

Report on an announced inspection of

HMYOI Feltham B

by HM Chief Inspector of Prisons

4–19 July 2019

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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

HMYOI Feltham B holds convicted male prisoners aged between 18 and 20. It is situated adjacent to and comes under the same management as Feltham A, which hold boys aged between 15 and 17. At the time of this inspection the prison held around 360 prisoners. The prison was last inspected in January and February 2017, when we found that outcomes for prisoners in three of our healthy prison tests – safety, purposeful activity and rehabilitation and release planning – were not sufficiently good. We judged respect to be reasonably good. On this occasion we found there had been improvements in safety and rehabilitation and release planning which were now reasonably good, but a decline in purposeful activity which was now poor. Despite this latter judgement, overall the results of this inspection mark a significant achievement for an establishment that has faced similar pressures to many others that have not been able to maintain, let alone improve, their overall level of performance in recent times.

It is also worth reflecting on the context in which this inspection took place. As a result of concerns that had been reaching HMI Prisons about conditions at Feltham, but in particular Feltham A, I decided to bring forward the scheduled inspections of both Feltham A and B and to conduct concurrent inspections of both parts of the overall establishment. The outcome of the Feltham A inspection is the subject of a separate report.

Having expressed concerns elsewhere that Feltham had been left without a governor for some five months during 2018, I am reassured to be told that the two parts of the establishment will, in future, each have their own dedicated deputy governor in an effort to ensure greater resilience and continuity. I hope that this will allow Feltham B to continue to make progress, and avoid the risk of managerial focus being diverted to address the many problems we found during the inspection of Feltham A. The progress that had been made to date at Feltham B was creditable, and was reflected in the fact that in the space of some two years, it had managed to achieve or partially achieve around half of our recommendations from the last inspection. This was a better rate of achievement than we often see.

In terms of safety, there were distinct weaknesses in the strategic management of violence, the use of disciplinary procedures through the incentives and earned privileges (IEP) scheme and oversight of the use of force. However, the weaknesses were, to some extent, ameliorated by good relationships between staff and prisoners and, compared with other similar establishments, fewer prisoners felt unsafe at the time of the inspection and fewer reported being victimised. There had been a slight rise since the last inspection in violence between prisoners, but against staff it had reduced significantly.

A feature of the establishment that needed attention was the impact that security processes were having on the ability of prisoners to access education, training, work and health care. It was telling that our colleagues from Ofsted commented that ‘across the prison, managers did not do enough to ensure that all aspects of the prison regime contributed to prisoners’ good attendance and punctuality’. Quite apart from whether prisoners were getting to the activities to which they had been allocated, there was also the issue that there were only sufficient full-time activity places for just over half of the population. Meanwhile, some 20% of the entire population were employed as residential unit cleaners and painters, where they were under-occupied and poorly managed. We also found, when we conducted our roll checks, that some 37% of prisoners were locked in their cells during the working day, which is far too high a figure for a training prison. Inevitably, the judgement we came to for purposeful activity was that it was poor, and the section of this report that sets out the findings in this area is worthy of close attention.

Despite the weaknesses in purposeful activity, we found that respect had improved, supported by the good relationships between staff and prisoners. In particular, the keyworker scheme was making a positive contribution. Living conditions in the residential units had improved since the last inspection,

but the condition of cells was no more than adequate, there was still too much graffiti, and there was still a pressing need for refurbishment in some areas, particularly the showers.

Although the quality of health care services was generally good prisoners, as noted above, were all too often unable to get to their appointments because of regime restrictions or security measures. For instance, in June prisoners failed to attend 58% of the appointments made with the doctor, around 35% with the dentist and 80% with the optician. This was clearly an unacceptable waste of NHS resources.

It was pleasing to see that the well led and well-organised Offender Management Unit had reduced the backlog of Offender Assessment System (OASys) initial assessments from 56% to 19% in the space of six months. This was a significant achievement, and in marked contrast to what we see in many establishments. Nevertheless, all prisoners should arrive at Feltham with a completed assessment, and most did not. This was indicative of a systemic weakness that we frequently see during inspections, and clearly needs to be addressed as the OASys sits at the heart of offender management processes.

Feltham B is a complex and challenging establishment in which to achieve the outcomes that should be of real benefit to prisoners and public alike. It was reassuring that some real progress had been made since our last inspection. Clearly there was still much to do, but we were heartened by the positive attitude of many staff about what could be achieved, and the sound relationships between many staff and prisoners that underpinned much of the progress that had already been made. We have seen in the past that progress at this complex establishment has proved to be fragile. I hope that on this occasion it will prove possible to build on what has been achieved and sustain it into the future.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

September 2019

Fact page

Task of the establishment

Feltham B accommodates 18–20-year-old convicted prisoners.

Certified normal accommodation and operational capacity¹

Prisoners held at the time of inspection: 361

Baseline certified normal capacity: 529

In-use certified normal capacity: 388

Operational capacity: 388

Notable features from this inspection

88% of prisoners were 18-20 years old.

70% of prisoners were from a black, Asian or minority ethnic background.

89% of prisoners were serving sentences of more than two years.

17% of the population were foreign national prisoners.

Prison status (public or private) and key providers

Public

Physical health provider: Care UK

Mental health provider: Barnet, Enfield and Haringey Mental Health Trust

Substance use treatment provider: Addaction

Learning and skills provider: Novus

Community rehabilitation company (CRC): The London Community Rehabilitation Company

Escort contractor: Serco

Prison group/Department

Youth Custody Service

Brief history

The original Feltham was built in 1854 as an industrial school and was taken over in 1910 by the prison commissioners as their second borstal institution. The existing building opened as a remand centre in March 1988. The current HMYOI Feltham was formed by the amalgamation. The establishment is split into Feltham A, which holds children and young people (aged 15–18), and Feltham B, which holds young adults (aged 18–21); this report relates to Feltham B.

Short description of residential units

Kingfisher – induction unit, 52 beds

Lapwing – closed, 48 beds

Mallard – normal location, 56 beds

Nightingale – normal location, 56 beds

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

Osprey – closed, 56 beds
Partridge – normal location, 56 beds
Quail – normal location, 56 beds
Raven – normal location, 56 beds
Swallow – normal location, 55 beds
Teal – closed, 38 beds
Ibis – segregation unit

Name of governor/director and date in post

Emily Martin (September 2018)

Independent Monitoring Board chair

Caroline Langton

Date of last inspection

23 January – 3 February 2017

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:

- **key concerns and recommendations:** identify the issues of most importance to improving outcomes for prisoners and are designed to help establishments prioritise and address the most significant weaknesses in the treatment and conditions of prisoners.
- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
- **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for prisoners.

A6 Five key sources of evidence are used by inspectors: observation; prisoner surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.

A7 Other than in exceptional circumstances, all our inspections are unannounced and include a follow up of recommendations from the previous inspection.

A8 All inspections of prisons are conducted jointly with Ofsted or Estyn (Wales), the Care Quality Commission, the General Pharmaceutical Council (GPhC) and HM Inspectorate of Probation. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

This report

A9 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of and conditions for men in prisons (Version 5, 2017)*.² The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.

A10 Details of the inspection team and the prison population profile can be found in the appendices.

A11 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in the final appendix of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.³

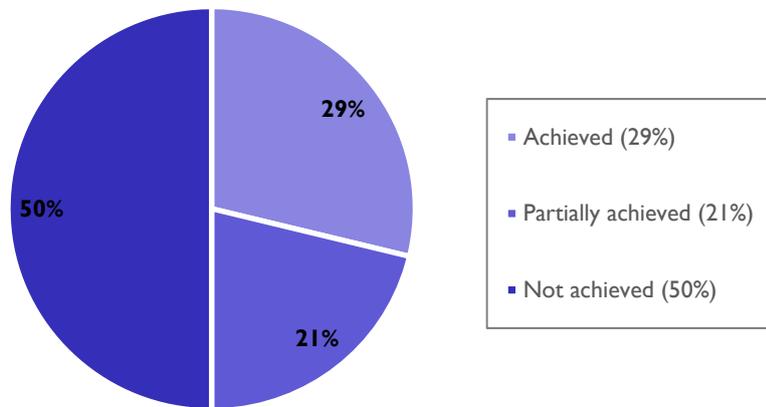
² <https://www.justiceinspectorates.gov.uk/hmiprison/our-expectations/prison-expectations/>

³ The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

Summary

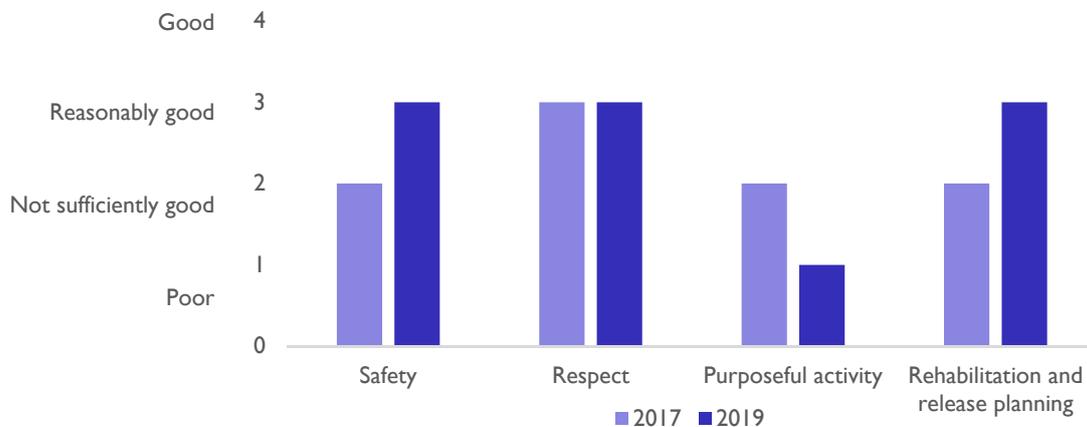
- S1 We last inspected HMYOI Feltham B in 2017 and made 66 recommendations overall. The prison fully accepted 59 of the recommendations and partially (or subject to resources) accepted five. It rejected two of the recommendations.
- S2 At this follow up inspection we found that the prison had achieved 19 of those recommendations, partially achieved 14 recommendations and not achieved 33 recommendations.

Figure 1: HMYOI Feltham B progress on recommendations from last inspection (n=66)⁴



- S3 Since our last inspection of HMYOI Feltham B, outcomes for prisoners improved in two healthy prison areas, with Safety and Rehabilitation and release planning improving from not sufficiently good to reasonably good. Outcomes stayed the same in one healthy prison area, with Respect remaining reasonably good. Outcomes declined in one healthy prison area, with Purposeful activity declining from not sufficiently good to poor.

Figure 2: HMYOI Feltham B healthy prison outcomes 2017 and 2019⁵



⁴ Percentages have been rounded and therefore may not add up to 100%.

⁵ Please note that the criteria assessed under each healthy prison area were amended in September 2017. Healthy prison outcomes reflect the expectations in place at the time of each inspection.

Safety

- S4** *The reception area provided a welcoming environment. First night and induction processes had improved, and were good overall. Fewer prisoners than elsewhere reported experiencing victimisation from other prisoners. Levels of violence against staff had reduced considerably, but against prisoners had risen slightly. Good relationships between staff and prisoners compensated, in part, for weaknesses in behaviour management. Some security procedures were over-restrictive. The prison had drastically reduced the large backlog of adjudications found at the previous inspection. Levels of use of force had risen and governance required improvement. Segregation levels had also risen but stays on the segregation unit were generally short. Levels of self-harm were low. Assessment, care in custody and teamwork (ACCT) procedures were well managed, and care for prisoners was reasonably good, although access to Listeners was poor. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S5** *At the last inspection, in 2017, we found that outcomes for prisoners in Feltham B were not sufficiently good against this healthy prison test. We made 17 recommendations in the area of safety. At this inspection, we found that four of the recommendations had been achieved, four had been partially achieved and nine had not been achieved.*
- S6** The reception area now provided a much more welcoming environment and, although there were no new arrivals during the inspection, staff described an efficient process for dealing with new prisoners. First night and induction arrangements had improved, and were generally good overall. However, prisoners were not always offered a shower on their first night, and most spent long periods of time locked up before they were allocated to activities.
- S7** In our survey, fewer respondents than at similar establishments said that they currently felt unsafe (14%), and fewer said that they had experienced victimisation from other prisoners. The number of assaults against staff had reduced considerably. There had been a slight rise in the number of prisoner assaults and fights. Investigations into violent incidents were poor and lacked any meaningful detail. The challenge, support and intervention Plan (CSIP)⁶ system had only recently started. Psychology reports for CSIPs were comprehensive and provided some useful information, but they were not used by staff to support the prisoner. Good relationships between staff and prisoners compensated, in part, for weaknesses in behaviour management.
- S8** The incentives and earned privileges scheme offered some good incentives for enhanced prisoners but basic prisoners had a poor and inconsistent regime. There was little oversight of the scheme, reviews were often missed or late, and there was no process to track IEP warnings that were not linked to violence.
- S9** The number of adjudications carried out was comparable with that at the time of the previous inspection. The prison had made great progress in the monitoring and managing of adjourned adjudications, with only 19 adjournments, dating back no further than two months. Adjudication punishments were proportionate, but some records reflected that investigations lacked detail.
- S10** Levels of use of force had risen sharply, with most incidents taking place in response to prisoners fighting. There was some good data collation but it was under-utilised in terms of analysis and did not inform a violence reduction strategy. Reviews of incidents by specialist

⁶ 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

staff were good but oversight by a manager or independent person was limited. The standard of the documents we reviewed was good but there was too much paperwork outstanding, which limited the evidence available for review.

- S11 Levels of segregation had increased considerably, but most stays were of short duration. Prisoners on the segregation unit could not access showers and telephones daily, and the regime was too limited. The segregation unit exercise yards were in an extremely poor condition. Relationships between staff and prisoners on the unit were good. Improvements had started to be made to the facilities. There was some reasonable data analysis in monthly segregation meetings but these were poorly attended.
- S12 Security arrangements were over-restrictive and impeded access to a purposeful regime, and some measures were not proportionate. The management of intelligence was good, and reports were generally actioned promptly, but were still not used to set objectives that were specific to the establishment. Closed visits were not managed effectively, were not always linked to intelligence and appeared punitive in some cases. The drug strategy was comprehensive, and supported by a multidisciplinary plan, although this had not yet been implemented. The mandatory drug testing rate had reduced over the previous year after some positive steps to tackle the issues. However, suspicion drug testing did not always take place.
- S13 The number of self-harm incidents had risen but remained lower than at similar prisons. The quality of assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm was good, with consistent case management and multidisciplinary reviews. There had been an improvement in the quality of the care maps since the previous inspection. Staff on the residential units had a good knowledge of the prisoners in their care who were on ACCTs, and prisoners told us that they felt supported by this process.
- S14 The governance of self-harm at a strategic level was inadequate. The safer custody strategy was a generic document and the monthly safer custody committee meeting was often poorly attended, with few meaningful actions. The weekly safety intervention meeting was much better attended and resulted in appropriate actions to manage individual prisoners with complex needs, including those on ACCTs. The Listener scheme (whereby prisoners trained by the Samaritans provided confidential emotional support to fellow prisoners), which we had praised in the previous inspection report, had suffered a steep decline. There were now only two Listeners and they could not be accessed by prisoners after 7.30pm. Adult safeguarding processes were weaker than at the time of the previous inspection.

Respect

S15 *Staff–prisoner relationships were generally good and the keyworker scheme had been implemented well. There was an improved range of opportunities for prisoners to contribute to their community through peer support roles. Communal areas were clean and cells were well equipped but many contained graffiti. Many of the showers were not fit for use. Complaints were well managed and consultation was improving. The food provided was reasonably good and the prison shop had improved. The management of equality was good but there was limited monitoring of disproportionality. Good health services were undermined by the inability to get prisoners to appointments, and serious risks in the administration of medicines. Substance use services were improving. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S16 *At the last inspection, in 2017, we found that outcomes for prisoners in Feltham B were reasonably good against this healthy prison test. We made 26 recommendations in the area of respect. At this inspection, we found that eight of the recommendations had been achieved, five had been partially achieved and 13 had not been achieved.*

S17 Staff–prisoner relationships were generally good. We observed some interactions between staff and prisoners that appeared a little distant but most were professional, caring and friendly. The prison had recently implemented the keyworker scheme, which was already making a positive difference. In our survey, 89% of prisoners said that they had a personal officer, and the case notes we examined reflected keyworker meetings that were engaging and encouraged prisoners to use their time at the establishment constructively. Prisoners could access a range of peer support roles, which gave them a route to earn trust and contribute to their residential community.

S18 Efforts had been made to improve the living environments for prisoners. Communal areas were clean and well equipped. Conditions in the cells were variable, but generally adequate for most. However, they were poorly ventilated, and too many contained graffiti, some of which was offensive. Many toilets were scaled and dirty, and those in single cells remained unscreened. Showers were generally in a poor state of repair and dirty, and many were not fit for use. Action was taken to address some of these issues during the inspection. Emergency cell call bells were not always responded to quickly enough.

S19 Prisoners had access to a balanced diet, including healthy options, which met individual and diverse needs. Breakfast packs were still mostly served on the morning they were to be eaten, except at weekends. Serveries were in need of refurbishment but were cleaner than at the time of the previous inspection and were generally well supervised. The prison had taken positive steps to improve the provision offered by the prison shop, and our survey results in this area were better than we had found previously.

S20 Consultation arrangements with prisoners were developing and becoming more embedded, but did not always lead to change. Complaints procedures were well managed and quality assurance was robust. Legal services were broadly appropriate for the population.

S21 The strategic management of equality and diversity was generally good. The equality action team meetings were mostly well attended and addressed relevant issues. Prisoner representatives were able to attend, and contributed actively. The monitoring of equality data was not fully developed and analysis was limited. There had been some work undertaken with prisoners with particular protected characteristics, but it was sporadic and ad hoc. A total of 19 discrimination incident report forms had been submitted in the

previous six months, which was fewer than elsewhere and at the time of the previous inspection. They were generally well investigated and considered, and underwent independent scrutiny by the Zahid Mubarek Trust. Faith provision was good and the chaplaincy carried out useful work with black and minority ethnic and foreign national prisoners.

- S22 Health services were generally good. Competent staff were available to respond to patients' needs, although there was currently no podiatry service. The prison's delivery of patients to their health appointments was grossly inefficient, with 'did-not-attend' rates of 58% for appointments with the GP, and 35% for those with the dentist. Prison officers and health care staff on the inpatient unit (Wren unit) delivered good care, but prisoners were still being admitted for non-clinical reasons. Social care arrangements were underdeveloped. The practice of health care staff attending residential units and places of work to administer medicines was highly inefficient, created abnormal expectations among the prisoners and did not prepare them to be responsible consumers of health services following release. The dental, mental health and substance use services were good.

Purposeful activity

- S23** *We found 37% of prisoners locked up during the working day. This was far too many for a training prison holding a young population. The library and gym were both good facilities. Leaders and managers had failed to provide enough education, skills and work activities. English and mathematics provision was insufficient to meet demand. There was some good teaching and learning in work and vocational training, but learning in education was undermined by disruptive behaviour. Attendance and punctuality were poor. Achievement rates were high in vocational training. However, too many prisoners did not complete courses, and progress was too slow in English and mathematics.*
Outcomes for prisoners were poor against this healthy prison test.

- S24 *At the last inspection, in 2017, we found that outcomes for prisoners in Feltham B were not sufficiently good against this healthy prison test. We made 14 recommendations in the area of purposeful activity. At this inspection, we found that none of the recommendations had been achieved, four had been partially achieved and 10 had not been achieved.*

- S25 Full-time workers and those on enhanced level of the IEP scheme had the potential to be out of their cells for over 10 hours a day. Other prisoners were locked up for over 22 hours a day, and our roll checks found 37% of prisoners locked up during the day, which was more than at the previous inspection and too many for a training prison holding a young population. Three-quarters of our survey respondents said that they could get association on more than five days in a typical a week, which was far more than in similar prisons. However, association and other parts of the regime were subject to slippage. Library and PE provision were both generally good.

- S26 Leaders and managers had not maintained sufficient strategic oversight of learning, skills and work. They had only recently recognised substantial weaknesses in the provision of activities. They had begun to put plans in place to bring about improvement, but it was too early to see any impact. They had failed to establish an education curriculum that provided sufficient English and mathematics provision to meet the needs of prisoners, many of whom had low levels of prior attainment and skills in these subjects. There were insufficient activity places to engage the population for the full working day. Leaders and managers did not do enough to ensure that all aspects of the prison regime contributed effectively to prisoners' good attendance and punctuality. They had established a wide range of partnerships, which enabled

prisoners to engage in enrichment, sports, health and well-being, and community-based activities, which included release on temporary licence for a few.

- S27 Instructors used their subject knowledge and experience well to ensure that prisoners engaged in prison jobs developed useful vocational skills that enabled them to work productively with minimal supervision. Most tutors and instructors provided prisoners with useful feedback on their work, which helped them to make improvements. Individual learning plans were not used well enough to set prisoners specific personalised development and improvement targets. Tutors in education classes did not always have the skills and confidence to challenge prisoners' disruptive behaviour during lessons. As a result, prisoners were held back. Work on the residential units was not well planned and there was insufficient work to ensure that prisoners engaged in it were purposefully occupied.
- S28 Too many prisoners did not attend their allocated activities. Attendance was particularly low in education classes. The often late arrival of prisoners at activities, and their withdrawal to engage in other aspects of the regime, hindered them from developing the good work-related attitudes and behaviour that employers expect. Staff did not recognise or record the progress that prisoners made in developing good attitudes and work-related skills in prison work. Prisoners engaged in prison work and vocational training cooperated well, and were well behaved and respectful. This was not always the case when prisoners attended education classes.
- S29 Too many prisoners did not complete the education and vocational training courses that they started. Those who left early often did so because of poor behaviour or for prison-identified security reasons. Too many prisoners made slow progress, relative to their starting points, in improving their skills and knowledge in English and mathematics. The progress made and outcomes achieved by the large number of prisoners engaged in prison work were not sufficiently recognised or accredited. A large proportion of the prisoners who completed vocational training courses achieved their planned qualification.

Rehabilitation and release planning

S30 *Work to support prisoners to maintain contact with family and friends had improved but visits facilities were worn and in need of refurbishment. The strategic management of resettlement was reasonably good. Strong leadership within the offender management unit had led to improvements. The backlog in offender assessment system (OASys) assessments had reduced dramatically. However, too many prisoners did not have a current assessment. Contact levels and the quality of casework were reasonably good. Home detention curfew was well managed. Public protection arrangements were better than we normally see, and the system for confirming multi-agency public protection arrangements (MAPPA) management levels before release was good. The provision of accredited programmes required improvement. Release planning was reasonably well organised.*
Outcomes for prisoners were reasonably good against this healthy prison test.

S31 *At the last inspection, in 2017, we found that outcomes for prisoners in Feltham B were not sufficiently good against this healthy prison test. We made nine recommendations in the area of resettlement. At this inspection, we found that seven of the recommendations had been achieved, one had been partially achieved and one had not been achieved.*

S32 The provision of family work had improved with the addition of staff for family support work, work with visiting children, and the organisation of family days and fathers' play days. Facilities for visits were worn and in need of refurbishment. Previously, prisoners on the basic regime had not been permitted to have visits, but this was no longer the case. Visits

sessions were too short. The prisoner survey indicated that only 12% of prisoners received a weekly visit, and this was lower than at similar prisons.

- S33 There was a recently completed and comprehensive reducing reoffending strategy, informed by a needs analysis. This was monitored by the monthly reducing reoffending meeting, chaired by the head of reducing reoffending. Most prisoners arrived at the establishment without an offender assessment system (OASys) assessment. Since December 2018, a strong leadership team within the offender management unit had made considerable progress in reducing the backlog of prisoners without an initial OASys assessment (from 56% in December 2018 to 19% in June 2019). However, the position was still unacceptable and represented a systemic weakness in the wider process. Consequently, many prisoners did not have the opportunity to address their offending behaviour while at the establishment. There was now a senior probation officer (SPO) and three probation officers based in the offender management unit, which was an improvement on the situation at the time of the previous inspection. There were five prison offender supervisors, and almost no cross-deployment, which had a positive impact on the provision of offender management.
- S34 In our survey, 74% of prisoners said that they were aware of their sentence plan objectives. Levels of contact between offender supervisors and the prisoners in their care were generally good. There were also 120 keyworkers, who helped to address day-to-day issues with prisoners, as well as supporting the completion of sentence plans, where they existed. Home detention curfew processes were well managed, enabling most prisoners to be released on their eligibility date. When there were delays, they were mainly the result of community probation services not processing applications in a timely fashion.
- S35 A local public protection policy had been prepared in 2016 but was still current. Procedures were generally effective, and overseen by the SPO. In all of the cases we reviewed, multi-agency public protection arrangements (MAPPA) management levels had been properly identified and appropriately recorded in case files and on P-Nomis (electronic case notes). We reviewed a sample of the reports (MAPPA form F) prepared by offender supervisors in readiness for release, and all were of a reasonable standard and countersigned by the senior probation officer. There were few child contact restrictions and telephone monitoring arrangements, and these were appropriately managed.
- S36 There were only 42 places a year available on the two accredited offending behaviour programmes delivered (the Thinking Skills Programme and Resolve). This meant that some prisoners were released without addressing their offending behaviour. The needs analysis had identified the need for a programme called Identity Matters, which had recently been accredited; however, it was a year-long one-to-one programme and, as most prisoners spent less than a year at the establishment, it was not viable for delivery there. Only about six prisoners a year were transferred to other prisons for completion of programmes or resettlement to their local area. The Sycamore Tree victim awareness programme was delivered by the chaplaincy, with 60 prisoners offered places, and 45 completions in the previous year.
- S37 About 35 prisoners were released from the establishment every month. The community rehabilitation company (CRC) was effective in identifying all prisoners at an appropriate point before release and helping them to resolve their resettlement needs. There had been an increase in the number of caseworkers employed by the CRC, from two to four. They managed the completion of resettlement plans, in line with the CRC contract, and offered a five-hour course of support to prisoners. Around two-thirds of prisoners accepted this offer, and this provision was useful in supporting them. Figures produced by the CRC indicated that 208 of the 209 prisoners released in the previous six months had been released to accommodation. However, there were no data on the long-term sustainability of the accommodation.

Key concerns and recommendations

S38 Key concern: There had been a slight increase in the number of fights and prisoner assaults. In addition, levels of use of force and use of segregation had risen sharply. Despite some examples of good case management in the CSIP process, this did not inform how staff managed individuals. There was no data analysis to understand violence and inform a plan of how to tackle it. Investigations into violence, and attendance at safer custody meetings were poor and lacked leadership and direction from senior managers.

Recommendation: Data from indicators of violence should be analysed and understood, to inform an effective plan that reduces the frequency of violence.

S39 Key concern: Aspects of security were not proportionate and did not facilitate the delivery of a full and purposeful regime conducive with life in a category C training prison. Some prisoners were subject to 'keep apart' protocols, and there were no free-flow movements for most of the population. Most movements were unnecessarily restrictive and over-controlled. Some strip-searching was completed in the absence of an individualised risk assessment. Closed visits were managed inconsistently and were sometimes applied punitively when not related directly to incidents or intelligence concerning visits. Despite receiving and processing large amounts of intelligence about drugs, suspicion drug tests were conducted relatively infrequently, and when they were conducted rarely produced a positive result.

Recommendation: Security arrangements should allow prisoners to access the full and purposeful regime expected in a category C training prison.

S40 Key concern: Senior managers were not focusing on the rise in levels of self-harm and there was no analysis of the causes or patterns. The safer custody meeting was poorly attended and did not result in an adequate plan to reduce levels of self-harm.

Recommendation: Managers should regularly analyse self-harm data, to understand and address the reasons behind the sharp rise in the number of incidents.

S41 Key concern: Conditions in cells were mixed. Cells were poorly ventilated and too many contained graffiti, some of which was offensive. Toilets in most cells that we checked were scaled and dirty, and those in single cells remained unscreened. Showers were generally in a poor state of repair and dirty, and many were not fit for use. Many exercise yards were overgrown with weeds. Servery areas were worn and in need of refurbishment, and some were grubby.

Recommendation: The conditions on residential units, particularly cells, showers, exercise yards and serveries, should be improved.

S42 Key concern: Weaknesses in the monitoring of protected groups prevented the prison from identifying and addressing discrimination, as well as limiting the possibility of identifying relevant trends.

Recommendation: There should be regular monitoring of the treatment of prisoners with protected characteristics and their access to the regime, to identify and address discrimination.

- S43 Key concern: There was little consultation with prisoners with protected characteristics, which prevented the prison from gaining a full understanding of their needs.

Recommendation: Managers should consult prisoners across all protected characteristics, to ensure that their needs are identified and met.

- S44 Key concern: There were several areas where the prison failed to enable patients to access health and substance use services, which led to unsatisfactory practices and introduced unnecessary risks. The continuing practice of the prison telephoning the residential units for information, before calling an ambulance, following an emergency code potentially delayed the arrival of paramedics. The lack of access for patients to their appointments caused some patients to miss or seriously delay their treatment, and not receive essential medications at the times prescribed. The practice of health care staff having to attend prisoners' residential units and places of work to administer their medicines led to safety risks for staff and unsafe medicines administration practices. The waste of NHS resources because of under-utilisation of the GP, dentist and other health care workers passed the risk of inefficient prison practices onto the health providers, and was unacceptable.

Recommendation: Prisoners should have access to health and substance use services at the required times, and receive their medicines in a safe manner at the prescribed times.

- S45 Key concern: A large number of prisoners were locked up during the working day.

Recommendation: All prisoners should have regular and predictable time out of cell, including sufficient time in the open air to promote rehabilitation and mental well-being.

- S46 Key concern: Leaders and managers had not maintained sufficient oversight of the quality of education, skills and work provision, or acted to resolve weaknesses in it. They did not provide sufficient activity places to enable all prisoners to be purposefully occupied. The education curriculum did not meet the needs and starting points of prisoners and, in particular, there was insufficient provision in English and mathematics. Staff across the prison did not do enough to ensure that the regime promoted the benefits of purposeful activity, resulting in poor attendance and punctuality.

Recommendation: Substantial improvements should be made to the quality of education, skills and work provision, so that: all prisoners can be purposefully occupied for the working day; the curriculum and range of activities meet fully the needs and starting points of prisoners; and the regime supports fully purposeful activities, so that attendance and punctuality improve.

- S47 Key concern: Too much of the education, skills and work provision was poorly planned. As a result, too many prisoners did not make the progress of which they were capable. Prisoners who were employed on the residential units did not have enough work to keep them purposefully occupied. The skills and behaviours that prisoners developed through work were not recognised or recorded.

Recommendation: The quality of education, skills and work provision should be improved by ensuring that: learning activities are well planned and provide challenging tasks, so that prisoners make the progress of which they are capable; employed prisoners have enough work to keep them purposefully occupied; and the skills and behaviour that they develop are recorded, so that they can provide prospective employers with an account of the skills they have gained while in custody.

S48 Key concern: Prison and education staff did not do enough to help prisoners to develop good work-related attitudes and behaviour which would help them to obtain work on release and reduce the likelihood that they will reoffend.

Recommendation: Steps should be taken to ensure that prisoners' attitudes to learning and work improve, and they are supported and challenged to behave well and develop the personal, social and work-related attitudes and skills that they need to find work on release, reducing the likelihood that they will reoffend.

S49 Key concern: Too many prisoners who started education and vocational training courses left these before they completed. Most prisoners who were engaged in prison work could not work towards or achieve accredited qualifications, and staff did not record sufficiently their progress and achievements through work.

Recommendation: The outcomes that prisoners achieve should be improved by: reducing the number who leave education and vocational training courses before they complete them; increasing the opportunities that prisoners have to achieve accredited qualifications through prison work; and recognising and recording the progress and achievements of prisoners who work in activities where accredited qualifications are not available.

S50 Key concern: Most of the population had been transferred from local prisons in the London area, and arrived at the establishment without a current OASys assessment. This was a long-standing systemic weakness, resulting in a delayed assessment and contributing substantially to prisoners being released without having been able to reduce their risk of harm to the public.

Recommendation: All prisoners should have an up-to-date OASys assessment before being transferred to Feltham.

S51 Key concern: The provision of just five sessions in total of the accredited offending behaviour programmes (TSP and Resolve) a year for prisoners who presented a high risk of harm to the public was insufficient and was a missed opportunity to address those risks.

Recommendation: There should be sufficient provision of offending behaviour courses, based on the prison's needs analysis and population data, to ensure that all eligible prisoners can undertake a suitable programme to address their risks.

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 On average, eight new prisoners arrived each week, most of whom came from local prisons. Most journey times were reasonably short, but for the longer ones there was no evidence of comfort stops. The vehicle we inspected was covered in graffiti, some of which was offensive and gang related. Some new arrivals described being left on cellular vehicles for up to 30 minutes with no air conditioning during hot weather.
- I.2 The environment in the reception area had improved and was now much more welcoming. Although there were no new receptions during the inspection, staff described an efficient process for these prisoners. Those who arrived from other prisons were not strip-searched routinely, which was positive. All property was searched, and items that were not permitted, such as tinned food and some types of audio equipment, were confiscated and looked after in stored property, which was a source of frustration among many prisoners. There was no peer support in reception. In our survey, 56% of respondents said that they had spent less than two hours in reception, against 71% in similar prisons.
- I.3 There had been some improvements to first night and induction arrangements. First night staff interviewed new arrivals in reception and completed the necessary assessments. These were properly focused on keeping prisoners safe and on identifying the risks posed by prisoners to themselves and/or others. Staff provided new prisoners with a fairly comprehensive booklet about the establishment. Professional telephone interpreting services were used to explain first night processes to the few new arrivals who did not understand English.
- I.4 First night cells were now well prepared with televisions, kettles, bedding and basic toiletries. They were generally free from graffiti but, similar to other accommodation in the prison, were not always clean enough, and toilets were scaled, stained and dirty (see also paragraph 2.5). In our survey, only 27% of respondents said that they had been able to shower on their first night, which was far lower than in similar prisons, and this was echoed by the new arrivals we spoke to. However, most said that they had been offered a free telephone call. Although a Listener (a prisoner trained by the Samaritans to provide confidential emotional support to fellow prisoners) and induction orderly resided on the induction unit, few new arrivals said that they had had any contact with them, and our survey results concerning access to Listeners and other peer support on the first night were worse than at similar prisons (see also paragraph I.40). However, staff conducted enhanced hourly checks on new arrivals.
- I.5 Induction for most new arrivals started on the day after their arrival. However, for those who arrived on a Friday, induction was delayed until the following Monday. In our survey, 93% of respondents said that they had attended induction, which was much better than at the time of the previous inspection.

- 1.6** The induction room offered a pleasant environment. A comprehensive ‘welcome to Feltham’ presentation included lots of relevant and useful information, including about access to visits, telephone and mail monitoring, and the available facilities and services, and was delivered competently by a peer supporter, with oversight from an officer. For the few prisoners who spoke little or no English, there was no alternative induction process. Other aspects of induction were multidisciplinary and were delivered over two days, where prisoners were seen and/or assessed by staff from the well-being, gym, chaplaincy, offender management unit, activities and education, substance use service and health care teams. When not involved in induction activities, new prisoners spent a long time locked in their cells until they were allocated to activities, which for most was fairly soon after their arrival.

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** In our survey, fewer respondents than at similar establishments said that they currently felt unsafe (14%), and fewer said that they had experienced victimisation from other prisoners. Since the previous inspection, levels of violence against staff had reduced considerably, but against prisoners had risen slightly. There had been a slight increase in the number of prisoner assaults and fights, and they often involved multiple prisoners.
- 1.8** Investigations into violent incidents were poor and lacked any meaningful detail, and at the time of the inspection some incidents dating back six weeks had still not been looked into. There were 19 staff trained in mediation, and some good work had been conducted in this area. However, this work needed to be expanded further, to benefit more prisoners and to reduce the number who were on ‘keep apart’ lists (lists of prisoners who could not associate with each other for fear of violence). Good relationships between staff and prisoners compensated, in part, for weaknesses in behaviour management (see also section on staff–prisoner relationships).
- 1.9** The challenge, support and intervention plan (CSIP)⁷ system had started only recently, and there were three prisoners being supported by this process at the time of the inspection. The prison was running an anti-bullying process alongside CSIP, and some staff we spoke to were confused about which system to use. Psychology reports for CSIP were comprehensive and provided some useful information, and reviews carried out by case managers were thorough, but neither of these measures was being used by staff to support the prisoner (see key concern and recommendation S38).
- 1.10** There was some support for victims of violence but it was too limited, and staff did not know if anyone was self-isolating at the time of the inspection.
- 1.11** The strategic management of violence was poor. The prison was often reactive in its management of violence, and failed to consider other data that could inform a violence reduction strategy, such as adjudications, use of force and segregation. The monthly safer

⁷ 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.

custody meeting was poorly attended by staff from across the prison, and few, and sometimes no, senior managers were present. Minutes from this meeting suggested that little or no action was taken subsequently (see key concern and recommendation S38). The introduction of a weekly safety intervention meeting was positive.

- I.12 The incentives and earned privileges (IEP) scheme offered some good incentives for enhanced prisoners, such as enhanced residential units and more time on association. In our survey, 42% of respondents said that the IEP scheme encouraged them to behave well.
- I.13 By contrast, prisoners on the basic level of the scheme had a poor and inconsistent regime. They were unable to get a daily shower or telephone call, and their access to the gym varied on each wing. There was no published working day for basic prisoners, so it was left to staff to decide how to manage them.
- I.14 There was little oversight of the IEP scheme, and reviews were often missed or late. Prisoners were placed on the basic regime following a violent incident, but there was no process to track IEP warnings that were not linked to violence, so many other types of behaviour were not responded to as laid out in the IEP policy. We also saw examples where staff were issuing unofficial punishments, such as banning prisoners from the gym and imposing closed visits (see paragraph I.33).

Recommendation

- I.15 There should be a published regime for basic prisoners which is adhered to by staff in all residential areas.**

Adjudications

- I.16 The number of adjudications carried out was comparable with that at the time of the previous inspection, with only 19 adjournments, dating back no further than two months, compared with over 400 at the time of the previous inspection, some of which dated back over 12 months. The prison had made great progress in the monitoring and managing of adjourned adjudications.
- I.17 Since the previous inspection, a member of staff had been employed to track adjudications and police referrals, and this had had a positive impact in both areas. There were 49 charges that had been remanded and referred to the police at the time of the inspection, all of which had a detailed log of progress and were chased for updates regularly. Records showed that adjudication punishments had been proportionate in most cases, but some records reflected that investigations had lacked detail. Most adjudications were linked to violence or threats of violence, but data analysis was limited and failed to inform a whole-prison approach to tackling violence.

Use of force

- I.18 Levels of use of force had risen sharply, with most incidents taking place in response to prisoners fighting.
- I.19 As a result of a reduction in the number of places on the course for national control and restraint trainers, the monitoring of, training in and review of use of force all rested with one member of staff. Data were collated well, but underutilised in terms of analysis and did not inform a violence reduction strategy.

- I.20** Reviews of incidents by specialist staff were good, and for each incident reviewed a report was completed, highlighting positive features and areas for improvement, but oversight by a manager or independent person was limited. The standard of the documents we reviewed was good but there was too much paperwork outstanding, which limited the evidence available for review.
- I.21** There had been five uses of the special accommodation in the previous six months, which was the same as at the time of the previous inspection. The reasons for its use were clearly documented, and the periods of use were short.

Segregation

- I.22** Levels of segregation had increased considerably, but most stays were of short duration. Too many prisoners were segregated pending adjudication, with nearly half of all segregation stays being for this reason. Relationships between staff and prisoners on the unit were good.
- I.23** The regime on the segregation unit was limited. Records showed that prisoners on the unit were given access to showers and telephones only three times a week. This was reflected in our survey results, where only 17% of respondents who had been segregated said that they could shower or make a telephone call daily, which was far worse than at similar prisons. Most segregated prisoners were locked up for between 22 and 23 hours a day. There were plans to improve the regime on the unit, but this work had only recently started.
- I.24** Cells on the unit were bare and some needed maintenance, such as painting. We also came across a prisoner who had just been located in a cell which had not been cleaned since the previous occupant had vacated it, and had no basic provision such as hot water and bedding. When we raised this with staff, they immediately rectified the situation. The segregation unit exercise yards were in an extremely poor condition, with overgrown weeds taking up most of the area.
- I.25** There was some reasonable data analysis in monthly segregation meetings, but these were poorly attended.

Recommendation

- I.26** **Prisoners in segregation should have access to a shower and telephone call daily.**

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 use and effective drug supply reduction measures are in place.

- I.27** The security department operated across both sites. There were no apparent weaknesses in the physical security arrangements for the site where young adults were located.
- I.28** The security committee met regularly and had a good understanding of the intelligence received and the challenges faced by the prison as a whole. However, the meeting was not always well attended, particularly by key staff, including residential and operations managers. Broad and generic security objectives remained the same each month, but these were not

broken down, to set local objectives specific to the establishment, and were not communicated effectively to prison staff.

- I.29** The number of intelligence reports submitted to the security department had decreased since the previous inspection. Although intelligence continued to be processed efficiently, required actions were not always followed through. Intelligence-led searching took place promptly and had yielded some good finds, including drugs and mobile phones, but data provided by the prison suggested that only around 11% of requests for suspicion drug tests had been completed (see below).
- I.30** Movement to activities was very controlled and cumbersome for most of the population. Although a few risk-assessed prisoners were given red and blue band status, which meant that they could move around the prison unsupervised, there were no free-flow movements for most of the population. Some prisoners were subject to ‘keep apart’ protocols (see also paragraph I.8). They were administered by the safeguarding team but the security department contributed to them. Most movements were heavily supervised and separate for each wing, which was time consuming and did not facilitate the delivery of a full and purposeful regime conducive with life in a category C training prison (see key concern and recommendation S39).
- I.31** The establishment held several prisoners with affiliations to gangs and organised crime groups. Security staff monitored this, and had a reasonably good understanding of the scale of the problem. They were supported by the police, but the specialist input to which they had previously had access had not been replaced, which meant that some of the targeted and individual work that had previously been undertaken was now lacking.
- I.32** Some other security measures were also not always proportionate for the population. Strip-searching for most was not routine; however, 5% of prisoners were strip-searched routinely at the end of visits, sometimes when there was no supporting intelligence, and all prisoners were strip-searched before their release from the prison, without an adequate rationale for this (see key concern and recommendation S38).
- I.33** We were told of two mechanisms by which closed visits could be invoked; this was confusing and contradictory in some cases, and appeared more disjointed than we had found previously. Most decisions concerning the use of closed visits were made by the head of operations, and had affected 17 prisoners in the six months to June 2019, including nine who were subject to this restriction at the time of the inspection. In addition, the head of security reviewed any cases for which intelligence had been received specifically relating to visits, but had done so on only two occasions since April 2019, and neither case had met the threshold required to impose closed visits. This restriction was usually applied for reasons relating to violence in, or on the way to or from, visits, for which prisoners were also placed on report; therefore, we considered the use of closed visits to be an unofficial punishment on top of that (see also paragraph I.14). Few prisoners were subjected to closed visits as a result of either their visitors conveying unauthorised articles into visits, or of intelligence relating to this activity. Prisoners were arbitrarily kept on closed visits for at least three months, although some stayed on these restrictions for six months, and others until further notice, and we were not provided with any satisfactory information suggesting that they were reviewed individually and regularly.
- I.34** At the time of the inspection, only one prisoner was subject to escape list procedures, but these were applied only when he attended court. In light of the available intelligence, this appeared proportionate to the risks posed.
- I.35** There was a comprehensive drug strategy, underpinned by a needs analysis and supported by a multidisciplinary development plan, which was aspirational but not yet embedded. The drug testing suite was now based in reception, and was clean and fit for purpose. Protocols for

conducting mandatory drug tests were complied with. The mandatory drug testing target of 4.17% was set across the whole prison, and was therefore adversely skewed in favour of the Feltham B site, as it included around 100 children, for whom positive drug tests were rare. Staff told us that the number of positive drug tests had reduced over the previous year, due, in part, to positive action the prison had taken, such as photocopying mail believed to be impregnated with illicit substances. Data provided by the prison suggested that, of the 127 random tests conducted on prisoners between January and June 2019, only four had been positive, not including those positive for new psychoactive substances (NPS),⁸ which made the cumulative total for 2019/20 3%, which was lower than the target. High levels of intelligence were received concerning the availability of drugs but, despite this, only 25 out of 225 requests for suspicion drug tests had been completed between April and June 2019. Only eight of these suspicion tests had been positive, which suggested that the intelligence was not always reliable.

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.36** The number of self-harm incidents had increased considerably over the previous six months, and was also higher than at the time of the previous inspection. The number of assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm opened in the same period had also increased, with 82 open at the time of the inspection. These increases were concerning, and senior managers did not have a focus on why this had happened or plans to halt the trend (see key concern and recommendation S40). Despite this, in absolute terms, self-harm levels remained low compared with those at similar prisons.
- I.37** The quality of the ACCT documents we assessed was good; case management was consistent, there was a good level of detail, appropriate actions took place and reviews were often attended by the well-being team. However, chaplaincy staff were only rarely involved in reviews. There had been an improvement in the quality of the care plans since the previous inspection.
- I.38** The prisoners on ACCTs who we spoke to felt supported by this process. We found that staff on the residential units had a good knowledge of the prisoners in their care who were on ACCTs, and were clearly concerned about their well-being. Most staff we spoke to had undergone recent training in suicide and self-harm. However, there was not a consistent approach from night staff on whether they would enter a cell in an emergency, and some said that they would not under any circumstances, which was concerning.
- I.39** The strategic management of self-harm was inadequate. The safer custody strategy was a generic document 'borrowed' from HMP Downview, and reference to that prison and the management of women could still be found in it. The monthly safer custody committee meeting was often poorly attended and the action plan was weak, and the June 2019 meeting

⁸ NPS generally refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vaporized and inhaled in e-cigarettes and other devices.

had been cancelled (see key concern and recommendation S40). The weekly safety intervention meeting, where complex cases were discussed, was much better attended and resulted in appropriate actions to manage individual prisoners, including those on ACCTs.

- I.40** The Listener scheme, which we had praised in the previous inspection report, had suffered a steep decline. In our survey, only 9% of respondents said that they had had a chance to talk to a Listener on arrival, which was far lower than elsewhere (see also paragraph I.5). In addition, only 14% said it that was quite or very easy to speak to a Listener generally. There were now only two Listeners, and they had only recently come into post; prior to that, there had been a period with none at all. Listeners could not be accessed by prisoners after 7.30pm. There were currently no plans to increase the number of Listeners.

Recommendation

- I.41 Sufficient Listeners should be trained and in place, to give prisoners access at all times.**

Protection of adults at risk⁹

- I.42** Adult safeguarding processes were weaker than at the time of the previous inspection. The safer custody custodial manager met her counterpart at the Hounslow local safeguarding adults board every six weeks. Twelve prisoners had been referred in the previous six months, but most of these referrals had been made by safer custody staff following a use of force debrief. None of these cases had been taken on by the local authority, with all being dealt with by an internal investigation.
- I.43** Many staff had not accessed safeguarding training, and those we spoke to lacked knowledge of how to raise a concern.

⁹ Safeguarding duties apply to an adult who:

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

Section 2. Respect

Prisoners are treated with respect for their human dignity.

Staff-prisoner relationships

Expected outcomes:

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

- 2.1 In our survey, 61% of respondents said that most staff treated them respectfully, and this was echoed by prisoners we spoke to. The interactions we observed between staff and prisoners were mostly positive, especially on a one-to-one basis, and we saw no inappropriate exchanges. Some staff appeared a little distant but most, including new staff members, were professional, caring and friendly.
- 2.2 The prison had recently implemented the keyworker scheme, which was already showing positive outcomes. In our survey, more prisoners than at the time of the previous inspection said that a member of staff had spoken to them in the last week about how they were getting on (40% versus 19%), and more than at similar prisons said that they had a personal officer (89% versus 75%). Almost all prisoners we spoke to knew their keyworker and most said that they had regular meetings with them (every one to two weeks), and that these were useful. We looked at the case notes for keyworker meetings, and most were detailed and reflected meetings that had been constructive and encouraged prisoners to use their time at the establishment constructively. Keyworkers we talked to were positive about the scheme, and felt that they had received sufficient training to enable them to take on this new responsibility.
- 2.3 Prisoners had opportunities to become 'red bands' and 'blue bands', which gave them the freedom to move around the prison unescorted to carry out particular jobs. There were also several peer roles they could apply for, including equality representatives, Shannon Trust representatives (helping other prisoners learn to read) and prisoner council representatives, all of which gave them a route to earn trust and contribute to their residential community.

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

- 2.4 There had been some improvements to the living environments for prisoners. Communal and association areas were clean and well equipped, with some enhancements on the wings holding prisoners on the higher privilege level. Exercise yards were free from litter, and benches and exercise equipment had been provided, but some were overgrown with weeds. (see key concern and recommendation S41). In our survey, more prisoners than elsewhere

said that the prison was quiet enough for them to sleep at night, and we found this to be the case during our night visit.

- 2.5** The standard of cells was variable, but generally adequate for most. They were big enough to accommodate the number of prisoners they housed but the ventilation was extremely poor, and they were stifling in the hot weather experienced during the inspection. Many windows had had holes burnt into them by occupants of the cells, and prisoners told us that this was to increase the airflow. Many of the cells were dirty, partly as a result of the poor and unhygienic state of the available cleaning equipment. Although a painting programme was operating, we found graffiti in 34 of the 50 cells that we checked, much of which was offensive, racist and gang related. The offensive display policy was generally adhered to. Eighty per cent of the toilets we checked were scaled and dirty, and those in single cells remained unscreened (see key concern and recommendation S41). Most cells contained sufficient furniture, but there were no lockable cupboards. All of the cells we checked had access to a kettle and drinking water.
- 2.6** Risk assessments were appropriately completed for all prisoners who shared cells. We observed some emergency cell call bells not being responded to promptly, and were provided with evidence from the prison which confirmed that this was the case. Managers were alert to this and were undertaking checks to try to address the issue.
- 2.7** Access to showers was limited to association times. This meant that prisoners could not have a shower before they went to activities, which was a source of some frustration during the hot weather at the time of the inspection. However, in our survey more respondents than at similar prisons and at the time of the previous inspection said that they could shower every day. Each wing had five or six showers, which were adequately screened to provide privacy but many were dirty and in a poor state of repair (see key concern and recommendation S41), although the prison tried to remedy some of the cleanliness issues during the inspection.
- 2.8** All wings had access to good stocks of basic toiletries. At the time of the inspection, there were sufficient stocks of clean bedding but in our survey fewer respondents than at similar prisons said that they got clean sheets every week, and prisoners we spoke to said that they were not always able to exchange their bedding weekly. Access to clean towels was sometimes problematic, and the stocks of socks and boxer shorts were of poor quality. Prisoners were permitted to wear their own clothes but had access to prison-issue clothing if required, and all prisoners were presentable during the inspection. Each wing had a laundry, and access to this was adequate.

Recommendation

- 2.9** **Managers should monitor emergency cell call bell response times to ensure they are responded to promptly.**

Residential services

- 2.10** In our survey, just under half of prisoners said the quality of the food provided was good or very good. Those we spoke to had mixed views about this but many were positive. The catering arrangements remained similar to those at the time of the previous inspection. Prisoners continued to benefit from sharing a specially devised healthy menu with the neighbouring children's site. Breakfast was still mostly served on the morning it was to be eaten but, although better than at other adult prisons, the portion size remained inadequate. Lunch and dinner were served slightly too early. During the week, lunch generally comprised

a choice of cold options consisting of baguettes and salads, and dinner offered five hot choices, with both menus including vegetarian and halal options; these meals were reversed at weekends. Other special religious and dietary requirements were catered for as required. With the exception of breakfast, the quality and portions of food observed during the inspection were adequate.

- 2.11** Servery queues were well supervised but over controlled, which sometimes meant that service was slow and the food served towards the end was cold. Workers on the serveries were generally correctly dressed, but some lunch meals were served from pool tables, where staff and servers were not appropriately attired. The serveries were cleaner than at the time of the previous inspection; however, they were all in need of refurbishment and some were grubby (see key concern and recommendation S41). Food was no longer left out at night. Food trollies were generally dirty but were due for a deep clean shortly after the inspection.
- 2.12** All wings had facilities for prisoners to dine communally out of their cells. We did not see this happen during the inspection but staff told us that these facilities were used at weekends by prisoners on the enhanced privilege level. Prisoners we spoke to, including those with enhanced status, said that they did not regularly, if ever, dine out of their cell. This meant that many prisoners ate their meals in a cell with an unscreened toilet.
- 2.13** The kitchen was clean and well equipped. There were separate storage, preparation and cooking areas for halal food. Prisoners working there had the opportunity to gain qualifications (see also paragraph 3.14).
- 2.14** In our survey, only 38% of respondents said that the prison shop sold the things that they needed, which was worse than at similar prisons, although better than at the time of the previous inspection. The prison had started addressing concerns about the prison shop, including consultation with prisoners. There was evidence that changes were made to the product list as a result, and that when this was not possible the prison ordered some products separately, in particular to meet the needs of prisoners from a black, Asian or other minority ethnic background.
- 2.15** Depending on the day of arrival, some new prisoners had to wait for up to 10 days before they could access the prison shop, which was further exacerbated if they had missed the latest shop order at their sending establishment. We were told that prisoners could apply for emergency PIN credit or vaping requisites if necessary but few new arrivals were aware of this, and this created a risk of them getting into debt.
- 2.16** The range of catalogues and products that could be ordered had been slightly extended but an administration fee of 50 pence per order was now applied.

Recommendation

- 2.17 Prisoners should be able to dine communally.** (Repeated recommendation 2.82)

Prisoner consultation, applications and redress

- 2.18** The prison had taken positive steps to improve consultation arrangements with prisoners. The prisoner council was becoming more embedded and generally met monthly, and membership comprised prisoner representatives from each residential unit. However, these meetings were not always well attended by prisoner representatives, and minutes reflected that they were not always sufficiently responsive, although there had been some changes,

mainly concerning improvements to the enhancements available to those on the higher privilege level.

- 2.19** We were told that each wing held monthly forums but staff and prisoners were generally unaware of these, and we were provided with no minutes from these meetings, suggesting that wider consultation arrangements were extremely limited.
- 2.20** There were no food comments books available on any of the serveries but catering surveys were distributed twice a year. These were generally well responded to, and there was evidence of some changes as a result.
- 2.21** Application forms were only freely available and accepted at breakfast time. They were dealt with differently on each wing and not all maintained a log. There was no tracking system, and we found a few applications dating back to May and June 2019 for which prisoners had not received a response. Staff responded proactively to prisoners' low-level requests where possible.
- 2.22** The management of complaints was good, and further improvements had been made since the previous inspection. In our survey, prisoners' perceptions about complaints processes were now comparable with those at similar establishments. Complaint forms were freely available and complaints procedures were reasonably well promoted, including to the Independent Monitoring Board and Prisons and Probation Ombudsman.
- 2.23** The number of complaints submitted had reduced since the previous inspection, from 643 to 411 in the six months preceding the inspection. The complaint responses that we reviewed had been polite, prompt and addressed the concerns raised, including those against staff. The quality assurance of complaints was carried out monthly by the deputy governor, and was now more robust. The head of business assurance completed some detailed analysis of complaints each month in an attempt to understand some of the trends and issues.
- 2.24** The provision of legal services was broadly appropriate for a category C training population. There were sufficient legal visits rooms to facilitate access to legal representatives as required. A range of appropriate legal texts was available in the library. The video-link suite was located beneath reception on the Feltham A site. Only two of the four courtrooms were in working order but there were sufficient rooms to facilitate legal consultations. Video-link had been accessed by prisoners on 23 occasions between April and June 2019, but we were not confident that they were told that this was voluntary, and that they could choose to go to court if they wished to do so.
- 2.25** Although, in our survey, 50% of prisoners said that their legal mail had been opened by staff when they were not present, records indicated that legal mail was rarely opened by staff, with 10 occasions to date in 2019. A log was maintained of when this happened, which was generally as a result of the legal privilege stamp not being clearly indicated, or of error on the part of staff in the mailroom. When legal mail was opened, the staff told the prisoner and also contacted the legal firm to let them know, which was appropriate.

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 characteristics¹⁰ 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

- 2.26** The strategic management of equality and diversity was generally good. In 2018, the establishment retained the National Centre for Diversity's 'Leaders in Diversity' accreditation. The equality policy, updated in 2018, provided a comprehensive framework for work in this area. There was a dedicated equality manager, shared with the neighbouring young offender institution (YOI), but there was no longer an equality officer.
- 2.27** Monthly equality action team (EAT) meetings, chaired by the governor, were generally well attended. The terms of reference for these meetings needed to be updated as they were mainly focused on race, with limited coverage of other protected characteristics. Despite this, the meetings were wide ranging, covering issues relevant to the equality and diversity agenda. However, the meetings were not used to consider proactively how to address important challenges, such as the negative views on diversity that were held by some prisoners. There had been active participation by prisoner representatives (see below) in the last few meetings, and those we spoke to valued this opportunity and felt that they had been listened to.
- 2.28** Monitoring had been constrained by the fact that the equality monitoring tool was only available quarterly and the data were not separated out between Feltham A and B. This risked concealing instances of disproportionality within the prison. However, the tool had identified disproportionate treatment in relation to ethnicity within the incentives and earned privilege scheme at one or both sites, although this had not been subject to enquiry (see key concern and recommendation S42).
- 2.29** Equality monitoring data were produced locally, although were not always comprehensive or easy to interpret. The EAT meeting in April 2019 had identified a large increase in the proportion of black and minority ethnic prisoners in segregation, resulting in these prisoners becoming increasingly over-represented. Although this had been identified, there had been limited analysis of this phenomenon. Instead, it was noted that the overall segregation figures were more proportionate (see key concern and recommendation S42).
- 2.30** The six equality representatives had been recently appointed, drawn from among prisoners located on four residential units, and there were plans to recruit others to cover the remaining units. Those who we met were well motivated and had been orally briefed, but lacked written guidance and training, and not all of them were clear about their role.
- 2.31** In the previous six months, nine discrimination incident report forms (DIRFs) had been submitted, which was fewer than elsewhere and at the time of the previous inspection. General complaints alleging discrimination were treated as DIRFs, so the complainant did not have to fill out a further form, as we have seen in other prisons. All DIRFs were subject to

¹⁰ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

quality assurance by the governor and independent scrutiny by the Zahid Mubarek Trust (ZMT), a representative of which also attended the EAT meetings, where all of the DIRFs were discussed. The DIRFs we reviewed had been generally well investigated, with justifiable decisions made.

Protected characteristics

- 2.32** Data collection on protected characteristics had improved but little recent work had been undertaken to promote positive messages about protected characteristics or to celebrate key events. According to the equality policy, named senior managers were responsible for leading work on each of the protected characteristics, and we were told that this was still the case. There was little evidence that this was occurring in practice, so work with minority groups was sporadic (see key concern and recommendation S42).
- 2.33** The ongoing relationship with ZMT was positive but there was too little collaboration with other external agencies, which would have been useful to drive the equality agenda forward.
- 2.34** Our survey indicated no notable differences between the responses of black and ethnic minority prisoners and those of the general population. Work with Travellers had been undertaken, led by chaplaincy, but there had been limited work with other racial and ethnic groups.
- 2.35** The prison was in the process of launching a range of skin and hair products that were suitable for prisoners of African heritage. It was noteworthy that this initiative had not been as a result of consultation within the prison, but on the basis of ascertaining what was provided in other establishments. Prisoners from this ethnic group told us that they welcomed this initiative, although many were disappointed that the products could not be ordered through the prison shop but through placing the order in a complaints box.
- 2.36** There were 61 foreign national prisoners. The foreign national policy had been updated in 2018, and was comprehensive. There was some use of professional telephone interpreting services for dealing with prisoners who spoke limited English, but not all staff we spoke to were aware of this service or when it might be appropriate to use it. Only three foreign national prisoners were receiving telephone credit to call family abroad, and some of the foreign nationals we spoke to who might have met the criteria for this provision were not aware of it. The chaplaincy ran support groups for some of the larger nationality groups in the prison, but not for others (see key concern and recommendation S43).
- 2.37** There was a good effort to identify prisoners with disabilities and additional needs. Most of these had conditions such as autism and dyslexia. Fifty-nine prisoners with care needs had been identified at the time of the inspection. The prison had been accredited by the National Autistic Society in 2016 and received a positive assessment in 2018. Prisoners with autism had 'communication passports', which provided brief details of their condition and how they should be treated by staff, but we found that not all staff were aware of them, and we saw one prisoner being treated in a way that was not consistent with his plan.
- 2.38** At the time of the inspection, there was only one personal emergency evacuation plan open, and staff we spoke to were generally aware of what was required of them in the event of an emergency.
- 2.39** There had been no recent consultations with prisoners with disabilities (see key concern and recommendation S43). Managers suspected that there might have been an under-reporting of disabilities by prisoners, and planned to carry out consultations to test this hypothesis; if it

turned out to be true, they said that they would seek to understand why this might be the case.

- 2.40** Only three prisoners in our survey indicated that they were gay or bisexual, and this was similar to the data held by the prison. Again, managers suspected that there might be under-reporting by prisoners in these categories, as a result of negative attitudes and potential bullying by other prisoners. However, no work had been undertaken or was planned to confirm this perception or to tackle the negative attitudes held by some prisoners (see key concern and recommendation S42).

Faith and religion

- 2.41** Faith provision was generally good. In our survey, 81% of respondents said that their religious beliefs were respected. A team of nine chaplains, supported by a team of 30 volunteers, provided faith services for the prison and the neighbouring YOI. There was a vacancy for a Catholic chaplain but the position was being well covered by staff and volunteers.
- 2.42** There were spacious and well-maintained Anglican and Catholic chapels, and a mosque. The multi-faith room, used for services and activities by other religions, was smaller, not as welcoming and in need of refurbishment. There were access restrictions to services for those on 'keep apart' lists (see also paragraph 1.8). Although the chaplaincy sought to support mediation efforts to address this, it was only pursued with the consent of both parties. We spoke to several prisoners who were disappointed that they had not been able to attend services as a result of being on 'keep apart' lists.
- 2.43** Chaplains participated in the induction process and provided outreach on the units. They were also involved in providing one-to-one support to vulnerable prisoners, including those on assessment, care in custody and teamwork (ACCT) case management procedures, but were not always present at ACCT reviews (see also paragraph 1.37).
- 2.44** Several faith-based classes and group discussions took place weekly, although these were mainly for the more common faiths.

Recommendation

- 2.45** **Prisoners on the 'keep apart' list should only be excluded from corporate worship following a robust risk assessment.** (Repeated recommendation 2.34)

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.

2.46 The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)¹¹ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. A CQC-focused inspection was also carried out at the same time as the joint inspection. One area has been identified that requires improvement, with a subsequent notice issued by the CQC. This is included in the CQC report, available at <https://www.cqc.org.uk/location/1-659374318>.

Strategy, clinical governance and partnerships

2.47 Care UK was the lead provider of primary care services, and subcontracted some other services to specialist providers. Inter-agency working was good, with an established partnership board and new local delivery board. However, the dental services provider was not included in the arrangements. A contemporary health needs analysis had been published recently, ahead of the retendering of services in 2020.

2.48 A stable management team had embedded improved governance systems since the previous inspection. Clinical governance meetings had been introduced, which provided a forum for lessons learned from audits and incidents, and for complaints to be reviewed.

2.49 Patient engagement was in the initial stages of development. There were plans to enable prisoners to express their views about health care through a new community forum, and patient feedback questionnaires were handed out after each health care intervention. It was too early to see evidence of feedback contributing to service development. Incident reporting mechanisms were good for the two main providers, and staff were clear about the mechanism, although few incidents had been reported.

2.50 Staffing levels and the skills mix were adequate to meet prisoners' needs, and several new staff were due to take up posts following a recent recruitment drive. Training, supervision and professional development opportunities were good and the clinical records that we reviewed appropriately conveyed care needs. We observed patients being treated with dignity and respect, which was reflected in our conversations with prisoners.

2.51 There were sufficient clinical rooms in the health centre, and these were suitable for use. An infection prevention and control audit had been completed, with a resulting action plan to improve standards in some areas. A cleaning schedule was now in place, and outstanding maintenance issues were highlighted with senior prison staff.

2.52 Arrangements for responding to medical emergencies were appropriate but control room staff contacted officers on the residential units about the situation before calling an ambulance, which potentially placed prisoners at risk (see key concern and recommendation S44).

¹¹ CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

- 2.53** There was no independent health care complaints process, and all patient concerns were raised through a generic prison form, which was inappropriate. We also saw a health care complaint that had not been picked up by the health care team. Despite this, responses to the few complaints raised were mainly dealt with face to face, and written responses were respectful and focused.

Recommendation

- 2.54** **Patients should be able to complain about health services through a well-advertised, quality-assured, independent health care complaints system.**

Promoting health and well-being

- 2.55** The local delivery board had begun to discuss the creation of a whole-prison approach to the health and well-being of prisoners. Effective bespoke health promotional activities took place throughout the year.
- 2.56** The health care team screened for chlamydia, tuberculosis and other diseases. They offered a wide range of age-appropriate vaccinations, such as meningitis and measles, mumps and rubella, and hepatitis B.
- 2.57** The patient information pack provided on arrival at the prison was good, and some of it was now available in languages other than English. Smoking cessation support was available for new arrivals and there were appropriate policies on communicable diseases.

Primary care and inpatient services

- 2.58** Since April 2019, an average of 51 prisoners per month had been screened on the day of arrival, and immediate health needs identified. Appropriate onward referrals were made and thorough secondary assessments were undertaken in a timely manner.
- 2.59** Prisoners could access health services using a clear pictorial application form. Health care staff collected the applications each day, delivered appointment slips and followed up patients who did not attend.
- 2.60** The GP was available for urgent appointments, and to see non-urgent cases within 48 hours. GP advice was also available out of hours, and nurses were available 24 hours a day. Visits were made to prisoners on the residential units if they were unable to attend the health centre.
- 2.61** The range of available clinics was appropriate to need, including the management of asthma and other long-term conditions, and was soon to be enhanced with an occasional podiatry service. 'Did-not-attend' rates for appointments were far too high; in June 2019, for example, these had been 58% for the GP and 80% for the optician, which was a grossly inefficient waste of NHS resources. Although there were several reasons for non-attendance, the most frequent was the inability of prison managers to move patients to appointments (see also paragraph I.30, and key concern and recommendation S44).
- 2.62** The prison provided two hospital slots a day for emergencies and routine hospital appointments, which was sufficient to meet need.

- 2.63** Primary care nurses identified patients due for release (60 per month since April 2019) and saw each individually, to prepare throughcare, which included take-home medication as necessary and a letter for the GP.
- 2.64** The inpatient unit on Wren unit supported up to 12 patients with significant health needs from both Feltham A and B. We observed the delivery of a largely therapeutic regime, which included some on-ward activities and access to the external gym, education classes and library. The unit exercise yard was overgrown but well used. The average occupancy of beds was only 50%.
- 2.65** Prison officers and health care staff on this unit delivered individualised care, and innovative reflective practice groups were attended by nurses and officers, which helped them to learn jointly from practice. There continued to be admissions for non-clinical reasons (10 since April 2019), which introduced unnecessary risks to the care of sick and vulnerable prisoners.

Recommendation

- 2.66** **The inpatient unit should be used only for clinical purposes, and prisoners should not be located there to address operational issues.**

Social care

- 2.67** Social care needs could be identified through several routes, and literature about the Care Act and self-referral process had recently been made available to prisoners.
- 2.68** The prison told us that a memorandum of understanding with the local authority was in place, but this was not available to us during the inspection. We were told that there were arrangements for an assessment to take place and care to be provided by an external agency if it was required, but there was no evidence to demonstrate this.
- 2.69** No social care needs had been identified since the previous inspection. There was no formal buddy scheme (whereby prisoners provide informal support across a range of issues) for prisoners identified as requiring lower-level support.

Mental health care

- 2.70** Barnet, Enfield & Haringey Mental Health NHS Trust (BEH) provided the well-being team, which delivered integrated mental health and psychosocial substance use services.
- 2.71** The large team had a rich skills mix, comprising mental health nurses, occupational therapists, psychiatrists, psychologists, and a speech and language therapist, and had comprehensive training and professional development opportunities. The team was available seven days a week, with shorter hours at the weekend.
- 2.72** A BEH practitioner acted as daily duty worker. The duty worker attended most assessment, care in custody and teamwork (ACCT) case management reviews and safety-related meetings, and ensured good integration with the prison. They also ensured that assessments for new arrivals occurred promptly.
- 2.73** An average of 47 new prisoners were screened for mental health problems each month. There was an open referral system and prisoners could self-refer. Referrals were reviewed daily, and 96 were on the treatment caseload at the time of the inspection. Formulations and

clinical records on SystemOne (the electronic clinical record) were good. The range of treatments included psychological interventions, one-to-one work and guided self-help. Attendance for therapy was higher than for other clinics, at 91%, which was good.

- 2.74** About 80% of prison officers had been trained on aspects of mental health since 2018, with the aim to have all trained by the end of 2019, which was an improved situation.
- 2.75** BEH prepared patients for release, including use of the care programme approach (mental health services for individuals diagnosed with a mental illness) as necessary, and engagement with community agencies to ensure continuity of support. We were told that there had been four transfers under the Mental Health Act in the previous six months, but we were unable to ascertain if these transfers had been undertaken within the national guidelines.

Substance use treatment¹²

- 2.76** The substance use strategy reflected the most recent health needs assessment and included treatment, supply and harm reduction. Psychosocial treatment was provided by Addaction.
- 2.77** Addaction staffing had improved since the previous inspection, and staff now had access to appropriate training and supervision. Efficient working had been hampered by an unplanned office accommodation move, which had dislocated workers from access to patients' clinical records on SystemOne. The team continued to contribute to ACCT reviews, and safer custody and drug strategy meetings.
- 2.78** Most new referrals for assessment were generated from initial screening, the mental health team and an open referral system. A total of 101 prisoners (27% of the population) were in treatment at the time of the inspection. Few of the treatment interventions were accredited, although most were evidence based and included brief and structured programmes in one-to-one and group settings, and harm minimisation advice. Peer workers supported prisoners in therapeutic activities. The efficiency of the team was hampered by a lack of access to patients, with the failure to attend rate as high as 50% during the previous six months (see key concern and recommendation S44).
- 2.79** Care UK provided clinical management of addiction by a specialist consultant, competent doctors and others, although no prisoners were receiving clinical treatment at the time of the inspection. Patients withdrawing from alcohol were managed on the inpatient unit, which was clinically appropriate, but this was rarely needed.
- 2.80** Addaction ensured that patients being released were supported by community agencies, which monitored patients post-release to encourage engagement.

Medicines optimisation and pharmacy services

- 2.81** Pharmacy services were provided on-site by Care UK Pharmacy. The pharmacist was an independent prescriber and technicians were competent. Medicines were supplied, transported and stored in safe and appropriate ways. Heat-sensitive medicines were stored in refrigerators, the temperatures of which were monitored daily to ensure medicinal integrity.
- 2.82** Patients could contact the pharmacist via an application form. A range of clinics and services, including medicines use reviews, were available. 'Special sick' (immediate health treatment

¹² In the previous report substance use treatment was included within safety, while reintegration planning for drugs and alcohol came under rehabilitation and release planning (previously resettlement).

without an appointment) medicines administration was recorded on SystemOne and there were plans to introduce a minor ailments scheme. There were patient group directions (which enable nurses to supply and administer prescription-only medicine) for vaccinations and salbutamol, and the range of medicines available in this way was being appropriately expanded. Out-of-hours medicines could be accessed and there was efficient provision to supply medicines for court appearances and discharge.

- 2.83** The pharmacist chaired regular medicines management meetings, which were well attended by stakeholders. There, new additions to the formulary (a list of medications used to inform prescribing), new procedures, concerns and incidents, including those at other prisons, were discussed. There were regular clinical audits to monitor prescribing trends and medicines use.
- 2.84** Few patients were taking medications, and even fewer had medicines in-possession. In-possession risk assessments were completed well. Although secure in-cell lockers for storing medicines had arrived at the prison, they had not yet been fitted at the time of the inspection.
- 2.85** Supervised medicines administration took place daily at 7.45am, 11.30am, 4.30pm and 8pm in two groups of three units. During these visits, officers brought patients to the nurses in the unit activity rooms. During the inspection, in one group, two patients had already gone to their gardening activity when nurses arrived to administer medication, and the nurses had to follow them. Although the nurses located the patients, there was difficulty in providing water to help them to swallow the medication. We observed one patient having to swallow a capsule with no water, which risked the capsule dissolving in his throat or oesophagus, potentially damage the surrounding tissue, as well as the medication not achieving the desired therapeutic dose.
- 2.86** As a result of having to follow patients to different locations to administer medication, doses were not always given at the prescribed times; this practice was highly inefficient, created abnormal expectations among the prisoners and did not prepare them to be responsible consumers of health services following release. Since April 2019, an average of 56% of patients per month had failed to receive their not-in-possession medicines, which was unacceptably high (see key concern and recommendation S44).

Dental services and oral health

- 2.87** A local dentist and team delivered a full range of treatments, and were adept at using age-appropriate digital media to allay patients' anxiety about dental procedures. The mean waiting time for an appointment was satisfactory, at two to three weeks, although the failure to attend rate was unacceptably high, at about 35% (see key concern and recommendation S44).
- 2.88** The dental suite was well equipped and complied with infection control standards. Equipment was maintained according to manufacturer's advice but when we asked to see the required certification, to ensure the safety of the X-ray equipment, it could not be produced. Clinical records were very good.

Section 3. Purposeful activity

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

Time out of cell

Expected outcomes:

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

- 3.1 The published regime on most of the units indicated that those employed full time and those with enhanced incentives and earned privilege (IEP) status had the potential to be out of their cells for more than 10 hours on weekdays, which was more than at the time of the previous inspection. However, those without employment and on the basic level of the IEP scheme had very limited time out of cell, and could be locked up for over 22 hours every day. This had not changed since the previous inspection and was still not acceptable (see key concern and recommendation S45).
- 3.2 In our survey, 36% of respondents said that they spent less than two hours out of their cell on a typical weekday, and in our spot checks we found 37% of prisoners locked up during the day, which was more than at the previous inspection and too many for a training prison holding a young population. The regime offered at weekends was limited for most prisoners, and in our survey 83% of respondents said that they spent less than two hours out of their cell on these days (see key concern and recommendation S45).
- 3.3 The amount of time scheduled for association varied, depending on employment and IEP status, but ranged between three half-hour sessions weekly for those with basic status to three one-hour sessions daily for those with enhanced status who were not in full-time employment. For most prisoners, the amount of association time they received fell between these levels, but three-quarters of our survey respondents said that they could get association on more than five days in a typical a week, which was far more than in similar prisons. We observed that demand to use the telephones during evening association was high, and many prisoners spent much of their time queueing.
- 3.4 We saw instances of regime slippage and curtailment, including association sessions being reduced from one hour to 45 minutes. One of the main reasons for this was that unit staff accompanied prisoners to, and collected them from, activities, which meant that there were sometimes not enough staff on the units to run the scheduled regime.
- 3.5 Outdoor exercise areas had some fixed fitness equipment and seating but were austere, and many of the grass areas were overgrown. Although all prisoners were scheduled to have at least half an hour of exercise a day, this did not always happen; we were told that prisoners who stayed on the units all day were prioritised for exercise over those who participated in work and other activities (see key concern and recommendation S45).
- 3.6 The welcoming and spacious library had been recently refurbished and was now run by the London Borough of Hounslow. It stocked a wide range of fiction and non-fiction materials, including legal texts, graphic novels, DVDs, and English and overseas newspapers and magazines. Prison Service Instructions were not on display but the librarians said that they would be able to help prisoners to obtain relevant ones. There was a mobile service to the units, and the librarians tried to encourage non-users to make use of this.

- 3.7** The library was open only four days a week because staff worked extended hours on these days, in order to provide an evening service to the neighbouring young offender institution (YOI).
- 3.8** Records indicated that in the previous six months there had been an average of just under 1,300 visits to the library a month – representing an increase from the time of the previous inspection. Data about library use was collected and analysed.
- 3.9** PE provision was generally good. The service was well run and had excellent links with a range of external organisations, clubs and facilities. Staff were well qualified, although only able to provide remedial treatment for those with lower body injuries.
- 3.10** Resources included spacious sports halls (shared with the YOI) and a wide range of cardiovascular equipment. Activities included circuit training, rugby, football and cricket, and several courses were offered. Staff actively collected and analysed data on use of the PE facilities.

Education, skills and work activities (Ofsted)¹³

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.¹⁴

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

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

Management of education, skills and work

- 3.12** Leaders and managers had not maintained sufficient oversight of the quality of education, skills and work provision or acted to resolve weaknesses, such as the lack of sufficient and appropriate activity places and prisoners' poor attendance. Across the prison, managers did not do enough to ensure that all aspects of the prison regime contributed to prisoners' good attendance and punctuality. New managers, appointed a few weeks before the inspection, had quickly established a realistic understanding of the significance of weaknesses in the

¹³ This part of the inspection is conducted by Ofsted inspectors using Ofsted's common inspection framework. This ensures that prisons are held accountable to the same standard of performance as further education colleges in the community.

¹⁴ In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

provision of activities. They had begun to put plans in place to bring about improvement, but it was too early to see any impact. The improvement plans they had written were at an early stage and lacked measurable improvement targets (see key concern and recommendation S46).

- 3.13** Leaders and managers had taken insufficient account of the scale of English and mathematics provision required to meet the needs of prisoners when they planned the education curriculum. Many prisoners had low levels of prior attainment and skills in these subjects, but there were only 20 part-time education places available in each subject. This shortfall of places, and the slow progress made by learners already allocated to these subjects due to their poor attendance, resulted in prisoners who would have benefited from joining English and mathematics classes having to wait far too long to participate. There was no outreach English and mathematics provision for prisoners engaged in prison work (see key concern and recommendation S46).
- 3.14** Although the allocation of prisoners to activities was dealt with promptly and was based on an analysis of their needs, leaders and managers provided insufficient activity places to enable all prisoners to be occupied throughout the working day. There were full-time activity places for just over half of the population. Apart from those engaged in vocational training in brickwork, or painting and decorating, or work in the kitchen, prisoners allocated to full-time activities had no opportunities to gain accredited qualifications. One-fifth of the entire prison population was employed as full-time residential unit cleaners and painters. Their work was poorly managed, and they were under-occupied. There were part-time activity places for just under half of the population, mainly in education classes but also in prison work in the laundry and waste recycling. These prisoners worked or attended education classes in either the morning or afternoon. They could not combine part-time activity places, which resulted in too many prisoners being under-occupied (see key concern and recommendation S46). The pay policy and rates of pay for activities, including education classes, were fair and were not a disincentive for prisoners to engage in any of them.
- 3.15** Leaders' and managers' self-assessment of the quality of provision was based too narrowly on the education provision delivered by Novus as a subcontractor. Novus managers had made improvements to the lesson observation procedure, which we had found to be weak at the previous inspection. The observations of education and vocational training staff focused appropriately on the impact of teaching and learning. However, this focus had not yet resulted in any demonstrable improvements to the quality of teaching, learning and assessment. Prison managers had not made any improvements to procedures for monitoring the quality of activities delivered by prison staff.
- 3.16** In education classes, tutors did not always have sufficient skill and confidence to challenge disruptive behaviour. As a result, prisoners were held back from maximising their learning time (see also paragraph 3.32).
- 3.17** Leaders and managers had established a wide range of partnerships which enabled prisoners to engage in enrichment, sporting, health and well-being, and community-based activities. This allowed a small number to be released on temporary licence to work.
- 3.18** Leaders and managers used information about local employment needs effectively to inform aspects of the education curriculum and help prisoners to gain the skills and qualifications they needed to access these. For example, they provided courses in construction, gym instruction, and preparation for setting up a small business. Prisoners received good information about potential career pathways during induction. This helped them to identify suitable education and activities to develop the skills they needed to access these pathways. Prisoners could access the virtual campus (internet access for prisoners to community education, training and employment opportunities) in education classes, to research job opportunities.

- 3.19** Impartial careers advice and guidance was available through a subcontractor. Prisoners who chose to access this received good support to apply for jobs or education courses on release. However, leaders and managers did not keep any records to evaluate how many of them took up this opportunity. They had recently begun to consider data about the proportion of prisoners who progressed to education or employment on release. However, they were not able to consider the details about the courses or types of employment to which prisoners progressed. This prevented them from evaluating fully whether the activities provided met the resettlement needs of prisoners.

Recommendation

- 3.20 Support and training should be provided to staff, to ensure that they have the skills and confidence to deal with disruptive behaviour.**

Quality of provision

- 3.21** Too many prisoners in education classes did not achieve their potential and make the progress of which they were capable. This was because tutors did not set them clear, relevant and challenging learning targets and tasks. For example, prisoners' targets did not focus sufficiently on the skills and behaviour that they needed to improve – such as their use of respectful language – to increase their chances of successful resettlement. Outside of subject-specific lessons in English, mathematics, and information and communication technology, tutors and instructors rarely planned activities to help prisoners to develop their skills in these areas (see key concern and recommendation S47).
- 3.22** The use of individual learning plans in vocational training did not always help prisoners to make good progress. In a few vocational subjects, such as in barbering, they were of high quality and contained regular and frequent reviews of prisoners' progress and achievements. However, too many learning plans contained the same generic and vague targets for all group members.
- 3.23** Instructors' recording of vocational skills and behaviours for prisoners engaged in prison work was weak, involving simply listing the elements of a job role and the introductory training they provided. As a result, prisoners were unable to provide prospective employers with any formal record of the vocational skills and behaviours they had learned.
- 3.24** Vocational training tutors and most prison instructors were enthusiastic about, and knowledgeable in, their subjects. They conveyed this well during training sessions and used effective techniques to help prisoners to make good progress in developing new skills and knowledge. Consequently, prisoners engaged in most prison jobs, such as in the kitchen, laundry and recycling facilities, developed useful vocational skills that enabled them to work productively, with minimal supervision. However, there was insufficient work to occupy the large number of workers on the residential units, and the supervision and direction of their work were weak.
- 3.25** Tutors made suitable use of the available information to plan support for prisoners with special educational needs. However, tutors did not always review the suitability of these plans often enough to ensure that they continued to meet prisoners' needs.
- 3.26** Most tutors and instructors provided prisoners with useful subject-specific feedback about their work, to help them to improve. However, in a minority of cases, tutors and instructors offered little guidance, which meant that prisoners were not always aware of how they could improve the quality of their work or achieve higher marks.

- 3.27** Novus and prison staff provided detailed information for prisoners interested in taking distance learning courses, including with the Open University, about the options available to them. Once enrolled on suitable courses, prisoners received good support to help them to make progress towards achieving the qualification.
- 3.28** Tutors and instructors promoted equality and diversity well in classroom and workshop sessions. Posters and inspirational slogans in classrooms and workshops celebrated the achievements of men and women from diverse backgrounds.

Recommendation

- 3.29** **Tutors and instructors should ensure that individual learning plans record prisoners' prior attainment, clearly identifying targets related to their sentence plans, and regularly reviewing and recording progress against these targets.**

Personal development and behaviour

- 3.30** The proportion of prisoners participating in purposeful activity, and thereby developing the skills and behaviour necessary to gain employment on release, was too low (see paragraph 3.14), and this constituted a significant barrier to their successful rehabilitation.
- 3.31** Too many prisoners chose not to attend their allocated activities and had poor attitudes to learning and work. Attendance in education classes was particularly low. The often late arrival of prisoners at activities, and their withdrawal to engage in other aspects of the regime, reduced the amount of learning and work that prisoners engaged in, and hindered them from developing the work-related attitudes that employers expect. Valuable time was lost at the start of sessions, presenting challenges for tutors and instructors in managing these effectively (see key concern and recommendation S48).
- 3.32** Prisoners who attended and engaged in prison work and vocational training cooperated well with staff, their peers and visitors. They were well behaved and respectful, and produced work of a good standard. However, staff did not recognise or record the progress that prisoners made in developing these good work-related attitudes and behaviour. Occasional poor behaviour by a few prisoners in education classes disrupted learning for others (see also paragraph 3.16 and recommendation 3.20).

Outcomes and achievements

- 3.33** Too many prisoners did not complete the education and vocational training courses that they started. Those who left early often did so because of poor behaviour or for prison-identified security reasons (see key concern and recommendation S49).
- 3.34** A large proportion of prisoners who completed vocational training courses achieved their planned qualification. Achievement rates for those who completed courses in English and mathematics and in English for speakers of other languages had improved since the previous inspection. However, too many prisoners across the prison made slow progress, relative to their often low starting points, in improving their skills in English and mathematics.
- 3.35** The progress made and outcomes achieved by the prisoners engaged in prison work were not recognised or recorded. This provided no evidence to support them into their next stage of education or employment (see key concern and recommendation S49).

3.36 Managers monitored effectively the outcomes achieved by different groups of prisoners, including those with complex needs and learning difficulties or disabilities who were taking education courses with Novus. Through this, they ensured that there were no notable variations in the outcomes that different groups of prisoners achieved. Prisoners with complex needs who attended education classes received the support they need to become more independent. Managers did not have reliable data to monitor the progress and outcomes of different groups of prisoners engaged in prison work.

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 provision of family work had improved, with a new contract awarded to the Spurgeons Children's Charity giving rise to additional staff for family support work, work with visiting children, and the organisation of family days and fathers' play days.
- 4.2 The visitors centre was a prefabricated building which had been in place for some years and was barely fit for use; the men's toilet had drainage problems and the fabric was crumbling and in need of refurbishment or replacement.
- 4.3 Visits staff were welcoming and assisted visitors on arrival. There was a basic facility in the visitors centre, selling hot and cold drinks and sandwiches, and this was adequate. The lockers for use by visitors were in a poor state; replacements had been requested several weeks before the inspection but had not arrived yet.
- 4.4 There was a system to identify visitors and children in advance, with checks carried out on arrival. The visits hall was a large room, with staff placed strategically, to maintain security. Visitors were searched in a respectful manner. There was a small café inside the hall, selling hot and cold food. There were facilities for six closed visits. The provision overall was adequate, although in need of refurbishment.
- 4.5 At the time of the previous inspection, prisoners on the basic regime had not been allowed to have visits, but this was no longer the case, with prisoners on the basic regime being permitted half-hour visits on nominated days. However, visiting sessions across the board were too short. In our survey, only 12% of respondents – far less than at similar prisons – said that they received a weekly visit, with around 20% of prisoners being from outside of the London area.

Reducing risk, rehabilitation and progression

Expected outcomes:

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

- 4.6** The prison had a recently completed and comprehensive reducing reoffending strategy for 2019/20. The document applied both to children and young adults, and covered all seven resettlement pathways, as well as outlining the role of the psychology department and the chaplaincy. It was informed by a needs analysis, which had been completed by the in-house psychology team. However, this team had noted that the data available to inform their analysis was limited, in that only 43% of offender assessment system (OASys) assessments had been completed at that time. There was a supporting action plan to take forward the recommendations of the needs analysis, with responsibility given to named functional heads. There were also review dates, which were monitored by the monthly reducing reoffending meeting, chaired by the head of reducing reoffending, which was usually well attended and recorded.
- 4.7** Although all prisoners should have arrived at the establishment with a completed OASys assessment, this was not the case in most cases. Since December 2018, a strong leadership team in the offender management unit (OMU) had made considerable progress towards reducing the backlog of prisoners without an initial assessment (from 56% in December 2018 to 19% in June 2019). However, the position was still unacceptable, represented a systemic weakness in the wider process, and had a negative impact on prisoners' ability to address their risk of harm to others while at the establishment, which was a missed opportunity. At the time of the inspection, there were also too many prisoners without a reviewed OASys assessment, and the prison was not able to say how many were due for review (see key concern and recommendation S50). We checked 20 OASys assessments and found that two-thirds of them were of satisfactory quality; however, the remainder were not, as they had not been reviewed after significant events had taken place.
- 4.8** There was now a senior probation officer (SPO) and three probation officers based in the OMU, which was an improvement on the situation at the time of the previous inspection. There were five prison offender supervisors, and almost no cross-deployment. Collectively, these improvements had had a positive impact on the provision of offender management. Following the first stage of the implementation of Offender Management in Custody (OMiC),¹⁵ the prison had trained 120 keyworkers, who generally engaged well with prisoners, as well as supporting the completion of sentence plans where they existed. The levels of contact of offender supervisors and keyworkers with prisoners were generally good, and the recording of such contact was better than we often see.
- 4.9** Generally, prisoners who presented a high risk of harm to others (about a third of the population) were managed by the probation officers in the OMU, and medium- and low-risk prisoners were managed by prison staff. The senior probation officer to was due to supervise all such staff from September 2019, at the point when OMiC would be fully implemented in the prison, and we saw this as a positive development.
- 4.10** Home detention curfew processes were generally well managed, enabling most prisoners to be released on their eligibility date. When there were delays, they were mainly due to the

¹⁵ Following a review of offender management in 2015, HMPPS began to introduce a new offender management model from 2017. The new model is being implemented in stages, starting with new prison officer key workers. The second phase, core offender management, and the introduction of prison offender managers (POM) is being introduced gradually, from 2019.

slowness of the community probation services in processing applications. A dedicated member of the case administration staff undertook the day-to-day work, and the processes were overseen and signed off by the manager of the OMU.

- 4.11** Two dedicated members of staff managed the release on temporary licence (ROTL) process by liaising with offender managers in the community to manage risk of harm and arranging placements. The staff were rightly proud of their collaboration with the Duke of Edinburgh Award scheme, which the prison used to positive effect in taking groups of five prisoners at a time to outdoor activities on Dartmoor. Others worked in a charity shop and one prisoner worked daily at a local golf course. There had been 88 ROTL events in the previous six months, involving 13 prisoners.
- 4.12** The prison had recently started sharing sentence plans with prisoners, and in our survey, 76% of respondents said that they were aware of their sentence plan, which was higher than at similar prisons.
- 4.13** The prison had completely accepted the requirements of OMiC and was on course to provide comprehensive offender management in custody, with the keyworkers and dedicated prison offender managers in place in readiness for the national implementation date in September 2019, although the final number of staff was still to be confirmed at the time of the inspection.

Public protection

- 4.14** The prison's local public protection policy had been prepared in 2016 but was still current. Procedures were generally effective and reflected the national public protection manual, and were overseen by the SPO.
- 4.15** The interdepartmental risk management meeting was chaired by the SPO and had a positive impact on managing the release of the highest-risk prisoners. It provided an overview of telephone and mail monitoring in appropriate cases. Attendance had improved from across the prison and the minutes were appropriately detailed, with actions followed up systematically.
- 4.16** The release of medium- and high-risk prisoners using multi-agency public protection arrangements (MAPPA) was overseen by the SPO. Risk management levels were properly identified in advance and, in most of the cases we reviewed, relevant information had been appropriately recorded in case files on P-Nomis (electronic case notes). We reviewed a sample of the information-sharing reports (MAPPA F forms) prepared by the offender supervisors in readiness for release, and all were of a reasonable standard and countersigned by the SPO.
- 4.17** There were few child contact restrictions and telephone monitoring arrangements, and these were identified by the security department when prisoners arrived at the prison or when there was intelligence to raise safeguarding concerns. The arrangements were processed by the public protection case administrator and overseen by the SPO, and were effective.

Interventions

Expected outcomes:

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

- 4.18** There were two accredited offending behaviour programmes delivered – the Thinking Skills Programme (TSP) and Resolve. In the previous year, the establishment had delivered five sessions in total, with eight prisoners per course and approximately six completions per course. The provision of just 42 places a year for a population of approximately 360 prisoners at any one time seemed low. The prison told us that there were currently 49 prisoners on the waiting lists for TSP and Resolve, and that 16 prisoners who had been on the waiting list had been released without having completed a programme (see key concern and recommendation S51).
- 4.19** The needs analysis had identified the need for a programme called Identity Matters, which had recently been accredited; however, it was a year-long one-to-one programme and, as most prisoners spent less than a year at Feltham B, it was not viable for delivery at the prison. However, only about six prisoners a year were transferred to other prisons for completion of programmes or resettlement to their local area. Staff were able to evidence that repeated requests to other prisons for such moves to take place had often not been responded to or had been declined. They believed that this was mainly because so many prisoners at Feltham B were involved in gang culture, and that this ‘reputation’ increased security and safeguarding concerns.
- 4.20** The Sycamore Tree victim awareness programme was delivered by the chaplaincy, with 60 prisoners offered places, and 45 completions in the previous year.

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.

- 4.21** About 35 prisoners were released from the establishment every month. The community rehabilitation company (CRC) was effective in identifying all prisoners at an appropriate point before release and helping them to resolve their resettlement needs.
- 4.22** There had recently been an increase in the number of caseworkers employed by the CRC, from two to four. The CRC managed the completion of resettlement plans in line with its contract, and evidence from the cases we reviewed confirmed this to be generally the case. The CRC had recently started offering a five-hour one-to-one course of support to prisoners as part of its contract. Around two-thirds of prisoners accepted this offer, and this provision was useful in supporting them – for example, in dealing with disclosure to employers and the preparation of CVs. However, the course was also labour intensive and reduced the amount of time that caseworkers had to deal with the rest of their caseload. For example, the additional provision led to a late start on some basic custody screening assessments and, although still in line with the CRC contract, and delivered within the 12-week window, starting this assessment a day or two before a prisoner’s release clearly would not always ensure positive resettlement outcomes, and the CRC needed to consider this position.
- 4.23** The accommodation support worker ensured that each prisoner had, at the very least, a place to stay on the first night after release. Figures produced by the CRC indicated that 208

of the 209 prisoners released in the previous six months had had accommodation to go to. However, there were no data on the long-term sustainability of the accommodation.

Section 5. Summary of recommendations and good practice

The following is a listing of repeated and new key concerns and recommendations, general 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.

Key concerns and recommendations		Directed to:
S38	<p>Key concern: There had been a slight increase in the number of fights and prisoner assaults. In addition, levels of use of force and use of segregations had risen sharply. Despite some examples of good case management in the CSIP process, this did not inform how staff managed individuals. There was no data analysis to understand violence and inform a plan of how to tackle it. Investigations into violence, and attendance at safer custody meetings were poor and lacked leadership and direction from senior managers.</p> <p>Recommendation: Data from indicators of violence should be analysed and understood, to inform an effective plan that reduces the frequency of violence.</p>	The governor
S39	<p>Key concern: Aspects of security were not proportionate and did not facilitate the delivery of a full and purposeful regime conducive with life in a category C training prison. Some prisoners were subject to 'keep apart' protocols, and there were no free-flow movements for most of the population. Most movements were unnecessarily restrictive and over-controlled. Some strip-searching was completed in the absence of an individualised risk assessment. Closed visits were managed inconsistently and were sometimes applied punitively when not related directly to incidents or intelligence concerning visits. Despite receiving and processing large amounts of intelligence about drugs, suspicion drug tests were conducted relatively infrequently, and when they were conducted rarely produced a positive result.</p> <p>Recommendation: Security arrangements should allow prisoners to access the full and purposeful regime expected in a category C training prison.</p>	The governor
S40	<p>Key concern: Senior managers were not focusing on the rise in levels of self-harm and there was no analysis of the causes or patterns. The safer custody meeting was poorly attended and did not result in an adequate plan to reduce levels of self-harm.</p> <p>Recommendation: Managers should regularly analyse self-harm data, to understand and address the reasons behind the sharp rise in the number of incidents.</p>	The governor

S41	<p>Key concern: Conditions in cells were mixed. Cells were poorly ventilated and too many contained graffiti, some of which was offensive. Toilets in most cells that we checked were scaled and dirty, and those in single cells remained unscreened. Showers were generally in a poor state of repair and dirty, and many were not fit for use. Many exercise yards were overgrown with weeds. Servery areas were worn and in need of refurbishment, and some were grubby.</p> <p>Recommendation: The conditions on residential units, particularly cells, showers, exercise yards and serveries, should be improved.</p>	The governor
S42	<p>Key concern: Weaknesses in the monitoring of protected groups prevented the prison from identifying and addressing discrimination, as well as limiting the possibility of identifying relevant trends.</p> <p>Recommendation: There should be regular monitoring of the treatment of prisoners with protected characteristics and their access to the regime, to identify and address discrimination.</p>	The governor
S43	<p>Key concern: There was little consultation with prisoners with protected characteristics, which prevented the prison from gaining a full understanding of their needs.</p> <p>Recommendation: Managers should consult prisoners across all protected characteristics, to ensure that their needs are identified and met.</p>	The governor
S44	<p>Key concern: There were several areas where the prison failed to enable patients to access health and substance use services, which led to unsatisfactory practices and introduced unnecessary risks. The continuing practice of the prison telephoning the residential units for information, before calling an ambulance, following an emergency code potentially delayed the arrival of paramedics. The lack of access for patients to their appointments caused some patients to miss or seriously delay their treatment, and not receive essential medications at the times prescribed. The practice of health care staff having to attend prisoners' residential units and places of work to administer their medicines led to safety risks for staff and unsafe medicines administration practices. The waste of NHS resources because of under-utilisation of the GP, dentist and other health care workers passed the risk of inefficient prison practices onto the health providers, and was unacceptable.</p> <p>Recommendation: Prisoners should have access to health and substance use services at the required times, and receive their medicines in a safe manner at the prescribed times.</p>	The governor

S45	<p>Key concern: A large number of prisoners were locked up during the working day.</p> <p>Recommendation: All prisoners should have regular and predictable time out of cell, including sufficient time in the open air to promote rehabilitation and mental well-being.</p>	The governor
S46	<p>Key concern: Leaders and managers had not maintained sufficient oversight of the quality of education, skills and work provision, or acted to resolve weaknesses in it. They did not provide sufficient activity places to enable all prisoners to be purposefully occupied. The education curriculum did not meet the needs and starting points of prisoners and, in particular, there was insufficient provision in English and mathematics. Staff across the prison did not do enough to ensure that the regime promoted the benefits of purposeful activity, resulting in poor attendance and punctuality.</p> <p>Recommendation: Substantial improvements should be made to the quality of education, skills and work provision, so that: all prisoners can be purposefully occupied for the working day; the curriculum and range of activities meet fully the needs and starting points of prisoners; and the regime supports fully purposeful activities, so that attendance and punctuality improve.</p>	The governor
S47	<p>Key concern: Too much of the education, skills and work provision was poorly planned. As a result, too many prisoners did not make the progress of which they were capable. Prisoners who were employed on the residential units did not have enough work to keep them purposefully occupied. The skills and behaviours that prisoners developed through work were not recognised or recorded.</p> <p>Recommendation: The quality of education, skills and work provision should be improved by ensuring that: learning activities are well planned and provide challenging tasks, so that prisoners make the progress of which they are capable; employed prisoners have enough work to keep them purposefully occupied; and the skills and behaviour that they develop are recorded, so that they can provide prospective employers with an account of the skills they have gained while in custody.</p>	The governor
S48	<p>Key concern: Prison and education staff did not do enough to help prisoners to develop good work-related attitudes and behaviour which would help them to obtain work on release and reduce the likelihood that they will reoffend.</p> <p>Recommendation: Steps should be taken to ensure that prisoners' attitudes to learning and work improve, and they are supported and challenged to behave well and develop the personal, social and work-related attitudes and skills that they</p>	The governor

	need to find work on release, reducing the likelihood that they will reoffend.	
S49	<p>Key concern: Too many prisoners who started education and vocational training courses left these before they completed. Most prisoners who were engaged in prison work could not work towards or achieve accredited qualifications, and staff did not record sufficiently their progress and achievements through work.</p> <p>Recommendation: The outcomes that prisoners achieve should be improved by: reducing the number who leave education and vocational training courses before they complete them; increasing the opportunities that prisoners have to achieve accredited qualifications through prison work; and recognising and recording the progress and achievements of prisoners who work in activities where accredited qualifications are not available.</p>	The governor
S50	<p>Key concern: Most of the population had been transferred from local prisons in the London area, and arrived at the establishment without a current OASys assessment. This was a long-standing systemic weakness, resulting in a delayed assessment and contributing substantially to prisoners being released without having been able to reduce their risk of harm to the public.</p> <p>Recommendation: All prisoners should have an up-to-date OASys assessment before being transferred to Feltham.</p>	To HMPPS
S51	<p>Key concern: The provision of just five sessions in total of the accredited offending behaviour programmes (TSP and Resolve) a year for prisoners who presented a high risk of harm to the public was insufficient and was a missed opportunity to address those risks.</p> <p>Recommendation: There should be sufficient provision of offending behaviour courses, based on the prison's needs analysis and population data, to ensure that all eligible prisoners can undertake a suitable programme to address their risks.</p>	The governor
General recommendations		Directed to:
1.15	There should be a published regime for basic prisoners which is adhered to by staff in all residential areas.	The governor
1.26	Prisoners in segregation should have access to a shower and telephone call daily.	The governor
1.41	Sufficient Listeners should be trained and in place, to give prisoners access at all times.	The governor
2.9	Managers should monitor emergency cell call bell response times to ensure they are responded to promptly.	The governor
2.17	Prisoners should be able to dine communally. (Repeated recommendation 2.82)	The governor

2.45	Prisoners on the 'keep apart' list should only be excluded from corporate worship following a robust risk assessment. (Repeated recommendation 2.34)	The governor
2.54	Patients should be able to complain about health services through a well-advertised, quality-assured, independent health care complaints system.	The governor
2.66	The inpatient unit should be used only for clinical purposes, and prisoners should not be located there to address operational issues.	The governor
3.20	Support and training should be provided to staff, to ensure that they have the skills and confidence to deal with disruptive behaviour.	The governor
3.29	Tutors and instructors should ensure that individual learning plans record prisoners' prior attainment, clearly identifying targets related to their sentence plans, and regularly reviewing and recording progress against these targets.	The governor

Section 6. Appendices

Appendix I: Inspection team

Peter Clarke	Chief inspector
Angus Mulready-Jones	Team leader
Michael Dunkley	Inspector
Chris Rush	Inspector
Emma Sunley	Inspector
Kellie Reeve	Inspector
Martyn Griffiths	Inspector
Keith Humphreys	Inspector
Patricia Taflan	Researcher
Rahul Jalil	Researcher
Catherine Shaw	Researcher
Paul Tarbuck	Lead health and social care inspector
Tania Osborne	Health and social care inspector
Nicola Carlisle	Pharmacist
Dayni Johnson	Care Quality Commission inspector
Malcolm Frazier	Ofsted inspector
Shahram Safavi	Ofsted inspector
Jai Sharda	Ofsted inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2017, the reception and first night environments did not help to make new arrivals feel safe and supported, although induction met their need. Violence against prisoners and staff had increased significantly and was high. Too many young adults felt unsafe and, although the prison was working hard to address this, its response was not effective. The very many restricted regimes used to manage vulnerable and challenging behaviour were mainly punitive, although the risk management team had generated some positive interventions. There was no effective anti-gang strategy. Levels of self-harm were relatively low, and there was a good multidisciplinary approach to managing prisoners in crisis. The incentives system was not always used effectively to promote good behaviour and the use of segregation was high, although there were efforts to reintegrate prisoners quickly. There was insufficient governance of the high use of force. Drug misuse was low. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

Reception and induction processes should be reviewed to ensure that the early days experience is positive for every new arrival. The prison should offer sufficient support, good time out of cell, and a clean, decent living environment. (S35)

Partially achieved

The prison should focus on reducing the number of violent incidents. All incidents should be investigated. Violence reduction and gang strategies should be informed by better analysis of information and consultation with staff, prisoners and families. There should be a coordinated prison-wide approach to managing violence and the impact of gang issues. (S36)

Not achieved

Recommendations

Prisoners arriving at the prison should travel with all their property. (I.4)

Partially achieved

Prisoners should be discharged promptly. (I.5)

Achieved

Care maps for prisoners in crisis should address all the issues raised and be updated at each review. (I.23)

Partially achieved

Listeners should be able to see all prisoners who request them, subject to a risk assessment, and should have a more active role in prisoners' reception and induction. (I.24)

Not achieved

All staff should be trained in safeguarding adults procedures. (I.27)

Not achieved

All departments in the prison should address actions from intelligence reports promptly. (I.35)

Partially achieved

The security committee should set appropriate objectives based on current security intelligence, and these should be effectively communicated to relevant staff. (I.36)

Not achieved

The prison should develop its own policy for incentives that focuses on positive role modelling and rewarding good behaviour. (I.40)

Achieved

The regime for prisoners on basic level should be improved, and all prisoners should have daily association, purposeful activity and access to showers and telephones. (I.41)

Not achieved

Senior managers should implement and oversee effective tracking of adjourned adjudications to ensure that all charges are heard and concluded within a reasonable timescale. (I.44)

Achieved

Use of force reports should be complete and fully justify the need for force. (I.48)

Not achieved

Special accommodation should not be used for young adults and be replaced by an alternative method for managing this age group. (I.49)

Not achieved

An identified health services professional should attend all good order case reviews. (I.55)

Not achieved

All key stakeholders or their representatives should attend segregation monitoring meetings so that relevant actions can be identified and addressed. (I.56)

Not achieved

The drug and alcohol strategy document and accompanying action plan should be updated and informed by a comprehensive needs analysis. (I.62)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2017, some parts of the establishment were run down and accommodation on the induction unit was poor. Prisoners had good access to clean clothes and bedding. Staff–prisoner relationships were generally good, although some staff expressed low expectations of prisoners. The management of equality work was satisfactory but provision had deteriorated for some groups. There were gaps in the chaplaincy service. There was little quality assurance of the application system, and complaints required better data analysis. Health care was good and mental health provision was impressive, but the use of the inpatient unit as a place of safety affected therapeutic care. Outcomes for prisoners were reasonably good against this healthy prison test.

Recommendations

All cells should be well ventilated, and all single cells should have adequate toilet privacy screens. (2.6)

Not achieved

Staff should answer cell call bells promptly. (2.7)

Not achieved

Prisoner applications should be tracked and quality assured. (2.8)

Not achieved

The prison should give a high priority to developing positive staff-prisoner relationships and ensure these are appropriate to the age and maturity of the population. (2.13)

Achieved

Prisoners should have the opportunity to discuss matters through formal consultation. (2.14)

Partially achieved

The prison should identify and address the needs of all groups with protected characteristics, provide regular forums for each group, and promote all aspects of equality and diversity. (2.20)

Not achieved

The treatment of prisoners in all protected groups should be monitored. (2.21)

Partially achieved

Prisoners with disabilities should be readily identifiable to unit staff and, where necessary, should have unit care plans to assist staff meet their needs. (2.29)

Partially achieved

Prisoners on the 'keep apart' list should only be excluded from corporate worship following a robust risk assessment. (2.34)

Not achieved (recommendation repeated, 2.45)

Faith-based classes should be provided to prisoners of all faiths. (2.35)

Not achieved

Complaints should be regularly analysed to identify trends and address any unfair treatment. (2.38)

Achieved

All clinical environments should comply with infection control standards. (2.49)

Not achieved

Sufficient prison officers should be trained in first aid, including use of defibrillators, and ambulances should be called immediately in a medical emergency to ensure a safe response at all times. (2.50)

Not achieved

There should be an integrated prison-wide strategic approach to promote health and wellbeing, including condom provision. (2.51)

Partially achieved

Prisoners should not be located on the inpatient unit for operational reasons. (2.58)

Not achieved

Medicines should be administered to the required professional standards in a safe environment giving prisoners privacy at clinically appropriate times. Prisoners in shared cells should have secure storage for their in-possession medicines. (2.64)

Not achieved

A summary of dental care should be recorded on SystemOne. (2.67)

Achieved

All discipline officers should receive mental health awareness training to enable them to recognise and support prisoners with mental health problems. (2.72)

Achieved

Patients requiring a transfer under the Mental Health Act should be transferred promptly within the current transfer guidelines. (2.73)

Achieved

Prisoners with social care needs should have these identified and met promptly, and prisoners should be able to self-refer for a social care assessment. (2.76)

Not achieved

Breakfast should be large enough for a young adult. (2.80)

Not achieved

Serveries should be cleaned after every meal and food should not be left out overnight. (2.81)

Achieved

Prisoners should be able to dine communally. (2.82)

Partially achieved (recommendation repeated, 2.17)

Prisoners should be able to place a shop order within 24 hours of their arrival. (2.86)

Not achieved

Decisions to remove items from the prison shop list should be regularly reviewed. (2.87)

Achieved

There should be regular consultation with prisoners to ensure that the range of goods on the shop list meets their diverse needs. (2.88)

Achieved

Purposeful activity

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

At the last inspection, in 2017, time out of cell was inadequate. Numerous restrictions and staffing shortfalls affected the provision of a full regime for most prisoners. Managers were focused on improving learning and skills but progress was slow. Too many work and education programmes were cancelled or restricted by the regime and, although there were sufficient spaces for all prisoners, too many remained on the units during the core day. Overall, the quality of learning and skills provision required improvement. Prisoners generally behaved well in activities, but attendance was low in education and prisoners did not achieve at the level expected. Attendance and achievement in vocational training was better. Library and PE provision was good. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

Time out of cell should be increased and all prisoners should get at least one hour in the open air each day. (S37)

Not achieved

Senior managers should reduce the number of cancellations of activities, and ensure that all prisoners are allocated to a purposeful activity which they attend and participate in fully. (S38)

Not achieved

Senior managers should ensure that all prisoners who start on education and vocational training programmes complete them and achieve their qualification. (S39)

Not achieved

Recommendations

The prison's regimes should be managed more effectively to give prisoners better access to learning and skills and work to meet their assessed needs fully. (3.8)

Not achieved

There should be an effective process for allocation to activities that is understood fully by prisoners and meets their resettlement needs. (3.9)

Not achieved

The session observation process should focus on the impact of teaching and learning on prisoners, and raise further the quality of teaching and learning. (3.10)

Not achieved

The prison should ensure that all prisoners' learning needs are properly assessed at induction, and specialist learning support is identified, structured and monitored to ensure that prisoners' needs are met fully. (3.14)

Partially achieved

The standard of teaching and learning in education and vocational training should be raised further to ensure that all prisoners make good progress throughout their learning and achieve their learning aim. (3.19)

Not achieved

Individual learning plans should include personalised and challenging targets to help prisoners make better progress. (3.20)

Not achieved

The prison should increase the amount of support for prisoners with additional learning needs, particularly in English and mathematics, to ensure that they achieve. (3.21)

Not achieved

Managers should ensure that all prisoners who start on courses complete and achieve their learning aim. (3.28)

Not achieved

Prisoner achievement of full functional skills in mathematics and English at levels 1 and 2 should improve significantly. (3.29)

Partially achieved

There should be sufficient trained and qualified staff to provide remedial treatment to prisoners. (3.36)

Partially achieved

PE staff should analyse data on the use of PE facilities to determine the number of prisoners using them and ensure equality of access. (3.37)

Partially achieved

Resettlement

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

At the last inspection, in 2017, the strategic management of resettlement was hampered by the lack of a meaningful analysis of prisoner need, and the services aimed at reducing reoffending was not always appropriately targeted. Too many prisoners arrived without an up-to-date assessment and so risks had not been identified. Sentence planning was not working effectively. Offender supervisors carried out some good work but were overloaded and could not manage all their cases. The backlog of assessments affected public protection work. Reintegration planning was generally good, and pathways work met most resettlement needs. Further work was needed to improve the family contact pathway. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

There should be a regular assessment of resettlement and offender management needs, which should inform a revised resettlement and offender management strategy, allocation of resources, and coordination with other establishments and services. The prison should identify and meet the resettlement and offender management needs of all prisoners. (S40)

Partially achieved

Recommendations

All prisoners should have an up-to-date OASys assessment and sentence plan. Sentence plan targets should focus on the prisoner's offending, risk of reoffending and risk of serious harm, and all prisoners should be given a copy of their sentence plan. (4.17)

Not achieved

The prison should work with community offender supervisors to ensure they respond to home detention curfew requests promptly so that prisoners can be released at their earliest eligibility date. (4.18)

Achieved

The prison should work with the National Probation Service to resolve the longstanding issue of providing probation staff to the offender management unit. (4.22)

Achieved

All prisoners should be able to use the virtual campus to research employment opportunities. (4.33)

Achieved

J2R should share information with the offender management unit about its work with young adults using its service. (4.37)

Achieved

The range and level of support for prisoners to maintain contact with their families should be improved. (4.44)

Achieved

Prisoner access to visits and family days should not be restricted because of their IEP level. (4.45)

Achieved

Visits should start at the advertised times. (4.46)

Achieved

Appendix III: Prison population profile

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

Population breakdown by:

(i) Status	Number of prisoners	%
Sentenced	362	99.7
Convicted but unsentenced	0	0
Remand	1	0.3
Civil prisoners	0	0
Detainees (single power status)	0	0
Detainees (dual power status)	0	0
Total		

(ii) Sentence	Number of sentenced prisoners	%
Less than 6 months	3	0.8
6 months-less than 12 months	10	2.8
12 months-less than 2 years	27	7.4
2 years-less than 4 years	207	57.1
4 years-less than 10 years	115	31.7
10 years and over (not life)	0	0
Life	0	0
Total		

(iii) Length of stay	Sentenced prisoners		Unsentenced prisoners	
	Number	%	Number	%
Less than 1 month	48	13.2	0	0
1 month to 3 months	74	20.4	0	0
3 months to 6 months	91	25	0	0
6 months to 1 year	95	26.1	0	0
1 year to 2 years	49	13.5	0	0
2 years to 4 years	5	1.4	0	0
4 years or more	0	0	0	0
Total				

(iv) Main offence*	Number of prisoners	%
Violence against the person		
Sexual offences		
Burglary		
Robbery		
Theft and handling		
Fraud and forgery		
Drugs offences		
Other offences		
Civil offences		
Offence not recorded/Holding warrant		
Total		

(v) Age	Number of prisoners	%
18 - 20	318	87.6
21 - 29	45	12.4
30 - 39	0	0
40 - 49	0	0
50 - 59	0	0
60 - 69	0	0
70 plus [<i>please state maximum age</i>]	0	0
Total		

(vi) Home address	Number of prisoners	%
Within 50 miles of the prison		
Between 50 and 100 miles of the prison		
Over 100 miles from the prison		
1. Overseas		
2. No fixed address		
Total		

(vii) Nationality	Number of prisoners	%
British	303	83.5
Foreign nationals	59	16.3
Total		

(viii) Ethnicity	Number of prisoners	%
<i>White</i>		
British	81	22.3
Irish	3	0.8
Other White	26	7.2
<i>Mixed</i>		
White and Black Caribbean	15	4.1
White and Black African	4	1.1
White and Asian	5	1.4
Other Mixed	10	2.8
<i>Asian or Asian British</i>		
Indian	2	0.6
Pakistani	14	3.6
Bangladeshi	11	3.0
Other Asian	17	4.7
<i>Black or Black British</i>		
Caribbean	56	15.4
African	67	18.5
Other Black	31	8.5
<i>Chinese or other ethnic group</i>		
Chinese	0	0
Other ethnic group	0	0
Total		

(ix) Religion	Number of prisoners	%
Baptist	0	0
Church of England	38	10.5
Roman Catholic	57	15.7
Other Christian denominations	89	24.5
Muslim	137	37.7
Sikh	1	0.3
Hindu	0	0
Buddhist	1	0.3
Jewish	1	0.3
Other	0	0
No religion	39	10.7
Total	363	

Appendix IV: Summary of questionnaires and interviews

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.¹⁶

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.¹⁷ In smaller establishments we may offer a questionnaire to the entire population.

Distribution and collection of 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.¹⁸ 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 8 July 2019, the prisoner population at HMP/YOI Feltham B was 361. Using the sampling method described above, questionnaires were distributed to 180 prisoners. We

¹⁶ Qualitative analysis of these written comments is undertaken by HMI Prisons researchers and used by inspectors.

¹⁷ 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments).

¹⁸ 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/>

received a total of 154 completed questionnaires, a response rate of 86%. This included two questionnaires completed via face-to-face interview. Six prisoners declined to participate in the survey and 20 questionnaires were either not returned at all, or returned blank.

Survey results and analyses

Over the following pages, we present the full survey results followed by various comparative analyses for HMP/YOI Feltham B. For the comparator analyses, each question was reformulated into a binary 'yes/no' format and affirmative responses compared.¹⁹ 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/YOI Feltham B 2019 compared with those from other HMIP surveys²⁰

- Survey responses from HMP/YOI Feltham B in 2019 compared with survey responses from all other young adult prisons.
- Survey responses from HMP/YOI Feltham B in 2019 compared with survey responses from other young adult prisons inspected since September 2017.
- Survey responses from HMP/YOI Feltham B in 2019 compared with survey responses from HMP/YOI Feltham B in 2017.

Comparisons between self-reported sub-populations of prisoners within HMP/YOI Feltham B 2019²¹

- Responses of prisoners from black or minority ethnic groups compared with those of white prisoners.
- Responses of Muslim prisoners compared with those of non-Muslim prisoners.
- Responses of prisoners who reported that they had a disability compared to those who did not.
- Responses of prisoners who reported that they had mental health problems compared with those who did not.
- Responses of prisoners aged under 21 compared with those aged 21 and over.

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group.²²

In the comparator analyses, statistically significant differences are indicated by shading.²³ 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.

¹⁹ Using the Chi-square test (or Fisher's exact test if there are fewer than five responses in a group).

²⁰ 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.

²¹ These analyses are carried out on summary data from selected survey questions only.

²² A minimum of 10 responses which must also represent at least 10% of the total response.

²³ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. In order to appropriately adjust p-values in light of multiple testing, $p < 0.01$ is considered statistically significant for all comparisons undertaken. This means there is only a 1% likelihood that the difference is due to chance.

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

Survey summary

Background information

I.1	What wing or houseblock are you currently living on?	
	Kingfisher unit	18 (12%)
	Mallard unit	21 (14%)
	Nightingale unit	22 (14%)
	Partridge unit	20 (13%)
	Quail unit	21 (14%)
	Raven unit	25 (16%)
	Swallow unit	22 (14%)
	Segregation unit (Ibis)	2 (1%)
	Health care unit (Wren)	3 (2%)
I.2	How old are you?	
	Under 21	130 (85%)
	21 - 25	23 (15%)
	26 - 29	0 (0%)
	30 - 39	0 (0%)
	40 - 49	0 (0%)
	50 - 59	0 (0%)
	60 - 69	0 (0%)
	70 or over	0 (0%)
I.3	What is your ethnic group?	
	White - English/ Welsh/ Scottish/ Northern Irish/ British	30 (20%)
	White - Irish	1 (1%)
	White - Gypsy or Irish Traveller	3 (2%)
	White - any other White background	5 (3%)
	Mixed - White and Black Caribbean	13 (9%)
	Mixed - White and Black African	3 (2%)
	Mixed - White and Asian	0 (0%)
	Mixed - any other Mixed ethnic background	8 (5%)
	Asian/ Asian British - Indian	0 (0%)
	Asian/ Asian British - Pakistani	7 (5%)
	Asian/ Asian British - Bangladeshi	6 (4%)
	Asian/ Asian British - Chinese	0 (0%)
	Asian - any other Asian Background	2 (1%)
	Black/ Black British - Caribbean	24 (16%)
	Black/ Black British - African	28 (19%)
	Black - any other Black/ African/ Caribbean background	8 (5%)
	Arab	3 (2%)
	Any other ethnic group	10 (7%)
I.4	How long have you been in this prison?	
	Less than 6 months	62 (42%)
	6 months or more	86 (58%)
I.5	Are you currently serving a sentence?	
	Yes	141 (92%)
	Yes - on recall	10 (7%)
	No - on remand or awaiting sentence	1 (1%)
	No - immigration detainee	1 (1%)

1.6	How long is your sentence?	
	Less than 6 months	5 (3%)
	6 months to less than 1 year	13 (9%)
	1 year to less than 4 years	95 (63%)
	4 years to less than 10 years	37 (24%)
	10 years or more	0 (0%)
	IPP (indeterminate sentence for public protection)	0 (0%)
	Life	0 (0%)
	Not currently serving a sentence	2 (1%)

Arrival and reception

2.1	Were you given up-to-date information about this prison before you came here?	
	Yes	30 (20%)
	No	101 (66%)
	Don't remember	21 (14%)
2.2	When you arrived at this prison, how long did you spend in reception?	
	Less than 2 hours	85 (56%)
	2 hours or more	57 (38%)
	Don't remember	10 (7%)
2.3	When you were searched in reception, was this done in a respectful way?	
	Yes	113 (75%)
	No	24 (16%)
	Don't remember	14 (9%)
2.4	Overall, how were you treated in reception?	
	Very well	23 (15%)
	Quite well	99 (65%)
	Quite badly	19 (13%)
	Very badly	7 (5%)
	Don't remember	4 (3%)
2.5	When you first arrived here, did you have any of the following problems?	
	Problems getting phone numbers	47 (31%)
	Contacting family	40 (26%)
	Arranging care for children or other dependants	3 (2%)
	Contacting employers	3 (2%)
	Money worries	20 (13%)
	Housing worries	18 (12%)
	Feeling depressed	34 (22%)
	Feeling suicidal	6 (4%)
	Other mental health problems	14 (9%)
	Physical health problems	10 (7%)
	Drug or alcohol problems (e.g. withdrawal)	6 (4%)
	Problems getting medication	14 (9%)
	Needing protection from other prisoners	19 (13%)
	Lost or delayed property	49 (32%)
	Other problems	19 (13%)
	Did not have any problems	39 (26%)

2.6	Did staff help you to deal with these problems when you first arrived?	
	Yes	22 (15%)
	No	86 (59%)
	Did not have any problems when I first arrived	39 (27%)

First night and induction

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

Tobacco or nicotine replacement	13 (9%)
Toiletries / other basic items	63 (41%)
A shower	41 (27%)
A free phone call	103 (68%)
Something to eat	116 (76%)
The chance to see someone from health care	90 (59%)
The chance to talk to a Listener or Samaritans	13 (9%)
Support from another prisoner (e.g. Insider or buddy)	4 (3%)
Wasn't offered any of these things	17 (11%)

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

Very clean	4 (3%)
Quite clean	40 (26%)
Quite dirty	47 (31%)
Very dirty	58 (38%)
Don't remember	2 (1%)

3.3 Did you feel safe on your first night here?

Yes	112 (75%)
No	30 (20%)
Don't remember	7 (5%)

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

	Yes	No	Don't remember
Access to the prison shop / canteen?	54 (37%)	84 (58%)	7 (5%)
Free PIN phone credit?	58 (39%)	88 (59%)	3 (2%)
Numbers put on your PIN phone?	56 (39%)	78 (54%)	10 (7%)

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

Yes	69 (46%)
No	70 (47%)
Have not had an induction	11 (7%)

On the wing

4.1 Are you in a cell on your own?

Yes	62 (41%)
No, I'm in a shared cell or dormitory	90 (59%)

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

Yes	42 (28%)
No	98 (65%)
Don't know	10 (7%)
Don't have a cell call bell	1 (1%)

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

	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	99 (67%)	48 (33%)	0 (0%)
Can you shower every day?	131 (87%)	19 (13%)	0 (0%)
Do you have clean sheets every week?	66 (45%)	75 (51%)	6 (4%)
Do you get cell cleaning materials every week?	60 (41%)	85 (57%)	3 (2%)
Is it normally quiet enough for you to relax or sleep at night?	106 (71%)	41 (27%)	3 (2%)
Can you get your stored property if you need it?	49 (33%)	67 (45%)	32 (22%)

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

Very clean	12 (8%)
Quite clean	72 (49%)
Quite dirty	42 (29%)
Very dirty	20 (14%)

Food and canteen

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

Very good	6 (4%)
Quite good	64 (42%)
Quite bad	51 (34%)
Very bad	30 (20%)

5.2 Do you get enough to eat at mealtimes?

Always	17 (11%)
Most of the time	42 (28%)
Some of the time	58 (39%)
Never	32 (21%)

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

Yes	58 (38%)
No	89 (59%)
Don't know	4 (3%)

Relationships with staff

6.1 Do most staff here treat you with respect?

Yes	91 (61%)
No	59 (39%)

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

Yes	98 (65%)
No	53 (35%)

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

Yes	61 (40%)
No	90 (60%)

6.4	How helpful is your personal or named officer?	
	Very helpful	33 (22%)
	Quite helpful	31 (21%)
	Not very helpful	29 (19%)
	Not at all helpful	26 (17%)
	Don't know	13 (9%)
	Don't have a personal / named officer	17 (11%)
6.5	How often do you see prison governors, directors or senior managers talking to prisoners?	
	Regularly	14 (9%)
	Sometimes	42 (28%)
	Hardly ever	88 (58%)
	Don't know	8 (5%)
6.6	Do you feel that you are treated as an individual in this prison?	
	Yes	49 (34%)
	No	96 (66%)
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	
	Yes, and things sometimes change	14 (9%)
	Yes, but things don't change	69 (46%)
	No	39 (26%)
	Don't know	28 (19%)

Faith

7.1	What is your religion?	
	No religion	24 (16%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	66 (44%)
	Buddhist	1 (1%)
	Hindu	0 (0%)
	Jewish	0 (0%)
	Muslim	58 (39%)
	Sikh	0 (0%)
	Other	1 (1%)
7.2	Are your religious beliefs respected here?	
	Yes	99 (67%)
	No	16 (11%)
	Don't know	8 (5%)
	Not applicable (no religion)	24 (16%)
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	
	Yes	90 (60%)
	No	8 (5%)
	Don't know	29 (19%)
	Not applicable (no religion)	24 (16%)

7.4	Are you able to attend religious services, if you want to?	
	Yes	108 (72%)
	No	12 (8%)
	Don't know	5 (3%)
	Not applicable (no religion)	24 (16%)

Contact with family and friends

8.1	Have staff here encouraged you to keep in touch with your family / friends?	
	Yes	44 (30%)
	No	105 (70%)
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	89 (59%)
	No	62 (41%)
8.3	Are you able to use a phone every day (if you have credit)?	
	Yes	95 (63%)
	No	56 (37%)
8.4	How easy or difficult is it for your family and friends to get here?	
	Very easy	6 (4%)
	Quite easy	47 (31%)
	Quite difficult	53 (35%)
	Very difficult	38 (25%)
	Don't know	6 (4%)
8.5	How often do you have visits from family or friends?	
	More than once a week	0 (0%)
	About once a week	18 (12%)
	Less than once a week	113 (76%)
	Not applicable (don't get visits)	18 (12%)
8.6	Do visits usually start and finish on time?	
	Yes	72 (57%)
	No	55 (43%)
8.7	Are your visitors usually treated respectfully by staff?	
	Yes	91 (73%)
	No	34 (27%)

Time out of cell

9.1	Do you know what the unlock and lock-up times are supposed to be here (or roll check times if you are in an open prison)?	
	Yes, and these times are usually kept to	66 (43%)
	Yes, but these times are not usually kept to	56 (37%)
	No	30 (20%)

9.2	How long do you usually spend out of your cell on a typical weekday (including time spent at education, work etc.)?	
	Less than 2 hours	53 (36%)
	2 to 6 hours	73 (49%)
	6 to 10 hours	13 (9%)
	10 hours or more	4 (3%)
	Don't know	5 (3%)
9.3	How long do you usually spend out of your cell on a typical Saturday or Sunday?	
	Less than 2 hours	125 (83%)
	2 to 6 hours	19 (13%)
	6 to 10 hours	4 (3%)
	10 hours or more	2 (1%)
	Don't know	0 (0%)
9.4	How many days in a typical week do you have time to do domestics (shower, clean cell, use the wing phones etc.)?	
	None	6 (4%)
	1 or 2	33 (22%)
	3 to 5	35 (24%)
	More than 5	59 (40%)
	Don't know	15 (10%)
9.5	How many days in a typical week do you get association, if you want it?	
	None	3 (2%)
	1 or 2	11 (7%)
	3 to 5	18 (12%)
	More than 5	113 (75%)
	Don't know	6 (4%)
9.6	How many days in a typical week could you go outside for exercise, if you wanted to?	
	None	3 (2%)
	1 or 2	27 (18%)
	3 to 5	18 (12%)
	More than 5	98 (65%)
	Don't know	5 (3%)
9.7	Typically, how often do you go to the gym?	
	Twice a week or more	58 (39%)
	About once a week	62 (42%)
	Less than once a week	19 (13%)
	Never	10 (7%)
9.8	Typically, how often do you go to the library?	
	Twice a week or more	5 (3%)
	About once a week	48 (32%)
	Less than once a week	76 (51%)
	Never	21 (14%)
9.9	Does the library have a wide enough range of materials to meet your needs?	
	Yes	86 (59%)
	No	38 (26%)
	Don't use the library	21 (14%)

Applications, complaints and legal rights

10.1	Is it easy for you to make an application?			
	Yes			93 (62%)
	No			44 (29%)
	Don't know			14 (9%)
10.2	If you have made any applications here, please answer the questions below:			
		Yes	No	Not made any applications
	Are applications usually dealt with fairly?	54 (40%)	66 (49%)	15 (11%)
	Are applications usually dealt with within 7 days?	19 (14%)	103 (75%)	15 (11%)
10.3	Is it easy for you to make a complaint?			
	Yes			93 (63%)
	No			37 (25%)
	Don't know			18 (12%)
10.4	If you have made any complaints here, please answer the questions below:			
		Yes	No	Not made any complaints
	Are complaints usually dealt with fairly?	29 (21%)	73 (53%)	35 (26%)
	Are complaints usually dealt with within 7 days?	24 (17%)	80 (58%)	35 (25%)
10.5	Have you ever been prevented from making a complaint here when you wanted to?			
	Yes			39 (27%)
	No			80 (56%)
	Not wanted to make a complaint			23 (16%)
10.6	In this prison, is it easy or difficult for you to...			
		Easy	Difficult	Don't know
				Don't need this
	Communicate with your solicitor or legal representative?	32 (22%)	47 (33%)	34 (24%)
	Attend legal visits?	60 (43%)	14 (10%)	41 (29%)
	Get bail information?	14 (10%)	33 (23%)	49 (35%)
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?			
	Yes			47 (32%)
	No			48 (33%)
	Not had any legal letters			50 (34%)

Health care**11.1 How easy or difficult is it to see the following people?**

	Very easy	Quite easy	Quite difficult	Very difficult	Don't know
Doctor	13 (9%)	47 (32%)	44 (30%)	31 (21%)	13 (9%)
Nurse	20 (14%)	63 (43%)	29 (20%)	23 (16%)	11 (8%)
Dentist	7 (5%)	20 (14%)	43 (29%)	59 (40%)	19 (13%)
Mental health workers	11 (7%)	40 (27%)	22 (15%)	15 (10%)	59 (40%)

11.2 What do you think of the quality of the health service from the following people?

	Very good	Quite good	Quite bad	Very bad	Don't know
Doctor	19 (13%)	68 (48%)	19 (13%)	15 (10%)	22 (15%)
Nurse	22 (16%)	63 (45%)	22 (16%)	20 (14%)	14 (10%)
Dentist	15 (11%)	46 (33%)	18 (13%)	13 (9%)	49 (35%)
Mental health workers	15 (11%)	40 (29%)	7 (5%)	7 (5%)	71 (51%)

11.3 Do you have any mental health problems?

Yes	41 (28%)
No	103 (72%)

11.4 Have you been helped with your mental health problems in this prison?

Yes	19 (13%)
No	21 (15%)
Don't have any mental health problems	103 (72%)

11.5 What do you think of the overall quality of the health services here?

Very good	8 (6%)
Quite good	60 (42%)
Quite bad	43 (30%)
Very bad	10 (7%)
Don't know	21 (15%)

Other support needs**12.1 Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?**

Yes	29 (20%)
No	115 (80%)

12.2 If you have a disability, are you getting the support you need?

Yes	8 (6%)
No	17 (12%)
Don't have a disability	115 (82%)

12.3	Have you been on an ACCT in this prison?	
	Yes	18 (13%)
	No	126 (88%)
12.4	If you have been on an ACCT in this prison, did you feel cared for by staff?	
	Yes	11 (8%)
	No	6 (4%)
	Have not been on an ACCT in this prison	126 (88%)
12.5	How easy or difficult is it for you to speak to a Listener, if you need to?	
	Very easy	6 (4%)
	Quite easy	14 (10%)
	Quite difficult	9 (6%)
	Very difficult	11 (8%)
	Don't know	81 (57%)
	No Listeners at this prison	20 (14%)

Alcohol and drugs

13.1	Did you have an alcohol problem when you came into this prison?	
	Yes	8 (6%)
	No	137 (94%)
13.2	Have you been helped with your alcohol problem in this prison?	
	Yes	4 (3%)
	No	3 (2%)
	Did not / do not have an alcohol problem	137 (95%)
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	16 (11%)
	No	129 (89%)
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	5 (3%)
	No	141 (97%)
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	5 (3%)
	No	141 (97%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	7 (5%)
	No	11 (8%)
	Did not / do not have a drug problem	126 (88%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy	13 (9%)
	Quite easy	7 (5%)
	Quite difficult	3 (2%)
	Very difficult	15 (10%)
	Don't know	105 (73%)

13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy	7 (5%)
	Quite easy	3 (2%)
	Quite difficult	8 (6%)
	Very difficult	22 (15%)
	Don't know	104 (72%)

Safety

14.1	Have you ever felt unsafe here?	
	Yes	59 (40%)
	No	89 (60%)
14.2	Do you feel unsafe now?	
	Yes	20 (14%)
	No	125 (86%)
14.3	Have you experienced any of the following types of bullying / victimisation from other prisoners here?	
	Verbal abuse	33 (23%)
	Threats or intimidation	21 (15%)
	Physical assault	17 (12%)
	Sexual assault	0 (0%)
	Theft of canteen or property	11 (8%)
	Other bullying / victimisation	11 (8%)
	Not experienced any of these from prisoners here	99 (70%)
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	
	Yes	24 (17%)
	No	114 (83%)
14.5	Have you experienced any of the following types of bullying / victimisation from staff here?	
	Verbal abuse	56 (39%)
	Threats or intimidation	32 (23%)
	Physical assault	18 (13%)
	Sexual assault	2 (1%)
	Theft of canteen or property	15 (11%)
	Other bullying / victimisation	18 (13%)
	Not experienced any of these from staff here	74 (52%)
14.6	If you were being bullied / victimised by staff here, would you report it?	
	Yes	55 (40%)
	No	82 (60%)

Behaviour management

15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	
	Yes	59 (42%)
	No	63 (44%)
	Don't know what the incentives / rewards are	20 (14%)

15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?		
	Yes		37 (25%)
	No		87 (60%)
	Don't know		19 (13%)
	Don't know what this is		3 (2%)
15.3	Have you been physically restrained by staff in this prison in the last 6 months?		
	Yes		55 (38%)
	No		90 (62%)
15.4	If you have been restrained by staff in this prison in the last 6 months, did anyone come and talk to you about it afterwards?		
	Yes		31 (21%)
	No		21 (14%)
	Don't remember		2 (1%)
	Not been restrained here in last 6 months		91 (63%)
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?		
	Yes		54 (37%)
	No		93 (63%)
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?	18 (34%)	35 (66%)
	Could you shower every day?	9 (17%)	44 (83%)
	Could you go outside for exercise every day?	42 (79%)	11 (21%)
	Could you use the phone every day (if you had credit)?	9 (17%)	44 (83%)

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	103 (71%)	25 (17%)	18 (12%)	0 (0%)
	Vocational or skills training	31 (22%)	43 (31%)	63 (46%)	1 (1%)
	Prison job	31 (22%)	94 (66%)	16 (11%)	1 (1%)
	Voluntary work outside of the prison	4 (3%)	75 (52%)	49 (34%)	15 (10%)
	Paid work outside of the prison	2 (1%)	75 (52%)	48 (33%)	19 (13%)
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	87 (63%)	39 (28%)	13 (9%)	
	Vocational or skills training	62 (45%)	22 (16%)	53 (39%)	
	Prison job	43 (32%)	50 (37%)	41 (31%)	
	Voluntary work outside of the prison	38 (29%)	14 (11%)	80 (61%)	
	Paid work outside of the prison	35 (26%)	15 (11%)	84 (63%)	

16.3	Do staff encourage you to attend education, training or work?	
	Yes	84 (60%)
	No	49 (35%)
	Not applicable (e.g. if you are retired, sick or on remand)	8 (6%)

Planning and progression

17.1	Do you have a custody plan? (This may be called a sentence plan or resettlement plan.)			
	Yes	108 (76%)		
	No	34 (24%)		
17.2	Do you understand what you need to do to achieve the objectives or targets in your custody plan?			
	Yes	80 (74%)		
	No	15 (14%)		
	Don't know what my objectives or targets are	13 (12%)		
17.3	Are staff here supporting you to achieve your objectives or targets?			
	Yes	24 (23%)		
	No	68 (65%)		
	Don't know what my objectives or targets are	13 (12%)		
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	23 (23%)	13 (13%)	65 (64%)
	Other programmes	26 (26%)	15 (15%)	59 (59%)
	One to one work	25 (25%)	15 (15%)	59 (60%)
	Being on a specialist unit	8 (8%)	11 (11%)	80 (81%)
	ROTL - day or overnight release	4 (4%)	9 (9%)	85 (87%)

Preparation for release

18.1	Do you expect to be released in the next 3 months?	
	Yes	59 (42%)
	No	75 (53%)
	Don't know	7 (5%)
18.2	How close is this prison to your home area or intended release address?	
	Very near	4 (7%)
	Quite near	12 (20%)
	Quite far	28 (47%)
	Very far	15 (25%)
18.3	Is anybody helping you to prepare for your release (e.g. a home probation officer, responsible officer, case worker)?	
	Yes	37 (63%)
	No	22 (37%)

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	17 (30%)	12 (21%)	27 (48%)
Getting employment	15 (27%)	23 (41%)	18 (32%)
Setting up education or training	8 (15%)	18 (33%)	28 (52%)
Arranging benefits	13 (24%)	16 (29%)	26 (47%)
Sorting out finances	12 (22%)	15 (27%)	28 (51%)
Support for drug or alcohol problems	4 (7%)	4 (7%)	46 (85%)
Health / mental health support	7 (13%)	6 (11%)	43 (77%)
Social care support	7 (13%)	9 (16%)	40 (71%)
Getting back in touch with family or friends	10 (18%)	4 (7%)	41 (75%)

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

Yes	14 (10%)
No	129 (90%)

19.2 Are you a UK / British citizen?

Yes	128 (90%)
No	14 (10%)

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

Yes	3 (2%)
No	139 (98%)

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

Yes	1 (1%)
No	141 (99%)

19.5 What is your gender?

Male	143 (100%)
Female	0 (0%)
Non-binary	0 (0%)
Other	0 (0%)

19.6 How would you describe your sexual orientation?

Straight / heterosexual	139 (98%)
Gay / lesbian / homosexual	2 (1%)
Bisexual	1 (1%)
Other	0 (0%)

19.7 Do you identify as transgender or transsexual?

Yes	1 (1%)
No	136 (99%)

Final questions about this prison

20.1	Do you think your experiences in this prison have made you more or less likely to offend in the future?	
	More likely to offend	15 (11%)
	Less likely to offend	64 (46%)
	Made no difference	60 (43%)

HMP/YOI Feltham B 2019

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

In this table summary statistics from HMP/YOI Feltham B 2019 are compared with the following HMIP survey data:

- Summary statistics from most recent surveys of all other young adult prisons (3 prisons). Please note that we do not have comparable data for the new questions introduced in September 2017.
- Summary statistics from surveys of young adult prisons conducted since the introduction of the new questionnaire in September 2017 (2 prisons). Please note that this does not include all young adult prisons.
- Summary statistics from HMP/YOI Feltham B January 2017. Please note that we do not have comparable data for the new questions introduced in September 2017.

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

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

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

Number of completed questionnaires returned

n=number of valid responses to question (HMP/YOI Feltham B 2019)

		HMP/YOI Feltham B 2019		All other young adult prisons		HMP/YOI Feltham B 2019		All other young adult prisons surveyed since September 2017		HMP/YOI Feltham B 2019		HMP/YOI Feltham B 2017	
		154	472	154	323	154	153						
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION													
1.2	Are you under 21 years of age?	<i>n=153</i>	85%	75%	85%	80%	85%	88%					
	Are you 25 years of age or younger?	<i>n=153</i>	100%		100%	99%	100%						
1.3	Are you from a minority ethnic group?	<i>n=151</i>	74%	45%	74%	39%	74%	74%					
1.4	Have you been in this prison for less than 6 months?	<i>n=148</i>	42%		42%	46%	42%						
1.5	Are you currently serving a sentence?	<i>n=153</i>	99%	93%	99%	90%	99%	100%					
	Are you on recall?	<i>n=153</i>	7%	4%	7%	3%	7%	9%					
1.6	Is your sentence less than 12 months?	<i>n=152</i>	12%	14%	12%	19%	12%	14%					
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n=152</i>	0%	1%	0%	0%	0%	1%					
7.1	Are you Muslim?	<i>n=150</i>	39%	25%	39%	21%	39%	35%					
11.3	Do you have any mental health problems?	<i>n=144</i>	29%		29%	39%	29%						
12.1	Do you consider yourself to have a disability?	<i>n=144</i>	20%	23%	20%	25%	20%	13%					
19.1	Do you have any children under the age of 18?	<i>n=143</i>	10%	22%	10%	25%	10%	16%					
19.2	Are you a foreign national?	<i>n=142</i>	10%	7%	10%	5%	10%	17%					
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n=142</i>	2%	5%	2%	5%	2%	3%					
19.4	Have you ever been in the armed services?	<i>n=142</i>	1%	2%	1%	3%	1%	2%					
19.5	Is your gender female or non-binary?	<i>n=143</i>	0%		0%	1%	0%						
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n=142</i>	2%	3%	2%	2%	2%	1%					
19.7	Do you identify as transgender or transsexual?	<i>n=137</i>	1%		1%	3%	1%						
ARRIVAL AND RECEPTION													
2.1	Were you given up-to-date information about this prison before you came here?	<i>n=152</i>	20%		20%	16%	20%						
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n=152</i>	56%	71%	56%	74%	56%	70%					
2.3	When you were searched in reception, was this done in a respectful way?	<i>n=151</i>	75%	80%	75%	80%	75%	72%					
2.4	Overall, were you treated very / quite well in reception?	<i>n=152</i>	80%		80%	85%	80%						

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			154	472	154	323	154	153
2.5	When you first arrived, did you have any problems?	<i>n=152</i>	74%	68%	74%	70%	74%	70%
2.5	Did you have problems with:							
	- Getting phone numbers?	<i>n=152</i>	31%	28%	31%	33%	31%	26%
	- Contacting family?	<i>n=152</i>	26%	28%	26%	31%	26%	31%
	- Arranging care for children or other dependents?	<i>n=152</i>	2%		2%	1%	2%	
	- Contacting employers?	<i>n=152</i>	2%	3%	2%	4%	2%	2%
	- Money worries?	<i>n=152</i>	13%	13%	13%	13%	13%	17%
	- Housing worries?	<i>n=152</i>	12%	10%	12%	9%	12%	15%
	- Feeling depressed?	<i>n=152</i>	22%		22%	26%	22%	
	- Feeling suicidal?	<i>n=152</i>	4%		4%	7%	4%	
	- Other mental health problems?	<i>n=152</i>	9%		9%	15%	9%	
	- Physical health problems?	<i>n=152</i>	7%	6%	7%	6%	7%	7%
	- Drugs or alcohol (e.g. withdrawal)?	<i>n=152</i>	4%		4%	11%	4%	
	- Getting medication?	<i>n=152</i>	9%		9%	12%	9%	
	- Needing protection from other prisoners?	<i>n=152</i>	13%	9%	13%	8%	13%	8%
	- Lost or delayed property?	<i>n=152</i>	32%	21%	32%	19%	32%	27%
<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=108</i>	20%	29%	20%	32%	20%	25%
FIRST NIGHT AND INDUCTION								
3.1	Before you were locked up on your first night, were you offered:							
	- Tobacco or nicotine replacement?	<i>n=152</i>	9%	75%	9%	72%	9%	1%
	- Toiletries / other basic items?	<i>n=152</i>	41%	50%	41%	49%	41%	42%
	- A shower?	<i>n=152</i>	27%	51%	27%	64%	27%	9%
	- A free phone call?	<i>n=152</i>	68%	63%	68%	72%	68%	64%
	- Something to eat?	<i>n=152</i>	76%	65%	76%	75%	76%	34%
	- The chance to see someone from health care?	<i>n=152</i>	59%	60%	59%	59%	59%	59%
	- The chance to talk to a Listener or Samaritans?	<i>n=152</i>	9%	21%	9%	19%	9%	15%
	- Support from another prisoner (e.g. Insider or buddy)?	<i>n=152</i>	3%		3%	14%	3%	
	- None of these?	<i>n=152</i>	11%		11%	7%	11%	
3.2	On your first night in this prison, was your cell very / quite clean?	<i>n=151</i>	29%		29%	44%	29%	
3.3	Did you feel safe on your first night here?	<i>n=149</i>	75%	76%	75%	80%	75%	70%
3.4	In your first few days here, did you get:							
	- Access to the prison shop / canteen?	<i>n=145</i>	37%	24%	37%	26%	37%	15%
	- Free PIN phone credit?	<i>n=149</i>	39%		39%	63%	39%	
	- Numbers put on your PIN phone?	<i>n=144</i>	39%		39%	52%	39%	
3.5	Have you had an induction at this prison?	<i>n=150</i>	93%	92%	93%	94%	93%	80%
<i>For those who have had an induction:</i>								
3.5	Did your induction cover everything you needed to know about this prison?	<i>n=139</i>	50%		50%	53%	50%	

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154	472	154	323	154	153

ON THE WING								
4.1	Are you in a cell on your own?	<i>n=152</i>	41%		41%	79%	41%	
4.2	Is your cell call bell normally answered within 5 minutes?	<i>n=151</i>	28%	20%	28%	23%	28%	21%
4.3	On the wing or houseblock you currently live on:							
	- Do you normally have enough clean, suitable clothes for the week?	<i>n=147</i>	67%	53%	67%	56%	67%	53%
	- Can you shower every day?	<i>n=150</i>	87%	68%	87%	88%	87%	57%
	- Do you have clean sheets every week?	<i>n=147</i>	45%	51%	45%	61%	45%	44%
	- Do you get cell cleaning materials every week?	<i>n=148</i>	41%	33%	41%	36%	41%	33%
	- Is it normally quiet enough for you to relax or sleep at night?	<i>n=150</i>	71%	49%	71%	50%	71%	52%
	- Can you get your stored property if you need it?	<i>n=148</i>	33%	20%	33%	21%	33%	15%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	<i>n=146</i>	58%		58%	57%	58%	
FOOD AND CANTEEN								
5.1	Is the quality of the food in this prison very / quite good?	<i>n=151</i>	46%		46%	37%	46%	
5.2	Do you get enough to eat at meal-times always / most of the time?	<i>n=149</i>	40%		40%	33%	40%	
5.3	Does the shop / canteen sell the things that you need?	<i>n=151</i>	38%	59%	38%	70%	38%	17%
RELATIONSHIPS WITH STAFF								
6.1	Do most staff here treat you with respect?	<i>n=150</i>	61%	61%	61%	63%	61%	53%
6.2	Are there any staff here you could turn to if you had a problem?	<i>n=151</i>	65%	54%	65%	57%	65%	60%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<i>n=151</i>	40%	28%	40%	26%	40%	19%
6.4	Do you have a personal officer?	<i>n=149</i>	89%		89%	75%	89%	
<i>For those who have a personal officer:</i>								
6.4	Is your personal or named officer very / quite helpful?	<i>n=132</i>	49%		49%	36%	49%	
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	<i>n=152</i>	9%		9%	7%	9%	
6.6	Do you feel that you are treated as an individual in this prison?	<i>n=145</i>	34%		34%	50%	34%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	<i>n=150</i>	55%		55%	51%	55%	
	If so, do things sometimes change?	<i>n=83</i>	17%		17%	28%	17%	
FAITH								
7.1	Do you have a religion?	<i>n=150</i>	84%	67%	84%	62%	84%	87%
<i>For those who have a religion:</i>								
7.2	Are your religious beliefs respected here?	<i>n=123</i>	81%		81%	70%	81%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	<i>n=127</i>	71%		71%	64%	71%	
7.4	Are you able to attend religious services, if you want to?	<i>n=125</i>	86%		86%	83%	86%	

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CONTACT WITH FAMILY AND FRIENDS								
8.1	Have staff here encouraged you to keep in touch with your family / friends?	<i>n</i> =149	30%		30%	27%	30%	
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	<i>n</i> =151	59%	68%	59%	69%	59%	50%
8.3	Are you able to use a phone every day (if you have credit)?	<i>n</i> =151	63%		63%	71%	63%	
8.4	Is it very / quite easy for your family and friends to get here?	<i>n</i> =150	35%		35%	29%	35%	
8.5	Do you get visits from family/friends once a week or more?	<i>n</i> =149	12%		12%	24%	12%	
<i>For those who get visits:</i>								
8.6	Do visits usually start and finish on time?	<i>n</i> =127	57%		57%	53%	57%	
8.7	Are your visitors usually treated respectfully by staff?	<i>n</i> =125	73%		73%	78%	73%	
TIME OUT OF CELL								
9.1	Do you know what the unlock and lock-up times are supposed to be here?	<i>n</i> =152	80%		80%	78%	80%	
<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</i> =122	54%		54%	60%	54%	
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	<i>n</i> =148	36%	37%	36%	36%	36%	37%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	<i>n</i> =148	3%	4%	3%	4%	3%	3%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	<i>n</i> =150	83%		83%	75%	83%	
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	<i>n</i> =150	1%		1%	1%	1%	
9.4	Do you have time to do domestics more than 5 days in a typical week?	<i>n</i> =148	40%		40%	38%	40%	
9.5	Do you get association more than 5 days in a typical week, if you want it?	<i>n</i> =151	75%		75%	42%	75%	
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	<i>n</i> =151	65%		65%	63%	65%	
9.7	Do you typically go to the gym twice a week or more?	<i>n</i> =149	39%		39%	30%	39%	
9.8	Do you typically go to the library once a week or more?	<i>n</i> =150	35%	27%	35%	29%	35%	26%
<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</i> =124	69%	58%	69%	70%	69%	63%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS								
10.1	Is it easy for you to make an application?	<i>n</i> =151	62%	71%	62%	70%	62%	55%
<i>For those who have made an application:</i>								
10.2	Are applications usually dealt with fairly?	<i>n</i> =120	45%	43%	45%	44%	45%	33%
	Are applications usually dealt with within 7 days?	<i>n</i> =122	16%	16%	16%	18%	16%	16%
10.3	Is it easy for you to make a complaint?	<i>n</i> =148	63%	51%	63%	56%	63%	48%
<i>For those who have made a complaint:</i>								
10.4	Are complaints usually dealt with fairly?	<i>n</i> =102	28%	22%	28%	27%	28%	29%
	Are complaints usually dealt with within 7 days?	<i>n</i> =104	23%	14%	23%	18%	23%	18%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	<i>n</i> =119	33%		33%	31%	33%	

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		154	472	154	323	154	153						
<i>For those who need it, is it easy to:</i>													
10.6	Communicate with your solicitor or legal representative?	n=113	28%		28%	20%	28%						
	Attend legal visits?	n=115	52%		52%	41%	52%						
	Get bail information?	n=96	15%		15%	11%	15%						
<i>For those who have had legal letters:</i>													
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=95	50%	62%	50%	60%	50%	54%					
HEALTH CARE													
11.1	Is it very / quite easy to see:												
	- Doctor?	n=148	41%		41%	45%	41%						
	- Nurse?	n=146	57%		57%	62%	57%						
	- Dentist?	n=148	18%		18%	23%	18%						
	- Mental health workers?	n=147	35%		35%	36%	35%						
11.2	Do you think the quality of the health service is very / quite good from:												
	- Doctor?	n=143	61%		61%	55%	61%						
	- Nurse?	n=141	60%		60%	60%	60%						
	- Dentist?	n=141	43%		43%	36%	43%						
	- Mental health workers?	n=140	39%		39%	40%	39%						
11.3	Do you have any mental health problems?	n=144	29%		29%	39%	29%						
<i>For those who have mental health problems:</i>													
11.4	Have you been helped with your mental health problems in this prison?	n=40	48%		48%	60%	48%						
11.5	Do you think the overall quality of the health services here is very / quite good?	n=142	48%		48%	46%	48%						
OTHER SUPPORT NEEDS													
12.1	Do you consider yourself to have a disability?	n=144	20%	23%	20%	25%	20%	13%					
<i>For those who have a disability:</i>													
12.2	Are you getting the support you need?	n=25	32%		32%	38%	32%						
12.3	Have you been on an ACCT in this prison?	n=144	13%		13%	19%	13%						
<i>For those who have been on an ACCT:</i>													
12.4	Did you feel cared for by staff?	n=17	65%		65%	60%	65%						
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=141	14%		14%	21%	14%						
ALCOHOL AND DRUGS													
13.1	Did you have an alcohol problem when you came into this prison?	n=145	6%	12%	6%	13%	6%	13%					
<i>For those who had / have an alcohol problem:</i>													
13.2	Have you been helped with your alcohol problem in this prison?	n=7	57%	71%	57%	62%	57%	61%					
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=145	11%	26%	11%	29%	11%	20%					
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=146	3%	10%	3%	10%	3%	3%					
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=146	3%		3%	5%	3%						
<i>For those who had / have a drug problem:</i>													
13.6	Have you been helped with your drug problem in this prison?	n=18	39%	66%	39%	61%	39%	57%					
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=143	14%		14%	29%	14%						
13.8	Is it very / quite easy to get alcohol in this prison?	n=144	7%		7%	11%	7%						

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SAFETY								
14.1	Have you ever felt unsafe here?	<i>n</i> =148	40%	52%	40%	47%	40%	42%
14.2	Do you feel unsafe now?	<i>n</i> =145	14%	26%	14%	24%	14%	24%
14.3	Have you experienced any of the following from other prisoners here:							
	- Verbal abuse?	<i>n</i> =141	23%		23%	38%	23%	
	- Threats or intimidation?	<i>n</i> =141	15%		15%	34%	15%	
	- Physical assault?	<i>n</i> =141	12%		12%	20%	12%	
	- Sexual assault?	<i>n</i> =141	0%		0%	3%	0%	
	- Theft of canteen or property?	<i>n</i> =141	8%		8%	19%	8%	
	- Other bullying / victimisation?	<i>n</i> =141	8%		8%	15%	8%	
	- Not experienced any of these from prisoners here	<i>n</i> =141	70%		70%	56%	70%	
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<i>n</i> =138	17%		17%	21%	17%	
14.5	Have you experienced any of the following from staff here:							
	- Verbal abuse?	<i>n</i> =142	39%		39%	37%	39%	
	- Threats or intimidation?	<i>n</i> =142	23%		23%	29%	23%	
	- Physical assault?	<i>n</i> =142	13%		13%	20%	13%	
	- Sexual assault?	<i>n</i> =142	1%		1%	2%	1%	
	- Theft of canteen or property?	<i>n</i> =142	11%		11%	12%	11%	
	- Other bullying / victimisation?	<i>n</i> =142	13%		13%	12%	13%	
	- Not experienced any of these from staff here	<i>n</i> =142	52%		52%	54%	52%	
14.6	If you were being bullied / victimised by staff here, would you report it?	<i>n</i> =137	40%		40%	35%	40%	
BEHAVIOUR MANAGEMENT								
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<i>n</i> =142	42%		42%	41%	42%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<i>n</i> =146	25%		25%	25%	25%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<i>n</i> =145	38%	34%	38%	33%	38%	27%
<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> =54	57%		57%	20%	57%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	<i>n</i> =147	37%		37%	25%	37%	
<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> =53	34%		34%	54%	34%	
	Could you shower every day?	<i>n</i> =53	17%		17%	67%	17%	
	Could you go outside for exercise every day?	<i>n</i> =53	79%		79%	70%	79%	
	Could you use the phone every day (if you had credit)?	<i>n</i> =53	17%		17%	48%	17%	

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EDUCATION, SKILLS AND WORK						
16.1	In this prison, is it easy to get into the following activities:					
	- Education?	<i>n=146</i>	71%		71%	46%
	- Vocational or skills training?	<i>n=138</i>	23%		23%	28%
	- Prison job?	<i>n=142</i>	22%		22%	41%
	- Voluntary work outside of the prison?	<i>n=143</i>	3%		3%	4%
16.2	In this prison, have you done the following activities:					
	- Education?	<i>n=139</i>	91%	83%	91%	83%
	- Vocational or skills training?	<i>n=137</i>	61%	66%	61%	65%
	- Prison job?	<i>n=134</i>	69%	78%	69%	76%
	- Voluntary work outside of the prison?	<i>n=132</i>	39%		39%	34%
	<i>For those who have done the following activities, do you think they will help you on release:</i>					
	- Education?	<i>n=126</i>	69%	58%	69%	57%
	- Vocational or skills training?	<i>n=84</i>	74%	54%	74%	54%
	- Prison job?	<i>n=93</i>	46%	46%	46%	43%
	- Voluntary work outside of the prison?	<i>n=52</i>	73%		73%	44%
	- Paid work outside of the prison?	<i>n=50</i>	70%		70%	46%
16.3	Do staff encourage you to attend education, training or work? <i>n=133</i>					
PLANNING AND PROGRESSION						
17.1	Do you have a custody plan? <i>n=142</i>					
	<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=108</i>					
17.3	Are staff helping you to achieve your objectives or targets? <i>n=105</i>					
17.4	In this prison, have you done:					
	- Offending behaviour programmes?	<i>n=101</i>	36%		36%	40%
	- Other programmes?	<i>n=100</i>	41%		41%	43%
	- One to one work?	<i>n=99</i>	40%		40%	39%
	- Been on a specialist unit?	<i>n=99</i>	19%		19%	20%
	- ROTL - day or overnight release?	<i>n=98</i>	13%		13%	12%
	<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>					
	- Offending behaviour programmes?	<i>n=36</i>	64%		64%	54%
	- Other programmes?	<i>n=41</i>	63%		63%	62%
	- One to one work?	<i>n=40</i>	63%		63%	66%
	- Being on a specialist unit?	<i>n=19</i>	42%		42%	42%
	- ROTL - day or overnight release?	<i>n=13</i>	31%		31%	20%

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PREPARATION FOR RELEASE								
18.1	Do you expect to be released in the next 3 months?	<i>n=141</i>	42%		42%	37%	42%	
<i>For those who expect to be released in the next 3 months:</i>								
18.2	Is this prison very / quite near to your home area or intended release address?	<i>n=59</i>	27%		27%	37%	27%	
18.3	Is anybody helping you to prepare for your release?	<i>n=59</i>	63%		63%	49%	63%	
18.4	Do you need help to sort out the following for when you are released:							
	- Finding accommodation?	<i>n=56</i>	52%		52%	51%	52%	
	- Getting employment?	<i>n=56</i>	68%		68%	58%	68%	
	- Setting up education or training?	<i>n=54</i>	48%		48%	48%	48%	
	- Arranging benefits?	<i>n=55</i>	53%		53%	57%	53%	
	- Sorting out finances?	<i>n=55</i>	49%		49%	51%	49%	
	- Support for drug or alcohol problems?	<i>n=54</i>	15%		15%	31%	15%	
	- Health / mental Health support?	<i>n=56</i>	23%		23%	39%	23%	
	- Social care support?	<i>n=56</i>	29%		29%	29%	29%	
	- Getting back in touch with family or friends?	<i>n=55</i>	26%		26%	31%	26%	
18.4	Are you getting help to sort out the following for when you are released, if you need it:							
	- Finding accommodation?	<i>n=29</i>	59%		59%	43%	59%	
	- Getting employment?	<i>n=38</i>	40%		40%	16%	40%	
	- Setting up education or training?	<i>n=26</i>	31%		31%	22%	31%	
	- Arranging benefits?	<i>n=29</i>	45%		45%	20%	45%	
	- Sorting out finances?	<i>n=27</i>	44%		44%	28%	44%	
	- Support for drug or alcohol problems?	<i>n=8</i>	50%		50%	44%	50%	
	- Health / mental Health support?	<i>n=13</i>	54%		54%	33%	54%	
	- Social care support?	<i>n=16</i>	44%		44%	27%	44%	
	- Getting back in touch with family or friends?	<i>n=14</i>	71%		71%	34%	71%	
FINAL QUESTION ABOUT THIS PRISON								
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	<i>n=139</i>	46%		46%	51%	46%	

HMP/YOI Feltham B 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.
- Muslim prisoners' responses are compared with those of non-Muslim prisoners.

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

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Black and minority ethnic	White	Muslim	Non-Muslim
112	39	58	92

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	85%	85%	81%	87%
1.3	Are you from a minority ethnic group?			90%	64%
7.1	Are you Muslim?	47%	16%		
11.3	Do you have any mental health problems?	24%	40%	15%	35%
12.1	Do you consider yourself to have a disability?	13%	40%	9%	26%
19.2	Are you a foreign national?	11%	8%	12%	8%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	8%	0%	3%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	72%	81%	79%	72%
2.4	Overall, were you treated very / quite well in reception?	79%	84%	77%	82%
2.5	When you first arrived, did you have any problems?	76%	67%	70%	76%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	21%	21%	18%	22%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	76%	76%	72%	79%
3.5	Have you had an induction at this prison?	93%	92%	98%	89%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	51%	44%	45%	52%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	27%	29%	25%	29%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	71%	58%	72%	66%
	- Can you shower every day?	87%	87%	84%	89%
	- Do you have clean sheets every week?	45%	44%	46%	45%
	- Do you get cell cleaning materials every week?	39%	46%	38%	43%
	- Is it normally quiet enough for you to relax or sleep at night?	74%	63%	68%	72%
	- Can you get your stored property if you need it?	34%	32%	31%	35%

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	112	39	58	92

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	39%	43%	36%	42%
5.3	Does the shop / canteen sell the things that you need?	40%	34%	33%	41%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	61%	62%	52%	67%
6.2	Are there any staff here you could turn to if you had a problem?	65%	65%	60%	69%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	38%	46%	40%	39%
6.6	Do you feel that you are treated as an individual in this prison?	32%	41%	33%	34%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	81%	77%	81%	80%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	71%	71%	76%	68%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	28%	36%	22%	34%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	56%	64%	51%	64%
8.3	Are you able to use a phone every day (if you have credit)?	65%	58%	64%	62%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	73%	77%	69%	76%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	35%	40%	28%	41%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	3%	4%	2%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	66%	78%	75%	67%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	65%	51%	61%	63%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	46%	46%	33%	54%
10.3	Is it easy for you to make a complaint?	64%	64%	63%	64%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	30%	27%	20%	36%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	32%	31%	37%	30%

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

Number of completed questionnaires returned

	Black and minority ethnic	White	Muslim	Non-Muslim
	112	39	58	92

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	43%	37%	40%	42%
	- Nurse?	60%	51%	58%	57%
	- Dentist?	18%	21%	16%	20%
	- Mental health workers?	37%	30%	35%	34%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	52%	43%	50%	47%
11.5	Do you think the overall quality of the health services here is very / quite good?	47%	50%	52%	47%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	25%	42%	0%	38%
SAFETY					
14.1	Have you ever felt unsafe here?	36%	46%	46%	35%
14.2	Do you feel unsafe now?	14%	11%	19%	11%
14.3	Not experienced bullying / victimisation by other prisoners	72%	68%	72%	71%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	19%	16%	20%	17%
14.5	Not experienced bullying / victimisation by members of staff	51%	56%	44%	58%
14.6	If you were being bullied / victimised by staff here, would you report it?	44%	32%	38%	41%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	42%	40%	44%	41%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	19%	41%	19%	30%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	44%	24%	42%	36%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	41%	28%	35%	38%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	66%	56%	64%	62%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	73%	83%	70%	80%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	18%	37%	22%	24%
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?	63%	67%	63%	64%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	46%	49%	49%	44%

HMP/YOI Feltham B 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.

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

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

Number of completed questionnaires returned

Mental health problems	No mental health problems	Have a disability	Do not have a disability
41	103	29	115

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	100%	100%	100%	100%
	Are you 50 years of age or older?	0%	0%	0%	0%
1.3	Are you from a minority ethnic group?	63%	77%	46%	80%
7.1	Are you Muslim?	21%	43%	18%	43%
11.3	Do you have any mental health problems?			72%	17%
12.1	Do you consider yourself to have a disability?	53%	8%		
19.2	Are you a foreign national?	8%	10%	11%	9%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	3%	1%	4%	1%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	67%	78%	75%	76%
2.4	Overall, were you treated very / quite well in reception?	73%	84%	83%	81%
2.5	When you first arrived, did you have any problems?	78%	74%	83%	72%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	13%	25%	13%	23%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	73%	77%	75%	77%
3.5	Have you had an induction at this prison?	90%	93%	93%	94%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	43%	54%	59%	49%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	28%	29%	25%	30%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	66%	67%	56%	71%
	- Can you shower every day?	90%	86%	86%	88%
	- Do you have clean sheets every week?	46%	46%	37%	47%
	- Do you get cell cleaning materials every week?	44%	41%	46%	40%
	- Is it normally quiet enough for you to relax or sleep at night?	70%	72%	76%	70%
	- Can you get your stored property if you need it?	31%	36%	29%	36%

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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		
	41	103	Have a disability	Do not have a disability
			29	115

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	40%	41%	43%	39%
5.3	Does the shop / canteen sell the things that you need?	38%	39%	24%	43%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	60%	63%	50%	66%
6.2	Are there any staff here you could turn to if you had a problem?	75%	66%	64%	69%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	50%	39%	48%	40%
6.6	Do you feel that you are treated as an individual in this prison?	43%	31%	35%	35%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	68%	84%	70%	82%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	61%	76%	59%	75%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	38%	27%	35%	29%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	60%	61%	66%	59%
8.3	Are you able to use a phone every day (if you have credit)?	64%	60%	64%	62%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	74%	72%	74%	73%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	41%	32%	41%	34%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	0%	4%	0%	4%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	61%	73%	59%	73%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	51%	68%	52%	67%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	45%	46%	35%	48%
10.3	Is it easy for you to make a complaint?	55%	68%	41%	70%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	45%	24%	29%	30%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	40%	28%	32%	33%

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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
	41	103		29	115

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	49%	39%	36%	43%
	- Nurse?	62%	56%	46%	61%
	- Dentist?	18%	20%	21%	18%
	- Mental health workers?	43%	33%	31%	36%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	48%		40%	53%
11.5	Do you think the overall quality of the health services here is very / quite good?	39%	52%	38%	51%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	39%	14%	32%	
SAFETY					
14.1	Have you ever felt unsafe here?	48%	36%	46%	38%
14.2	Do you feel unsafe now?	17%	13%	17%	13%
14.3	Not experienced bullying / victimisation by other prisoners	59%	75%	69%	70%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	18%	17%	25%	15%
14.5	Not experienced bullying / victimisation by members of staff	51%	51%	55%	50%
14.6	If you were being bullied / victimised by staff here, would you report it?	33%	45%	29%	44%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	44%	42%	39%	43%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	33%	22%	17%	27%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	33%	40%	39%	38%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	37%	36%	31%	38%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	65%	63%	70%	61%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	76%	77%	74%	76%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	31%	19%	10%	26%
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?	71%	59%	63%	63%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	46%	47%	50%	45%

HMP/YOI Feltham B 2019

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:
 - responses of prisoners aged under 21 are compared with those of prisoners 21 and over.
 Please note that these analyses are based on summary data from selected survey questions only.

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

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Number of completed questionnaires returned

Under 21	21 and over
130	23

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.3	Are you from a minority ethnic group?	74%	74%
7.1	Are you Muslim?	37%	48%
11.3	Do you have any mental health problems?	30%	19%
12.1	Do you consider yourself to have a disability?	20%	24%
19.2	Are you a foreign national?	11%	4%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	2%	4%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	72%	87%
2.4	Overall, were you treated very / quite well in reception?	81%	83%
2.5	When you first arrived, did you have any problems?	77%	61%
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	22%	8%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	74%	87%
3.5	Have you had an induction at this prison?	93%	91%
<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	52%	40%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	31%	13%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	71%	52%
	- Can you shower every day?	87%	87%
	- Do you have clean sheets every week?	46%	41%
	- Do you get cell cleaning materials every week?	41%	41%
	- Is it normally quiet enough for you to relax or sleep at night?	73%	61%
	- Can you get your stored property if you need it?	35%	26%

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

Under 21	21 and over
130	23

Number of completed questionnaires returned

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	41%	35%
5.3	Does the shop / canteen sell the things that you need?	40%	30%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	63%	52%
6.2	Are there any staff here you could turn to if you had a problem?	67%	57%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	41%	36%
6.6	Do you feel that you are treated as an individual in this prison?	36%	26%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	80%	84%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	72%	63%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	29%	36%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	58%	61%
8.3	Are you able to use a phone every day (if you have credit)?	61%	70%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	74%	70%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	36%	35%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	2%	4%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	66%	86%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	62%	57%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	45%	47%
10.3	Is it easy for you to make a complaint?	63%	64%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	28%	33%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	30%	42%

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

Number of completed questionnaires returned

Under 21	21 and over
130	23

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	41%	39%
	- Nurse?	57%	57%
	- Dentist?	19%	14%
	- Mental health workers?	34%	41%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	49%	50%
11.5	Do you think the overall quality of the health services here is very / quite good?	49%	43%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	32%	33%
SAFETY			
14.1	Have you ever felt unsafe here?	38%	46%
14.2	Do you feel unsafe now?	12%	23%
14.3	Not experienced bullying / victimisation by other prisoners	71%	67%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	17%	18%
14.5	Not experienced bullying / victimisation by members of staff	51%	59%
14.6	If you were being bullied / victimised by staff here, would you report it?	41%	38%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	45%	18%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	25%	22%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	38%	39%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	35%	48%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	62%	73%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	73%	91%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	21%	30%
PREPARATION FOR RELEASE			
<i>For those who expect to be released in the next 3 months:</i>			
18.3	Is anybody helping you to prepare for your release?	64%	58%
FINAL QUESTION ABOUT THIS PRISON			
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	48%	39%