

Report on an unannounced inspection of

# **HMP Berwyn**

by HM Chief Inspector of Prisons

**4–14 March 2019**

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



Arolygiaeth Ei Mawrhydi dros Addysg a Hyfforddiant yng Nghymru  
Her Majesty's Inspectorate for Education and Training in Wales



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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

This report records our first inspection of HMP Berwyn. Located near Wrexham in North Wales, Berwyn opened in 2017. It is the first prison to open under the management of the public sector for several years and will be the largest prison in the country. Designated a category C training prison, the establishment held 1,273 prisoners at the time of the inspection. They were held in three residential units, which in turn were subdivided in to a total of eight communities. In time the prison will be able to hold 2,106 prisoners, although we were told that currently numbers are capped to allow for the build up of staff as well as additional activity for prisoners.

Opening a new prison is a big challenge especially when that process is the subject, quite rightly, of significant public interest. The challenges can be practical, but they can also be cultural. The prison opened with a very clear rehabilitative vision which has faced resistance at times. The leadership team are still working hard to find and maintain the right balance between rehabilitation and security, freedom and control, and sanctions and reward. As this report will show, some mistakes have been made and we identify some important weaknesses, but we also acknowledge the great effort that has been made to give this prison a good start. The prison is generally ordered and settled, and when measured against our tests of a healthy prison we found Berwyn to be a reasonably respectful place. Against our other tests there was more to do.

Despite Berwyn being a Welsh prison, about 75% of those held were from England. Arrangements for the reception and induction of new arrivals were impressive and the clear majority felt safe on their first night. Our survey, however, revealed that about 23% of prisoners felt unsafe at the time we asked them; a figure comparable with other training prisons. Prisoner-on-prisoner assaults were lower than expected, but in contrast, prisoner on staff assaults were higher. Both measures seemed to be on a downward trajectory. Some work was being done to reduce violence. However, other than an interesting initiative on Glyndwr community aimed at supporting some challenging prisoners, delivery often lacked drive and needed to be implemented more effectively. We found, for example, 25 self-isolating prisoners who were completely unsupported. Schemes to incentivise good behaviour were similarly ineffective.

Use of force was higher than in similar prisons and incidents usually involved the full application of restraints. Oversight was satisfactory and new strategies to minimise the need for force were being developed. The environment and quality of supervision in the segregation unit was generally good, but the regime was limited. Security arrangements were proportionate and supported by good police liaison. Drugs had been too readily available, but actions by the prison to reduce drugs supply seemed to have had some impact, and the drug testing rate had reduced to 21.49%. This was, however, still too high and supply reduction initiatives required greater coordination and drive. There had been no self-inflicted deaths since the prison opened and self-harm was comparatively low, but arrangements to support and safeguard those who were vulnerable were not very good. Strategic leadership was weak, case management of those in crisis needed improvement and those at risk we spoke to did not feel well cared for.

Most staff at Berwyn were inexperienced but those we observed were doing their best and contributing to a relaxed and positive atmosphere. Many prisoners felt frustrated by staff inconsistency and uncertainty. We also observed some poor behaviour go unchallenged. The prison had, however, recognised the need to support staff with their attention to the basics of prisoner management. Formal consultation with prisoners, prisoner applications and formal complaints were delivered with similar inconsistency and reflected the staff's inexperience.

Except for poor toilet screens in double cells, the quality of accommodation and the general environment were very good. In-cell showers, telephones and access to amenities and equipment were all very positive. The prison had been successful in its aim to make such a large prison feel small. There was a real sense of community in most of the wings, and staff teams and prisoners spoke

of their 'community' rather than their 'wing'. The promotion of diversity and equality in contrast was poor, although health care provision was good overall.

Employed prisoners had reasonable time out of cell, but it was much worse for those without employment, who had about two and a half hours per day. During spot checks we found 28% of prisoners locked up during the working day, which for a new training prison was very disappointing. Routines were rarely curtailed, but often delayed, and not all staff and prisoners understood fully the requirements of the daily schedule or regime.

One of the greatest challenges facing the prison was the lack of activity places. It is difficult to understand how and why the procurement of work and training places for a new prison could be so delayed. Facing a rising population and too few activity places, prison managers had created a range of activities and there were sufficient places for the current population, but some were of inadequate quality and lacked challenge. Even those that were available were not fully used. Many prisoners were unemployed or failed to attend, and staff did too little to support a sound work ethic. In contrast, those attending education or vocational training generally received excellent teaching, made useful progress and achieved well. Our partners in Estyn assessed provision to be 'good' or 'excellent' in four of their measures and 'adequate and requiring improvement' in just leadership and management.

The prison was struggling to develop its approach to offender management and resettlement. The make up of the population was not as had been originally envisaged; there had been no assessment of the current need. Many prisoners were serving long sentences, presented a high risk of harm and too many prisoners did not have an up-to-date assessment of risk (OASys). Offender management caseloads were too high and case management was inconsistent and reactive. Public protection measures were similarly weak and the prison lacked sufficient offending behaviour interventions to meet the needs of the population. Work to resettle prisoners was better, but about half of those currently being released returned to England. At the time of the inspection resettlement support for these prisoners was due to end in April which was a concern.

At this inspection we met many managers and staff who were working hard to make a success of this new prison. Senior managers described themselves as 'being on a journey' and we saw lots of work, many policies and numerous plans. What was needed was better oversight, better coordination and more sustained delivery. The staff seemed to us to be a strength of the prison, but they needed support in delivering the basics consistently. We thought the prison had made a good start. We were impressed by the energy and optimism we observed and there was clearly the potential to move on rapidly. We hope that our encouragement to focus on the basics and the few recommendations we make will assist that process, and guide Berwyn to becoming an enduringly safe and rehabilitative prison.

**Peter Clarke CVO OBE QPM**  
HM Chief Inspector of Prisons

May 2019

# Fact page

## Task of the establishment

A category C training and resettlement establishment holding adult males.

## Certified normal accommodation and operational capacity<sup>1</sup>

Prisoners held at the time of inspection: 1,273

Baseline certified normal capacity: 2,106

In-use certified normal capacity: 1,584

Operational capacity: 1,300 (currently capped at this number while awaiting more staffing and provision).

## Notable features from this inspection

*Only a quarter of the population were Welsh.*

*The prison's capacity was 2,106 prisoners but it held 1,273.*

*Just over three-quarters of the population were serving four years or more.*

*Almost half of prisoners said drugs were easily available.*

*Three-quarters of officers had been in service for less than two years and about a third for less than a year.*

*All cells had a shower, telephone and laptop computer.*

*Levels of self-harm were low for the type of prison.*

## Prison status (public or private) and key providers

Public

Physical health provider: Betsi Cadwaladr University Health Board

Mental health provider: Betsi Cadwaladr University Health Board

Substance misuse provider: Betsi Cadwaladr University Health Board

Learning and skills provider: Novus Cambria

Community rehabilitation company (CRC): Seetec Justice (Kent, Surrey and Sussex CRC)

Escort contractor: GEOAmey

## Prison group

North Wales

## Brief history

In 2014, permission was granted for a prison to be built in Wrexham, and Berwyn opened on 27 February 2017. Built on a former Firestone Tyre site, Berwyn (when full) is the largest prison in England and Wales and the second largest in Europe.

<sup>1</sup> 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**

There are three houses. Alwen, Bala and Ceiriog, each divided into eight communities that can accommodate up to 88 general population residents, including the following.

Alwen C Uppers	life-sentenced/indeterminate sentence for public protection
Alwen D Uppers	enhanced life-sentenced
Bala B Lowers	healthy living
Bala C Lowers	Glyndŵr: progressive unit
Bala D Lowers	Gobaith: resettlement unit
Bala B Uppers	Menai: assisted living
Bala C Uppers	Shaun Stocker: veterans and first-timers
Bala D Uppers	improving family futures
Ceiriog A Lowers	Snowdon: mature residents
Ceiriog D Lowers	induction and first night unit.
Ogwen	care and support (segregation) unit (up to 21 prisoners)

### **Name of governor and date in post**

Danny Khan, October 2018

### **Independent Monitoring Board chair**

Eileen Darbyshire

### **Date of last inspection**

This was the prison's first inspection.

# About this inspection and report

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

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

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

**Safety** Prisoners, particularly the most vulnerable, are held safely.

**Respect** Prisoners are treated with respect for their human dignity.

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

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

A4 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. There are four possible judgements: In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by Her Majesty's Prison and Probation Service (HMPPS).

- **Outcomes for prisoners are good.**  
There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.
- **Outcomes for prisoners are reasonably good.**  
There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.
- **Outcomes for prisoners are not sufficiently good.**  
There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.
- **Outcomes for prisoners are poor.**  
There is evidence that the outcomes for prisoners are seriously affected by current

practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.

- A5 Our assessments might result in one of the following:
- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
  - **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for prisoners.
- A6 Five key sources of evidence are used by inspectors: observation; prisoner surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.
- A7 Other than in exceptional circumstances, all our inspections are unannounced and include a follow up of recommendations from the previous inspection.
- A8 All inspections of prisons are conducted jointly with Ofsted or Estyn (Wales), the Care Quality Commission, the General Pharmaceutical Council (GPhC) and HM Inspectorate of Probation. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

## This report

- A9 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of and conditions for men in prisons (Version 5, 2017)*.<sup>2</sup> The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations and examples of good practice arising from the inspection.
- A10 Details of the inspection team and the prison population profile can be found in the appendices.
- A11 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in the final appendix of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.<sup>3</sup>

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

<sup>3</sup> 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 This was our first inspection of HMP Berwyn. As such, there were no previous recommendations for us to report progress on. In future inspections of Berwyn, we will report on outcomes for the recommendations made in this and the following reports.

## Safety

S2 *Reception and early days arrangements were excellent; new arrivals were well informed and there was a suitable focus on risk. Levels of violence were slightly lower than in similar prisons but too many prisoners still felt unsafe and experienced violence. Violence and drug use had reduced recently, but there was no coordinated approach to drive and monitor actions. Self-isolating prisoners were poorly cared for. Use of force was very high and opportunities to de-escalate incidents were missed. Security arrangements were good and the prison felt well ordered. Drugs were too easily available and psychoactive substances in particular posed a threat. Levels of self-harm were relatively low but the care of prisoners at risk of self-harm required improvement.*  
**Outcomes for prisoners were not sufficiently good against this healthy prison test.**

- S3 Support for new arrivals during their early days was impressive. Reception was clean, bright, calm and welcoming. There was good support for new arrivals from peer workers, and reception staff were friendly and efficient. All new arrivals received a first night interview in private, which focused well on risks and vulnerabilities.
- S4 In our survey, 87% of prisoners said they felt safe on their first night, and our findings supported this view. First-night accommodation was well equipped and clean, and staff carried out enhanced checks on new arrivals. Induction was well coordinated and comprehensive. Prisoners' time during induction was spent purposefully.
- S5 In our survey, 23% of prisoners said they currently felt unsafe, which was similar to other category C prisons. Assaults on prisoners were lower than in similar prisons, but the rate of assaults on staff was higher. There were signs that both were gradually reducing. Although information was gathered to understand the pattern of violence in the prison, there was no analysis of its causes, and no violent incidents had been investigated in the previous three months. The violence reduction strategy did not address the prison's specific issues, and there was no associated plan to drive and monitor actions to reduce violence and make the prison safer. The challenge, support and intervention plan (CSIP)<sup>4</sup> casework model to support victims and address violent behaviour was poorly understood and not yet operating effectively. The Glyndŵr progressive community provided a good intervention for more challenging prisoners. Prisoner violence reduction representatives offered potentially useful support through mediation between prisoners and contact with self-isolating prisoners, but they had not been trained, were unpaid and lacked oversight.
- S6 At the time of the inspection, 25 prisoners were isolating themselves in their cells, some for up to 10 months. Their managerial oversight was inadequate, they were not supported

<sup>4</sup> Challenge, support and intervention plan (CSIP) is a system used by some prisons to manage the most violent prisoners and support the most vulnerable prisoners in the system. Prisoners who are identified as the perpetrator of serious or repeated violence, or who are vulnerable due to being the victim of violence or bullying behaviour, are managed and supported on a plan with individualised targets and regular reviews.

and they spent most of their time locked up without meaningful contact from staff. They told us they had difficulties in getting their meals and opportunities to exercise safely outside.

- S7 The rewards and responsibility scheme was not working effectively and did not incentivise good behaviour.
- S8 The number of adjudications was slightly lower than in similar prisons. Nevertheless, some could have been dealt with more informally through the rewards and responsibility scheme. There was insufficient oversight of the adjudication process. Too many adjudications were remanded, and some were outstanding from 2018. This undermined the challenge of poor behaviour.
- S9 Use of force was far higher than we see for similar prisons but was slowly reducing. Full control and restraint was used in 90% of cases, and the records showed that opportunities for de-escalation were often missed. The monthly use of force meeting provided managerial oversight, and analysed the reasons and locations of incidents well. A helpful restraint minimisation strategy had been developed but not yet implemented.
- S10 Reintegration planning for segregated prisoners was not well developed, but most returned to normal location following segregation. The segregation unit was bright and clean, but the regime was too restricted and not aligned to prisoners' behaviour. Relationships between staff and prisoners in the unit were good.
- S11 Security procedures were broadly proportionate for a category C prison. The security meeting was effective, supported by an excellent flow of information from across the prison, and gave attention to the known and emerging risks. While there had been a substantial number of individual disciplinary incidents during the previous six months, most had been low level, there had been no recorded incidents of concerted indiscipline, and the prison felt well ordered. The prison's police information officers provided good support, and there was an appropriate focus on the risks posed by staff corruption, extremism and the high number of prisoners from organised crime groups.
- S12 Drugs were too readily available. In our survey, 48% of prisoners said that drugs were easy to get. A substantial number of health emergencies were related to psychoactive substances,<sup>5</sup> and one death in custody had been attributed to their use. The prison had taken a wide range of actions to address drug supply and demand, and there was evidence that drug availability was reducing. The number of drug finds had declined, and in the year to the inspection, the mandatory drug testing positive rate had reduced to 21.49%, although this was high for the type of prison. The substance use strategy was weak and not supported by a plan to coordinate, drive and measure the effectiveness of actions taken.
- S13 There had been no self-inflicted deaths since the prison opened. Levels of self-harm were below those of other category C prisons. The strategic management of suicide and self-harm required improvement. Strategic meetings were poorly attended and too little was done to analyse, understand and take action to address the causes of self-harm. Most of the at-risk prisoners on assessment, care in custody and teamwork (ACCT) case management did not feel sufficiently cared for. ACCT documents required improvement, and initial assessments and care plans were weak. Quality assurance was in place but had not addressed these issues. There were sufficient Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) but prisoners had limited access to them overnight.

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

- S14 The prison had a safeguarding adults policy but it was out of date, and many staff were unaware of how to raise a safeguarding concern.

## Respect

*S15 Staff treated prisoners with respect, but they failed to challenge some low-level poor behaviour and their inexperience affected many areas of prison life. Prisoners had very good living conditions and access to basic essentials. Prisoner consultation arrangements were weak, and applications and complaints were not managed well enough. The food was good. The management and oversight of equality work was weak. Faith provision was sound. The quality of health care was very good overall. **Outcomes for prisoners were reasonably good against this healthy prison test.***

- S16 At the time of the inspection, 77% of officers had less than two years' service, and about a third had less than one year. This inexperience had presented significant practical challenges to Berwyn's aim to create a rehabilitative culture. The prison had recognised the need to refocus staff on the basics of security and behaviour management, while preserving its ethos. Staff were committed and treated prisoners with respect. We observed some good interactions with prisoners, and this contributed to the relaxed atmosphere in communities. However, staff inexperience was having an adverse impact on many aspects of prison life and causing considerable frustration for prisoners. We saw some low-level poor behaviour go unchallenged by staff.
- S17 The prison provided very good, decent living conditions. Outside areas were reasonably tidy and communal areas were bright and clean. Cells were clean and generally very well equipped, including provision of in-cell showers, telephones and laptop computers – which enabled prisoners to have some control over their day-to-day needs. Most prisoners shared double cells, and there was inadequate screening of shared toilet/shower facilities. Prisoners had good access to cleaning materials, clean clothing and bedding. The monitoring of cell call bells showed that most were answered promptly.
- S18 The food was good, and serveries were clean and well supervised. There was effective consultation of prisoners about the food, and actions were taken promptly when issues were raised. Prisoners could spend up to £250 of their money on shop items, creating risks that were not being managed.
- S19 Consultation on general community and residential matters was inconsistent. Too many consultation meetings did not take place, and some actions were repeatedly carried over. Prison-wide consultation meetings had just been introduced, which was a helpful development.
- S20 The quality of many responses to applications was poor and reflected staff inexperience. Responses to complaints were generally reasonable, but too many were late and some complaints had not been responded to at all.
- S21 The leadership and strategic oversight of equality work was weak. Action planning and analysis of data were insufficient. Prisoners lacked confidence in the discrimination complaints process, and the discrimination incident reporting forms we looked at did not show evidence of thorough investigations. There was limited consultation of prisoners with protected characteristics, and there was little involvement from community groups specialising in equality and diversity work. The lack of consultation left the prison poorly placed to offer appropriate support to these groups.

- S22 Around 20% of the population was identified as black or minority ethnic. These prisoners reported to us, and our survey showed, little disproportionality in treatment compared with white prisoners. There were major gaps in the provision for prisoners with disabilities. Prisoners who were employed to care for these prisoners were untrained and unsupervised, which raised the risk of exploitation. The veterans' unit was a good environment, and prisoners valued the fact that they could have regular contact with external forces charities. The chaplaincy provided a valuable service and was well integrated into the prison. Good pastoral and resettlement support was available.
- S23 The quality and governance of the integrated health provision was very good overall. Clinical environments were clean and well used to meet the needs of the population. A wide range of primary care services were available, and waiting times for these were acceptable. More community-based nurse-led clinics and provision for prisoners with long-term conditions were being developed. The oversight of social care was inadequate, and there were delays in accessing equipment and adaptations for some prisoners. Mental health services were good, providing a wide range of relevant evidence-based therapeutic interventions. The integrated substance use service was good, and provision was responsive and patient-centred. The pharmacy provision was developed. The robust medicines management process was clinically sound, but it was unpopular with some prisoners. The quality of dental care was good but the 42-week waiting time for routine care was excessive.

## Purposeful activity

S24 *Time unlocked was reasonably good for employed prisoners but poor for others. Too many prisoners were locked up during the working day. The regime was predictable and mostly ran to time. Library and PE facilities were good but attendance was not monitored effectively. There were sufficient activity places for the current population but the range of education, training and work did not yet meet the needs of prisoners. Many jobs lacked purpose, and too many prisoners were unemployed or failed to attend their allocated activity. The quality of teaching and learning was excellent, and prisoners who attended generally made effective progress and achieved well.*

**Outcomes for prisoners were not sufficiently good against this healthy prison test.**

- S25 Fully employed prisoners had a reasonable amount of time unlocked, but for the substantial number who were unemployed, and particularly for those self-isolating, it was poor. Unplanned regime curtailments were rare, but there was some slippage. Routine delays in medicines administration meant that some prisoners could be up to an hour late for activities. In our spot checks, we found approximately 28% of prisoners locked up during the core day, which was too high for a training prison.
- S26 The library provided a welcoming environment but the promotion of literacy was underdeveloped. Gym facilities were very good. Prisoners could achieve a range of higher qualifications, and provision for physiotherapy was excellent. Neither the gym or library analysed attendance to understand use and drive improvement.
- S27 The standard of education, training and work was good. In vocational workshops and in education sessions, prisoners made effective progress towards their learning goals. Prisoners' success rates were good overall, although a few groups were underperforming. Learners were clear about what they have achieved and knew what they needed to do to make further progress. Most learners made strong progress in literacy and numeracy, and a few made progress in developing digital skills. Coursework and practical work were completed to a high standard, and demonstrated improvement over time.

- S28 Prisoners in education, training and work behaved very well, participated well in sessions, were motivated to learn and were respectful to staff and each other. Nearly all prisoners worked well together and supported each other in their learning. Peer mentors gained confidence and self-esteem through helping others.
- S29 Most learners who attended sessions regularly completed their courses successfully. However, too many did not attend regularly enough. Learners took pride in their work and understood how they were improving their employability. Several programmes helped prisoners develop awareness of healthy living, such as street football and food preparation. Art, music, digital skills and other creative courses helped with their emotional well-being.
- S30 The quality of teaching and learning was excellent. In nearly all classes, teachers used a broad range of skills tailored to individuals' learning needs. Many teachers and tutors inspired prisoners to achieve, express emotions and develop new skills. Teachers and peer mentors worked very well together to give prisoners individual support. Sessions were planned well, and learners were assessed effectively and given constructive feedback, which motivated them to progress further. Teachers and tutors monitored and tracked prisoners' skills and qualification achievements well. The range and level of qualifications offered broadly met prisoners' needs.
- S31 Induction to education was very thorough in assessing prisoners' needs, recognising their prior achievements and helping them choose the opportunities that best suited their long-term plans. Early access to careers advice helped new arrivals to make informed decisions about the options available. Prisoners with additional learning needs were identified at induction then referred to specialist support services.
- S32 All courses were aimed at giving prisoners the skills they needed to progress to higher learning or to work and thrive beyond the gates. A recent employment fair had increased their awareness of employment opportunities. The prison had developed many effective partnerships to help prisoners gain skills and improve their experience and employability.
- S33 The leadership and management of education, skills and work required improvement. Since the prison opened, the range of education, training and work had not met the needs of the population. Provision had been modified, and some useful and creative contingency arrangements had been put in place to occupy prisoners.
- S34 There were enough activity places for the current population, although some were insufficiently challenging and did not keep prisoners occupied or develop a sound work ethic. Activity places were not fully used. A substantial number of prisoners were unemployed, and many who were allocated to an activity failed to attend. Staff did not do enough to challenge those who chose not to participate. Only two-thirds of prisoners engaged in activities during the working day.
- S35 The education and training self-assessment report identified key strengths and areas for improvement. The development plan did not make clear the criteria by which success would be judged. Education facilities were well equipped, and staff had good access to training. There was no effective strategy to promote the Welsh language.

## Rehabilitation and release planning

S36 *Prisoners were given excellent support to maintain family ties. The strategic management of reducing reoffending was underdeveloped. Too many prisoners did not have an up-to-date offender assessment system (OASys) assessment. The quality of offender management was variable. Prison offender manager contact with prisoners was too inconsistent to drive sentence progression. Too many prisoners were released late on home detention curfew (HDC). Public protection arrangements were weak. There were too few offending behaviour programmes to meet prisoner need. Planning for prisoners' release was timely and they could currently access good support with housing, and finance, benefit, debt issues. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

- S37 There were excellent support services and courses to help prisoners build and maintain relationships with their families. The visitors' centre and visits hall were welcoming. Prisoners on visits could buy items from the shop for their families and supervise their children in the play area, which they valued. There was too little visits provision at weekends. Staff did not collect prisoners' incoming mail regularly, which caused significant delays in them receiving their post.
- S38 The prison had struggled to plan work to reduce reoffending effectively. Its location, a mix of prisoners that was not as originally intended, and a lack of clarity about the future make-up of the population presented major challenges. There was no comprehensive analysis of the current population's needs to inform provision and future direction. About three-quarters of the population were serving long sentences and 40% were assessed as high risk. Forty-three per cent of the population had been at Berwyn for less than six months, and around three-quarters were from England.
- S39 Too many prisoners did not have an up-to-date OASys assessment of their risk and needs. This had a direct impact on their access to offending behaviour programmes and progression. Prison offender manager caseloads were high, and their contact with prisoners was reactive and too inconsistent to drive sentence progression effectively. The quality of offender management was variable, and in half the cases we checked it was insufficient. The latest HDC processes had not been introduced effectively, and too many eligible prisoners were released late. There had been some good work to assess the needs of prisoners on indeterminate sentence for public protection (IPP) held beyond their sentence tariff, but there was not yet adequate provision to help this group.
- S40 Public protection arrangements were weak. Almost half of all prisoners due for release in the following three months were assessed as high risk, but the inter-departmental risk management meeting did not systematically consider this group to provide assurance that their risks would be properly managed. There were efforts to confirm prisoners' multi-agency public protection arrangements (MAPPA) management levels before their release. Arrangements to conduct and review telephone monitoring of prisoners were ineffective and potentially placed the public at risk.
- S41 Recategorisation reviews were frequently late, and too many category D prisoners did not move promptly to open prisons, often due to the lack of spaces nationally.
- S42 There were not enough offending behaviour programmes to meet the needs of the population, with only enough places in the coming year for about a third of prisoners who met the criteria for treatment. There were some short-term interventions to help prisoners address their attitudes, thinking and behaviour. The prison had introduced

release on temporary licence (ROTL) for a few category D prisoners. ROTL processes had improved but still needed to be more robust.

- S43 On average, 40 prisoners a month were released from Berwyn. Around half were released to Wales and half to England. At the time of the inspection, St Giles Trust offered all prisoners very good, timely support to address their resettlements needs. However, this would cease for prisoners released to England from April 2019, and there was no realistic plan to address the resettlement needs of these prisoners, which was a significant gap. At the time of the inspection, all prisoners received support to find accommodation on release and open bank accounts.

## Main concerns and recommendations

- S44 Concern: Strategic management of violence reduction was weak. The prison did not analyse information gathered about violent behaviour to understand the causes, and violent incidents had not been investigated for the previous three months. The prison had no action plan to tackle the causes of violence and monitor this for its effectiveness in reducing violence.

**Recommendation: The prison should develop a strategy to reduce violence based on an analysis of the causes of violence, supported by an action plan to drive and monitor a reduction in violent incidents.**

- S45 Concern: At the time of the inspection, 25 prisoners were isolating themselves in their cells, some for many months. Some told us they had little contact with staff, and there had been difficulties in getting their meals and the opportunity to exercise safely outside. The prison had not addressed the reasons for them self-isolating, and there were no plans to resolve the issues affecting their safety.

**Recommendation: Prisoners who are self-isolating should have their basic needs for food, hygiene, social contact and fresh air met. A plan to work towards ending their isolation should be agreed with them and regularly reviewed.**

- S46 Concern: Drugs were too readily available. Although there was a range of measures to reduce drug supply and demand, the prison did not routinely measure actions to assess their effectiveness and they were not yet reducing drug availability sufficiently.

**Recommendation: The prison should continue its focus on drug supply and demand reduction, but should better coordinate and embed actions to reduce the availability and demand for drugs, and measure their impact.**

- S47 Concern: Staff inexperience was having a negative impact on many aspects of prison life. There was inconsistency in the application of rules, some low-level poor behaviour went unchallenged, and staff could struggle to answer even basic questions from prisoners. Prisoners told us this caused them considerable frustration, which was also evident in our review of prison applications and complaints and in ACCT documentation.

**Recommendation: Prisoners should be supported and managed effectively by a responsive and capable staff group.**

- S48 Concern: The strategic leadership of equality work was weak and this area was not promoted sufficiently. There was limited consultation with prisoners in most protected characteristics groups, which left the prison poorly placed to identify potential concerns.

**Recommendation: Senior leaders should promote the importance of equality work in the prison. There should be a robust strategy and oversight of equality work, informed by routine consultation, to identify and address the needs of prisoners in protected characteristics groups.**

- S49 Concern: The balance of education, training and work places did not meet the needs of the population; too many work places were insufficiently challenging and did not keep prisoners occupied.

**Recommendation: The balance and range of education, training and work places should reflect the needs of the population, keep prisoners occupied and be sufficiently challenging.**

- S50 Concern: Despite sufficient activity places, a substantial number of prisoners were unemployed or failed to attend their allocated education, training or work place. Staff did not do enough to challenge those who chose not to participate.

**Recommendation: All eligible prisoners should be allocated to an education, training or work placement, and should be encouraged and expected to attend.**

- S51 Concern: Many prisoners were high risk and/or serving long sentences. Too many eligible prisoners did not have an up-to-date assessment that identified their risks and needs. The lack of current assessment directly affected prisoner access to offending behaviour programmes and their ability to progress to open conditions.

**Recommendation: All eligible prisoners should have an up-to-date assessment that identifies their risks and needs.**

- S52 Concern: Prison offender manager caseloads were high, and contact with prisoners was reactive and too inconsistent to drive their sentence progression effectively.

**Recommendation: Prison offender managers should have regular, good quality contact with prisoners, which drives their risk reduction and sentence progression.**

- S53 Concern: Public protection measures were weak. Arrangements to conduct and review telephone monitoring were ineffective and potentially placed the public at risk. The interdepartmental risk management meeting did not consider all high-risk releases systematically to provide assurance that their risks would be managed.

**Recommendation: Public protection procedures should be given urgent and sustained attention to ensure that prisoners' risks, both in custody and on release, are managed effectively.**

- S54 Concern: About 40 prisoners a month were released - about half to Wales and half to England. There was no realistic plan to address the resettlement needs of prisoners to be released to England from April 2019.

**Recommendation: All prisoners released from Berwyn should receive support to review and address their resettlement needs.**

# Section 1. Safety

**Prisoners, particularly the most vulnerable, are held safely.**

## Early days in custody

### Expected outcomes:

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

- I.1 The prisoner escort vehicles were reasonably clean, free of graffiti and well equipped. Prisoners were disembarked promptly from vehicles on arrival; they were routinely handcuffed when moved to reception. Escort and reception staff communicated well and there was an effective handover of information to inform initial risk assessments.
- I.2 The reception was clean, calm and welcoming, and support for new arrivals was impressive. Holding areas were not routinely locked and prisoners could move freely, which created a relaxed atmosphere. Reading materials and up-to-date information were readily available. All arrivals were offered hot drinks and food, and were welcomed by friendly and efficient staff and peer workers. In our survey, 90% of prisoners said they were treated well in reception.
- I.3 First night staff interviewed arrivals in private and identified their immediate needs, risks and vulnerabilities effectively. First night processes were streamlined and well coordinated. Searching was appropriate and prisoners' property was logged in front of them and returned promptly for their first night. All new arrivals were supported by staff and peer workers to access first night essentials and, positively, they had the opportunity to purchase some items from the prison shop.
- I.4 First night arrangements were good and 87% of prisoners in our survey said they felt safe on their first night, which was significantly more than the comparator. Arrivals were taken to the dedicated first night centre. Staff and peer workers on the centre actively engaged with prisoners to meet their practical and welfare needs. First night cells were clean and contained essential items. In our survey, 85% of prisoners said their cell was clean on their first night, significantly more than the comparator of 36%. All prisoners could have a shower and make a telephone call on their first night. There were effective shift handovers with night staff, and additional welfare checks of new arrivals during the night.
- I.5 The 'Welcome Week' induction began the day after arrival, lasted up to six consecutive days and was purposeful. As well as delivery by officers, on the first morning peer workers, under the oversight of staff, presented a comprehensive, interactive and useful overview of relevant information about prison services, the daily regime and life at Berwyn. The timetable was well coordinated and enabled prisoners to meet key staff through structured individual or small group meetings. Prisoners were inducted into use of the prison-issue laptop computer, through which they could manage their finances, applications, book visits and undertake enrichment activities. Induction sessions were rarely delayed or cancelled, and the use of an 'induction passport' was an effective tracking system to ensure all prisoners attended all aspects of their induction.

## Good practice

- 1.6** *All new arrivals were welcomed into a relaxed and supportive environment in reception. The dedicated first night centre provided a safe place for prisoners to settle in. The comprehensive and well-coordinated induction occupied prisoners purposefully during their early days.*

## Managing behaviour

### Expected outcomes:

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

### Encouraging positive behaviour

- 1.7** Prisoner-on-prisoner assaults in the previous six months were lower than in other category C prisons, although assaults on staff were much higher. In our survey, 23% of prisoners said they currently felt unsafe, which was similar to other category C prisons. Prison Service data indicated a gradually reducing trend in assaults overall.
- 1.8** The strategic management of violence was weak. While detailed information about the location and type of violence was well collated, there was not enough analysis of its causes. The safer custody team had been poorly resourced and no incidents of violence had been investigated in the previous three months. A generic violence reduction strategy set out developmental objectives but there was no prison-specific action plan to reduce violence and make the prison safer. (See main recommendation S44.)
- 1.9** The prison had introduced challenge, support and intervention plans (CSIP)<sup>6</sup> to support prisoners who felt unsafe and to challenge perpetrators. The plans we examined had been poorly completed, and staff had limited understanding of their purpose and operation. The use of CSIP was overseen by a weekly multidisciplinary safety interventions meeting designed to provide cross-departmental planning to meet the needs of the most challenging prisoners. This meeting had not been effective in ensuring that planned outcomes were delivered, but it was being restructured to involve operational staff and hold them accountable.
- 1.10** At the time of the inspection, there were 25 prisoners who would not leave their cells, mostly due to fears for their safety. Some had self-isolated for up to 10 months, and some told us they could not exercise outside safely and had difficulties getting meals. Staff had inadequate contact with these prisoners, and there was no systematic process to ensure that their day-to-day needs for human contact, fresh air or access to a regime were met. There were no regularly reviewed reintegration plans to address the causes of their isolation or plan for their return into the main prison community. (See main recommendation S45.)
- 1.11** There were prisoner violence reduction representatives on each community who told us that they mediated between prisoners in conflict and tried to maintain contact with those who had self-isolated. Their role had not been properly defined or developed and they lacked training, a detailed job description or regular meetings with safer custody officers.

<sup>6</sup> Challenge, Support and Intervention Plan (CSIP) is a system used by some prisons to manage the most violent prisoners and support the most vulnerable prisoners in the system. Prisoners who are identified as the perpetrator of serious or repeated violence, or who are vulnerable due to being the victim of violence or bullying behaviour, are managed and supported on a plan with individualised targets and regular reviews.

- I.12** The Glyndŵr progressive community was a well-constructed intervention targeted at challenging prisoners who presented the greatest risk of violent behaviour. Residents undertook a 10-week programme of constructive activity, individual programmes and groupwork informed by forensic psychologists before planned reintegration to the main communities.
- I.13** The rewards and responsibility scheme was not working effectively. The scheme was not yet well implemented, and was applied inconsistently, largely due to the inexperience of staff (see main recommendation S47). In our survey, only 40% of prisoners felt they had been treated fairly under the scheme. Prisoners were not always warned of formal warnings. Too many reviews of prisoners on the basic level were late, or did not take place at all. There were not enough individual targets to improve behaviour. Some prisoners were left on the basic level for far too long, without effective intervention to address their behaviour. In particular, there was insufficient management of prisoners who refused to attend work, education, or training (see main recommendation S50). The quality assurance arrangements for the scheme were not yet embedded. In our survey, only 41% of prisoners said the scheme encouraged good behaviour. The prison was beginning to consult prisoners about the best ways they could incentivise good behaviour.

## Recommendations

- I.14** **Challenge, support and intervention plans (CSIP) should be used effectively to address violent behaviour and support victims.**
- I.15** **The rewards and responsibility scheme should incentivise prisoners to take responsibility and behave well, and provide effective and timely sanctions for poor behaviour.**

## Good practice

- I.16** *The Glyndŵr progressive community was a well-planned and targeted facility to address violent behaviour by prisoners presenting the greatest risk.*

## Adjudications

- I.17** There had been 2,046 adjudications in the previous six months, slightly lower than we see in similar prisons. Some could have been dealt with more informally through the rewards and responsibility scheme, which again reflected the inexperience of some staff (see main recommendation S47). The prison had recognised this problem and was seeking to address it, and the number of adjudications had been falling in recent months.
- I.18** There was insufficient oversight of the adjudication process. Monthly adjudication meetings were poorly attended and none had taken place since November 2018. When they did meet, they considered a range of data, and there was evidence that they had identified and addressed some key problems with the process.
- I.19** There were 346 remanded adjudications at the time of the inspection, which was too many; 163 of these had been outstanding since 2018. Inefficiencies in the process also meant that 16% of adjudications had not been proceeded with. These problems undermined the effectiveness of challenging poor prisoner behaviour.

## Recommendation

- I.20 There should be effective governance of the adjudications process to ensure it provides active challenge to poor behaviour.**

## Use of force

- I.21** In the previous six months there had been 574 use of force incidents, far higher what we see in similar prisons. In our survey, 22% of prisoners said they had been physically restrained by staff, significantly more than the 13% comparator. Recorded use of batons in the previous six months was also comparatively high.
- I.22** Prison records indicated that 90% of incidents involved full control and restraint. The use of force records we reviewed showed too many missed opportunities to de-escalate situations. The use of handcuffs was high, mostly justified because prisoners had to be taken across large open areas to the segregation unit. Prison Service data showed that the use of force was reducing, and managers told us they believed this was due to increasing confidence among newer staff and a more stable prisoner population.
- I.23** There was good oversight of the use of force by a monthly meeting. Incidents were mapped by time, reasons and location to identify patterns and agree action. A new use of force coordinator was developing a robust process to provide feedback and training in relevant practice. The prison was also introducing a potentially useful restraint minimisation strategy, which detailed de-escalation methods.

## Recommendation

- I.24 Full control and restraint and use of batons should be kept to a minimum through application of de-escalation techniques wherever possible.**

## Segregation

- I.25** In the previous six months, 204 prisoners had been segregated, a similar rate as other category C establishments. At the beginning of the inspection, 17 prisoners were segregated and four had been in the segregation unit for more than a month. Those who had been in the unit for lengthy periods had been recategorised and were waiting a transfer or refusing to leave the unit. Most prisoners only stayed in the unit for a short time, with an average of nine days in the previous two months. Although formal reintegration planning through segregation reviews was not well developed, we observed informal discussions with residents who had been refusing to leave that resulted in their return to the main communities. In the previous two months, only two prisoners had been transferred to other establishments and 21 had returned to the main prison communities.
- I.26** Living conditions in the segregation unit were good. It was clean and bright with in-cell showers, and a small library and radios were available. Exercise areas were large with open views. Relationships between unit staff and prisoners were good.
- I.27** The regime was too limited. Beyond daily access to telephones and outdoor exercise, prisoners were locked up all day and could not exercise together (subject to a risk assessment) or use prison facilities such as the library or gym. The televisions and communal dining provided when the unit opened had been withdrawn due to disruptive behaviour, but no improved regime was offered to individual prisoners who had demonstrated compliance.

## Recommendation

- I.28 Segregated prisoners should have access to a regime appropriate to their risk and behaviour.**

## Security

### Expected outcomes:

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

- I.29** Following a recent security audit, a range of actions had been taken to improve security arrangements and we found security procedures were broadly proportionate for the type of prison. The prisoner movement we observed around the site was well managed and not unduly restricted, and visits restrictions were imposed correctly in response to trafficking activity.
- I.30** The monthly security meeting was effective and focused on known and emerging threats to the prison. It identified actions to address and offset these, which were allocated and followed up. There was also support by the team of police information and support officers, and a focus on the risks posed by organised crime groups and extremism.
- I.31** A very good flow of security information was received from across the prison and efficiently processed by the intelligence team. Although there had been a large number of recorded disciplinary incidents in the previous six months, most had been low level and there were no recorded incidents of concerted indiscipline, and the prison was well ordered.
- I.32** Drugs, violence and individual procedural security failures were the most prevalent topics in the intelligence reports received. There were direct correlations between the peaks in procedural security failures and the entry of high numbers of newly recruited staff. The prison had responded to this pattern by increased mentoring and security training. It had also focused strongly on preventing corruption by targeted awareness training of the dangers posed by experienced and manipulative prisoners.
- I.33** In our survey, almost half of all prisoners said that it was easy to get drugs at Berwyn. Almost one in four said they had developed a drug problem while at the prison. The prison took a wide range of actions to meet these threats, such as intelligence-led searching and drug testing, out-of-hours searches, use of drug testing technology and drug detection dogs, and information sharing with local and regional police forces.
- I.34** A reduction in the number of drug finds, a reducing mandatory drug testing (MDT) random positive rate and fewer referrals to the prison's drug treatment team provided some evidence that drug availability was reducing, but drugs remained too readily available. The misuse of psychoactive substances<sup>7</sup> continued to result in a substantial number of health emergencies, and one death had been attributed to their use in the previous year. (See main recommendation S46.) The prison had produced excellent prisoner information videos on the dangers and effects of these substances.

<sup>7</sup> Drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects.

- I.35** MDT was well managed. The team of testers had recently been increased to ensure consistency of testing and to meet the demand for suspicion testing, as fewer than 30% of requested tests had been completed. Random testing was carried out throughout the month and the positive rate for all drugs had fallen steadily throughout the year to 21.49%, although this was high for a category C prison.
- I.36** The substance misuse strategy was weak and predominantly treatment-focused. There was no dynamic regularly monitored action plan to measure the effectiveness of actions taken. (See main recommendation S46.)

## Recommendation

- I.37** **The prison should ensure that, where practicable, all intelligence-led drug testing takes place.**

## Safeguarding

### Expected outcomes:

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

## Suicide and self-harm prevention

- I.38** In the previous six months, there had been 248 self-harm incidents carried out by 163 prisoners, which was fewer than in other category C prisons. There were investigations into near-fatal incidents of self-harm and the sharing of practice and lessons learned.
- I.39** The strategic management of suicide and self-harm was underdeveloped. Strategic safer communities' meetings were poorly attended. The safer communities' strategy was out of date, and there were no current analysed data to identify trends and patterns of behaviour and lead an effective action plan.
- I.40** There was no consistent recording of the causes of self-harm. Prisoners and staff attributed some cases of self-harm to frustrations with the medicines management regime, debt and the prison's lack of responses to day-to-day requests.
- I.41** A weekly safer interventions meeting (see paragraph I.9) was attended by staff and Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) but it did not always follow up actions promptly or discuss systematically the care for the more complex prisoners on assessment, care in custody and teamwork (ACCT) case management.
- I.42** There had been 446 ACCTs opened in the previous six months, which was high for the type of prison. Most prisoners on an open ACCT said they did not feel sufficiently cared for. The quality of ACCT documents was variable and often not good enough. Initial assessments did not always translate into the delivery of care, triggers that could increase the risk of suicide and self-harm were not always identified, case reviews not always carried out and actions in care plans were weak and not always followed through robustly. The quality assurance measures had not addressed these specific issues.

- I.43** There were sufficient Listeners for the size of the population. Although there were Listener suites on each community, they were often used for storage rather than the purpose designed for. Prisoners had limited access to Listeners during the night; only 15 had seen a Listener at night during 2018. Night staff often told prisoners to use their in-cell telephones to call the Samaritans instead.

## Recommendations

- I.44** The prison should record and analyse the causes of self-harm incidents, and use this material to inform the strategic management of safeguarding and suicide and self-harm prevention.
- I.45** Assessment, care in custody and teamwork (ACCT) casework management documentation should be of a consistently good quality. Care maps for individual prisoners should identify objectives to address their risk of self-harm and ensure they receive the necessary care and support.

## Protection of adults at risk<sup>8</sup>

- I.46** The prison had developed a safeguarding adults policy but it was out of date. A nominated manager was responsible for protecting adults at risk, and attended the Wrexham Safeguarding Adults Board. There was a procedure for making safeguarding referrals and one referral had been made in the previous six months, but staff were generally unaware of how to raise a concern or make a referral to the local authority.

## Recommendation

- I.47** All staff should understand their adult safeguarding responsibilities.

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<sup>8</sup> Safeguarding duties apply to an adult who:

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



## Section 2. Respect

**Prisoners are treated with respect for their human dignity.**

### Staff-prisoner relationships

**Expected outcomes:**

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

- 2.1** At the time of the inspection, 77% of officers had less than two years' service and about a third had less than one year. There were 21 supervising officers who were temporarily promoted. This inexperience had presented significant practical challenges to the prison's founding aim to create a rehabilitative culture. However, it had recognised the need to re-focus staff on the basics of security and behaviour management, while preserving its ethos.
- 2.2** In our survey, 64% of prisoners said staff treated them with respect, which was similar to other category C prisons. We observed a staff group who were committed to treating prisoners well and some good staff interactions with prisoners, which contributed to the relaxed atmosphere in the prison.
- 2.3** Despite this, the lack of staff experience was having an adverse effect on many aspects of prison life. Some staff struggled to answer prisoners' basic questions. As one prisoner in our survey commented: 'The staff need to be a lot more experience as most of them have never been in prison before and haven't got a clue how to deal with prisoners.' Staff were inconsistent in the application of rules, and we saw some low-level poor behaviour by prisoners go unchallenged. Prisoners told us this caused considerable frustration, which was also evident in our review of prison applications, complaints and in at-risk case management documentation. (See main recommendation S47.)
- 2.4** At the time of the inspection, less than half of prisoners had a keyworker, as introduced under the new offender management in custody (OMiC) model (see footnote 10). Most (around three-quarters) weekly keyworker meetings went ahead. The record of some meetings lacked detail and were superficial, although some notes showed helpful engagement from keyworkers.

### Daily life

**Expected outcomes:**

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

### Living conditions

- 2.5** The prison provided very good, decent living conditions. Outside areas were reasonably tidy, and communal areas were bright, clean and well decorated (see Appendix III: Photographs). In our survey, 69% of prisoners said the communal areas of their wing was normally clean, against the comparator of 59%. One prisoner commented: 'The most positive thing here at

Berwyn is how clean the living spaces are.’ The prison made good use of Welsh-themed imagery to create a community feel, and in some specialist communities, such as the one for veterans, there had been efforts to personalise the environment with murals. (See Appendix III: Photographs.)

- 2.6** There were some problems with the fabric of the building, with peeling paint in some areas, and unreliable hot water and heating systems. The prison was managing these issues while seeking a solution with the building contractors.
- 2.7** Cells were clean, generally in reasonable decoration and very well equipped, and all had showers. They included in-cell telephones and laptop computers, which enabled prisoners to have some control over their day-to-day needs (see also paragraph 1.5). Over two-thirds of cells were shared and were cramped, as they could not easily accommodate furniture for two people. Toilets had no seats and many had no covers, and toilets and showers were inadequately screened. (See Appendix III: Photographs.)
- 2.8** Prisoners had access to cleaning materials, clean clothing and bedding. Community laundries were left unlocked, and some prisoners complained this led to some clothes going missing and misuse of laundry equipment.
- 2.9** In our survey only 21% of prisoners said they could access their stored property if they needed it. Data on applications in the previous six months showed there had been a significant delay in responses to property applications. The prison had introduced measures to address this, and there was no backlog of applications at the time of the inspection
- 2.10** Response times to cell call bells were monitored and showed the most were answered promptly.

### Residential services

- 2.11** Prisoners were offered a wide choice of food, including cultural, religious and medical diets, and chose their meals from a four-week rolling menu through their in-cell laptops. Prisoners could have two hot meals a day, but breakfast packs were given out the night before and were often eaten before the morning. In our survey, 48% of prisoners said the quality of food in the prison was good, which was similar to other category C prisons.
- 2.12** There was effective consultation with prisoners about the food, with regular surveys through in-cell laptops. We saw good staff supervision of meal times, with clean serveries, and prisoners had the opportunity to eat out of their cell.
- 2.13** New arrivals could spend or have an advance of £25.50 to spend on telephone credit, vaping materials and basic groceries. In our survey, 78% of prisoners said they had access to the prison shop in their first few days, significantly above the 40% for similar prisons.
- 2.14** Prisoners could spend up to £250 of their money each week. This presented a real risk of extortion and bullying which, at the time of inspection, the prison had no processes to manage. Prisoners could also shop from a range of catalogues, including hobby materials, on the basis of their reward and recognition level.

### Prisoner consultation, applications and redress

- 2.15** Consultation arrangements for general community and residential matters were inconsistent. Two house blocks held consultation meetings in each community, although most did not take

place when scheduled. The third house block had opted out of such meetings because they were considered ineffective. Actions decided in the meetings that took place were repeatedly carried forward. Prison-wide consultation meetings had just been introduced, which was a promising development.

- 2.16** Prisoners could make applications quickly and conveniently through their in-cell laptops, which also facilitated tracking and monitoring of the process. Nevertheless, only 46% of prisoners in our survey who had made an application said they were dealt with fairly, and only 39% said they received a response within seven days. The quality of many responses to applications was poor, indicating staff inexperience and lack of familiarity with the technology. As a result, prisoners often had to make more than one application to resolve a matter, and some resorted to the complaints process to address their needs. A quality assurance process was not yet working effectively.
- 2.17** There had been 3,614 complaints in the previous six months, a much higher level than we usually see. Staff attributed this to the inexperience of many staff and ineffective operation of the applications process, and this was evident in some of the complaints we reviewed. There was a complaint handling guide for staff, and the quality of responses was generally reasonable, with some responses excellent. Most responses addressed the issues raised, although some were terse and apologies were not always offered when due.
- 2.18** In our survey, only 27% of prisoners who had made complaints said they were usually dealt with within seven days. We found that too many responses to complaints were late. Sixteen complaints made in January 2018 had had no responses at all; four of these, were more serious 'confidential access' complaints made directly to the governor. The complaints process was monitored and there was evidence that some systemic problems, such as prisoners' access to stored property, were identified and addressed.
- 2.19** There were no dedicated legal support staff, although prison offender managers could signpost prisoners to local lawyers. The library stocked some legal textbooks that were out of date, which was poor practice. In-cell telephones helped prisoners to contact their lawyers. Facilities for legal visits were good.

## Recommendations

- 2.20** **There should be effective and consistent consultation with prisoners.**
- 2.21** **Responses to complaints should be prompt.**

## Equality, diversity and faith

### Expected outcomes:

**There is a clear approach to promoting equality of opportunity, eliminating unlawful discrimination and fostering good relationships. The distinct needs of prisoners with particular protected characteristics<sup>9</sup> and any other minority characteristics are recognised and addressed. Prisoners are able to practise their religion. The chaplaincy plays a full part in prison life and contributes to prisoners' overall care, support and rehabilitation.**

### Strategic management

- 2.22** The leadership and strategic oversight of equality work were weak. The two managers for the area were also responsible for other key areas in the prison, and other members of the team were often cross-deployed. As a result, there was insufficient attention to equality work. (See main recommendation S48.)
- 2.23** The monthly equality meeting did not have a high enough profile and was rarely chaired by the governor or deputy governor. Although senior managers were lead officers for protective characteristics they did not always attend, and there was no prisoner representation.
- 2.24** The strategic plan was not specific to the prison and did not detail specific actions required. Data on equality monitoring were collected but not brought to the equality meeting for analysis of trends. Many actions were long outstanding and were not effective in changing outcomes for prisoners or promoting equality. (See main recommendation S48.)
- 2.25** The number of discrimination incident reporting forms (DIRFs) submitted in the previous six months was far higher than we usually see in similar prisons. However, the issues raised were low level and some could have been dealt with informally. In our focus groups with prisoners, they knew how to submit a DIRF but were not confident in the investigation process. We found that investigations were often answered by the equality manager or officer but were not investigated thoroughly enough, often lacked one-to-one meetings and some answers were unhelpful and curt. Responses were prompt but, until recently, they had had insufficient quality assurance and no independent scrutiny.
- 2.26** There were few external community representatives providing advice and support for prisoners, and limited consultation for prisoners with protected characteristics. Although there were three prisoner equality representatives, prisoners were not aware of them or clear about their roles. The lack of consultation left the prison poorly placed to offer relevant support to these groups. (See main recommendation S48.)

### Protected characteristics

- 2.27** Approximately 20% of prisoners were from a black or minority ethnic background. Prisoners reported to us, and our survey showed, little disproportionality of treatment with white prisoners. There had been infrequent focus groups for this group of prisoners, and actions agreed were long outstanding.

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<sup>9</sup> The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

- 2.28** In our survey, 2% of prisoners identified as coming from a Gypsy, Roma or Traveller background. Although the prison had held one focus group meeting that identified that these prisoners would benefit from more regular meetings, these had not happened. Only one prisoner attended the focus group meeting we held, and he was not aware of any support available to him.
- 2.29** Foreign national prisoners made up just over 3% of the population. A foreign national policy described the support available, but consultation was poor and prisoners we spoke with were confused about what was available. Foreign national prisoners received an extra five minutes' telephone credit a month, and if they did not have regular visits they could apply for additional credit, but they were not all were aware of this or how to apply for it. There was an active foreign national prisoner representative but his role and access to him was not well promoted. Home Office officials continued to hold regular sessions for foreign national prisoners they needed to see, but no independent legal advice was available.
- 2.30** The prison had a supported living community, where most prisoners with the most acute physical disabilities lived. In our survey, 36% of prisoners considered themselves to have a disability. We found major gaps in provision for some disabled prisoners that needed to be addressed. Some had not had reasonable adjustments made for several months, and the equality team did not have sufficient oversight of these prisoners (see also section on Social care and recommendation 2.66). An equality meeting had identified poor provision for disabled prisoners, but no action had yet been taken to address the issues.
- 2.31** In our survey, prisoners who identified themselves as having a disability were more negative than those without a disability in several areas. Most notably, 59% said they had felt unsafe at the prison compared with 37% of prisoners without a disability. Personal emergency evacuation plans (PEEPs) were clearly located on the community wings, but while information was gathered, evacuation plans were not always completed, which was concerning. Where PEEPS were completed, staff were not always aware of their details in case of evacuation. Prisoners employed to care for prisoners with disabilities did not have any clear remit and were untrained and unsupervised, which raised the risk of exploitation.
- 2.32** There was one community in the prison for mature and older prisoners. Consultation with older prisoners had only taken place recently. The prisoners we spoke with were positive about living with their peer group, and the facility was good. Retired prisoners were unlocked during the day and could attend an over-50s class at the gym, although there was little else specifically to meet the needs of this group or provide recreational activity
- 2.33** The prison had held only one focus group for the small known number of prisoners who identified as gay or bisexual. Prisoners had raised that they found it hard to be open about their sexuality in prison, but nothing had been done to support this group. In our survey, 2% of prisoners identified themselves as transgender or transsexual, although the prison was not aware of them.
- 2.34** There was a veterans' unit, which had a good environment, and prisoners could have regular contact with external support groups, which was valued.

## Recommendations

- 2.35** **Personal emergency evacuation plans should always be fully completed and known to staff.**
- 2.36** **Prisoner carers should be trained, have job descriptions and be supervised.**

## Faith and religion

- 2.37** The chaplaincy provided a valuable service, and prisoners had good access to religious services and pastoral care. In our survey, 72% of those who had a religion said their religious beliefs were respected, and 86% said they could attend a religious service if they wanted to. Chaplains had a high profile across the establishment. They visited new arrivals within their first 24 hours, and made daily visits to prisoners in the segregation unit. Prisoners could also apply to see a chaplain through their in-cell laptop.
- 2.38** There were two multi-faith rooms for worship, which were clean, private and suitably equipped with excellent washing facilities. Services for all the main religions were well attended, and there were arrangements for members of minority faiths. The managing chaplain was part of the senior management team and attended relevant prison meetings.
- 2.39** There were links to chaplaincy teams in the community to provide ongoing support for prisoners on release. The chaplaincy ran the official prison visitors' scheme, which was well established to support prisoners. At the time of our inspection, there were four volunteers who were visiting six prisoners.

## Health, well-being and social care

### Expected outcomes:

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

- 2.40** The inspection of health services was jointly undertaken by Healthcare Inspectorate Wales<sup>10</sup> and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies.

### Strategy, clinical governance and partnerships

- 2.41** Betsi Cadwaladr University Health Board (BCUHB) was responsible for health services, and directly employed most of the health staff. The general practitioner (GP) service in and out of hours was provided by Gables Medical (Offender Health), and the optician service by Pen Optical Trust.
- 2.42** Health provision had been informed by a health needs assessment published in May 2015. Although it had its limitation, the service specification was comprehensive and in line with the needs of the growing population. Positively, there had been a new health needs assessment, which was due to be published.
- 2.43** The health provision was integrated and well led, and its quality and governance were very good overall. Governance meetings included an area health board, quarterly partnership board and local quality assurance meetings. Medicines management, clinical governance and integrated health operational meetings reported to the higher governance structures, and daily staff safety meetings covered daily risks.

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<sup>10</sup> HIW is the independent regulator of health care in Wales. For information on HIW, please visit: <http://hiw.org.uk/?lang=en>

- 2.44** There had been no recent infection control audits, but they were planned as part of the developing audit cycle with the health board. All clinical areas were clean and well maintained, but there were no cleaning schedules evident.
- 2.45** A strong culture of incident reporting informed practice. Serious and untoward incidents were thoroughly investigated within the NHS national serious incident framework, and actions were progressed. The health complaints system was advertised and well managed. Responses to health complaints were apt and prompt, and apologetic when required.
- 2.46** There were well-attended health service user forums, mostly monthly, with clear actions and completion records for items raised.
- 2.47** Although there were ongoing health service vacancies, the integrated model enabled services to be flexible and respond to changing demand, and be maintained to a good level. Staff were well trained and supervised, although clinical supervision needed refining. Clinical records were maintained on SystemOne (the clinical IT system) but were not always comprehensive.
- 2.48** Emergency equipment was well maintained and monitored. Officers knew about appropriate emergency responses, and had access to first aid equipment and defibrillators. During the inspection, there was a two-week pilot project with the Welsh Ambulance Service Trust, with a paramedic deployed for 12 hours a day in the prison. The aim was to reduce the need for unnecessary ambulance attendance, and to work alongside health care staff to provide training and develop a minor injuries service. In the six shifts that had taken place during our inspection, 11 emergency calls had been managed without the need for further ambulance input, which was impressive. A substantial proportion of emergencies were related to psychoactive substances.

### Promoting health and well-being

- 2.49** There was no overarching health promotion strategy or action plan, Health promotion literature was available in the health care centre and some other key areas, but was limited elsewhere.
- 2.50** Smoking cessation support, vaccinations, immunisations and health screening initiatives were provided, but there was no bowel screening. Condoms were available on request and on release, and there were weekly sexual health clinics. There were contingency plans for outbreaks of infectious diseases.
- 2.51** Although the health department and wider prison did not work in collaboration to promote health and well-being, the physiotherapist used the gym for twice weekly sessions.

### Recommendation

- 2.52** **There should be a prison-wide strategy to support health promotion.**

### Primary care and inpatient services

- 2.53** All new arrivals received a comprehensive health assessment in reception from a registered nurse. Onward referrals were made where needed, and as there was also a pharmacy technician in reception, medicines reconciliation was prompt. Health care staff had access to medical records on SystemOne.

- 2.54** There was a wide range of primary care services, which included GP, nurse clinics, optician, physiotherapy, speech therapy and occupational therapy. An impressive radiology suite, staffed by a full-time radiographer, ensured good access to X-rays and ultrasound services.
- 2.55** Prisoners had good access to all primary care services and waiting times were reasonable. GPs were available daily, and the same team provided an out-of-hours service, which promoted continuity of care. There was good access to nursing staff, and a new daily wing-based nurse-led 'see and treat' clinic was a promising initiative.
- 2.56** The electronic appointments system was well managed. Prisoners could use their in-cell laptops to make appointments, and a peer-run health and well-being telephone service enabled prisoners to cancel and rearrange their appointments. However, non-attendance rates were very high, at 17.2%, but it was not clear why. Work was under way by the health and well-being peer mentors, facilitated by health staff, to reduce it.
- 2.57** At the time of inspection, there were 147 prisoners with long-term conditions. The majority had comprehensive up-to-date care plans, but some patients did not have one at all and some reviews were overdue. The primary care team was aware of this and more nurse-led clinics had been booked to address it.
- 2.58** The prison facilitated four external hospital appointments a day, in addition to any emergency escorts. Appointments were rarely cancelled due to lack of escorting staff. Health staff did not see all prisoners returning from an external hospital appointment, and so could miss ongoing treatment plans.
- 2.59** Health staff saw all prisoners being discharged from the prison. Prisoners were given a summary of their care, medication where relevant, information on how to register with community dental and GP services, health promotion leaflets and condoms.

## Recommendation

- 2.60** **Health staff should always see prisoners returning from external hospital appointments to establish any treatment and support needs.**

## Good practice

- 2.61** *The presence of a member of the pharmacy team in reception enabled prompt medicines reconciliation and easy access to medicines information for new arrivals.*

## Social care

- 2.62** Wrexham County Borough Council provided social services to the prison, with an agreement with BCUHB that the health care team would provide any social care required. There was a memorandum of understanding between BCUHB, the borough council and the prison, which was due for review.
- 2.63** Two social workers were allocated to work with the prison and visited twice a week. There was no named senior prison lead for social care, and attendance by all key stakeholders at governance and partnership board meetings was inconsistent. The prison's oversight of social care required improvement.

- 2.64** There were effective processes for prisoner referral to social services. In the previous six months, 90 referrals had been received from prisoners themselves, health care staff and prison officers. Thirty prisoners were still waiting for allocation and assessment following referral, but had been prioritised. The borough council was unable to tell us how long prisoners waited for assessment. However, it noted that requests for social services support were mainly for low-level information, advice and assistance, which would not qualify for assessment under the Social Services and Well-being (Wales) Act 2014.
- 2.65** At the time of inspection, no prisoners were receiving social care. Some prisoners had been referred to the occupational therapist for assessment and support, which was positive, but we found too many delays in obtaining specialist equipment and aids.

## Recommendation

- 2.66** **The prison should ensure that suitable occupational therapy equipment and adaptations are provided and installed promptly.**

## Mental health care

- 2.67** BCUHB provided good mental health services, with a wide range of evidence-based therapeutic interventions to meet the needs of prisoners. The team included mental health nurses, psychologists, psychology assistants and a full-time consultant psychiatrist. Joint work between mental health services, health care and the prison was very good. A weekly multidisciplinary meeting reviewed new referrals and allocated or signposted them promptly, and a daily team meeting discussed urgent referrals.
- 2.68** In our survey, 46% of prisoners said they had a mental health problem, of who 34% said they were receiving help. Support for prisoners with mild to moderate mental health problems was good, with the provision of a wide variety of evidence-based therapies in group and one-to-one settings. A selection of self-help material for prisoners was also available. Trained professionals delivered dialectical behaviour therapy (specifically designed to treat people with borderline personality disorder) and an art therapist was providing weekly sessions.
- 2.69** Prisoners with severe and enduring mental health problems were managed through the Mental Health (Wales) Measure 2010, and clinical records contained agreed care plans and reviews. The team regularly reviewed these patients' physical health and medication.
- 2.70** The mental health team supported prisoners before release through effective liaison with external health professionals to ensure continuity of care. There had been one transfer to hospital under the Mental Health Act in the previous six months, which took place promptly.
- 2.71** Thirty-five custody staff had received mental health first aid training provided by the team, and there were plans to roll this out further.

## Substance use treatment

- 2.72** BCUHB provided an integrated clinical and psychosocial substance use service, which was patient centred. The team was fully staffed, had the required competencies and was well managed.
- 2.73** The prison's substance use strategy was weak and there was no action plan to coordinate, drive and measure its effectiveness. (See also paragraph 1.35 and main recommendation S46.)

- 2.74** Psychosocial support was good. Prisoners were seen promptly and there was no waiting list. An active and well-managed peer support scheme enhanced service provision.
- 2.75** The substance use service delivered a good range of individual and group psychosocial interventions and patient-centred clinical treatments, which were reviewed regularly. Specific therapies had been developed in response to clinical need, with the setting up of groups to improve motivation around change and encourage harm reduction using cognitive behavioural strategies. However, access to rooms across the prison to deliver group and individual therapies was routinely a problem.
- 2.76** A substance use health care professional assessed all new arrivals, and peer workers provided information on the substance use service and harm reduction. Support was offered to all prisoners suspected of using illicit substances, including hooch (illegally brewed alcohol).
- 2.77** At the time of inspection, 171 patients were receiving opiate substitutes, mostly on a maintenance basis, and we saw well-supervised controlled drug administration. Treatment was individual, regularly reviewed and well integrated. There was very good joint working with the wider health care team, and a dual-diagnosis nurse (substance use and mental health) supported patients.
- 2.78** The substance use service was embedded in the wider prison and worked closely with offender managers, resettlement and the security team, and was involved in ACCT reviews. Custody staff we spoke to had received substance use training during induction and knew how to refer prisoners. The service had good links with local community services, and worked jointly to ensure treatment continuation for prisoners after their discharge. On release and where indicated, prisoners were given naloxone to treat opiate overdose.

## Recommendation

- 2.79** **The substance use services should have the necessary rooms to deliver therapeutic treatment.**

## Medicines optimisation and pharmacy services

- 2.80** Pharmacy provision was well developed and well managed. Patients received medicines promptly from the in-house pharmacy. Pharmacy technicians administered medicines alongside nurses on weekdays, and patients could seek advice from them at the administration hatch. Patients could also make an application to speak to a pharmacist. Pharmacists clinically screened prescriptions and monitored prescribing, but did not hold medicines use reviews with patients. Pharmacy policies were in place and followed, although some staff had not signed training records for the pharmacy's standard operating procedures.
- 2.81** Around 80% of patients received their medicines in possession. There was no facility for administering medicines after 7pm and so night time medicines were always supplied in possession. All prisoners could store their medicines in lockable cupboards. Pharmacy technicians carried out intelligence-led cell checks, reporting any cases of missing or unauthorised medicines. Risk assessments of the patient and their medicines were completed and available on SystmOne, and were reviewed.
- 2.82** Very few prisoners were prescribed tradeable medicines. All new arrivals on prescribed medicines were reviewed to see if their prescription was clinically sound. Inappropriate prescribing practices, such as off-licence drugs or multiple drug use, were managed robustly.

Some prisoners had complained that this had happened without consulting them. There was little evidence of this, but there needed to be work to engage with these complex prisoners and manage their perceptions.

- 2.83** Some prisoners received supervised administration up to twice daily at 7.15am and 5.30pm. Pharmacy technicians had been trained to administer medicines and administrations were well supervised by officers, although on some wings routine delays could result in some prisoner being late getting to activities. Health care staff recorded supplies of medicines on SystemOne. However, there was no missed dose policy and where prisoners had missed doses of high-risk medicines this was not always followed up promptly, which was a risk.
- 2.84** Medicines were stored and transported securely, and temperature-sensitive medicines were kept in suitable fridges that were monitored. Pharmacy staff said that they carried out monthly checks of all medicines in the prison, although we could only see the date of the most current check during the inspection. Controlled drugs were very well managed.
- 2.85** Patient group directions (which enable nurses to supply and administer prescription-only medicines) were limited to vaccinations and salbutamol inhalers. Prisoners could request a wide range of over-the-counter remedies from nurses or pharmacy technicians, and supplies were correctly recorded. Prisoners could also buy basic painkillers from the prison shop. Prisoners could access medicines out of hours.
- 2.86** The medicines management group met monthly and was well attended. The group discussed clinical audits and prescribing trends, and ratified policies.

## Recommendations

- 2.87** **There should be a formal and robust procedure to follow up patients who miss medicine doses.**
- 2.88** **Pharmacists should carry out medicines use reviews with patients.**

## Dental services and oral health

- 2.89** The quality of dental care was good but waiting times for routine care were excessive, at 42 weeks when we inspected. This wait was partly due to the dental practice not being fit for use initially, as well as difficulty in recruiting dental staff. Urgent dental care was managed well, but with 440 prisoners waiting for a routine appointment, dental outcomes were often affected.
- 2.90** Oral health advice and information was provided. The new dental facility was spacious, clean and had a separate decontamination room. All equipment was maintained correctly. Staff were directly employed by BCUIHB and managed under its governance structures.

## Recommendation

- 2.91** **Prisoners should have access to dental treatment within community-equivalent waiting times.**



## Section 3. Purposeful activity

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

### Time out of cell

#### **Expected outcomes:**

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

- 3.1 Fully employed prisoners could expect to have about nine hours a day out of cell on most weekdays and over six hours at weekends. However, the many unemployed prisoners only had about two and a half hours out of cell on weekdays. Unlock time was particularly poor for self-isolating prisoners. In our spot checks, we found approximately 28% of prisoners locked up during the core day, which was too high for a training prison.
- 3.2 Although unplanned regime curtailments were very rare, there was some slippage in the regime and not all staff or prisoners were aware of unlock times. Routine delays in medicines administration meant that some prisoners could be up to an hour late for activities (see paragraph 2.83).
- 3.3 In our survey, more prisoners than in similar prisons said they had association, domestic time and outside exercise more than five days in a typical week. However, on weekdays, outdoor exercise was limited to 45 minutes.
- 3.4 There was a small range of 'enrichment activities', such as singing classes and a chess club. However, places were limited and only a small percentage of prisoners attended them.
- 3.5 The library, run by Wrexham County Council, provided a welcoming environment and was open from Monday to Saturday. In our survey, only 40% of prisoners said they attended the library once a week or more. Some evening and Saturday sessions were regularly cancelled due to officer staffing issues. Although the library had recently started collecting the reasons why sessions were cancelled, it did not monitor or analyse which prisoners attended. The legal books stocked in the library were out of date (see paragraph 2.19). The library facilitated Storybook Dads (enabling prisoners to record a story for their children) and reading groups, but had struggled to deliver the Shannon Trust reading programme due to prison staffing problems, and there was little else to promote literacy.
- 3.6 The PE facilities were very good, with a varied timetable that did not disadvantage prisoners in work. Evening sessions for full-time workers allowed up to 120 prisoners to attend. Prisoners could achieve a wider range of vocational sports qualifications. Twice-weekly physiotherapy sessions supported prisoners with injuries. The gym made reasonable adjustments for disabled prisoners, and there was an over-50s class and social events for retired prisoners. The PE department did not analyse attendance at the gym to identify and address any exclusion of particular communities or groups with protected characteristics.

### Recommendation

- 3.7 **Prisoner attendance at the library and the gym should be analysed routinely to identify if any groups are excluded and to develop provision.**

## Education, skills and work activities (Estyn)<sup>11</sup>

### Expected outcomes:

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

**3.8** *Estyn made the following assessments about the education, skills and work provision:*

<i>Standards</i>	<i>Good</i>
<i>Well-being and attitudes to learning</i>	<i>Good</i>
<i>Teaching and learning experiences</i>	<i>Excellent</i>
<i>Care, support and guidance</i>	<i>Good</i>
<i>Leadership and management</i>	<i>Adequate and needs improvement</i>

### Standards

- 3.9** In vocational workshops and in education sessions, nearly all prisoners made effective progress towards their learning goals. Their success rates were good overall, although those from a few minority groups had success rates slightly below the overall figure.
- 3.10** Nearly all prisoners understood the qualification framework towards which they were working. They were clear what they had already achieved and knew what they needed to do to make further progress.
- 3.11** Most prisoners made strong progress in literacy and numeracy, and many appreciated how these skills improved their employability. A minority, who had not succeeded in traditional education, were proud that they had now gained qualifications in these skills and this had motivated them to progress to higher levels of learning. Learner files showed that their literacy improved further as a result of their involvement in education. A few made effective progress in developing digital skills, such as in a media classes where they worked on industry-standard equipment.
- 3.12** Most prisoners' coursework and practical work were completed to a high standard. In a bench carpentry workshop, they produced doors and staircases to a high level of precision and quality. In a music class, many were able to develop their theory and practical skills to the point where they were able and confident to perform to their peers. Food preparation learners, a minority of whom had never cooked food before, demonstrated a sound practical application of skills when preparing dishes.

<sup>11</sup> This part of the inspection is conducted by Estyn inspectors using Estyn's common inspection framework. This ensures that prisons are held accountable to the same standard of performance as further education colleges in the community.

## Well-being and attitudes to learning

- 3.13** Prisoners in education, training and work behaved very well, participated well in sessions, were motivated to learn, and were respectful to staff and each other. Nearly all worked together collaboratively and supported each other effectively in their learning. They were comfortable in discussing their personal attitudes to their work and their lives. All prisoners took an immense pride in their work and their achievements, and understood how they were improving their knowledge, skills and employability.
- 3.14** Peer mentors gained personal confidence, self-esteem and empathy for others through helping their fellow prisoners. They also gained useful accredited practical skills, such as teaching and coaching, by working closely with teachers.
- 3.15** Many prisoners improved their self-worth and ability to plan for a different future through academic and business courses and by improving their literacy, numeracy and IT skills. Resettlement courses provided many with the skills needed to reintegrate into life outside.
- 3.16** Many prisoners developed awareness of healthy living through programmes such as food preparation, food hygiene and health and safety. The understanding they developed about healthy, nutritious food and the implications of legal requirements would assist them in gaining employment. In street football and sports courses, a majority learned the importance of staying fit and active, how to work as a team, and how to coach and train others.
- 3.17** A few prisoners told us that they improved their mental health and emotional well-being through taking part in art, music, digital skills and other creative courses. Teachers told us that many prisoners on these courses developed new ways of thinking and seeing the world. A few prisoners took part in competitions and projects, such as a Tate Liverpool art exhibition, which they told us raised their esteem with their families and gained external recognition for their talents.
- 3.18** Most learners who attended sessions regularly completed their courses successfully and were keen to progress to other learning opportunities.

## Teaching and learning experiences

- 3.19** The range and level of qualifications broadly met most prisoners' needs and enabled them to progress to higher levels of study. A few prisoners were working towards degree-level qualifications.
- 3.20** In nearly all sessions, teachers used a wide range of highly developed skills that were tailored to prisoners' individual learning needs. Nearly all used resources that appealed to a wide range of learning styles. They used directed questioning well and took care to ensure that all prisoners were engaged with their learning.
- 3.21** Many teachers and tutors inspired prisoners to achieve, express emotions, develop new skills and to value learning. We observed that they developed many prisoners' confidence and resilience to extend their ambitions and goals.
- 3.22** Education peer mentors made a valuable contribution to many classes. Teachers and mentors worked very well together to give nearly all prisoners individual support, settling newer prisoners into learning quickly and helping others to overcome learning barriers.
- 3.23** Nearly all teachers and tutors planned sessions very well. Where appropriate, they planned activities in short bursts and provided a variety of tasks to engage nearly all prisoners. This

enabled many learners to focus on their work for several hours. Nearly all staff were well informed about individuals' learning needs, and used this information very effectively to plan learning.

- 3.24** Teachers and tutors monitored and tracked prisoners' skills and qualification achievements very closely. They assessed prisoners' abilities and progress effectively, giving them constructive feedback that motivated most to progress further. Most prisoners' individual learning and work plans were up to date, included personal targets and occasionally made helpful reference to their behaviour.
- 3.25** Many teachers were successful in managing risks when prisoners used tools and equipment to enhance their learning experiences.

### Care, support and guidance

- 3.26** Prisoners received a detailed and well-designed induction to education that was very thorough in assessing their education needs. Staff made determined efforts to obtain and recognise prisoners' prior achievements, tested their skill levels and helped them choose the learning opportunities that best suited their long-term plans. Mentors played a major supportive role in this process. New arrivals had early access to careers advice that helped them to make informed decisions about the education courses to take and the employment options available in the prison or on release.
- 3.27** Staff identified prisoners with additional learning needs promptly at induction, and referred them to specialist support services provided by a partner organisation.
- 3.28** All courses aimed to give prisoners the skills, attitudes and behaviour that they needed to progress to higher learning or work, and equip them to cope on their release.
- 3.29** A recent successful employment fair had increased some prisoners' awareness of employment opportunities and given them the opportunity to speak with employers and discuss options. Prisoners told us that this helped to change their perceptions of themselves and understand opportunities that they could take advantage of on release.
- 3.30** Families and resettlement courses (see also section on Rehabilitation and release planning) supported prisoners to be more confident to return to their families and communities at the end of their sentence.
- 3.31** There was a sensitive approach to the promotion of democratic values that supported prisoners to discuss issues openly, acknowledge their own attitudes and agree common understandings. Each course took an individual approach to the delivery of this topic, which helped many prisoners to relate the issues to their chosen learning.
- 3.32** There were only a few prisoners on many of the courses. Those who were present and engaged in education were given effective support.

### Leadership and management

- 3.33** Since the prison had opened, the range of education, training and work had not met the needs of the population. Leaders and managers had adapted provision and had developed useful and creative contingency plans to occupy prisoners in the absence of suitable provision. For example, Interserve had set up temporary work and training facilities in residential accommodation, although this did not represent a realistic workplace. However,

while these contingency arrangements created enough activity places for the current population, too many were not challenging enough and did not encourage prisoners to develop a sound work ethic. Further workshop provision was planned to open during May 2019. (See main recommendation S49.)

- 3.34** Staff did not do enough to challenge prisoners who chose not to participate in education, training or work. Activity places were not fully used. Almost 200 prisoners were unemployed, and many who were allocated to an activity failed to attend. Only around two-thirds of prisoners were engaged in activities at any time, and this was compounded by the fact that 20% of those engaged were undertaking wing work, which was largely unskilled and failed to keep them occupied for the working day. (See main recommendation S50.)
- 3.35** The prison had developed many effective partnerships to help prisoners gain skills and improve their experience and employability. A DHL warehouse on site enabled a few prisoners to gain work experience and the possibility of an employment interview on release. The prison had started to use release on temporary licence to enable a few prisoners to access employment opportunities and improve their prospects of gaining work (see paragraph 4.28).
- 3.36** Prisoner pay policies did not always provide an incentive for them to attend education, training and work. The prison had recently revised the policy, but it was too early to evaluate its impact.
- 3.37** The self-assessment report for education and vocational provision identified key strengths and areas for improvement, which informed the quality development plan. However, the objectives in the plan did not define the criteria to judge success clearly enough. Leaders and managers had developed task-and-finish groups to progress issues that the learning and skills team had communicated to the quality improvement group. It was too early to judge the effectiveness of these groups in developing solutions.
- 3.38** The education facilities were well equipped, and a few resources were bilingual. However, there was no effective strategy to promote the Welsh language. Nearly all staff had good access to training.

## Recommendations

- 3.39** **Work and training should take place in realistic work environments.**
- 3.40** **There should be a clear strategy to promote the Welsh language and the Welsh dimension in activities for prisoners that encourages all prisoners, especially Welsh speakers, to use and develop their Welsh language skills.**



## Section 4. Rehabilitation and release planning

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

### Children and families and contact with the outside world

#### Expected outcomes:

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

- 4.1 The impressive visitors' centre, run by the Prison Advice and Care Trust (PACT), was staffed by friendly, helpful workers and open seven days a week. The team was well resourced and provided a social worker, family engagement and a family support worker, as well as a play specialist in the visits hall. Outdoor and indoor children's play areas were provided.
- 4.2 Visits generally started and finished on time. The visits hall provided a welcoming environment, and it was spacious, bright and well equipped, with a soft-play area and a tea bar. Prisoners valued that they could wear their own clothes, sit next to their families, buy items from the tea bar and supervise their children in the play area, and visits were far more relaxed than we often see.
- 4.3 There was too little provision to meet the need for weekend visits, with a three-week delay in booking these during our inspection. Prison managers were aware of this problem and looking at making improvements.
- 4.4 There was an excellent range of courses to help prisoners build and maintain relationships with their families. Delivered through the education department and PACT, these included a weekly evening homework club, and 'Building Better Futures and Families', which enabled prisoners and their families to spend family days together arranged for prisoners who had completed these courses and to demonstrate skills they had learned. The education provider Novus also offered a range of family courses on the Improving Family Futures community (a community focusing on improving family relationships), although there had been no family days for prisoners there for several months.
- 4.5 Prisoners complained to us that they did not receive their mail regularly, and in our survey, 69% said that they had problems with sending or receiving mail, which was significantly more than the 57% in similar prisons. We found that staff in several communities were not collecting incoming mail regularly enough to distribute to prisoners promptly. Mail had not been collected for 15 consecutive days in one month in one area of the prison.

## Recommendation

- 4.6 Prisoners should receive their incoming mail within 24 hours of its arrival at the prison.**

## Reducing risk, rehabilitation and progression

### Expected outcomes:

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

- 4.7** Managers at Berwyn had struggled to plan work to reduce reoffending effectively due to several major challenges. High-risk prisoners made up about 40% of the population, which was a much larger number than anticipated. About three-quarters of prisoners were serving sentences of four years or more, and many were transient; 43% had been at Berwyn for less than six months. The prison's location in North Wales also created contractual complexities for funding for the majority of prisoners, as about three-quarters came from outside Wales. The lack of clarity about the composition of the population had also made planning difficult for the programmes team and the offender management unit (OMU).
- 4.8** Just over two years after opening, there was still no comprehensive analysis of the population's needs to inform provision and future direction. There was also no reducing reoffending strategy that considered the challenges which Berwyn had faced in its early days, and which set out future priorities. There had been only two reducing reoffending meetings in the previous six months, which was too infrequent for a new prison with further challenges ahead. Although there were up-to-date action plans for each resettlement pathway, the meetings did not routinely use these to assess resettlement provision.
- 4.9** Too many prisoners did not have an up-to-date offender assessment system (OASys) assessment of their risk and needs. There were 160 prisoners with no assessment at all, so their transfer to Berwyn had not been informed by a sentence plan. A further 350 prisoners had not had an up-to-date assessment completed in the previous 12 months. The lack of current assessment directly affected prisoner access to offending behaviour programmes and their ability to progress to open conditions. (See main recommendation S51.)
- 4.10** Uniformed prison offender managers were rarely cross-deployed to other duties, which was unusual and positive. Prison offender managers who had trained as probation officers held virtually all the 514 high-risk cases. However, caseloads overall were high. Some prison offender managers carried 70 cases and, until recently, caseloads of 90 or 100 prisoners had been typical. The OMU had now taken the very unusual step of refusing to accept any more high-risk prisoners from England.
- 4.11** Recorded offender manager contact with prisoners was too inconsistent to drive their sentence progression effectively, and tended to be in reaction to events such as parole or recategorisation. There was no expectation of minimum level of contact with prisoners. The quality of offender management was variable, and in half the cases we looked at it was insufficient. Sentence plan objectives did not usually relate to Berwyn's specific provision, and there was too little evidence that interventions were sequenced correctly. (See main recommendation S52.)

- 4.12** In January 2019, the OMU fully introduced the new offender management in custody (OMiC)<sup>12</sup> model for the prisoners from Wales, about a quarter of the population. Under this model, high-risk prisoners in this group were supposed to see their prison offender manager for 60 minutes a month. Although it was early days, in the cases we looked at there was not yet a demonstrably better service from the OMU for these prisoners. Relevant entries by wing-based keyworkers in prisoners' case notes were not sufficiently in depth (see paragraph 2.4). An OMU clinic to improve communication with prisoners had been introduced, which was a sensible step.
- 4.13** The latest home detention curfew (HDC) processes had not been introduced effectively, and too many eligible prisoners were released late on HDC. Only 22% of prisoners were serving under four years and were therefore eligible to be considered for HDC. In the six months to the end of February 2019, 162 prisoners had been considered for HDC but only 58% (94) had been approved, an unusually low level under the new processes. In the same period, nearly half of the 71 prisoners released on HDC were released after their eligibility date. Prompt release was affected by factors such as HDC boards being held after the eligibility date, inadequate responses from community offender managers about the suitability of accommodation, prisoners arriving at Berwyn inside their HDC window, and a lack of bail accommodation and support services (BASS) beds. Managers had recently recognised deficiencies in the process and were taking steps to address them.
- 4.14** Indeterminate sentence prisoners made up 12% of the population (158 prisoners), and most lived in two adjacent lifer communities. Apart from the benefit of being co-located, there was too little provision for these prisoners. Many were unhappy at the prospect of sharing cells as the prison's population increased. However, the introduction of a prison offender manager with responsibility for indeterminate sentence prisoners was positive.
- 4.15** There were 46 prisoners serving an indeterminate sentence for public protection (IPP) and many were past their tariff (the minimum time to serve, set by the court, before they can be considered for release). There had been some work at regular sentence progression meetings to identify the unmet needs of these prisoners, but as yet no further work had been undertaken. There were plans to introduce dedicated support for these prisoners, but funding was not yet in place.

## Recommendations

- 4.16 Prisoners who are suitable for home detention curfew should be released on time.**
- 4.17 There should be adequate provision to address the unmet needs of prisoners on indeterminate sentence for public protection post tariff.**

## Public protection

- 4.18** Public protection arrangements were weak overall. Arrangements to conduct and review telephone monitoring of prisoners who potentially posed a risk to the public were ineffective. There was a two-month backlog of calls that had not been monitored, and the monitoring logs we looked at had typically ended two months' previously (in January 2019). The backlog meant that risks to the public were not promptly identified. The lack of

<sup>12</sup> Following a review of offender management in 2015, HMPPS began to introduce a new offender management model from 2017. The new model is being implemented in stages, starting with new prison officer key workers. The second phase, core offender management, and the introduction of prison offender managers (POMs) is being introduced gradually, from 2019.

up-to-date risk information resulted in monthly reviews to determine whether monitoring should continue or cease being rolled over to the following month, creating even more pressure on staff listening to calls. Where risk information, such as the breach of a restraining order, was belatedly identified, this was not always referred to the police for investigation or to the prison's internal disciplinary procedures for punishment. The prison had also struggled to have Welsh language telephone calls translated. (See main recommendation S53.)

- 4.19** Although the OMU had a reasonably good process for assessing whether prisoners presented an ongoing risk to children, some assessments were not completed adequately and about 40% were out of date. Some restrictions had been inherited from sending prisons without a full assessment. The ineffective telephone monitoring arrangements undermined the effectiveness of assessments.
- 4.20** Almost half of prisoners due for release in the following three months were assessed as high risk. The monthly interdepartmental risk management meeting did not systematically consider this group to provide assurance that their risks would be properly managed. (See main recommendation S53.) Although this was a significant gap, in the individual cases we looked at there was evidence of good communication between prison and community offender managers to address public protection issues and manage some of these risks.
- 4.21** The OMU made efforts to confirm prisoners' multi agency public protection arrangements (MAPPA) management levels before their release, which allowed prison offender managers to contribute to release arrangements. Written contributions from prison offender managers to MAPPA meetings in the community were of a sufficiently good quality.

## Categorisation and transfers

- 4.22** Recategorisation reviews were frequently late. Decisions were both evidence-based and defensible, with good contributions from prison offender managers and the security department, and approval by a residential manager.
- 4.23** Too many category D prisoners were not moved promptly to open prisons. In 2018, the prison had tried to create a category D community to allow prisoners to access release on temporary licence (ROTL), but this had quickly been abandoned, partly because there were not enough ROTL opportunities. Moving these prisoners on afterwards had contributed to a backlog. Seven category D prisoners were still held at the prison to access ROTL (see paragraph 4.28).
- 4.24** In the previous six months, 108 prisoners had been awarded category D status and 117 had been transferred to open conditions, which was positive. However, there were still 72 category D prisoners at Berwyn during the inspection, and most needed to move on. There was a lack of spaces in the open prison estate nationally, with very limited availability at Thorn Cross, Berwyn's closest open prison.

## Interventions

### Expected outcomes:

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

- 4.25** The prison offered three accredited offending behaviour programmes: the Thinking Skills Programme (TSP), Resolve (a moderate-intensity programme to address violence) and Kaizen Intimate Partner Violence (IPV) (a high-intensity programme to tackle domestic

abuse). A fourth programme, Kaizen General Violence (also high intensity), was due to be introduced in summer 2019.

- 4.26** There were not enough places on these programmes to meet the needs of the population. The programmes team had identified 406 prisoners who met the risk and need criteria for treatment and who had sufficient time left in custody. In 2019-20, there would be capacity for only 134 prisoners to start a programme, only about a third of those with a need for the programmes. The arrival of a further 300 prisoners in the following few months would add to the demand for programmes.
- 4.27** There were some short-term interventions to help prisoners address their attitudes, thinking and behaviour. These included Positive Thinking, which 72 prisoners had completed since April 2018. However, this course was not routinely linked to sentence plans, which was a missed opportunity. The chaplaincy offered the Sycamore Tree victim awareness course, which was well attended, with four further groups of prisoners due to start it in 2019.
- 4.28** Unusually, the prison had introduced ROTL for a small number (currently seven) of low- and medium-risk category D prisoners. While we would generally expect category D prisoners to move promptly to an open prison to access ROTL, there was a good argument for prisoners resettling to Wales to stay at Berwyn for this purpose, as there were no open prisons in North Wales.
- 4.29** The prison's ROTL policy was not robust and did not reflect national guidance. Assessments and boards to allow prisoners ROTL were adequate, but there was a lack of proper progression through the different stages of ROTL and weaknesses in safeguarding arrangements while prisoners were out in the community; managers had recognised these deficiencies.
- 4.30** St Giles Trust provided support for prisoners to address financial problems and open bank accounts before release. In the two years since the prison opened, it had opened 294 bank accounts for prisoners. Jobcentre Plus attended the prison twice a week. Although prisoners could not begin an online application for universal credit in the prison, an appointment at their local jobcentre was made for their day of release.
- 4.31** St Giles Trust also supported prisoners to find accommodation on release, although it estimated that about 7% of prisoners were homeless on their day of release. Outcomes for prisoners sustaining their accommodation 12 weeks after release were not monitored to assess the effectiveness of provision.
- 4.32** Due to contractual restrictions, the support that St Giles Trust currently offered on accommodation and finance, benefit and debt to prisoners resettling outside Wales was due to cease from April 2019, with no realistic plan to address this gap (see also paragraph 4.35 and main recommendation S54).

## Recommendation

- 4.33 There should be enough accredited offending behaviour programmes to meet the needs of the population.**

## Release planning

### Expected outcomes:

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

- 4.34** Berwyn released an average of 40 prisoners a month. Around half were released to Wales and half to England. Seetec (formerly Working Links) had commissioned St Giles Trust to address prisoners' resettlement needs, and it offered all prisoners very good and prompt support. Trust workers reviewed resettlement plans 16 weeks before release and made appropriate referrals, and could also meet the needs of prisoners who transferred into Berwyn just before their release. St Giles Trust workers communicated well with community offender managers, providing them with prisoners' resettlement plans. There was a monthly multiagency resettlement needs meeting, and all prisoners had a pre-release check seven days before release.
- 4.35** Since the prison opened, St Giles Trust had worked outside its contract to deliver resettlement support to all prisoners. However, because the population was due to increase and it would shortly be required to deliver enhanced through-the-gate services to prisoners resettling in Wales, the trust had informed the prison that, from 1 April 2019, it could no longer work with prisoners released to England. There was no realistic plan to address the resettlement needs of these prisoners after this date. (See main recommendation S54.)
- 4.36** The prison had begun to establish a resettlement community for prisoners to move on to 16 weeks ahead of release. So far, about 60% of the unit's population fitted this criterion. Resettlement peer workers were available, but otherwise provision was still developing.
- 4.37** Practical release arrangements were very good. There was an extensive stock of second-hand clothing available to prisoners being discharged, and a St Giles Trust staff member met prisoners in reception with their reporting instructions and travel plans - there was a nearby bus route or a taxi could be ordered at the visitors' centre. PACT also met a few of the most complex prisoners at the gate to assist their return to the community.

## Section 5. Summary of recommendations and good practice

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

### Main recommendation

To HMPPS

- 5.1** All prisoners released from Berwyn should receive support to review and address their resettlement needs. (S54)

### Main recommendations

To the governor

- 5.2** The prison should develop a strategy to reduce violence based on an analysis of the causes of violence, supported by an action plan to drive and monitor a reduction in violent incidents. (S44)
- 5.3** Prisoners who are self-isolating should have their basic needs for food, hygiene, social contact and fresh air met. A plan to work towards ending their isolation should be agreed with them and regularly reviewed. (S45)
- 5.4** The prison should continue its focus on drug supply and demand reduction, but should better coordinate and embed actions to reduce the availability and demand for drugs, and measure their impact. (S46)
- 5.5** Prisoners should be supported and managed effectively by a responsive and capable staff group. (S47)
- 5.6** Senior leaders should promote the importance of equality work in the prison. There should be a robust strategy and oversight of equality work, informed by routine consultation, to identify and address the needs of prisoners in protected characteristics groups. (S48)
- 5.7** The balance and range of education, training and work places should reflect the needs of the population, keep prisoners occupied and be sufficiently challenging. (S49)
- 5.8** All eligible prisoners should be allocated to an education, training or work placement, and should be encouraged and expected to attend. (S50)
- 5.9** All eligible prisoners should have an up-to-date assessment that identifies their risks and needs. (S51)
- 5.10** Prison offender managers should have regular, good quality contact with prisoners, which drives their risk reduction and sentence progression. (S52)
- 5.11** Public protection procedures should be given urgent and sustained attention to ensure that prisoners' risks, both in custody and on release, are managed effectively. (S53)

## Recommendations

To the governor

### Managing behaviour

- 5.12** Challenge, support and intervention plans (CSIP) should be used effectively to address violent behaviour and support victims. (1.14)
- 5.13** The rewards and responsibility scheme should incentivise prisoners to take responsibility and behave well, and provide effective and timely sanctions for poor behaviour. (1.15)
- 5.14** There should be effective governance of the adjudications process to ensure it provides active challenge to poor behaviour. (1.20)
- 5.15** Full control and restraint and use of batons should be kept to a minimum through application of de-escalation techniques wherever possible. (1.24)
- 5.16** Segregated prisoners should have access to a regime appropriate to their risk and behaviour. (1.28)

### Security

- 5.17** The prison should ensure that, where practicable, all intelligence-led drug testing takes place. (1.37)

### Safeguarding

- 5.18** The prison should record and analyse the causes of self-harm incidents, and use this material to inform the strategic management of safeguarding and suicide and self-harm prevention. (1.44)
- 5.19** Assessment, care in custody and teamwork (ACCT) casework management documentation should be of a consistently good quality. Care maps for individual prisoners should identify objectives to address their risk of self-harm and ensure they receive the necessary care and support. (1.45)
- 5.20** All staff should understand their adult safeguarding responsibilities. (1.47)

### Daily life

- 5.21** There should be effective and consistent consultation with prisoners. (2.20)
- 5.22** Responses to complaints should be prompt. (2.21)

### Equality, diversity and faith

- 5.23** Personal emergency evacuation plans should always be fully completed and known to staff. (2.35)
- 5.24** Prisoner carers should be trained, have job descriptions and be supervised. (2.36)

### Health, well-being and social care

- 5.25** There should be a prison-wide strategy to support health promotion. (2.52)
- 5.26** Health staff should always see prisoners returning from external hospital appointments to establish any treatment and support needs. (2.60)
- 5.27** The prison should ensure that suitable occupational therapy equipment and adaptations are provided and installed promptly. (2.66)
- 5.28** The substance use services should have the necessary rooms to deliver therapeutic treatment. (2.79)
- 5.29** There should be a formal and robust procedure to follow up patients who miss medicine doses. (2.87)
- 5.30** Pharmacists should carry out medicines use reviews with patients. (2.88)
- 5.31** Prisoners should have access to dental treatment within community-equivalent waiting times. (2.91)

### Time out of cell

- 5.32** Prisoner attendance at the library and the gym should be analysed routinely to identify if any groups are excluded and to develop provision. (3.7)

### Education, skills and work activities

- 5.33** Work and training should take place in realistic work environments. (3.39)
- 5.34** There should be a clear strategy to promote the Welsh language and the Welsh dimension in activities for prisoners that encourages all prisoners, especially Welsh speakers, to use and develop their Welsh language skills. (3.40)

### Children and families and contact with the outside world

- 5.35** Prisoners should receive their incoming mail within 24 hours of its arrival at the prison. (4.6)

### Reducing risk, rehabilitation and progression

- 5.36** Prisoners who are suitable for home detention curfew should be released on time. (4.16)
- 5.37** There should be adequate provision to address the unmet needs of prisoners on indeterminate sentence for public protection post tariff. (4.17)

### Interventions

- 5.38** There should be enough accredited offending behaviour programmes to meet the needs of the population. (4.33)

## Examples of good practice

- 5.39** All new arrivals were welcomed into a relaxed and supportive environment in reception. The dedicated first night centre provided a safe place for prisoners to settle in. The comprehensive and well-coordinated induction occupied prisoners purposefully during their early days. (1.6)
- 5.40** The Glyndŵr progressive community was a well-planned and targeted facility to address violent behaviour by prisoners presenting the greatest risk. (1.16)
- 5.41** The presence of a member of the pharmacy team in reception enabled prompt medicines reconciliation and easy access to medicines information for new arrivals. (2.61)

## Section 6. Appendices

### Appendix I: Inspection team

Martin Lomas	Deputy Chief Inspector
Alison Perry	Team leader
Natalie Heeks	Inspector
Angus Mulready-Jones	Inspector
Alice Oddy	Inspector
Jade Richards	Inspector
Deri Hughes-Roberts	Inspector
Andy Rooke	Inspector
Paul Rowlands	Inspector
Jonathan Tickner	Inspector
Caroline Wright	Inspector
Amilcar Johnson	Researcher
Catherine Shaw	Researcher
Joe Simmonds	Researcher
Holly Tuson	Researcher
Tania Osborne	Lead health and social care inspector
Elizabeth Walsh	Health and social care inspector
Shaun Thomson	Health inspector
Helen Boniface	Pharmacist
Alun Connick	Estyn inspector
Lin Howells	Estyn inspector
Martyn Griffiths	Offender management inspector



## Appendix II: 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	21 and over	%
Sentenced	1210	95.1
Recall	63	4.9
<b>Total</b>	<b>1273</b>	<b>100</b>

Sentence	21 and over	%
Less than six months	12	0.9
Six months to less than 12 months	22	1.7
12 months to less than 2 years	41	3.2
2 years to less than 4 years	202	15.9
4 years to less than 10 years	653	51.3
10 years and over (not life)	185	14.5
ISPP (indeterminate sentence for public protection)	46	3.6
Life	112	12.4
<b>Total</b>	<b>1273</b>	<b>100</b>

Age	Number of prisoners	%
21 years to 29 years	456	35.8
30 years to 39 years	431	33.9
40 years to 49 years	267	21.0
50 years to 59 years	95	7.5
60 years to 69 years	19	1.5
70 plus years: <i>maximum age=80</i>	5	0.4
<b>Total</b>	<b>1273</b>	<b>0</b>

Nationality	21 and over	%
British	1229	96.5
Foreign nationals	44	3.5
<b>Total</b>	<b>1273</b>	<b>100</b>

Security category	21 and over	%
Category B	1	0.1
Category C	1204	94.6
Category D	68	5.3
<b>Total</b>	<b>1273</b>	<b>100</b>

<b>Ethnicity</b>	<b>21 and over</b>	<b>%</b>
White		
British	1009	79.3
Irish	7	0.5
Gypsy/Irish Traveller	14	1.1
Other white	20	1.6
Mixed		
White and black Caribbean	26	2.0
White and Asian	6	0.5
Other mixed	10	0.8
Asian or Asian British		
Indian	13	1.0
Pakistani	53	4.2
Bangladeshi	8	0.6
Chinese	2	0.2
Other Asian	12	0.9
Black or black British		
Caribbean	48	3.8
African	18	1.4
Other black	23	1.8
Other ethnic group		
Arab	1	0.1
Other ethnic group	2	0.2
Not stated	1	0.1
<b>Total</b>	<b>1273</b>	<b>100</b>

<b>Religion</b>	<b>21 and over</b>	<b>%</b>
Baptist	2	0.2
Church of England	193	15.2
Roman Catholic	296	23.3
Other Christian denominations	130	10.2
Muslim	139	10.9
Sikh	9	0.7
Hindu	1	0.1
Buddhist	15	1.2
Jewish	14	1.1
Other	21	1.6
No religion	453	35.6
<b>Total</b>	<b>1273</b>	<b>100</b>

<b>Other demographics</b>	<b>21 and over</b>	<b>%</b>
Veteran (ex-armed services)	22	1.73
<b>Total</b>	<b>22</b>	<b>1.73</b>

**Sentenced prisoners only**

<b>Length of stay</b>	<b>21 and over</b>	
	<b>Number</b>	<b>%</b>
Less than 1 month	68	5.3
1 month to 3 months	180	14.1
3 months to six months	295	23.2
six months to 1 year	341	26.8
1 year to 2 years	387	30.4
2 years to 4 years	2	0.2
<b>Total</b>	<b>1273</b>	<b>100</b>

<b>Main offence</b>	<b>21 and over</b>	<b>%</b>
Violence against the person	431	33.86
Burglary	118	9.27
Robbery	180	14.14
Theft and handling	13	1.02
Fraud and forgery	8	0.63
Drugs offences	376	29.60
Other offences	146	11.47
Offence not recorded /holding warrant	1	0.01
<b>Total</b>	Not available	



## Appendix III: Photographs



Alwen house



Bala reception



Cell



Mural



Mural



Inadequate screening



# Appendix IV: 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.<sup>13</sup>

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

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

### Sampling

On the day of the survey a stratified random sample is drawn by HMI Prisons researchers from a P-NOMIS prisoner population printout ordered by cell location. Using a robust statistical formula HMI Prisons researchers calculate the minimum sample size required to ensure that the survey findings can be generalised to the entire population of the establishment.<sup>14</sup> In smaller establishments we may offer a questionnaire to the entire population.

### Distributing and collecting questionnaires

HMI Prisons researchers distribute and collect the questionnaires in person. So that prisoners can give their informed consent to participate, the purpose of the survey is explained and assurances are given about confidentiality and anonymity.<sup>15</sup> Prisoners are made aware that participation in the survey is voluntary; refusals are noted but not replaced within the sample. Those who agree to participate are provided with a sealable envelope for their completed questionnaire and told when we will be returning to collect it. We make arrangements to administer the questionnaire via a face-to-face interview for respondents who disclose literacy difficulties.

### Survey response

At the time of the survey on 4 March 2019, the prisoner population at HMP Berwyn was 1,273. Using the sampling method described above, questionnaires were distributed to 225 prisoners. We received a total of 184 completed questionnaires, a response rate of 81%. This included two questionnaires completed via face-to-face interviews. Fifteen prisoners declined to participate in the survey and 27 questionnaires were either not returned at all, or returned blank.

<sup>13</sup> Qualitative analysis of these written comments is undertaken by HMI Prisons researchers and used by inspectors.

<sup>14</sup> 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments).

<sup>15</sup> For further information about the ethical principles which underpin our survey methodology, please see *Ethical principles for research activities* which can be downloaded from HMI Prisons' website <http://www.justiceinspectorates.gov.uk/hmiprison/about-our-inspections/>

## Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for HMP Berwyn. For the comparator analyses, each question was reformulated into a binary ‘yes/no’ format and affirmative responses compared.<sup>16</sup> Missing responses have been excluded from all analyses.

### Full survey results

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

### Responses from HMP Berwyn 2019 compared with those from other HMI Prisons surveys<sup>17</sup>

- Survey responses from HMP Berwyn in 2019 compared with survey responses from other category C training prisons inspected since September 2017.

### Comparisons between sub-populations of prisoners within HMP Berwyn 2019<sup>18</sup>

- White prisoners’ responses compared with those of prisoners from black or minority ethnic groups.
- 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.
- Responses of prisoners aged 25 and under compared with those over 25.

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group.<sup>19</sup>

In the comparator analyses, statistically significant differences are indicated by shading.<sup>20</sup> 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.

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.

<sup>16</sup> Using the Chi-square test (or Fisher’s exact test if there are fewer than five responses in a group).

<sup>17</sup> 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.

<sup>18</sup> These analyses are carried out on summary data from selected survey questions only.

<sup>19</sup> A minimum of 10 responses which must also represent at least 10% of the total response.

<sup>20</sup> 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.

# Survey summary

## Background information

<b>I.1</b>	<b>What wing or house block are you currently living on?</b>	
	Alwen .....	71 (39%)
	Bala .....	80 (44%)
	Ceiriog.....	30 (16%)
	Ogwen (care and segregation unit) .....	2 (1%)
<b>I.2</b>	<b>How old are you?</b>	
	Under 21 .....	1 (1%)
	21 - 25.....	29 (16%)
	26 - 29.....	45 (25%)
	30 - 39.....	55 (31%)
	40 - 49.....	32 (18%)
	50 - 59.....	14 (8%)
	60 - 69.....	2 (1%)
	70 or over .....	0 (0%)
<b>I.3</b>	<b>What is your ethnic group?</b>	
	White - English/ Welsh/ Scottish/ Northern Irish/ British .....	138 (77%)
	White - Irish .....	3 (2%)
	White - Gypsy or Irish Traveller.....	2 (1%)
	White - any other White background .....	1 (1%)
	Mixed - White and Black Caribbean.....	8 (4%)
	Mixed - White and Black African .....	1 (1%)
	Mixed - White and Asian.....	2 (1%)
	Mixed - any other Mixed ethnic background.....	2 (1%)
	Asian/ Asian British - Indian .....	2 (1%)
	Asian/ Asian British - Pakistani .....	6 (3%)
	Asian/ Asian British - Bangladeshi.....	2 (1%)
	Asian/ Asian British - Chinese .....	2 (1%)
	Asian - any other Asian Background.....	1 (1%)
	Black/ Black British - Caribbean.....	5 (3%)
	Black/ Black British - African .....	2 (1%)
	Black - any other Black/ African/ Caribbean background.....	0 (0%)
	Arab.....	1 (1%)
	Any other ethnic group .....	2 (1%)
<b>I.4</b>	<b>How long have you been in this prison?</b>	
	Less than 6 months.....	53 (30%)
	6 months or more .....	126 (70%)
<b>I.5</b>	<b>Are you currently serving a sentence?</b>	
	Yes .....	164 (92%)
	Yes - on recall.....	14 (8%)
	No - on remand or awaiting sentence.....	0 (0%)
	No - immigration detainee.....	0 (0%)

**1.6 How long is your sentence?**

Less than 6 months.....	5 (3%)
6 months to less than 1 year.....	5 (3%)
1 year to less than 4 years.....	37 (21%)
4 years to less than 10 years.....	81 (46%)
10 years or more.....	33 (19%)
IPP (indeterminate sentence for public protection).....	4 (2%)
Life.....	12 (7%)
Not currently serving a sentence.....	0 (0%)

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

Yes.....	43 (24%)
No.....	125 (71%)
Don't remember.....	9 (5%)

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

Less than 2 hours.....	53 (30%)
2 hours or more.....	116 (66%)
Don't remember.....	7 (4%)

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

Yes.....	141 (81%)
No.....	24 (14%)
Don't remember.....	10 (6%)

**2.4 Overall, how were you treated in reception?**

Very well.....	68 (39%)
Quite well.....	90 (51%)
Quite badly.....	14 (8%)
Very badly.....	3 (2%)
Don't remember.....	1 (1%)

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

Problems getting phone numbers.....	29 (17%)
Contacting family.....	22 (13%)
Arranging care for children or other dependants.....	1 (1%)
Contacting employers.....	5 (3%)
Money worries.....	25 (14%)
Housing worries.....	15 (9%)
Feeling depressed.....	35 (20%)
Feeling suicidal.....	9 (5%)
Other mental health problems.....	34 (19%)
Physical health problems.....	19 (11%)
Drug or alcohol problems (e.g. withdrawal).....	11 (6%)
Problems getting medication.....	52 (30%)
Needing protection from other prisoners.....	8 (5%)
Lost or delayed property.....	47 (27%)
Other problems.....	14 (8%)
Did not have any problems.....	61 (35%)

<b>2.6</b>	<b>Did staff help you to deal with these problems when you first arrived?</b>	
	Yes .....	32 (19%)
	No .....	79 (46%)
	Did not have any problems when I first arrived .....	61 (35%)

### First night and induction

<b>3.1</b>	<b>Before you were locked up on your first night here, were you offered any of the following things?</b>	
	Tobacco or nicotine replacement .....	111 (65%)
	Toiletries / other basic items .....	98 (57%)
	A shower .....	102 (60%)
	A free phone call .....	63 (37%)
	Something to eat .....	127 (74%)
	The chance to see someone from health care .....	105 (61%)
	The chance to talk to a Listener or Samaritans .....	51 (30%)
	Support from another prisoner (e.g. Insider or buddy) .....	40 (23%)
	Wasn't offered any of these things .....	15 (9%)
<b>3.2</b>	<b>On your first night in this prison, how clean or dirty was your cell?</b>	
	Very clean .....	77 (44%)
	Quite clean .....	74 (42%)
	Quite dirty .....	15 (8%)
	Very dirty .....	9 (5%)
	Don't remember .....	2 (1%)
<b>3.3</b>	<b>Did you feel safe on your first night here?</b>	
	Yes .....	153 (87%)
	No .....	14 (8%)
	Don't remember .....	8 (5%)
<b>3.4</b>	<b>In your first few days here, did you get:</b>	
		Yes      No      Don't remember
	Access to the prison shop / canteen?	134 (78%)    29 (17%)    9 (5%)
	Free PIN phone credit?	82 (48%)    73 (43%)    15 (9%)
	Numbers put on your PIN phone?	102 (62%)    49 (30%)    13 (8%)
<b>3.5</b>	<b>Did your induction cover everything you needed to know about this prison?</b>	
	Yes .....	104 (59%)
	No .....	69 (39%)
	Have not had an induction .....	2 (1%)

### On the wing

<b>4.1</b>	<b>Are you in a cell on your own?</b>	
	Yes .....	79 (44%)
	No, I'm in a shared cell or dormitory .....	99 (56%)
<b>4.2</b>	<b>Is your cell call bell normally answered within 5 minutes?</b>	
	Yes .....	66 (38%)
	No .....	85 (49%)
	Don't know .....	23 (13%)
	Don't have a cell call bell .....	1 (1%)

**4.3 Please answer the following questions about the wing or house block you are currently living on:**

	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	132 (76%)	39 (23%)	2 (1%)
Can you shower every day?	172 (98%)	3 (2%)	1 (1%)
Do you have clean sheets every week?	125 (73%)	45 (26%)	2 (1%)
Do you get cell cleaning materials every week?	92 (53%)	75 (44%)	5 (3%)
Is it normally quiet enough for you to relax or sleep at night?	125 (72%)	47 (27%)	1 (1%)
Can you get your stored property if you need it?	35 (20%)	92 (54%)	44 (26%)

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

Very clean .....	31 (18%)
Quite clean .....	90 (51%)
Quite dirty .....	39 (22%)
Very dirty .....	15 (9%)

**Food and canteen**

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

Very good .....	11 (6%)
Quite good .....	72 (42%)
Quite bad .....	54 (31%)
Very bad .....	35 (20%)

**5.2 Do you get enough to eat at mealtimes?**

Always .....	18 (10%)
Most of the time .....	32 (18%)
Some of the time .....	79 (44%)
Never .....	49 (28%)

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

Yes .....	116 (66%)
No .....	53 (30%)
Don't know .....	8 (5%)

**Relationships with staff**

**6.1 Do most staff here treat you with respect?**

Yes .....	113 (64%)
No .....	63 (36%)

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

Yes .....	105 (60%)
No .....	70 (40%)

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

Yes .....	45 (26%)
No .....	127 (74%)

<b>6.4</b>	<b>How helpful is your personal or named officer?</b>	
	Very helpful.....	23 (14%)
	Quite helpful.....	31 (18%)
	Not very helpful .....	26 (15%)
	Not at all helpful.....	47 (28%)
	Don't know.....	31 (18%)
	Don't have a personal / named officer .....	10 (6%)
<b>6.5</b>	<b>How often do you see prison governors, directors or senior managers talking to prisoners?</b>	
	Regularly.....	14 (8%)
	Sometimes.....	44 (25%)
	Hardly ever.....	102 (59%)
	Don't know.....	13 (8%)
<b>6.6</b>	<b>Do you feel that you are treated as an individual in this prison?</b>	
	Yes.....	64 (37%)
	No.....	108 (63%)
<b>6.7</b>	<b>Are prisoners here consulted about things like food, canteen, health care or wing issues?</b>	
	Yes, and things sometimes change.....	27 (16%)
	Yes, but things don't change.....	72 (42%)
	No.....	55 (32%)
	Don't know.....	18 (10%)

## Faith

<b>7.1</b>	<b>What is your religion?</b>	
	No religion.....	78 (45%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations) .....	68 (39%)
	Buddhist.....	5 (3%)
	Hindu.....	2 (1%)
	Jewish .....	0 (0%)
	Muslim.....	17 (10%)
	Sikh .....	2 (1%)
	Other .....	2 (1%)
<b>7.2</b>	<b>Are your religious beliefs respected here?</b>	
	Yes.....	68 (39%)
	No.....	11 (6%)
	Don't know.....	16 (9%)
	Not applicable (no religion).....	78 (45%)
<b>7.3</b>	<b>Are you able to speak to a chaplain of your faith in private, if you want to?</b>	
	Yes.....	63 (36%)
	No.....	9 (5%)
	Don't know.....	24 (14%)
	Not applicable (no religion).....	78 (45%)
<b>7.4</b>	<b>Are you able to attend religious services, if you want to?</b>	
	Yes.....	82 (47%)
	No.....	6 (3%)
	Don't know.....	7 (4%)
	Not applicable (no religion).....	78 (45%)

**Contact with family and friends**

<b>8.1</b>	<b>Have staff here encouraged you to keep in touch with your family / friends?</b>	
	Yes .....	52 (30%)
	No.....	121 (70%)
<b>8.2</b>	<b>Have you had any problems with sending or receiving mail (letters or parcels)?</b>	
	Yes .....	119 (69%)
	No.....	53 (31%)
<b>8.3</b>	<b>Are you able to use a phone every day (if you have credit)?</b>	
	Yes .....	170 (97%)
	No.....	6 (3%)
<b>8.4</b>	<b>How easy or difficult is it for your family and friends to get here?</b>	
	Very easy.....	12 (7%)
	Quite easy.....	55 (32%)
	Quite difficult .....	48 (28%)
	Very difficult .....	51 (29%)
	Don't know.....	8 (5%)
<b>8.5</b>	<b>How often do you have visits from family or friends?</b>	
	More than once a week.....	2 (1%)
	About once a week.....	34 (19%)
	Less than once a week.....	89 (51%)
	Not applicable (don't get visits).....	50 (29%)
<b>8.6</b>	<b>Do visits usually start and finish on time?</b>	
	Yes .....	46 (38%)
	No.....	76 (62%)
<b>8.7</b>	<b>Are your visitors usually treated respectfully by staff?</b>	
	Yes .....	87 (73%)
	No.....	32 (27%)

**Time out of cell**

<b>9.1</b>	<b>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)?</b>	
	Yes, and these times are usually kept to .....	82 (47%)
	Yes, but these times are not usually kept to .....	79 (45%)
	No.....	14 (8%)
<b>9.2</b>	<b>How long do you usually spend out of your cell on a typical weekday (including time spent at education, work etc.)?</b>	
	Less than 2 hours .....	22 (13%)
	2 to 6 hours.....	53 (31%)
	6 to 10 hours .....	69 (41%)
	10 hours or more .....	10 (6%)
	Don't know.....	16 (9%)

<b>9.3</b>	<b>How long do you usually spend out of your cell on a typical Saturday or Sunday?</b>	
	Less than 2 hours .....	20 (12%)
	2 to 6 hours.....	112 (65%)
	6 to 10 hours .....	25 (15%)
	10 hours or more .....	2 (1%)
	Don't know.....	12 (7%)
<b>9.4</b>	<b>How many days in a typical week do you have time to do domestics (shower, clean cell, use the wing phones etc.)?</b>	
	None .....	7 (4%)
	1 or 2 .....	17 (10%)
	3 to 5.....	15 (9%)
	More than 5.....	114 (67%)
	Don't know.....	16 (9%)
<b>9.5</b>	<b>How many days in a typical week do you get association, if you want it?</b>	
	None .....	7 (4%)
	1 or 2 .....	2 (1%)
	3 to 5.....	14 (8%)
	More than 5.....	139 (80%)
	Don't know.....	11 (6%)
<b>9.6</b>	<b>How many days in a typical week could you go outside for exercise, if you wanted to?</b>	
	None .....	7 (4%)
	1 or 2 .....	5 (3%)
	3 to 5.....	21 (12%)
	More than 5.....	135 (78%)
	Don't know.....	5 (3%)
<b>9.7</b>	<b>Typically, how often do you go to the gym?</b>	
	Twice a week or more .....	99 (57%)
	About once a week.....	16 (9%)
	Less than once a week.....	9 (5%)
	Never .....	49 (28%)
<b>9.8</b>	<b>Typically, how often do you go to the library?</b>	
	Twice a week or more .....	28 (16%)
	About once a week.....	40 (23%)
	Less than once a week.....	28 (16%)
	Never .....	76 (44%)
<b>9.9</b>	<b>Does the library have a wide enough range of materials to meet your needs?</b>	
	Yes.....	62 (38%)
	No.....	26 (16%)
	Don't use the library .....	76 (46%)

### Applications, complaints and legal rights

<b>10.1</b>	<b>Is it easy for you to make an application?</b>	
	Yes.....	132 (76%)
	No.....	29 (17%)
	Don't know.....	12 (7%)

<b>10.2</b>	<b>If you have made any applications here, please answer the questions below:</b>	Yes	No	Not made any applications	
	Are applications usually dealt with fairly?	65 (41%)	77 (49%)	16 (10%)	
	Are applications usually dealt with within 7 days?	54 (35%)	83 (54%)	16 (10%)	
<b>10.3</b>	<b>Is it easy for you to make a complaint?</b>				
	Yes .....			109 (63%)	
	No .....			38 (22%)	
	Don't know .....			25 (15%)	
<b>10.4</b>	<b>If you have made any complaints here, please answer the questions below:</b>	Yes	No	Not made any complaints	
	Are complaints usually dealt with fairly?	30 (19%)	81 (50%)	50 (31%)	
	Are complaints usually dealt with within 7 days?	28 (18%)	75 (49%)	50 (33%)	
<b>10.5</b>	<b>Have you ever been prevented from making a complaint here when you wanted to?</b>				
	Yes .....			37 (22%)	
	No .....			97 (57%)	
	Not wanted to make a complaint .....			35 (21%)	
<b>10.6</b>	<b>In this prison, is it easy or difficult for you to...</b>	Easy	Difficult	Don't know	Don't need this
	Communicate with your solicitor or legal representative?	88 (52%)	32 (19%)	25 (15%)	25 (15%)
	Attend legal visits?	75 (47%)	17 (11%)	38 (24%)	29 (18%)
	Get bail information?	22 (14%)	26 (16%)	50 (31%)	61 (38%)
<b>10.7</b>	<b>Have staff here ever opened letters from your solicitor or legal representative when you were not present?</b>				
	Yes .....				83 (49%)
	No .....				51 (30%)
	Not had any legal letters .....				34 (20%)

## Health care

<b>11.1</b>	<b>How easy or difficult is it to see the following people?</b>	Very easy	Quite easy	Quite difficult	Very difficult	Don't know
	Doctor	10 (6%)	58 (34%)	49 (28%)	41 (24%)	15 (9%)
	Nurse	16 (10%)	64 (39%)	39 (24%)	27 (16%)	19 (12%)
	Dentist	4 (2%)	18 (11%)	41 (25%)	86 (51%)	18 (11%)
	Mental health workers	7 (4%)	23 (14%)	32 (19%)	44 (26%)	61 (37%)

<b>11.2</b>	<b>What do you think of the quality of the health service from the following people?</b>					
		Very good	Quite good	Quite bad	Very bad	Don't know
	Doctor	27 (16%)	57 (33%)	39 (23%)	31 (18%)	17 (10%)
	Nurse	33 (20%)	75 (44%)	21 (12%)	23 (14%)	17 (10%)
	Dentist	22 (13%)	38 (23%)	20 (12%)	38 (23%)	48 (29%)
	Mental health workers	20 (12%)	25 (15%)	26 (16%)	27 (16%)	66 (40%)
<b>11.3</b>	<b>Do you have any mental health problems?</b>					
	Yes .....					79 (46%)
	No.....					92 (54%)
<b>11.4</b>	<b>Have you been helped with your mental health problems in this prison?</b>					
	Yes .....					28 (16%)
	No.....					54 (31%)
	Don't have any mental health problems .....					92 (53%)
<b>11.5</b>	<b>What do you think of the overall quality of the health services here?</b>					
	Very good .....					14 (8%)
	Quite good .....					66 (39%)
	Quite bad .....					44 (26%)
	Very bad .....					29 (17%)
	Don't know.....					16 (9%)
<b>Other support needs</b>						
<b>12.1</b>	<b>Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?</b>					
	Yes .....					63 (36%)
	No.....					110 (64%)
<b>12.2</b>	<b>If you have a disability, are you getting the support you need?</b>					
	Yes .....					19 (11%)
	No.....					43 (25%)
	Don't have a disability .....					110 (64%)
<b>12.3</b>	<b>Have you been on an ACCT in this prison?</b>					
	Yes .....					29 (17%)
	No.....					142 (83%)
<b>12.4</b>	<b>If you have been on an ACCT in this prison, did you feel cared for by staff?</b>					
	Yes .....					8 (5%)
	No.....					18 (11%)
	Have not been on an ACCT in this prison.....					142 (85%)
<b>12.5</b>	<b>How easy or difficult is it for you to speak to a Listener, if you need to?</b>					
	Very easy .....					28 (16%)
	Quite easy .....					38 (22%)
	Quite difficult .....					11 (6%)
	Very difficult .....					7 (4%)
	Don't know.....					83 (49%)
	No Listeners at this prison .....					4 (2%)

**Alcohol and drugs**

<b>13.1</b>	<b>Did you have an alcohol problem when you came into this prison?</b>	
	Yes .....	20 (12%)
	No.....	151 (88%)
<b>13.2</b>	<b>Have you been helped with your alcohol problem in this prison?</b>	
	Yes .....	7 (4%)
	No.....	10 (6%)
	Did not / do not have an alcohol problem .....	151 (90%)
<b>13.3</b>	<b>Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?</b>	
	Yes .....	37 (22%)
	No.....	133 (78%)
<b>13.4</b>	<b>Have you developed a problem with illicit drugs since you have been in this prison?</b>	
	Yes .....	32 (19%)
	No.....	136 (81%)
<b>13.5</b>	<b>Have you developed a problem with taking medication not prescribed to you since you have been in this prison?</b>	
	Yes .....	20 (12%)
	No.....	151 (88%)
<b>13.6</b>	<b>Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?</b>	
	Yes .....	23 (14%)
	No.....	32 (19%)
	Did not / do not have a drug problem.....	111 (67%)
<b>13.7</b>	<b>Is it easy or difficult to get illicit drugs in this prison?</b>	
	Very easy .....	60 (35%)
	Quite easy .....	22 (13%)
	Quite difficult .....	11 (6%)
	Very difficult .....	6 (3%)
	Don't know.....	73 (42%)
<b>13.8</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	Very easy .....	35 (20%)
	Quite easy .....	29 (17%)
	Quite difficult .....	8 (5%)
	Very difficult .....	9 (5%)
	Don't know.....	91 (53%)

**Safety**

<b>14.1</b>	<b>Have you ever felt unsafe here?</b>	
	Yes .....	79 (45%)
	No.....	95 (55%)
<b>14.2</b>	<b>Do you feel unsafe now?</b>	
	Yes .....	40 (23%)
	No.....	133 (77%)

<b>14.3</b>	<b>Have you experienced any of the following types of bullying / victimisation from other prisoners here?</b>	
	Verbal abuse.....	50 (30%)
	Threats or intimidation.....	52 (31%)
	Physical assault.....	34 (20%)
	Sexual assault.....	7 (4%)
	Theft of canteen or property.....	35 (21%)
	Other bullying / victimisation .....	30 (18%)
	Not experienced any of these from prisoners here.....	97 (58%)
<b>14.4</b>	<b>If you were being bullied / victimised by other prisoners here, would you report it?</b>	
	Yes.....	53 (31%)
	No.....	116 (69%)
<b>14.5</b>	<b>Have you experienced any of the following types of bullying / victimisation from staff here?</b>	
	Verbal abuse.....	54 (33%)
	Threats or intimidation.....	46 (28%)
	Physical assault.....	24 (15%)
	Sexual assault.....	3 (2%)
	Theft of canteen or property.....	13 (8%)
	Other bullying / victimisation .....	37 (23%)
	Not experienced any of these from staff here.....	85 (52%)
<b>14.6</b>	<b>If you were being bullied / victimised by staff here, would you report it?</b>	
	Yes.....	86 (51%)
	No.....	84 (49%)

### Behaviour management

<b>15.1</b>	<b>Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?</b>	
	Yes.....	71 (41%)
	No.....	82 (47%)
	Don't know what the incentives / rewards are .....	20 (12%)
<b>15.2</b>	<b>Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?</b>	
	Yes.....	67 (39%)
	No.....	80 (46%)
	Don't know.....	21 (12%)
	Don't know what this is .....	6 (3%)
<b>15.3</b>	<b>Have you been physically restrained by staff in this prison in the last 6 months?</b>	
	Yes.....	38 (22%)
	No.....	136 (78%)
<b>15.4</b>	<b>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?</b>	
	Yes.....	8 (5%)
	No.....	29 (17%)
	Don't remember .....	0 (0%)
	Not been restrained here in last 6 months .....	136 (79%)

<b>15.5</b>	<b>Have you spent one or more nights in the segregation unit in this prison in the last 6 months?</b>	
	Yes .....	16 (9%)
	No .....	156 (91%)

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

	Yes	No
Were you treated well by segregation staff?	8 (57%)	6 (43%)
Could you shower every day?	12 (80%)	3 (20%)
Could you go outside for exercise every day?	12 (86%)	2 (14%)
Could you use the phone every day (if you had credit)?	9 (64%)	5 (36%)

### 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	113 (68%)	24 (14%)	23 (14%)	6 (4%)
Vocational or skills training	58 (36%)	51 (31%)	48 (30%)	5 (3%)
Prison job	56 (34%)	86 (53%)	16 (10%)	5 (3%)
Voluntary work outside of the prison	5 (3%)	48 (31%)	73 (47%)	29 (19%)
Paid work outside of the prison	6 (4%)	43 (28%)	73 (47%)	34 (22%)

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

	Yes, will help	No, won't help	Not done this
Education	86 (53%)	44 (27%)	33 (20%)
Vocational or skills training	66 (42%)	32 (21%)	58 (37%)
Prison job	53 (33%)	78 (49%)	28 (18%)
Voluntary work outside of the prison	26 (17%)	24 (16%)	100 (67%)
Paid work outside of the prison	30 (20%)	21 (14%)	99 (66%)

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

Yes .....	96 (58%)
No .....	69 (42%)
Not applicable (e.g. if you are retired, sick or on remand) .....	1 (1%)

### Planning and progression

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

Yes .....	103 (61%)
No .....	66 (39%)

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

Yes .....	91 (89%)
No .....	9 (9%)
Don't know what my objectives or targets are.....	2 (2%)

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

Yes .....	37 (38%)
No .....	59 (60%)
Don't know what my objectives or targets are.....	2 (2%)

**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	42 (45%)	12 (13%)	40 (43%)
Other programmes	32 (36%)	12 (13%)	45 (51%)
One to one work	18 (22%)	12 (14%)	53 (64%)
Being on a specialist unit	10 (13%)	6 (8%)	64 (80%)
ROTL - day or overnight release	3 (4%)	4 (5%)	73 (91%)

**Preparation for release**

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

Yes .....	31 (19%)
No.....	124 (74%)
Don't know.....	12 (7%)

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

Very near.....	3 (10%)
Quite near.....	9 (31%)
Quite far.....	9 (31%)
Very far.....	8 (28%)

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

Yes.....	20 (67%)
No.....	10 (33%)

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

	Yes, I'm getting help with this	No, but I need help with this	No, and I don't need help with this
Finding accommodation	8 (29%)	8 (29%)	12 (43%)
Getting employment	2 (7%)	13 (46%)	13 (46%)
Setting up education or training	3 (11%)	10 (36%)	15 (54%)
Arranging benefits	9 (32%)	10 (36%)	9 (32%)
Sorting out finances	4 (14%)	9 (32%)	15 (54%)
Support for drug or alcohol problems	10 (36%)	4 (14%)	14 (50%)
Health / mental health support	8 (28%)	8 (28%)	13 (45%)
Social care support	3 (11%)	5 (19%)	19 (70%)
Getting back in touch with family or friends	6 (21%)	5 (17%)	18 (62%)

**More about you**

**19.1 Do you have children under the age of 18?**

Yes .....	78 (46%)
No.....	92 (54%)

**19.2 Are you a UK / British citizen?**

Yes.....	163 (96%)
No.....	7 (4%)

<b>19.3</b>	<b>Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?</b>	
	Yes .....	4 (2%)
	No .....	166 (98%)
<b>19.4</b>	<b>Have you ever been in the armed services (e.g. army, navy, air force)?</b>	
	Yes .....	14 (8%)
	No .....	156 (92%)
<b>19.5</b>	<b>What is your gender?</b>	
	Male .....	165 (98%)
	Female .....	1 (1%)
	Non-binary .....	0 (0%)
	Other .....	3 (2%)
<b>19.6</b>	<b>How would you describe your sexual orientation?</b>	
	Straight / heterosexual .....	160 (95%)
	Gay / lesbian / homosexual .....	2 (1%)
	Bisexual .....	2 (1%)
	Other .....	4 (2%)
<b>19.7</b>	<b>Do you identify as transgender or transsexual?</b>	
	Yes .....	3 (2%)
	No .....	162 (98%)

#### Final questions about this prison

<b>20.1</b>	<b>Do you think your experiences in this prison have made you more or less likely to offend in the future?</b>	
	More likely to offend .....	17 (10%)
	Less likely to offend .....	71 (43%)
	Made no difference .....	78 (47%)

## HMP Berwyn 2019

### Survey responses compared with those from other HMIP surveys of category C training prisons

In this table summary statistics from HMP Berwyn 2019 are compared with the following HMIP survey data:

- Summary statistics from surveys of category C training prisons conducted since the introduction of the new questionnaire in September 2017 (20 prisons). Please note that this does not include all local prisons.

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*n*=number of valid responses to question (HMP Berwyn 2019)

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION				
1.2	Are you under 21 years of age?	<i>n</i> =178	1%	6%
	Are you 25 years of age or younger?	<i>n</i> =178	17%	27%
	Are you 50 years of age or older?	<i>n</i> =178	9%	12%
	Are you 70 years of age or older?	<i>n</i> =178	0%	1%
1.3	Are you from a minority ethnic group?	<i>n</i> =180	20%	33%
1.4	Have you been in this prison for less than 6 months?	<i>n</i> =179	30%	35%
1.5	Are you currently serving a sentence?	<i>n</i> =178	100%	100%
	Are you on recall?	<i>n</i> =178	8%	9%
1.6	Is your sentence less than 12 months?	<i>n</i> =177	6%	8%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n</i> =177	2%	3%
7.1	Are you Muslim?	<i>n</i> =174	10%	18%
11.3	Do you have any mental health problems?	<i>n</i> =171	46%	44%
12.1	Do you consider yourself to have a disability?	<i>n</i> =173	36%	33%
19.1	Do you have any children under the age of 18?	<i>n</i> =170	46%	50%
19.2	Are you a foreign national?	<i>n</i> =170	4%	10%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n</i> =170	2%	5%
19.4	Have you ever been in the armed services?	<i>n</i> =170	8%	6%
19.5	Is your gender female or non-binary?	<i>n</i> =169	2%	1%
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n</i> =168	5%	4%

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<b>19.7</b>	Do you identify as transgender or transsexual?	<i>n</i> =165	<b>2%</b>	<b>2%</b>
<b>ARRIVAL AND RECEPTION</b>				
<b>2.1</b>	Were you given up-to-date information about this prison before you came here?	<i>n</i> =177	<b>24%</b>	<b>15%</b>
<b>2.2</b>	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n</i> =176	<b>30%</b>	<b>49%</b>
<b>2.3</b>	When you were searched in reception, was this done in a respectful way?	<i>n</i> =175	<b>81%</b>	<b>82%</b>
<b>2.4</b>	Overall, were you treated very / quite well in reception?	<i>n</i> =176	<b>90%</b>	<b>85%</b>

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2.5	When you first arrived, did you have any problems?	<i>n</i> =175	<b>65%</b>	<b>73%</b>
2.5	Did you have problems with:			
	- Getting phone numbers?	<i>n</i> =175	<b>17%</b>	<b>26%</b>
	- Contacting family?	<i>n</i> =175	<b>13%</b>	<b>26%</b>
	- Arranging care for children or other dependents?	<i>n</i> =175	<b>1%</b>	<b>2%</b>
	- Contacting employers?	<i>n</i> =175	<b>3%</b>	<b>2%</b>
	- Money worries?	<i>n</i> =175	<b>14%</b>	<b>16%</b>
	- Housing worries?	<i>n</i> =175	<b>9%</b>	<b>13%</b>
	- Feeling depressed?	<i>n</i> =175	<b>20%</b>	<b>30%</b>
	- Feeling suicidal?	<i>n</i> =175	<b>5%</b>	<b>9%</b>
	- Other mental health problems?	<i>n</i> =175	<b>19%</b>	<b>21%</b>
	- Physical health problems?	<i>n</i> =175	<b>11%</b>	<b>13%</b>
	- Drugs or alcohol (e.g. withdrawal)?	<i>n</i> =175	<b>6%</b>	<b>11%</b>
	- Getting medication?	<i>n</i> =175	<b>30%</b>	<b>20%</b>
	- Needing protection from other prisoners?	<i>n</i> =175	<b>5%</b>	<b>6%</b>
	- Lost or delayed property?	<i>n</i> =175	<b>27%</b>	<b>22%</b>
	<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> =111	<b>29%</b>	<b>32%</b>
<b>FIRST NIGHT AND INDUCTION</b>				
3.1	Before you were locked up on your first night, were you offered:			
	- Tobacco or nicotine replacement?	<i>n</i> =171	<b>65%</b>	<b>66%</b>
	- Toiletries / other basic items?	<i>n</i> =171	<b>57%</b>	<b>51%</b>
	- A shower?	<i>n</i> =171	<b>60%</b>	<b>43%</b>
	- A free phone call?	<i>n</i> =171	<b>37%</b>	<b>44%</b>
	- Something to eat?	<i>n</i> =171	<b>74%</b>	<b>75%</b>
	- The chance to see someone from health care?	<i>n</i> =171	<b>61%</b>	<b>60%</b>
	- The chance to talk to a Listener or Samaritans?	<i>n</i> =171	<b>30%</b>	<b>27%</b>
	- Support from another prisoner (e.g. Insider or buddy)?	<i>n</i> =171	<b>23%</b>	<b>22%</b>
	- None of these?	<i>n</i> =171	<b>9%</b>	<b>7%</b>
3.2	On your first night in this prison, was your cell very / quite clean?	<i>n</i> =177	<b>85%</b>	<b>36%</b>

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<b>3.3</b>	Did you feel safe on your first night here?	<i>n</i> =175	<b>87%</b>	<b>72%</b>
<b>3.4</b>	In your first few days here, did you get:			
	- Access to the prison shop / canteen?	<i>n</i> =172	<b>78%</b>	<b>40%</b>
	- Free PIN phone credit?	<i>n</i> =170	<b>48%</b>	<b>47%</b>
	- Numbers put on your PIN phone?	<i>n</i> =164	<b>62%</b>	<b>47%</b>
<b>3.5</b>	Have you had an induction at this prison?	<i>n</i> =175	<b>99%</b>	<b>94%</b>
	<i>For those who have had an induction:</i>			
<b>3.5</b>	Did your induction cover everything you needed to know about this prison?	<i>n</i> =173	<b>60%</b>	<b>55%</b>

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<b>ON THE WING</b>			
4.1	Are you in a cell on your own?	<i>n</i> =178	<b>44%</b> <b>62%</b>
4.2	Is your cell call bell normally answered within 5 minutes?	<i>n</i> =175	<b>38%</b> <b>30%</b>
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	<i>n</i> =173	<b>76%</b> <b>68%</b>
	- Can you shower every day?	<i>n</i> =176	<b>98%</b> <b>89%</b>
	- Do you have clean sheets every week?	<i>n</i> =172	<b>73%</b> <b>65%</b>
	- Do you get cell cleaning materials every week?	<i>n</i> =172	<b>54%</b> <b>59%</b>
	- Is it normally quiet enough for you to relax or sleep at night?	<i>n</i> =173	<b>72%</b> <b>67%</b>
	- Can you get your stored property if you need it?	<i>n</i> =171	<b>21%</b> <b>25%</b>
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	<i>n</i> =175	<b>69%</b> <b>59%</b>
<b>FOOD AND CANTEEN</b>			
5.1	Is the quality of the food in this prison very / quite good?	<i>n</i> =172	<b>48%</b> <b>40%</b>
5.2	Do you get enough to eat at meal-times always / most of the time?	<i>n</i> =178	<b>28%</b> <b>35%</b>
5.3	Does the shop / canteen sell the things that you need?	<i>n</i> =177	<b>66%</b> <b>61%</b>
<b>RELATIONSHIPS WITH STAFF</b>			
6.1	Do most staff here treat you with respect?	<i>n</i> =176	<b>64%</b> <b>69%</b>
6.2	Are there any staff here you could turn to if you had a problem?	<i>n</i> =175	<b>60%</b> <b>70%</b>
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<i>n</i> =172	<b>26%</b> <b>31%</b>
6.4	Do you have a personal officer?	<i>n</i> =168	<b>94%</b> <b>83%</b>
<i>For those who have a personal officer:</i>			
6.4	Is your personal or named officer very / quite helpful?	<i>n</i> =158	<b>34%</b> <b>46%</b>
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	<i>n</i> =173	<b>8%</b> <b>10%</b>
6.6	Do you feel that you are treated as an individual in this prison?	<i>n</i> =172	<b>37%</b> <b>43%</b>
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	<i>n</i> =172	<b>58%</b> <b>51%</b>
	If so, do things sometimes change?	<i>n</i> =99	<b>27%</b> <b>32%</b>
<b>FAITH</b>			
7.1	Do you have a religion?	<i>n</i> =174	<b>55%</b> <b>69%</b>
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	<i>n</i> =95	<b>72%</b> <b>70%</b>

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<b>7.3</b>	Are you able to speak to a chaplain of your faith in private, if you want to?	<i>n</i> =96	<b>66%</b>	<b>69%</b>
<b>7.4</b>	Are you able to attend religious services, if you want to?	<i>n</i> =95	<b>86%</b>	<b>88%</b>

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<b>CONTACT WITH FAMILY AND FRIENDS</b>			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	<i>n=173</i>	<b>30%</b> <b>27%</b>
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	<i>n=172</i>	<b>69%</b> <b>57%</b>
8.3	Are you able to use a phone every day (if you have credit)?	<i>n=176</i>	<b>97%</b> <b>88%</b>
8.4	Is it very / quite easy for your family and friends to get here?	<i>n=174</i>	<b>39%</b> <b>35%</b>
8.5	Do you get visits from family/friends once a week or more?	<i>n=175</i>	<b>21%</b> <b>17%</b>
<i>For those who get visits:</i>			
8.6	Do visits usually start and finish on time?	<i>n=122</i>	<b>38%</b> <b>50%</b>
8.7	Are your visitors usually treated respectfully by staff?	<i>n=119</i>	<b>73%</b> <b>74%</b>
<b>TIME OUT OF CELL</b>			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	<i>n=175</i>	<b>92%</b> <b>91%</b>
<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?	<i>n=161</i>	<b>51%</b> <b>57%</b>
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	<i>n=170</i>	<b>13%</b> <b>17%</b>
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	<i>n=170</i>	<b>6%</b> <b>8%</b>
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	<i>n=171</i>	<b>12%</b> <b>22%</b>
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	<i>n=171</i>	<b>1%</b> <b>3%</b>
9.4	Do you have time to do domestics more than 5 days in a typical week?	<i>n=169</i>	<b>88%</b> <b>56%</b>
9.5	Do you get association more than 5 days in a typical week, if you want it?	<i>n=173</i>	<b>68%</b> <b>65%</b>
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	<i>n=173</i>	<b>78%</b> <b>65%</b>
9.7	Do you typically go to the gym twice a week or more?	<i>n=173</i>	<b>57%</b> <b>53%</b>
9.8	Do you typically go to the library once a week or more?	<i>n=172</i>	<b>40%</b> <b>49%</b>
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	<i>n=88</i>	<b>71%</b> <b>56%</b>
<b>APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS</b>			
10.1	Is it easy for you to make an application?	<i>n=173</i>	<b>76%</b> <b>73%</b>
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	<i>n=142</i>	<b>46%</b> <b>50%</b>
	Are applications usually dealt with within 7 days?	<i>n=137</i>	<b>39%</b> <b>36%</b>
10.3	Is it easy for you to make a complaint?	<i>n=172</i>	<b>63%</b> <b>62%</b>

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<i>For those who have made a complaint:</i>			
<b>10.4</b>	Are complaints usually dealt with fairly?	<i>n=111</i>	<b>27%</b> <b>30%</b>
	Are complaints usually dealt with within 7 days?	<i>n=103</i>	<b>27%</b> <b>4%</b>
<b>10.5</b>	Have you ever been prevented from making a complaint here when you wanted to?	<i>n=134</i>	<b>28%</b> <b>28%</b>

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<i>For those who need it, is it easy to:</i>				
10.6	Communicate with your solicitor or legal representative?	<i>n=145</i>	<b>61%</b>	<b>39%</b>
	Attend legal visits?	<i>n=130</i>	<b>58%</b>	<b>47%</b>
	Get bail information?	<i>n=98</i>	<b>22%</b>	<b>16%</b>
<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?	<i>n=134</i>	<b>62%</b>	<b>58%</b>
<b>HEALTH CARE</b>				
11.1	Is it very / quite easy to see:			
	- Doctor?	<i>n=173</i>	<b>39%</b>	<b>31%</b>
	- Nurse?	<i>n=165</i>	<b>49%</b>	<b>52%</b>
	- Dentist?	<i>n=167</i>	<b>13%</b>	<b>15%</b>
	- Mental health workers?	<i>n=167</i>	<b>18%</b>	<b>23%</b>
11.2	Do you think the quality of the health service is very / quite good from:			
	- Doctor?	<i>n=171</i>	<b>49%</b>	<b>47%</b>
	- Nurse?	<i>n=169</i>	<b>64%</b>	<b>57%</b>
	- Dentist?	<i>n=166</i>	<b>36%</b>	<b>34%</b>
	- Mental health workers?	<i>n=164</i>	<b>27%</b>	<b>29%</b>
11.3	Do you have any mental health problems?	<i>n=171</i>	<b>46%</b>	<b>44%</b>
<i>For those who have mental health problems:</i>				
11.4	Have you been helped with your mental health problems in this prison?	<i>n=82</i>	<b>34%</b>	<b>42%</b>
11.5	Do you think the overall quality of the health services here is very / quite good?	<i>n=169</i>	<b>47%</b>	<b>42%</b>
<b>OTHER SUPPORT NEEDS</b>				
12.1	Do you consider yourself to have a disability?	<i>n=173</i>	<b>36%</b>	<b>33%</b>
<i>For those who have a disability:</i>				
12.2	Are you getting the support you need?	<i>n=62</i>	<b>31%</b>	<b>31%</b>
12.3	Have you been on an ACCT in this prison?	<i>n=171</i>	<b>17%</b>	<b>16%</b>
<i>For those who have been on an ACCT:</i>				
12.4	Did you feel cared for by staff?	<i>n=26</i>	<b>31%</b>	<b>44%</b>
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	<i>n=171</i>	<b>39%</b>	<b>39%</b>
<b>ALCOHOL AND DRUGS</b>				
13.1	Did you have an alcohol problem when you came into this prison?	<i>n=171</i>	<b>12%</b>	<b>14%</b>

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

HMP Berwyn 2019	All other category C training prisons surveyed since September 2017
<b>183</b>	<b>3,409</b>

**Number of completed questionnaires returned**

*n=number of valid responses to question (HMP Berwyn 2019)*

<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	<i>n=17</i>	<b>41% 51%</b>
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	<i>n=170</i>	<b>22% 28%</b>
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	<i>n=168</i>	<b>19% 17%</b>
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	<i>n=171</i>	<b>12% 10%</b>
<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=55</i>	<b>42% 48%</b>
13.7	Is it very / quite easy to get illicit drugs in this prison?	<i>n=172</i>	<b>48% 49%</b>
13.8	Is it very / quite easy to get alcohol in this prison?	<i>n=172</i>	<b>37% 32%</b>

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**Number of completed questionnaires returned**

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<b>SAFETY</b>				
14.1	Have you ever felt unsafe here?	<i>n</i> =174	<b>45%</b>	<b>47%</b>
14.2	Do you feel unsafe now?	<i>n</i> =173	<b>23%</b>	<b>23%</b>
14.3	Have you experienced any of the following from other prisoners here:			
	- Verbal abuse?	<i>n</i> =168	<b>30%</b>	<b>34%</b>
	- Threats or intimidation?	<i>n</i> =168	<b>31%</b>	<b>30%</b>
	- Physical assault?	<i>n</i> =168	<b>20%</b>	<b>18%</b>
	- Sexual assault?	<i>n</i> =168	<b>4%</b>	<b>2%</b>
	- Theft of canteen or property?	<i>n</i> =168	<b>21%</b>	<b>25%</b>
	- Other bullying / victimisation?	<i>n</i> =168	<b>18%</b>	<b>17%</b>
	- Not experienced any of these from prisoners here	<i>n</i> =168	<b>58%</b>	<b>54%</b>
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<i>n</i> =169	<b>31%</b>	<b>33%</b>
14.5	Have you experienced any of the following from staff here:			
	- Verbal abuse?	<i>n</i> =164	<b>33%</b>	<b>30%</b>
	- Threats or intimidation?	<i>n</i> =164	<b>28%</b>	<b>23%</b>
	- Physical assault?	<i>n</i> =164	<b>15%</b>	<b>11%</b>
	- Sexual assault?	<i>n</i> =164	<b>2%</b>	<b>2%</b>
	- Theft of canteen or property?	<i>n</i> =164	<b>8%</b>	<b>9%</b>
	- Other bullying / victimisation?	<i>n</i> =164	<b>23%</b>	<b>17%</b>
	- Not experienced any of these from staff here	<i>n</i> =164	<b>52%</b>	<b>58%</b>
14.6	If you were being bullied / victimised by staff here, would you report it?	<i>n</i> =170	<b>51%</b>	<b>48%</b>
<b>BEHAVIOUR MANAGEMENT</b>				
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<i>n</i> =173	<b>41%</b>	<b>40%</b>
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<i>n</i> =174	<b>40%</b>	<b>37%</b>
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<i>n</i> =174	<b>22%</b>	<b>13%</b>
<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> =37	<b>22%</b>	<b>20%</b>
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	<i>n</i> =172	<b>9%</b>	<b>9%</b>
<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> =14	<b>57%</b>	<b>58%</b>

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**Number of completed questionnaires returned**

*n=number of valid responses to question (HMP Berwyn 2019)*

	Could you shower every day?	<i>n=15</i>	<b>80%</b>	<b>76%</b>
	Could you go outside for exercise every day?	<i>n=14</i>	<b>86%</b>	<b>77%</b>
	Could you use the phone every day (if you had credit)?	<i>n=14</i>	<b>64%</b>	<b>66%</b>

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Number of completed questionnaires returned

*n=number of valid responses to question (HMP Berwyn 2019)*

<b>EDUCATION, SKILLS AND WORK</b>			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	<i>n=166</i>	<b>68%</b> <b>61%</b>
	- Vocational or skills training?	<i>n=162</i>	<b>36%</b> <b>41%</b>
	- Prison job?	<i>n=163</i>	<b>34%</b> <b>48%</b>
	- Voluntary work outside of the prison?	<i>n=155</i>	<b>3%</b> <b>5%</b>
16.2	In this prison, have you done the following activities:		
	- Education?	<i>n=163</i>	<b>80%</b> <b>80%</b>
	- Vocational or skills training?	<i>n=156</i>	<b>63%</b> <b>69%</b>
	- Prison job?	<i>n=159</i>	<b>82%</b> <b>80%</b>
	- Voluntary work outside of the prison?	<i>n=150</i>	<b>33%</b> <b>33%</b>
	- Paid work outside of the prison?		
		<i>n=150</i>	<b>34%</b> <b>32%</b>
<i>For those who have done the following activities, do you think they will help you on release:</i>			
	- Education?	<i>n=130</i>	<b>66%</b> <b>61%</b>
	- Vocational or skills training?	<i>n=98</i>	<b>67%</b> <b>66%</b>
	- Prison job?	<i>n=131</i>	<b>41%</b> <b>40%</b>
	- Voluntary work outside of the prison?	<i>n=50</i>	<b>52%</b> <b>53%</b>
	- Paid work outside of the prison?	<i>n=51</i>	<b>59%</b> <b>57%</b>
16.3	Do staff encourage you to attend education, training or work?	<i>n=165</i>	<b>58%</b> <b>60%</b>
<b>PLANNING AND PROGRESSION</b>			
17.1	Do you have a custody plan?	<i>n=169</i>	<b>61%</b> <b>58%</b>
<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?	<i>n=102</i>	<b>89%</b> <b>83%</b>
17.3	Are staff helping you to achieve your objectives or targets?	<i>n=98</i>	<b>38%</b> <b>44%</b>
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	<i>n=94</i>	<b>57%</b> <b>48%</b>
	- Other programmes?	<i>n=89</i>	<b>49%</b> <b>42%</b>
	- One to one work?	<i>n=83</i>	<b>36%</b> <b>38%</b>
	- Been on a specialist unit?	<i>n=80</i>	<b>20%</b> <b>20%</b>

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	- ROTL - day or overnight release?	<i>n</i> =80	<b>9%</b>	<b>15%</b>
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>				
	- Offending behaviour programmes?	<i>n</i> =54	<b>78%</b>	<b>70%</b>
	- Other programmes?	<i>n</i> =44	<b>73%</b>	<b>65%</b>
	- One to one work?	<i>n</i> =30	<b>60%</b>	<b>66%</b>
	- Being on a specialist unit?	<i>n</i> =16	<b>63%</b>	<b>45%</b>
	- ROTL - day or overnight release?	<i>n</i> =7	<b>43%</b>	<b>38%</b>

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<b>PREPARATION FOR RELEASE</b>			
<b>18.1</b>	Do you expect to be released in the next 3 months?	<i>n=167</i>	<b>19% 26%</b>
<i>For those who expect to be released in the next 3 months:</i>			
<b>18.2</b>	Is this prison very / quite near to your home area or intended release address?	<i>n=29</i>	<b>41% 41%</b>
<b>18.3</b>	Is anybody helping you to prepare for your release?	<i>n=30</i>	<b>67% 58%</b>
<b>18.4</b>	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	<i>n=28</i>	<b>57% 63%</b>
	- Getting employment?	<i>n=28</i>	<b>54% 63%</b>
	- Setting up education or training?	<i>n=28</i>	<b>46% 48%</b>
	- Arranging benefits?	<i>n=28</i>	<b>68% 68%</b>
	- Sorting out finances?	<i>n=28</i>	<b>46% 58%</b>
	- Support for drug or alcohol problems?	<i>n=28</i>	<b>50% 43%</b>
	- Health / mental Health support?	<i>n=29</i>	<b>55% 49%</b>
	- Social care support?	<i>n=27</i>	<b>30% 36%</b>
	- Getting back in touch with family or friends?	<i>n=29</i>	<b>38% 39%</b>
<b>18.4</b>	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	<i>n=16</i>	<b>50% 37%</b>
	- Getting employment?	<i>n=15</i>	<b>13% 24%</b>
	- Setting up education or training?	<i>n=13</i>	<b>23% 25%</b>
	- Arranging benefits?	<i>n=19</i>	<b>47% 29%</b>
	- Sorting out finances?	<i>n=13</i>	<b>31% 25%</b>
	- Support for drug or alcohol problems?	<i>n=14</i>	<b>71% 49%</b>
	- Health / mental Health support?	<i>n=16</i>	<b>50% 30%</b>
	- Social care support?	<i>n=8</i>	<b>38% 24%</b>
	- Getting back in touch with family or friends?	<i>n=11</i>	<b>55% 31%</b>
<b>FINAL QUESTION ABOUT THIS PRISON</b>			
<b>20.1</b>	Do you think your experiences in this prison have made you less likely to offend in the future?	<i>n=166</i>	<b>43% 50%</b>

## HMP Berwyn 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.

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Number of completed questionnaires returned

Black and minority ethnic	White
36	144

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 25 years of age?	17%	17%
	Are you 50 years of age or older?	6%	10%
1.3	Are you from a minority ethnic group?		
7.1	Are you Muslim?	52%	0%
11.3	Do you have any mental health problems?	34%	49%
12.1	Do you consider yourself to have a disability?	27%	39%
19.2	Are you a foreign national?	6%	4%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	3%	2%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	85%	79%
2.4	Overall, were you treated very / quite well in reception?	97%	88%
2.5	When you first arrived, did you have any problems?	75%	62%
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	24%	31%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	89%	87%
3.5	Have you had an induction at this prison?	97%	99%
<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	59%	60%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	32%	39%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	86%	74%
	- Can you shower every day?	97%	98%
	- Do you have clean sheets every week?	89%	68%
	- Do you get cell cleaning materials every week?	40%	57%
	- Is it normally quiet enough for you to relax or sleep at night?	75%	71%
	- Can you get your stored property if you need it?	15%	21%

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Black and minority ethnic	White
<b>36</b>	<b>144</b>

Number of completed questionnaires returned

<b>FOOD AND CANTEEN</b>			
5.2	Do you get enough to eat at meal-times always / most of the time?	<b>19%</b>	<b>31%</b>
5.3	Does the shop / canteen sell the things that you need?	<b>66%</b>	<b>66%</b>
<b>RELATIONSHIPS WITH STAFF</b>			
6.1	Do most staff here treat you with respect?	<b>63%</b>	<b>64%</b>
6.2	Are there any staff here you could turn to if you had a problem?	<b>57%</b>	<b>60%</b>
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<b>29%</b>	<b>26%</b>
6.6	Do you feel that you are treated as an individual in this prison?	<b>32%</b>	<b>39%</b>
<b>FAITH</b>			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	<b>83%</b>	<b>68%</b>
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	<b>79%</b>	<b>61%</b>
<b>CONTACT WITH FAMILY AND FRIENDS</b>			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	<b>18%</b>	<b>32%</b>
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	<b>73%</b>	<b>68%</b>
8.3	Are you able to use a phone every day (if you have credit)?	<b>100%</b>	<b>96%</b>
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	<b>70%</b>	<b>74%</b>
<b>TIME OUT OF CELL</b>			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	<b>15%</b>	<b>13%</b>
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	<b>6%</b>	<b>6%</b>
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	<b>74%</b>	<b>69%</b>
<b>APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS</b>			
10.1	Is it easy for you to make an application?	<b>82%</b>	<b>76%</b>
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	<b>33%</b>	<b>50%</b>
10.3	Is it easy for you to make a complaint?	<b>52%</b>	<b>67%</b>
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	<b>5%</b>	<b>33%</b>
10.5	Have you ever been prevented from making a complaint here when you wanted to?	<b>31%</b>	<b>27%</b>

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Black and minority ethnic	White
<b>36</b>	<b>144</b>

Number of completed questionnaires returned

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	<b>38%</b>	<b>40%</b>
	- Nurse?	<b>44%</b>	<b>50%</b>
	- Dentist?	<b>9%</b>	<b>14%</b>
	- Mental health workers?	<b>15%</b>	<b>19%</b>
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	<b>31%</b>	<b>35%</b>
11.5	Do you think the overall quality of the health services here is very / quite good?	<b>61%</b>	<b>44%</b>
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	<b>22%</b>	<b>32%</b>
SAFETY			
14.1	Have you ever felt unsafe here?	<b>53%</b>	<b>43%</b>
14.2	Do you feel unsafe now?	<b>33%</b>	<b>21%</b>
14.3	Not experienced bullying / victimisation by other prisoners	<b>67%</b>	<b>56%</b>
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<b>41%</b>	<b>29%</b>
14.5	Not experienced bullying / victimisation by members of staff	<b>44%</b>	<b>53%</b>
14.6	If you were being bullied / victimised by staff here, would you report it?	<b>55%</b>	<b>49%</b>
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<b>33%</b>	<b>43%</b>
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<b>32%</b>	<b>40%</b>
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<b>12%</b>	<b>25%</b>
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	<b>3%</b>	<b>11%</b>
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	<b>50%</b>	<b>61%</b>
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	<b>74%</b>	<b>58%</b>
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	<b>22%</b>	<b>43%</b>
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?	<b>25%</b>	<b>73%</b>
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?	<b>38%</b>	<b>45%</b>

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

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

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Number of completed questionnaires returned

Mental health problems	No mental health problems	Have a disability	Do not have a disability
79	92	63	110

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	14%	18%	10%	20%
	Are you 50 years of age or older?	9%	9%	15%	6%
1.3	Are you from a minority ethnic group?	14%	23%	14%	23%
7.1	Are you Muslim?	8%	11%	7%	11%
11.3	Do you have any mental health problems?			82%	25%
12.1	Do you consider yourself to have a disability?	65%	12%		
19.2	Are you a foreign national?	5%	3%	5%	4%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	3%	1%	5%	1%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	72%	88%	74%	85%
2.4	Overall, were you treated very / quite well in reception?	83%	96%	84%	94%
2.5	When you first arrived, did you have any problems?	82%	49%	84%	53%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	23%	36%	25%	32%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	84%	91%	82%	92%
3.5	Have you had an induction at this prison?	100%	98%	98%	99%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	55%	64%	51%	66%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	42%	34%	45%	33%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	72%	82%	67%	82%
	- Can you shower every day?	97%	99%	97%	99%
	- Do you have clean sheets every week?	67%	77%	59%	79%
	- Do you get cell cleaning materials every week?	53%	54%	53%	55%
	- Is it normally quiet enough for you to relax or sleep at night?	62%	83%	69%	74%
	- Can you get your stored property if you need it?	16%	23%	16%	23%

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

Number of completed questionnaires returned

	Mental health problems	No mental health problems	Have a disability	Do not have a disability
	79	92	63	110

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	24%	31%	24%	32%
5.3	Does the shop / canteen sell the things that you need?	65%	67%	58%	71%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	53%	72%	52%	70%
6.2	Are there any staff here you could turn to if you had a problem?	53%	64%	47%	67%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	30%	22%	23%	27%
6.6	Do you feel that you are treated as an individual in this prison?	33%	39%	33%	39%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	68%	73%	64%	76%
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	57%	71%	54%	73%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	28%	31%	35%	27%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	71%	69%	72%	68%
8.3	Are you able to use a phone every day (if you have credit)?	95%	98%	92%	99%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	66%	77%	69%	75%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	16%	10%	23%	7%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	4%	8%	3%	8%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	68%	73%	61%	76%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	74%	78%	72%	79%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	46%	44%	43%	48%
10.3	Is it easy for you to make a complaint?	65%	64%	59%	66%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	21%	31%	21%	29%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	34%	23%	37%	22%

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Number of completed questionnaires returned

	Mental health problems	No mental health problems		
	79	92	Have a disability	Do not have a disability
			63	110

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	41%	39%	44%	36%
	- Nurse?	53%	46%	54%	46%
	- Dentist?	10%	14%	12%	13%
	- Mental health workers?	21%	16%	20%	17%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	35%		35%	35%
11.5	Do you think the overall quality of the health services here is very / quite good?	40%	53%	45%	49%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	28%	36%	31%	
SAFETY					
14.1	Have you ever felt unsafe here?	60%	33%	59%	37%
14.2	Do you feel unsafe now?	35%	13%	34%	17%
14.3	Not experienced bullying / victimisation by other prisoners	47%	67%	44%	66%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	37%	28%	46%	24%
14.5	Not experienced bullying / victimisation by members of staff	41%	60%	42%	58%
14.6	If you were being bullied / victimised by staff here, would you report it?	50%	49%	59%	46%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	32%	48%	30%	47%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	26%	50%	26%	46%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	33%	13%	37%	13%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	14%	4%	16%	6%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	56%	58%	50%	63%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	58%	64%	48%	69%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	44%	32%	29%	41%
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?	80%	54%	67%	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?	37%	48%	36%	47%

## HMP Berwyn 2019

### Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:  
 - responses of prisoners aged 25 and under are compared with those of prisoners over 25  
 Please note that these analyses are based on summary data from selected survey questions only.

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Number of completed questionnaires returned

25 and under	Over 25
30	148

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	3%	0%
	Are you 50 years of age or older?	0%	11%
1.3	Are you from a minority ethnic group?	20%	20%
7.1	Are you Muslim?	11%	10%
11.3	Do you have any mental health problems?	41%	48%
12.1	Do you consider yourself to have a disability?	21%	39%
19.2	Are you a foreign national?	7%	4%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	4%	2%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	62%	85%
2.4	Overall, were you treated very / quite well in reception?	83%	92%
2.5	When you first arrived, did you have any problems?	53%	68%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	7%	33%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	83%	88%
3.5	Have you had an induction at this prison?	97%	99%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	48%	62%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	27%	40%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	72%	77%
	- Can you shower every day?	100%	97%
	- Do you have clean sheets every week?	80%	72%
	- Do you get cell cleaning materials every week?	38%	56%
	- Is it normally quiet enough for you to relax or sleep at night?	60%	75%
	- Can you get your stored property if you need it?	17%	20%

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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
	30	148

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	23%	29%
5.3	Does the shop / canteen sell the things that you need?	73%	65%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	45%	68%
6.2	Are there any staff here you could turn to if you had a problem?	32%	65%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	11%	29%
6.6	Do you feel that you are treated as an individual in this prison?	36%	37%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	58%	74%
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	58%	67%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	7%	34%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	76%	67%
8.3	Are you able to use a phone every day (if you have credit)?	90%	98%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	50%	77%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	14%	12%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	7%
<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?	66%	79%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	32%	49%
10.3	Is it easy for you to make a complaint?	45%	69%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	19%	29%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	38%	25%

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Number of completed questionnaires returned

25 and under	Over 25
30	148

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	17%	44%
	- Nurse?	30%	53%
	- Dentist?	19%	12%
	- Mental health workers?	14%	19%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	25%	35%
11.5	Do you think the overall quality of the health services here is very / quite good?	25%	52%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	17%	33%
SAFETY			
14.1	Have you ever felt unsafe here?	39%	46%
14.2	Do you feel unsafe now?	14%	25%
14.3	Not experienced bullying / victimisation by other prisoners	61%	58%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	14%	36%
14.5	Not experienced bullying / victimisation by members of staff	48%	52%
14.6	If you were being bullied / victimised by staff here, would you report it?	37%	53%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	41%	41%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	32%	40%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	36%	19%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	18%	8%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	40%	63%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	56%	62%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	20%	41%
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?	60%	68%
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?	37%	45%