

Report on an announced inspection of

# **HMP Liverpool**

by HM Chief Inspector of Prisons

**27 August – 6 September 2019**

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



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# Contents

Introduction	5
Fact page	7
About this inspection and report	9
Summary	13
Section 1. Safety	23
Section 2. Respect	31
Section 3. Purposeful activity	45
Section 4. Rehabilitation and release planning	51
Section 5. Summary of recommendations and good practice	57
Section 6. Appendices	61
Appendix I: Inspection team	61
Appendix II: Progress on recommendations from the last report	63
Appendix III: Photographs	71
Appendix IV: Prison population profile	77
Appendix V: Prisoner survey methodology and results	81

### **Glossary of terms**

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

# Introduction

HMP Liverpool is a category B local prison that serves the Merseyside area. For historical reasons it is known locally and indeed beyond as Walton prison, and it is situated just to the north of the city centre. The prison has a very strong local identity, and newly arrived prisoners are greeted by large murals depicting scenes of the city and its surroundings. It is, in every sense of the word, a local prison.

It was last inspected in September 2017, at which time it held around 1,150 prisoners. That inspection found that conditions had deteriorated from a previous poor inspection in 2015. In 2015 our judgement had been that the treatment and conditions of prisoners was 'not sufficiently good' in all four of our healthy prison tests. By the time of the 2017 inspection, there had been no improvements, but on the contrary our judgements in respect and purposeful activity had declined to the lowest possible result, poor.

However, the grades themselves do not tell the full story of what we found in 2017. At that time I described the 'abject failure of HMP Liverpool to offer a safe, decent and purposeful environment' and concluded that 'leaders at all levels, both within the prison and beyond, had presided over the failure to address the concerns raised at the last inspection'. Following the 2015 inspection we had made 89 recommendations, 53 of which had not been achieved and 14 of which had been partially achieved.

Some of the specific issues that we reported in 2017 included the living conditions that were among the worst inspectors had ever seen. There were hundreds of broken windows, filthy blocked lavatories, graffiti, damp, dirt and infestations of rodents and insects. Violence had increased, drugs were readily available, the regime was poor and there were serious failings in health care and purposeful activity. We could see no credible plans to address any of these issues.

The inspection was so troubling that I took the unusual step of writing to the Chief Executive of the Prison Service to express my concerns. (This inspection pre-dated the introduction of the Urgent Notification protocol in November 2017.) In January 2018 the Parliamentary Justice Select Committee held an unprecedented evidence session devoted solely to exploring the issues raised by the inspection. A new governor was appointed to the prison, the population was reduced by between 450 and 500 prisoners, an extensive programme of refurbishment was started and health care services changed to a different provider.

The impact of these and other measures has been dramatic. At this latest inspection we found that 49 out of 72 recommendations made in 2017 had been fully achieved, and a further four partially achieved. This is an exceptionally high achievement rate and is particularly creditable in light of the dire situation at the prison only two years before. I should make clear that the increase in grades in three of our healthy prison tests was not a reward for implementing recommendations. It was quite simply a reflection of what we found, which is set out in the summary and in the report itself. I shall not therefore recount them in detail in this introduction.

The finding that safety was still 'not sufficiently good' at Liverpool was not because there were no plans or actions being taken to address violence. It was simply that those plans had not yet had the desired impact on the outcomes being experienced by prisoners. There were still too many drugs entering the prison, despite a comprehensive supply reduction strategy. The strategy clearly needed to be reviewed and refined. Although instances of violence had been subject to analysis, they were still too high. The measures implemented under CSIP (challenge, support and intervention plans) had yet to move from a process to delivering clear outcomes, and did not address low-level poor behaviour. Levels of self-harm were also a continuing concern and, although there were some good plans, more analysis was needed if the recent signs of a decline in incidents was to be maintained.

The improvement from poor to good for respect represented a remarkable achievement since the last inspection. The squalor and filth we saw in 2017 had gone, replaced by clean and decent living conditions for the vast majority of prisoners. It is important to understand that this had not been brought about simply as a result of the population being reduced and resources channelled towards the prison. That had of course helped, but the real change had been in the quality of leadership and teamwork within the prison and with other partners. There was now a culture of care that I simply could not see in 2017. The following example illustrates this and is emblematic of the change that had taken place.

In 2017 I reported that: 'In one extreme case, I found a prisoner who had complex mental health needs being held in a cell that had no furniture other than a bed. The windows of both the cell and the toilet recess were broken, the light fitting in his toilet was broken with wires exposed, the lavatory was filthy and appeared to be blocked, his sink was leaking and the cell was dark and damp. Extraordinarily, this man had apparently been held in this condition for some weeks. The inspectors had brought this prisoner's circumstances to the attention of the prison, and it should not have needed my personal intervention for this man to be moved from such appalling conditions'.

During this inspection I saw this same man. He was now living as an inpatient in the health care unit. His surroundings were bright and clean. He was still showing clear signs of illness but was alert and responsive – a complete change from the person I had met two years before. He was now receiving proper care and treatment and not being neglected in a squalid, filthy cell.

The judgement for purposeful activity remained at not sufficiently good. While the time prisoners spent out of their cells had improved since the last inspection, too many were still locked up during the working day. There were not enough activity places and attendance rates were too low. There were some good plans to improve, but an injection of pace was needed to give real impetus to what leaders and managers knew needed to be done.

The improvement in rehabilitation and release planning was a very real achievement. There were some weaknesses in public protection arrangements and in risk management. However, the offender assessment system (OASys) was well managed, with no backlog, which is unusual in this type of prison and a solid achievement. The introduction of in-cell phones had made a huge difference to the ability of prisoners to maintain family contact, and the visitors' centre had improved. We saw examples of good practice in the work done to prepare prisoners for release, and these are detailed in the report. It was also notable that, unlike at so many other establishments, the vast majority of prisoners were released to sustainable accommodation.

During a meeting with the governor and senior management team, I was asked to recognise the enormous amount of work that had been done since 2017, and I hope both the words of this report and the grades awarded by the inspection show that recognition. There was still a huge amount of work to do to implement, embed and refine the many plans that were in place. As we have seen in other establishments, improvements can prove to be fragile, and I very much hope this will not prove to be the case at Liverpool, with the necessary support continuing to be provided by HMPPS. Encouragingly, despite all that has been achieved, I saw no signs of complacency within the establishment. It was very clear to me that senior managers were operating as a cohesive team in support of enormously energetic and respected leadership, and not as a group of individuals focusing only on their functional responsibilities. I am sure this has been the key to their success so far and will need to be maintained into the future if the work of transforming HMP Liverpool is to be completed.

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

August 2019

# Fact page

## Task of the establishment

HMP Liverpool is a local category B prison serving the Merseyside area.

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

Prisoners held at the time of inspection: 684

Baseline certified normal capacity: 1,173

In-use certified normal capacity: 700

Operational capacity: 700

## Notable features from this inspection

*There had been six self-inflicted deaths since our last inspection in 2017*

*The population had been reduced by approximately 500 prisoners*

*22% of cells had been taken out of use to improve decency*

*The approach taken by the weekly resettlement board and the resettlement hub represented good practice*

*There were very few outstanding OASys reports*

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

Public

Physical health provider: Spectrum

Mental health provider: Merseycare

Substance use treatment provider: Change, Grow, Live (CGL)

Learning and skills provider: Novus

Community rehabilitation company (CRC): Merseyside CRC

Escort contractor: GeoAmey

## Prison group/Department

North-west – Greater Manchester, Merseyside and Cheshire Group

## Brief history

HMP Liverpool was constructed in 1855 to replace a much older establishment. The prison holds remand and convicted men in addition to a vulnerable prisoner population. There are eight wings, two of which have been refurbished. One wing is currently closed for refurbishment. There is also an inpatient facility located in the health care unit.

## Short description of residential units

A Wing: Drug dependency unit with five landings

B Wing: First night centre with four landings, care and separation unit located on B1

F Wing: Generic with five landings, cell accommodation on landing I out of use

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

G Wing: Generic with five landings, cell accommodation on landing I out of use

H Wing: Closed for refurbishment

I Wing: Generic with five landings, cell accommodation on landing I out of use

J Wing: Wellbeing unit with two landings

K Wing: Vulnerable prisoner unit with five landings

**Name of governor and date in post**

Pia Sinha, November 2017

**Independent Monitoring Board chair**

John Hudson

**Date of last inspection**

September 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:

<b>Safety</b>	Prisoners, particularly the most vulnerable, are held safely.
<b>Respect</b>	Prisoners are treated with respect for their human dignity.
<b>Purposeful activity</b>	Prisoners are able, and expected, to engage in activity that is likely to benefit them.
<b>Rehabilitation and release planning</b>	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 wellbeing 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)*.<sup>2</sup> The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations and examples of good practice arising from the inspection. 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

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

comparisons with other comparable establishments or previous inspections when these are statistically significant.<sup>3</sup>

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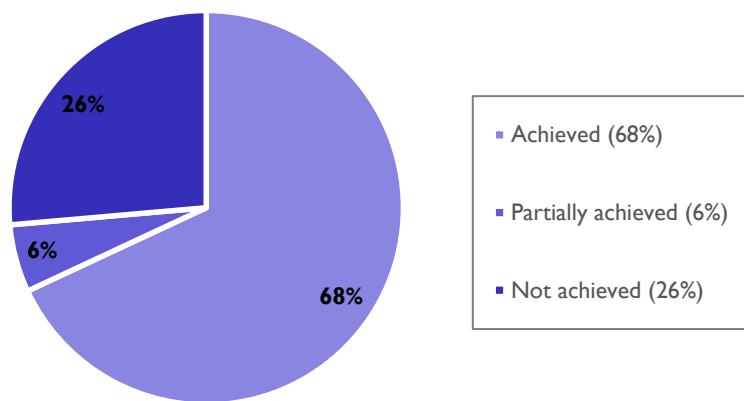
<sup>3</sup> The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.



# Summary

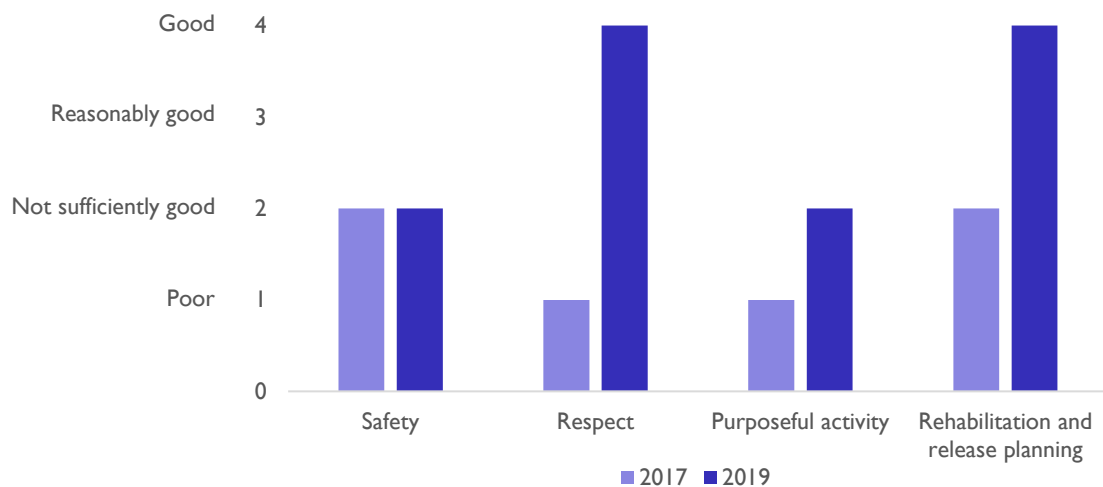
- S1 We last inspected HMP Liverpool in 2017 and made 72 recommendations overall. The prison fully accepted 55 of the recommendations and partially (or subject to resources) accepted 10. It rejected seven of the recommendations.
- S2 At this follow-up inspection we found that the prison had achieved 49 of those recommendations, partially achieved four recommendations and not achieved 19 recommendations.

Figure 1: HMP Liverpool progress on recommendations from last inspection (n=72)



- S3 Since our last inspection of HMP Liverpool outcomes for prisoners stayed the same in one healthy prison area, with safety remaining not sufficiently good. Outcomes improved in all other healthy prison areas. Respect improved from poor to good, purposeful activity improved from poor to not sufficiently good and rehabilitation and release planning improved from not sufficiently good to good.

Figure 2: HMP Liverpool healthy prison outcomes 2017 and 2019<sup>4</sup>



<sup>4</sup> 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 *Most prisoners were now provided with good support during their early days at Liverpool. Too many prisoners still felt unsafe and, although there was less violence than at comparator sites, there was still too much. The prison's response to violence was not robust enough. However, the vulnerable prisoner wing and a wellbeing unit provided welcome places of safety for some prisoners. The formal incentive scheme was better managed than at the last inspection and opportunities to progress motivated good behaviour. The governance of force had improved and levels of force had reduced. Improvements had been made in the segregation unit. The strategy to reduce drugs was comprehensive, but drugs were too readily available. There had been six self-inflicted deaths since the last inspection. Levels of self-harm were too high although prisoners in crisis were well cared for.*  
**Outcomes for prisoners were not sufficiently good against this healthy prison test.**

S5 *At the last inspection in 2017, we found that outcomes for prisoners in Liverpool were not sufficiently good against this healthy prison test. We made 17 recommendations in the area of safety.<sup>5</sup> At this inspection we found that 13 of the recommendations had been achieved, one had been partially achieved and three had not been achieved.*

S6 In our survey, significantly more prisoners than at our last inspection were positive about their experience in reception and on their first night. The reception area had improved and it was now clean, bright and welcoming. First night interviews were robust and conducted in private. The first night cells were generally clean and well equipped and new arrivals received excellent support from peer mentors on the first night centre. The induction for most prisoners was good. It was led by peers, tracked and included essential information about the prison. Vulnerable prisoners did not always spend their first night on the vulnerable prisoner wing or receive a timely induction which contributed to their feelings of being unsafe.

S7 In our survey, 22% of prisoners said they felt unsafe at the time of our inspection. Despite a substantial reduction in population, levels of violence, some of which was serious, had increased slightly since 2017. Levels were now high, although they remained lower than in similar prisons. The monthly safer prisons meeting conducted a useful analysis of data, but actions identified to improve safety took too long to complete. The CSIP<sup>6</sup> process was used to manage incidents of violence or bullying but was not yet fully effective. Not all incidents of violence were investigated which meant the perpetrators of violence were not always sufficiently challenged nor were victims adequately supported. Improvements had been made to the governance of the incentives scheme and prisoners on basic level now had clear behavioural targets. The opportunity to progress and undertake peer support roles motivated prisoners to behave. A wellbeing unit which had been introduced for prisoners with complex needs offered a safe environment and represented good practice. The recent introduction of rehabilitative adjudications to support prisoners using illicit substances was very promising.

S8 The use of force had reduced since the previous inspection and was lower than comparators. It was clear that improvements had been made to the governance of force, and the incidents we reviewed demonstrated good de-escalation. However, the use of fire-

<sup>5</sup> This included recommendations about substance use treatment, which in our updated Expectations (Version 5, 2017) now appear under the healthy prison area of respect.

<sup>6</sup> CSIPs (challenge, support and intervention plans) are used by all adult prisons to manage those prisoners who are violent or pose a heightened risk of being violent. These prisoners are managed and supported on a plan with individualised targets and regular reviews. Some prisons also use the CSIP framework to support victims of violence.

retardant hoods without authority remained a concern, and body-worn video cameras were not being used effectively to record spontaneous incidents.

- S9 Management of the segregation unit had improved since the last inspection. The unit was bright and clean and relationships between staff and prisoners were good. The regime remained too limited, but lengths of stay were not excessive and reintegration planning had improved.
- S10 The management of intelligence was good and the prison was aware of the current risks. In our survey, more than half the population said that drugs were readily available and, while there had been a reduction since 2017, positive mandatory drug testing rates remained too high. The prison's drug strategy focused on rehabilitation and support, and there was evidence of some early success in reducing the use of illicit substances.
- S11 There had been six self-inflicted deaths since our last inspection and recommendations from the Prisons and Probation Ombudsman were well managed. Levels of self-harm had increased since our last inspection and were high compared to similar prisons. The rise was mostly due to a number of prolific self-harmers and more robust recording methods. However, the strategic management of suicide and self-harm was also hindered by an unwieldy action plan and a lack of focus on key issues that the establishment had identified. There was good analysis of self-harm data at the monthly strategic meeting, but attendance by key departments was inconsistent and actions were not always progressed swiftly. Constant watch cells were used frequently with inadequate oversight by senior managers. Most prisoners subject to ACCT<sup>7</sup> case management were positive about the care they received and many positive case studies demonstrated good care for prisoners in crisis.

## Respect

S12 *Relationships between staff and prisoners were good. Living conditions had improved significantly since the last inspection. Prisoners now had a decent breakfast and the introduction of a small shop in reception was good practice. Consultation arrangements were good. The introduction of electronic kiosks supported the application system. The complaints system was managed well but prisoners' perceptions of complaints were negative. The management of equality and diversity had improved significantly although more needed to be done to support prisoners with disabilities. Faith provision benefited from strong leadership. Health and substance use services were good. **Outcomes for prisoners were good against this healthy prison test.***

S13 *At the last inspection in 2017, we found that outcomes for prisoners in Liverpool were poor against this healthy prison test. We made 31 recommendations in the area of respect. At this inspection we found that 22 of the recommendations had been achieved, one had been partially achieved and eight had not been achieved.*

S14 Our survey results were very positive across many aspects of respect. Significantly more prisoners than at the last inspection said staff treated them with respect. We observed positive interactions and staff had good knowledge of the prisoners in their care. The keyworker scheme was delivered well and underpinned good, constructive relationships between staff and prisoners. Case notes demonstrated frequent and supportive contact from staff, and there was good use of peer work across the prison.

<sup>7</sup> Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm

- S15 The overall standard of accommodation had improved significantly since the last inspection and was now good. In our survey and in discussions throughout the week, prisoners were very positive about living conditions and how much the prison had improved generally. Outside areas, communal areas and showers were clean and well maintained. Prisoners had good access to cleaning materials and reasonable access to clean clothing and bedding. There were adequate facilities to wash their own clothes. Graffiti and offensive displays had all but been eradicated. Cells were clean and, with some exceptions, well equipped. Access to electronic kiosks enabled prisoners to have some control over their daily needs. Association equipment on some units was limited or in disrepair.
- S16 The food provided to prisoners was adequate. Prisoners could now have toast and porridge in addition to the small cereal packs that we criticised at the last inspection. Newly arrived prisoners had access to a well-equipped reception shop, which reduced the risk of accruing debt and represented good practice.
- S17 Consultation arrangements were good. Survey results on applications were much better than we usually see, and most straightforward applications could be submitted using the electronic kiosks. The management of the complaints process had improved and analysis was good. Despite this, only 35% of prisoners in our survey said that responses to complaints were fair and this required further exploration by managers.
- S18 The management of equality and diversity had improved since the last inspection. Oversight of this work was undertaken at an equality action team meeting, which was well attended and purposeful. There was good data analysis and an appropriate response when overrepresentation was identified within protected characteristic groups. Consultation with prisoners with protected characteristics was good but not enough was done to ensure that the needs of prisoners with disabilities were being met. Some black and minority ethnic prisoners told us that they felt they were treated differently to their white counterparts which warranted further investigation. There was good support for foreign national prisoners. Numerous celebratory events had been delivered based on a detailed diversity calendar. Strong leadership of the chaplaincy ensured the provision of good spiritual and pastoral support. All prisoners had access to a chaplain of their faith and there were good links with community faith groups.
- S19 There had been significant improvements in health provision. Governance and partnership arrangements had strengthened and were now driving service improvement. There were short waits to access a good range of primary care services and better care for patients with long-term conditions. Social care arrangements were well organised and prisoners requiring personal care were well supported. Patients on the much-improved inpatient unit received good care, and mental health services had improved significantly since our last inspection. Early days observation and support had improved for patients stabilising on methadone and detoxing from alcohol. There was a wide range of psychological support and flexible clinical treatments for patients with substance use needs. Dental provision was good.



## Purposeful activity

S20 *Time out of cell had improved since the last inspection, but too many prisoners still remained locked up during the core day. Library and gym facilities were good but attendance at the library was low. Leadership and management of education, skills and work activities required improvement. Partnership working had improved and there were a number of new initiatives to improve outcomes. However, there were too few activity places for the population and attendance was still too low. Prisoners in vocational training and prison work developed valuable skills. Too many prisoners did not progress or reach their full potential. Personal development and behaviour were good. Too many prisoners did not complete their qualifications and achievement rates on too many courses were low.*  
**Outcomes for prisoners were not sufficiently good against this healthy prison test.**

S21 *At the last inspection in 2017, we found that outcomes for prisoners in Liverpool were poor against this healthy prison test. We made 10 recommendations in the area of purposeful activity. At this inspection, we found that two of the recommendations had been achieved, two had been partially achieved and six had not been achieved.*

S22 Time out of cell had improved since our last inspection but too many prisoners were still locked behind their cell door during the core day. Prisoners who were unemployed were unlocked for less than an hour each day during the working week which was inadequate. Recent work to improve attendance at activities was promising but not yet effective.

S23 The library was well stocked, including texts in different languages. Attendance had improved since the last inspection but remained too low and was poorly monitored. Gym facilities were good, including the introduction of a full-size football pitch. PE staff supported a range of health and wellbeing activity, including Parkrun.<sup>8</sup> The timetable reflected the needs of the population, although attendance at the gym affected work and learning for some prisoners.

S24 Learning and training environments had improved significantly since the previous inspection. New leaders and managers worked effectively together to focus on improving the quality of the provision and many promising initiatives had been implemented, although these were too recent to identify a positive impact. Senior leaders did not challenge prison and provider managers sufficiently to make the required improvements rapidly enough. The self-assessment report had identified accurately most of the strengths and weaknesses of the provision. Managers had established effective partnership arrangements to support prisoners with careers information, advice and guidance, and resettlement opportunities. The majority of prisoners were allocated to appropriate courses and activities, and allocation to most activities was equitable and timely. However, there were too few activity places for the population and, at the time of the inspection, only three-quarters of prisoners were involved in purposeful activity. Leaders and managers had introduced effective performance management processes, but some teaching and training practices required further development. Staff shortages affected the delivery of some work and qualifications. Managers had made some revisions to the curriculum to meet prisoners' needs and sentence plans better but prisoners did not have enough opportunity to access courses at higher levels, including higher education. The provision for vulnerable prisoners remained limited and some was of poor quality.

S25 Most prisoners developed new and industry-standard skills as a result of the training they received in vocational training and prison work. They demonstrated a positive work ethic,

<sup>8</sup> Parkrun UK is a non-profit organisation that supports more than 700 communities across the country to coordinate free volunteer-led 5k and 2k events for walkers and runners.

were motivated and took pride in their work. Prisoner supervisors and mentors provided valuable support to their peers in activities. Assessment of English and mathematics skills and subsequent allocation to the most appropriate activity were much better for mainstream than for vulnerable prisoners. Target setting and activity planning in most activities were weak and did not inspire prisoners to progress and achieve their full potential. Too often feedback did not provide enough guidance or challenge so that prisoners could make more progress and improve their understanding.

- S26 Most prisoners were motivated to improve their skills and knowledge, were proud of their achievements and improved their confidence and self-esteem. Prisoners developed a good understanding of the benefits of education and training, including English and mathematics. They benefited from detailed and helpful careers advice and guidance that helped them identify their next steps in learning, training and work. Many received support and guidance through their resettlement programmes. Prisoners arrived promptly at most lessons and were prepared and ready to learn. Attendance since the last inspection had been poor but was better at the time of the inspection. The priority given to general appointments continued to affect prisoners' attendance at activities. Prisoners behaved very well in activities and were respectful to each other and staff. The student council was very effective in gathering the views of prisoners to inform and develop the provision. Managers and mentors delivered a very good range of enrichment activities which helped prisoners to develop broader skills such as communication and teamwork.
- S27 The majority of prisoners who completed courses achieved their qualifications. Prisoners made at least the progress expected of them in most activities. Those whose progress was communicated to their next prison using the new progress tracker achieved their qualifications. However, too many prisoners did not complete their courses and achievement rates on too many courses were low. Black and minority ethnic prisoners did not achieve as well as their peers.

## Rehabilitation and release planning

S28 *Children and families work was excellent. Strategic management of reducing reoffending had improved. OASys was generally well managed. High-risk offenders were appropriately managed by probation offender supervisors and contact between offender supervisors and prisoners was reasonably good. Re-categorisation was managed well. Too many eligible prisoners were not released on their home detention curfew date. There were weaknesses in public protection work. There was an appropriate range of interventions and the wellbeing unit was an example of good practice. Work to prepare prisoners for release was excellent. **Outcomes for prisoners were good against this healthy prison test.***

S29 *At the last inspection in 2017, we found that outcomes for prisoners in Liverpool were not sufficiently good against this healthy prison test. We made 14 recommendations in the area of resettlement.<sup>9</sup> At this inspection, we found that 12 of the recommendations had been achieved and two had not been achieved.*

S30 The introduction of in-cell phones to maintain contact with families was excellent. A good range of family days and celebratory events involving families were held throughout the year.

<sup>9</sup> This included recommendations about reintegration planning for drugs and alcohol and reintegration issues for education, skills and work, which in our updated Expectations (Version 5, 2017) now appear under the healthy prison areas of respect and purposeful activity respectively.

- The prison visitors' scheme was well used for those not receiving visits. Significant improvements had been made to the visitors' centre since our previous inspection and it was now bright and welcoming. Visitors were consulted regularly to improve the visits experience.
- S31 Management of reducing reoffending had improved since the last inspection. The purpose of the reducing reoffending and offender management unit strategic meeting was to coordinate the work of relevant departments on the resettlement pathways. However, there had only been three meetings during 2019 and they were not yet used effectively to drive improvements.
- S32 In our survey, 82% of respondents said staff helped them to meet their sentence plan targets, which was much higher than in similar prisons and the last inspection. The backlog of incomplete initial OASys (offender assessment system) reports had been almost eliminated, and reviews of existing plans were completed appropriately in most cases. Most eligible prisoners had a plan to guide them through their sentence. A third of the population was assessed as high risk of harm, all of whom were appropriately supervised by probation offender supervisors. Levels of contact between offender supervisors and prisoners were reasonably good, with good quality case note entries, and there was appropriate communication between prison and community teams. Prisoners received regular support from keyworkers, although few case notes demonstrated an awareness of sentence plans.
- S33 Re-categorisation was managed well, although there were still many long-sentenced prisoners who needed to progress to training prisons, despite the efforts of the prison. Too many prisoners eligible for home detention curfew were released late, predominantly for reasons outside the prison's control.
- S34 We found some inconsistencies in the identification and recording of prisoners subject to multi-agency public protection arrangements (MAPPA). The inter-departmental risk management team meeting was not sufficiently focused on prisoners who presented the highest risk. Child contact processes and phone and mail monitoring arrangements were adequate.
- S35 It was positive that the prison delivered the accredited thinking skills programme, and a number of non-accredited interventions, including Sycamore Tree and Healthy Relationships. The integrated through-the-gate team<sup>10</sup> had well developed plans to deliver a number of short interventions, aimed primarily at prisoners serving shorter sentences. The wellbeing unit afforded a supportive environment for prisoners with complex needs and represented good practice. Work on securing sustainable housing on release was impressive and the vast majority of prisoners were released to sustainable accommodation.
- S36 In our survey, 75% of prisoners said someone was helping them prepare for release, which was much higher than at the last inspection and at similar prisons. Planning for release started on the day of arrival and excellent support was available to prisoners before release, coordinated at a multi-agency resettlement board, which was good practice. A resettlement hub located in the visitors' centre brought together a range of resettlement organisations to provide support for prisoners on the day of release: this was another example of good practice.

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<sup>10</sup> Under enhanced through-the-gate arrangements prisoners are assessed for their level of need against specific areas of delivery and a service is delivered to the right intensity to meet that need.

## Key concerns and recommendations

S37 Key concern: Despite a substantial reduction in population, levels of violence had increased and some incidents were serious. Not all incidents of violence were investigated appropriately and there was a lack of effective interventions to address low-level bullying and violent behaviour.

**Recommendation: All incidents of violence and antisocial behaviour should be investigated thoroughly to ensure that perpetrators are managed consistently and victims are supported.**

S38 Key concern: The self-harm strategy was not focused on the needs of the population and was not sufficiently informed by the analysis of self-harm data. An action plan was incorporated into the strategy and discussed at the safer Liverpool meeting, but attendance at the meeting was inconsistent and an unwieldy action plan was not effective in driving a reduction in self-harm. Too many actions took too long to complete.

**Recommendation: The strategic management of self-harm should ensure that swift and focused action is taken to improve care for prisoners in crisis and to reduce self-harm.**

S39 Key concern: Survey results for prisoners with a disability were more negative than their counterparts. Prisoners in wheelchairs had insufficient access to exercise in the open air. Reasonable adjustments had not been made for a registered blind prisoner. The care provided for a prisoner with potential mental health problems was inadequate.

**Recommendation: Prisoners with disabilities should receive appropriate care and equal access to a purposeful regime.**

S40 Key concern: There were too few activity places for the population. Some staffing instability remained. Prisoners did not have enough opportunity to access courses at higher levels. The provision for vulnerable prisoners remained limited and was not of a high enough quality.

**Recommendation: Leaders should ensure that there are enough high-quality activity places to meet all prisoners' needs and abilities, that they are appropriately staffed and provide relevant qualifications across all levels to help prisoners achieve their full potential and gain suitable employment on release.**

S41 Key concern: The teaching and training practices of some tutors and instructors required further development. Target setting in most education, skills and work activities was weak and did not inspire prisoners to achieve their full potential. Most instructors and tutors who used questioning to assess learning did not do this skilfully enough to check or extend prisoners' knowledge and understanding. In too many lessons, tutors did not plan sufficiently stimulating activities. Too often feedback did not provide enough guidance or challenge for prisoners to progress and deepen their knowledge and understanding.

**Recommendation: Leaders and managers should ensure that teaching, learning and assessment are of a high quality and that teachers and instructors plan stimulating learning activities which include challenging targets to inspire prisoners to achieve their full potential.**

S42 Key concern: New industrial qualifications in warehousing and storage had not been introduced because of staff shortages. Black and minority ethnic prisoners, who were the largest ethnic group, did not achieve as well as their peers. Too many prisoners did not

complete their qualifications and achievement rates on too many courses were low. Not all prisoners understood the options that were available to improve their skills.

**Recommendation: Leaders, managers, tutors and instructors should structure the curriculum to ensure that prisoners complete and achieve relevant qualifications across education, skills and work activities, progress to higher-level courses as appropriate and that there are no discernible differences in the performance of different groups of prisoners.**

S43 Key concern: The integrated risk management team meeting was not sufficiently focused on prisoners who potentially posed the greatest risk before their release. This was exacerbated by the lack of a robust system to identify, record and monitor prisoners subject to MAPPA arrangements.

**Recommendation: Effective arrangements should be made to identify, record and monitor prisoners who pose the greatest risk in preparation for their release.**



# 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 Most new arrivals at Liverpool had short journeys from local courts and were offered food and drink on their journey. Escort vehicles were clean and well equipped. Prisoners alighted quickly from the vehicles and were not routinely handcuffed. There was an effective handover from escort to prison staff which covered risks and concerns about each prisoner.
- I.2 In our survey, significantly more prisoners than at comparator sites and our previous inspection were positive about their experience in reception and on their first night. The reception area and holding rooms had been refurbished since our last inspection and were now clean, bright and welcoming (see Appendix III: Photographs). There were sufficient holding rooms to ensure that vulnerable prisoners were kept safe. On arrival, prisoners were offered hot food, a phone call and shower. The showers had curtains for privacy, but they had not been included in the refurbishment of reception and were worn and tired.
- I.3 Prisoners were met by knowledgeable and enthusiastic peer mentors and Listeners<sup>11</sup> who gave them helpful information about the prison. Peer mentors also helped prisoners write a 'letter to mum' to give their families key information such as visiting hours (see paragraphs 4.2 and 4.9). A well-stocked tuck shop had been introduced in reception and new arrivals were given credit to buy items and reduce the likelihood of getting into debt.
- I.4 First night interviews were robust and conducted in private. The interviews focused on safety and informed the cell-sharing risk assessment. All decisions were signed off by a governor and reviewed the next day.
- I.5 Since our last inspection, the prison had introduced a central tracker to monitor the time prisoners spent in reception. This had led to a reduction in waiting times and prisoners now spent an average of 2.5 hours in reception. We found examples of prisoners spending four or five hours in reception, but this was readily explained and the prison had good oversight of any issues.
- I.6 In our survey, 72% of prisoners said they felt safe on their first night against the comparator of 61% and 53% at the previous inspection. First night procedures had been improved by the introduction of a first night care booklet to record the completion of all necessary screenings and assessments. Prisoner peer workers now ensured that first night cells were ready for new arrivals, and the cells that we looked at were clean and well equipped (see paragraph 2.7).
- I.7 Most new prisoners were located on the first night centre (B wing) where excellent peer mentors provided them with additional information about the prison. However, only 30% of

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<sup>11</sup> Prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners.

vulnerable prisoners said they felt safe on their first night. Prisoners convicted of sexual offences should have been moved from reception to K wing, the vulnerable prisoner wing, but instead they spent their first few days on B wing with very limited time out of cell.

- I.8** Since our previous inspection, an additional member of staff had been introduced to complete first night welfare checks on the first night centre, but new arrivals who were detoxing and went to the drug recovery wing were not checked. During our night visit, the handover that we observed between day and night staff was not thorough and not all new arrivals were monitored.
- I.9** Induction procedures had improved since our last inspection and started the morning after arrival. An induction tracker had been introduced to ensure that all prisoners received their induction. In our survey, 95% of prisoners said they had received an induction against the comparator of 81% and 83% at the previous inspection. The induction that we observed was peer led and comprehensive and included talks from key partners in the prison. However, vulnerable prisoners did not always receive an individual induction the day after arrival as required.

## Recommendations

- I.10 All new arrivals should receive additional welfare checks on their first night.**
- I.11 Vulnerable prisoners should spend their first night on the most appropriate wing with access to a timely induction.**

## Good practice

- I.12** *A tuck-shop had been introduced in reception and prisoners were given credit to buy items from the canteen to reduce the likelihood of getting into debt.*

## Managing behaviour

### Expected outcomes:

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

### Encouraging positive behaviour

- I.13** In our survey, 51% of prisoners said they had felt unsafe at some time at Liverpool. While this was still too high, it was significantly better than the 71% at our previous inspection. Twenty-two per cent of prisoners said they felt unsafe at the time of the inspection.
- I.14** Despite a substantial reduction in the population of about 500 prisoners, reported levels of violence had increased slightly since 2017 and remained high. During the previous six months, there had been 120 incidents of violence between prisoners and 30 assaults on staff. About 10% of the incidents had been classed as serious which was reflected in the cases that we reviewed. Despite the increase, HMPPS performance data indicated that levels of violence at Liverpool were consistently lower than at most other local prisons (see key recommendation S37).



- I.15** The safety strategy covered self-harm and violence reduction and contained a wide range of information, including aspirations for the future. It was based on the national HMPPS safety strategy and included an overarching safety action plan. However, the strategy was unwieldy and inevitably several identified actions had not been addressed, rendering the strategy and action plan less effective in addressing violence at all levels. The prison acknowledged the limitations of this approach and started to address our concerns during the inspection (see key concern S38).
- I.16** A monthly 'safer Liverpool' meeting was designed to identify patterns and trends in violence and self-harm from analysed data. The weekly safety intervention meeting was used as an enhanced case review meeting for prisoners at risk of harm or who had been involved in acts of violence. Attendance by key departments at the safer Liverpool meeting was inconsistent and, despite a useful range and analysis of data, resulting actions took too long to complete, with some taking more than six months.
- I.17** The challenge support and intervention plan<sup>12</sup> (CSIP) had been introduced to manage incidents of violence or bullying and was overseen by the safer custody team. However, the CSIP was not yet fully effective and we found several incidents of violence which had not been investigated despite referrals made through the CSIP process. As a result, the perpetrators of violence were often not robustly challenged and victims were not always given adequate support (see key concern S37).
- I.18** J wing had been re-roled as a wellbeing unit and aimed to support prisoners with their personal and physical wellbeing, including many with complex needs. Prisoners could self-refer or be referred by staff and an admissions panel considered each request. The rehabilitative ethos of the wing and the use of peer support provided a safe and positive environment for prisoners.
- I.19** Very few prisoners were self-isolating. The chaplaincy and the safer custody team had regular contact with these prisoners, and prison visitors provided additional support to self-isolating prisoners and those who had limited contact with the outside world (see paragraphs 2.54 and 4.3).
- I.20** Oversight of the incentives scheme had improved. Fifty-four per cent of prisoners in our survey said that the scheme had treated them fairly and encouraged them to demonstrate good behaviour, which was significantly more than at other local prisons. The prison had developed a community ethos through its use of peer mentors who motivated prisoners to engage with staff and behave well. The dedicated landing for enhanced prisoners was now well established and created a more relaxed community for those located there. However, the enhanced communal areas were poorly maintained, and not up to the standards set in some other prisons.
- I.21** Managerial oversight of the small number of prisoners on basic level of the incentives scheme had improved and regular assurance checks were carried out. Prisoners on basic level now had specific targets to address poor behaviour. Managers did not delay moving prisoners from basic to standard level when their behaviour improved, rather than leaving them on basic for 28 days which we often find elsewhere.

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<sup>12</sup> CSIPs (challenge, support and intervention plans) are used by all adult prisons to manage those prisoners who are violent or pose a heightened risk of being violent. These prisoners are managed and supported on a plan with individualised targets and regular reviews. Some prisons also use the CSIP framework to support victims of violence.

## Good practice

- I.22** *The re-role of J wing as a wellbeing unit was a welcome initiative to support prisoners with their personal and physical wellbeing, including many with complex needs.*

## Adjudications

- I.23** The number of adjudications had reduced since the last inspection and was now comparable to similar prisons.
- I.24** Hearings were held in the segregation unit and improvements had been made to the adjudication room and holding cell which were now decent environments.
- I.25** The adjudication standardisation meeting was scheduled to take place quarterly, although there had been no meeting to cover the period January to March 2019. This had been addressed at the most recent meeting, but several actions had not been completed promptly.
- I.26** As part of the drug strategy, the prison had recently introduced what they termed 'rehabilitative adjudications' which was a promising initiative that aimed to support prisoners using illicit substances and make the prison safer. Rather than relying solely on punishment, the adjudicator offered prisoners charged with a drug-related offence the opportunity to engage with relevant substance misuse services for one month in a bid to address the issues that led to the offence. Progress was assessed by a panel chaired by the governor, involving relevant stakeholders and the prisoner themselves. If sufficient progress had been made, a reduced punishment was awarded, but if the prisoner had not engaged with support services, the adjudication was reopened and the usual punishments would apply.

## Good practice

- I.27** *'Rehabilitative adjudications' offered prisoners charged with a drug-related offence the opportunity to engage with relevant substance misuse services in lieu of a heavier punishment.*

## Use of force

- I.28** In the previous six months, force had been used on 208 occasions, a reduction since the previous inspection and lower than we see in other local prisons. There had been two incidents of baton use in 2019, both of which had been reviewed by the deputy governor to ensure that their use was reasonable and proportionate. There had been an impressive reduction in the use of special accommodation from 19 incidents in the six months before the previous inspection to one documented use for less than 15 minutes between February and July 2019.
- I.29** The governance of force had improved. A full-time use of force coordinator had been appointed. The frequency of scrutiny meetings had increased to monthly and meetings were chaired by the governor or deputy governor. A useful range of data were presented to the meeting to identify any concerns, including analysis of force used on black and minority ethnic prisoners and prisoners with other protected characteristics. While the level of scrutiny had improved, some of the resulting actions took too long to address.
- I.30** In the sample of incidents that we examined, staff statements were not always sufficiently detailed. However, video footage showed that force was justified and that staff had used

good levels of de-escalation. Planned interventions were routinely recorded. We remained concerned that officers continued to wear fire-retardant hoods during interventions even when there was no identified risk of fire in the cell. This was often done without authority or assessment of risk.

- I.31** Body-worn video cameras were not routinely used to record spontaneous incidents and, in the CCTV footage that we reviewed, staff were seen arriving at incidents without activating the cameras. The use of force coordinator had identified this and, in response, had introduced a monthly newsletter which shared good practice on the use of force and helped staff to understand the value of body-worn video footage.

## Recommendations

- I.32** **Fire-retardant hoods for planned removals should only be worn when approved by a senior manager following assessment of risk.**
- I.33** **Managers should ensure that body-worn video cameras are worn and activated during all incidents of force.**

## Segregation

- I.34** Managerial oversight of the segregation unit had improved. The monitoring group met regularly to review a wide range of data and identify emerging issues. Review boards were timetabled to facilitate maximum attendance and safety algorithms were completed on time.
- I.35** Whenever it was deemed necessary to segregate a prisoner subject to ACCT<sup>13</sup> conditions, a senior manager was consulted and a defensible decisions log opened. We were satisfied that this process was taken seriously and saw evidence of prisoners who were not located on the unit following a review.
- I.36** Use of the segregation unit had increased slightly since the last inspection, but the average time spent there had reduced significantly, with few prisoners remaining on the unit for more than 10 days.
- I.37** At the time of the inspection, three of the cells were out of action following damage by some challenging prisoners. These prisoners continued to be managed well on the unit and we observed skilful interventions by unit staff throughout the week to maintain a calm and ordered environment. All prisoners we spoke to were positive about their care on the unit.
- I.38** The unit was much cleaner than at the previous inspection and cells were appropriately furnished. The regime remained too limited and usually consisted of exercise on one of the very small yards, a shower, a telephone call and access to a small stock of books. However, some innovative and impressive in-reach work had been delivered by the education provider. Care and reintegration planning had improved and there were plans for all prisoners on the unit. Off-unit activity had recently been included in re-integration measures for a few prisoners, which was positive.

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<sup>13</sup> Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

# 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.39** Security arrangements were proportionate to a local prison and did not restrict prisoners' access to the regime. Recent improvements to living conditions, such as replacement windows, had enhanced physical security and there were now regular accommodation and cell checks to ensure the fabric of the cell was fit for purpose. Managers provided additional oversight to ensure that improvements to security and decency standards in prisoner accommodation were maintained.
- I.40** Security meetings were held monthly, but attendance by representatives from key departments was inconsistent.
- I.41** There was a good flow of intelligence into the security department and, during the previous six months, managers had introduced a local tactical assessment (LTA) to assess intelligence, identify risks and set appropriate intelligence objectives. The LTA was being used appropriately and key risks involving illicit items, violence and gangs had been identified and acted on. For example, the prison had worked in partnership with HMP Altcourse to use their body scanner to target prisoners suspected of carrying illicit items. Regular security briefings with residential staff had been introduced to exchange information and promote objectives derived from the LTA.
- I.42** Approximately 13% of the population were identified as members of organised crime gangs. There were appropriate systems to monitor and manage these prisoners, a number of whom were suspected of involvement in the movement of illicit items into the prison.
- I.43** Senior managers had a robust approach to corruption prevention and there was good interdepartmental working with the chaplaincy to identify and manage the few prisoners who were known to hold extremist views.
- I.44** A small group of staff now formed part of a search team which ensured that commissioned intelligence-led cell searches were completed in priority order. A weekly performance meeting monitored a range of data across the establishment including the response to intelligence, requested searches and subsequent success rates. In the first six months of the year, more than 93% of requested intelligence-led searches had been completed yielding some impressive results. This was a significant improvement since the last inspection.
- I.45** More than half the respondents in our survey said that drugs were readily available. The random mandatory drug testing (MDT) rate was high at about 23% during the previous six months, of which approximately 3.5% could be attributed to new psychoactive substances (NPS).<sup>14</sup> Although this represented a reduction since 2017, HMPPS reporting data indicated that positive test rates at Liverpool were higher than most other local prisons.

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<sup>14</sup> 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.

- I.46** The prison had conducted 65 suspicion tests during the same period with a 39% positive rate. Too many requests for suspicion tests were not carried out because of staff re-deployment.
- I.47** The drug strategy included a succinct local policy underpinned by a relevant action plan. Well-attended meetings took place monthly and most identified actions were addressed. There was an appropriate focus on rehabilitation and support such as the introduction of the rehabilitative adjudication process (see paragraph I.26) and a weekly 'Know our Prisoner' meeting which identified security led actions and individual support.
- I.48** No prisoner had tested positive for NPS during the previous three months, despite intelligence to indicate its presence in the prison. Managers were working with relevant agencies to understand this and were using drug testing technology to examine items entering the prison.
- I.49** The improvements to the implementation of the local drug and supply reduction strategy were welcome signs of progress, but much of the improvement was very recent and more needed to be done to address the availability of illicit items and levels of drug use.

## Recommendation

- I.50** **All requests for suspicion drug testing should be actioned promptly to detect and deter the use of illicit substances.**

## 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.51** There had been six self-inflicted deaths since our last inspection. A death in custody action plan included all Prisons and Probation Ombudsman recommendations and this was regularly monitored and updated.
- I.52** Levels of self-harm had increased since our last inspection and were high compared to similar prisons. There was evidence that the increase was due to the actions of some prolific self-harmers and more robust recording of incidents. During the previous six months, there had been 397 incidents of self-harm by 48 prisoners compared to 184 incidents by 108 prisoners at the last inspection. During the previous three months, self-harm incidents had started to fall.
- I.53** Regular analysis of self-harm trends was discussed at the monthly safer Liverpool meeting. A recent self-harm summit had also been held to explore self-harm in more depth. The summit involved staff and prisoners and included analysis of self-harm data. Some positive actions had arisen from the summit and the regular analysis of data, but this information was not always used to drive improvements. Attendance at the monthly meeting was inconsistent and actions were not always progressed swiftly. The strategic management of self-harm was also

hampered by an unwieldy action plan and a lack of clear focus (see key concern S38 and paragraph I.15).

- I.54** The most prolific and complex self-harmers were discussed at the weekly safety intervention meeting (see paragraph I.16) which was well attended. Actions were progressed swiftly and we saw positive examples of good care for the most prolific self-harmers. Innovative interventions to support the most complex prisoners included the use of a therapy support dog and the wellbeing unit (see paragraphs 3.36 and 4.31).
- I.55** During the previous six months, 528 ACCT documents had been opened which, in the context of the reduction in population, was more than at our last inspection and at similar prisons. The prison had worked hard to improve the quality of ACCT documents and reviews were now multidisciplinary and completed on time. Care maps incorporated self-harm triggers, but many contained general rather than individual objectives. A consent form had been introduced to try to improve the involvement of families, but uptake had been low and the prison had not involved families in the care map (see paragraph 4.3). Quality assurance of ACCT documents was adequate and prisoners we spoke to were positive about the support they received.
- I.56** An adequate number of trained Listeners provided support to prisoners in crisis. However, vulnerable prisoners located on the induction wing (B wing) said they did not feel comfortable talking to the Listeners on their wing and would have preferred to talk to a Listener from the vulnerable prisoner wing (K wing). Prisoners had in-cell phones which improved their access to the Samaritans support line.
- I.57** The use of constant watch cells was a concern. Although use had dropped from 53 occasions at the previous inspection to 34, there was no managerial oversight of its use. There was no evidence that decisions had been approved by a governor or that the use of constant watch cells was appropriate on every occasion. The day-to-day care of prisoners on a constant watch was mostly limited to an officer monitoring the prisoner from outside their cell rather than proactively engaging with them or accompanying them to a manageable regime activity.

## Recommendation

- I.58** **There should be robust oversight of the use of constant watch cells to ensure that they are only used when necessary.**

## Protection of adults at risk<sup>15</sup>

- I.59** The prison had a safeguarding strategy and staff we spoke to knew how to make a referral. Monthly meetings were held to discuss potential safeguarding referrals and to monitor actions. There had been four adult safeguarding referrals in the past six months. Since our last inspection, the prison had re-established links with the local adult safeguarding board and the head of safer Liverpool attended the board meetings.

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<sup>15</sup> Safeguarding duties apply to an adult who:

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

## Section 2. Respect

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

### Staff-prisoner relationships

**Expected outcomes:**

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

- 2.1 The responses to our survey were very positive across many aspects of respect and significantly more prisoners than at the last inspection said staff treated them with respect. We observed positive interactions and staff had good knowledge of the prisoners in their care. The keyworker scheme was delivered well and underpinned good, constructive relationships between staff and prisoners. Case notes demonstrated frequent and supportive contact from staff, and there was good use of peer work across the prison. Many peer workers worked closely with prison staff, partners and third-party contractors.
- 2.2 Survey results had much improved since the previous inspection in relation to contact with staff. Throughout the week we observed positive interactions between staff and prisoners, and a collective will to live in an improved environment. Staff actively encouraged prisoners to attend activities and could explain absences when they were asked.
- 2.3 The keyworker scheme was well embedded. Electronic case notes were much better than at the last inspection and regular and qualitative comments recorded by wing staff provided an understanding of individual prisoners.
- 2.4 Peer working was well embedded across the prison, motivating prisoners to engage in the prison community and providing invaluable support to fellow prisoners.

### Daily life

**Expected outcomes:**

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

### Living conditions

- 2.5 Living conditions had improved significantly. Most of the previously squalid accommodation (about 20% of cells) had been taken out of service. The remainder had undergone considerable refurbishment including the replacement of the small Victorian windows with much larger modern windows (see Appendix III: Photographs). The prison roll had been reduced by about 500 prisoners which in turn reduced the work load of residential services such as stores, maintenance and administration. This enabled these departments to deliver a better quality of service.
- 2.6 More than 2,000 reported defects had been addressed which contributed to a far more acceptable living environment. Prisoners stopped us throughout the week to tell us how

much conditions had improved and how much better it was for them. This was reflected in our survey where responses to most questions about living conditions were much better than at the last inspection and compared to other local prisons.

- 2.7** Communal and external areas of the prison were now clean and well maintained (see Appendix III: Photographs).
- 2.8** Shower rooms had also been refurbished to a good standard and were deep cleaned each day. Access to showers was very good across the prison. Wing laundries facilitated the washing of personal clothes each week and adequate stocks of prison clothing and bedding were distributed through a weekly exchange process.
- 2.9** Many prisoners still had to share a cell designed for one. This was partially mitigated in cells where the toilet was in a separate adjoining room rather than in the sleeping area. Most cells were now well furnished with sufficient tables, chairs and cupboards for their occupants. However, there were still no lockable cupboards in shared cells to store personal items and medicines (see paragraph 2.97).
- 2.10** H wing was closed for refurbishment at the time of the inspection (see Appendix III: Photographs). It was disappointing that this refurbishment was limited to replacing cell doors and windows, limiting the opportunity to update accommodation to a much more acceptable and sustainable standard. As on K wing, the toilets on H wing remained at the end of bunk beds in cells which were too small for two occupants.
- 2.11** In-cell telephones enabled prisoners to maintain contact with families at times when they would be at home. Prisoners could now choose their meals, book visits and submit applications using electronic kiosks which afforded them some welcome control over their daily lives (see paragraph 2.21). Prisoners understood the requirement to keep cells clean and tidy and there was good access to cleaning materials. The offensive displays policy was enforced robustly and the widespread offensive graffiti that we witnessed at the last inspection had all but gone.
- 2.12** Managerial oversight and quality assurance processes were effective in the maintenance of high standards on most wings. Staff conducted daily checks and selected wing workers also contributed to weekly checks of accommodation. Good attention was paid to ensuring that cell bells were responded to promptly which was borne out in our own tests during the inspection.

## Recommendations

- 2.13** **The single cells on H and K wings should not be used to house more than one prisoner.**
- 2.14** **All shared cells should have lockable storage for personal items and in-possession medications.**

## Residential services

- 2.15** The kitchen was clean and well organised. There were continued difficulties in securing repairs to important equipment such as freezers and ovens, although the reduced roll at the prison made the impact of this manageable. Food trolleys were well maintained and were regularly deep cleaned in the kitchen.



- 2.16** Only 38% of prisoners in our survey said that the food was good or very good. We found the range and quality to be adequate. The small cereal packs we often criticise were now supplemented by toast and porridge each day.
- 2.17** There was regular consultation about food through the prisoner council and surveys were conducted twice a year. Food comments books were available at wing serveries, although they were not on general display and few prisoners were aware of them. There were limited self-catering facilities for prisoners on the enhanced landings and on J wing.
- 2.18** Catering training remained limited to basic food hygiene with no opportunities to gain national qualifications except for the few prisoners who worked in the staff mess. Staff routinely supervised mealtimes but we witnessed poor enforcement of the use of personal protective equipment (such as kitchen whites) and too often food was returned to the kitchen. This suggested a deficiency in portion control or poor communication between the kitchen and the wings.
- 2.19** The range of goods available from the prison shop was reasonable and prisoners could order certain goods through selected catalogues. In our survey, two-thirds of prisoners said that the shop sold things they needed. Prisoners could place shop orders via the electronic kiosks each week from Wednesday to Saturday for delivery the following Saturday. Newly arrived prisoners had access to a well-equipped reception shop, which reduced the risk of accruing debt and was good practice (see paragraph 1.3).

### Prisoner consultation, applications and redress

- 2.20** Consultation with prisoners took place regularly and effectively. Meetings were attended by an appropriate range of managers and prisoner representatives. Formal consultation processes were underpinned by the effective use of peer workers who were engaged in the promotion of improved conditions. Regular contact with managers and staff enabled them to bring deficiencies to the attention of staff as they arose.
- 2.21** The introduction of electronic kiosks had vastly improved the application system and, in our survey, prisoners were much more positive about the timeliness and fairness of the process than at comparator prisons and the previous inspection. In our discussions with prisoners throughout the week, they were positive about their access to the kiosks which enabled them to 'get things done' much more effectively than in the past. The electronic application system was supplemented by prisoner staffed information desks (PIDs) on all units. PID workers provided their peers with helpful information to support them in their daily lives.
- 2.22** Complaint forms were freely available across the prison. In our survey, a significant 67% of prisoners against the comparator of 55% said it was easy to make complaints and 45% said that responses were timely compared with 10% at the previous inspection. However, only 35% of prisoners said that complaints were dealt with fairly.
- 2.23** Complaints that we sampled demonstrated reasonable and courteous responses in most cases. Managerial oversight was much improved and was now good. Regular monitoring and quality control processes identified significant concerns and emerging themes.
- 2.24** Legal services provision remained limited and the profiled legal services officer was regularly redeployed. The offender management unit provided limited support on request. Legal visits were facilitated each weekday and video link facilities were well used to reduce the need for court appearances, undertake legal and probation interviews and facilitate inter-prison visits.

- 2.25** The library held a reasonable stock of legal texts and Prison Service instructions were available on request. The prison no longer had ready access to 'Access to Justice' computers following the centralisation of services. This introduced an additional layer of bureaucracy and no prisoners had been able to access the service in the previous six months.

## Recommendation

- 2.26** **Poor perceptions of the responses to complaints should be explored and addressed to improve confidence in the complaints system.**

## Equality, diversity and faith

### Expected outcomes:

**There is a clear approach to promoting equality of opportunity, eliminating unlawful discrimination and fostering good relationships. The distinct needs of prisoners with particular protected characteristics<sup>16</sup> and any other minority characteristics are recognised and addressed. Prisoners are able to practise their religion. The chaplaincy plays a full part in prison life and contributes to prisoners' overall care, support and rehabilitation.**

### Strategic management

- 2.27** The management of equality and diversity work had improved significantly since our last inspection. There was now effective identification of prisoners in protected groups on arrival, and a senior manager had been appointed to take responsibility for this important area.
- 2.28** An up-to-date equality policy reflected relevant legislation and incorporated strategies to manage prisoners in protected groups. There was a commitment to ensure equality of access for all prisoners and a lead was allocated for each protected characteristic.
- 2.29** The equality team was led by the head of equality and included a full-time equality officer and their line manager. There was still some redeployment of the dedicated equality officer which had the potential to undermine progress. The equality team conducted regular consultation with prisoners in protected groups.
- 2.30** An equality action team meeting took place as scheduled every two months. The meetings were led by the head of equality with excellent attendance from across the prison, including the governor and prisoner equality representatives. The meetings were focused and minutes demonstrated an effective response by the prison to requests from equality representatives. The governor also led a newly formed regional equality meeting for the southern area of the North-west region which presented an opportunity to develop strategy and share best practice.
- 2.31** Equality monitoring data were analysed thoroughly. If disproportionality was identified within protected characteristic groups, further investigation was carried out to determine the cause, for example overrepresentation of younger prisoners on the basic level of the incentives and earned privileges scheme.

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<sup>16</sup> The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

- 2.32** The role of equality representatives had been developed well and they were present on each wing. In our focus groups, the representatives were exceptionally positive about the changes they had witnessed at Liverpool and they felt supported and listened to in their role. A programme of training was delivered by Sefton Community Voluntary Services and additional training had recently been developed by the prison. Supervision meetings were held every two months with the equality representatives, which was a positive initiative and something we do not often find.
- 2.33** Staff could access equality training through a Civil Service e-learning package, although local managers were unable to track take-up. An equality awareness training package had been developed by the equality team. At the time of inspection, two training courses had been completed covering about 30 staff, which was a promising start.
- 2.34** During the previous six months, 13 discrimination incident report forms (DIRFs) had been submitted. There were now dedicated DIRF boxes on every wing, and forms were processed by the equality team who maintained a tracking log. Responses were timely and we only found one that had exceeded the deadline; a holding letter had been sent in that case. The equality officer responded to DIRFs with some oversight by senior management and external scrutiny was carried out by Sefton Community Voluntary Services. The responses to DIRFs were fair and proportionate and showed effective use of the procedure.

### Protected characteristics

- 2.35** At the time of the inspection, 89% of the population were white, 10% were from a black, Asian or minority ethnic background. Fourteen per cent of the population were over 50 years of age.
- 2.36** Consultation with prisoners in protected groups was good and regular forums took place. Prisoners generally spoke positively about consultation arrangements, although some black and Asian prisoners told us they felt they were treated differently to their white counterparts, for example in approval of applications for category D transfers. The prison did not collate data on ethnicity breakdown for this area and we could not verify it.
- 2.37** At the time of the inspection, 116 prisoners were recorded as having a disability. In our survey, prisoners with disabilities reported more negatively in a number of important areas. A higher proportion of prisoners with disabilities felt unsafe compared to those without a disability, and only 40% compared with 68% at the previous inspection said that they had never experienced victimisation or bullying by staff (see key concern S39).
- 2.38** At the time of the inspection, two prisoners used wheelchairs and one was registered blind. We raised concerns about a lack of support and reasonable adjustments for these prisoners. For example, one wheelchair user had not been able to exercise outside for several months. There were still not enough cells to accommodate prisoners in wheelchairs. When the prisoner who was registered blind first arrived, he was placed in his cell without receiving an assisted tour to familiarise him with his surroundings by touch. It was positive that he was assigned a buddy (another prisoner) but insufficient thought had been given about the reasonable adjustments that could have been made to enable him to function independently (see key concern S39).
- 2.39** The health care department provided good support for ageing prisoners and those with complex health needs. The reception health screen for new prisoners incorporated physical as well as hidden disabilities. Prisoners requiring extensive personal care packages were accommodated on the inpatient wing with a wide range of clinicians to provide support. The mental health support was extended to the main prison population by way of weekly drop-in

sessions and 80% of custody staff had received mental health awareness training, which had led to more appropriate referrals (see paragraph 2.86). However, we found one prisoner with complex mental health needs who had been left for prolonged periods in his cell. We raised this and prompt action was taken to move the prisoner to a more suitable location (see key concern S39).

- 2.40** Staff were aware of prisoners with a personal emergency evacuation plan, but not all knew the purpose of the plan which posed a risk to prisoners requiring urgent assistance in an emergency.
- 2.41** We found one prisoner with complex mental health needs who had been left for prolonged periods in his cell. We raised this and prompt action was taken to move the prisoner to a more suitable location.
- 2.42** Equality monitoring data showed an overrepresentation of prisoners under 25 making complaints and on the basic level of the behaviour management scheme. The prison was in the process of investigating this, including discussions at both the younger and older prisoners' forums.
- 2.43** Only two prisoners at the time of the inspection were from a travelling community. There were good links with Irish Community Care in Merseyside, who attended the prison every two weeks to support the maintenance of family links and other pertinent issues.
- 2.44** At the time of the inspection, 6.4% of the population were classified as foreign nationals. Six detainees were held under immigration powers beyond the end of their sentences, which was more than at the last inspection. Support for foreign national prisoners had improved since our last inspection. Two Home Office immigration enforcement surgeries were held: one every fortnight for new arrivals and the other every two months.
- 2.45** There had been a concerted effort to improve the use of professional telephone interpreting services for prisoners who did not speak English, and this was monitored at the equality action team meetings. Use of telephone interpreting had increased significantly since the 2017 inspection.
- 2.46** There was a detailed diversity calendar and numerous celebratory events had been held.

## Recommendations

- 2.47** **The poor perceptions of prisoners from a black and minority ethnic background should be investigated further and addressed.**
- 2.48** **Foreign national detainees should be moved to an immigration removal centre once their criminal sentence has been served.** (Repeated recommendation 2.43)

## Faith and religion

- 2.49** The delivery of faith services had improved significantly since the previous inspection and was very good. A new managing chaplain had taken up post in 2018 and his strong leadership ensured the provision of good spiritual and pastoral support to prisoners.
- 2.50** There were no longer staffing shortfalls among chaplains and all prisoners had access to a chaplain of their faith. Strong community links contributed to this.

- 2.51** A comprehensive rota system ensured that all aspects of pastoral support were covered, including attendance at an average of 100 ACCT<sup>17</sup> reviews each month and individual engagement with prisoners on an ACCT.
- 2.52** In conjunction with Shelter housing, the chaplaincy had established a multidisciplinary resettlement board which met weekly. Numerous other partner agencies attended which had helped to improve links with the community to support resettlement work (see paragraph 4.35).
- 2.53** Sycamore Tree (an accredited victim awareness course) was embedded. Family members were involved in this intervention and were invited to the course completion ceremony.
- 2.54** The visitor volunteer scheme had been relaunched since the last inspection with three volunteers visiting weekly, and a fourth recruited recently. The volunteers supported prisoners who were socially isolated or self-isolating (see paragraph 4.3).

## Health, wellbeing 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.**

- 2.55** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)<sup>18</sup> 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. The Care Quality Commission found no breaches or concerns about regulations during the inspection.

### Strategy, clinical governance and partnerships

- 2.56** Spectrum Healthcare UK Ltd was the lead provider of health services with Mersey Care NHS Trust and Change Grow Live (CGL) identified as the main subcontracted providers. Better Health Liverpool was the branding given to health services in the prison. Partnership arrangements were clear and strong and were driving service improvements. Oversight and governance processes were robust and effective collaboration in the prison was facilitated by a visible and committed leadership team.
- 2.57** A Better Health Liverpool user voice forum ensured that prisoners were consulted to inform service developments. Incident reporting systems were appropriately used and there was clear evidence of lessons being shared with staff to improve patient outcomes.
- 2.58** Health care staff were a prominent and accessible presence on the wings and staffing had stabilised since our last inspection. However, there remained too many vacancies in the primary care nursing team and regular bank and agency staff were routinely used. Agency staff had equal access with substantive staff to the good range of training, managerial support and regular supervision. As a result of this, a good range of skills and consistent care were provided for patients.

<sup>17</sup> Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

<sup>18</sup> 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>.

- 2.59** The clinical records that we reviewed were clear and described key aspects of care with evidence of appropriate care planning. We found equity of access to services, although patients with physical disabilities needed more support to get to the health care centre as they had experienced occasional delays in attending appointments.
- 2.60** The health care centre was a good facility which complied with infection prevention standards. There were sufficient treatment rooms to meet demand. However, the standard of cleanliness and facilities in wing treatment rooms varied. Despite recent major wing refurbishments, the facility serving F and G wings was particularly cramped, with inadequate storage, and was unfit for purpose.
- 2.61** There were good arrangements to ensure a rapid response to medical emergencies. Trained nursing staff were present 24 hours a day. They could readily access appropriate equipment which was regularly checked and maintained.
- 2.62** The health care complaints process was well advertised and matron drop-in clinics now enabled face-to-face resolution of many concerns. Most written responses focused on the issues raised by patients and trends were identified, although enhanced quality assurance could have enabled greater consistency and the identification of learning points.

## Recommendation

- 2.63 All wing treatment areas should comply with infection control and prevention standards and should have sufficient, secure storage space for medicines and other equipment.**

## Promoting health and wellbeing

- 2.64** An impressive and coordinated prison-wide approach to health promotion was led by a governor and a calendar of meaningful events was generated. Wellbeing peer representatives had been introduced and regular prisoner consultation was shaping the current programme. There was a health lead for older adults and ongoing support had been established for these prisoners.
- 2.65** J wing delivered good support in a constructive social environment. There was a focus on sustaining the wellbeing of prisoners with a range of vulnerabilities, some of whom had a history of challenging behaviour.
- 2.66** Opt-out testing for blood-borne viruses was offered with good uptake and arrangements were well advanced for influenza vaccinations. National screening campaigns such as abdominal aortic aneurysm and bowel cancer were delivered and prisoners were able to access smoking cessation support on arrival. A community sexual health specialist supported prisoners at a weekly clinic. Barrier protection was available from wing treatment rooms and the health care centre. Arrangements to manage outbreaks of communicable diseases had been effectively tested since our last inspection.

## Primary care and inpatient services

- 2.67** Prisoners received an initial, comprehensive health screen and onward referral for additional support if required. Reception staff could access community records via the NHS Spine (supports the IT infrastructure for health and social care in England). A registered mental

health nurse completed a secondary well-man screening within seven days, and completion rates had improved significantly since our last inspection to more than 90% in the first quarter of 2019 to 2020.

- 2.68** In our survey, 54% of prisoners said the quality of health services provided was very or quite good against the comparator of 33%. Prisoners could access a wide range of primary health services. GPs from Indigo Primary Care Services ran daily clinics from Monday to Saturday, with routine appointments available in less than 10 days and daily emergency slots. Staff could access out-of-hours advice through the national 111 system. Nurses on duty overnight attended medical emergencies, supported by GPs until 9pm. Prisoners had prompt access to a wide range of daily nurse-led clinics, including wound care and phlebotomy. Allied health professionals, including an optician, physiotherapist and podiatrist, ran regular clinics with short waiting times.
- 2.69** Administrative staff managed health appointment applications, which could be requested via electronic kiosks on the wing. However, non-attendance rates were too high for several clinics, particularly GP clinics, which averaged 40% non-attendance between May and July 2019. Health care managers analysed the reasons for non-attendance and had worked with the prison to try to address any barriers. Recent changes had included increased prisoner movement, and a drop-in clinic at prisoner activities.
- 2.70** Care for prisoners with long-term health conditions was very good and reflected national guidance. Need was appropriately identified and a specialist nurse ran daily clinics and promptly reviewed all prisoners with an identified condition. Patients were involved in developing their own care plans. Care for older prisoners and those requiring wound care was also structured and well documented.
- 2.71** Patients with palliative care needs received compassionate, multidisciplinary care which reflected the national guidance, 'Dying Well in Custody Charter'. Good links with community organisations contributed to the support of these prisoners.
- 2.72** External hospital appointments were well managed and clinical input ensured that urgent appointments went ahead. The reasons for cancellations were reviewed regularly and too many appointments were cancelled because of late attendance.
- 2.73** The 26-bed inpatient unit was full at the time of the inspection, with three patients awaiting admission. Well-led custody staff and nurses met each day to plan care and delivered a consistent and enabling environment which was no longer used for non-clinical purposes.
- 2.74** The communal areas were light and clean except for the exercise yard, which was stark. Garden planters had been ordered and exercise equipment was being considered to encourage wellbeing.
- 2.75** The 24-hour nursing team was stable, although not fully staffed, and had been supplemented by two social carers. Clinicians and officers knew their patients and offered a high quality of shared care while maintaining professional boundaries. Care plans and clinical records were clear and informed the support delivered.
- 2.76** The range of patients was challenging and included complex mental disorders, physical health and social care needs. Several patients were awaiting transfers to mental health hospitals. Patients we spoke to appreciated the care that they received.
- 2.77** The regime had been radically transformed and was unrecognisable from what we had seen 2017. Most patients were unlocked for the majority of the day and had access to an extensive regime. Patients could freely associate in the pleasant dayroom, which had a library, television and games equipment. Patients had ready access to the gym and we

observed therapeutic activities, various groups including music, and eating together. Teachers visited patients who could not attend education, which was helpful. Occasional patients' meetings were held to discuss communal issues and inform changes.

## Social care

- 2.78** An up-to-date memorandum of understanding between the prison and Liverpool City Council (LCC) enabled social care to be delivered to prisoners who required it, with care packages delivered by Spectrum. LCC attended integrated governance meetings which monitored the delivery of care packages effectively.
- 2.79** Anybody could refer prisoners for assessment and a social worker and occupational therapist assessed referrals promptly. Eight prisoners had been referred since January 2019, all of whom met the threshold for social care. At the time of the inspection, two prisoners were receiving extensive personal care packages in the inpatient area as this could not be accommodated on the wings. The prison had completed an audit of capability and there was a credible plan to equip one cell on each wing to a standard more suited to social care. We were told that no category C prisons had been identified which could deliver through care to re-categorised prisoners requiring extensive social-personal care.

## Recommendation

- 2.80** **Recipients of social care who are re-categorised should not be prevented from progressing from category B prisons because of a lack of appropriate social care provision at category C prisons.**

## Mental health care

- 2.81** In our survey, 50% of prisoners said they had mental health problems and 61% against the comparator of 34% said they had received help. We observed that mental health services had been transformed since 2017.
- 2.82** The integrated mental health team had been expanded to include a wide range of clinicians including cognitive therapists, counsellors, learning disability nurses, mental health nurses, occupational therapists, forensic psychiatrists and a social worker. The nurses delivered a seven-day service within a strong multidisciplinary working model, and they were no longer diverted to other duties.
- 2.83** There was a robust approach to the identification of prisoners with mental health or learning disability conditions. The reception health screen for new prisoners contained mental health, learning disability and neurological components. Impressively, all new prisoners were offered a wellbeing mental health interview within three to four days of arrival and all new SystemOne (electronic case notes) records were screened by learning disability nurses to identify indicators of vulnerability. Mental health nurses offered weekly 'drop-in' sessions on each wing to ensure access for prisoners requiring advice and support and learning disability nurses used the north-west individual risk mitigation profile. Both these initiatives were innovative in the prison.
- 2.84** An open referral system for prisoners elicited a same-day response from the duty worker. Mental health and learning disability nurses attended safer custody meetings and ACCT reviews to coordinate activities. Mental health nurses also contributed to segregation



reviews and carried out monthly audits of all patients on the care programme approach<sup>19</sup> (CPA). Patients subject to the CPA and their families received excellent support from the SW POhWER, the independent advocacy service.

- 2.85** About 45% of the population were being monitored by learning disability and mental health workers at any one time, with about 200 in regular therapy. The rich array of therapies included 'Talking Therapies' for cognitive and trauma related problems, group therapies for problems such as sleep disturbance, solution based short-term therapies and client-centred counselling. The occupational therapist delivered practical sessions to prepare prisoners for self-care after release. The average time to see a psychiatrist for a non-urgent appointment had improved and was now three weeks compared to 10 weeks in 2017.
- 2.86** Eighty per cent of custody staff had received mental health awareness training which had resulted in more appropriate referrals. Mental health nurses led reflective practice sessions for custody officers in the wellbeing and inpatient units, which the officers valued.
- 2.87** The nurses and social worker were active in creating and maintaining community links to support patients through the gate. Since January 2019, 17 patients had waited an average of 51 days for transfer to secure mental hospitals, some of whom had chronic and severe conditions. This was unacceptable.

## Recommendation

- 2.88** **Patients requiring admission to secure mental hospitals should be transferred expeditiously and within the current guidelines.**

## Good practice

- 2.89** *The potential for failing to identify prisoners with vulnerabilities was significantly reduced by innovative initiatives: mental health wellbeing reviews, drop-in clinics on the wings, and case-record reviews by learning disability nurses for every new prisoner following reception.*

## Substance use treatment<sup>20</sup>

- 2.90** The strategic approach to substance use had improved. It was informed by a needs assessment and coordinated through an agreed action plan which was monitored at regular, well-attended multidisciplinary meetings.
- 2.91** Spectrum delivered clinical interventions, with Change Grow Live (CGL) providing psychosocial support. Joint working between the providers was well developed and supported by regular meetings. CGL's recovery team was now well staffed, including specialist community and service user coordinators, and a 'revolving door' co-ordinator who provided bespoke care to returning clients. A prison officer had recently joined the team to improve the coordination of support for patients with substance use issues. CGL had also developed training for prison officers, including NPS.<sup>21</sup>

<sup>19</sup> A system to manage individuals diagnosed with complex mental health disorders.

<sup>20</sup> 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).

<sup>21</sup> 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 vaporised and inhaled in e-cigarettes and other devices.

- 2.92** Clinical support for prisoners arriving with substance use problems was good. Reception GPs prescribed medicines for detoxification and substance use dependence, and a substance use GP and/or clinical lead conducted a full clinical review the following day. All patients receiving treatment were reviewed again after five days and 13 weeks by clinical and recovery staff.
- 2.93** At the time of the inspection, 125 patients were receiving methadone and buprenorphine or chlordiazepoxide (opiate and alcohol substitutes). Prescribing was flexible and based on national clinical guidance.
- 2.94** Early days observation of patients stabilising on methadone and detoxing from alcohol had improved since 2017. New hatches had been installed on A wing, the drug treatment unit, which enabled improved observations, and 24-hour observations by health staff were embedded in practice. Prisoners who were stabilising or detoxing were not always located on A wing or the inpatient unit, but they all received regular observations. Health care and prison managers were developing the pathway to improve this process, but this work was not yet fully embedded.
- 2.95** Access to psychosocial interventions had improved significantly, despite continuing high demand. Prisoners received harm reduction advice during induction, and new referrals were seen within three days. At the time of the inspection, the recovery service was supporting 311 prisoners (45% of the population), delivering flexible, wide-ranging individual and group interventions before release. All patients could access regular mutual aid groups and support from accredited peer workers.
- 2.96** Prisoners could receive training in naloxone (an opiate reversal medication) and could access naloxone on release. All prisoners could see a substance use worker before being released, and good liaison with community services on arrival and discharge ensured continuity of care.

## Medicines optimisation and pharmacy services

- 2.97** In-possession medication was supplied by the community pharmacy as patient named items, which were appropriately labelled. However, these medicines were not always promptly received causing short delays in some non-essential medication. The in-possession policy was adhered to with assessments of the prisoner and medicines and regular reviews. Cells holding two prisoners lacked suitable lockable storage for the safe keeping of medication (see recommendation 2.9).
- 2.98** Most supervised medication was administered from stock rather than individually labelled preparations which offered less oversight of supply.
- 2.99** Nurses and pharmacy technicians administered medication three times a day from wing treatment rooms and prescribing and administration were recorded on SystemOne. Sedatives and night doses could be administered by night nurses. Officers generally supervised the administration of medicines well, but treatment rooms serving F and G wings and K and I wings opened on to the wings and queues were not always fully supervised by officers. This compromised confidentiality and increased the risk of diversion. Most patients received their medication appropriately. However, we observed patients who had to choose whether to attend work or collect medicines, and other patients who were unlocked late and were delayed in receiving their medicines.

- 2.100** The treatment room for F and G wings was wholly inadequate. It was too small, with not enough bench and storage space and restricted viewing areas for observing patients. Medicines were transported and stored securely, but in-possession medicines were mixed with other medicines and stock because of the limited storage space. Access to controlled drugs was not sufficiently restricted in the treatment rooms and there was no audit trail of access, such as a controlled drugs key log. These points were addressed during the inspection. Fridge records were appropriately maintained.
- 2.101** There were procedures to monitor patient compliance and appropriate action was taken when prisoners did not attend for medication. Prisoners did not have access to pharmacy-led clinics, but there were plans to start clinics for new medicines, medicine use reviews and over-the-counter medicines.
- 2.102** The prescribing formulary was used appropriately and the pharmacist clinically screened prescriptions and carried out a range of audits, including the use of tradeable medicines, which were presented at monthly medicine management meetings.

## Recommendation

- 2.103 The level of support provided by prison officers during the administration and collection of medication should be enhanced to minimise potential bullying and diversion of supplies.**

## Dental services and oral health

- 2.104** Time for Teeth delivered six clinical sessions a week offering a full range of NHS dental treatments. Two well-equipped dental suites complied fully with infection control standards, with separate areas to enable safe decontamination. Appointments for urgent treatment were ring-fenced and patients had prompt access to dental triage. Access to routine assessment was good. Appointments were available within a week and continuing treatment within three to six weeks, which was good.
- 2.105** Governance and accountability arrangements were clear and effective. Staff training, equipment maintenance and waste disposal were all good. X-rays were not digitally accessible, but a business case had been developed which would enhance the service to patients.



## 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 In our survey, 25% of prisoners said they usually spent less than two hours out of their cell on a typical weekday, compared to 43% at the previous inspection. Sixty-five per cent said they spent less than two hours out of cell at weekends which was much better than at the last inspection and compared to similar establishments.
- 3.2 We found that time out of cell had improved since our last inspection. However, in our roll checks, we still found 33% of prisoners locked in their cells during the core working day.
- 3.3 A new regime for the core day had recently been introduced, but it was not yet embedded and there was confusion about unlock and association periods. Prisoners in full-time employment could expect to spend over 10 hours out of their cell on weekdays, but prisoners who were unemployed spent less than an hour each day, which was inadequate. Only prisoners in full-time employment received association each day; other prisoners received only an hour at weekends. Association equipment on some units needed updating and was not readily accessible during all association periods.
- 3.4 A multidisciplinary process had been introduced to improve attendance at activities. Attendance lists were distributed each day and staff engaged with prisoners refusing to attend. This was a promising initiative but not yet fully effective.
- 3.5 The library was managed by Liverpool City Council. It was warm and welcoming with well stocked shelves and a good range of resources, including texts in different languages. In our survey, two-thirds of prisoners said they had a wide enough range of materials to meet their needs.
- 3.6 Use of the library had improved since our last inspection but remained low. In our survey, 32% of respondents said they went to the library once a week or more against 11% at the previous inspection. Data on attendance were not sufficiently detailed to identify which groups of prisoners attended to enable managers to target promotion of the service effectively.
- 3.7 Legal texts were available but they were out of date. Stock purchases were not informed by the curriculum and working relationships between the library and the education provider were not strong enough. At the time of the inspection, no activities were offered to promote literacy or reading through the library, although Storybook Dads (an initiative to help parents in prison to record bedtime stories and messages for their children) was available.
- 3.8 Gym facilities were good. The introduction of a gym custodial manager had enabled broader and targeted provision. Prisoners had good access to a range of indoor and outdoor sports facilities, which were well maintained. The all-weather sports pitch had been refurbished and

repaired and was now available to use (see Appendix III: Photographs). Most areas were clean but there still were not enough showers for prisoners to use after gym sessions.

- 3.9** There was a range of activities to meet the needs of both older and younger prisoners, for example, chair-based exercise had been introduced for older prisoners and football squad and circuit training for the younger population. Prisoners spoke positively about access to a weekly Parkrun.<sup>22</sup>
- 3.10** The gym programme had been reviewed to meet the varying needs of the population and included a range of programmes to support a healthy lifestyle. However, attendance at the gym affected work and learning for some prisoners. Gym instructor courses accredited at levels 1 and 2 were now offered.

## Recommendation

- 3.11 All prisoners, including those who are unemployed, should have enough time out of their cells to carry out domestic tasks and to have at least one hour of association every day.**

## Education, skills and work activities (Ofsted)<sup>23</sup>

### Expected outcomes:

**All prisoners can engage in activities that are purposeful, benefit them and increase their employability. Prisoners are encouraged and enabled to learn both during and after their sentence. The education, skills and work provision is of a good standard and is effective in meeting the needs of all prisoners.<sup>24</sup>**

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

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

<sup>22</sup> Parkrun UK is a non-profit organisation that supports more than 700 communities across the country to coordinate free volunteer-led 5k and 2k events for walkers and runners.

<sup>23</sup> 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.

<sup>24</sup> In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

## Management of education, skills and work

- 3.13** The new management team had recently developed a clear vision for the future of the education, skills and work provision. Relationships between prison and Novus managers had improved significantly since the previous inspection and were now effective. Leaders and managers had made considerable improvements to nearly all learning and training environments and had started to take action to improve the quality of the provision. However, many initiatives were recent and there was limited evidence of their impact.
- 3.14** Since the previous inspection, senior leaders had not challenged prison and Novus managers sufficiently to help them make the required improvements quickly enough and not all recommendations had been achieved.
- 3.15** Self-assessment and quality monitoring processes had improved. The self-assessment report was broadly accurate and identified the vast majority of the strengths and weaknesses in the provision.
- 3.16** Leaders and managers had established effective partnership arrangements to support prisoners with careers information, advice and guidance, and resettlement. The majority of prisoners were allocated to relevant courses and activities and received appropriate support on release. Allocation to activities was fair, equitable and timely. However, there were too few activity places for the population. Only three-quarters of prisoners were involved in purposeful activity. Recent actions to improve attendance at activities were appropriate but not yet effective (see key concern S40).
- 3.17** Leaders and managers had introduced effective performance management processes to improve the quality of the provision and the experiences of prisoners. Managers had successfully revised their approach to the monitoring of the quality of teaching, learning and assessment and undertook joint observations with Novus managers. However, there were not yet any improvements in the practices of weaker tutors and instructors. Some staffing instability remained, for example in construction.
- 3.18** The pay policy did not act as a disincentive to prisoners to attend education. Prisoners who achieved their qualifications were given bonuses and enhanced pay rates.
- 3.19** Leaders and managers had revised the curriculum slightly to meet prisoners' needs and sentence plans better. However, prisoners did not have enough opportunities to access courses at higher levels, including higher education. Prisoners' use of the virtual campus<sup>25</sup> was predominantly for English and mathematics assessments. However, a few prisoners achieved qualifications through the virtual campus, such as food hygiene (see key concern S40).
- 3.20** The provision for vulnerable prisoners remained limited and was not of a high enough quality. Vulnerable prisoners in the packaging workshop undertook work that was mundane and not sufficiently challenging (see key concern S40).

## Recommendations

- 3.21 Leaders should ensure that attendance rates increase rapidly and are high across education, skills and work activities to ensure that prisoners participate fully in purposeful activity.**

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<sup>25</sup> Prisoner access to community education, training and employment opportunities via the internet.

**3.22 Leaders, including Novus leaders, should further develop prisoners' use of the virtual campus to broaden their learning and job-search opportunities.**

### Quality of provision

**3.23** Tutors and instructors knew their prisoners well and gave appropriate support to help them complete activities and achieve their learning goals. Most tutors and instructors deployed peer mentors and prisoner supervisors very effectively to support prisoners in lessons, workshops and induction. This was a notable feature across the provision which resulted in most prisoners becoming productive learners and workers.

**3.24** Most prisoners developed new practical skills from the training they received in vocational training and prison work. This was particularly evident in catering, the prison maintenance party, and the leather and laundry workshops. Prisoners developed their knowledge and skills successfully in most education lessons. Mentors spoke positively of the additional skills they had learned from their roles and the personal benefit of helping others in the prison. A small minority of instructors did not organise workshop activities well enough to ensure that all prisoners undertook work that developed useful skills to help them on release or transfer.

**3.25** The English, mathematics and support needs of most mainstream prisoners were assessed quickly and accurately when they arrived at the prison. Tutors used this information to place these prisoners on the most appropriate level of English and/or mathematics qualifications. However, induction arrangements for some vulnerable prisoners were poor.

**3.26** Target setting was weak in most lessons, vocational training and prison work. Tutors and instructors did not set clear or challenging targets to inspire prisoners to progress and achieve their full potential. In too many lessons, tutors did not plan sufficiently stimulating activities to develop prisoners' interests further (see key concern S41).

**3.27** Most instructors and tutors who used questioning to assess learning did not do this skilfully enough to check or extend prisoners' knowledge and understanding (see key concern S41).

**3.28** Too often feedback did not give sufficient guidance or challenge for prisoners to make better progress and deepen their knowledge and understanding. Most tutors and instructors helped prisoners to identify and correct spelling and grammatical errors (see key concern S41).

### Recommendations

**3.29 Leaders and managers should ensure that all instructors organise workshop activities effectively so that prisoners are fully occupied and benefit from purposeful prison work that develops useful skills.**

**3.30 Leaders and managers should provide tutors and instructors with high-quality staff development that helps them to improve their questioning techniques and the quality of their feedback to prisoners.**

### Personal development and behaviour

**3.31** Prisoners had a good understanding of the benefits of education and training. They acknowledged the importance of acquiring English and mathematics skills that would help



them on release or transfer. The majority of prisoners in education intended to progress to the next level of course or into a different vocational area. Some prisoners who were reluctant to participate in education at the start of their sentence subsequently developed aspirations to achieve.

- 3.32** Most prisoners in education, skills and work activities demonstrated positive attitudes to their learning, training and work and became more motivated as they achieved small steps towards success. They enjoyed their activities and were proud of their achievements and, as a result, their confidence and self-esteem increased noticeably. Some prisoners excelled in a range of additional roles such as Listeners, Shelter advisers, peer mentors and supervisors.
- 3.33** Prisoners behaved very well in activities and social areas. Most prisoners showed respect for each other, staff and visitors. They were respectful of each other's views, for example student council members were articulate and discussed issues maturely and constructively, including the advantages and disadvantages of the decisions they had made.
- 3.34** Prisoners arrived promptly to their education, skills and work activities. Attendance was good in most lessons at the time of the inspection, although regular attendance since the previous inspection had not been high enough. The priority given to general appointments continued to affect prisoners' attendance at activities negatively.
- 3.35** Prisoners felt safe in lessons and workshops. They felt confident to report issues to their tutors/instructors if they had concerns and most were confident that staff would respond to issues swiftly and appropriately. However, prisoners did not always follow appropriate health and safety practices in a very small minority of workshops.
- 3.36** Prisoners knew how to look after their mental health and wellbeing. They sought and received support when appropriate. They benefited from activities such as working with the therapy dog and the 'green outside of prison' initiative. One prisoner had studied yoga and was training to deliver yoga to other prisoners. The student council delivered sessions on suicide awareness. There were very few instances of bullying.
- 3.37** Managers and peer mentors delivered a range of very good enrichment activities which helped prisoners to develop broader skills, such as in communication and teamwork, that would help them in their future lives and employment. Many activities involved the development of relationships with their families and prisoners valued these activities highly. For example, the 'White Water Writers' initiative enabled prisoners to write a collective range of stories for their children who subsequently illustrated the book. Family activity days planned by prisoners included mathematical exercises which prisoners shared with their children.
- 3.38** Staff gathered the views of prisoners effectively to inform and develop the provision, for example the student council had been instrumental in introducing the construction skills certification scheme course to support prisoners to gain employment on release.

## Recommendation

- 3.39** **Prison leaders should ensure that general appointments do not prevent prisoners from attending education, skills and work activities.**

## Outcomes and achievements

- 3.40** The majority of prisoners who completed their courses achieved their qualifications. A few prisoners whose progress was communicated to their next prison by the recently introduced progress tracker, continued their learning and achieved their qualifications. However, overall achievement rates were low on too many courses.
- 3.41** Prisoners made at least the progress expected of them in most education, skills and work activities. Prisoners' work in education lessons was of at least the expected standard and, in many vocational training and prison workshops, prisoners' work matched industry standards.
- 3.42** Not all prisoners had sufficient opportunities to achieve qualifications in prison work activities. Staff shortages had prevented the introduction of new qualifications in warehousing and storage (see key concern S42).
- 3.43** The release or transfer position of too many prisoners had not been identified appropriately at their induction and, as a result, they did not complete their courses. Only a few prisoners withdrew from their course because it did not meet their expectations.
- 3.44** Prisoners who had a learning difficulty and/or disability achieved as well as their peers. However, prisoners from black or minority ethnic backgrounds, the largest ethnic group in the prison, did not achieve as well as other groups of prisoners (see key concern S42).
- 3.45** Opportunities for prisoners to develop higher-level skills, knowledge and understanding were limited. About half the prisoners entered the prison with entry level 3 or level 1 qualifications in English and/or mathematics. Some prisoners progressed to level 2 in these and other vocational subjects but, at the time of the inspection, only three prisoners were undertaking courses at level 3 and one at level 4 (see key concern S42).
- 3.46** Officers on the residential units did not challenge wing workers sufficiently to help them to develop their skills. They did not direct them to information about further development opportunities or encourage them to take higher-level qualifications in subjects such as industrial cleaning.

## 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 In our survey, 36% of prisoners said that staff at Liverpool had encouraged them to keep in touch with family and friends. Although not yet high enough, this was significantly better than at comparator prisons and the last inspection.
- 4.2 We found many examples of how prisoners were encouraged and assisted to maintain family ties from the point of arrival at the establishment which reflected the prison's family, children and significant other policy. The 'letter to mum' initiative enabled prisoners in reception to send a letter to a key contact, containing information about the prison, such as how to arrange visits and send property and correspondence (see paragraph 1.3).
- 4.3 Managers had also introduced a form for prisoners at risk of suicide and self-harm to consent to involving family members in their care plan, although more needed to be done to encourage prisoners to agree to this support (see paragraph 1.56). When staff identified prisoners who were socially isolated, receiving little contact with the outside world, they were referred to one of the official prison visitors, which was positive.
- 4.4 The introduction of in-cell telephones was excellent and greatly valued by prisoners, enabling them to talk to their friends and family in private and at times when they would be at home. Prisoners were able to use the electronic kiosk system to transfer pay to their phone credit on the day of receipt, which again was very positive (see paragraphs 2.11 and 2.21). Telephone numbers were added promptly to prisoners' accounts, although some prisoners told us there were still delays in receiving written correspondence.
- 4.5 Interventions were in place to help prisoners improve their relationships with families, including Storybook Dads (an initiative that allows prisoners to record stories for their children) and Dads Matter (a parenting skills course).
- 4.6 The prison had held 13 family days during the previous 12 months which was more than we find at other prisons. Six of these had been open to all prisoners and the remainder had been celebratory events for prisoners who had completed programmes, a sports day and an event for prisoners who had a child with autism.
- 4.7 Significant improvements had been made to the visitors' centre since our previous inspection, which was now bright and welcoming. The centre was staffed by Partners of Prisoners and Family Support Group (POPS), who provided a valued advice and support

service for visitors and assisted in regular family forums to improve opportunities for prisoners to maintain contact with their families. The visits hall was clean, bright and comfortable.

- 4.8** Our survey was very positive about visits arrangements at Liverpool. Significantly more prisoners than at the last inspection and at comparator prisons said that visits started on time. Eighty-eight per cent of prisoners said that their visitors were treated respectfully by staff. Visits were held every day and we were told that they generally started and finished on time. The prisoners and visitors we spoke to were very positive about their visits experience.

## Good practice

- 4.9** *'Letter to mum': Prisoners were given the opportunity in reception to send a formatted letter containing key information to contacts in the outside world, such as how to arrange visits or send in property. This ensured that information was communicated quickly and accurately.*

## 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.**

- 4.10** The prison managed a high turnover of prisoners with a large remand population. At the time of the inspection, 470 prisoners were sentenced. Over a third of sentenced prisoners had been at the prison for less than three months at the time of the inspection, and 17% of sentenced prisoners had been at the prison for more than a year.
- 4.11** The management of reducing reoffending had improved since our previous inspection. The head of reducing reoffending, the head of the offender management unit (OMU), and the senior probation officer had all been in post for some time. The revised offender management and reducing reoffending strategy clearly outlined how rehabilitation functions would be coordinated. This was supported by the co-location of resettlement workers and offender supervisors in the OMU.
- 4.12** We found evidence of this joint working in the minutes of the reducing reoffending and OMU strategic meeting which was scheduled to be held every two months. However, there had only been two meetings so far in 2019 which had not yet resulted in clear actions to effect improvements. The population needs analysis had been updated. This highlighted several issues, such as the potential for bullying to prevent men from accessing services and interventions, but we could not find evidence that these findings had been acted on. There was a reasonable level of scrutiny of data relevant to reducing reoffending at the weekly establishment performance meeting.
- 4.13** Data were monitored on the number of prisoners with no initial offender assessment system (OASys) report and the prison had invested in reducing the backlog of OASys to single figures. In two of the examples that we reviewed the responsibility for completing the assessment lay with the community probation officer. Prison offender supervisors had made efforts to remedy this, which had failed, and there was no effective way of escalating problems with senior probation staff in the community.

- 4.14** More than a third of the population were assessed as high risk of harm, and community offender managers were responsible for completing and reviewing the OASys in such cases. All these prisoners were supervised by suitably trained probation officers in the prison. In the sample of cases that we reviewed the quality of initial plans was good.
- 4.15** At the time of the inspection, a third of the population had not been sentenced and did not require a sentence plan. Most of the remaining prisoners who were eligible had a sentence plan. In our survey, 82% of respondents said staff helped them meet their sentence plan targets against the comparator of 46% and 50% at the previous inspection. Sentence plans were reviewed at appropriate intervals, including at significant events such as the completion of offending behaviour programmes. This was something that we rarely see.
- 4.16** The OMU was resourced appropriately with eight prison offender supervisors and six probation offender supervisors. All eligible prisoners were given written details of their offender supervisor and community offender manager on arrival at the prison, which was positive. The frequency of contact between offender supervisors and prisoners was good, as was the quality of case notes. We saw examples of regular and effective communication between prison and community teams, such as ensuring that licence conditions on release were appropriate to manage potential risk of harm to victims and others. The team managers in the OMU monitored offender supervisor contact to ensure that it remained good, although 20% of uniformed offender supervisor time had been lost to cross deployment in the previous six months. The electronic kiosk system allowed prisoners more regular and speedy contact with their offender supervisor, and a weekly wing-based OMU drop-in forum enabled prisoners with no offender supervisor to ask questions about their sentence.
- 4.17** Many prisoners were also supported by their key worker and the levels of contact were good. Many of the key case work notes focused on prisoners' daily needs, and only a few demonstrated an awareness of sentence plans. For some prisoners this was adequate but for others with more complex cases it was a missed opportunity to encourage participation in the sentence plan. Work to increase the understanding of offender management issues among key workers was yet to start.
- 4.18** Home detention curfew (HDC) was used appropriately, and 62 prisoners had been released in the previous six months, which represented 68% of those who were eligible. The reasons for rejecting HDC were appropriate. Almost half the prisoners granted HDC were released after their eligibility date. The difficulty of identifying suitable accommodation caused most of these delays, despite the excellent work carried out by the prison to try to increase the availability of accommodation for HDC.
- 4.19** At the time of the inspection, 16 prisoners were serving life and 31 serving indeterminate sentences (most of whom were over tariff). They were all allocated a probation offender supervisor within the prison. A monthly long-term offenders meeting was held which primarily monitored transfer requests (see paragraph 4.29). Five prisoners had been released on parole in the previous six months.<sup>26</sup>

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<sup>26</sup> OMIC is being implemented in two separate but interconnected and complimentary phases. Phase 1, key work, introduced the delivery of key work by Prison Officers in 2017. The second phase, case management, was implemented on 1 October 2019 across the male closed estate (public and private sector). This introduces the new role of Prison Offender Manager.

## Recommendation

- 4.20** There should be a clear escalation process with community probation offices to ensure that outstanding OASys assessments which are the responsibility of community offices are completed in a timely manner.

## Public protection

- 4.21** The weekly interdepartmental risk management team meeting (IRMT) did not focus sufficiently on risk. MAPPAs (multi-agency public protection arrangements) levels 2 and 3 cases were not considered and high-risk cases were not routinely discussed at these meetings before release. The main focus had been on ensuring appropriate arrangements for monitoring and managing prisoners' mail and phone calls. The terms of reference for the meeting were too ambitious, including the review of each prisoner due for release in the next three months (see key concern S43).
- 4.22** We found one example of a high-risk level 2 MAPPAs prisoner due for imminent release who had not been discussed at the IRMT other than in relation to monitoring. However, the offender supervisor had taken appropriate action with community probation officers to manage the release properly. We found no examples of public protection issues being missed.
- 4.23** There was no oversight of MAPPAs and it was left to individual offender supervisors to identify if a prisoner was appropriate for MAPPAs and confirm the MAPPAs level before release. Not all staff understood MAPPAs and some prisoners were not identified as MAPPAs on arrival. However, all MAPPAs cases were managed by a probation officer who communicated effectively with community probation officers to manage risks. We found no examples of prisoners approaching release with no confirmed MAPPAs level.
- 4.24** At the time of the inspection, 57 prisoners were subject to child contact restrictions and 32 prisoners mail and telephone monitoring. The IRMT meetings managed these arrangements effectively. However, we found that some photographs supplied to staff in the visitors' centre of children whom prisoners could have contact with had not been updated for many years.
- 4.25** There was only one machine to conduct call monitoring and the target of 5% of additional general monitoring had not been achieved for several months.

## Categorisation and transfers

- 4.26** Re-categorisation processes were sound and, in the cases that we checked, decisions were reasonable and based on risk of harm and likelihood of reoffending. During the previous six months, 28 prisoners had been considered for open conditions, of whom 24 had been approved, including a few who had been approved in advance of their eligibility date.
- 4.27** At the time of the inspection, 257 prisoners were held serving a sentence of more than four years, many of whom needed to progress to training prisons. The monthly long-term offenders meeting demonstrated continuous efforts by the prison to arrange transfers.

## Interventions

### Expected outcomes:

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

- 4.28** In our survey, 93% of respondents who had completed an offending behaviour programme said it had helped them to meet their sentence plan targets compared with 53% at the previous inspection. The accredited Thinking Skills Programme was delivered to 30 prisoners each year. Referrals could be made by offender supervisors, but some prisoners had self-referred for consideration, and there had been referrals by key workers and partner agencies such as the drug and alcohol service.
- 4.29** The programmes team delivered an impressive range of non-accredited programmes including A>Z (a short motivational course for encouraging change in prisoners) and Gang Awareness, which were both appropriate to the population. Prisoners also benefited from the Healthy Relationships course delivered by Achieve North West, and the Sycamore Tree restorative justice course coordinated by the chaplaincy. The regional psychology team had completed individual work with five prisoners in the previous six months.
- 4.30** The prison had identified that prisoners serving shorter sentences were likely to miss the opportunity to participate in these programmes which were delivered over a number of weeks. There was a well-developed plan for the integrated through-the-gate (ITTG) team to deliver a number of one- to two-day non-accredited interventions for this prisoner group.
- 4.31** Individual plans were developed for prisoners on the wellbeing unit aimed at supporting reintegration, for example working on family relationships.
- 4.32** Coordinated work by Shelter and the ITTG to secure accommodation on release was impressive, and in the previous six months 85% of prisoners had been released to sustainable accommodation. The prison was working with local authorities and social landlords and there was a well-developed plan with a registered social landlord, to refer prison leavers directly to tenancies with low-level support before moving to independent living.

## 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.**

- 4.33** Resettlement services were excellent and, in our survey, 75% of prisoners said someone was helping them prepare for release against the comparator of 47% and 41% at the previous inspection.
- 4.34** During the previous six months, the community rehabilitation company (CRC) had completed 98% of initial screenings and resettlement plans for sentenced prisoners within five days of their arrival. The quality of these plans was good and we saw examples of effective joint working between offender supervisors and resettlement staff.
- 4.35** All prisoners were invited to a resettlement board 12 weeks before release or less if they were serving shorter sentences. The board was held each week in the chapel and brought together a range of agencies to identify prisoners' needs, including finance, benefit, debt, employment, mental health and substance use. Following the board, an ITTG case worker was assigned to work with the prisoner to address these issues before release.

- 4.36** The resettlement hub located in the visitors' centre enabled prisoners to meet their ITTG case worker immediately after release and had been used by 56% of prisoners released in the previous six months. At the hub, prisoners and case workers agreed a two-day release plan, including appointments for accommodation and health care. Case workers were also able to support prisoners to complete an application for universal credit and attend their first CRC probation appointment where they could sign their licence.
- 4.37** Community mentoring organisations were available to provide immediate and continued support on departure. During the previous six months, 23% of prisoners who used the hub left with a mentor. Prisoners using the hub could also obtain food bank vouchers and spare clothes and charge their mobile phones.

### Good practice

- 4.38** *The weekly resettlement board brought together a range of agencies to meet prisoners and identify their resettlement needs, and allocated a through-the-gate worker to address these needs with prisoners before their release.*
- 4.39** *The resettlement hub in the visitors' centre gave prisoners an opportunity to meet their ITTG case worker on release and agree an initial release plan. Prisoners could also leave the hub with a through-the-gate mentor if required.*



## 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:
S37	<p>Key concern: Despite a substantial reduction in population, levels of violence had increased and some incidents were serious. Not all incidents of violence were investigated appropriately and there was a lack of effective interventions to address low-level bullying and violent behaviour.</p> <p><b>Recommendation: All incidents of violence and antisocial behaviour should be investigated thoroughly to ensure that perpetrators are managed consistently and victims are supported.</b></p>	The Governor
S38	<p>Key concern: The self-harm strategy was not focused on the needs of the population and was not sufficiently informed by the analysis of self-harm data. An action plan was incorporated into the strategy and discussed at the safer Liverpool meeting, but attendance at the meeting was inconsistent and an unwieldy action plan was not effective in driving a reduction in self-harm. Too many actions took too long to complete.</p> <p><b>Recommendation: The strategic management of self-harm should ensure that swift and focused action is taken to improve care for prisoners in crisis and to reduce self-harm.</b></p>	The governor
S39	<p>Key concern: Survey results for prisoners with a disability were more negative than their counterparts. Prisoners in wheelchairs had insufficient access to exercise in the open air. Reasonable adjustments had not been made for a registered blind prisoner. The care provided for a prisoner with potential mental health problems was inadequate.</p> <p><b>Recommendation: Prisoners with disabilities should receive appropriate care and equal access to a purposeful regime.</b></p>	The governor
S40	<p>Key concern: There were too few activity places for the population. Some staffing instability remained. Prisoners did not have enough opportunity to access courses at higher levels. The provision for vulnerable prisoners remained limited and was not of a high enough quality.</p> <p><b>Recommendation: Leaders should ensure that there are enough high-quality activity places to meet all prisoners' needs and abilities, that they are appropriately staffed and provide relevant qualifications across all levels to help prisoners achieve their full potential and gain suitable employment on release.</b></p>	The governor

S41	<p>Key concern: The teaching and training practices of some tutors and instructors required further development. Target setting in most education, skills and work activities was weak and did not inspire prisoners to achieve their full potential. Most instructors and tutors who used questioning to assess learning did not do this skilfully enough to check or extend prisoners' knowledge and understanding. In too many lessons, tutors did not plan sufficiently stimulating activities. Too often feedback did not provide enough guidance or challenge for prisoners to progress and deepen their knowledge and understanding.</p> <p><b>Recommendation: Leaders and managers should ensure that teaching, learning and assessment are of a high quality and that teachers and instructors plan stimulating learning activities which include challenging targets to inspire prisoners to achieve their full potential.</b></p>	The governor
S42	<p>Key concern: New industrial qualifications in warehousing and storage had not been introduced because of staff shortages. Black and minority ethnic prisoners, who were the largest ethnic group, did not achieve as well as their peers. Too many prisoners did not complete their qualifications and achievement rates on too many courses were low. Not all prisoners understood the options that were available to improve their skills.</p> <p><b>Recommendation: Leaders, managers, tutors and instructors should structure the curriculum to ensure that prisoners complete and achieve relevant qualifications across education, skills and work activities, progress to higher-level courses as appropriate and that there are no discernible differences in the performance of different groups of prisoners.</b></p>	The governor
S43	<p>Key concern: The integrated risk management team meeting was not sufficiently focused on prisoners who potentially posed the greatest risk before their release. This was exacerbated by the lack of a robust system to identify, record and monitor prisoners subject to MAPPA arrangements.</p> <p><b>Recommendation: Effective arrangements should be made to identify, record and monitor prisoners who pose the greatest risk in preparation for their release.</b></p>	The governor
<b>General recommendations</b>		<b>Directed to:</b>
I.10	All new arrivals should receive additional welfare checks on their first night.	The governor
I.11	Vulnerable prisoners should spend their first night on the most appropriate wing with access to a timely induction.	The governor
I.33	Fire-retardant hoods for planned removals should only be worn when approved by a senior manager following assessment of risk.	The governor

1.34	Managers should ensure that body-worn video cameras are worn and activated during all incidents of force.	The governor
1.51	All requests for suspicion drug testing should be actioned promptly to detect and deter the use of illicit substances.	The governor
1.59	There should be robust oversight of the use of constant watch cells to ensure that they are only used when necessary.	The governor
2.13	The single cells on H and K wings should not be used to house more than one prisoner.	The governor
2.14	All shared cells should have lockable storage for personal items and in-possession medications.	The governor
2.26	Poor perceptions of the responses to complaints should be explored and addressed to improve confidence in the complaints system.	The governor
2.47	The poor perceptions of prisoners from a black and minority ethnic background should be investigated further and addressed.	
2.48	Foreign national detainees should be moved to an immigration removal centre once their criminal sentence has been served. (Repeated recommendation 2.43).	HMPPS
2.63	All wing treatment areas should comply with infection control and prevention standards and should have sufficient, secure storage space for medicines and other equipment.	The governor
2.80	Recipients of social care who are re-categorised should not be prevented from progressing from category B prisons because of a lack of appropriate social care provision at category C prisons.	HMPPS
2.88	Patients requiring admission to secure mental hospitals should be transferred expeditiously and within the current guidelines.	HMPPS
2.103	The level of support provided by prison officers during the administration and collection of medication should be enhanced to minimise potential bullying and diversion of supplies.	The governor
3.11	All prisoners, including those who are unemployed, should have enough time out of their cells to carry out domestic tasks and to have at least one hour of association every day.	The governor
3.21	Leaders should ensure that attendance rates increase rapidly and are high across education, skills and work activities to ensure that prisoners participate fully in purposeful activity.	The governor
3.22	Leaders, including Novus leaders, should further develop prisoners' use of the virtual campus to broaden their learning and job-search opportunities.	The governor
3.29	Leaders and managers should ensure that all instructors organise workshop activities effectively so that prisoners are fully occupied and benefit from purposeful prison work that develops useful skills.	The governor

3.30	Leaders and managers should provide tutors and instructors with high-quality staff development that helps them to improve their questioning techniques and the quality of their feedback to prisoners.	The governor
3.39	Prison leaders should ensure that general appointments do not prevent prisoners from attending education, skills and work activities.	The governor
4.20	There should be a clear escalation process with community probation offices to ensure that outstanding OASys assessments which are the responsibility of community offices are completed in a timely manner.	The governor
<b>Examples of good practice</b>		
1.12	A tuck shop had been introduced in reception and prisoners were given credit to buy items from the canteen to reduce the likelihood of getting into debt.	
1.23	The re-role of J wing as a wellbeing unit was a welcome initiative to support prisoners with their personal and physical wellbeing, including many with complex needs.	
1.28	'Rehabilitative adjudications' offered prisoners charged with a drug-related offence the opportunity to engage with relevant substance misuse services in lieu of a heavier punishment.	
2.89	The potential for failing to identify prisoners with vulnerabilities was significantly reduced by innovative initiatives: mental health wellbeing reviews, drop-in clinics on the wings, and case-record reviews by learning disability nurses for every new prisoner following reception.	
4.9	'Letter to mum': Prisoners were given the opportunity in reception to send a formatted letter containing key information to contacts in the outside world, such as how to arrange visits or send in property. This ensured that information was communicated quickly and accurately.	
4.38	The weekly resettlement board brought together a range of agencies to meet prisoners and identify their resettlement needs, and allocated a through-the-gate worker to address these needs with prisoners before their release.	
4.39	The resettlement hub in the visitors' centre gave prisoners an opportunity to meet their ITTG case worker on release and agree an initial release plan. Prisoners could also leave the hub with a through-the-gate mentor if required.	

## Section 6. Appendices

### Appendix I: Inspection team

Peter Clarke	Chief inspector
Deborah Butler	Team leader
Ian Dickens	Inspector
Alice Oddy	Inspector
David Owens	Inspector
Paul Rowlands	Inspector
Nadia Syed	Inspector
Keith Humphreys	Inspector
Becky Duffield	Researcher
Amilcar Johnson	Researcher
Rahul Jalil	Researcher
Chloe Moore	Researcher
Claudia Vince	Researcher
Steve Eley	Lead health and social care inspector
Paul Tarbuck	Health and social care inspector
Rachel Callaghan	Pharmacist
Tim Byron	Care Quality Commission inspector
Susanne Wainwright	Ofsted inspector
Lynda Brown	Ofsted inspector
Alison Cameron-Brandwood	Ofsted inspector
Andrea Machel	Ofsted inspector
Mark Rogers	Offender management inspector (observer)



## 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, reception risk assessments were thorough and induction was reasonable, but there were weaknesses in first night support. Violence had increased significantly and violence reduction work was weak. Segregation was not used excessively but staff in the segregation unit had implemented some unofficial punishments. Use of force had increased and governance was weak. Drug availability and use were high. Security systems were reasonable but not enough actions resulted from good intelligence. Reasonable progress had been made in implementing Prisons and Probation Ombudsman recommendations following deaths in custody, but self-harm was increasing. Safeguarding procedures were underdeveloped. Some areas of poor governance and slow progress suggested that leadership and management were inadequate. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

### Main recommendations

Managers should ensure that use of force documentation is completed promptly and thoroughly, including for special accommodation, and that force is demonstrably proportionate and justified. Data should be analysed and incidents reviewed to monitor trends, identify good practice and learn lessons. (S42)

**Achieved**

All actions following the receipt of intelligence reports should be carried out, including the targeted searching of cells and suspicion drug testing. (S43)

**Achieved**

### Recommendations

Prisoners should not be held in reception for long periods. (I.9)

**Achieved**

There should be enough night officers on the first night unit to monitor the welfare of new arrivals regularly and support prisoners on ACCTs. (I.10)

**Achieved**

All prisoners should complete an induction programme that provides comprehensive information about the prison. Attendance should be centrally tracked. (I.11)

**Partially achieved**

Violence reduction work should be adequately resourced and be underpinned by an up-to-date analysis of data and a comprehensive action plan. All incidents of violence and antisocial behaviour should be investigated thoroughly, perpetrators should be managed consistently and victims supported. (1.20)

**Not achieved**

Self-isolating prisoners should receive multidisciplinary support and encouragement to promote their reintegration. (1.21)

**Achieved**

Prisoners on the basic level of the IEP scheme should have individual targets which focus on addressing their poor behaviour. (1.22)

**Achieved**

Adjudication hearings should be timely and thorough and include the full range of relevant information. All prisoners, including vulnerable prisoners, should be held in decent conditions while awaiting adjudication. (1.26)

**Achieved**

Data on adjudications and segregation should be analysed thoroughly to identify emerging patterns and trends. All relevant stakeholders should attend segregation and adjudication review meetings. (1.27)

**Achieved**

All planned use of force should be filmed on hand-held video cameras. (1.32)

**Achieved**

The segregation regime should be more purposeful with a greater range of activities to occupy prisoners constructively. (1.37)

**Not achieved**

The use of unofficial punishments should cease. (1.38)

**Achieved**

All segregated prisoners should have an individual care plan with a clear focus on identified risks and successful reintegration planning. (1.39)

**Achieved**

Closed visits should be imposed only for visits-related activity. (1.47)

**Achieved**

The ACCT process should support consistent care of prisoners at risk of self-harm. Triggers should be correctly recorded, care maps should be pertinent and completed before closure and multidisciplinary care reviews should be held on the scheduled day. (1.53)

**Achieved**

There should be a coherent strategy to reduce self-harm, informed by the characteristics of the population. A local self-harm reduction policy should be accompanied by an up-to-date and responsive action plan. (1.54)

**Not achieved**



## Respect

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

*At the last inspection in 2017, staff-prisoner relationships were relaxed but many staff had low expectations of prisoners. The key worker scheme was promising. Living conditions were among the worst we had seen: many cells were in an extremely poor condition and lacked even the basic requirements for hygiene, safety and health. The management of complaints, and especially applications, was inadequate. Food was adequate and the shop provided a good range of products. Equality and diversity provision was underdeveloped and some prisoners were not well cared for. Faith provision was adequate. While there had been some improvements in health services, some critical aspects of care were poor. In particular, there was a lack of support for men with mental health needs, and inpatients had an impoverished regime. There had been failures of leadership and management at all levels. **Outcomes for prisoners were poor against this healthy prison test.***

### Main recommendations

Concerted action should be taken by national and local managers to ensure that the prison environment is brought up to an acceptable standard. In particular, all cells should provide decent, hygienic and well-maintained conditions, and necessary repairs should be completed swiftly. Cells falling below basic standards should not be occupied. (S44)

**Achieved**

The mental health service should be adequately resourced and staffed to ensure that all prisoners with mental health needs receive prompt assessment and regular input to address and review their individual risks and needs. (S45)

**Achieved**

### Recommendations

Staff should address prisoners respectfully and maintain a professional approach towards them. They should encourage positive and responsible behaviour and support engagement with the regime. (2.4)

**Achieved**

Key workers should receive additional support and training to help them engage with prisoners and deliver the service to prisoners outlined in the key worker strategy. (2.5)

**Achieved**

Prisoners should not be held in overcrowded conditions. (2.9)

**Not achieved**

All prisoners should have a working emergency cell bell. Officers should respond to cell bells promptly, the timeliness of responses should be monitored closely and action should be taken to address delays. (2.10)

**Achieved**

Breakfast packs should be more substantial and served on the day they are to be eaten. (2.14)

**Not achieved**

Regular consultation should take place to understand and address prisoners' discontent with the food. (2.15)

**Achieved**

Applications should be tracked, and responses should be focused, timely and demonstrate sufficient enquiry. (2.21)

**Achieved**

All complaints should be responded to and returned to prisoners quickly. A robust system for quality assurance of complaints should be introduced which includes consultation with prisoners on their perceptions of the complaints system. (2.22)

**Achieved**

Prisoners' access to justice should be supported through timely legal visits, provision of laptops to help pursue legal cases, and easy access to a library with up-to-date legal text books. Information about the Criminal Casework Review Commission and the Legal Ombudsman should be displayed around the prison. (2.23)

**Partially achieved**

The equality action team meeting should be attended by all relevant departments and managers should maintain an action log. (2.30)

**Achieved**

The national equality monitoring tool should be revised to cover all protected characteristics and produce data that are no more than a month old. All disparities should be investigated. (2.31)

**Not achieved**

Discrimination incident report forms should be available on all wings. They should be responded to promptly by a manager and there should be independent quality assurance of completed DIRFs. (2.32)

**Achieved**

The poor perceptions of prisoners from a black and minority ethnic background and prisoners with disabilities should be investigated and addressed. (2.41)

**Not achieved**

Wing staff should make greater use of the telephone interpreting service to communicate with foreign national prisoners who do not speak or understand English. Information about the prison should be translated into common languages. (2.42)

**Achieved**

Foreign national detainees should be moved to an immigration removal centre once their criminal sentence has been served. (2.43)

**Not achieved** (Recommendation repeated, 2.48)

Prisoners with disabilities should be located in appropriately adapted cells and should have equitable access to the regime. Staff should be aware of those requiring personal emergency evacuation plans. (2.44)

**Not achieved**

The chaplaincy should be sufficiently resourced to provide consistent individual support, faith-based classes and groups to prisoners, and to attend key meetings, such as ACCT reviews. (2.48)

**Achieved**

Governance arrangements should ensure that patient engagement, effective complaints management and clinical staff supervision inform service improvements. (2.58)

**Achieved**

Service models and staffing levels should meet prisoners' needs. (2.59)

**Achieved**

All health care areas, including wing treatment rooms, should provide a decent, clean, safe environment. They should be compliant with infection control and Health and Safety Executive standards. (2.60)

**Not achieved**

Health promotion and care for older and disabled prisoners should be developed to include prompt assessment and appropriate review. (2.65)

**Achieved**

Health services should be supported to provide primary and secondary care appointments and medicines supervision through timely and reliable prison officer support. (2.77)

**Achieved**

Admission to the inpatient unit should be based on clinical need with regular multidisciplinary reviews, including prison staff. Prisoners should benefit from an appropriate therapeutic regime which includes regular access to fresh air, educational and therapeutic activity and showers. (2.78)

**Achieved**

Prisoners with social care needs should be located in suitable accommodation with adaptations and equipment that meet their needs and should be monitored. (2.81)

**Achieved**

The prison and the health care provider should ensure that prisoners requiring stabilisation or detoxification from drugs or alcohol receive 24-hour observation in a suitable location and regular treatment reviews by appropriately qualified staff, including a prescriber. (2.97)

**Achieved**

All prisoners with substance misuse issues should have prompt access to a comprehensive range of psychosocial support throughout their sentence, which meets their identified needs. (2.98)

**Achieved**

Prisoners should be able to access a range of pharmacy-led clinics, including medicine use reviews. Nurses should be trained to administer an adequate range of medicines without a prescription underpinned by current out-of-hours and special sick policies. (2.104)

**Not achieved**

Clinical audits should be presented to the medicines and therapeutics committee to provide assurance that prescribing is appropriate and supply is safe. (2.105)

**Achieved**

Regular audits should inform and improve patient dental care and all dental clinical records should meet the required professional standards. (2.107)

**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 and access to association were poor. Access to the library was very poor. Most prisoners could use the gym regularly. Attendance and punctuality at activities were poor. Most prisoners who attended activities developed useful skills. Too many prisoners did not complete courses. Achievement of qualifications was good for those who did complete. Some improvements had been made, but the leadership and management of activities were inadequate. **Outcomes for prisoners were poor against this healthy prison test.***

### Main recommendation

Prisoners should be unlocked and engaged in constructive activity during the working day. The regime should include an hour to exercise in the open air, evening association, frequent library access and sufficient time to carry out domestic tasks. Managers should ensure that poor attendance and punctuality are addressed. (S46)

**Not achieved**

### Recommendations

The library should promote the development of literacy skills by introducing more activities. (3.9)

**Not achieved**

The all-weather pitches should be refurbished and repaired to allow more access to outside team sports. (3.10)

**Achieved**

There should be sufficient showers for those using the gym. (3.11)

**Not achieved**

Prison and Novus managers should manage the operational aspects of the provision well and pay good attention to health and safety. (3.21)

**Partially achieved**

The quality of teaching, training, learning and assessments should be good or better. Novus managers should review the self-assessment process to ensure that the self-assessment report is accurate. (3.22)

**Partially achieved**

Prison and Novus managers should provide sufficient and stimulating education and work activity for all prisoners. It should meet their needs and enable them to obtain useful qualifications. (3.23)

**Not achieved**

Instructors and tutors should use prisoners' existing skills to set relevant targets for their development, including their skills in English and mathematics. (3.29)

**Not achieved**

Prison managers should ensure that instructors identify and record the skills that prisoners develop in prison work. (3.30)

**Not achieved**

Prison and Novus managers should ensure that prisoners start on courses that they can complete. Novus managers should ensure that successful completions of functional skills in English at level 1 are substantially increased. (3.37)

**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, visits provision was adequate but work to help men maintain contact with families and others outside prison had deteriorated. Resettlement functions were not well coordinated. The OASys (offender assessment system) backlog was high and the work of officer offender supervisors was weak, although there was effective work by probation staff. Home detention curfew was managed reasonably well. Public protection processes were sound. Resettlement planning and work were basic and undermined by the lack of coordination. Prisoners had access to a limited range of programmes to meet their needs. Managers had made slow progress in many important areas, although there had been some significant improvements. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

### Main recommendation

All eligible prisoners should have an offender supervisor who provides them with regular focused contact to manage risk, encourage and monitor the achievement of sentence plan targets and secure progressive transfers. High-risk prisoners should be allocated to probation offender supervisors. (S47)

**Achieved**

### Recommendations

Where appropriate, families should be involved in the care of prisoners at risk of self-harm or suicide. (4.7)

**Achieved**

Prisoners should be able to add telephone numbers to their pin phone account without delay. They should be able to make telephone calls in the evening. (4.8)

**Achieved**

Sufficient family days and parenting courses should be provided to meet demand. (4.9)

**Achieved**

Closed visits should be held on any day of the week when domestic visits take place. (4.10)

**Not achieved**

A comprehensive needs analysis of the population should be undertaken, including data from OASys. The analysis should inform the range of provision and interventions available at the prison. (4.23)

**Achieved**

There should be well planned and integrated work between departments involved in work to reduce prisoners' risk of reoffending and harm, including the offender management unit and Shelter. Roles and responsibilities should be clearly defined and quality assurance procedures should be implemented to maintain consistency. (4.24)

**Achieved**

All eligible prisoners should have an OASys which is updated periodically. This should be used to inform decisions about progress. (4.25)

**Achieved**

The timeliness of home detention curfew assessments should be monitored to identify obstacles to completion and take effective action to ensure that prisoners are released at the earliest opportunity. (4.26)

**Achieved**

Decisions to downgrade the security category of a prisoner should be based on their risk of harm and likelihood of reoffending. (4.27)

**Achieved**

Specific services and interventions should be made available for long-term prisoners unable to progress from Liverpool. (4.28)

**Not achieved**

An appropriate range of offending behaviour interventions should be available to meet the needs of prisoners. (4.34)

**Achieved**

Outcome data on sustainable housing should be collected and analysed to ensure that provision for prisoners is appropriate and effective. (4.35)

**Achieved**

Mentoring and meet at the gate support services should be provided to meet the needs of prisoners. (4.40)

**Achieved**

## Appendix III: Photographs



Reception holding room





Victorian window prior to refurbishment





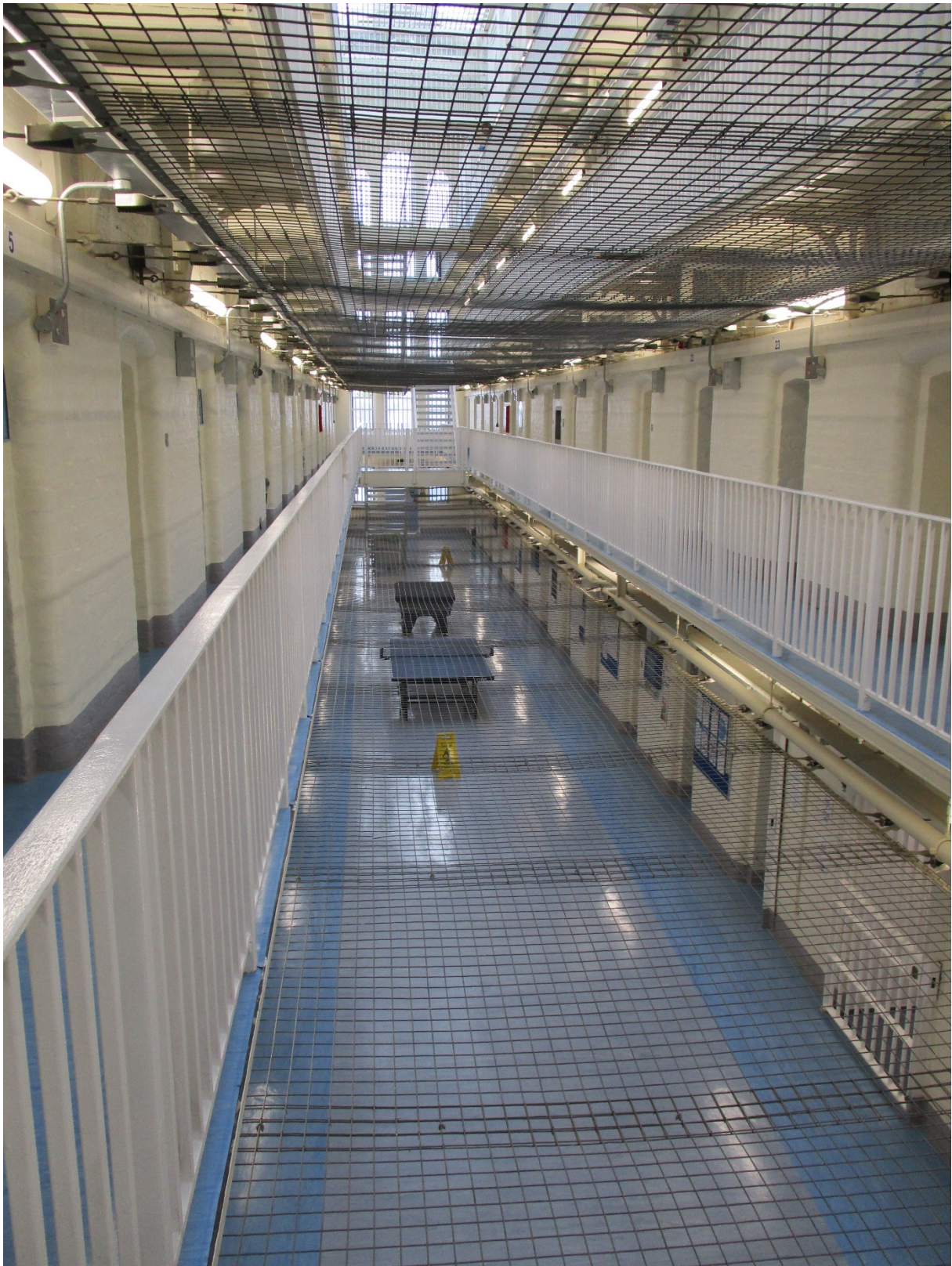
F Wing windows after refurbishment





External





B Wing internal





H Wing replacement window in progress



Sports field

## Appendix IV: Prison population profile

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

Status	18–20 yr olds	21 and over	%
Sentenced	-	336	49.2
Recall	-	118	17.3
Convicted unsentenced	-	88	12.9
Remand	-	109	16.0
Civil prisoners	-	1	0.1
Detainees	-	5	0.7
<b>Total</b>			

Sentence	18–20 yr olds	21 and over	%
Unsentenced	-	208	30.5
Less than six months	-	78	11.4
six months to less than 12 months	-	28	4.1
12 months to less than 2 years	-	46	6.7
2 years to less than 4 years	-	43	6.3
4 years to less than 10 years	-	115	16.8
10 years and over (not life)	-	91	13.3
ISPP (indeterminate sentence for public protection)	-	30	4.4
Life	-	16	2.3
<b>Total</b>			

Age	Number of prisoners	%
Please state minimum age here:	21	
Under 21 years	-	-
21 years to 29 years	213	31.2
30 years to 39 years	241	35.3
40 years to 49 years	138	20.2
50 years to 59 years	64	9.4
60 years to 69 years	18	2.6
70 plus years	9	1.3
Please state maximum age here:	-	-
<b>Total</b>		

Nationality	18–20 yr olds	21 and over	%
British	-	639	93.6
Foreign nationals	-	44	6.4
<b>Total</b>			

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced	-	228	33.4
Uncategorised sentenced	-	14	2.0
Category A	-		
Category B	-	104	15.2
Category C	-	331	48.5
Category D	-	5	0.7
Other	-	1	0.1

<b>Total</b>			
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<b>Ethnicity</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
White	-		
British	-	583	85.4
Irish	-	6	0.9
Gypsy/Irish Traveller	-	2	0.3
Other white	-	20	2.9
Mixed	-		
White and black Caribbean	-		
White and black African	-	6	0.9
White and Asian	-	3	0.4
Other mixed	-		
Asian or Asian British	-	12	1.8
Indian	-	1	0.1
Pakistani	-	4	0.6
Bangladeshi	-	1	0.1
Chinese	-	1	0.1
Other Asian	-		
Black or black British	-		
Caribbean	-	9	1.3
African	-	12	1.8
Other black	-	9	1.3
Other ethnic group	-	9	1.3
Arab	-	3	0.4
Other ethnic group	-		
Not stated	-	2	0.2
<b>Total</b>			

<b>Religion</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
Baptist		0	
Church of England		124	18.2
Roman Catholic		277	40.6
Other Christian denominations		67	9.8
Muslim		37	5.4
Sikh		0	
Hindu		1	0.1
Buddhist		7	1.0
Jewish		8	1.2
Other		6	0.9
No religion		156	22.8
<b>Total</b>			

<b>Other demographics</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
Veteran (ex-armed services)			
<b>Total</b>			

**Sentenced prisoners only**

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month			132	19.3
1 month to 3 months			115	16.8
3 months to six months			63	9.2
six months to 1 year			84	12.3
1 year to 2 years			53	7.8
2 years to 4 years			23	3.4
4 years or more			5	0.7
<b>Total</b>				

**Sentenced prisoners only**

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

**Unsentenced prisoners only**

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month			54	26
1 month to 3 months			78	37.5
3 months to six months			38	18.3
six months to 1 year			21	10.1
1 year to 2 years			17	8.2
2 years to 4 years			0	
4 years or more			0	
<b>Total</b>				





# Appendix V: Prisoner survey methodology and results

## Prisoner survey methodology

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

HMIP researchers have developed a self-completion questionnaire to support HMIP Expectations. The questionnaire consists of structured questions covering the prisoner 'journey' from reception to release together with demographic and background questions which enable us to compare responses from different sub-groups of the prisoner population. There are also three open questions at the end of the questionnaire which allow prisoners to express in their own words what they find most positive and negative about the prison<sup>27</sup>.

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

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

### Sampling

On the day of the survey a stratified random sample is drawn up by HMIP researchers from a P-Nomis prisoner population printout ordered by cell location. Using a power calculation, HMIP researchers calculate the minimum sample size required to ensure that the survey findings are representative of the entire population of the establishment.<sup>28</sup>

### Distributing and collecting questionnaires

HMIP researchers distribute and collect the questionnaires in person. So that prisoners can give their informed consent<sup>29</sup> to participate, the purpose of the survey is explained and assurances are given about confidentiality and anonymity. Prisoners are made aware that participation in the survey is voluntary; prisoners who decline to participate are not replaced within the sample. Those who agree to participate are provided with a sealable envelope for their completed questionnaire and told when we will be returning to collect it. We make arrangements to administer the questionnaire via a face-to-face interview for respondents who disclose literacy difficulties.

### Survey response

At the time of the survey on 27 August 2019 the prisoner population at HMP Liverpool was 692. Using the sampling method described above, questionnaires were distributed to 203 prisoners. We received a total of 155 completed questionnaires, a response rate of 76%. Twenty-one prisoners declined to participate in the survey and 27 questionnaires were either not returned at all or returned blank.

<sup>27</sup> Qualitative analysis of these written comments is undertaken by HMIP researchers and used by inspectors.

<sup>28</sup> 95% confidence interval with a 7% margin of error. The formula assumes a 75% response rate (65% in open establishments).

<sup>29</sup> For further information about the ethical principles which underpin our survey methodology, please see 'Ethical principles for research activities' which can be downloaded from HMIP's website <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

## Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for HMP Liverpool. For the comparator analyses, each question was reformulated into a binary 'yes/no' format and affirmative responses compared.<sup>30</sup> Missing responses have been excluded from all analyses and for some questions, responses from a sub-group of the sample are reported (as indicated in the data).

### Full survey results

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

### Responses from HMP Liverpool 2019 compared with those from other HMIP surveys<sup>31</sup>

- Survey responses from HMP Liverpool in 2019 compared with survey responses from other local prisons inspected since September 2017.
- Survey responses from HMP Liverpool in 2019 compared with survey responses from HMP Liverpool in 2017.

### Comparisons between different residential locations within HMP Liverpool 2019

- responses of prisoners on the vulnerable prisoner unit (K wing) compared with those from the rest of the establishment.
- responses of prisoners on the wellbeing unit (J wing) compared with those from the rest of the establishment.

### Comparisons between self-reported sub-populations of prisoners within HMP Liverpool 2019<sup>32</sup>

- responses of prisoners aged 25 and under compared with those over 25.
- responses of prisoners aged 50 and over compared with those under 50.
- responses of prisoners from black or minority ethnic groups compared with those of white prisoners.
- 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 to those who did not.

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group.<sup>33</sup>

In the comparator analyses, statistically significant<sup>34</sup> differences are indicated by shading. Results that are significantly more positive are indicated by green shading and results that are significantly more negative are indicated by blue shading. Orange shading has been used to show a statistically significant difference in demographic or other background details. If there is no shading, any difference between the two results is not statistically significant and may have occurred by chance. Grey shading indicates that there are no valid comparative data for that question.

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

<sup>30</sup> Using the Chi-square test (or Fisher's exact test if there are fewer than five responses in a group).

<sup>31</sup> These analyses are carried out on summary data from all survey questions. As we have been using a new version of the questionnaire since September 2017, we do not yet have full comparator data for all questions.

<sup>32</sup> These analyses are carried out on summary data from selected survey questions only.

<sup>33</sup> A minimum of 10 responses which must also represent at least 10% of the total response.

<sup>34</sup> A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. In order to appropriately adjust p-values in light of multiple testing,  $p < 0.01$  is considered statistically significant for all comparisons undertaken. This means there is only a 1% likelihood that the difference is due to chance.

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

<b>I.1</b>	<b>What wing or houseblock are you currently living on?</b>	
	A Wing.....	17 (11%)
	B Wing.....	25 (16%)
	F Wing.....	16 (10%)
	G Wing.....	29 (19%)
	I Wing.....	31 (20%)
	J Wing.....	10 (6%)
	K Wing.....	24 (15%)
	Health care unit.....	3 (2%)
<b>I.2</b>	<b>How old are you?</b>	
	Under 21 .....	1 (1%)
	21 - 25.....	22 (14%)
	26 - 29.....	32 (21%)
	30 - 39.....	41 (27%)
	40 - 49.....	33 (21%)
	50 - 59.....	20 (13%)
	60 - 69.....	4 (3%)
	70 or over.....	1 (1%)
<b>I.3</b>	<b>What is your ethnic group?</b>	
	White - English/ Welsh/ Scottish/ Northern Irish/ British .....	123 (80%)
	White - Irish.....	5 (3%)
	White - Gypsy or Irish Traveller.....	2 (1%)
	White - any other White background .....	5 (3%)
	Mixed - White and Black Caribbean .....	2 (1%)
	Mixed - White and Black African .....	3 (2%)
	Mixed - White and Asian .....	2 (1%)
	Mixed - any other Mixed ethnic background .....	1 (1%)
	Asian/ Asian British - Indian.....	0 (0%)
	Asian/ Asian British - Pakistani.....	0 (0%)
	Asian/ Asian British - Bangladeshi.....	0 (0%)
	Asian/ Asian British - Chinese.....	1 (1%)
	Asian - any other Asian Background .....	0 (0%)
	Black/ Black British - Caribbean .....	5 (3%)
	Black/ Black British - African .....	0 (0%)
	Black - any other Black/ African/ Caribbean background.....	2 (1%)
	Arab.....	2 (1%)
	Any other ethnic group.....	1 (1%)
<b>I.4</b>	<b>How long have you been in this prison?</b>	
	Less than 6 months.....	83 (56%)
	6 months or more .....	64 (44%)
<b>I.5</b>	<b>Are you currently serving a sentence?</b>	
	Yes.....	79 (53%)
	Yes - on recall.....	35 (23%)
	No - on remand or awaiting sentence.....	35 (23%)
	No - immigration detainee.....	1 (1%)

<b>1.6</b>	<b>How long is your sentence?</b>	
	Less than 6 months.....	26 (18%)
	6 months to less than 1 year.....	12 (8%)
	1 year to less than 4 years.....	18 (12%)
	4 years to less than 10 years.....	23 (16%)
	10 years or more.....	23 (16%)
	IPP (indeterminate sentence for public protection).....	9 (6%)
	Life.....	1 (1%)
	Not currently serving a sentence.....	36 (24%)

## Arrival and reception

<b>2.1</b>	<b>Were you given up-to-date information about this prison before you came here?</b>	
	Yes.....	44 (29%)
	No.....	95 (63%)
	Don't remember.....	11 (7%)
<b>2.2</b>	<b>When you arrived at this prison, how long did you spend in reception?</b>	
	Less than 2 hours.....	52 (34%)
	2 hours or more.....	95 (63%)
	Don't remember.....	5 (3%)
<b>2.3</b>	<b>When you were searched in reception, was this done in a respectful way?</b>	
	Yes.....	125 (82%)
	No.....	19 (12%)
	Don't remember.....	9 (6%)
<b>2.4</b>	<b>Overall, how were you treated in reception?</b>	
	Very well.....	48 (32%)
	Quite well.....	81 (54%)
	Quite badly.....	14 (9%)
	Very badly.....	5 (3%)
	Don't remember.....	2 (1%)
<b>2.5</b>	<b>When you first arrived here, did you have any of the following problems?</b>	
	Problems getting phone numbers.....	61 (42%)
	Contacting family.....	51 (35%)
	Arranging care for children or other dependants.....	3 (2%)
	Contacting employers.....	7 (5%)
	Money worries.....	35 (24%)
	Housing worries.....	28 (19%)
	Feeling depressed.....	60 (41%)
	Feeling suicidal.....	23 (16%)
	Other mental health problems.....	40 (28%)
	Physical health problems.....	27 (19%)
	Drug or alcohol problems (e.g. withdrawal).....	40 (28%)
	Problems getting medication.....	29 (20%)
	Needing protection from other prisoners.....	14 (10%)
	Lost or delayed property.....	19 (13%)
	Other problems.....	12 (8%)
	Did not have any problems.....	26 (18%)
<b>2.6</b>	<b>Did staff help you to deal with these problems when you first arrived?</b>	
	Yes.....	60 (43%)
	No.....	55 (39%)
	Did not have any problems when I first arrived.....	26 (18%)

## First night and induction

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

Tobacco or nicotine replacement.....	121 (82%)
Toiletries / other basic items .....	104 (70%)
A shower.....	119 (80%)
A free phone call.....	108 (73%)
Something to eat.....	129 (87%)
The chance to see someone from health care .....	115 (78%)
The chance to talk to a Listener or Samaritans.....	64 (43%)
Support from another prisoner (e.g. Insider or buddy) .....	49 (33%)
Wasn't offered any of these things.....	1 (1%)

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

Very clean .....	25 (16%)
Quite clean .....	42 (27%)
Quite dirty.....	39 (25%)
Very dirty.....	44 (29%)
Don't remember .....	3 (2%)

### 3.3 Did you feel safe on your first night here?

Yes .....	110 (72%)
No.....	39 (26%)
Don't remember .....	3 (2%)

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

	Yes	No	Don't remember
Access to the prison shop / canteen?	78 (53%)	62 (42%)	7 (5%)
Free PIN phone credit?	97 (66%)	47 (32%)	4 (3%)
Numbers put on your PIN phone?	59 (42%)	78 (55%)	4 (3%)

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

Yes.....	85 (58%)
No.....	53 (36%)
Have not had an induction.....	8 (5%)

## On the wing

### 4.1 Are you in a cell on your own?

Yes.....	58 (38%)
No, I'm in a shared cell or dormitory.....	93 (62%)

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

Yes.....	48 (32%)
No.....	87 (58%)
Don't know.....	15 (10%)
Don't have a cell call bell.....	0 (0%)

**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?	110 (73%)	38 (25%)	2 (1%)
Can you shower every day?	134 (88%)	16 (11%)	2 (1%)
Do you have clean sheets every week?	126 (85%)	19 (13%)	4 (3%)
Do you get cell cleaning materials every week?	68 (46%)	72 (49%)	8 (5%)
Is it normally quiet enough for you to relax or sleep at night?	93 (65%)	47 (33%)	3 (2%)
Can you get your stored property if you need it?	50 (36%)	56 (40%)	33 (24%)

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

Very clean .....	27 (18%)
Quite clean .....	83 (54%)
Quite dirty .....	33 (22%)
Very dirty .....	10 (7%)

**Food and canteen**

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

Very good .....	12 (8%)
Quite good .....	45 (30%)
Quite bad .....	58 (39%)
Very bad .....	35 (23%)

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

Always .....	23 (15%)
Most of the time .....	33 (22%)
Some of the time .....	57 (38%)
Never .....	39 (26%)

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

Yes .....	99 (67%)
No .....	37 (25%)
Don't know .....	11 (7%)

**Relationships with staff**

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

Yes .....	110 (75%)
No .....	37 (25%)

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

Yes .....	112 (79%)
No .....	30 (21%)

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

Yes .....	73 (48%)
No .....	78 (52%)

**6.4 How helpful is your personal or named officer?**

Very helpful .....	49 (34%)
Quite helpful .....	36 (25%)
Not very helpful .....	9 (6%)
Not at all helpful .....	11 (8%)

Don't know.....	19 (13%)
Don't have a personal / named officer.....	22 (15%)

**6.5 How often do you see prison governors, directors or senior managers talking to prisoners?**

Regularly.....	34 (23%)
Sometimes.....	33 (22%)
Hardly ever.....	71 (48%)
Don't know.....	10 (7%)

**6.6 Do you feel that you are treated as an individual in this prison?**

Yes.....	81 (56%)
No.....	63 (44%)

**6.7 Are prisoners here consulted about things like food, canteen, health care or wing issues?**

Yes, and things sometimes change.....	30 (21%)
Yes, but things don't change.....	35 (24%)
No.....	46 (32%)
Don't know.....	35 (24%)

## Faith

**7.1 What is your religion?**

No religion.....	40 (27%)
Christian (including Church of England, Catholic, Protestant and all other Christian denominations).....	92 (62%)
Buddhist.....	2 (1%)
Hindu.....	0 (0%)
Jewish.....	1 (1%)
Muslim.....	7 (5%)
Sikh.....	0 (0%)
Other.....	6 (4%)

**7.2 Are your religious beliefs respected here?**

Yes.....	68 (47%)
No.....	12 (8%)
Don't know.....	26 (18%)
Not applicable (no religion).....	40 (27%)

**7.3 Are you able to speak to a Chaplain of your faith in private, if you want to?**

Yes.....	76 (52%)
No.....	5 (3%)
Don't know.....	26 (18%)
Not applicable (no religion).....	40 (27%)

**7.4 Are you able to attend religious services, if you want to?**

Yes.....	90 (61%)
No.....	7 (5%)
Don't know.....	11 (7%)
Not applicable (no religion).....	40 (27%)

## Contact with family and friends

**8.1 Have staff here encouraged you to keep in touch with your family / friends?**

Yes.....	52 (36%)
No.....	94 (64%)



<b>8.2</b>	<b>Have you had any problems with sending or receiving mail (letters or parcels)?</b>	
	Yes.....	68 (47%)
	No.....	78 (53%)
<b>8.3</b>	<b>Are you able to use a phone every day (if you have credit)?</b>	
	Yes.....	135 (92%)
	No.....	11 (8%)
<b>8.4</b>	<b>How easy or difficult is it for your family and friends to get here?</b>	
	Very easy.....	52 (35%)
	Quite easy.....	49 (33%)
	Quite difficult.....	14 (9%)
	Very difficult.....	21 (14%)
	Don't know.....	14 (9%)
<b>8.5</b>	<b>How often do you have visits from family or friends?</b>	
	More than once a week.....	11 (8%)
	About once a week.....	23 (16%)
	Less than once a week.....	69 (48%)
	Not applicable (don't get visits).....	41 (28%)
<b>8.6</b>	<b>Do visits usually start and finish on time?</b>	
	Yes.....	76 (77%)
	No.....	23 (23%)
<b>8.7</b>	<b>Are your visitors usually treated respectfully by staff?</b>	
	Yes.....	87 (88%)
	No.....	12 (12%)

#### Time out of cell

<b>9.1</b>	<b>Do you know what the unlock and lock-up times are supposed to be here (or roll check times if you are in an open prison)?</b>	
	Yes, and these times are usually kept to.....	81 (56%)
	Yes, but these times are not usually kept to.....	46 (32%)
	No.....	18 (12%)
<b>9.2</b>	<b>How long do you usually spend out of your cell on a typical weekday (including time spent at education, work etc.)?</b>	
	Less than 2 hours.....	37 (25%)
	2 to 6 hours.....	56 (38%)
	6 to 10 hours.....	38 (26%)
	10 hours or more.....	6 (4%)
	Don't know.....	9 (6%)
<b>9.3</b>	<b>How long do you usually spend out of your cell on a typical Saturday or Sunday?</b>	
	Less than 2 hours.....	96 (65%)
	2 to 6 hours.....	38 (26%)
	6 to 10 hours.....	3 (2%)
	10 hours or more.....	3 (2%)
	Don't know.....	7 (5%)
<b>9.4</b>	<b>How many days in a typical week do you have time to do domestics (shower, clean cell, use the wing phones etc.)?</b>	
	None.....	5 (3%)
	1 or 2.....	30 (21%)

3 to 5.....	33 (23%)
More than 5.....	62 (42%)
Don't know.....	16 (11%)

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

None .....	11 (7%)
1 or 2 .....	17 (11%)
3 to 5.....	57 (38%)
More than 5.....	51 (34%)
Don't know.....	14 (9%)

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

None .....	6 (4%)
1 or 2 .....	36 (24%)
3 to 5.....	56 (38%)
More than 5.....	29 (20%)
Don't know.....	20 (14%)

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

Twice a week or more .....	78 (55%)
About once a week .....	19 (13%)
Less than once a week.....	6 (4%)
Never .....	40 (28%)

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

Twice a week or more .....	10 (7%)
About once a week .....	36 (25%)
Less than once a week.....	27 (19%)
Never .....	71 (49%)

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

Yes .....	48 (33%)
No.....	25 (17%)
Don't use the library .....	71 (49%)

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

Yes .....	102 (69%)
No.....	36 (24%)
Don't know.....	10 (7%)

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

	Yes	No	Not made any applications
Are applications usually dealt with fairly?	71 (54%)	47 (36%)	14 (11%)
Are applications usually dealt with within 7 days?	59 (49%)	47 (39%)	14 (12%)

**10.3 Is it easy for you to make a complaint?**

Yes .....	97 (67%)
No.....	30 (21%)
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?	28 (21%)	52 (39%)	53 (40%)
Are complaints usually dealt with within 7 days?	29 (25%)	36 (31%)	53 (45%)

**10.5 Have you ever been prevented from making a complaint here when you wanted to?**

Yes .....	28 (20%)
No.....	73 (53%)
Not wanted to make a complaint.....	38 (27%)

**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?	66 (48%)	29 (21%)	24 (17%)	19 (14%)
Attend legal visits?	76 (60%)	13 (10%)	21 (17%)	17 (13%)
Get bail information?	27 (22%)	29 (24%)	32 (26%)	34 (28%)

**10.7 Have staff here ever opened letters from your solicitor or legal representative when you were not present?**

Yes .....	73 (51%)
No.....	53 (37%)
Not had any legal letters .....	16 (11%)

## 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	22 (15%)	45 (31%)	44 (30%)	27 (19%)	7 (5%)
Nurse	36 (26%)	52 (37%)	30 (22%)	9 (6%)	12 (9%)
Dentist	12 (9%)	28 (20%)	40 (29%)	41 (29%)	19 (14%)
Mental health workers	20 (15%)	33 (25%)	29 (22%)	22 (16%)	30 (22%)

**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	31 (22%)	43 (30%)	29 (21%)	21 (15%)	17 (12%)
Nurse	31 (22%)	59 (42%)	24 (17%)	10 (7%)	15 (11%)
Dentist	21 (16%)	34 (26%)	20 (15%)	14 (11%)	42 (32%)
Mental health workers	29 (22%)	32 (24%)	11 (8%)	14 (10%)	48 (36%)

**11.3 Do you have any mental health problems?**

Yes .....	70 (50%)
No.....	71 (50%)

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

Yes .....	42 (30%)
No.....	27 (19%)
Don't have any mental health problems.....	71 (51%)

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

Very good.....	21 (15%)
Quite good.....	55 (39%)
Quite bad .....	36 (26%)
Very bad .....	16 (11%)
Don't know.....	12 (9%)

**Other support needs**

<b>12.1</b>	<b>Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?</b>	
	Yes .....	58 (41%)
	No.....	85 (59%)
<b>12.2</b>	<b>If you have a disability, are you getting the support you need?</b>	
	Yes .....	19 (13%)
	No.....	38 (27%)
	Don't have a disability .....	85 (60%)
<b>12.3</b>	<b>Have you been on an ACCT in this prison?</b>	
	Yes .....	38 (27%)
	No.....	101 (73%)
<b>12.4</b>	<b>If you have been on an ACCT in this prison, did you feel cared for by staff?</b>	
	Yes .....	24 (17%)
	No.....	14 (10%)
	Have not been on an ACCT in this prison.....	101 (73%)
<b>12.5</b>	<b>How easy or difficult is it for you to speak to a Listener, if you need to?</b>	
	Very easy.....	60 (43%)
	Quite easy.....	33 (24%)
	Quite difficult .....	5 (4%)
	Very difficult .....	2 (1%)
	Don't know.....	39 (28%)
	No Listeners at this prison .....	0 (0%)

**Alcohol and drugs**

<b>13.1</b>	<b>Did you have an alcohol problem when you came into this prison?</b>	
	Yes .....	32 (23%)
	No.....	110 (77%)
<b>13.2</b>	<b>Have you been helped with your alcohol problem in this prison?</b>	
	Yes .....	21 (15%)
	No.....	8 (6%)
	Did not / do not have an alcohol problem .....	110 (79%)
<b>13.3</b>	<b>Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?</b>	
	Yes .....	51 (36%)
	No.....	89 (64%)
<b>13.4</b>	<b>Have you developed a problem with illicit drugs since you have been in this prison?</b>	
	Yes .....	22 (16%)
	No.....	118 (84%)
<b>13.5</b>	<b>Have you developed a problem with taking medication not prescribed to you since you have been in this prison?</b>	
	Yes .....	13 (9%)
	No.....	128 (91%)

<b>13.6</b>	<b>Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?</b>	
	Yes .....	39 (28%)
	No.....	23 (17%)
	Did not / do not have a drug problem.....	77 (55%)
<b>13.7</b>	<b>Is it easy or difficult to get illicit drugs in this prison?</b>	
	Very easy.....	50 (35%)
	Quite easy.....	23 (16%)
	Quite difficult .....	7 (5%)
	Very difficult .....	8 (6%)
	Don't know.....	53 (38%)
<b>13.8</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	Very easy.....	14 (10%)
	Quite easy.....	15 (10%)
	Quite difficult .....	11 (8%)
	Very difficult .....	29 (20%)
	Don't know.....	74 (52%)

## Safety

<b>14.1</b>	<b>Have you ever felt unsafe here?</b>	
	Yes .....	74 (51%)
	No.....	71 (49%)
<b>14.2</b>	<b>Do you feel unsafe now?</b>	
	Yes .....	30 (22%)
	No.....	109 (78%)
<b>14.3</b>	<b>Have you experienced any of the following types of bullying / victimisation from other prisoners here? (Please tick all that apply.)</b>	
	Verbal abuse.....	38 (29%)
	Threats or intimidation.....	31 (23%)
	Physical assault.....	22 (17%)
	Sexual assault .....	3 (2%)
	Theft of canteen or property.....	21 (16%)
	Other bullying / victimisation .....	20 (15%)
	Not experienced any of these from prisoners here.....	75 (56%)
<b>14.4</b>	<b>If you were being bullied / victimised by other prisoners here, would you report it?</b>	
	Yes .....	37 (28%)
	No.....	95 (72%)
<b>14.5</b>	<b>Have you experienced any of the following types of bullying / victimisation from staff here? (Please tick all that apply.)</b>	
	Verbal abuse.....	43 (31%)
	Threats or intimidation.....	33 (24%)
	Physical assault.....	17 (12%)
	Sexual assault .....	1 (1%)
	Theft of canteen or property.....	13 (9%)
	Other bullying / victimisation .....	22 (16%)
	Not experienced any of these from staff here.....	77 (56%)
<b>14.6</b>	<b>If you were being bullied / victimised by staff here, would you report it?</b>	
	Yes .....	63 (47%)
	No.....	71 (53%)

**Behaviour management****15.1 Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?**

Yes .....	75 (54%)
No.....	44 (32%)
Don't know what the incentives / rewards are.....	19 (14%)

**15.2 Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?**

Yes .....	75 (54%)
No.....	37 (26%)
Don't know.....	14 (10%)
Don't know what this is .....	14 (10%)

**15.3 Have you been physically restrained by staff in this prison in the last 6 months?**

Yes .....	11 (8%)
No.....	131 (92%)

**15.4 If you have been restrained by staff in this prison in the last 6 months, did anyone come and talk to you about it afterwards?**

Yes .....	1 (1%)
No.....	10 (7%)
Don't remember .....	0 (0%)
Not been restrained here in last 6 months.....	131 (92%)

**15.5 Have you spent one or more nights in the segregation unit in this prison in the last 6 months?**

Yes .....	13 (9%)
No.....	128 (91%)

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

	Yes	No
Were you treated well by segregation staff?	6 (50%)	6 (50%)
Could you shower every day?	8 (73%)	3 (27%)
Could you go outside for exercise every day?	9 (82%)	2 (18%)
Could you use the phone every day (if you had credit)?	7 (70%)	3 (30%)

**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	95 (71%)	18 (14%)	18 (14%)	2 (2%)
Vocational or skills training	62 (49%)	29 (23%)	33 (26%)	2 (2%)
Prison job	83 (61%)	33 (24%)	17 (13%)	2 (1%)
Voluntary work outside of the prison	8 (6%)	15 (12%)	48 (38%)	54 (43%)
Paid work outside of the prison	7 (6%)	15 (12%)	46 (37%)	58 (46%)

**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	61 (47%)	36 (28%)	32 (25%)
Vocational or skills training	48 (42%)	29 (25%)	38 (33%)

Prison job	56 (45%)	46 (37%)	23 (18%)
Voluntary work outside of the prison	27 (23%)	18 (16%)	71 (61%)
Paid work outside of the prison	27 (23%)	18 (15%)	73 (62%)

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

Yes .....	88 (66%)
No.....	37 (28%)
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 .....	48 (36%)
No.....	84 (64%)

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

Yes .....	44 (94%)
No.....	3 (6%)
Don't know what my objectives or targets are.....	0 (0%)

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

Yes .....	37 (82%)
No.....	8 (18%)
Don't know what my objectives or targets are.....	0 (0%)

**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	27 (59%)	2 (4%)	17 (37%)
Other programmes	27 (63%)	0 (0%)	16 (37%)
One to one work	19 (48%)	1 (3%)	20 (50%)
Being on a specialist unit	4 (13%)	1 (3%)	27 (84%)
ROTL - day or overnight release	4 (11%)	0 (0%)	33 (89%)

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

Yes .....	39 (29%)
No.....	75 (55%)
Don't know.....	22 (16%)

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

Very near.....	12 (32%)
Quite near.....	19 (51%)
Quite far.....	4 (11%)
Very far.....	2 (5%)

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

Yes .....	27 (75%)
No.....	9 (25%)

**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	10 (29%)	14 (41%)	10 (29%)
Getting employment	5 (16%)	19 (59%)	8 (25%)
Setting up education or training	3 (10%)	15 (52%)	11 (38%)
Arranging benefits	13 (42%)	14 (45%)	4 (13%)
Sorting out finances	5 (19%)	14 (52%)	8 (30%)
Support for drug or alcohol problems	9 (30%)	7 (23%)	14 (47%)
Health / mental health support	8 (29%)	11 (39%)	9 (32%)
Social care support	2 (9%)	8 (35%)	13 (57%)
Getting back in touch with family or friends	6 (22%)	7 (26%)	14 (52%)

### More about you

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

Yes .....	85 (62%)
No.....	52 (38%)

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

Yes .....	124 (92%)
No.....	11 (8%)

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

Yes .....	4 (3%)
No.....	131 (97%)

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

Yes .....	12 (9%)
No.....	124 (91%)

#### 19.5 What is your gender?

Male.....	139 (100%)
Female.....	0 (0%)
Non-binary.....	0 (0%)
Other .....	0 (0%)

#### 19.6 How would you describe your sexual orientation?

Straight / heterosexual.....	133 (97%)
Gay / lesbian / homosexual.....	2 (1%)
Bisexual.....	2 (1%)
Other .....	0 (0%)

#### 19.7 Do you identify as transgender or transsexual?

Yes .....	4 (3%)
No.....	127 (97%)

### Final question 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.....	16 (11%)
Less likely to offend.....	72 (51%)
Made no difference .....	52 (37%)



## HMP Liverpool 2019

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

In this table the following analyses are presented:  
 - responses of prisoners from black and minority ethnic groups are compared with those of white prisoners  
 Please note that these analyses are based on summary data from selected survey questions only.

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

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

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

Black and minority ethnic	White
<b>19</b>	<b>135</b>

Number of completed questionnaires returned

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 25 years of age?	21%	14%
	Are you 50 years of age or older?	11%	17%
1.3	Are you from a minority ethnic group?		
7.1	Are you Muslim?	22%	2%
11.3	Do you have any mental health problems?	24%	54%
12.1	Do you consider yourself to have a disability?	29%	42%
19.2	Are you a foreign national?	25%	6%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	3%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	95%	80%
2.4	Overall, were you treated very / quite well in reception?	88%	86%
2.5	When you first arrived, did you have any problems?	88%	81%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	46%	54%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	53%	75%
3.5	Have you had an induction at this prison?	81%	96%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	46%	64%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	32%	32%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	82%	73%
	- Can you shower every day?	95%	87%
	- Do you have clean sheets every week?	94%	83%
	- Do you get cell cleaning materials every week?	56%	44%
	- Is it normally quiet enough for you to relax or sleep at night?	65%	65%
	- Can you get your stored property if you need it?	33%	37%

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

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

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

Black and minority ethnic	White
<b>19</b>	<b>135</b>

Number of completed questionnaires returned

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	<b>42%</b>	<b>36%</b>
5.3	Does the shop / canteen sell the things that you need?	<b>56%</b>	<b>70%</b>
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	<b>79%</b>	<b>75%</b>
6.2	Are there any staff here you could turn to if you had a problem?	<b>81%</b>	<b>78%</b>
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<b>53%</b>	<b>47%</b>
6.6	Do you feel that you are treated as an individual in this prison?	<b>63%</b>	<b>55%</b>
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	<b>69%</b>	<b>63%</b>
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	<b>67%</b>	<b>72%</b>
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	<b>29%</b>	<b>37%</b>
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	<b>50%</b>	<b>47%</b>
8.3	Are you able to use a phone every day (if you have credit)?	<b>100%</b>	<b>92%</b>
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	<b>92%</b>	<b>87%</b>
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	<b>22%</b>	<b>26%</b>
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	<b>6%</b>	<b>4%</b>
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	<b>67%</b>	<b>66%</b>
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	<b>72%</b>	<b>68%</b>
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	<b>64%</b>	<b>60%</b>
10.3	Is it easy for you to make a complaint?	<b>59%</b>	<b>68%</b>
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	<b>50%</b>	<b>34%</b>
10.5	Have you ever been prevented from making a complaint here when you wanted to?	<b>50%</b>	<b>25%</b>

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

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

	Black and minority ethnic	White
<b>Number of completed questionnaires returned</b>	<b>19</b>	<b>135</b>

<b>HEALTH CARE</b>			
11.1	Is it very / quite easy to see:		
	- Doctor?	39%	47%
	- Nurse?	50%	65%
	- Dentist?	28%	29%
	- Mental health workers?	29%	41%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	50%	62%
11.5	Do you think the overall quality of the health services here is very / quite good?	44%	55%
<b>OTHER SUPPORT NEEDS</b>			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	40%	31%
<b>SAFETY</b>			
14.1	Have you ever felt unsafe here?	67%	48%
14.2	Do you feel unsafe now?	31%	21%
14.3	Not experienced bullying / victimisation by other prisoners	53%	57%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	35%	27%
14.5	Not experienced bullying / victimisation by members of staff	56%	57%
14.6	If you were being bullied / victimised by staff here, would you report it?	60%	46%
<b>BEHAVIOUR MANAGEMENT</b>			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	50%	56%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	59%	53%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	17%	7%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	6%	10%
<b>EDUCATION, SKILLS AND WORK</b>			
16.3	Do staff encourage you to attend education, training or work?	73%	71%
<b>PLANNING AND PROGRESSION</b>			
17.1	Do you have a custody plan?	27%	37%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	100%	81%
<b>PREPARATION FOR RELEASE</b>			
<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?	75%	75%
<b>FINAL QUESTION ABOUT THIS PRISON</b>			
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	56%	51%

## HMP Liverpool 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
	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

Mental health problems	No mental health problems	Have a disability	Do not have a disability
70	71	58	85

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	11%	16%	7%	18%
	Are you 50 years of age or older?	21%	13%	30%	9%
1.3	Are you from a minority ethnic group?	6%	19%	9%	14%
7.1	Are you Muslim?	4%	6%	5%	5%
11.3	Do you have any mental health problems?			79%	29%
12.1	Do you consider yourself to have a disability?	65%	17%		
19.2	Are you a foreign national?	6%	11%	7%	9%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	3%	2%	2%	3%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	76%	87%	71%	89%
2.4	Overall, were you treated very / quite well in reception?	81%	90%	79%	90%
2.5	When you first arrived, did you have any problems?	87%	76%	87%	78%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	42%	61%	38%	59%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	70%	79%	65%	80%
3.5	Have you had an induction at this prison?	91%	97%	91%	96%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	52%	71%	52%	67%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	32%	33%	30%	33%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	66%	85%	60%	86%
	- Can you shower every day?	88%	89%	83%	92%
	- Do you have clean sheets every week?	81%	91%	81%	89%
	- Do you get cell cleaning materials every week?	33%	61%	44%	49%
	- Is it normally quiet enough for you to relax or sleep at night?	63%	70%	52%	76%
	- Can you get your stored property if you need it?	28%	39%	26%	41%

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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		
	70	71	Have a disability	Do not have a disability
			58	85

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	33%	41%	35%	39%
5.3	Does the shop / canteen sell the things that you need?	62%	73%	52%	78%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	70%	78%	66%	78%
6.2	Are there any staff here you could turn to if you had a problem?	74%	83%	72%	82%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	44%	51%	41%	54%
6.6	Do you feel that you are treated as an individual in this prison?	48%	64%	53%	58%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	60%	71%	63%	66%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	73%	72%	68%	75%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	31%	41%	32%	38%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	52%	40%	50%	44%
8.3	Are you able to use a phone every day (if you have credit)?	94%	94%	93%	93%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	81%	92%	84%	89%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	28%	20%	30%	22%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	6%	4%	5%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	62%	68%	52%	70%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	68%	70%	63%	75%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	48%	74%	47%	71%
10.3	Is it easy for you to make a complaint?	71%	64%	64%	70%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	44%	29%	35%	36%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	31%	21%	41%	19%



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

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

Number of completed questionnaires returned

	Mental health problems	No mental health problems	Have a disability	Do not have a disability
	70	71	58	85

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	41%	50%	43%	48%
	- Nurse?	64%	62%	62%	65%
	- Dentist?	32%	24%	25%	31%
	- Mental health workers?	42%	38%	35%	44%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	63%		61%	64%
11.5	Do you think the overall quality of the health services here is very / quite good?	52%	58%	41%	62%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	35%	33%	33%	
SAFETY					
14.1	Have you ever felt unsafe here?	67%	33%	66%	39%
14.2	Do you feel unsafe now?	32%	12%	29%	16%
14.3	Not experienced bullying / victimisation by other prisoners	46%	67%	43%	65%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	28%	29%	28%	28%
14.5	Not experienced bullying / victimisation by members of staff	45%	70%	40%	68%
14.6	If you were being bullied / victimised by staff here, would you report it?	43%	52%	36%	54%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	45%	65%	34%	69%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	50%	58%	39%	63%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	7%	9%	10%	6%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	16%	3%	17%	4%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	66%	75%	62%	77%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	27%	48%	30%	41%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	71%	89%	88%	79%
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%	82%	73%	76%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	47%	56%	47%	54%

## HMP Liverpool 2019

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

In this table the following analyses are presented:

- responses of prisoners aged 25 and under are compared with those of prisoners over 25
- responses of prisoners aged 50 and over are compared with those of prisoners under 50

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

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

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

Number of completed questionnaires returned

	25 and under	Over 25		50 and over	Under 50
	23	131		25	129

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	4%			1%
	Are you 70 years of age or older?		1%	4%	
1.3	Are you from a minority ethnic group?	17%	12%	8%	13%
7.1	Are you Muslim?	0%	6%	0%	6%
11.3	Do you have any mental health problems?	42%	51%	63%	47%
12.1	Do you consider yourself to have a disability?	21%	43%	68%	34%
19.2	Are you a foreign national?	0%	9%	8%	8%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	11%	2%	0%	4%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	73%	83%	88%	81%
2.4	Overall, were you treated very / quite well in reception?	76%	88%	96%	84%
2.5	When you first arrived, did you have any problems?	61%	86%	68%	84%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	18%	56%	57%	52%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	77%	71%	58%	75%
3.5	Have you had an induction at this prison?	100%	94%	92%	95%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	55%	64%	68%	61%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	14%	35%	64%	26%
4.3					
	- Do you normally have enough clean, suitable clothes for the week?	64%	76%	84%	72%
	- Can you shower every day?	91%	88%	92%	87%
	- Do you have clean sheets every week?	73%	87%	100%	81%
	- Do you get cell cleaning materials every week?	33%	48%	67%	42%
	- Is it normally quiet enough for you to relax or sleep at night?	64%	65%	73%	63%
	- Can you get your stored property if you need it?	35%	37%	43%	35%

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	No shading means that differences are not significant and may have occurred by chance
	Grey shading indicates that we have no valid data for this question

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

Number of completed questionnaires returned

	25 and under	Over 25	50 and over	Under 50
	23	131	25	129

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	36%	37%	56%	33%
5.3	Does the shop / canteen sell the things that you need?	91%	64%	61%	69%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	70%	76%	83%	74%
6.2	Are there any staff here you could turn to if you had a problem?	68%	80%	92%	76%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	32%	51%	68%	44%
6.6	Do you feel that you are treated as an individual in this prison?	33%	60%	71%	53%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	55%	65%	64%	64%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	55%	74%	71%	72%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	23%	38%	44%	34%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	46%	47%	44%	48%
8.3	Are you able to use a phone every day (if you have credit)?	86%	94%	96%	92%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	87%	88%	100%	86%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	29%	25%	24%	26%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	0%	5%	0%	5%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	83%	64%	57%	68%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	55%	71%	72%	68%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	50%	62%	55%	61%
10.3	Is it easy for you to make a complaint?	55%	69%	67%	67%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	13%	38%	39%	35%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	33%	27%	24%	29%



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

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

Number of completed questionnaires returned

	25 and under	Over 25	50 and over	Under 50
	23	131	25	129

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	42%	46%	44%	46%
	- Nurse?	47%	66%	74%	61%
	- Dentist?	25%	29%	29%	29%
	- Mental health workers?	33%	40%	44%	38%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	50%	62%	63%	60%
11.5	Do you think the overall quality of the health services here is very / quite good?	47%	55%	40%	57%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	0%	34%	41%	28%
SAFETY					
14.1	Have you ever felt unsafe here?	52%	50%	67%	48%
14.2	Do you feel unsafe now?	42%	19%	26%	21%
14.3	Not experienced bullying / victimisation by other prisoners	56%	57%	54%	57%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	0%	33%	52%	23%
14.5	Not experienced bullying / victimisation by members of staff	40%	60%	61%	56%
14.6	If you were being bullied / victimised by staff here, would you report it?	26%	51%	48%	47%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	53%	55%	48%	56%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	37%	57%	44%	56%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	5%	8%	0%	10%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	11%	9%	0%	11%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	63%	72%	76%	70%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	12%	40%	25%	39%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	100%	81%	100%	80%
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?	50%	78%	60%	77%
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?	33%	55%	52%	52%

## HMP Liverpool 2019

### Comparison of survey responses from different residential locations

In this table responses from the vulnerable prisoner unit (K wing) are compared with those from the rest of the establishment.

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

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

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

Number of completed questionnaires returned

	Vulnerable prisoner unit (K wing)	Rest of the establishment
Number of completed questionnaires returned	24	128

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	1%
	Are you 25 years of age or younger?	4%	17%
	Are you 50 years of age or older?	33%	13%
	Are you 70 years of age or older?	4%	0%
1.3	Are you from a minority ethnic group?	17%	12%
1.4	Have you been in this prison for less than 6 months?	41%	59%
1.5	Are you currently serving a sentence?	77%	76%
	Are you on recall?	5%	26%
1.6	Is your sentence less than 12 months?	9%	29%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	7%
7.1	Are you Muslim?	0%	6%
11.3	Do you have any mental health problems?	57%	48%
12.1	Do you consider yourself to have a disability?	59%	37%
19.1	Do you have any children under the age of 18?	48%	65%
19.2	Are you a foreign national?	13%	7%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	3%
19.4	Have you ever been in the armed services?	9%	9%
19.5	Is your gender female or non-binary?	0%	0%
19.6	Are you homosexual, bisexual or other sexual orientation?	5%	3%
19.7	Do you identify as transgender or transsexual?	0%	4%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	14%	33%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	17%	37%
2.3	When you were searched in reception, was this done in a respectful way?	74%	83%
2.4	Overall, were you treated very / quite well in reception?	78%	87%

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Vulnerable prisoner unit (K wing)	Rest of the establishment
<b>24</b>	<b>128</b>

Number of completed questionnaires returned

2.5	When you first arrived, did you have any problems?	100%	79%
2.5	Did you have problems with:		
	- Getting phone numbers?	52%	41%
	- Contacting family?	38%	35%
	- Arranging care for children or other dependents?	5%	2%
	- Contacting employers?	5%	5%
	- Money worries?	29%	24%
	- Housing worries?	24%	19%
	- Feeling depressed?	52%	40%
	- Feeling suicidal?	33%	12%
	- Other mental health problems?	48%	24%
	- Physical health problems?	24%	18%
	- Drugs or alcohol (e.g. withdrawal)?	33%	27%
	- Getting medication?	29%	19%
	- Needing protection from other prisoners?	43%	4%
	- Lost or delayed property?	19%	12%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	33%	55%
<b>FIRST NIGHT AND INDUCTION</b>			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	82%	82%
	- Toiletries / other basic items?	64%	72%
	- A shower?	73%	81%
	- A free phone call?	46%	77%
	- Something to eat?	86%	87%
	- The chance to see someone from health care?	50%	82%
	- The chance to talk to a Listener or Samaritans?	32%	44%
	- Support from another prisoner (e.g. Insider or buddy)?	23%	34%
	- None of these?	0%	1%
3.2	On your first night in this prison, was your cell very / quite clean?	42%	44%
3.3	Did you feel safe on your first night here?	30%	80%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	41%	56%
	- Free PIN phone credit?	52%	68%
	- Numbers put on your PIN phone?	29%	44%
3.5	Have you had an induction at this prison?	75%	98%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	47%	63%

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**Number of completed questionnaires returned**

Vulnerable prisoner unit (K wing)	Rest of the establishment
<b>24</b>	<b>128</b>

<b>ON THE WING</b>			
4.1	Are you in a cell on your own?	70%	31%
4.2	Is your cell call bell normally answered within 5 minutes?	50%	27%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	79%	72%
	- Can you shower every day?	83%	89%
	- Do you have clean sheets every week?	92%	83%
	- Do you get cell cleaning materials every week?	46%	46%
	- Is it normally quiet enough for you to relax or sleep at night?	55%	68%
	- Can you get your stored property if you need it?	39%	35%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	75%	71%
<b>FOOD AND CANTEEN</b>			
5.1	Is the quality of the food in this prison very / quite good?	48%	36%
5.2	Do you get enough to eat at meal-times always / most of the time?	48%	33%
5.3	Does the shop / canteen sell the things that you need?	55%	69%
<b>RELATIONSHIPS WITH STAFF</b>			
6.1	Do most staff here treat you with respect?	64%	76%
6.2	Are there any staff here you could turn to if you had a problem?	77%	79%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	44%	48%
6.4	Do you have a personal officer?	86%	84%
	<i>For those who have a personal officer:</i>		
6.4	Is your personal or named officer very / quite helpful?	79%	66%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	14%	24%
6.6	Do you feel that you are treated as an individual in this prison?	40%	58%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	62%	41%
	If so, do things sometimes change?	39%	48%
<b>FAITH</b>			
7.1	Do you have a religion?	71%	73%
	<i>For those who have a religion:</i>		
7.2	Are your religious beliefs respected here?	77%	62%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	69%	71%
7.4	Are you able to attend religious services, if you want to?	65%	89%
<b>CONTACT WITH FAMILY AND FRIENDS</b>			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	19%	37%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	44%	48%
8.3	Are you able to use a phone every day (if you have credit)?	91%	93%
8.4	Is it very / quite easy for your family and friends to get here?	48%	71%
8.5	Do you get visits from family/friends once a week or more?	23%	24%
	<i>For those who get visits:</i>		
8.6	Do visits usually start and finish on time?	83%	76%
8.7	Are your visitors usually treated respectfully by staff?	100%	86%

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Vulnerable prisoner unit (K wing)	Rest of the establishment
<b>24</b>	<b>128</b>

Number of completed questionnaires returned

<b>TIME OUT OF CELL</b>			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	<b>82%</b>	<b>88%</b>
<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
9.1	Are these times usually kept to?	<b>33%</b>	<b>68%</b>
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	<b>27%</b>	<b>25%</b>
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	<b>9%</b>	<b>3%</b>
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	<b>91%</b>	<b>62%</b>
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	<b>5%</b>	<b>2%</b>
9.4	Do you have time to do domestics more than 5 days in a typical week?	<b>39%</b>	<b>44%</b>
9.5	Do you get association more than 5 days in a typical week, if you want it?	<b>35%</b>	<b>34%</b>
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	<b>13%</b>	<b>21%</b>
9.7	Do you typically go to the gym twice a week or more?	<b>46%</b>	<b>57%</b>
9.8	Do you typically go to the library once a week or more?	<b>35%</b>	<b>32%</b>
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	<b>50%</b>	<b>68%</b>
<b>APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS</b>			
10.1	Is it easy for you to make an application?	<b>54%</b>	<b>72%</b>
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	<b>38%</b>	<b>63%</b>
	Are applications usually dealt with within 7 days?	<b>44%</b>	<b>58%</b>
10.3	Is it easy for you to make a complaint?	<b>52%</b>	<b>69%</b>
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	<b>17%</b>	<b>38%</b>
	Are complaints usually dealt with within 7 days?	<b>50%</b>	<b>43%</b>
10.5	Have you ever been prevented from making a complaint here when you wanted to?	<b>44%</b>	<b>25%</b>



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	Vulnerable prisoner unit (K wing)	Rest of the establishment
<b>Number of completed questionnaires returned</b>	<b>24</b>	<b>128</b>

<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	40%	59%
	Attend legal visits?	39%	76%
	Get bail information?	7%	37%
<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?	63%	57%
<b>HEALTH CARE</b>			
11.1	Is it very / quite easy to see:		
	- Doctor?	35%	48%
	- Nurse?	50%	65%
	- Dentist?	27%	28%
	- Mental health workers?	27%	41%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	44%	55%
	- Nurse?	55%	66%
	- Dentist?	24%	45%
	- Mental health workers?	38%	47%
11.3	Do you have any mental health problems?	57%	48%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	55%	61%
11.5	Do you think the overall quality of the health services here is very / quite good?	29%	58%
<b>OTHER SUPPORT NEEDS</b>			
12.1	Do you consider yourself to have a disability?	59%	37%
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	25%	34%
12.3	Have you been on an ACCT in this prison?	55%	22%
<i>For those who have been on an ACCT:</i>			
12.4	Did you feel cared for by staff?	50%	68%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	68%	67%
<b>ALCOHOL AND DRUGS</b>			
13.1	Did you have an alcohol problem when you came into this prison?	39%	19%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	50%	77%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	29%	38%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	19%	15%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	14%	8%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	40%	69%
13.7	Is it very / quite easy to get illicit drugs in this prison?	48%	53%
13.8	Is it very / quite easy to get alcohol in this prison?	18%	21%

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	Vulnerable prisoner unit (K wing)	Rest of the establishment
<b>Number of completed questionnaires returned</b>	<b>24</b>	<b>128</b>

<b>SAFETY</b>			
14.1	Have you ever felt unsafe here?	<b>77%</b>	<b>46%</b>
14.2	Do you feel unsafe now?	<b>33%</b>	<b>20%</b>
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	<b>50%</b>	<b>24%</b>
	- Threats or intimidation?	<b>32%</b>	<b>21%</b>
	- Physical assault?	<b>18%</b>	<b>17%</b>
	- Sexual assault?	<b>5%</b>	<b>2%</b>
	- Theft of canteen or property?	<b>9%</b>	<b>17%</b>
	- Other bullying / victimisation?	<b>27%</b>	<b>13%</b>
	- Not experienced any of these from prisoners here	<b>46%</b>	<b>59%</b>
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<b>35%</b>	<b>26%</b>
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	<b>41%</b>	<b>30%</b>
	- Threats or intimidation?	<b>32%</b>	<b>22%</b>
	- Physical assault?	<b>5%</b>	<b>13%</b>
	- Sexual assault?	<b>0%</b>	<b>1%</b>
	- Theft of canteen or property?	<b>23%</b>	<b>7%</b>
	- Other bullying / victimisation?	<b>32%</b>	<b>13%</b>
	- Not experienced any of these from staff here	<b>36%</b>	<b>61%</b>
14.6	If you were being bullied / victimised by staff here, would you report it?	<b>53%</b>	<b>46%</b>
<b>BEHAVIOUR MANAGEMENT</b>			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<b>32%</b>	<b>59%</b>
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<b>30%</b>	<b>58%</b>
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<b>9%</b>	<b>8%</b>
	<i>For those who have been restrained in the last 6 months:</i>		
15.4	Did anyone come and talk to you about it afterwards?	<b>50%</b>	<b>0%</b>
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	<b>9%</b>	<b>10%</b>
	<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>		
15.6	Were you treated well by segregation staff?	<b>100%</b>	<b>46%</b>
	Could you shower every day?	<b>100%</b>	<b>67%</b>
	Could you go outside for exercise every day?	<b>100%</b>	<b>78%</b>
	Could you use the phone every day (if you had credit)?	<b>100%</b>	<b>67%</b>

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Vulnerable prisoner unit (K wing)	Rest of the establishment
<b>24</b>	<b>128</b>

<b>EDUCATION, SKILLS AND WORK</b>		
<b>16.1</b>	In this prison, is it easy to get into the following activities:	
	- Education?	<b>55%</b> <b>76%</b>
	- Vocational or skills training?	<b>22%</b> <b>55%</b>
	- Prison job?	<b>59%</b> <b>63%</b>
	- Voluntary work outside of the prison?	<b>0%</b> <b>8%</b>
	- Paid work outside of the prison?	<b>0%</b> <b>7%</b>
<b>16.2</b>	In this prison, have you done the following activities:	
	- Education?	<b>70%</b> <b>76%</b>
	- Vocational or skills training?	<b>58%</b> <b>70%</b>
	- Prison job?	<b>80%</b> <b>82%</b>
	- Voluntary work outside of the prison?	<b>29%</b> <b>41%</b>
	- Paid work outside of the prison?	<b>33%</b> <b>39%</b>
<i>For those who have done the following activities, do you think they will help you on release:</i>		
	- Education?	<b>57%</b> <b>64%</b>
	- Vocational or skills training?	<b>46%</b> <b>65%</b>
	- Prison job?	<b>38%</b> <b>60%</b>
	- Voluntary work outside of the prison?	<b>40%</b> <b>62%</b>
	- Paid work outside of the prison?	<b>50%</b> <b>61%</b>
<b>16.3</b>	Do staff encourage you to attend education, training or work?	<b>58%</b> <b>73%</b>
<b>PLANNING AND PROGRESSION</b>		
<b>17.1</b>	Do you have a custody plan?	<b>26%</b> <b>39%</b>
<i>For those who have a custody plan:</i>		
<b>17.2</b>	Do you understand what you need to do to achieve your objectives or targets?	<b>100%</b> <b>93%</b>
<b>17.3</b>	Are staff helping you to achieve your objectives or targets?	<b>60%</b> <b>85%</b>
<b>17.4</b>	In this prison, have you done:	
	- Offending behaviour programmes?	<b>33%</b> <b>68%</b>
	- Other programmes?	<b>60%</b> <b>63%</b>
	- One to one work?	<b>50%</b> <b>50%</b>
	- Been on a specialist unit?	<b>0%</b> <b>18%</b>
	- ROTL - day or overnight release?	<b>0%</b> <b>13%</b>
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>		
	- Offending behaviour programmes?	<b>100%</b> <b>93%</b>
	- Other programmes?	<b>100%</b> <b>100%</b>
	- One to one work?	<b>100%</b> <b>94%</b>
	- Being on a specialist unit?	<b>80%</b>
	- ROTL - day or overnight release?	<b>100%</b>



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Vulnerable prisoner unit (K wing)	Rest of the establishment
<b>24</b>	<b>128</b>

Number of completed questionnaires returned

<b>PREPARATION FOR RELEASE</b>			
18.1	Do you expect to be released in the next 3 months?	<b>22%</b>	<b>30%</b>
<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?	<b>60%</b>	<b>87%</b>
18.3	Is anybody helping you to prepare for your release?	<b>20%</b>	<b>84%</b>
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	<b>80%</b>	<b>68%</b>
	- Getting employment?	<b>75%</b>	<b>74%</b>
	- Setting up education or training?	<b>75%</b>	<b>58%</b>
	- Arranging benefits?	<b>100%</b>	<b>85%</b>
	- Sorting out finances?	<b>80%</b>	<b>67%</b>
	- Support for drug or alcohol problems?	<b>100%</b>	<b>48%</b>
	- Health / mental Health support?	<b>75%</b>	<b>65%</b>
	- Social care support?	<b>50%</b>	<b>44%</b>
- Getting back in touch with family or friends?	<b>75%</b>	<b>44%</b>	
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	<b>25%</b>	<b>47%</b>
	- Getting employment?	<b>0%</b>	<b>25%</b>
	- Setting up education or training?	<b>0%</b>	<b>21%</b>
	- Arranging benefits?	<b>25%</b>	<b>55%</b>
	- Sorting out finances?	<b>25%</b>	<b>29%</b>
	- Support for drug or alcohol problems?	<b>25%</b>	<b>67%</b>
	- Health / mental Health support?	<b>0%</b>	<b>53%</b>
	- Social care support?	<b>0%</b>	<b>25%</b>
- Getting back in touch with family or friends?	<b>33%</b>	<b>50%</b>	
<b>FINAL QUESTION ABOUT THIS PRISON</b>			
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	<b>68%</b>	<b>49%</b>

## HMP Liverpool 2019

### Comparison of survey responses from different residential locations

In this table responses from the well-being unit (J wing) are compared with those from rest of the establishment.

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Well-being unit (J wing)	Rest of the establishment
10	142

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	1%
	Are you 25 years of age or younger?	0%	16%
	Are you 50 years of age or older?	30%	15%
	Are you 70 years of age or older?	0%	1%
1.3	Are you from a minority ethnic group?	0%	14%
1.4	Have you been in this prison for less than 6 months?	30%	58%
1.5	Are you currently serving a sentence?	80%	76%
	Are you on recall?	40%	21%
1.6	Is your sentence less than 12 months?	10%	27%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	40%	4%
7.1	Are you Muslim?	0%	5%
11.3	Do you have any mental health problems?	70%	47%
12.1	Do you consider yourself to have a disability?	80%	37%
19.1	Do you have any children under the age of 18?	50%	63%
19.2	Are you a foreign national?	0%	9%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	3%
19.4	Have you ever been in the armed services?	10%	9%
19.5	Is your gender female non-binary?	0%	0%
19.6	Are you homosexual, bisexual or other sexual orientation?	10%	2%
19.7	Do you identify as transgender or transsexual?	11%	3%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	40%	29%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	50%	33%
2.3	When you were searched in reception, was this done in a respectful way?	70%	82%
2.4	Overall, were you treated very / quite well in reception?	70%	87%

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	Well-being unit (U wing)	Rest of the establishment
<b>Number of completed questionnaires returned</b>	<b>10</b>	<b>142</b>

<b>2.5</b>	When you first arrived, did you have any problems?	<b>80%</b>	<b>83%</b>
<b>2.5</b>	Did you have problems with:		
	- Getting phone numbers?	<b>30%</b>	<b>43%</b>
	- Contacting family?	<b>40%</b>	<b>35%</b>
	- Arranging care for children or other dependents?	<b>0%</b>	<b>2%</b>
	- Contacting employers?	<b>0%</b>	<b>5%</b>
	- Money worries?	<b>30%</b>	<b>24%</b>
	- Housing worries?	<b>20%</b>	<b>20%</b>
	- Feeling depressed?	<b>50%</b>	<b>41%</b>
	- Feeling suicidal?	<b>20%</b>	<b>15%</b>
	- Other mental health problems?	<b>30%</b>	<b>27%</b>
	- Physical health problems?	<b>20%</b>	<b>19%</b>
	- Drugs or alcohol (e.g. withdrawal)?	<b>40%</b>	<b>27%</b>
	- Getting medication?	<b>10%</b>	<b>21%</b>
	- Needing protection from other prisoners?	<b>10%</b>	<b>10%</b>
	- Lost or delayed property?	<b>20%</b>	<b>13%</b>
	<i>For those who had any problems when they first arrived:</i>		
<b>2.6</b>	Did staff help you to deal with these problems?	<b>50%</b>	<b>51%</b>
<b>FIRST NIGHT AND INDUCTION</b>			
<b>3.1</b>	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	<b>90%</b>	<b>82%</b>
	- Toiletries / other basic items?	<b>60%</b>	<b>71%</b>
	- A shower?	<b>80%</b>	<b>80%</b>
	- A free phone call?	<b>70%</b>	<b>73%</b>
	- Something to eat?	<b>80%</b>	<b>87%</b>
	- The chance to see someone from health care?	<b>90%</b>	<b>76%</b>
	- The chance to talk to a Listener or Samaritans?	<b>50%</b>	<b>42%</b>
	- Support from another prisoner (e.g. Insider or buddy)?	<b>30%</b>	<b>33%</b>
	- None of these?	<b>0%</b>	<b>1%</b>
<b>3.2</b>	On your first night in this prison, was your cell very / quite clean?	<b>40%</b>	<b>44%</b>
<b>3.3</b>	Did you feel safe on your first night here?	<b>60%</b>	<b>73%</b>
<b>3.4</b>	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	<b>38%</b>	<b>54%</b>
	- Free PIN phone credit?	<b>60%</b>	<b>66%</b>
	- Numbers put on your PIN phone?	<b>50%</b>	<b>41%</b>
<b>3.5</b>	Have you had an induction at this prison?	<b>100%</b>	<b>95%</b>
	<i>For those who have had an induction:</i>		
<b>3.5</b>	Did your induction cover everything you needed to know about this prison?	<b>70%</b>	<b>60%</b>

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	Well-being unit (J wing)	Rest of the establishment
<b>Number of completed questionnaires returned</b>	<b>10</b>	<b>142</b>

<b>ON THE WING</b>			
4.1	Are you in a cell on your own?	100%	33%
4.2	Is your cell call bell normally answered within 5 minutes?	50%	29%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	80%	72%
	- Can you shower every day?	100%	87%
	- Do you have clean sheets every week?	100%	83%
	- Do you get cell cleaning materials every week?	89%	43%
	- Is it normally quiet enough for you to relax or sleep at night?	78%	65%
	- Can you get your stored property if you need it?	33%	36%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	80%	71%
<b>FOOD AND CANTEEN</b>			
5.1	Is the quality of the food in this prison very / quite good?	40%	37%
5.2	Do you get enough to eat at meal-times always / most of the time?	70%	33%
5.3	Does the shop / canteen sell the things that you need?	60%	67%
<b>RELATIONSHIPS WITH STAFF</b>			
6.1	Do most staff here treat you with respect?	90%	73%
6.2	Are there any staff here you could turn to if you had a problem?	78%	79%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	70%	46%
6.4	Do you have a personal officer?	100%	84%
	<i>For those who have a personal officer:</i>		
6.4	Is your personal or named officer very / quite helpful?	80%	67%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	30%	22%
6.6	Do you feel that you are treated as an individual in this prison?	70%	54%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	60%	43%
	If so, do things sometimes change?	67%	44%
<b>FAITH</b>			
7.1	Do you have a religion?	80%	72%
	<i>For those who have a religion:</i>		
7.2	Are your religious beliefs respected here?	63%	64%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	63%	71%
7.4	Are you able to attend religious services, if you want to?	100%	84%
<b>CONTACT WITH FAMILY AND FRIENDS</b>			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	60%	32%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	50%	47%
8.3	Are you able to use a phone every day (if you have credit)?	90%	93%
8.4	Is it very / quite easy for your family and friends to get here?	50%	69%
8.5	Do you get visits from family/friends once a week or more?	20%	24%
	<i>For those who get visits:</i>		
8.6	Do visits usually start and finish on time?	67%	77%
8.7	Are your visitors usually treated respectfully by staff?	100%	87%

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Well-being unit (J wing)	Rest of the establishment
<b>10</b>	<b>142</b>

Number of completed questionnaires returned

<b>TIME OUT OF CELL</b>			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	<b>90%</b>	<b>87%</b>
<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
9.1	Are these times usually kept to?	<b>78%</b>	<b>62%</b>
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	<b>0%</b>	<b>28%</b>
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	<b>20%</b>	<b>3%</b>
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	<b>0%</b>	<b>71%</b>
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	<b>10%</b>	<b>2%</b>
9.4	Do you have time to do domestics more than 5 days in a typical week?	<b>60%</b>	<b>42%</b>
9.5	Do you get association more than 5 days in a typical week, if you want it?	<b>70%</b>	<b>32%</b>
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	<b>50%</b>	<b>17%</b>
9.7	Do you typically go to the gym twice a week or more?	<b>50%</b>	<b>56%</b>
9.8	Do you typically go to the library once a week or more?	<b>10%</b>	<b>34%</b>
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	<b>50%</b>	<b>66%</b>
<b>APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS</b>			
10.1	Is it easy for you to make an application?	<b>90%</b>	<b>68%</b>
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	<b>56%</b>	<b>60%</b>
	Are applications usually dealt with within 7 days?	<b>57%</b>	<b>56%</b>
10.3	Is it easy for you to make a complaint?	<b>70%</b>	<b>66%</b>
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	<b>50%</b>	<b>33%</b>
	Are complaints usually dealt with within 7 days?	<b>67%</b>	<b>42%</b>
10.5	Have you ever been prevented from making a complaint here when you wanted to?	<b>22%</b>	<b>29%</b>



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<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	78%	54%
	Attend legal visits?	86%	68%
	Get bail information?	60%	30%
<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?	70%	57%
<b>HEALTH CARE</b>			
11.1	Is it very / quite easy to see:		
	- Doctor?	60%	44%
	- Nurse?	90%	61%
	- Dentist?	40%	27%
	- Mental health workers?	50%	38%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	60%	53%
	- Nurse?	60%	65%
	- Dentist?	44%	42%
	- Mental health workers?	60%	44%
11.3	Do you have any mental health problems?	70%	47%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	100%	55%
11.5	Do you think the overall quality of the health services here is very / quite good?	50%	54%
<b>OTHER SUPPORT NEEDS</b>			
12.1	Do you consider yourself to have a disability?	80%	37%
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	63%	27%
12.3	Have you been on an ACCT in this prison?	30%	27%
<i>For those who have been on an ACCT:</i>			
12.4	Did you feel cared for by staff?	100%	59%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	100%	65%
<b>ALCOHOL AND DRUGS</b>			
13.1	Did you have an alcohol problem when you came into this prison?	50%	20%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	100%	65%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	30%	37%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	10%	16%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	10%	9%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	100%	62%
13.7	Is it very / quite easy to get illicit drugs in this prison?	70%	50%
13.8	Is it very / quite easy to get alcohol in this prison?	50%	18%

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	<b>10</b>	<b>142</b>

<b>SAFETY</b>			
14.1	Have you ever felt unsafe here?	<b>70%</b>	<b>50%</b>
14.2	Do you feel unsafe now?	<b>40%</b>	<b>21%</b>
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	<b>50%</b>	<b>26%</b>
	- Threats or intimidation?	<b>20%</b>	<b>23%</b>
	- Physical assault?	<b>10%</b>	<b>17%</b>
	- Sexual assault?	<b>0%</b>	<b>3%</b>
	- Theft of canteen or property?	<b>20%</b>	<b>16%</b>
	- Other bullying / victimisation?	<b>10%</b>	<b>16%</b>
	- Not experienced any of these from prisoners here	<b>40%</b>	<b>58%</b>
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<b>40%</b>	<b>27%</b>
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	<b>20%</b>	<b>33%</b>
	- Threats or intimidation?	<b>0%</b>	<b>26%</b>
	- Physical assault?	<b>0%</b>	<b>13%</b>
	- Sexual assault?	<b>0%</b>	<b>1%</b>
	- Theft of canteen or property?	<b>0%</b>	<b>11%</b>
	- Other bullying / victimisation?	<b>10%</b>	<b>17%</b>
	- Not experienced any of these from staff here	<b>70%</b>	<b>56%</b>
14.6	If you were being bullied / victimised by staff here, would you report it?	<b>50%</b>	<b>47%</b>
<b>BEHAVIOUR MANAGEMENT</b>			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<b>40%</b>	<b>56%</b>
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<b>60%</b>	<b>53%</b>
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<b>10%</b>	<b>8%</b>
	<i>For those who have been restrained in the last 6 months:</i>		
15.4	Did anyone come and talk to you about it afterwards?	<b>0%</b>	<b>10%</b>
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	<b>10%</b>	<b>9%</b>
	<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>		
15.6	Were you treated well by segregation staff?	<b>0%</b>	<b>55%</b>
	Could you shower every day?	<b>0%</b>	<b>80%</b>
	Could you go outside for exercise every day?	<b>0%</b>	<b>90%</b>
	Could you use the phone every day (if you had credit)?	<b>0%</b>	<b>78%</b>

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<b>EDUCATION, SKILLS AND WORK</b>		
<b>16.1</b>	In this prison, is it easy to get into the following activities:	
	- Education?	<b>89%</b> <b>71%</b>
	- Vocational or skills training?	<b>80%</b> <b>48%</b>
	- Prison job?	<b>78%</b> <b>61%</b>
	- Voluntary work outside of the prison?	<b>0%</b> <b>7%</b>
	- Paid work outside of the prison?	<b>0%</b> <b>6%</b>
<b>16.2</b>	In this prison, have you done the following activities:	
	- Education?	<b>70%</b> <b>76%</b>
	- Vocational or skills training?	<b>78%</b> <b>67%</b>
	- Prison job?	<b>90%</b> <b>81%</b>
	- Voluntary work outside of the prison?	<b>67%</b> <b>37%</b>
	- Paid work outside of the prison?	<b>67%</b> <b>36%</b>
	<i>For those who have done the following activities, do you think they will help you on release:</i>	
	- Education?	<b>86%</b> <b>61%</b>
	- Vocational or skills training?	<b>86%</b> <b>59%</b>
	- Prison job?	<b>78%</b> <b>54%</b>
	- Voluntary work outside of the prison?	<b>67%</b> <b>58%</b>
	- Paid work outside of the prison?	<b>83%</b> <b>55%</b>
<b>16.3</b>	Do staff encourage you to attend education, training or work?	<b>80%</b> <b>70%</b>
<b>PLANNING AND PROGRESSION</b>		
<b>17.1</b>	Do you have a custody plan?	<b>30%</b> <b>37%</b>
	<i>For those who have a custody plan:</i>	
<b>17.2</b>	Do you understand what you need to do to achieve your objectives or targets?	<b>100%</b> <b>93%</b>
<b>17.3</b>	Are staff helping you to achieve your objectives or targets?	<b>100%</b> <b>81%</b>
<b>17.4</b>	In this prison, have you done:	
	- Offending behaviour programmes?	<b>67%</b> <b>63%</b>
	- Other programmes?	<b>67%</b> <b>63%</b>
	- One to one work?	<b>50%</b> <b>50%</b>
	- Been on a specialist unit?	<b>0%</b> <b>16%</b>
	- ROTL - day or overnight release?	<b>0%</b> <b>11%</b>
	<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>	
	- Offending behaviour programmes?	<b>100%</b> <b>93%</b>
	- Other programmes?	<b>100%</b> <b>100%</b>
	- One to one work?	<b>100%</b> <b>95%</b>
	- Being on a specialist unit?	<b>80%</b>
	- ROTL - day or overnight release?	<b>100%</b>



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<b>PREPARATION FOR RELEASE</b>			
<b>18.1</b>	Do you expect to be released in the next 3 months?	<b>33%</b>	<b>28%</b>
<i>For those who expect to be released in the next 3 months:</i>			
<b>18.2</b>	Is this prison very / quite near to your home area or intended release address?	<b>67%</b>	<b>85%</b>
<b>18.3</b>	Is anybody helping you to prepare for your release?	<b>100%</b>	<b>73%</b>
<b>18.4</b>	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	<b>100%</b>	<b>67%</b>
	- Getting employment?	<b>100%</b>	<b>71%</b>
	- Setting up education or training?	<b>100%</b>	<b>56%</b>
	- Arranging benefits?	<b>100%</b>	<b>85%</b>
	- Sorting out finances?	<b>100%</b>	<b>67%</b>
	- Support for drug or alcohol problems?	<b>100%</b>	<b>50%</b>
	- Health / mental Health support?	<b>100%</b>	<b>63%</b>
	- Social care support?	<b>100%</b>	<b>40%</b>
	- Getting back in touch with family or friends?	<b>100%</b>	<b>44%</b>
<b>18.4</b>	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	<b>33%</b>	<b>45%</b>
	- Getting employment?	<b>33%</b>	<b>20%</b>
	- Setting up education or training?	<b>33%</b>	<b>14%</b>
	- Arranging benefits?	<b>33%</b>	<b>52%</b>
	- Sorting out finances?	<b>50%</b>	<b>25%</b>
	- Support for drug or alcohol problems?	<b>67%</b>	<b>54%</b>
	- Health / mental Health support?	<b>67%</b>	<b>40%</b>
	- Social care support?	<b>50%</b>	<b>13%</b>
	- Getting back in touch with family or friends?	<b>50%</b>	<b>46%</b>
<b>FINAL QUESTION ABOUT THIS PRISON</b>			
<b>20.1</b>	Do you think your experiences in this prison have made you less likely to offend in the future?	<b>90%</b>	<b>49%</b>

## HMP Liverpool 2019

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

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

- Summary statistics from surveys of local prisons conducted since the introduction of the new questionnaire in September 2017 (25 prisons). Please note that this does not include all local prisons.
- Summary statistics from HMP Liverpool in 2017.

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**Number of completed questionnaires returned**

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

HMP Liverpool 2019	All other local prisons surveyed since September 2017	HMP Liverpool 2019	HMP Liverpool 2017
<b>155</b>	<b>4,314</b>	<b>155</b>	<b>190</b>

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION						
1.2	Are you under 21 years of age?	<i>n=154</i>	1%	6%	1%	0%
	Are you 25 years of age or younger?	<i>n=154</i>	15%	22%	15%	15%
	Are you 50 years of age or older?	<i>n=154</i>	16%	13%	16%	13%
	Are you 70 years of age or older?	<i>n=154</i>	1%	1%	1%	1%
1.3	Are you from a minority ethnic group?	<i>n=154</i>	12%	27%	12%	10%
1.4	Have you been in this prison for less than 6 months?	<i>n=147</i>	57%	61%	57%	60%
1.5	Are you currently serving a sentence?	<i>n=150</i>	76%	69%	76%	77%
	Are you on recall?	<i>n=150</i>	23%	14%	23%	11%
1.6	Is your sentence less than 12 months?	<i>n=148</i>	26%	21%	26%	22%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n=148</i>	6%	3%	6%	3%
7.1	Are you Muslim?	<i>n=148</i>	5%	14%	5%	4%
11.3	Do you have any mental health problems?	<i>n=141</i>	50%	52%	50%	50%
12.1	Do you consider yourself to have a disability?	<i>n=143</i>	41%	41%	41%	39%
19.1	Do you have any children under the age of 18?	<i>n=137</i>	62%	52%	62%	61%
19.2	Are you a foreign national?	<i>n=135</i>	8%	10%	8%	5%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n=135</i>	3%	7%	3%	2%
19.4	Have you ever been in the armed services?	<i>n=136</i>	9%	7%	9%	4%
19.5	Is your gender female or non-binary?	<i>n=139</i>	0%	1%	0%	1%
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n=137</i>	3%	4%	3%	4%
19.7	Do you identify as transgender or transsexual?	<i>n=131</i>	3%	2%	3%	2%
ARRIVAL AND RECEPTION						
2.1	Were you given up-to-date information about this prison before you came here?	<i>n=150</i>	29%	16%	29%	15%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n=152</i>	34%	37%	34%	22%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n=153</i>	82%	77%	82%	77%
2.4	Overall, were you treated very / quite well in reception?	<i>n=150</i>	86%	75%	86%	74%

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2.5	When you first arrived, did you have any problems?	n=145	82%	88%	82%	87%
2.5	Did you have problems with:					
	- Getting phone numbers?	n=145	42%	46%	42%	49%
	- Contacting family?	n=145	35%	48%	35%	47%
	- Arranging care for children or other dependents?	n=145	2%	4%	2%	3%
	- Contacting employers?	n=145	5%	7%	5%	7%
	- Money worries?	n=145	24%	29%	24%	32%
	- Housing worries?	n=145	19%	25%	19%	24%
	- Feeling depressed?	n=145	41%	49%	41%	47%
	- Feeling suicidal?	n=145	16%	19%	16%	14%
	- Other mental health problems?	n=145	28%	30%	28%	25%
	- Physical health problems?	n=145	19%	20%	19%	24%
	- Drugs or alcohol (e.g. withdrawal)?	n=145	28%	25%	28%	31%
	- Getting medication?	n=145	20%	31%	20%	35%
	- Needing protection from other prisoners?	n=145	10%	11%	10%	10%
	- Lost or delayed property?	n=145	13%	22%	13%	15%
	<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	n=115	52%	30%	52%	29%
<b>FIRST NIGHT AND INDUCTION</b>						
3.1	Before you were locked up on your first night, were you offered:					
	- Tobacco or nicotine replacement?	n=148	82%	70%	82%	80%
	- Toiletries / other basic items?	n=148	70%	51%	70%	55%
	- A shower?	n=148	80%	24%	80%	58%
	- A free phone call?	n=148	73%	47%	73%	60%
	- Something to eat?	n=148	87%	75%	87%	79%
	- The chance to see someone from health care?	n=148	78%	61%	78%	68%
	- The chance to talk to a Listener or Samaritans?	n=148	43%	25%	43%	27%
	- Support from another prisoner (e.g. Insider or buddy)?	n=148	33%	22%	33%	13%
	- None of these?	n=148	1%	6%	1%	6%
3.2	On your first night in this prison, was your cell very / quite clean?	n=153	44%	29%	44%	16%
3.3	Did you feel safe on your first night here?	n=152	72%	61%	72%	53%
3.4	In your first few days here, did you get:					
	- Access to the prison shop / canteen?	n=147	53%	31%	53%	15%
	- Free PIN phone credit?	n=148	66%	54%	66%	52%
	- Numbers put on your PIN phone?	n=141	42%	34%	42%	35%
3.5	Have you had an induction at this prison?	n=146	95%	81%	95%	83%
	<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	n=138	62%	47%	62%	43%

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ON THE WING						
4.1	Are you in a cell on your own?	n=151	38%	34%	38%	20%
4.2	Is your cell call bell normally answered within 5 minutes?	n=150	32%	20%	32%	10%
4.3	On the wing or houseblock you currently live on:					
	- Do you normally have enough clean, suitable clothes for the week?	n=150	73%	53%	73%	49%
	- Can you shower every day?	n=152	88%	79%	88%	65%
	- Do you have clean sheets every week?	n=149	85%	62%	85%	62%
	- Do you get cell cleaning materials every week?	n=148	46%	50%	46%	20%
	- Is it normally quiet enough for you to relax or sleep at night?	n=143	65%	53%	65%	39%
	- Can you get your stored property if you need it?	n=139	36%	22%	36%	18%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	n=153	72%	54%	72%	45%
FOOD AND CANTEEN						
5.1	Is the quality of the food in this prison very / quite good?	n=150	38%	34%	38%	25%
5.2	Do you get enough to eat at meal-times always / most of the time?	n=152	37%	27%	37%	23%
5.3	Does the shop / canteen sell the things that you need?	n=147	67%	59%	67%	67%
RELATIONSHIPS WITH STAFF						
6.1	Do most staff here treat you with respect?	n=147	75%	68%	75%	55%
6.2	Are there any staff here you could turn to if you had a problem?	n=142	79%	69%	79%	68%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	n=151	48%	31%	48%	30%
6.4	Do you have a personal officer?	n=146	85%	60%	85%	64%
<i>For those who have a personal officer:</i>						
6.4	Is your personal or named officer very / quite helpful?	n=124	69%	49%	69%	54%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	n=148	23%	6%	23%	4%
6.6	Do you feel that you are treated as an individual in this prison?	n=144	56%	38%	56%	29%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	n=146	45%	40%	45%	33%
	If so, do things sometimes change?	n=65	46%	32%	46%	25%
FAITH						
7.1	Do you have a religion?	n=148	73%	67%	73%	74%
<i>For those who have a religion:</i>						
7.2	Are your religious beliefs respected here?	n=106	64%	68%	64%	50%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	n=107	71%	63%	71%	59%
7.4	Are you able to attend religious services, if you want to?	n=108	83%	83%	83%	75%

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CONTACT WITH FAMILY AND FRIENDS						
8.1	Have staff here encouraged you to keep in touch with your family / friends?	n=146	36%	24%	36%	21%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	n=146	47%	55%	47%	66%
8.3	Are you able to use a phone every day (if you have credit)?	n=146	93%	82%	93%	72%
8.4	Is it very / quite easy for your family and friends to get here?	n=150	67%	44%	67%	55%
8.5	Do you get visits from family/friends once a week or more?	n=144	24%	23%	24%	24%
<i>For those who get visits:</i>						
8.6	Do visits usually start and finish on time?	n=99	77%	43%	77%	43%
8.7	Are your visitors usually treated respectfully by staff?	n=99	88%	71%	88%	73%
TIME OUT OF CELL						
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=145	88%	82%	88%	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?	n=127	64%	48%	64%	35%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	n=146	25%	34%	25%	43%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	n=146	4%	4%	4%	3%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=147	65%	44%	65%	84%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=147	2%	1%	2%	1%
9.4	Do you have time to do domestics more than 5 days in a typical week?	n=146	43%	42%	43%	25%
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=150	34%	42%	34%	12%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=147	20%	47%	20%	19%
9.7	Do you typically go to the gym twice a week or more?	n=143	55%	38%	55%	39%
9.8	Do you typically go to the library once a week or more?	n=144	32%	40%	32%	11%
<i>For those who use the library:</i>						
9.9	Does the library have a wide enough range of materials to meet your needs?	n=73	66%	54%	66%	49%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS						
10.1	Is it easy for you to make an application?	n=148	69%	66%	69%	66%
<i>For those who have made an application:</i>						
10.2	Are applications usually dealt with fairly?	n=118	60%	46%	60%	35%
	Are applications usually dealt with within 7 days?	n=106	56%	34%	56%	22%
10.3	Is it easy for you to make a complaint?	n=145	67%	55%	67%	55%
<i>For those who have made a complaint:</i>						
10.4	Are complaints usually dealt with fairly?	n=80	35%	27%	35%	20%
	Are complaints usually dealt with within 7 days?	n=65	45%	23%	45%	10%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=101	28%	30%	28%	37%



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<i>For those who need it, is it easy to:</i>				
10.6	Communicate with your solicitor or legal representative?	n=119	56% 40%	56% 31%
	Attend legal visits?	n=110	69% 58%	69% 59%
	Get bail information?	n=88	31% 17%	31% 9%
<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=126	58% 53%	58% 52%
<b>HEALTH CARE</b>				
11.1	Is it very / quite easy to see:			
	- Doctor?	n=145	46% 23%	46% 15%
	- Nurse?	n=139	63% 46%	63% 41%
	- Dentist?	n=140	29% 11%	29% 9%
	- Mental health workers?	n=134	40% 19%	40% 17%
11.2	Do you think the quality of the health service is very / quite good from:			
	- Doctor?	n=141	53% 39%	53% 29%
	- Nurse?	n=139	65% 50%	65% 50%
	- Dentist?	n=131	42% 25%	42% 28%
	- Mental health workers?	n=134	46% 24%	46% 25%
11.3	Do you have any mental health problems?	n=141	50% 52%	50% 50%
<i>For those who have mental health problems:</i>				
11.4	Have you been helped with your mental health problems in this prison?	n=69	61% 34%	61% 28%
11.5	Do you think the overall quality of the health services here is very / quite good?	n=140	54% 33%	54% 27%
<b>OTHER SUPPORT NEEDS</b>				
12.1	Do you consider yourself to have a disability?	n=143	41% 41%	41% 39%
<i>For those who have a disability:</i>				
12.2	Are you getting the support you need?	n=57	33% 26%	33% 22%
12.3	Have you been on an ACCT in this prison?	n=139	27% 24%	27% 18%
<i>For those who have been on an ACCT:</i>				
12.4	Did you feel cared for by staff?	n=38	63% 48%	63% 39%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=139	67% 44%	67% 52%
<b>ALCOHOL AND DRUGS</b>				
13.1	Did you have an alcohol problem when you came into this prison?	n=142	23% 24%	23% 25%
<i>For those who had / have an alcohol problem:</i>				
13.2	Have you been helped with your alcohol problem in this prison?	n=29	72% 54%	72% 51%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=140	36% 36%	36% 33%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=140	16% 17%	16% 18%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=141	9% 12%	9% 13%
<i>For those who had / have a drug problem:</i>				
13.6	Have you been helped with your drug problem in this prison?	n=62	63% 49%	63% 41%
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=141	52% 51%	52% 63%
13.8	Is it very / quite easy to get alcohol in this prison?	n=143	20% 27%	20% 39%

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SAFETY						
14.1	Have you ever felt unsafe here?	<i>n</i> =145	51%	60%	51%	71%
14.2	Do you feel unsafe now?	<i>n</i> =139	22%	29%	22%	34%
14.3	Have you experienced any of the following from other prisoners here:					
	- Verbal abuse?	<i>n</i> =133	29%	39%	29%	40%
	- Threats or intimidation?	<i>n</i> =133	23%	36%	23%	37%
	- Physical assault?	<i>n</i> =133	17%	21%	17%	19%
	- Sexual assault?	<i>n</i> =133	2%	3%	2%	1%
	- Theft of canteen or property?	<i>n</i> =133	16%	33%	16%	30%
	- Other bullying / victimisation?	<i>n</i> =133	15%	21%	15%	20%
	- Not experienced any of these from prisoners here	<i>n</i> =133	56%	47%	56%	48%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<i>n</i> =132	28%	35%	28%	29%
14.5	Have you experienced any of the following from staff here:					
	- Verbal abuse?	<i>n</i> =137	31%	33%	31%	41%
	- Threats or intimidation?	<i>n</i> =137	24%	26%	24%	30%
	- Physical assault?	<i>n</i> =137	12%	13%	12%	19%
	- Sexual assault?	<i>n</i> =137	1%	2%	1%	0%
	- Theft of canteen or property?	<i>n</i> =137	10%	11%	10%	11%
	- Other bullying / victimisation?	<i>n</i> =137	16%	19%	16%	23%
	- Not experienced any of these from staff here	<i>n</i> =137	56%	54%	56%	51%
14.6	If you were being bullied / victimised by staff here, would you report it?	<i>n</i> =134	47%	47%	47%	44%
BEHAVIOUR MANAGEMENT						
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<i>n</i> =138	54%	37%	54%	38%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<i>n</i> =140	54%	34%	54%	39%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<i>n</i> =142	8%	15%	8%	16%
<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> =11	9%	19%	9%	13%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	<i>n</i> =141	9%	10%	9%	10%
<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>						
15.6	Were you treated well by segregation staff?	<i>n</i> =12	50%	53%	50%	35%
	Could you shower every day?	<i>n</i> =11	73%	50%	73%	47%
	Could you go outside for exercise every day?	<i>n</i> =11	82%	60%	82%	47%
	Could you use the phone every day (if you had credit)?	<i>n</i> =10	70%	48%	70%	50%

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EDUCATION, SKILLS AND WORK						
16.1	In this prison, is it easy to get into the following activities:					
	- Education?	n=133	71%	51%	71%	50%
	- Vocational or skills training?	n=126	49%	27%	49%	23%
	- Prison job?	n=135	62%	34%	62%	33%
	- Voluntary work outside of the prison?	n=125	6%	4%	6%	4%
	- Paid work outside of the prison?	n=126	6%	4%	6%	5%
16.2	In this prison, have you done the following activities:					
	- Education?	n=129	75%	72%	75%	72%
	- Vocational or skills training?	n=115	67%	55%	67%	58%
	- Prison job?	n=125	82%	71%	82%	78%
	- Voluntary work outside of the prison?	n=116	39%	34%	39%	33%
	- Paid work outside of the prison?	n=118	38%	34%	38%	35%
<i>For those who have done the following activities, do you think they will help you on release:</i>						
	- Education?	n=97	63%	58%	63%	50%
	- Vocational or skills training?	n=77	62%	57%	62%	52%
	- Prison job?	n=102	55%	43%	55%	40%
	- Voluntary work outside of the prison?	n=45	60%	51%	60%	31%
	- Paid work outside of the prison?	n=45	60%	57%	60%	41%
16.3	Do staff encourage you to attend education, training or work?	n=125	70%	44%	70%	41%
<b>PLANNING AND PROGRESSION</b>						
17.1	Do you have a custody plan?	n=134	36%	26%	36%	23%
<i>For those who have a custody plan:</i>						
17.2	Do you understand what you need to do to achieve your objectives or targets?	n=47	94%	78%	94%	80%
17.3	Are staff helping you to achieve your objectives or targets?	n=45	82%	46%	82%	50%
17.4	In this prison, have you done:					
	- Offending behaviour programmes?	n=46	63%	46%	63%	47%
	- Other programmes?	n=43	63%	46%	63%	44%
	- One to one work?	n=40	50%	40%	50%	49%
	- Been on a specialist unit?	n=32	16%	23%	16%	29%
	- ROTL - day or overnight release?	n=37	11%	19%	11%	24%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>						
	- Offending behaviour programmes?	n=29	93%	71%	93%	53%
	- Other programmes?	n=27	100%	66%	100%	56%
	- One to one work?	n=20	95%	67%	95%	59%
	- Being on a specialist unit?	n=5	80%	49%	80%	30%
	- ROTL - day or overnight release?	n=4	100%	50%	100%	13%



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PREPARATION FOR RELEASE					
18.1	Do you expect to be released in the next 3 months?	<i>n=136</i>	<b>29%</b>	<b>32%</b>	<b>29%</b> <b>34%</b>
<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=37</i>	<b>84%</b>	<b>56%</b>	<b>84%</b> <b>68%</b>
18.3	Is anybody helping you to prepare for your release?	<i>n=36</i>	<b>75%</b>	<b>47%</b>	<b>75%</b> <b>41%</b>
18.4	Do you need help to sort out the following for when you are released:				
	- Finding accommodation?	<i>n=34</i>	<b>71%</b>	<b>68%</b>	<b>71%</b> <b>58%</b>
	- Getting employment?	<i>n=32</i>	<b>75%</b>	<b>63%</b>	<b>75%</b> <b>62%</b>
	- Setting up education or training?	<i>n=29</i>	<b>62%</b>	<b>51%</b>	<b>62%</b> <b>45%</b>
	- Arranging benefits?	<i>n=31</i>	<b>87%</b>	<b>70%</b>	<b>87%</b> <b>69%</b>
	- Sorting out finances?	<i>n=27</i>	<b>70%</b>	<b>60%</b>	<b>70%</b> <b>56%</b>
	- Support for drug or alcohol problems?	<i>n=30</i>	<b>53%</b>	<b>53%</b>	<b>53%</b> <b>42%</b>
	- Health / mental Health support?	<i>n=28</i>	<b>68%</b>	<b>61%</b>	<b>68%</b> <b>62%</b>
	- Social care support?	<i>n=23</i>	<b>44%</b>	<b>45%</b>	<b>44%</b> <b>34%</b>
	- Getting back in touch with family or friends?	<i>n=27</i>	<b>48%</b>	<b>44%</b>	<b>48%</b> <b>36%</b>
18.4	Are you getting help to sort out the following for when you are released, if you need it:				
	- Finding accommodation?	<i>n=24</i>	<b>42%</b>	<b>29%</b>	<b>42%</b> <b>41%</b>
	- Getting employment?	<i>n=24</i>	<b>21%</b>	<b>19%</b>	<b>21%</b> <b>15%</b>
	- Setting up education or training?	<i>n=18</i>	<b>17%</b>	<b>16%</b>	<b>17%</b> <b>13%</b>
	- Arranging benefits?	<i>n=27</i>	<b>48%</b>	<b>25%</b>	<b>48%</b> <b>20%</b>
	- Sorting out finances?	<i>n=19</i>	<b>26%</b>	<b>16%</b>	<b>26%</b> <b>7%</b>
	- Support for drug or alcohol problems?	<i>n=16</i>	<b>56%</b>	<b>41%</b>	<b>56%</b> <b>41%</b>
	- Health / mental Health support?	<i>n=19</i>	<b>42%</b>	<b>23%</b>	<b>42%</b> <b>9%</b>
	- Social care support?	<i>n=10</i>	<b>20%</b>	<b>17%</b>	<b>20%</b> <b>6%</b>
	- Getting back in touch with family or friends?	<i>n=13</i>	<b>46%</b>	<b>26%</b>	<b>46%</b> <b>15%</b>
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	<i>n=140</i>	<b>51%</b>	<b>48%</b>	<b>51%</b> <b>49%</b>