prisoners with protected characteristics received reasonable support, but formal interpretation services for prisoners with little English were rarely used on a day-to-day basis. Provision for mothers and their babies in Maple House was very good. The chaplaincy supported prisoners of all faiths, but the team did not have the capacity to cover all their statutory duties, such as attending ACCT reviews.
- S19 The number of complaints had increased since the previous inspection. Prisoners had good access to complaint forms and knew how to make a complaint. Recording, monitoring and quality assurance were good. Few prisoners asked for help to apply for bail and it was unclear why. Access to legal visits was adequate.
- S20 Overall, many aspects of health care remained good. Clinical governance and partnership working were reasonable. There was a welcome range of primary care services, which included specific women's services and effective nurse-led clinics for long-term conditions and wound care. Appropriate antenatal and post-natal care was available and further developments were in progress to enhance the provision. Pharmacy services and medicines management were reasonably good, although a few prisoners had encountered delays in receiving their medication. Dental services were generally effective. More than three quarters of the population reported having a mental health problem. Despite some good individual care, staff vacancies had led to significant gaps in the mental health provision. Social care arrangements were well developed and joint work with the local authority was effective.
- S21 In our survey, significantly more prisoners than the comparator (56% compared with 41%) said the standard of the food was good. Serveries were clean and well supervised, but the service at the communal dining facility in Willow House was chaotic and rushed. The shop

was well managed and prisoners in our survey were far more positive than at the previous inspection and compared with other similar prisons.

Purposeful activity

S22 *Time out of cell was reasonable for most prisoners. It included Friday evening association, which we rarely see in other prisons. Ofsted rated the learning and skills provision as good overall. There was a clear plan for a new curriculum, partnership working was strong and the number of prisoners withdrawing from activities was monitored. The self-assessment was accurate, but attendance was not high enough and we found too many prisoners in the units during the core working day instead of being at their allocated activity. Achievement levels were good. The library and physical education (PE) provision were positive. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S23 *At the last inspection in 2015 we found that outcomes for prisoners in New Hall were good against this healthy prison test. We made seven recommendations in the area of purposeful activity. At this follow-up inspection we found that four of the recommendations had been achieved, one had been partially achieved and two had not been achieved.*

S24 *Time out of cell remained reasonably good for most prisoners but those who worked full time could only access outdoor exercise on a weekend. Association was provided on a Friday evening, which we rarely see in other prisons. We found too many prisoners in the residential units during the core working day when some of them should have been attending activities.*

S25 *Prison and education and training leaders worked well together and had plans to introduce a new curriculum from April 2019. The plan was informed by prisoners' needs and local labour market information. Partnership work with employers, education providers and community groups was strong. Managers monitored the number of prisoners who started programmes but did not complete them. The self-assessment of the standard of the provision was accurate and the quality improvement plan identified key priorities. However, it focused too much on the action taken rather than the outcomes achieved. Allocation and monitoring processes were not sophisticated enough to ensure that leaders had sufficient oversight or that attendance at activities was high enough.*

S26 *Most teaching and instructing was good. Education classes were planned and delivered well. Outreach work in Holly House, the segregation unit and workshops was effective. Peer mentors were used well. Teachers provided constructive feedback on prisoners' work. Most workshops and the prison kitchen offered accredited training, but the uptake was too low. A few teachers did not sufficiently challenge more able learners, which meant they did not make the progress they were capable of.*

S27 *Prisoners' behaviour in education and work was generally good. The wide range of 'enrichment' activities successfully developed prisoners' well-being and improved their self-esteem and involvement in education. External partners were used well to support these activities. Attendance at activities was not consistently good. Too often prisoners missed their allocated activity to take part in other activities. Too few prisoners used employment portfolios effectively enough to record their progress.*

S28 *Of those who completed their courses, the proportion who achieved qualifications was high in most subjects. A large number of prisoners completed gym-based qualifications, such as personal training at level 3 and GP referral certificates at level 4. Prisoners developed a good*

range of vocational skills in the gardens, kitchens and the Max Spielmann Academy. Standards of work were generally good. Although the number of prisoners achieving maths and English had improved, it was still not good enough. Achievement rates in customer service at level 2 were too low.

- S29 Most prisoners were members of the library, but its use was not sufficiently monitored. The library had a large, varied stock. It also ran Turning Pages (a mentoring scheme to help prisoners learn to read) and Storybook Mums (where prisoners record stories for their children).
- S30 PE provision was good. The gym floor was being repaired and the facilities were now in good condition. The artificial sports pitch was no longer in use, which meant few team activities were available.

Resettlement

S31 *The strategic coordination of resettlement work had improved and partnership working was now stronger. Offender management work was more meaningful and focused on risk. Home detention curfew (HDC) processes were undermined by external barriers. Release on temporary licence (ROTL) was still not used well enough to support resettlement. Public protection work had improved and was effective. Allocation work was sound. Pathway work was positive. However, too few prisoners were released into sustainable accommodation or went on to education, training and employment placements. The range of help for the large number of prisoners who had experienced abuse and trauma was very positive and the range of offending behaviour work was appropriate. Rivendell House was an efficiently run, well-equipped, self-contained residential unit, which catered for up to 16 prisoners who were participating in a personality disorder programme. **Outcomes for prisoners were good against this healthy prison test.***

S32 *At the last inspection in 2015 we found that outcomes for prisoners in New Hall were reasonably good against this healthy prison test. We made 10 recommendations in the area of resettlement. At this follow-up inspection we found that six of the recommendations had been achieved, one had been partially achieved and three had not been achieved.*

- S33** Resettlement work across teams, at management level and in day-to-day case management was well coordinated. A number of third-sector agencies were well embedded in the work of the establishment and made important contributions to resettlement.
- S34** Prisoners were allocated to an offender supervisor based on their risk of harm and probation officers managed those posing a higher risk of harm. Levels of contact between probation officer offender supervisors and prisoners were good. Casework centred well on prisoners' risks and needs and there were some examples of very good work. A number of prison officer offender supervisors maintained reasonably good levels of contact with prisoners, and there were examples of supportive and well-focused work, but in other cases contact was not proactive enough. Recording on P-Nomis (the Prison Service IT system) was good. HDC procedures were carried out efficiently, but external problems sometimes caused delays. Greater priority had been given to ROTL, but the number being released was still very low and the range of work that prisoners could undertake through ROTL was very limited.
- S35** Public protection work was now well managed and multi-agency public protection arrangement management levels were identified well. New measures had been introduced to ensure prisoners posing a public protection risk were identified promptly and contact

- restrictions applied. The inter-departmental risk management team meeting was effective, but it did not have enough consistent input from health care staff.
- S36 Allocation processes were carried out well, and compared to 2015, a much smaller number of prisoners assessed as suitable for open conditions were held at New Hall. Offender management staff supported those serving indeterminate sentences well. They were consulted on a quarterly basis, but there were no self-catering facilities and Willow House's C wing had hardly any recreational space for them.
- S37 The community rehabilitation companies' resettlement casework, undertaken mainly through St Giles Trust, was impressive and timely. A good range of services was offered. St Giles Trust staff worked closely with over 20 external agencies, whose representatives also visited the prison for monthly resettlement mornings.
- S38 Visiting facilities were good. The atmosphere in the visits hall was calm and relaxed and there was a well-equipped space for children and teenagers. The family support worker was well established and helped prisoners who found it difficult to maintain contact with their children. Several visitors complained about problems booking visits when using the national phone line. In our survey, only 73% of prisoners who had credit said they could use the phone every day, which was lower than in other prisons. The installation of in-cell phones had begun to address this problem.
- S39 Most prisoners had suffered some form of trauma or abuse and there was an excellent range of help within the prison delivered by a range of partners. Although a significant number of prisoners benefited from these services, the arrangements did not have sufficiently good management oversight or direction.
- S40 Only 67% of prisoners were released to suitable sustainable accommodation. Some HDC releases were delayed due to external factors, including the lack of Bail Accommodation and Support Service places. Education, training and employment support was available prior to release and included careers advice, as well as support from training agency Novus Works. However, very few prisoners secured employment, training or education on release.
- S41 A health care discharge clinic was available before prisoners' release and those on medication were given one week's supply. The mental health team was developing links with community mental health teams and the prison worked well with community drug and alcohol services.
- S42 Prisoners had a high level of need for support with finance. Jobcentre Plus worked effectively to help set up bank accounts, obtain ID and prepare universal credit applications.
- S43 A reasonable range of offence-focused work was offered as well as some small-scale Restorative Justice work (where offenders consider the consequences of their offending for all parties and can offer an apology or reparation). The psychology team drew up guidance for staff on the practicalities of managing prisoners with challenging behaviour.
- S44 Rivendell House was an efficiently run, well-equipped, self-contained residential unit, which catered for up to 16 prisoners who were participating in a personality disorder programme. The unit was staffed by carefully selected officers who worked with clinical staff based in the unit to help create a positive ethos.

Main concern and recommendation

S45 Concern: More than three-quarters of the population reported having a mental health problem. Despite some good individual care and responses to urgent needs, staff vacancies had led to significant gaps in the provision. Over half the posts within the mental health team were vacant, assessments took too long, no group work was available and some reviews for those with more serious problems had been delayed.

Recommendation: The mental health service should be improved. There should be sufficient staff to ensure that all prisoners with mental health needs receive the range of support they need, including ongoing group work and regular reviews.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

- I.1 Most prisoners arrived at the prison before 7pm, which enabled them to receive more thorough first night support. This was an improvement since our last inspection.
- I.2 Prisoners said escort staff were polite and interacted positively with them. Cellular escort vehicles had adequate supplies of first aid equipment and refreshments, but those we inspected were dirty and contained graffiti. Prisoners and staff told us that women continued to be transported in escort vehicles with men, which was inappropriate. Prisoners were not routinely handcuffed when leaving escort vehicles.
- I.3 In the sample of person escort records inspected, the information provided was not sufficiently detailed. Prisoners' risk markers, including violence and history of suicide and self-harm, were routinely outlined but not dated, making it difficult to assess their immediate risks.

Early days in custody

Expected outcomes:

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

- I.4 In our survey, 91% of prisoners reported having personal problems, which was significantly higher than at the previous inspection (73%), and 63% felt depressed. Despite this, 74% of prisoners said they had felt safe on their first night in the prison.
- I.5 The reception environment was clean and well maintained and staff completed their tasks efficiently, interacting positively with new arrivals. Searches were proportionate and carried out respectfully. Initial risk assessments focused sufficiently on prisoners' welfare and vulnerabilities and were conducted in private. In our survey, 80% of prisoners said they were treated very or quite well in reception.
- I.6 The first night centre was decent. First night cells were clean and well equipped. They were prepared in advance and prisoners had reasonable access to toiletries and clean bedding. In our survey, 71% of prisoners said they could make a free phone call and more than at the previous inspection (49% compared with 32%) said they were offered a shower before they were locked up on their first night. Staff in the unit went through a first night checklist and carried out a health screening for all new arrivals. Most first night procedures were good. Prisoners with substance misuse problems received additional first night checks by the nurse, but other new arrivals did not receive additional welfare checks by prison staff during their first night, which was a concern given most prisoners had a range of personal problems on arrival.

- 1.7** Although three peer supporters provided advice and guidance to prisoners in reception, there were no peer workers in the first night centre. Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) were not routinely in reception or in the first night centre and were only available by request. In our survey, significantly fewer prisoners than at the previous inspection (31% compared with 53%) said they had the chance to speak to a Listener or the Samaritans before they were locked up on their first night.
- 1.8** Induction began on the working day following arrival. Unit staff went through a comprehensive wing induction booklet with prisoners. Health care practitioners undertook a second health interview and both included additional checks to identify any further potential risks or vulnerabilities. These checks were supplemented by a presentation in the centre every other week day, involving peer workers. Most prisoners said their induction had taken place promptly and attendance was monitored. However, in our survey, only 44% of respondents said it covered everything they needed to know. Prisoners received an information booklet which they could keep, but it was only available in English.

Recommendation

- 1.9 Additional night-time welfare checks should be carried out on all new prisoners in the first night centre.**

Safe and supportive relationships

Expected outcomes:

Safe and supportive relationships are encouraged. Everyone feels and is safe from victimisation (which includes verbal and racial abuse, theft, violence and assault or threats). Prisoners are protected from victimisation through active and fair systems known to staff, prisoners and visitors, and which inform all aspects of the regime. Any sanctions on behaviour are applied fairly, transparently and consistently.

- 1.10** In our survey, only 16% of prisoners said they felt unsafe at the time of our inspection and, although there had been 76 assaults in the previous six months, few were serious. Incidents were well recorded; however, data analysis was not being used sufficiently to develop the prison's violence reduction strategy.
- 1.11** In our survey, 59% of prisoners said they had experienced some form of victimisation from other prisoners – 46% said they had felt threatened or intimidated and a similar proportion said they had experienced verbal abuse. During the inspection, we found much of this was linked to debt for vapes and vaping capsules. Challenge, support and intervention plans (CSIPs) (used to manage the most violent prisoners and support those who are the most vulnerable) had been implemented in November 2018 and early signs showed they were an effective way of managing a good range of behavioural issues. There was too little analysis of outcomes to evidence the effectiveness of the work aimed at reducing victimisation. The CSIP approach included meaningful interventions for perpetrators and good support for victims.
- 1.12** Since the introduction of CSIPs, there had been 118 referrals, 10 of whom had progressed to a full CSIP plan. We were satisfied that the referral process dealt with most incidents and detailed investigations were taking place as a result.
- 1.13** Although prisoners attended the monthly safer custody meeting and violence was an agenda item, prisoners were not sufficiently consulted. The prison did not offer any peer support –

there were no violence reduction or anti-bullying representatives and no trained mediators. Visitors had not been surveyed about safety. A survey on bullying had been completed with prisoners, but the results had not been analysed.

- I.14 An incentives and earned privileges (IEP) policy was in place, but details were not available in different languages or widely advertised. Too few prisoners said it encouraged them to behave well. We found that the differences between levels were not significant enough to promote good behaviour. Most staff we spoke to felt the scheme did not work and they used more formal options instead, such as adjudications. IEP reviews were not always undertaken when they were needed.
- I.15 All new prisoners were placed on the entry level of the IEP scheme, regardless of their level at their previous institution, and had to remain on that level for at least 14 days.

Recommendation

- I.16 **Data about violence should be analysed thoroughly and used to develop the violence reduction strategy.**

Self-harm and suicide prevention

Expected outcomes:

The prison provides a safe and secure environment which reduces the risk of self-harm and suicide. Vulnerable prisoners are identified at an early stage and given the necessary support. All staff are aware of and alert to vulnerability issues, are appropriately trained and have access to proper equipment and support.

- I.17 There had been three self-inflicted deaths since the previous inspection. Investigations by the Prisons and Probation Ombudsman had identified some areas of significant concern and most recommendations had been addressed. Action plans were used to monitor the recommendations and regular reviews ensured their implementation was overseen. However, we were concerned that one recommendation on the supervision of prisoners to and from activities had not been correctly implemented and had led to disproportionate restrictions on prisoners' daily movement. (See paragraph I.28.)
- I.18 The safety strategy, dated December 2018, included a focus on self-harm procedures and trends, and themes were monitored through regular data analysis, but there was no action plan. The monthly safer custody meeting received and discussed the self-harm data analysis, but oversight of assessment, care in custody and teamwork (ACCT) case management data for prisoners at risk of suicide or self-harm was insufficient. Senior staff did not always attend these meetings and there were no safer custody peer supporters during the inspection.
- I.19 There had been 359 incidents of self-harm in the six months prior to the inspection, which was higher than at the previous inspection but lower than in other women's prisons. The prison's figures indicated that in the previous six months, 34% of self-harm incidents were carried out by prisoners living in Holly House, which accommodated those with the most complex needs. On average, the data identified four prisoners each month as prolific self-harmers, carrying out five or more incidents. In the six-month period before the inspection, prisoners who often self-harmed accounted for 46% of all self-harm incidents.
- I.20 There had been 419 ACCTs opened in the six months before the inspection, which was higher than when we last inspected and compared with other women's prisons. A new ACCT case management system had been introduced and all those subject to the process

now had a named case manager in their residential unit. Most staff understood self-harm triggers and prisoners' individual care needs. The majority of care maps included targets and specific action, but too many daily entries were purely observational and lacked any detail of staff's interactions with prisoners. Prisoners we spoke to were positive about the support they received from staff. As at the previous inspection, not all ACCT reviews were multidisciplinary.

- I.21** The number of trained Listeners had decreased from 16 at the previous inspection to five, which was too few, and 24-hour cover was not possible. In our survey, significantly fewer prisoners than in other women's prisons (34% against 47%) said it was very or quite easy to speak to a Listener if they wanted to.

Recommendation

- I.22 Prisoners should have 24-hour access to Listeners.** (Repeated recommendation I.38)

Safeguarding (protection of adults at risk) and prisoners with complex needs

Expected outcomes:

The prison promotes the welfare of all prisoners, particularly adults at risk, and protects them from all kinds of harm and neglect.⁵

- I.23** The prison had a comprehensive safeguarding policy and two named safeguarding lead members of staff. However, staff had only attended one local safeguarding adults board meeting in the community in the six months before the inspection. New Hall was still failing to ensure that the specific needs of its population were adequately represented at this forum. Since the previous inspection, one referral had been made via the national referral mechanism (a framework put in place in the UK in April 2009 to identify, protect and support victims of trafficking). Representatives from a range of services visited the prison and ran targeted sessions, which enabled them to identify those who had been trafficked.
- I.24** Prisoners at risk of abuse and those with complex personal needs continued to be identified. Those with complex needs were discussed every week at several meetings and there was a multidisciplinary approach to case management. A specialist intervention meeting took place twice a week and focused on the most complex cases. The meeting was well attended and prisoners' complex needs were addressed confidently and competently. Prisoners who had been placed in Rivendell House (see paragraph 4.37) or Holly House (see paragraph I.25) had detailed care plans, which focused sufficiently on their progress and, where appropriate, reintegration planning.
- I.25** Holly House consisted of a 12-bed unit that aimed to provide an integrated, multidisciplinary environment where the most vulnerable prisoners could receive support to reduce their risks and improve their outcomes. Most prisoners were referred to the unit by the mental health team because they could not cope with daily life in a residential unit elsewhere in the prison. We were concerned that the shortage of prison officers in the unit meant the most vulnerable prisoners in the prison were spending too much time isolated and locked in their cells. While there were some signs of improvements in multidisciplinary working in the unit,

⁵ We define an adult at risk as a person aged 18 years or over, 'who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'. 'No secrets' definition (Department of Health 2000).

more needed to be done to ensure it was well led and effective in supporting the most vulnerable.

Recommendation

- I.26 Prisoners with the most complex needs living in Holly House should not be locked in their cells during the core day; they should be provided with a constructive range of therapeutic interventions to help them cope.**

Security

Expected outcomes:

Physical and procedural security measures are specific to the risks in a women's prison. Security and good order are underpinned by effective security intelligence and positive staff-prisoner relationships. Prisoners are safe from exposure to substance use while in prison.

- I.27** The security committee met every month and was effective. The meeting was well attended by a range of staff, including those representing safer custody and residential units. A good monthly intelligence report supported security meetings, which looked at trends and analysis and tracked security objectives. The amount of intelligence that the security department had received in the previous six months had doubled since our previous inspection, but it was well managed. The centralised hub analyst system, an area-based security department, provided cover seven days a week, and there was no backlog of reports at the time of this inspection.
- I.28** Some security measures were disproportionate – prisoners' movements to and from activities had changed since our last inspection and was now overly restrictive (see paragraph I.17) and prisoners could only move around the site at set times during the day and under constant staff supervision. Most prisoners going on escort to external appointments were hand cuffed and were not assured that this decision was always fully justified by the risks presented in the assessment. Cell searching was intelligence-led only and most prisoners were strip-searched before a cell search.
- I.29** There were no prisoners on closed visits during our inspection. However, seven prisoners in the previous 12 months had been on closed visits, but not always for reasons directly related to visits. There was also little evidence of prisoners receiving written notification of closed visits or of regular reviews being held.
- I.30** Measures to address drug use had improved and were now good. However, in our survey, 53% of prisoners said drugs were too easily available. The mandatory drug testing (MDT) rate was high at 9.25%, against a target of 6%. In addition, suspicion drug tests did not always take place when supporting intelligence indicated they were required, which might have further increased the failure rate.
- I.31** The incident reporting system (IRS) was not being used effectively – a recent audit reported that in the previous six months only 53% of reportable incidents were recorded on it.

Recommendations

- I.32 Prisoners' movements to and from activities should be less restricted unless an individual risk assessment demonstrates the need for additional control.**

- I.33 Suspicion drug tests should be completed when supporting intelligence considers them appropriate.**

Disciplinary procedures

Expected outcomes:

Disciplinary procedures are applied fairly and for good reason. Prisoners understand why they are being disciplined and can appeal against any sanctions imposed on them.

Disciplinary procedures

- I.34** The number of adjudications had trebled since our previous inspection and sanctions were not always proportionate. Of the records we examined, we found that alternative options were not always considered and some sanctions were too severe considering the offence. Use of cellular confinement was low and when used it was proportionate.
- I.35** Prisoners could access legal services and explain their version of events during adjudication hearings, which took place in relatively relaxed surroundings. Serious offences were generally referred to the police or an independent adjudicator. A quarterly adjudications standardisation meeting monitored a wide range of data.

The use of force

- I.36** The number of incidents involving force had doubled since our previous inspection, although the records we examined showed that most were minor, such as guiding holds (where a member of staff guides a prisoner by holding their arm).
- I.37** Written records of the use of force were good and demonstrated that staff attempted to de-escalate the situation. Records were all completed in full.
- I.38** We were concerned about the techniques used during one planned use of force, where other options should have been considered. We raised our concerns about the prisoner as she was held in controlling locks (which are designed to restrain a prisoner) for a prolonged period and asked the prison to review the CCTV footage. The prison's review had not acknowledged the issue.
- I.39** The prison held use of force meetings where incidents were reviewed. However, we found some reviews were not completed promptly and we were concerned to see a review was carried out three months after the incident. A quarterly review of use of force data took place, but the data were not evaluated fully to ensure recommendations could be identified and implemented.
- I.40** The special accommodation cell in the segregation unit had not been used since 2016; however, we found evidence of special accommodation conditions being used in units without sufficient oversight or accurate recording. According to separate paperwork that we viewed, they had been used on 16 separate occasions in the previous 12 months, but we only found proper records for five prisoners.

Recommendations

- I.41 Use of force data should be evaluated fully so that recommendations can be identified and implemented.**
- I.42 If special accommodation is used it should be accurately recorded and appropriately managed regardless of the location.**

Segregation

- I.43** The segregation and its facilities were reasonably clean. However, although exercise yards now had some gym equipment, they were still austere. There were some limited in-cell activities, such as distraction packs, and there was a small day room, but we found most prisoners spent too much time locked up. Access to basic amenities, such as phones, showers and exercise was reasonable and some prisoners could have a TV subject to their behaviour and the reasons for segregation.
- I.44** Safety algorithms (calculations of risk) were completed and prisoners received written explanations of why they had been segregated. Reviews took place and were well attended, but reintegration plans were not sufficiently well communicated to segregation staff, which meant they did not implement them in full.
- I.45** Only one prisoner was in the segregation unit during our inspection. However, records showed that staff had managed the very complex and challenging prisoner effectively for a prolonged period.

Substance use

Expected outcomes:

Prisoners with drug and/or alcohol problems are identified at reception and receive effective treatment and support throughout their stay in custody.

- I.46** The drug and alcohol strategy was supported by a coherent action plan that was regularly reviewed. It was being updated to take into account current issues in the prison. Partnership working was robust and the drug and alcohol recovery team (DART) consisted of Inclusion, which provided psychosocial interventions, and Care UK, which was responsible for clinical care. They had established strong joint working arrangements. Staffing was proportionate to needs, but some clinical vacancies were stretching capacity.
- I.47** The range of psychosocial interventions had improved since our previous inspection and was now good. Staff recognised that many prisoners were held for relatively short periods. Access was timely and support was flexible and tailored to individual needs. The provision included guided self-help, individual and group work, focused recovery programmes and access to peer mentors and self-help groups.
- I.48** Support for prisoners with drug and alcohol problems arriving at the prison was effective and prisoners could continue with their existing prescribing regimes or equivalent treatments. Very occasionally medical assessments were delayed on reception, but the continuous presence of qualified nurses ensured that prisoners were safely detoxified and effectively stabilised.
- I.49** The DART was supporting 282 prisoners (about 71% of the population) during the inspection and about 170 (43% of the population) were receiving opiate substitution therapy,

more than at our previous inspection. The main clinical intervention was methadone, but prescribing regimes were flexible. They were in line with national guidance and skilled clinical practitioners implemented them. Prescribing regimes also covered pregnant women, for whom multidisciplinary specialist support was available. All prisoners receiving support were involved in care decisions. Many cases involved a complex range of medication, including treatments for mental health and physical health problems and we found the support safe and effective. The administration of opiate substitution medication was well managed and supported effectively by officers.

- I.50** The team worked closely with primary care staff to organise targeted health screenings. Information about services and harm minimisation was good. Health promotion was part of all support activities.

Section 2. Respect

Residential units

Expected outcomes:

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

- 2.1** The prison's external areas remained pleasant. Living conditions varied from unit to unit, but were good overall and most prisoners lived in single cells. Access to many basic amenities was good. Living conditions in Rivendell House were very good and it had in-cell shower facilities.
- 2.2** There were minor maintenance issues in some of the cells, such as damaged flooring, but overall the standard of cells was good. Most had been personalised with soft furnishings and decorations. All the cells we saw had lockable cabinets and in-cells phones were being installed. Most of the units were bright and airy, but Willow House had cramped and limited association facilities. Staffing issues meant the opening of a large association area had been delayed.
- 2.3** In our survey, significantly fewer prisoners than in other prisons (66% compared with 95%) said they could shower every day, but we could not find a reason for this. There were sufficient showers in each residential unit and all were clean and in working order. There were some ongoing maintenance issues in the first night centre, but they did not appear to be affecting prisoners' access to the showers.
- 2.4** Laundry facilities were very good. All the units had dedicated laundry days on each landing and a separate day for washing bedding. The prisoners we spoke to said they could hand their bedding in on a morning to be laundered and it was back by lunch-time.
- 2.5** Emergency call bells in cells were answered promptly and the process was quality assured – over 85% of cell bells were answered within five minutes. In our survey, 54% of prisoners said their cell bell was normally answered within five minutes, which was significantly higher than the comparator of 40%.
- 2.6** The applications process was managed by prisoner information desk (PID) workers.⁶ The process had been improved and all incoming applications were now logged. A staff signature was required once applications had received a response, but the timeliness of responses was still not monitored. In our survey, 38% of prisoners said that their applications were dealt with within seven days, which was significantly lower than at the previous inspection (54%).

Recommendation

- 2.7 The timeliness of responses to applications should be monitored to ensure they are answered promptly.**

⁶ PIDs are trained prisoners who help other prisoners by providing information, advice and support.

Staff-prisoner relationships

Expected outcomes:

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

- 2.8** Working relationships between staff and prisoners remained positive and in our survey, 83% of prisoners said there was a member of staff they could turn to and 74% said they were treated with respect. The interactions we saw were polite and friendly. However, some prisoners expressed frustration about not being able to get simple tasks done, and there was often a lack of management oversight and supervision of staff in the units. In our survey, only 29% of prisoners said staff had checked on them in the last week to see how they were getting on.
- 2.9** Staff in the specialist units (Rivendell, Maple and Holly houses) knew about the prisoners in their care and showed exceptional understanding and patience. The prisoners in all these units were complimentary about the support they received from operational staff.
- 2.10** Staff in Holly House looked after 12 prisoners with very complex needs. The staff group was very experienced and patient with prisoners, and they often undertook tasks that were within the remit of others, such as cleaning prisoners who had defecated themselves and their cells.
- 2.11** The proportion of female prison officers across the prison was too low. Staff and prisoners expressed concerns that the shower areas were not always supervised properly because of the lack of female staff, which was a concern as it allowed potential bullying to go unseen.
- 2.12** A monthly staff-prisoner council meeting was held and prisoner representatives from all residential units attended. The meetings discussed an array of topics. Although actions were recorded within each set of minutes, there was no separate ongoing action plan to clearly show all prisoners what had been achieved or planned over time.
- 2.13** There were five PID workers during the inspection. They had an important role to play in helping prisoners to express their views, but during the inspection there were seven vacancies, which meant not all units had access to a PID worker.

Recommendation

- 2.14** **The proportion of female prison officers should be increased to at least 60% and oversight of the shower areas should be improved.**

Equality and diversity

Expected outcomes:

The prison demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no prisoner is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The distinct needs of each protected characteristic⁷ are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), transgender issues, sexual orientation and age.

Strategic management

- 2.15** There was no equality action team. The prison had not recently undertaken an equality or diversity needs analysis, nor did it use systematic or comprehensive analysis to identify potential inequalities in the treatment or experiences of prisoners. Any analysis it did carry out was not published, which meant it could not raise awareness among prisoners and staff. There was little evidence that meaningful equality impact assessments were conducted routinely. The equality and diversity policy was too long and disjointed. The prison equality action plan had not been updated and its scope was limited.
- 2.16** Senior managers were not sufficiently involved in supporting or championing equality and diversity. While equality was a standing agenda item at the monthly senior management team (SMT) meeting, minutes did not record any discussion or updates on it.
- 2.17** The equality officer was well-known and prisoners valued the work she did. She actively promoted prisoners' protected characteristics, for example, organising forums for prisoners from diverse groups and events, such as New Hall Pride. The officer was frequently redeployed, and there was no cover when she was absent. However, several prisoner equality representatives had been identified and received information to support this work.
- 2.18** Replies to discrimination incident reporting forms (DIRFs) were reasonably good. Fifty-six DIRFs were submitted in 2018. Investigations were generally adequate. Some were reviewed by a scrutiny panel that included a member of the Independent Monitoring Board (IMB), although no qualitative analysis of issues or trends was carried out. Investigations were frequently delayed without good reason, which limited the effect of any findings.
- 2.19** Good links existed with local community groups, including those working on LGBT and disability issues, to whom prisoners could be directed for support on release.

Recommendation

- 2.20** **Equality and diversity work should be based on a thorough needs analysis and given a higher priority with clear strategic management that promotes equalities work across the prison.**

Protected characteristics

- 2.21** Prison data suggested that about 10% of prisoners were from black and minority ethnic backgrounds, and in our survey, responses from prisoners in this group were generally

⁷ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

comparable with others. A regular forum allowed prisoners to raise issues, which the equality officer helped them resolve.

- 2.22** Few prisoners identified as Gypsy, Roma and Traveller (4% in our survey). Attempts to arrange group meetings had been unsuccessful, although the equality officer continued to approach these prisoners individually to offer support.
- 2.23** Support for the 27 foreign national prisoners was adequate – an information pack in a number of languages was available in the library and the offender management unit. All foreign national prisoners received £5 in phone credit every month to maintain contact with their family and friends, and an immigration officer attended the prison periodically.
- 2.24** Staff tried to place non-English speaking prisoners in units with other prisoners who might have been able to communicate with them. Residential staff were not familiar with the telephone interpretation service, and formal interpretation services for prisoners with little English were rarely used on a day-to-day basis.
- 2.25** The prison identified 26% of the population as disabled, compared with 60% in our survey. The prison held detailed data on different types of disability, but it was not evident whether this information was being used to shape the provision. Disabled prisoners we spoke with pointed out the lack of adapted facilities in the prison – there were only two adapted cells and two baths. A lift had been ordered for Larch House, so that enhanced level prisoners with disabilities could live there.
- 2.26** Unpaid ‘buddy’ peer workers helped prisoners with everyday activities, although the prison could not confirm how many there were. Personal emergency evacuation plans (PEEPs) were available on residential wings and most staff knew which prisoners had a PEEP.
- 2.27** A multi-departmental meeting was held to discuss all newly arrived transgender prisoners to ensure they had an appropriate care plan. We spoke with the two transgender prisoners who were at the prison during the inspection and both were satisfied with how they had been treated.
- 2.28** In our survey, 28% identified as being lesbian, bisexual or another sexual orientation. Regular support groups were held, and attendance had recently increased, and prisoners we spoke with during the inspection felt they were treated well. The prison had a positive approach to managing relationships and prisoners could apply to spend a period of association with other prisoners.
- 2.29** The prison had established a forum for younger prisoners, but attendance was poor. Older prisoners we spoke with said they received good support, and there was an established older prisoners’ forum.
- 2.30** The prison had a mother and baby unit (MBU) in Maple House. The MBU was excellent. It was bright and airy and had an impressive soft play area for the babies. The unit’s staff focused sufficiently on the care and development of the child. The prisoners’ rooms were spacious and well maintained and there was a clean shared bathroom, with a separate bathroom for the babies. Prisoners could prepare and cook meals for their babies in a well-stocked kitchen and order a good range of food. The unit was unlocked during the core day and mothers could go outside with their babies at any time. There was also a large outdoor children’s play area. (See also paragraph 4.19.)
- 2.31** Trained nursery nurses provided daily support, looking after the babies when the mothers were working in the main prison. The mothers were complimentary about the support they received from operational staff in the unit. Staff wore t-shirts instead of uniforms and knew the mothers and their babies well. The admissions policy was fair and consistent. The board

met regularly to review care plans, the progress of mothers and their babies and those who were being considered for the unit. (See also paragraph 2.68.)

- 2.32** Rates of pay for disabled, retired and pregnant prisoners were lower than for those on the basic level of the incentives and earned privileges scheme, which was unfair.

Faith and religious activity

Expected outcomes:

All prisoners are able to practise their religion fully and in safety. The chaplaincy plays a full part in prison life and contributes to prisoners' overall care, support and resettlement.

- 2.33** The chaplaincy was supplemented by a number of sessional chaplains and two volunteer Free Church chaplains, which meant it could support prisoners of all faiths.
- 2.34** Published information about the chaplaincy contained details of all services and was available across the prison. However, the managing chaplain said that the restricted movement of prisoners around the prison meant there was less opportunity for ad hoc contact.
- 2.35** The security department worked with the chaplaincy to provide services for those in the segregation unit; services were also conducted in Holly House to accommodate those who could not visit the chapel.
- 2.36** The chaplaincy also supported Askham Grange prison and the demand across both sites meant the team was not always able to attend all departmental management meetings or assessment, care in custody and teamwork (ACCT) case management reviews for prisoners at risk of suicide or self-harm.

Complaints

Expected outcomes:

Effective complaints procedures are in place for prisoners, which are easy to access, easy to use and provide timely responses. Prisoners feel safe from repercussions when using these procedures and are aware of an appeal procedure.

- 2.37** There had been 524 complaints in the six months before our inspection, an increase from 427 in the same period at our previous inspection.
- 2.38** Prisoners had good access to the complaints system and knew how to make a complaint. Complaints forms were available in all units. Recording, monitoring and quality assurance of complaint responses were good and some data analysis took place.
- 2.39** Complaints were recorded on a central log and a tracking process monitored the timeliness of responses. Delays in replies were highlighted at the daily SMT meeting. When they were overdue, an interim response was sent to the prisoner explaining why the process had been delayed.
- 2.40** Of the complaints viewed, most were answered appropriately and all responses were typed, making them easy to read. Some responses to complaints about staff lacked a detailed response.

Legal rights

Expected outcomes:

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

- 2.41** Offender supervisors supported prisoners to apply for bail, although there were few applications. While the prison said the availability of suitable accommodation was a challenge, it did not monitor the number or outcome of bail applications to determine the scale of the issue. Prisoners who had been recalled were identified promptly and received recall documentation and the offer of a phone call to a legal representative. Offender supervisors explained licence conditions to prisoners before their release. There were adequate facilities to enable legal visits to be conducted in private.

Health services

Expected outcomes:

Prisoners are cared for by a health service that assesses and meets their health needs while in prison and which promotes continuity of health and social care on release. The standard of health service provided is equivalent to that which prisoners could expect to receive elsewhere in the community.

- 2.42** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁸ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. One area has been identified that requires improvement with a subsequent notice issued by the CQC which has been detailed within Appendix III of this report.

Governance arrangements

- 2.43** Many aspects of health care, provided by Care UK Clinical Services Limited (Care UK), remained good, but significant staff vacancies in the mental health team had had a negative impact on the delivery of mental health services. (See main recommendation S45.)
- 2.44** The health needs assessment published in August 2016 had informed service development and a new one had recently been procured.
- 2.45** Partnership working and governance were reasonably good, but some areas of local governance needed further development. Care UK and the mental health provider of the offender personality disorder unit were working to ensure communication on service provision for the unit was clearer. (See paragraph 4.37.)
- 2.46** Trends from clinical incidents and complaints were analysed and lessons learnt shared with staff. Progress had been made on recommendations from deaths in custody investigations, although those concerning the prompt delivery of some mental health services were affected by the vacancies in the mental health team (see main recommendation S45).

⁸ CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

- 2.47** The confidential health complaints process was well promoted. Concerns were usually resolved in person, while complex complaints were escalated to managers for investigation. Responses we reviewed were generally prompt, although the outcome and action taken were not recorded consistently enough.
- 2.48** Monthly patient forums, together with an analysis of patient satisfaction surveys, had led to some service improvements. However, some issues had been raised repeatedly without being properly resolved. Health care well-being representatives had been introduced and the provision was governed well. There was only one in post during the inspection; two were being recruited.
- 2.49** A range of meetings, including weekly complex case reviews and a daily handover attended by representatives from all teams identified any clinical concerns and demonstrated effective joint working. Health staff were clearly identifiable and interactions we observed with patients were very good.
- 2.50** Staff we spoke to were aware of their safeguarding responsibilities and managers from Care UK and the prison had started attending the safeguarding adult board subgroup for prisons. (See section on safeguarding (protection of adults at risk) and prisoners with complex needs.)
- 2.51** Clinical and managerial supervision was not provided or taken up consistently across the teams. Formal arrangements had only recently started in the mental health team and were not yet embedded. Mandatory training was well managed and there were excellent professional development opportunities, particularly in the primary care team.
- 2.52** Treatment rooms generally met infection control requirements and equipment was regularly checked and calibrated. However, the flooring in a few of the clinic rooms, including the dental suite, had ingrained dirt and needed to be deep cleaned.
- 2.53** The waiting area in the health centre had been extended and it was now bright and welcoming. The lack of free-flow movement (which allows prisoners to move about the prison unescorted), meant that patients waited too long before and after appointments, which some prisoners told us discouraged them from attending.
- 2.54** Work was in progress to reduce the high non-attendance rate. Several prisoners told us they had experienced delays in receiving appointment slips and had therefore missed appointments. A new initiative was being trialled – it involved the health care representative delivering appointment slips in sealed envelopes.
- 2.55** All teams used SystemOne (the electronic clinical information system). The standard of the documentation we sampled was variable – there were some good examples, but not all social care interventions were recorded and the mental health team had not recorded in sufficient detail the care that some prisoners in Holly House received. However, it was recorded on the prison system.
- 2.56** Health staff responded to all emergencies and were trained in life support. Suitable emergency equipment was available and in good working order. The contents of the emergency bags were checked every week and then sealed. The seals were checked every day, but there were a few gaps on the checking sheet.
- 2.57** About 40% of officers had received first aid training and officers allocated to the MBU had received paediatric first aid training. Ambulances were called promptly in an emergency.

- 2.58** Health promotion material was available in the health care department and information was delivered to the units. Smoking cessation support was available for those who wanted to stop nicotine vaping.
- 2.59** Blood borne virus screenings were completed and good use was made of a visiting hepatitis C specialist nurse. Other screenings included those for breast and bowel cancer. An influenza vaccination programme had taken place. Additional clinics were scheduled for hepatitis B vaccinations and more staff had been trained to administer immunisations and vaccinations. However, no other vaccinations had been provided over the previous year.
- 2.60** Sexual health screenings and treatment were offered and barrier protection was available, but not well advertised.
- 2.61** The Care Quality Commission issued a 'requirement to improve' notice following the inspection (see Appendix III).

Recommendations

- 2.62 All health care staff should receive regular clinical and managerial supervision.**
- 2.63 The non-attendance rates for all clinics should continue to be investigated and reduced, including a review of the applications process to see if this is hindering attendance.**
- 2.64 Immunisations and vaccinations should be available to eligible prisoners in line with national programmes. They should be implemented promptly to promote prisoners' health.**

Delivery of care (physical health)

- 2.65** A registered nurse and a health care assistant carried out an initial screening for all new arrivals. It covered health, social care, mental health and substance use needs. Health screenings were now completed in a dedicated room in the first night centre; another room had also been identified for health use. A GP could review immediate substance use and health issues that might have needed a prescription. Secondary health screenings were completed within a few days and referrals were made. Telephone interpreting services were available when they were needed.
- 2.66** A GP or an advanced nurse practitioner were available every day apart from Sunday. The waiting time for a routine GP appointment was over three weeks, which was too long. Urgent on-the-day appointments were prioritised by clinical need.
- 2.67** Allied health professionals ran an appropriate range of clinics and waiting times were reasonable. Nursing staff also ran regular clinics and we saw evidence of effective nurse-led interventions, such as the management of long-term conditions and wound care. There were regular contraception and sexual health clinics and prisoners were sent to hospital on an out-patient basis for colposcopies. A pain management nurse had recently started in post.
- 2.68** Appropriate antenatal and post-natal care was available. A midwife with expertise in substance use visited every week. During the inspection, there was one known pregnant woman and pregnancy screening took place on arrival. The prison planned to develop its perinatal and maternity services further, and a midwifery post to lead on the initiative was being advertised. There were good links with the MBU and Care UK staff looked after

mothers' health, while a local GP practice provided care for the babies to the same level as in the community. (See also paragraphs 2.30 and 2.31.)

- 2.69** Women were referred to external hospital appointments promptly and the process was well managed. Four escorts were available every day. The reasons for any rescheduling were recorded, but few appointments were cancelled because of a lack of officer escorts.

Recommendation

- 2.70** Routine waiting times to see the GP should be reduced and should not exceed two weeks.

Pharmacy

- 2.71** There was an onsite pharmacy. Medicines were mostly supplied promptly although a few patients had experienced delays, which needed to be addressed. Medicines were mainly supplied on a named-patient basis and there were few stock medicines.
- 2.72** In-possession risk assessments were in line with the health care policy. Only approximately 30% of medicines were supplied in possession and most were for seven days, rather than 28 days. Pharmacy technicians and nurses administered medicines from the units three times a day. Night-time medication was also administered. Officers supervised administration sessions, but confidentiality varied between units.
- 2.73** Administration was recorded on SystemOne. Staff could provide examples of action taken when patients did not attend administration and follow-up was recorded.
- 2.74** Patients received advice from pharmacy technicians at the hatch or could raise concerns at a daily clinic. The pharmacist clinically assessed all prescriptions and ran weekly clinics, but her skills as an independent pharmacy prescriber were not being used fully.
- 2.75** Controlled drugs (CDs) were managed appropriately. There were regular running balance audits. CDs were transported securely when prisoners were locked up.
- 2.76** The treatment rooms in the health care unit were suitable. Medicines were kept in lockable metal cupboards. In one unit, inspectors saw fridge temperatures that were outside the required range without effective action being taken. Out-of-date and discontinued medication was sent back to the pharmacy.
- 2.77** A range of policies and standard operating procedures informed practice and drug alerts (to protect patients from the harm that may be caused to them by defective medicines) were implemented. A formulary (list of medications used to inform prescribing) was in place.
- 2.78** The prison had a reasonable range of over-the-counter medicines and patient group directions (PGDs), which authorise appropriate health care professionals to supply and administer prescription-only medicine, and we saw records on SystemOne. However, staff said that only a small range of the medicines was supplied in this way. There was an out-of-hours' medication cupboard; however not all medicines removed were recorded and auditing was ineffective.
- 2.79** A medicines management group met regularly and an appropriate range of staff were represented. Procedures were in place to monitor prescribing costs and the prescribing of

tradable medicines. However, a high level of mirtazapine (an anti-depressant) was still being prescribed.

Recommendation

- 2.80 The out of hours' medicines cupboard and drug refrigerators should be robustly monitored to ensure medication is appropriately and safely stored.**

Dentistry

- 2.81** A community-equivalent range of dental treatments was available. A dentist, dental nurse and therapist provided four treatment sessions a week, as well as additional regular triage sessions. Prisoners waited about five weeks for routine care, and emergency provision was effective.
- 2.82** The dental suite met current infection control standards, and equipment was well maintained and certificated. Strong governance processes underpinned the service, and staff attended regular meetings with prison staff and other health providers. Clinical records on SystemOne were detailed and demonstrated that oral health was promoted. Plans were in place to deliver prison-wide health promotion activities to advertise the service.
- 2.83** All decontamination processes took place off site. The dental nurse transported used tools in a tagged, but unlocked, box between the dental suite and the gate, which presented diversion and safety risks.

Recommendation

- 2.84 The prison should ensure the process for transporting dental tools across the prison is safe.**

Delivery of care (mental health)

- 2.85** In our survey, 78% of prisoners reported having a mental health problem and 44% of them said they had received help for it while in the prison. Although we saw evidence of some good individual care, the service had deteriorated since the previous inspection.
- 2.86** Care UK's integrated mental health team was experiencing significant staffing shortages and five of nine clinical roles were vacant. It had also experienced a high staff turnover in recent months. The service used regular agency workers to cover some staffing gaps. Recruitment was ongoing. While the psychiatrist provided regular weekly sessions and completed medication reviews, there was no psychological input from the Midlands Partnership NHS Foundation Trust (which had been contracted to provide clinical psychology services) due to staffing shortages.
- 2.87** Prisoners' initial needs were identified promptly through the reception screening process, and staff could refer prisoners or they could refer themselves to the service. Initial triage clinics were scheduled every day, but they did not always take place because of staffing shortages. Prisoners who required an urgent assessment were prioritised and seen promptly. When they required a full assessment, they waited about four weeks to be seen. Some prisoners had waited since December 2018, which was an unacceptable delay, and others

were transferred or released without having been assessed. Appointments for assessments regularly had to be rebooked due to staffing shortages. (See main recommendation S45.)

- 2.88** The team prioritised high-risk patients by regularly attending ACCT and segregation reviews. The duty nurse worked across the prison site and could support prisoners on an ad hoc basis, including those in the early stages of custody.
- 2.89** Prisoners with mild to moderate mental health issues did not have access to community-equivalent, planned ongoing treatment or psychological interventions. Some self-help material was available, and prisoners had access to counselling support through third sector organisations working in the prison. No group work was being offered, although there were plans to re-establish it once the team was fully staffed.
- 2.90** There were no primary mental health services for patients with learning disabilities, although the mental health manager monitored the population group periodically. Care UK was in the process of recruiting a senior nurse to run a weekly learning disability clinic.
- 2.91** Prisoners with more serious mental health problems received a better level of support – there was evidence of some helpful one-to-one work, informed by personal care plans and risk assessments. Fifteen prisoners were being managed under the care programme approach (mental health services for individuals diagnosed with a mental illness), although some reviews had been delayed due to staffing shortages.
- 2.92** A consultant clinical psychologist was working with health and prison staff to develop a prison-wide, trauma-informed model of care (which focuses on therapy to mediate the impact of trauma before cognitive interventions can be fully effective), although it was in the early stages of implementation. The psychologist worked with prisoners with the most acute and complex needs in Holly House. They received good support, informed by trauma-based care plans.
- 2.93** Over the previous year, more than 90% of prison officers had received trauma-informed training (to enable them to consider the trauma prisoners may have experienced in their lives). The mental health team manager also provided mental health awareness training for new starters.
- 2.94** In the previous 12 months, only two of nine prisoners who needed to be moved to hospital under the Mental Health Act, were transferred within two weeks. However, mental health administrators had developed links with hospitals and commissioners to help improve the process.

Recommendation

- 2.95** **Transfers under the Mental Health Act should occur within current Department of Health transfer time guidelines.**

Social care

- 2.96** Support for prisoners with social care needs was good. Joint working between the prison, Wakefield Council and Care UK was underpinned by good governance, and the parties met frequently to review the service. Health staff identified social care needs during reception screening and following subsequent referrals from staff and prisoners. Assessments were carried out promptly, and those receiving care had personal plans that were reviewed regularly. Prisoners had good access to mobility aids and adaptations, and a store of key

items was kept on site. A budget was in place for urgent equipment. Care UK was providing daily support to one prisoner, who was very complimentary about their care. Record keeping was good, although some support workers did not record daily interactions with the prisoner.

Catering

Expected outcomes:

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

- 2.97 In our survey 56% of prisoners said that the food was very or quite good, which was significantly better than in other similar prisons (41%).
- 2.98 Breakfast packs were provided the night before it was to be eaten. The provision of meals for those on a special diet either for health, religious or cultural reasons was good and could often be tailored to prisoners' individual requests.
- 2.99 Serveries were clean and well supervised and all prisoners could eat out of their cells. In Willow House, prisoners ate in a building outside the wing, which affected their experience. For example, during our inspection one evening we found the service chaotic and rushed, and some prisoners did not have sufficient time to finish their meals.
- 2.100 Consultation was good. Food was discussed in a few forums and an annual food survey had been conducted. The survey results had helped inform menu choices. Comments books, which were available in the units, were monitored regularly by the catering staff.
- 2.101 Women in the MBU were complimentary about the food and fresh milk supplied.

Purchases

Expected outcomes:

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

- 2.102 Sixty-nine per cent of prisoners said the shop sold what they needed, which was significantly better than in other similar prisons (55%) and compared with the previous inspection (52%). Prisoners we spoke to valued the wide range of products available, and staff responsible for running the shop tried hard to make sure procedures worked efficiently. The charity shop enabled prisoners to buy reasonably priced clothing.
- 2.103 However, prisoners still had to pay administration charges for catalogue orders and advances for prisoners with no personal cash were claimed back at 50p a day, which could have left some individuals without funds and therefore vulnerable.

Section 3. Purposeful activity

Time out of cell

Expected outcomes:

All prisoners are actively encouraged to engage in activities available during unlock and the prison offers a timetable of regular and varied activities.⁹

- 3.1** Time out of cell was reasonably good for most prisoners who had between eight and 10 hours out of their cells. During our time out of cell roll checks, we found only 3% of the population locked up. However, we found too many prisoners, 28%, in residential units during the core working day when some of them should have been at activities (see paragraph 3.11).
- 3.2** The prison had introduced a second movement time to prevent prisoners from missing work due to appointments. However, it enabled some prisoners to avoid activities and return to their unit because staff there were not sure where the prisoner was meant to be.
- 3.3** Prisoners who worked full time could only exercise outdoors on a weekend, while for other prisoners, access to outdoor exercise depended on their work sessions. Association was available every week day evening, including on a Friday, which we rarely see in other prisons. Association curtailments were not always communicated in advance, but the prison planned to address this by introducing a regime management plan, due to be implemented the week after our inspection.

⁹ Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities to take showers or make telephone calls.

Learning and skills and work activities

Expected outcomes:

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

3.4 Ofsted¹⁰ made the following assessments about the learning and skills and work provision:

Overall effectiveness of learning and skills and work: Good

Achievements of prisoners engaged in learning and skills and work: Good

Quality of learning and skills and work provision, including the quality of teaching, training, learning and assessment: Good

Personal development and behaviour: Good

Leadership and management of learning and skills and work: Good

Management of learning and skills and work

3.5 Leaders had developed an effective curriculum. It included a range of carefully selected 'enrichment' activities that met prisoners' needs. Leaders had developed a programme that provided prisoners with a varied and supportive regime. Many prisoners developed their self-esteem and confidence by participating in these activities, prompting them to participate in more formal education or training. As a result, prisoners were better prepared for life on their release.

3.6 Prison managers had developed effective partnerships. They worked well with learning and skills leaders to ensure the education programmes they offered met prisoners' needs. Prison leaders also worked well with a range of external partners, including local universities, charities, employers and community groups, to create a varied and engaging programme of activities.

3.7 Leaders had planned carefully a new curriculum to be delivered from April 2019. They had conducted a thorough needs analysis based on prisoners' starting points and established what skills they needed to be better prepared for release. They had also considered local labour market intelligence on the skills required to secure sustainable employment.

3.8 The education and vocational provision provided by Novus was good. Leaders ensured processes for managing staff performance were effective. A small number of underperforming staff had left and those who needed to improve received better support. While the quality of teaching, learning and assessment had declined since the previous inspection, it was still consistently good.

¹⁰ Ofsted is the Office for Standards in Education, Children's Services and Skills. It reports directly to the UK Parliament and is independent and impartial. It (inter alia) inspects and regulates services that provide education and skills for all ages, including those in custody. For information on Ofsted's inspection framework, please visit: <http://www.ofsted.gov.uk>.

- 3.9** Managers closely monitored prisoners who started qualifications, but did not complete them and scrutinised the reasons behind them leaving. They identified where they could have influenced the outcome and took action where appropriate. As a result, the number of prisoners who started qualifications but did not complete them had declined year on year.
- 3.10** Leaders' self-assessment of the quality of education, skills and work was accurate. Working with the learning and skills provider, prison managers had produced a joint self-assessment report that identified most of the provisions' weaknesses. However, the quality improvement plan lacked precision, focusing too much on action taken and not enough on impact or outcomes.
- 3.11** Managers did not have sufficient oversight of the allocations process. Systems were not sophisticated enough to manage a flexible or varied regime effectively. As a result, managers could not monitor attendance at activities well enough. They recognised this and planned to introduce a new system that would better cope with the frequent, and often only temporary, changes to allocations. However, during the inspection, attendance at activities was not consistently good enough (see section on time out of cell).

Recommendation

- 3.12** **An allocations system that allows for better attendance monitoring should be introduced and effective action should be taken to improve poor attendance.**

Provision of activities

- 3.13** There were sufficient activity spaces to occupy the prison population on a full-time basis. Induction was used effectively to ensure that the knowledge and skills that prisoners had developed before arriving at the prison were considered when their learning was being planned. The allocations process was fair and equitable. Prisoners who needed to develop their English and maths skills before entering work were prioritised for education classes. The pay policy did not discourage attendance at education.

Quality of provision

- 3.14** Most teachers and instructors planned learning and work sessions well. They delivered high quality teaching and guidance in most subjects. They considered the intended outcomes for the sessions they were leading, including production targets in workshops. They worked well with prisoners to ensure that they made progress during the sessions and, over time, developed the skills they needed to be successful in education or work.
- 3.15** Outreach education was effective. Teachers were very patient with prisoners who were hard to engage. They worked well with those who were in the specialist mental health unit, in the segregation unit and in workshops. They helped prisoners develop their English and maths skills during one-to-one and small group teaching sessions. As a result, prisoners became more confident and a small number progressed onto formal teaching and learning activities.
- 3.16** Managers and staff had established well-structured pathways for prisoners. In most workshops and in many education classes, staff had developed effective progression routes based on qualifications and work. This meant the most successful prisoners could support staff in sessions and many prisoners acted as mentors for their less experienced peers.

- 3.17** Teachers and instructors provided prisoners with helpful and constructive feedback. Most prisoners responded well to the guidance and it helped them improve their work. As a result, most prisoners produced work to a high standard.
- 3.18** Most workshops and the prison kitchen offered prisoners the opportunity to study and acquire accredited qualifications. Although managers promoted qualifications to prisoners, too few undertook them.
- 3.19** A few teachers did not plan sessions sufficiently to meet prisoners' needs. They did not plan well enough for more able prisoners, who completed the same work regardless of their starting points or prior knowledge. Too often, more able prisoners did not make the progress they were capable of and they failed to complete their qualifications promptly.

Recommendation

- 3.20** **The number of prisoners who participate in accredited training in workshops and the prison kitchen should be increased.**

Personal development and behaviour

- 3.21** Prisoners' attitudes to their education and work were positive. They worked well together and treated each other, and staff, with respect. They behaved well in workshops and classrooms. On the rare occasion when behaviour was not good, they responded to staff's instructions well.
- 3.22** Prisoners engaged well in a broad range of enrichment activities that were designed to meet their needs. External delivery partners supported activities effectively. For example, students from York St John University ran drama and dance classes for prisoners. As a result, many who were previously reluctant to participate in activities now attended education or work.
- 3.23** Prisoners developed a good understanding of wider society. Staff used news stories effectively, enabling prisoners to grasp a range of topics well. Prisoners in education produced thought-provoking classroom displays to mark specific events throughout the year, such as International Women's Day and Remembrance Day.
- 3.24** Most prisoners took pride in their work and education and produced work that was of a high standard. They dedicated enough time to ensure they could complete the tasks that were set for them. Prisoners in education presented their work neatly and those in workshops worked to industry standards.
- 3.25** Attendance at purposeful activity was not consistently good. Too often prisoners would attend other activities rather than the education or work they had been allocated to. Management oversight was limited and poor attendance was not routinely or effectively challenged. (See also paragraph 3.11 and recommendation 3.12.)
- 3.26** Too few prisoners recorded their non-qualifications-based achievements in their employment portfolios, which had been introduced so prisoners could measure and record the skills they had developed to prepare them for future employment. However, too many prisoners did not bring their portfolios to activities. This meant they could not record the progress they had made.

Recommendation

- 3.27** Employment portfolios should be fully embedded in all activity areas to ensure that prisoners record their skills development.

Education and vocational achievements

- 3.28** Most prisoners who took qualifications achieved them and achievement rates were high in most subjects. Achievement rates were particularly high in information technology and on the self-employment courses. Prisoners who wished to carry out peer mentor roles in education and work were required to undertake the level 2 information, advice and guidance qualification. As a result, prisoners were keen to study for the qualification and those who did produced good work.
- 3.29** Through specialist, employer-led activities, prisoners developed valuable work-related skills. The Max Spielmann Academy enabled prisoners who were interested in photography industry techniques to work in a realistic work environment. They followed the same training programme as new staff in high street stores and developed the skills they needed to work for Max Spielmann outside prison. A small but growing number of prisoners had secured sustained employment with the company on their release.
- 3.30** A large number of prisoners undertook gym-base qualifications, such as level 3 personal trainer qualifications and level 4 GP referral certificate qualifications, enabling them to work with people referred to the gym by their doctor. In practical horticulture, they demonstrated their vocational skills in the prison's extensive grounds.
- 3.31** Prisoners in training and work also developed good vocational skills. They worked to a high standard in waste recycling, the prison kitchen, and in the textiles and food packing workshops. For example, in waste recycling they ensured that high volumes of prison waste were processed efficiently.
- 3.32** Despite improvements, the number of prisoners who achieved their English and maths qualifications was still too low. Too few prisoners achieved qualifications in customer service, particularly at level 2.

Library

- 3.33** The library was well run and offered a full and varied schedule of activities, coordinated by a librarian and assisted by two prisoner peer workers.
- 3.34** The main library had a large stock, including books in a variety of languages, a good range of legal texts, audio books and DVDs. A large number of books was also available in unit-based libraries, including in the first night centre.
- 3.35** The library had several computers that provided access to the virtual campus (internet access for prisoners to community education, training and employment opportunities), although only one prisoner was using it during the inspection.
- 3.36** The library promoted literacy through several initiatives, including Turning Pages (a mentoring scheme to help prisoners learn to read). Storybook Mums (where prisoners record stories for their children) had been used by over 90 prisoners in 2018.

- 3.37** Library membership was good and over 70% of prisoners were registered users. Data showed consistently good library use, but it was not sufficiently monitored. Some data were collected on the age and ethnicity of users.

Physical education and healthy living

Expected outcomes:

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

- 3.38** Prisoners had reasonable access to a balanced programme of recreational physical education (PE) and suitable accredited provision. Gym sessions were available during the day, in the evening and at the weekend. The timetable catered for prisoners with distinctive needs and there were specially designed sessions for young and older prisoners, as well as pre- and post-natal women. More prisoners with medical needs were now receiving specialist input through GP referrals to the gym.
- 3.39** A quarter of the showers in the gym had been refurbished and were now in good condition; the remainder were adequate. Longstanding damage to the gym floor had restricted the amount of sports and games activities that could be carried out. Repairs were being completed and the indoor facilities, which included a small cardiovascular suite and weights room, were soon to be comprehensive.
- 3.40** The artificial pitch, which had been available at the previous inspection, was no longer in use, limiting the opportunities prisoners had to participate in team activities and preventing them from undertaking fitness activities outdoors.
- 3.41** During the induction process, prisoners continued to receive useful information about health, diet and nutrition and gym staff ran through a basic health questionnaire. Healthy lifestyle classes were run every day and a leaflet on maintaining a balanced diet had been produced. Gym staff also worked with health care staff to provide individual support programmes for prisoners who sought additional help in this area.

Section 4. Resettlement

Strategic management of resettlement

Expected outcomes:

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

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

Good planning ensures a seamless transition into the community.

- 4.1** The prison's resettlement role was well coordinated and led at all levels. Senior managers in offender management and practical resettlement roles liaised closely, as did staff at other levels. Leadership had improved in recent months. The prison had an up-to-date strategy document and action plan, supported by a well-attended regular meeting for all those managing resettlement functions in the prison and 'through the gate'.
- 4.2** A needs analysis had been completed within the previous year, based on a variety of evidence. It had identified the important impact of experiences of abuse on a very large proportion of the prisoners. Resettlement work was therefore increasingly centred on work specifically informed by trauma and abuse. The work of the community rehabilitation companies, the offender management unit and other providers was well coordinated. Third-sector organisations continued to deliver effective services; they had the confidence of staff and prisoners.

Offender management and planning

Expected outcomes:

All prisoners have a sentence based on an individual assessment of risk and need, which is regularly reviewed and implemented throughout and after their time in custody.

Prisoners, together with all relevant staff, are involved in drawing up and reviewing plans.

- 4.3** Probation offender supervisors saw the prisoners allocated to them regularly. Their casework was constructive and focused well on prisoners' risks and needs. We saw some examples of very good work. Prison officer offender supervisors' contact with prisoners was not as frequent, but still reasonably good; they were often deployed to other duties. However, they still kept the backlog of offender assessment system reports relatively low and maintained contact with their cases. Some examples of prison officer offender supervisors' casework demonstrated a supportive and well-focused approach, but they were not proactive enough, and conversations sometimes did not look at progressing through prisoners' sentence plan.
- 4.4** Recording on P-Nomis (the Prison Service IT system) was a strength. Staff from different agencies had good access to comprehensive and up-to-date information about individual cases through a shared IT drive, and key information was summarised on the P-Nomis system. Psychology staff also shared information well with the offender management unit (OMU).
- 4.5** Casework undertaken by St Giles Trust staff on behalf of the community rehabilitation companies (CRCs) was not limited to the initial period after reception and before release. (See paragraph 4.14.)

- 4.6** The OMU and local police were working closely together on a 'Top 20' project to ensure the management of the most prolific offenders who served frequent, often short sentences continued. There were signs that the project could address these relatively intractable patterns of offending effectively. There were good links between the OMU and the police officer who was working on behalf of the integrated offender management team in the prison (which responds to crime and reoffending) and the community.
- 4.7** Home detention curfew (HDC) processes were carried out promptly and efficiently, but eligibility dates were sometimes missed because prisoners arrived from other establishments very near their release date without having started an assessment.
- 4.8** Managers wanted to see the use of release on temporary licence increased, but during the inspection very few prisoners had benefited from it.

Public protection

- 4.9** New measures had been introduced to ensure prisoners posing a public protection risk were identified promptly and contact restrictions applied. Public protection procedures were sound, and improvements had been made since the last inspection to eliminate key areas of risk and to strengthen processes, which provided additional assurances that risk issues on the prisoner's arrival at New Hall would be identified.
- 4.10** The weekly inter-departmental risk management team meeting considered those posing the greatest risk, and generally made appropriate decisions on what action to take. The number of staff attending was however, limited, and there was often no input from health care staff, which meant the prison could not be confident about the decisions it made for those with substantial health issues.
- 4.11** Multi-agency public protection arrangement management levels were confirmed with the community-based offender manager, ensuring risk management plans were effective.

Allocation

- 4.12** Categorisation and allocation processes were handled efficiently, and benefited from the fact that offender supervisors and their managers knew the prisoners well. The number of prisoners assessed as suitable for open conditions but remaining at New Hall was eight during the inspection, a third of the number at the previous inspection. Four were moved to an open prison during the inspection. Those assessed as suitable for open conditions were in Larch House, which had a more relaxed regime, longer unlocking times, and more scope for self-reliance than other locations.

Indeterminate sentence prisoners

- 4.13** Thirty-nine per cent of prisoners were serving long sentences and those with a life or indeterminate sentence for public protection received good support from probation staff in the OMU who had regular contact with them. There were now regular quarterly forums for this group, where issues raised had led to practical action. However, their living conditions and their opportunities to maintain and develop skills for independent living were limited. However, cooking facilities and other activity spaces and equipment were being developed.

Reintegration planning

Expected outcomes:

Prisoners' resettlement needs are addressed prior to release. An effective multi-agency response is used to meet the specific needs of each individual prisoner in order to maximise the likelihood of successful reintegration into the community.

- 4.14** The West Yorkshire CRC catered for all prisoners except those from south Yorkshire, who were served by the South Yorkshire CRC. St Giles Trust carried out most of the work in the prison on behalf of these companies. Although the team was relatively small, the work it undertook was thorough. Staff were well integrated into the establishment, delivering initial custody screenings and active resettlement support in the last 12 weeks before release. Casework, undertaken mainly through St Giles Trust, was impressive and timely, and a good range of services was provided. The prison was expanding the CRCs' direct services.
- 4.15** Monthly resettlement mornings were attended by over 20 local community and third-sector agencies, many of whom were delivering valuable services in the prison. The Together Women Project, which ran a drop-in centre, arranged much of this contact, while the Footsteps project provided 'through-the-gate' mentoring and other support to vulnerable prisoners.

Children, families and contact with the outside world

- 4.16** Only 32% of prisoners receiving visits said that sessions started and finished on time, which was significantly lower than the comparator. Staff recognised there was a problem with delays and visitors we spoke to confirmed there was an issue.
- 4.17** A number of visitors we met complained about difficulties booking visits through the national telephone line, which our own experience of the booking line confirmed.
- 4.18** The atmosphere in the visits hall was calm and relaxed. The facilities were good – seating was comfortable and there was a well-equipped area for young children, which was supervised by trained staff, as well as a space for teenagers.
- 4.19** The family support worker was well established and, along with community-based colleagues, provided prisoners who found it difficult to maintain contact with their children with good support, organising additional domestic and supervised visits. The family support worker also ran parenting programmes and helped organise family days six times a year for all prisoners. Pregnant women or those who had recently given birth could have their visits in the mother and baby unit, and babies could spend time at home where appropriate. (See also paragraph 2.30.) Although visit sessions lasted two hours, which was relatively good, prisoners still could not have one visit a week.
- 4.20** Prisoners who did not receive visits were identified and offered alternatives to help them maintain contact with their family and friends, such as telephone credit. Only 73% of prisoners who had credit said they could use the phone every day and during the inspection, we saw prisoners having difficulties getting access to phones. This problem was due to be resolved with the imminent installation of in-cell phones.

Recommendations

- 4.21 Visits should start and finish at the times specified in published material.**

4.22 Visitors should have access to an efficient booking system.

Victimisation, abuse and vulnerability

4.23 National data and local evidence indicated that a high proportion of prisoners at New Hall had suffered some form of trauma in their life. A needs analysis produced by the prison in 2018–2019, containing information from a national audit of health needs in 2016, showed that 53% of prisoners had experienced emotional, physical or sexual abuse in childhood. Of those who used the counselling service at New Hall, only 4% said they had not suffered some form of abuse. Prison data indicated that 48% of women had committed their offence to support the drug use of someone else. Of the women using the counselling service, 53% said they had suffered domestic violence, 56% said they had experienced more than one kind of abuse, and 44% said they had been raped.

4.24 Third-sector, clinical and discipline staff and peer workers provided a range of support to address abuse, covering areas such as domestic violence and sexual abuse. Support was offered through individual counselling, group work and drop-in services. Most of this was delivered by prison-based staff, but a wide range of visiting specialists also made a useful contribution.

4.25 Staff involved in delivering these services worked well together and a significant number of prisoners benefited from their input. However, the arrangements for managing such a complicated range of services often relied on informal practices. Services were not integrated well enough and roles were not clearly defined, which meant it was possible that they were being duplicated and that resources were not allocated to priority areas. Additional resources through the CRC were soon due to be introduced to complement the work already being carried out.

Accommodation

4.26 The number of prisoners released without permanent accommodation had been rising, and stood at 26 for the month before the inspection. This was largely because local authorities only provided a point of contact rather than a confirmed address. Over the previous six months, 67% of those released had a confirmed address that was sustainable.

4.27 A number of prisoners had their HDC release date delayed because of the lack of Bail Accommodation and Support Service housing. In the week of the inspection, five women remained in prison for this reason. At the end of November 2018, the figure was 15.

4.28 Staff liaised closely with Ripon House, the approved premises (AP) to which many women were allocated if their licence conditions required such accommodation. Staff, and sometimes residents, at Ripon House visited the prison each month to meet prisoners and clarify any misunderstandings about the AP, and an offender supervisor stayed in touch with AP staff.

Education, training and employment

4.29 Education, training and employment support was available before prisoners' release through the CRCs, which offered careers advice, and support from training agency Novus Works. However, too few prisoners secured employment, training or education as a result of these interventions.

Health care

- 4.30** Prisoners could visit a pre-release clinic a week before their release, and those on medication received a week's supply. A health discharge summary was also provided. Arrangements for patients with palliative or end of life needs were good and links with local services were effective. The prison and health care department had adopted the 'Dying well in custody charter', which outlined a coordinated approach to the individual care needs of patients requiring this support. The mental health team was developing links with community mental health teams.

Drugs and alcohol

- 4.31** Links with community drug and alcohol teams were good and enabled prisoners to maintain their treatment. Harm minimisation information was provided before prisoners' release. The drug and alcohol recovery team proactively supported release plans, although prisoners were not provided with naloxone (used to prevent an opiate overdose) to take out on release.

Finance, benefit and debt

- 4.32** In our survey, 95% said they needed help with arranging benefits before their release, compared with 78% in other women's prisons. The provision was reasonably good. A Jobcentre Plus worker visited the prison five days a week and provided prisoners with effective help to deal with benefits issues on their arrival. They also helped prisoners open bank accounts, arrange ID and make a claim for universal credit.

Attitudes, thinking and behaviour

- 4.33** A fair range of accredited and non-accredited programmes was delivered. The core elements were the Thinking Skills Programme, which 50 prisoners started every year, and Choices, Actions, Relationships, Emotions (CARE), an intensive programme for prisoners with a history of violence and other specific support needs. The CARE programme had been suspended while new staff were being recruited and the next course was due to start soon.
- 4.34** Other interventions included My Anger and the Power to Change courses, designed for those affected by domestic abuse. The A–Z motivational course for hard-to-reach prisoners, had not been delivered recently, but was available and likely to be offered in the current year. An intervention for fire-setters had been delivered.
- 4.35** Some victim awareness work had been carried out on a one-to-one basis, and joint work was being undertaken with a non-profit company to develop Restorative Justice interventions (where offenders consider the consequences of their offending for all parties and can offer an apology or reparation). Some Restorative Justice conferencing (which involves bringing perpetrator and victim together in a formal way) had taken place.
- 4.36** The psychology team was now fully staffed and delivered structured interventions, as well as one-to-one work. It also drew up guidance for staff on the practicalities of managing prisoners with challenging behaviour on the basis of helpful psychological assessments of the individual.

Specialist units

Expected outcomes:

Prisoners undergo assessment and treatment in an environment that is psychologically, emotionally and physically safe, and have a clear understanding of the treatment process.

Unit for prisoners with personality disorder

4.37 Rivendell House, as part of the national offender personality disorder pathway, provided support and treatment for 16 patients assessed as having a personality disorder and a history of violent offending. Residents undertook a two-year treatment course, run by a team from Greater Manchester Mental Health NHS Foundation Trust and prison staff. Although the team had experienced staffing shortages, it provided regular one-to-one and group work to residents in collaboration with prison staff. The intensive two-year course included work on trauma, motivation and developing life skills and was underpinned by regular reviews. The unit offered an excellent therapeutic environment.

Section 5. Summary of recommendations

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

Main recommendation

To the governor

- 5.1** The mental health service should be improved. There should be sufficient staff to ensure that all prisoners with mental health needs receive the range of support they need, including ongoing group work and regular reviews. (S45)

Recommendations

Early days in custody

- 5.2** Additional night-time welfare checks should be carried out on all new prisoners in the first night centre. (1.9)

Safe and supportive relationships

- 5.3** Data about violence should be analysed thoroughly and used to develop the violence reduction strategy. (1.16)

Self-harm and suicide prevention

- 5.4** Prisoners should have 24-hour access to Listeners. (1.22, repeated recommendation 1.38)

Safeguarding (protection of adults at risk) and women with complex needs

- 5.5** Prisoners with the most complex needs living in Holly House should not be locked in their cells during the core day; they should be provided with a constructive range of therapeutic interventions to help them cope. (1.26)

Security

- 5.6** Prisoners' movements to and from activities should be less restricted unless an individual risk assessment demonstrates the need for additional control. (1.32)
- 5.7** Suspicion drug tests should be completed when supporting intelligence considers them appropriate. (1.33)

Disciplinary procedures

- 5.8** Use of force data should be evaluated fully so that recommendations can be identified and implemented. (1.41)

- 5.9** If special accommodation is used it should be accurately recorded and appropriately managed regardless of the location. (1.42)

Residential units

- 5.10** The timeliness of responses to applications should be monitored to ensure they are answered promptly. (2.7)

Staff-prisoner relationships

- 5.11** The proportion of female prison officers should be increased to at least 60% and oversight of the shower areas should be improved. (2.14)

Equality and diversity

- 5.12** Equality and diversity work should be based on a thorough needs analysis and given a higher priority with clear strategic management that promotes equalities work across the prison. (2.20)

Health services

- 5.13** All health care staff should receive regular clinical and managerial supervision. (2.62)
- 5.14** The non-attendance rates for all clinics should continue to be investigated and reduced, including a review of the applications process to see if this is hindering attendance. (2.63)
- 5.15** Immunisations and vaccinations should be available to eligible prisoners in line with national programmes. They should be implemented promptly to promote prisoners' health. (2.64)
- 5.16** Routine waiting times to see the GP should be reduced and should not exceed two weeks. (2.70)
- 5.17** The out of hours' medicines cupboard and drug refrigerators should be robustly monitored to ensure medication is appropriately and safely stored. (2.80)
- 5.18** The prison should ensure the process for transporting dental tools across the prison is safe. (2.84)
- 5.19** Transfers under the Mental Health Act should occur within current Department of Health transfer time guidelines. (2.95)

Learning and skills and work activities

- 5.20** An allocations system that allows for better attendance monitoring should be introduced and effective action should be taken to improve poor attendance. (3.12)
- 5.21** The number of prisoners who participate in accredited training in workshops and the prison kitchen should be increased. (3.20)
- 5.22** Employment portfolios should be fully embedded in all activity areas to ensure that prisoners record their skills development. (3.27)

Reintegration planning

- 5.23** Visits should start and finish at the times specified in published material. (4.21)
- 5.24** Visitors should have access to an efficient booking system. (4.22)

Section 6: Appendices

Appendix I: Inspection team

Martin Lomas	Deputy Chief Inspector
Sandra Fieldhouse	Team leader
Paddy Doyle	Inspector
Fionnuala Gordon	Inspector
Martin Kettle	Inspector
Ian Macfadyen	Inspector
David Owens	Inspector
Emma Sunley	Inspector
Nadia Syed	Inspector
Darren Wilkinson	Inspector
Sharlene Andrews	Researcher
Charli Bradley	Researcher
Rachel Duncan	Researcher
Holly Tuson	Researcher
Steve Eley	Substance use inspector
Maureen Jamieson	Health services inspector
Richard Chapman	Pharmacist
Tim Byrom	Care Quality Commission inspector
Cat Raycraft	Care Quality Commission inspector
Dave Barber	Ofsted inspector
Malcolm Fraser	Ofsted inspector
Marina Gaze	Ofsted inspector
Kenneth Merry	Ofsted inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2015, many women waited for long periods in court cells and some arrived at the prison too late in the evening. Support on arrival and during the early days at the prison was good. Most women felt safe and the number of violent incidents was low. Gay and bisexual women reported feeling less secure than other groups. Levels of self-harm were relatively high, but support for women at risk and those with complex needs was very good. Security arrangements were reasonable overall. Illicit drugs posed some significant challenges; some good work was being done but more was needed. Disciplinary procedures were well managed. Use of force was proportionate. Care planning and the regime for women in segregation needed to be developed but relationships were strong. Substance misuse support had improved since the last inspection and was now good overall. Outcomes for women were good against this healthy prison test.

Recommendations

Women should be held in court cells for the minimum possible time and transported separately from male prisoners; they should not be moved between vehicles. (1.5)

Not achieved

Managers should engage with women to better understand and address their concerns around safety and victimisation and to promote safe and supportive relationships. (1.26)

Not achieved

ACCT reviews and care should be coordinated by the same case manager, and reviews should include representation from relevant staff who know the woman at risk and who can contribute to effective care plans. (1.37)

Achieved

Prisoners should have 24-hour access to Listeners. (1.38)

Not achieved (recommendation repeated, 1.22)

Closed visits should only be used when there has been illicit or inappropriate behaviour directly associated with visits. (1.54)

Not achieved

All information reports should be completed within a reasonable timescale and required action carried out promptly. (1.55)

Not achieved

Staff from all key departments, including safer custody, should attend security meetings and all elements of the supply reduction action plan should be implemented. (1.56)

Achieved

All women in the segregation unit should receive formal care and reintegration planning to meet their individual needs. (1.68)

Partially achieved

Women in the segregation unit should be able to access a better range of activities in the unit to occupy their time, as well as off-unit activities to enable them to reintegrate into the normal residential accommodation. (1.69)

Not achieved

The range of substance misuse interventions should include low intensity workshops for short-term prisoners and the peer support scheme should be developed along with better consultation with service users. (1.79)

Achieved

Clinical and psychosocial substance misuse services should further improve joint working and provide fully integrated care. (1.80)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2015, the quality of the accommodation was mixed but all of it was clean and the overall environment was good. Staff-prisoner relationships were a significant strength and some staff were outstanding. The support offered to women with protected characteristics was generally very good. Gay, bisexual and disabled women were less positive in our survey than others, but we found outcomes to be generally good. Faith provision was generally good. Responses to complaints were good and legal services reasonable. Health services were very good. Food and canteen arrangements were both reasonable. Outcomes for women were good against this healthy prison test.

Recommendations

Cells designed for one prisoner should not be used to accommodate two and all toilets should be effectively screened. (2.10)

Achieved

Women should not have to buy all their clothing from catalogues. (2.11)

Achieved

Foreign national women should receive regular free telephone calls that are long enough for them to be able to maintain good contact with their children and their carers. (2.38)

Achieved

The negative perceptions of women with disabilities and gay and bisexual women in our survey should be better understood and any issues addressed. (2.39)

Achieved

The facilities available in Larch House should meet the physical needs of all women. (2.40)

Not achieved

The MBU should always be staffed by suitably trained staff and women should be able to leave their rooms at night. (2.41)

Achieved

The chaplaincy should be represented at all departmental management meetings. 2.47)

Not achieved

Legal visits should always be held in private. (2.56)

Achieved

Waiting lists should be reduced, particularly those for the optician and smoking cessation clinic. (2.69)

Achieved

Care for older women should reflect what they would receive in the community, including gender and age specific screening programmes and Well Woman services. (2.80)

Achieved

Secondary health assessments should be conducted in an environment that enables women to disclose their health and well-being concerns and feel supported during their first few days in custody. (2.81)

Achieved

Women with insulin-dependent diabetes who are unable to keep their testing and insulin equipment with them should have timely blood tests and insulin administration. (2.82)

Achieved

Records of medicines administration should include details of omissions including the reasons, and where possible, information about administration audits conducted to provide assurance. (2.91)

Achieved

Nurses should record administration of all CDs at the time of administration in accordance with professional guidance and national standards. A review of how CDs are transported across the prison should be carried out and risks identified and managed appropriately. (2.92)

Achieved

The medicines and therapeutics committee should review the prescribing of mirtazapine to ensure it complies with the formulary and best practice guidance. (2.93)

Achieved

Compliance with prescribed medicines should be monitored and followed up where appropriate. (2.94)

Achieved

Staff working with prisoners should have up-to-date mental health awareness training. (2.109)

Achieved

Women should have prompt access to talking therapies, including the IAPT service. (2.110)

Not achieved

Breakfast should be issued on the day it is to be eaten and lunch should not be served before 12 noon. (2.115)

Not achieved

The supervision of and standards in house serveries should be improved. (2.116)

Achieved

Advances should be claimed back gradually, so that prisoners do not face hardship or risk being victimised. (2.121)

Not achieved

There should be no administration charge for catalogue orders. (2.122)

Not achieved

Purposeful activity

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

At the last inspection, in 2016, time out of cell was good for those in full-time work, but too many women were locked up during the day. The learning and skills provision was better than at the last inspection but still required improvement overall. Partnership working had improved, but there were insufficient activity places and not all those available were being used. A wide range of opportunities was offered but more provision was needed for women whose stays were short. Those in activities achieved some very good outcomes. Teaching was good and peer mentors provided some welcome support. Use of the library needed to improve. The gym provided good opportunities, although it was not used frequently enough. Outcomes for women were not sufficiently good against this healthy prison test.

Recommendations

Women should receive adequate notice of any cancellation or curtailment in association. (3.4)

Achieved

The prison should ensure that cover arrangements for absent staff are adequate and do not result in the cancellation of classes or activities. (3.13)

Achieved

Managers should minimise the number of disruptions that occur during learning, skills and work activities by ensuring other appointments do not clash with them. (3.24)

Partially achieved

The prison should ensure that the virtual campus is a better used resource by advertising its availability more widely. (3.32)

Not achieved

The prison should ensure that library staff analyse data on usage to inform a promotion strategy for the library. (3.33)

Achieved

Women who are at work or in education during the day should be able to attend the full range of PE activities and recreational gym sessions. (3.40)

Achieved

The prison should ensure that PE staff analyse data on gym usage to encourage more prisoners to participate in activities that promote their health and well-being. (3.41)

Partially achieved

Resettlement

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

At the last inspection, 2015, strategic management of resettlement was very good and the needs of the population were clearly understood. Provision matched needs well but the use of release on temporary licence (ROTL) needed to improve. Offender management work was mixed; offender supervisors saw all prisoners on arrival and periodically afterwards and most assessments had been completed. However, too much case work was inadequate, as was release planning, particularly for high risk prisoners. There were also problems with some aspects of public protection work, particularly around multi-agency public protection arrangements (MAPPA). Allocation work was reasonable although a better regime needed to be offered to those considered suitable for open conditions. Indeterminate and long sentence prisoners would have benefited from more opportunities to cook for themselves. Resettlement arrangements were in transition, but reintegration work remained strong as did support in the resettlement pathways. Women received excellent support in maintaining contact with their families. Outcomes for women were reasonably good against this healthy prison test.

Main recommendations

Quality assurance processes in the OMU should ensure that all OASys assessments and sentence plans are of a good standard, that ongoing contact with prisoners is meaningful and sufficient and that assessments are reviewed prior to a prisoner's release. (S44)

Achieved

Prison managers should ensure that the management level of all MAPPA prisoners is established six months prior to release and that the IDRMT monitors risk management plans for release as necessary. (S45)

Achieved

Recommendations

ROTL should be used creatively to support resettlement planning. (4.6)

Not achieved

Subject to any confidentiality requirements, staff should use a single contact log to record and share information about sentence and resettlement plans, details of prisoner contact and the work done to achieve objectives. (4.15)

Achieved

Women suitable for open conditions should be offered a more flexible and relaxed regime in accordance with the risks they present. (4.21)

Achieved

The prison should introduce regular, minuted consultation with indeterminate sentenced prisoners to ensure their views are heard and their specific needs met. (4.25)

Achieved

Life-sentenced and long-term sentenced prisoners should have the opportunity to cater for themselves. (4.26)

Not achieved

Primary carers should be identified and support plans developed to ensure good contact with their children. (4.41)

Achieved

All women should be able to have at least one visit a week. (4.42)

Not achieved

The need for victim awareness work should be prioritised and appropriate interventions provided. (4.68)

Partially achieved

Appendix III: Care Quality Commission Requirement Notice



Requirement Notice

Provider: Care UK Health & Rehabilitation Services Limited

Location: HMP New Hall

Location ID: 1-4053234515

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

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:

Prisoners requiring mental health support did not always receive person centred care that was appropriate, met their needs and reflected their preferences:

- Records we reviewed showed that mental health clinics were often cancelled due to on-going staffing shortages and appointments re-booked, which directly impacted on timely triage and assessment of need.
- Initial mental health triage clinics were scheduled daily, but did not always happen because of on-going staffing shortages and patients waited up to four weeks to be seen at the time of our inspection.
- Prisoners waited too long to access a primary mental health assessment. Those requiring a full assessment waited around four weeks for an assessment at the time of our inspection, although some had waited since

December 2018. Some prisoners were also transferred or released without being assessed.

- Prisoners with mild to moderate mental health issues did not have access to community-equivalent, planned ongoing treatment or psychological interventions. No group work was running at the time of our inspection.
- Required reviews for prisoners with more serious mental health problems such as Care Programme Approach six-monthly reviews were sometimes delayed due to the on-going staffing shortages.

Appendix IV: Prison population profile

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

Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced	5	284	73.10
Recall	0	50	12.7
Convicted unsentenced	2	13	3.8
Remand	0	39	9.9
Civil prisoners	0	0	0.0
Detainees	0	2	0.5
Total	7	388	100

Sentence	18–20 yr olds	21 and over	%
Unsentenced	2	60	15.7
Less than six months	1	40	10.4
six months to less than 12 months	1	32	8.4
12 months to less than 2 years	0	34	8.6
2 years to less than 4 years	2	69	18
4 years to less than 10 years	0	102	25.8
10 years and over (not life)	1	13	3.5
ISPP (indeterminate sentence for public protection)	0	32	9.6
Life		6	1.5
Total	7	388	100.0

Age	Number of prisoners	%
Please state minimum age here:		
Under 21 years	7	1.8
21 years to 29 years	87	22.0
30 years to 39 years	143	36.2
40 years to 49 years	104	26.3
50 years to 59 years	41	10.4
60 years to 69 years	9	2.3
70 plus years	4	1.0
Please state maximum age here:	83	
Total	395	100

Nationality	18–20 yr olds	21 and over	%
British	6	364	93.7
Foreign nationals	1	24	6.3
Total	7	388	100.0

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced	1	44	
Uncategorised sentenced	0	0	
Category A	0	0	
Category B	5	336	
Category C	0	0	
Category D	1	7	
Other	0	0	
Total	7	394	

Ethnicity	18–20 yr olds	21 and over	%
White			
British	6	319	82.3
Irish	0	3	0.8
Gypsy/Irish Traveller	0	4	1.0
Other white	0	17	4.3
Mixed			
White and black Caribbean	0	5	1.3
White and black African	0	3	0.8
White and Asian	0	2	0.5
Other mixed	0	2	0.5
Asian or Asian British	1	2	0.8
Indian	0	3	0.8
Pakistani	0	3	0.8
Bangladeshi	0	1	0.3
Chinese	0	0	0.0
Other Asian	0	0	0.0
Black or black British	0	7	1.8
Caribbean	0	5	1.3
African	0	7	1.8
Other black	0	0	0.0
Other ethnic group	0	0	0.0
Arab	0	0	0.0
Other ethnic group	0	1	0.3
Not stated	0	4	1.0
Total	7	388	100.0

Religion	18–20 yr olds	21 and over	%
Baptist	0	0	0.0
Church of England	1	93	23.8
Roman Catholic	0	63	15.9
Other Christian denominations	0	62	15.7
Muslim	0	14	3.5
Sikh	0	1	0.3
Hindu	0	1	0.3
Buddhist	1	6	1.8
Jewish	0	0	0.0
Other	0	4	1.0
No religion	5	144	35.9
Total	7	388	100.0

Other demographics	18–20 yr olds	21 and over	%
Veteran (ex-armed services)	0	1	0.3
Total	0	0	0.3

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	2	0.5	81	20.5
1 month to 3 months	2	0.5	84	21.3
3 months to six months	1	0.3	49	12.4
six months to 1 year	0	0.0	45	11.4
1 year to 2 years	0	0.0	38	9.6
2 years to 4 years	0	0.0	18	4.6
4 years or more	0	0.0	13	3.3
Total	5	1.3	328	83.0

Sentenced prisoners only

	18–20 yr olds	21 and over	%
Foreign nationals detained post sentence expiry	0	2	0.5
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions).	0	0	0.0
Total	0	0	0

Unsentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	1	0.3	24	6.1
1 month to 3 months	1	0.3	17	4.3
3 months to six months	0	0.0	14	3.5
six months to 1 year	0	0.0	3	0.8
1 year to 2 years	0	0.0	2	0.5
2 years to 4 years	0	0.0	0	0.0
4 years or more	0	0.0	0	0.0
Total	2	0.5	60	15.2

Main offence	18–20 yr olds	21 and over	%
Violence against the person	2	117	
Sexual offences	0	14	
Burglary	0	36	
Robbery	0	54	
Theft and handling	0	53	
Fraud and forgery	0	11	
Drugs offences	1	34	
Other offences	4	71	
Civil offences	0	1	
Offence not recorded /holding warrant	0	0	
Total			

Appendix V: Prisoner survey methodology and results

Prisoner survey methodology

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

HM Inspectorate of Prisons (HMI Prisons) researchers have developed a self-completion questionnaire to support HMI Prisons' *Expectations*. The questionnaire consists of structured questions covering the prisoner 'journey' from reception to release, together with demographic and background questions which enable us to compare responses from different sub-groups of the prisoner population. There are also three open questions at the end of the questionnaire which allow prisoners to express, in their own words, what they find most positive and negative about the prison.¹¹

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

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

Sampling

On the day of the survey a stratified random sample is drawn by HMI Prisons researchers from a P-NOMIS prisoner population printout ordered by cell location. Using a power calculation, HMI Prisons researchers calculate the minimum sample size required to ensure that the survey findings can be generalised to the entire population of the establishment.¹²

Distributing and collecting questionnaires

HMI Prisons researchers distribute and collect the questionnaires in person. So that prisoners can give their informed consent to participate, the purpose of the survey is explained and assurances are given about confidentiality and anonymity.¹³ 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 25 February 2019 the prisoner population at HMP & YOI New Hall was 399. Using the sampling method described above, questionnaires were distributed to 175 prisoners. We received a total of 158 completed questionnaires, a response rate of 90%. This included one questionnaire completed via face-to-face interviews. Twelve prisoners declined to participate in the survey and five questionnaires were either not returned at all, or returned blank.

¹¹ Qualitative analysis of these written comments is undertaken by HMI Prisons researchers and used by inspectors.

¹² 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments).

¹³ For further information about the ethical principles which underpin our survey methodology, please see *Ethical principles for research activities* which can be downloaded from HMI Prisons' website <http://www.justiceinspectorates.gov.uk/hmiprisoners/about-our-inspections/>

Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for HMP & YOI New Hall. For the comparator analyses, each question was reformulated into a binary ‘yes/no’ format and affirmative responses compared.¹⁴ 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 & YOI New Hall 2019¹⁵ compared with those from other HMI Prisons surveys¹⁶

- Survey responses from HMP & YOI New Hall in 2019 compared with survey responses from other local women’s prisons since September 2017.
- Survey responses from HMP & YOI New Hall in 2019 compared with survey responses from from HMP & YOI New Hall in 2015.

Comparisons between different residential locations within HMP & YOI New Hall 2019

- Responses of prisoners on older accommodation (Willow unit: A, B and C wings) compared with those from the rest of the establishment.

Comparisons between sub-populations of prisoners within HMP & YOI New Hall 2019¹⁷

- White prisoners’ responses compared with those of prisoners from black or minority ethnic groups.
- Disabled prisoners’ responses compared with those who do not have a disability.
- Responses of prisoners with mental health problems compared with those who do not have mental health problems.
- Responses of prisoners aged 50 and over compared with those under 50.
- Responses of prisoners aged 25 and under compared with those over 25.
- Heterosexual prisoners’ responses compared with those of other sexual orientations.

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group.¹⁸

In the comparator analyses, statistically significant differences are indicated by shading.¹⁹ Results that are significantly more positive are indicated by green shading and results that are significantly more negative are indicated by blue shading. Orange shading has been used to show a statistically significant difference in demographic or other background details. If there is no shading, any difference between the two results is not statistically significant and may have occurred by chance. Grey shading indicates that there is no valid comparative data for that question.

¹⁴ Using the Chi-square test (or Fisher’s exact test if there are fewer than five responses in a group).

¹⁵ Percentages shown in the full breakdown may differ slightly from those shown in the comparative analyses. This is because the data has been weighted to enable valid statistical comparison between establishments.

¹⁶ 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.

¹⁷ These analyses are carried out on summary data from selected survey questions only.

¹⁸ A minimum of 10 responses which must also represent at least 10% of the total response.

¹⁹ 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

Background information

I.1	What wing or houseblock are you currently living on?	
	Willow (A)	14 (9%)
	Willow (B)	12 (8%)
	Willow (C)	10 (6%)
	Poplar (E1)	14 (9%)
	Poplar (E2)	31 (20%)
	Oak (F).....	46 (29%)
	Larch (G)	16 (10%)
	Holly (H)	2 (1%)
	Maple (M)	2 (1%)
	Rivendell (R)	11 (7%)
	Segregation unit.....	0 (0%)
I.2	How old are you?	
	Under 21	3 (2%)
	21 - 25.....	19 (12%)
	26 - 29.....	17 (11%)
	30 - 39.....	54 (35%)
	40 - 49.....	41 (26%)
	50 - 59.....	18 (12%)
	60 - 69.....	2 (1%)
	70 or over.....	2 (1%)
I.3	What is your ethnic group?	
	White - English/ Welsh/ Scottish/ Northern Irish/ British	134 (85%)
	White - Irish.....	0 (0%)
	White - Gypsy or Irish Traveller.....	2 (1%)
	White - any other White background	3 (2%)
	Mixed - White and Black Caribbean	7 (4%)
	Mixed - White and Black African	1 (1%)
	Mixed - White and Asian	2 (1%)
	Mixed - any other Mixed ethnic background	0 (0%)
	Asian/ Asian British - Indian.....	0 (0%)
	Asian/ Asian British - Pakistani.....	2 (1%)
	Asian/ Asian British - Bangladeshi.....	0 (0%)
	Asian/ Asian British - Chinese.....	0 (0%)
	Asian - any other Asian Background	1 (1%)
	Black/ Black British - Caribbean.....	2 (1%)
	Black/ Black British - African	1 (1%)
	Black - any other Black/ African/ Caribbean background.....	0 (0%)
	Arab.....	0 (0%)
	Any other ethnic group	2 (1%)
I.4	How long have you been in this prison?	
	Less than 6 months.....	85 (57%)
	6 months or more	65 (43%)

1.5	Are you currently serving a sentence?	
	Yes	112 (74%)
	Yes - on recall	21 (14%)
	No - on remand or awaiting sentence	19 (13%)
	No - immigration detainee.....	0 (0%)
1.6	How long is your sentence?	
	Less than 6 months.....	23 (15%)
	6 months to less than 1 year	27 (18%)
	1 year to less than 4 years	30 (20%)
	4 years to less than 10 years	30 (20%)
	10 years or more	4 (3%)
	IPP (indeterminate sentence for public protection)	3 (2%)
	Life	15 (10%)
	Not currently serving a sentence.....	19 (13%)

Arrival and reception

2.1	Were you given up-to-date information about this prison before you came here?	
	Yes	27 (18%)
	No.....	118 (77%)
	Don't remember	8 (5%)
2.2	When you arrived at this prison, how long did you spend in reception?	
	Less than 2 hours	69 (45%)
	2 hours or more.....	69 (45%)
	Don't remember	17 (11%)
2.3	When you were searched in reception, was this done in a respectful way?	
	Yes	130 (84%)
	No.....	15 (10%)
	Don't remember	10 (6%)
2.4	Overall, how were you treated in reception?	
	Very well	45 (30%)
	Quite well	77 (51%)
	Quite badly	19 (13%)
	Very badly	6 (4%)
	Don't remember	5 (3%)
2.5	When you first arrived here, did you have any of the following problems?	
	Problems getting phone numbers	57 (37%)
	Contacting family.....	54 (35%)
	Arranging care for children or other dependants.....	4 (3%)
	Contacting employers.....	5 (3%)
	Money worries.....	54 (35%)
	Housing worries	52 (34%)
	Feeling depressed.....	98 (63%)
	Feeling suicidal	47 (30%)
	Other mental health problems	76 (49%)
	Physical health problems	43 (28%)
	Drug or alcohol problems (e.g. withdrawal)	69 (45%)
	Problems getting medication	66 (43%)
	Needing protection from other prisoners.....	8 (5%)
	Lost or delayed property	19 (12%)
	Other problems.....	28 (18%)
	Did not have any problems.....	14 (9%)

2.6	Did staff help you to deal with these problems when you first arrived?	
	Yes	56 (39%)
	No	73 (51%)
	Did not have any problems when I first arrived	14 (10%)

First night and induction

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

Tobacco or nicotine replacement	121 (79%)
Toiletries / other basic items	99 (64%)
A shower	75 (49%)
A free phone call	109 (71%)
Something to eat	123 (80%)
The chance to see someone from health care	96 (62%)
The chance to talk to a Listener or Samaritans	47 (31%)
Support from another prisoner (e.g. Insider or buddy)	26 (17%)
Wasn't offered any of these things	8 (5%)

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

Very clean	18 (12%)
Quite clean	70 (47%)
Quite dirty	36 (24%)
Very dirty	21 (14%)
Don't remember	4 (3%)

3.3 Did you feel safe on your first night here?

Yes	110 (74%)
No	32 (22%)
Don't remember	6 (4%)

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

	Yes	No	Don't remember
Access to the prison shop / canteen?	50 (34%)	93 (64%)	2 (1%)
Free PIN phone credit?	63 (44%)	78 (55%)	2 (1%)
Numbers put on your PIN phone?	50 (36%)	82 (59%)	8 (6%)

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

Yes	52 (36%)
No	67 (46%)
Have not had an induction	27 (18%)

On the wing

4.1 Are you in a cell on your own?

Yes	124 (82%)
No, I'm in a shared cell or dormitory	27 (18%)

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

Yes	80 (54%)
No	46 (31%)
Don't know	9 (6%)
Don't have a cell call bell	12 (8%)

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?	109 (73%)	40 (27%)	0 (0%)
Can you shower every day?	97 (66%)	48 (33%)	1 (1%)
Do you have clean sheets every week?	133 (89%)	15 (10%)	1 (1%)
Do you get cell cleaning materials every week?	115 (78%)	31 (21%)	2 (1%)
Is it normally quiet enough for you to relax or sleep at night?	102 (70%)	43 (29%)	1 (1%)
Can you get your stored property if you need it?	49 (34%)	56 (38%)	41 (28%)

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

Very clean	29 (19%)
Quite clean	75 (50%)
Quite dirty	34 (23%)
Very dirty	12 (8%)

Food and canteen

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

Very good	9 (6%)
Quite good	76 (50%)
Quite bad	40 (26%)
Very bad	27 (18%)

5.2 Do you get enough to eat at mealtimes?

Always	20 (13%)
Most of the time	49 (32%)
Some of the time	54 (35%)
Never	30 (20%)

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

Yes	104 (69%)
No	37 (25%)
Don't know	9 (6%)

Relationships with staff

6.1 Do most staff here treat you with respect?

Yes	109 (74%)
No	38 (26%)

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

Yes	127 (83%)
No	26 (17%)

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

Yes	44 (29%)
No	109 (71%)

6.4	How helpful is your personal or named officer?	
	Very helpful.....	36 (24%)
	Quite helpful.....	20 (13%)
	Not very helpful	13 (9%)
	Not at all helpful.....	21 (14%)
	Don't know.....	33 (22%)
	Don't have a personal / named officer	26 (17%)
6.5	How often do you see prison governors, directors or senior managers talking to prisoners?	
	Regularly.....	17 (11%)
	Sometimes.....	27 (18%)
	Hardly ever.....	94 (61%)
	Don't know.....	16 (10%)
6.6	Do you feel that you are treated as an individual in this prison?	
	Yes.....	68 (47%)
	No.....	77 (53%)
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	
	Yes, and things sometimes change.....	27 (18%)
	Yes, but things don't change.....	55 (36%)
	No.....	45 (29%)
	Don't know.....	26 (17%)

Faith

7.1	What is your religion?	
	No religion.....	53 (34%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations).....	92 (59%)
	Buddhist.....	4 (3%)
	Hindu.....	0 (0%)
	Jewish	0 (0%)
	Muslim.....	3 (2%)
	Sikh	0 (0%)
	Other	4 (3%)
7.2	Are your religious beliefs respected here?	
	Yes.....	81 (54%)
	No.....	7 (5%)
	Don't know.....	10 (7%)
	Not applicable (no religion).....	53 (35%)
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	
	Yes.....	80 (51%)
	No.....	7 (4%)
	Don't know.....	16 (10%)
	Not applicable (no religion).....	53 (34%)
7.4	Are you able to attend religious services, if you want to?	
	Yes.....	95 (61%)
	No.....	5 (3%)
	Don't know.....	3 (2%)
	Not applicable (no religion).....	53 (34%)

Contact with family and friends

8.1	Have staff here encouraged you to keep in touch with your family / friends?	
	Yes	48 (31%)
	No	109 (69%)
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	68 (44%)
	No	85 (56%)
8.3	Are you able to use a phone every day (if you have credit)?	
	Yes	108 (73%)
	No	40 (27%)
8.4	How easy or difficult is it for your family and friends to get here?	
	Very easy	12 (8%)
	Quite easy	39 (25%)
	Quite difficult	44 (29%)
	Very difficult	49 (32%)
	Don't know	10 (6%)
8.5	How often do you have visits from family or friends?	
	More than once a week	4 (3%)
	About once a week	21 (14%)
	Less than once a week	63 (42%)
	Not applicable (don't get visits)	63 (42%)
8.6	Do visits usually start and finish on time?	
	Yes	28 (32%)
	No	60 (68%)
8.7	Are your visitors usually treated respectfully by staff?	
	Yes	68 (79%)
	No	18 (21%)

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	64 (42%)
	Yes, but these times are not usually kept to	69 (45%)
	No	19 (13%)
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	15 (10%)
	2 to 6 hours	47 (31%)
	6 to 10 hours	46 (31%)
	10 hours or more	22 (15%)
	Don't know	20 (13%)
9.3	How long do you usually spend out of your cell on a typical Saturday or Sunday?	
	Less than 2 hours	24 (16%)
	2 to 6 hours	85 (57%)
	6 to 10 hours	15 (10%)
	10 hours or more	12 (8%)
	Don't know	13 (9%)

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	21 (14%)
3 to 5.....	54 (36%)
More than 5.....	62 (41%)
Don't know.....	12 (8%)

9.5 How many days in a typical week do you get association, if you want it?

None	4 (3%)
1 or 2	15 (10%)
3 to 5.....	55 (37%)
More than 5.....	63 (43%)
Don't know.....	11 (7%)

9.6 How many days in a typical week could you go outside for exercise, if you wanted to?

None	9 (6%)
1 or 2	24 (16%)
3 to 5.....	35 (23%)
More than 5.....	69 (46%)
Don't know.....	13 (9%)

9.7 Typically, how often do you go to the gym?

Twice a week or more	37 (24%)
About once a week.....	13 (9%)
Less than once a week.....	14 (9%)
Never	88 (58%)

9.8 Typically, how often do you go to the library?

Twice a week or more	13 (9%)
About once a week.....	89 (59%)
Less than once a week.....	15 (10%)
Never	34 (23%)

9.9 Does the library have a wide enough range of materials to meet your needs?

Yes	80 (55%)
No.....	32 (22%)
Don't use the library	34 (23%)

Applications, complaints and legal rights**10.1 Is it easy for you to make an application?**

Yes.....	122 (79%)
No.....	25 (16%)
Don't know.....	7 (5%)

10.2 If you have made any applications here, please answer the questions below:

	Yes	No	Not made any applications
Are applications usually dealt with fairly?	83 (61%)	45 (33%)	7 (5%)
Are applications usually dealt with within 7 days?	50 (36%)	83 (59%)	7 (5%)

I0.3 Is it easy for you to make a complaint?

Yes.....	105 (68%)
No.....	23 (15%)
Don't know.....	26 (17%)

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 (26%)	45 (32%)	58 (42%)
Are complaints usually dealt with within 7 days?	23 (17%)	54 (40%)	58 (43%)

I0.5 Have you ever been prevented from making a complaint here when you wanted to?

Yes.....	29 (19%)
No.....	78 (52%)
Not wanted to make a complaint.....	44 (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?	54 (36%)	40 (26%)	28 (19%)	29 (19%)
Attend legal visits?	64 (44%)	15 (10%)	37 (25%)	31 (21%)
Get bail information?	21 (14%)	31 (21%)	42 (29%)	52 (36%)

I0.7 Have staff here ever opened letters from your solicitor or legal representative when you were not present?

Yes.....	54 (35%)
No.....	79 (51%)
Not had any legal letters.....	23 (15%)

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	3 (2%)	13 (8%)	55 (35%)	77 (50%)	7 (5%)
Nurse	9 (6%)	51 (34%)	43 (28%)	44 (29%)	4 (3%)
Dentist	3 (2%)	9 (6%)	34 (23%)	89 (60%)	13 (9%)
Mental health workers	5 (3%)	19 (13%)	35 (23%)	72 (48%)	20 (13%)

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	12 (8%)	49 (32%)	35 (23%)	37 (25%)	8 (12%)
Nurse	21 (14%)	64 (43%)	28 (19%)	30 (20%)	6 (4%)
Dentist	7 (5%)	27 (18%)	37 (25%)	35 (24%)	42 (28%)
Mental health workers	9 (6%)	30 (20%)	30 (20%)	44 (30%)	34 (23%)

I1.3 Do you have any mental health problems?

Yes.....	120 (78%)
No.....	33 (22%)

I1.4 Have you been helped with your mental health problems in this prison?

Yes.....	52 (34%)
No.....	67 (44%)
Don't have any mental health problems.....	33 (22%)

11.5	What do you think of the overall quality of the health services here?	
	Very good	6 (4%)
	Quite good	39 (25%)
	Quite bad	44 (29%)
	Very bad	56 (36%)
	Don't know.....	9 (6%)

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	93 (60%)
	No.....	61 (40%)
12.2	If you have a disability, are you getting the support you need?	
	Yes	26 (18%)
	No.....	57 (40%)
	Don't have a disability	61 (42%)
12.3	Have you been on an ACCT in this prison?	
	Yes	67 (44%)
	No.....	85 (56%)
12.4	If you have been on an ACCT in this prison, did you feel cared for by staff?	
	Yes	32 (21%)
	No.....	34 (23%)
	Have not been on an ACCT in this prison.....	85 (56%)
12.5	How easy or difficult is it for you to speak to a Listener, if you need to?	
	Very easy	18 (12%)
	Quite easy	34 (22%)
	Quite difficult	7 (5%)
	Very difficult	14 (9%)
	Don't know.....	77 (50%)
	No Listeners at this prison	4 (3%)

Alcohol and drugs

13.1	Did you have an alcohol problem when you came into this prison?	
	Yes	44 (28%)
	No.....	112 (72%)
13.2	Have you been helped with your alcohol problem in this prison?	
	Yes	27 (17%)
	No.....	16 (10%)
	Did not / do not have an alcohol problem	112 (72%)
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	92 (59%)
	No.....	63 (41%)
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	27 (17%)
	No.....	129 (83%)

13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	28 (18%)
	No.....	127 (82%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	73 (48%)
	No.....	23 (15%)
	Did not / do not have a drug problem.....	55 (36%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy.....	41 (27%)
	Quite easy.....	39 (26%)
	Quite difficult	8 (5%)
	Very difficult	8 (5%)
	Don't know.....	54 (36%)
13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy.....	2 (1%)
	Quite easy.....	5 (3%)
	Quite difficult	11 (7%)
	Very difficult	44 (30%)
	Don't know.....	87 (58%)
Safety		
14.1	Have you ever felt unsafe here?	
	Yes	73 (49%)
	No.....	77 (51%)
14.2	Do you feel unsafe now?	
	Yes	24 (16%)
	No.....	124 (84%)
14.3	Have you experienced any of the following types of bullying / victimisation from other prisoners here?	
	Verbal abuse.....	62 (43%)
	Threats or intimidation.....	66 (46%)
	Physical assault.....	18 (12%)
	Sexual assault.....	3 (2%)
	Theft of canteen or property.....	39 (27%)
	Other bullying / victimisation	31 (21%)
	Not experienced any of these from prisoners here.....	59 (41%)
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	
	Yes	71 (49%)
	No.....	73 (51%)
14.5	Have you experienced any of the following types of bullying / victimisation from staff here?	
	Verbal abuse.....	37 (26%)
	Threats or intimidation.....	27 (19%)
	Physical assault.....	4 (3%)
	Sexual assault.....	2 (1%)
	Theft of canteen or property.....	7 (5%)
	Other bullying / victimisation	28 (20%)
	Not experienced any of these from staff here.....	80 (57%)

14.6	If you were being bullied / victimised by staff here, would you report it?	
	Yes	81 (57%)
	No	61 (43%)

Behaviour management

15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?		
	Yes	61 (41%)	
	No	58 (39%)	
	Don't know what the incentives / rewards are	30 (20%)	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?		
	Yes	60 (41%)	
	No	44 (30%)	
	Don't know	19 (13%)	
	Don't know what this is	25 (17%)	
15.3	Have you been physically restrained by staff in this prison in the last 6 months?		
	Yes	12 (8%)	
	No	142 (92%)	
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	5 (3%)	
	Don't remember	0 (0%)	
	Not been restrained here in last 6 months	142 (93%)	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?		
	Yes	18 (12%)	
	No	135 (88%)	
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?	12 (67%)	6 (33%)
	Could you shower every day?	11 (61%)	7 (39%)
	Could you go outside for exercise every day?	14 (78%)	4 (22%)
	Could you use the phone every day (if you had credit)?	11 (61%)	7 (39%)

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	80 (55%)	35 (24%)	30 (21%)
	Vocational or skills training	51 (38%)	33 (24%)	51 (38%)
	Prison job	90 (62%)	32 (22%)	23 (16%)
	Voluntary work outside of the prison	9 (6%)	36 (26%)	73 (52%)
	Paid work outside of the prison	7 (5%)	31 (22%)	74 (53%)
				28 (20%)

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 help
Education	91 (65%)	30 (21%)	19 (14%)
Vocational or skills training	60 (45%)	27 (20%)	45 (34%)
Prison job	58 (44%)	52 (40%)	21 (16%)
Voluntary work outside of the prison	21 (17%)	22 (17%)	83 (66%)
Paid work outside of the prison	21 (17%)	22 (18%)	81 (65%)

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

Yes.....	94 (63%)
No.....	45 (30%)
Not applicable (e.g. if you are retired, sick or on remand).....	10 (7%)

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

Yes.....	72 (48%)
No.....	78 (52%)

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

Yes.....	60 (85%)
No.....	3 (4%)
Don't know what my objectives or targets are.....	8 (11%)

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

Yes.....	43 (61%)
No.....	19 (27%)
Don't know what my objectives or targets are.....	8 (11%)

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	32 (49%)	2 (3%)	31 (48%)
Other programmes	35 (54%)	2 (3%)	28 (43%)
One to one work	24 (40%)	5 (8%)	31 (52%)
Being on a specialist unit	8 (14%)	4 (7%)	45 (79%)
ROTL - day or overnight release	3 (5%)	3 (5%)	52 (90%)

Preparation for release**18.1 Do you expect to be released in the next 3 months?**

Yes.....	59 (39%)
No.....	79 (52%)
Don't know.....	15 (10%)

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

Very near.....	2 (3%)
Quite near.....	25 (42%)
Quite far.....	15 (25%)

Very far 17 (29%)

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

Yes 37 (64%)

No 21 (36%)

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	11 (20%)	29 (52%)	16 (29%)
Getting employment	5 (10%)	24 (48%)	21 (42%)
Setting up education or training	1 (2%)	22 (46%)	25 (52%)
Arranging benefits	21 (38%)	32 (57%)	3 (5%)
Sorting out finances	7 (14%)	25 (49%)	19 (37%)
Support for drug or alcohol problems	21 (39%)	20 (37%)	13 (24%)
Health / mental health support	11 (20%)	32 (58%)	12 (22%)
Social care support	3 (6%)	18 (38%)	26 (55%)
Getting back in touch with family or friends	7 (14%)	15 (30%)	28 (56%)

More about you

19.1 Do you have children under the age of 18?

Yes 89 (58%)

No 65 (42%)

19.2 Are you a UK / British citizen?

Yes 148 (96%)

No 6 (4%)

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

Yes 6 (4%)

No 142 (96%)

19.4 Have you ever been in the armed services (e.g. army, navy, air force)?

Yes 2 (1%)

No 150 (99%)

19.5 What is your gender?

Male 1 (1%)

Female 151 (99%)

Non-binary 0 (0%)

Other 1 (1%)

19.6 How would you describe your sexual orientation?

Straight / heterosexual 110 (72%)

Gay / lesbian / homosexual 18 (12%)

Bisexual 24 (16%)

Other 1 (1%)

19.7 Do you identify as transgender or transsexual?

Yes 3 (2%)

No 147 (98%)

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.....	7 (5%)
Less likely to offend.....	93 (63%)
Made no difference	48 (32%)

HMP & YOI New Hall 2019

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

In this table summary statistics from HMP & YOI New Hall 2019 are compared with the following HMIP survey data:

- Summary statistics from surveys of local prisons conducted since the introduction of the new questionnaire in September 2017 (5 prisons). Please note that this does not include all local prisons.
- Summary statistics from HMP & YOI New Hall in 2019 are compared with those from HMP & YOI New Hall in 2015. Please note that we do not have comparable data for the new questions introduced in September 2017.

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DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION						
1.2	Are you under 21 years of age?	<i>n</i> =156	2%	5%	2%	5%
	Are you 25 years of age or younger?	<i>n</i> =156	14%	15%	14%	
	Are you 50 years of age or older?	<i>n</i> =156	14%	10%	14%	11%
	Are you 70 years of age or older?	<i>n</i> =156	1%	1%	1%	1%
1.3	Are you from a minority ethnic group?	<i>n</i> =157	12%	17%	12%	10%
1.4	Have you been in this prison for less than 6 months?	<i>n</i> =150	57%	53%	57%	
1.5	Are you currently serving a sentence?	<i>n</i> =152	88%	80%	88%	90%
	Are you on recall?	<i>n</i> =152	14%	9%	14%	9%
1.6	Is your sentence less than 12 months?	<i>n</i> =151	33%	25%	33%	25%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n</i> =151	2%	2%	2%	7%
7.1	Are you Muslim?	<i>n</i> =156	2%	5%	2%	2%
11.3	Do you have any mental health problems?	<i>n</i> =153	78%	72%	78%	
12.1	Do you consider yourself to have a disability?	<i>n</i> =154	60%	48%	60%	34%
19.1	Do you have any children under the age of 18?	<i>n</i> =154	58%	58%	58%	56%
19.2	Are you a foreign national?	<i>n</i> =154	4%	8%	4%	5%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n</i> =148	4%	8%	4%	6%
19.4	Have you ever been in the armed services?	<i>n</i> =152	1%	2%	1%	3%
19.5	Is your gender male or non-binary?	<i>n</i> =153	1%	1%	1%	
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n</i> =153	28%	25%	28%	33%
19.7	Do you identify as transgender or transsexual?	<i>n</i> =150	2%	2%	2%	
ARRIVAL AND RECEPTION						
2.1	Were you given up-to-date information about this prison before you came here?	<i>n</i> =153	18%	18%	18%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n</i> =155	45%	52%	45%	51%

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2.3	When you were searched in reception, was this done in a respectful way?	<i>n=155</i>	84%	86%	84%	86%
2.4	Overall, were you treated very / quite well in reception?	<i>n=152</i>	80%	85%	80%	

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2.5	When you first arrived, did you have any problems?	<i>n</i> =155	91%	93%	91%	73%
2.5	Did you have problems with:					
	- Getting phone numbers?	<i>n</i> =155	37%	32%	37%	26%
	- Contacting family?	<i>n</i> =155	35%	32%	35%	20%
	- Arranging care for children or other dependents?	<i>n</i> =155	3%	6%	3%	
	- Contacting employers?	<i>n</i> =155	3%	4%	3%	1%
	- Money worries?	<i>n</i> =155	35%	33%	35%	13%
	- Housing worries?	<i>n</i> =155	34%	32%	34%	24%
	- Feeling depressed?	<i>n</i> =155	63%	62%	63%	
	- Feeling suicidal?	<i>n</i> =155	30%	28%	30%	
	- Other mental health problems?	<i>n</i> =155	49%	44%	49%	
	- Physical health problems?	<i>n</i> =155	28%	26%	28%	21%
	- Drugs or alcohol (e.g. withdrawal)?	<i>n</i> =155	45%	40%	45%	
	- Getting medication?	<i>n</i> =155	43%	45%	43%	
	- Needing protection from other prisoners?	<i>n</i> =155	5%	8%	5%	2%
	- Lost or delayed property?	<i>n</i> =155	12%	19%	12%	6%
	<i>For those who had any problems when they first arrived.</i>					
2.6	Did staff help you to deal with these problems?	<i>n</i> =129	43%	42%	43%	55%
FIRST NIGHT AND INDUCTION						
3.1	Before you were locked up on your first night, were you offered:					
	- Tobacco or nicotine replacement?	<i>n</i> =154	79%	70%	79%	84%
	- Toiletries / other basic items?	<i>n</i> =154	64%	68%	64%	69%
	- A shower?	<i>n</i> =154	49%	44%	49%	32%
	- A free phone call?	<i>n</i> =154	71%	68%	71%	82%
	- Something to eat?	<i>n</i> =154	80%	80%	80%	86%
	- The chance to see someone from health care?	<i>n</i> =154	62%	69%	62%	77%
	- The chance to talk to a Listener or Samaritans?	<i>n</i> =154	31%	37%	31%	53%
	- Support from another prisoner (e.g. Insider or buddy)?	<i>n</i> =154	17%	30%	17%	
	- None of these?	<i>n</i> =154	5%	4%	5%	
3.2	On your first night in this prison, was your cell very / quite clean?	<i>n</i> =149	59%	56%	59%	
3.3	Did you feel safe on your first night here?	<i>n</i> =148	74%	65%	74%	77%
3.4	In your first few days here, did you get:					
	- Access to the prison shop / canteen?	<i>n</i> =145	35%	37%	35%	26%
	- Free PIN phone credit?	<i>n</i> =143	44%	59%	44%	
	- Numbers put on your PIN phone?	<i>n</i> =140	36%	47%	36%	

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3.5	Have you had an induction at this prison? <i>n</i>=146	82%	87%	82%	89%
	<i>For those who have had an induction:</i>				
3.5	Did your induction cover everything you needed to know about this prison? <i>n</i>=119	44%	49%	44%	

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ON THE WING						
4.1	Are you in a cell on your own?	<i>n=151</i>	82%	57%	82%	
4.2	Is your cell call bell normally answered within 5 minutes?	<i>n=147</i>	54%	40%	54%	42%
4.3	On the wing or houseblock you currently live on:					
	- Do you normally have enough clean, suitable clothes for the week?	<i>n=149</i>	73%	71%	73%	64%
	- Can you shower every day?	<i>n=146</i>	66%	95%	66%	79%
	- Do you have clean sheets every week?	<i>n=149</i>	89%	86%	89%	96%
	- Do you get cell cleaning materials every week?	<i>n=148</i>	78%	76%	78%	89%
	- Is it normally quiet enough for you to relax or sleep at night?	<i>n=146</i>	70%	61%	70%	63%
	- Can you get your stored property if you need it?	<i>n=146</i>	34%	28%	34%	28%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	<i>n=150</i>	69%	73%	69%	
FOOD AND CANTEEN						
5.1	Is the quality of the food in this prison very / quite good?	<i>n=152</i>	56%	41%	56%	
5.2	Do you get enough to eat at meal-times always / most of the time?	<i>n=153</i>	45%	39%	45%	
5.3	Does the shop / canteen sell the things that you need?	<i>n=150</i>	69%	55%	69%	52%
RELATIONSHIPS WITH STAFF						
6.1	Do most staff here treat you with respect?	<i>n=147</i>	74%	74%	74%	81%
6.2	Are there any staff here you could turn to if you had a problem?	<i>n=153</i>	83%	80%	83%	83%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<i>n=153</i>	29%	38%	29%	40%
6.4	Do you have a personal officer?	<i>n=149</i>	83%	81%	83%	
	<i>For those who have a personal officer:</i>					
6.4	Is your personal or named officer very / quite helpful?	<i>n=123</i>	46%	52%	46%	
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	<i>n=154</i>	11%	13%	11%	
6.6	Do you feel that you are treated as an individual in this prison?	<i>n=145</i>	47%	47%	47%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	<i>n=153</i>	54%	58%	54%	
	If so, do things sometimes change?	<i>n=82</i>	33%	35%	33%	
FAITH						
7.1	Do you have a religion?	<i>n=156</i>	66%	70%	66%	73%
	<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	<i>n=98</i>	83%	75%	83%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	<i>n=103</i>	78%	77%	78%	
7.4	Are you able to attend religious services, if you want to?	<i>n=103</i>	92%	90%	92%	

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CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	n=157	31% 38%	31%	
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	n=153	44% 51%	44%	44%
8.3	Are you able to use a phone every day (if you have credit)?	n=148	73% 94%	73%	
8.4	Is it very / quite easy for your family and friends to get here?	n=154	33% 37%	33%	
8.5	Do you get visits from family/friends once a week or more?	n=151	17% 21%	17%	
<i>For those who get visits:</i>					
8.6	Do visits usually start and finish on time?	n=88	32% 62%	32%	
8.7	Are your visitors usually treated respectfully by staff?	n=86	79% 78%	79%	
TIME OUT OF CELL					
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=152	88% 93%	88%	
<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=133	48% 58%	48%	
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	n=150	10% 11%	10%	11%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	n=150	15% 13%	15%	14%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=149	16% 16%	16%	
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=149	8% 6%	8%	
9.4	Do you have time to do domestics more than 5 days in a typical week?	n=151	41% 59%	41%	
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=148	43% 56%	43%	
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=150	46% 33%	46%	
9.7	Do you typically go to the gym twice a week or more?	n=152	24% 25%	24%	
9.8	Do you typically go to the library once a week or more?	n=151	68% 42%	68%	50%
<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=112	71% 55%	71%	74%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	n=154	79% 74%	79%	91%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	n=128	65% 58%	65%	73%
	Are applications usually dealt with within 7 days?	n=133	38% 42%	38%	54%
10.3	Is it easy for you to make a complaint?	n=154	68% 64%	68%	67%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	n=81	44% 35%	44%	44%
	Are complaints usually dealt with within 7 days?	n=77	30% 31%	30%	37%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=107	27% 32%	27%	

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<i>For those who need it, is it easy to:</i>						
10.6	Communicate with your solicitor or legal representative?	n=122	44%	43%	44%	
	Attend legal visits?	n=116	55%	59%	55%	
	Get bail information?	n=94	22%	21%	22%	
<i>For those who have had legal letters:</i>						
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=133	41%	49%	41%	52%
HEALTH CARE						
11.1	Is it very / quite easy to see:					
	- Doctor?	n=155	10%	22%	10%	
	- Nurse?	n=151	40%	48%	40%	
	- Dentist?	n=148	8%	17%	8%	
	- Mental health workers?	n=151	16%	23%	16%	
11.2	Do you think the quality of the health service is very / quite good from:					
	- Doctor?	n=151	40%	43%	40%	
	- Nurse?	n=149	57%	56%	57%	
	- Dentist?	n=148	23%	41%	23%	
	- Mental health workers?	n=147	27%	36%	27%	
11.3	Do you have any mental health problems?	n=153	78%	72%	78%	
<i>For those who have mental health problems:</i>						
11.4	Have you been helped with your mental health problems in this prison?	n=119	44%	48%	44%	
11.5	Do you think the overall quality of the health services here is very / quite good?	n=154	29%	37%	29%	
OTHER SUPPORT NEEDS						
12.1	Do you consider yourself to have a disability?	n=154	60%	48%	60%	34%
<i>For those who have a disability:</i>						
12.2	Are you getting the support you need?	n=83	31%	34%	31%	
12.3	Have you been on an ACCT in this prison?	n=152	44%	41%	44%	
<i>For those who have been on an ACCT:</i>						
12.4	Did you feel cared for by staff?	n=66	49%	55%	49%	
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=154	34%	47%	34%	
ALCOHOL AND DRUGS						
13.1	Did you have an alcohol problem when you came into this prison?	n=156	28%	28%	28%	43%
<i>For those who had / have an alcohol problem:</i>						
13.2	Have you been helped with your alcohol problem in this prison?	n=43	63%	69%	63%	84%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=155	59%	49%	59%	47%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=156	17%	15%	17%	16%

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13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison? <i>n=155</i>	18%	15%	18%	
	<i>For those who had / have a drug problem:</i>				
13.6	Have you been helped with your drug problem in this prison? <i>n=96</i>	76%	67%	76%	86%
13.7	Is it very / quite easy to get illicit drugs in this prison? <i>n=150</i>	53%	45%	53%	
13.8	Is it very / quite easy to get alcohol in this prison? <i>n=149</i>	5%	9%	5%	

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SAFETY						
14.1	Have you ever felt unsafe here?	<i>n</i> =150	49%	57%	49%	44%
14.2	Do you feel unsafe now?	<i>n</i> =148	16%	21%	16%	15%
14.3	Have you experienced any of the following from other prisoners here:					
	- Verbal abuse?	<i>n</i> =145	43%	47%	43%	
	- Threats or intimidation?	<i>n</i> =145	46%	37%	46%	
	- Physical assault?	<i>n</i> =145	12%	16%	12%	
	- Sexual assault?	<i>n</i> =145	2%	2%	2%	
	- Theft of canteen or property?	<i>n</i> =145	27%	30%	27%	
	- Other bullying / victimisation?	<i>n</i> =145	21%	26%	21%	
	- Not experienced any of these from prisoners here	<i>n</i> =145	41%	39%	41%	
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<i>n</i> =144	49%	49%	49%	
14.5	Have you experienced any of the following from staff here:					
	- Verbal abuse?	<i>n</i> =140	26%	31%	26%	
	- Threats or intimidation?	<i>n</i> =140	19%	24%	19%	
	- Physical assault?	<i>n</i> =140	3%	6%	3%	
	- Sexual assault?	<i>n</i> =140	1%	2%	2%	
	- Theft of canteen or property?	<i>n</i> =140	5%	6%	5%	
	- Other bullying / victimisation?	<i>n</i> =140	20%	17%	20%	
	- Not experienced any of these from staff here	<i>n</i> =140	57%	54%	57%	
14.6	If you were being bullied / victimised by staff here, would you report it?	<i>n</i> =142	57%	61%	57%	
BEHAVIOUR MANAGEMENT						
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<i>n</i> =149	41%	48%	41%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<i>n</i> =148	41%	42%	41%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<i>n</i> =154	8%	7%	8%	10%
<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?	<i>n</i> =10	50%	23%	50%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	<i>n</i> =153	12%	11%	12%	
<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?	<i>n</i> =18	67%	59%	67%	
	Could you shower every day?	<i>n</i> =18	61%	69%	61%	
	Could you go outside for exercise every day?	<i>n</i> =18	78%	63%	78%	
	Could you use the phone every day (if you had credit)?	<i>n</i> =18	61%	62%	61%	

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

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

Number of completed questionnaires returned

HMP & YOI New Hall 2019	All other women's local prisons surveyed since September 2017	HMP & YOI New Hall 2019	HMP & YOI New Hall 2015
158	747	158	169

n=number of valid responses to question (HMP & YOI New Hall 2019)

EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	n=145	55%	66%	55%
	- Vocational or skills training?	n=135	38%	44%	38%
	- Prison job?	n=145	62%	60%	62%
	- Voluntary work outside of the prison?	n=140	6%	5%	6%
	- Paid work outside of the prison?	n=140	5%	5%	5%
16.2	In this prison, have you done the following activities:				
	- Education?	n=140	86%	84%	86%
	- Vocational or skills training?	n=132	66%	67%	66%
	- Prison job?	n=131	84%	84%	84%
	- Voluntary work outside of the prison?	n=126	34%	31%	34%
	- Paid work outside of the prison?	n=124	35%	32%	35%
<i>For those who have done the following activities, do you think they will help you on release.</i>					
	- Education?	n=121	75%	71%	75%
	- Vocational or skills training?	n=87	69%	70%	69%
	- Prison job?	n=110	53%	61%	53%
	- Voluntary work outside of the prison?	n=43	49%	66%	49%
	- Paid work outside of the prison?	n=43	49%	67%	49%
16.3	Do staff encourage you to attend education, training or work?	n=139	68%	71%	68%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	n=150	48%	49%	48%
<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=71	85%	80%	85%
17.3	Are staff helping you to achieve your objectives or targets?	n=70	61%	55%	61%
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	n=65	52%	51%	52%
	- Other programmes?	n=65	57%	57%	57%
	- One to one work?	n=60	48%	52%	48%
	- Been on a specialist unit?	n=57	21%	21%	21%
	- ROTL - day or overnight release?	n=58	10%	15%	10%
<i>For those who have done the following, did they help you to achieve your objectives or targets</i>					
	- Offending behaviour programmes?	n=34	94%	81%	94%
	- Other programmes?	n=37	95%	84%	95%
	- One to one work?	n=29	83%	84%	83%

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

Number of completed questionnaires returned

n=number of valid responses to question (HMP & YOI New Hall 2019)

HMP & YOI New Hall 2019	All other women's local prisons surveyed since September 2017	HMP & YOI New Hall 2019	HMP & YOI New Hall 2015
158	747	158	169

	- Being on a specialist unit?	<i>n=12</i>	67%	55%
	- ROTL - day or overnight release?	<i>n=6</i>	50%	62%

		67%	
		50%	

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Number of completed questionnaires returned

HMP & YOI New Hall 2019	All other women's local prisons surveyed since September 2017	HMP & YOI New Hall 2019	HMP & YOI New Hall 2015
158	747	158	169

n=number of valid responses to question (HMP & YOI New Hall 2019)

PREPARATION FOR RELEASE					
18.1	Do you expect to be released in the next 3 months?	<i>n=153</i>	39%	34%	39%
<i>For those who expect to be released in the next 3 months.</i>					
18.2	Is this prison very / quite near to your home area or intended release address?	<i>n=59</i>	46%	38%	46%
18.3	Is anybody helping you to prepare for your release?	<i>n=58</i>	64%	72%	64%
18.4	Do you need help to sort out the following for when you are released:				
	- Finding accommodation?	<i>n=56</i>	71%	67%	71%
	- Getting employment?	<i>n=50</i>	58%	60%	58%
	- Setting up education or training?	<i>n=48</i>	48%	52%	48%
	- Arranging benefits?	<i>n=56</i>	95%	78%	95%
	- Sorting out finances?	<i>n=51</i>	63%	65%	63%
	- Support for drug or alcohol problems?	<i>n=54</i>	76%	64%	76%
	- Health / mental Health support?	<i>n=55</i>	78%	67%	78%
	- Social care support?	<i>n=47</i>	45%	48%	45%
	- Getting back in touch with family or friends?	<i>n=50</i>	44%	51%	44%
18.4	Are you getting help to sort out the following for when you are released, if you need it:				
	- Finding accommodation?	<i>n=40</i>	28%	44%	28%
	- Getting employment?	<i>n=29</i>	17%	24%	17%
	- Setting up education or training?	<i>n=23</i>	4%	24%	4%
	- Arranging benefits?	<i>n=53</i>	40%	39%	40%
	- Sorting out finances?	<i>n=32</i>	22%	30%	22%
	- Support for drug or alcohol problems?	<i>n=41</i>	51%	65%	51%
	- Health / mental Health support?	<i>n=43</i>	26%	40%	26%
	- Social care support?	<i>n=21</i>	14%	33%	14%
- Getting back in touch with family or friends?	<i>n=22</i>	32%	44%	32%	
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	<i>n=148</i>	63%	61%	63%

HMP & YOI New Hall 2019

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

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

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Number of completed questionnaires returned

Black and minority ethnic	White
18	139

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 25 years of age?	17%	14%
	Are you 50 years of age or older?	11%	15%
1.3	Are you from a minority ethnic group?		
7.1	Are you Muslim?	17%	0%
11.3	Do you have any mental health problems?	65%	80%
12.1	Do you consider yourself to have a disability?	50%	62%
19.2	Are you a foreign national?	6%	4%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	6%	4%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	83%	4%
2.4	Overall, were you treated very / quite well in reception?	82%	80%
2.5	When you first arrived, did you have any problems?	100%	90%
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	33%	45%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	77%	75%
3.5	Have you had an induction at this prison?	71%	83%
<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	8%	48%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	25%	58%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	69%	74%
	- Can you shower every day?	53%	68%
	- Do you have clean sheets every week?	88%	89%
	- Do you get cell cleaning materials every week?	77%	78%
	- Is it normally quiet enough for you to relax or sleep at night?	35%	74%
	- Can you get your stored property if you need it?	12%	36%

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Black and minority ethnic	White
18	139

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%	46%
5.3	Does the shop / canteen sell the things that you need?	56%	71%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	65%	75%
6.2	Are there any staff here you could turn to if you had a problem?	89%	82%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	28%	28%
6.6	Do you feel that you are treated as an individual in this prison?	39%	48%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	91%	82%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	69%	79%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	28%	30%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	50%	44%
8.3	Are you able to use a phone every day (if you have credit)?	81%	73%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	64%	81%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	17%	9%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	11%	15%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	64%	72%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	83%	79%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	64%	65%
10.3	Is it easy for you to make a complaint?	72%	67%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	46%	44%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	25%	28%

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

Black and minority ethnic	White
18	139

Number of completed questionnaires returned

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	0%	11%
	- Nurse?	35%	40%
	- Dentist?	6%	8%
	- Mental health workers?	19%	15%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	50%	43%
11.5	Do you think the overall quality of the health services here is very / quite good?	33%	28%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	25%	31%
SAFETY			
14.1	Have you ever felt unsafe here?	50%	48%
14.2	Do you feel unsafe now?	17%	16%
14.3	Not experienced bullying / victimisation by other prisoners	18%	43%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	53%	48%
14.5	Not experienced bullying / victimisation by members of staff	39%	60%
14.6	If you were being bullied / victimised by staff here, would you report it?	53%	57%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	30%	43%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	35%	41%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	0%	9%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	22%	10%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	69%	67%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	41%	49%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	57%	61%
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?	40%	66%
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?	61%	63%

HMP & YOI New Hall 2019

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

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

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Number of completed questionnaires returned

Have a disability	Do not have a disability	Mental health problems	No mental health problems
93	61	120	33

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	10%	22%	15%	12%
	Are you 50 years of age or older?	12%	15%	10%	27%
1.3	Are you from a minority ethnic group?	10%	15%	9%	18%
7.1	Are you Muslim?	2%	2%	2%	0%
11.3	Do you have any mental health problems?	95%	53%		
12.1	Do you consider yourself to have a disability?			73%	15%
19.2	Are you a foreign national?	2%	7%	2%	13%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	7%	0%	5%	0%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	80%	90%	83%	91%
2.4	Overall, were you treated very / quite well in reception?	78%	85%	80%	84%
2.5	When you first arrived, did you have any problems?	95%	85%	94%	81%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	40%	49%	42%	48%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	75%	74%	74%	77%
3.5	Have you had an induction at this prison?	84%	81%	82%	83%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	49%	36%	51%	20%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	61%	43%	60%	36%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	69%	78%	70%	84%
	- Can you shower every day?	63%	71%	66%	66%
	- Do you have clean sheets every week?	90%	88%	89%	94%
	- Do you get cell cleaning materials every week?	77%	77%	80%	75%
	- Is it normally quiet enough for you to relax or sleep at night?	65%	77%	72%	66%
	- Can you get your stored property if you need it?	35%	32%	37%	22%

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

Number of completed questionnaires returned

Have a disability	Do not have a disability
93	61

Mental health problems	No mental health problems
120	33

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	42%	49%
5.3	Does the shop / canteen sell the things that you need?	66%	73%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	74%	74%
6.2	Are there any staff here you could turn to if you had a problem?	79%	90%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	36%	18%
6.6	Do you feel that you are treated as an individual in this prison?	47%	46%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	78%	93%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	83%	67%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	29%	31%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	45%	44%
8.3	Are you able to use a phone every day (if you have credit)?	75%	69%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	77%	81%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	12%	7%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	15%	13%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	75%	69%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	80%	77%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	62%	68%
10.3	Is it easy for you to make a complaint?	72%	62%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	42%	48%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	30%	22%

42%	56%
70%	66%
75%	68%
85%	78%
34%	12%
47%	42%
80%	90%
82%	62%
32%	24%
46%	42%
75%	65%
80%	79%
10%	9%
14%	13%
74%	64%
81%	76%
68%	54%
69%	64%
48%	31%
27%	24%

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

Number of completed questionnaires returned

Have a disability	Do not have a disability
93	61

Mental health problems	No mental health problems
120	33

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	7%	17%
	- Nurse?	37%	43%
	- Dentist?	9%	7%
	- Mental health workers?	17%	16%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	42%	47%
11.5	Do you think the overall quality of the health services here is very / quite good?	24%	38%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	31%	
SAFETY			
14.1	Have you ever felt unsafe here?	53%	41%
14.2	Do you feel unsafe now?	24%	5%
14.3	Not experienced bullying / victimisation by other prisoners	36%	47%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	47%	53%
14.5	Not experienced bullying / victimisation by members of staff	53%	64%
14.6	If you were being bullied / victimised by staff here, would you report it?	57%	56%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	36%	48%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	35%	48%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	8%	9%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	12%	12%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	66%	70%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	44%	54%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	65%	56%
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?	64%	63%
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%	70%

11%	6%
37%	47%
10%	3%
17%	10%
44%	
29%	30%
33%	20%
51%	41%
19%	3%
40%	45%
47%	59%
55%	67%
56%	62%
39%	45%
40%	43%
8%	6%
14%	6%
69%	62%
45%	57%
65%	53%
70%	29%
59%	83%

HMP & YOI New Hall 2019

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:
 - responses of non-heterosexual prisoners are compared with those of heterosexual 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
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* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

Gay/bisexual/other	Heterosexual
43	110

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 25 years of age?	14%	14%
	Are you 50 years of age or older?	14%	14%
1.3	Are you from a minority ethnic group?	14%	11%
7.1	Are you Muslim?	2%	2%
11.3	Do you have any mental health problems?	91%	74%
12.1	Do you consider yourself to have a disability?	69%	57%
19.2	Are you a foreign national?	5%	4%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	2%	5%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	81%	86%
2.4	Overall, were you treated very / quite well in reception?	74%	84%
2.5	When you first arrived, did you have any problems?	95%	89%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	34%	47%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	79%	74%
3.5	Have you had an induction at this prison?	83%	81%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	43%	44%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	49%	57%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	70%	75%
	- Can you shower every day?	63%	69%
	- Do you have clean sheets every week?	88%	90%
	- Do you get cell cleaning materials every week?	71%	80%
	- Is it normally quiet enough for you to relax or sleep at night?	69%	71%
	- Can you get your stored property if you need it?	37%	32%

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Number of completed questionnaires returned

Gay/bisexual/other	Heterosexual
43	110

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	44%	47%
5.3	Does the shop / canteen sell the things that you need?	71%	68%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	71%	76%
6.2	Are there any staff here you could turn to if you had a problem?	81%	84%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	38%	24%
6.6	Do you feel that you are treated as an individual in this prison?	40%	49%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	86%	82%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	83%	77%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	35%	28%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	42%	46%
8.3	Are you able to use a phone every day (if you have credit)?	73%	73%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	67%	82%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	13%	8%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	13%	16%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	83%	66%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	77%	81%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	50%	72%
10.3	Is it easy for you to make a complaint?	67%	69%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	41%	46%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	31%	25%

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

Gay/bisexual/other	Heterosexual
43	110

Number of completed questionnaires returned

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	9%	10%
	- Nurse?	43%	39%
	- Dentist?	10%	8%
	- Mental health workers?	19%	15%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	49%	41%
11.5	Do you think the overall quality of the health services here is very / quite good?	26%	30%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	35%	31%
SAFETY			
14.1	Have you ever felt unsafe here?	56%	46%
14.2	Do you feel unsafe now?	29%	11%
14.3	Not experienced bullying / victimisation by other prisoners	42%	40%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	41%	52%
14.5	Not experienced bullying / victimisation by members of staff	48%	61%
14.6	If you were being bullied / victimised by staff here, would you report it?	55%	58%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	38%	42%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	45%	39%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	14%	6%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	21%	8%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	77%	64%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	38%	52%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	63%	60%
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?	59%	65%
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?	51%	68%

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Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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

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

Number of completed questionnaires returned

	25 and under		Over 25		50 and over		Under 50
	22		134		22		134

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	14%	0%	0%	2%
	Are you 70 years of age or older?	0%	2%	9%	0%
1.3	Are you from a minority ethnic group?	14%	11%	9%	12%
7.1	Are you Muslim?	0%	2%	0%	2%
11.3	Do you have any mental health problems?	82%	78%	57%	82%
12.1	Do you consider yourself to have a disability?	41%	64%	55%	61%
19.2	Are you a foreign national?	5%	4%	10%	3%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	5%	5%	4%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	82%	84%	76%	85%
2.4	Overall, were you treated very / quite well in reception?	82%	80%	62%	83%
2.5	When you first arrived, did you have any problems?	86%	92%	81%	92%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	50%	42%	29%	45%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	76%	74%	55%	78%
3.5	Have you had an induction at this prison?	91%	80%	81%	82%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	60%	41%	29%	47%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	52%	54%	48%	55%
4.3					
	- Do you normally have enough clean, suitable clothes for the week?	55%	76%	91%	70%
	- Can you shower every day?	65%	67%	55%	69%
	- Do you have clean sheets every week?	81%	91%	86%	90%
	- Do you get cell cleaning materials every week?	77%	78%	77%	78%
	- Is it normally quiet enough for you to relax or sleep at night?	64%	71%	71%	69%
	- Can you get your stored property if you need it?	36%	33%	30%	34%

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

Number of completed questionnaires returned

25 and under	Over 25
22	134

50 and over	Under 50
22	134

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	46%	46%
5.3	Does the shop / canteen sell the things that you need?	67%	71%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	62%	77%
6.2	Are there any staff here you could turn to if you had a problem?	77%	84%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	33%	28%
6.6	Do you feel that you are treated as an individual in this prison?	53%	46%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	75%	84%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	75%	79%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	46%	28%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	36%	46%
8.3	Are you able to use a phone every day (if you have credit)?	75%	74%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	82%	79%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	14%	9%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	5%	16%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	77%	70%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	71%	80%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	53%	67%
10.3	Is it easy for you to make a complaint?	59%	70%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	36%	46%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	40%	26%

68%	42%
68%	71%
65%	76%
76%	84%
23%	30%
29%	50%
77%	85%
67%	81%
27%	31%
38%	45%
75%	74%
87%	78%
15%	9%
20%	13%
59%	73%
76%	79%
69%	64%
67%	69%
44%	44%
46%	26%

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

Number of completed questionnaires returned

	25 and under	Over 25	50 and over	Under 50
	22	134	22	134

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	18%	8%	10%	10%
	- Nurse?	41%	39%	24%	42%
	- Dentist?	10%	7%	10%	7%
	- Mental health workers?	14%	16%	15%	15%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	39%	44%	42%	44%
11.5	Do you think the overall quality of the health services here is very / quite good?	59%	24%	14%	31%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	25%	31%	40%	29%
SAFETY					
14.1	Have you ever felt unsafe here?	46%	49%	63%	47%
14.2	Do you feel unsafe now?	14%	17%	11%	17%
14.3	Not experienced bullying / victimisation by other prisoners	57%	38%	28%	42%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	40%	50%	50%	48%
14.5	Not experienced bullying / victimisation by members of staff	76%	54%	39%	60%
14.6	If you were being bullied / victimised by staff here, would you report it?	55%	57%	35%	59%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	41%	41%	26%	43%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	41%	40%	21%	43%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	9%	8%	10%	8%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	5%	13%	16%	11%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	70%	67%	64%	68%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	27%	51%	53%	47%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	67%	61%	60%	62%
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?	88%	59%	50%	64%
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%	64%	79%	60%

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Comparison of survey responses from different residential locations

In this table responses from older accommodation (Willow unit - A, B and C wings) are compared with those from the rest of the establishment.

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

	Willow Unit (A, B and C wings)	Rest of the establishment
Number of completed questionnaires returned	36	122

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	3%	2%
	Are you 25 years of age or younger?	19%	13%
	Are you 50 years of age or older?	19%	13%
	Are you 70 years of age or older?	3%	1%
1.3	Are you from a minority ethnic group?	6%	13%
1.4	Have you been in this prison for less than 6 months?	62%	55%
1.5	Are you currently serving a sentence?	88%	87%
	Are you on recall?	12%	14%
1.6	Is your sentence less than 12 months?	35%	33%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	3%	2%
7.1	Are you Muslim?	0%	3%
11.3	Do you have any mental health problems?	86%	76%
12.1	Do you consider yourself to have a disability?	63%	60%
19.1	Do you have any children under the age of 18?	54%	59%
19.2	Are you a foreign national?	6%	3%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	9%	3%
19.4	Have you ever been in the armed services?	3%	1%
19.5	Is your gender male or non-binary?	3%	1%
19.6	Are you homosexual, bisexual or other sexual orientation?	31%	27%
19.7	Do you identify as transgender or transsexual?	3%	2%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	14%	19%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	43%	45%
2.3	When you were searched in reception, was this done in a respectful way?	77%	86%
2.4	Overall, were you treated very / quite well in reception?	69%	84%

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Number of completed questionnaires returned

Willow Unit (A, B, and C wings)	Rest of the establishment
36	122

2.5	When you first arrived, did you have any problems?	97%	89%
2.5	Did you have problems with:		
	- Getting phone numbers?	40%	36%
	- Contacting family?	31%	36%
	- Arranging care for children or other dependents?	3%	3%
	- Contacting employers?	9%	2%
	- Money worries?	51%	30%
	- Housing worries?	31%	34%
	- Feeling depressed?	63%	63%
	- Feeling suicidal?	43%	27%
	- Other mental health problems?	51%	48%
	- Physical health problems?	43%	23%
	- Drugs or alcohol (e.g. withdrawal)?	49%	43%
	- Getting medication?	51%	40%
	- Needing protection from other prisoners?	6%	5%
	- Lost or delayed property?	11%	13%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	45%	43%
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	86%	77%
	- Toiletries / other basic items?	71%	62%
	- A shower?	37%	52%
	- A free phone call?	69%	71%
	- Something to eat?	77%	81%
	- The chance to see someone from health care?	71%	60%
	- The chance to talk to a Listener or Samaritans?	29%	31%
	- Support from another prisoner (e.g. Insider or buddy)?	20%	16%
	- None of these?	3%	6%
3.2	On your first night in this prison, was your cell very / quite clean?	58%	60%
3.3	Did you feel safe on your first night here?	64%	77%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	32%	35%
	- Free PIN phone credit?	32%	47%
	- Numbers put on your PIN phone?	29%	38%
3.5	Have you had an induction at this prison?	83%	81%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	28%	48%

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Number of completed questionnaires returned

Willow Unit (A, B and C wings)	36
Rest of the establishment	122

ON THE WING			
4.1	Are you in a cell on your own?	67%	86%
4.2	Is your cell call bell normally answered within 5 minutes?	55%	54%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	76%	72%
	- Can you shower every day?	53%	70%
	- Do you have clean sheets every week?	88%	90%
	- Do you get cell cleaning materials every week?	67%	81%
	- Is it normally quiet enough for you to relax or sleep at night?	70%	70%
	- Can you get your stored property if you need it?	34%	33%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	68%	70%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	65%	53%
5.2	Do you get enough to eat at meal-times always / most of the time?	49%	44%
5.3	Does the shop / canteen sell the things that you need?	80%	66%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	53%	80%
6.2	Are there any staff here you could turn to if you had a problem?	85%	82%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	26%	30%
6.4	Do you have a personal officer?	82%	83%
<i>For those who have a personal officer:</i>			
6.4	Is your personal or named officer very / quite helpful?	44%	46%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	9%	12%
6.6	Do you feel that you are treated as an individual in this prison?	38%	50%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	43%	57%
	If so, do things sometimes change?	33%	33%
FAITH			
7.1	Do you have a religion?	64%	67%
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	91%	80%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	83%	76%
7.4	Are you able to attend religious services, if you want to?	96%	91%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	28%	31%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	47%	44%
8.3	Are you able to use a phone every day (if you have credit)?	56%	78%
8.4	Is it very / quite easy for your family and friends to get here?	35%	33%
8.5	Do you get visits from family/friends once a week or more?	14%	17%
<i>For those who get visits:</i>			
8.6	Do visits usually start and finish on time?	44%	29%

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

Willow Unit (A, B and C wings)	Rest of the establishment
36	122

Number of completed questionnaires returned

8.7	Are your visitors usually treated respectfully by staff?	83%	78%
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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

Willow Unit (A, B, and C wings)	Rest of the establishment
36	122

Number of completed questionnaires returned

TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	85%	88%
<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?	55%	46%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	13%	9%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	9%	16%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	12%	17%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	0%	10%
9.4	Do you have time to do domestics more than 5 days in a typical week?	27%	45%
9.5	Do you get association more than 5 days in a typical week, if you want it?	26%	48%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	35%	49%
9.7	Do you typically go to the gym twice a week or more?	19%	26%
9.8	Do you typically go to the library once a week or more?	75%	65%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	69%	72%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	80%	79%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	61%	66%
	Are applications usually dealt with within 7 days?	52%	33%
10.3	Is it easy for you to make a complaint?	67%	69%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	40%	46%
	Are complaints usually dealt with within 7 days?	33%	29%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	18%	30%

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<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	42%	45%
	Attend legal visits?	45%	59%
	Get bail information?	16%	25%
<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?	35%	42%
HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	14%	9%
	- Nurse?	24%	44%
	- Dentist?	6%	9%
	- Mental health workers?	11%	17%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	36%	42%
	- Nurse?	49%	60%
	- Dentist?	12%	26%
	- Mental health workers?	15%	30%
11.3	Do you have any mental health problems?	86%	76%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	29%	49%
11.5	Do you think the overall quality of the health services here is very / quite good?	31%	29%
OTHER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	63%	60%
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	33%	31%
12.3	Have you been on an ACCT in this prison?	49%	43%
<i>For those who have been on an ACCT:</i>			
12.4	Did you feel cared for by staff?	41%	51%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	31%	35%
ALCOHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	31%	28%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	64%	63%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	67%	57%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	19%	17%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	19%	18%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	79%	75%
13.7	Is it very / quite easy to get illicit drugs in this prison?	53%	53%
13.8	Is it very / quite easy to get alcohol in this prison?	6%	4%

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SAFETY			
14.1	Have you ever felt unsafe here?	59%	46%
14.2	Do you feel unsafe now?	28%	13%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	53%	40%
	- Threats or intimidation?	56%	43%
	- Physical assault?	16%	12%
	- Sexual assault?	3%	2%
	- Theft of canteen or property?	28%	27%
	- Other bullying / victimisation?	28%	20%
	- Not experienced any of these from prisoners here	34%	43%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	53%	48%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	27%	26%
	- Threats or intimidation?	20%	19%
	- Physical assault?	3%	3%
	- Sexual assault?	3%	1%
	- Theft of canteen or property?	10%	4%
	- Other bullying / victimisation?	27%	18%
	- Not experienced any of these from staff here	57%	57%
14.6	If you were being bullied / victimised by staff here, would you report it?	53%	58%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	49%	39%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	30%	44%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	14%	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?	75%	33%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	17%	10%
<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?	67%	67%
	Could you shower every day?	67%	58%
	Could you go outside for exercise every day?	67%	83%
	Could you use the phone every day (if you had credit)?	67%	58%

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EDUCATION, SKILLS AND WORK			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	44%	58%
	- Vocational or skills training?	30%	40%
	- Prison job?	52%	65%
	- Voluntary work outside of the prison?	10%	6%
	- Paid work outside of the prison?	7%	5%
16.2	In this prison, have you done the following activities:		
	- Education?	93%	85%
	- Vocational or skills training?	68%	65%
	- Prison job?	85%	84%
	- Voluntary work outside of the prison?	46%	31%
	- Paid work outside of the prison?	50%	31%
<i>For those who have done the following activities, do you think they will help you on release:</i>			
	- Education?	74%	76%
	- Vocational or skills training?	58%	72%
	- Prison job?	41%	56%
	- Voluntary work outside of the prison?	31%	57%
	- Paid work outside of the prison?	31%	57%
16.3	Do staff encourage you to attend education, training or work?	58%	70%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	40%	50%
<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?	85%	85%
17.3	Are staff helping you to achieve your objectives or targets?	39%	67%
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	42%	55%
	- Other programmes?	54%	58%
	- One to one work?	46%	49%
	- Been on a specialist unit?	10%	23%
	- ROTL - day or overnight release?	0%	13%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>			
	- Offending behaviour programmes?	80%	97%
	- Other programmes?	86%	97%
	- One to one work?	40%	92%
	- Being on a specialist unit?	0%	73%
	- ROTL - day or overnight release?		50%

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PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	43%	37%
<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?	40%	48%
18.3	Is anybody helping you to prepare for your release?	67%	63%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	71%	71%
	- Getting employment?	64%	56%
	- Setting up education or training?	50%	47%
	- Arranging benefits?	92%	95%
	- Sorting out finances?	67%	62%
	- Support for drug or alcohol problems?	79%	75%
	- Health / mental Health support?	69%	81%
	- Social care support?	67%	40%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	10%	33%
	- Getting employment?	43%	9%
	- Setting up education or training?	20%	0%
	- Arranging benefits?	50%	37%
	- Sorting out finances?	25%	21%
	- Support for drug or alcohol problems?	55%	50%
	- Health / mental Health support?	22%	27%
	- Social care support?	17%	13%
	- Getting back in touch with family or friends?	33%	32%
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?	47%	67%