

Report on an announced inspection of

HMP Wormwood Scrubs

by HM Chief Inspector of Prisons

16 September – 4 October 2019

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



Crown copyright 2020

This publication, excluding logos, is licensed under the terms of the Open Government Licence v3.0 except where otherwise stated. To view this licence, visit nationalarchives.gov.uk/doc/open-government-licence/version/3 or write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk.

Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

Any enquiries regarding this publication should be sent to us at the address below or:
hmiprisons.enquiries@hmiprisons.gsi.gov.uk

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

Printed and published by:
Her Majesty's Inspectorate of Prisons
3rd floor
10 South Colonnade
Canary Wharf
London
E14 4PU
England

Contents

Introduction	5
Fact page	7
About this inspection and report	9
Summary	11
Section 1. Safety	23
Section 2. Respect	31
Section 3. Purposeful activity	43
Section 4. Rehabilitation and release planning	49
Section 5. Summary of recommendations and good practice	55
Section 6. Appendices	61
Appendix I: Inspection team	61
Appendix II: Progress on recommendations from the last report	63
Appendix III: Care Quality Commission Requirement Notice	69
Appendix IV: Prison population profile	71
Appendix V: Prisoner survey methodology and results	75

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.justiceinspectors.gov.uk/hmiprison/about-our-inspections/>

Introduction

HMP Wormwood Scrubs, built in the late nineteenth century, is one of the country's most famous prisons. Holding just over 1,000 prisoners, the establishment is a local and resettlement facility serving the capital. At this announced inspection, we found that outcomes for prisoners in our healthy prison tests of safety, purposeful activity and rehabilitation and release planning (RRP) were not sufficiently good, but were reasonably good in respect. Clearly there remains much to do to ensure that Wormwood Scrubs delivers acceptable outcomes consistently for those detained. In the context of this inspection, however, it should be acknowledged that these assessments describe a prison that is much improved from the institution we inspected in the summer of 2017. At that time, we found a prison that could only be described accurately as being in a state of crisis, with poor outcomes in safety and RRP, and insufficiently good outcomes in respect and purposeful activity.

Had our formal Urgent Notification (UN) process, which was then still in development, been available to us following the 2017 inspection, it would most assuredly have been invoked. Notwithstanding, I still thought it correct to write to the then Chief Executive of Her Majesty's Prison and Probation Service (HMPPS) on 16 August 2017, drawing to his attention the urgency of the prison's predicament. I received an immediate reply, which included a commitment to improve standards at Wormwood Scrubs by using our report as a model for testing how HMPPS would respond to future UNs. What we saw at this inspection suggests HMPPS had made considerable efforts to meet that commitment.

Much was now being done to make the prison safer, but this work was often not sufficiently embedded to have yet made enough difference to outcomes. For example, in our survey over a third of prisoners still reported feeling unsafe and recorded violence had increased, although there were fewer serious incidents than at comparable prisons. A good safety strategy had been introduced, with meaningful work being undertaken to investigate most incidents and with reasonable multidisciplinary oversight. New work was planned to challenge gang culture but there was perhaps too much use of formal disciplinary procedures, and case management of perpetrators and victims of violence was weak. Work to incentivise prisoners was also still too limited.

Use of force had increased, although much was relatively minor and oversight was improving. The segregation unit was being proactively managed, but good plans had yet to be fully implemented. There had been much good work undertaken to improve security, including better CCTV coverage and better use of technology. There was some evidence that the use of illicit drugs was reducing, although the oversight and delivery of drug testing, and the coordination of a wider drug strategy, needed to improve.

Since we last inspected there had been four self-inflicted deaths and one homicide. Some recommendations made by the Prisons and Probation Ombudsman following their investigations into deaths were still outstanding, and the prison had been too slow to address this area of risk. The level of self-harm was high, although similar to other prisons. Since the beginning of 2019, however, work to ensure the safety of those at risk of self-harm had improved markedly and this progress needed to be sustained.

The prison was a more respectful place with generally satisfactory, if inconsistent, staff-prisoner relationships and interaction. Better supervision of staff on the wings had assisted in this regard although key worker arrangements were not yet working well enough. Reasonably good peer mentoring structures and consultation arrangements, as well as an improving approach to the management of applications and complaints, were assisting in building prisoner confidence. The prison environment and the quality and cleanliness of cells were much improved, although some cells were still overcrowded. Work to promote equality and diversity had similarly improved, supported by good oversight and motivated peer supporters. However, more was required to embed these improvements and ensure sufficient attention across all the protected characteristics. Health services outcomes were generally good, but care for those with long-term conditions was insufficient.

Time out of cell remained inadequate, with nearly 40% of prisoners locked up during the working day. Enough activity was theoretically available, sufficient for all prisoners to have at least part-time activity, but attendance was too often poor, especially in education. More needed to be done to support the acquisition of skills in mathematics, English and vocational qualifications in industrial workshops. Vocational training was, however, better. Our colleagues in Ofsted reported improvements to the provision but still assessed overall effectiveness as 'requires improvement'.

The prison's approach to rehabilitation and release planning was also improving. Coordination was better, as was prisoners' contact with offender managers (POMs), although risk and needs assessments (OASys) were too often incomplete or out of date. Procedures to support home detention curfew (HDC) and recategorization were robust. Public protection measures had improved and were mostly effective, but we identified a few high-risk cases where release planning arrangements were inadequate. Resettlement planning was generally satisfactory.

This is, overall, an encouraging report. Unlike our visit two years ago, we found a more settled prison where both staff and prisoners were more positive about the establishment. The governor and the senior management team had risen to the considerable challenges of managing a prison like Wormwood Scrubs. They had effectively analysed the problems in the prison and were remedying them in a measured and thoughtful way. They acknowledged the good support they had received from HMPPS and were looking to embed the progress they had made. While impressive, however, that progress remained fragile. This is not the time to relax management grip or dilute HMPPS' support for a team of managers who have shown what it takes to start turning around a historically difficult prison.

We leave the prison with a number of recommendations which we hope will assist continued progress and intend to return within the year to undertake an independent review of progress (IRP).

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

2019

Fact page

Task of the establishment

HMP Wormwood Scrubs is a local prison and a designated resettlement prison holding adult men and some young adults.

Certified normal accommodation and operational capacity¹

Prisoners held at the time of inspection: 1,015
 Baseline certified normal capacity: 1,178
 In-use certified normal capacity: 1,178
 Operational capacity: 1,020

Notable features from this inspection

There had been four self-inflicted deaths since our previous inspection.

A quarter of prisoners were foreign nationals and over 60% of prisoners were from black and minority ethnic backgrounds.

Over 120 volunteers supported the chaplaincy, and 86% of prisoners identified themselves as having a religion, far more than we normally see.

Although there were enough activity places for the population, 38% of prisoners were locked up during the working day.

In the previous six months 78% of prisoners with an identified accommodation need, and 86% of those without, had been released to suitable and sustainable accommodation.

Prison status and key providers

Public

Physical health provider: Care UK

Mental health providers: Care UK; Barnet and Enfield and Haringey Mental Health Trust

Substance use treatment providers: Care UK; Forward Trust

Prison education framework providers: Novus; In-House Records; Active IQ

Community rehabilitation company (CRC): London CRC (MTC Novo)

Escort contractor: Serco

Prison group

London

Brief history

Wormwood Scrubs was built by prisoners from Millbank Gaol between 1875 and 1891. In 1902, the last female prisoner was transferred to HMP Holloway. In 1922, one wing became a borstal. During

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

World War II, the prison was used by the War Department. In 1994, a new hospital wing was completed, and in 1996 a fifth wing was completed.

Short description of residential units

A wing holds 287 prisoners: two of the four landings are for prisoners in full-time activities.

B wing holds 171 prisoners and operates as the induction wing.

C wing holds 303 prisoners; two of the four landings are for drug recovery.

D wing has single-cell accommodation for 244 prisoners, including a drug-free unit.

E wing has 146 single cells: two of the three landings are for prisoners in full-time activities, and the Elizabeth Fry unit holds those requiring additional support.

The first night centre holds 36 new arrivals.

The Jan Wilcox unit is for enhanced full-time workers and has two spaces for induction workers.

The Conibeere unit has 55 spaces for new arrivals requiring substance use detoxification and stabilisation.

There is a 17-bed inpatient unit.

The segregation unit has 18 cells.

Name of governor and date in post

Sara Pennington, September 2018

Independent Monitoring Board chair

Rob Foreman

Date of last inspection

August 2017

About this inspection and report

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

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

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

Safety	Prisoners, particularly the most vulnerable, are held safely.
Respect	Prisoners are treated with respect for their human dignity.
Purposeful activity	Prisoners are able, and expected, to engage in activity that is likely to benefit them.
Rehabilitation and release planning	Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release into the community.

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

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

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

A5 Our assessments might result in one of the following:

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

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

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

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

This report

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

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

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

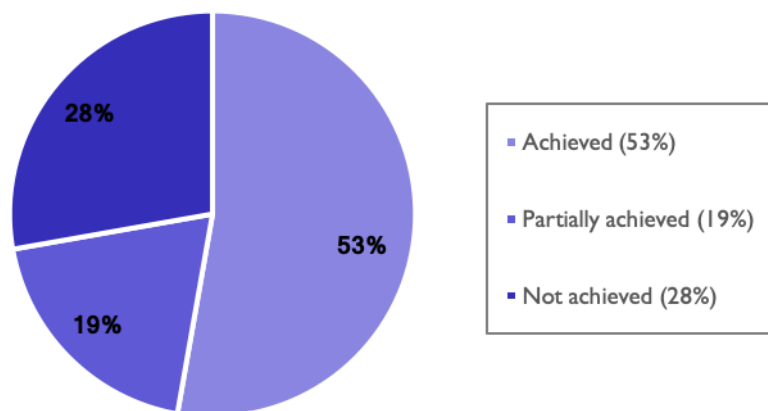
² <https://www.justiceinspectorates.gov.uk/hmiprison/our-expectations/prison-expectations/>

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

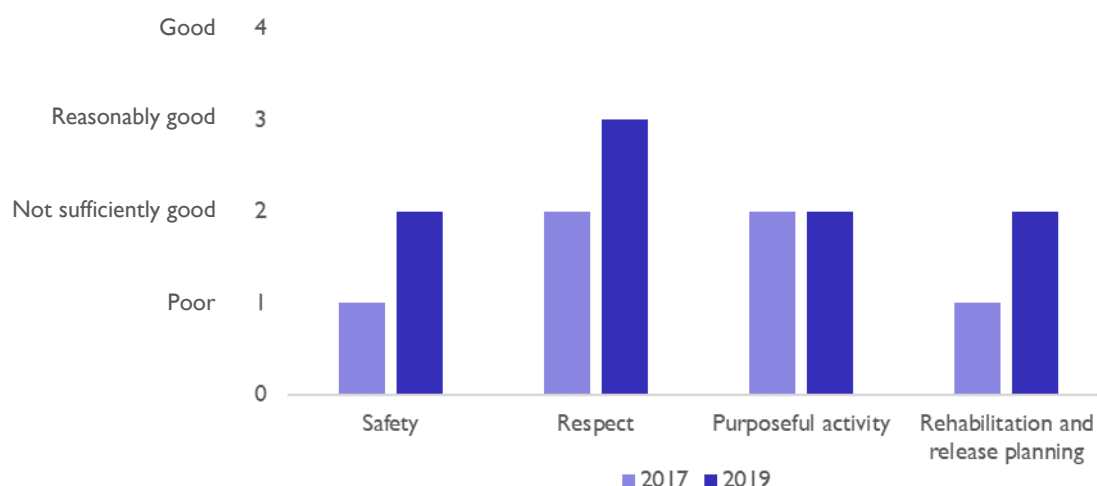
Summary

- S1 We last inspected Wormwood Scrubs in 2017 and made 36 recommendations overall. The prison fully accepted 28 of the recommendations and partially (or subject to resources) accepted seven. It rejected one recommendation.
- S2 At this follow up inspection we found that the prison had achieved 19 of those recommendations, partially achieved seven recommendations and not achieved 10 recommendations.

Figure 1: HMP Wormwood Scrubs progress on recommendations from last inspection (n=36)



- S3 Since our last inspection, outcomes for prisoners had improved in three healthy prison areas, with safety improving from poor to not sufficiently good, respect improved from not sufficiently good to reasonably good, and rehabilitation and release planning improved from poor to not sufficiently good. Outcomes stayed the same in purposeful activity, remaining not sufficiently good.

Figure 2: HMP Wormwood Scrubs healthy prison outcomes 2017 and 2019⁴

Safety

S4 Reception and induction procedures were reasonable. Over a third of prisoners felt unsafe and the level of violence remained high. These problems were being addressed through focused management and a good strategy. Use of force was high but use of full restraint and special accommodation had reduced, and there was rigorous management scrutiny of force. The management of the segregation unit was good and starting to lead to positive changes in the regime and culture. There had been significant improvements in physical security. Drug use had reduced but procedures for drug testing were not sufficiently rigorous. Self-harm was high and there had been four self-inflicted deaths since the previous inspection. Support for those at risk of self-harm was improving following a comprehensive review of case management procedures. Prisoners with significant safeguarding needs were given good support on the Elizabeth Fry unit. **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 Wormwood Scrubs were poor against this healthy prison test. We made nine recommendations in the area of safety.⁵ At this inspection we found that three of the recommendations had been achieved, three had been partially achieved and three had not been achieved.

S6 Reception facilities were functional and clean, and staff demonstrated compassion to new arrivals. Strip searching of all new arrivals was still routine despite the availability of body scanners. New arrivals often experienced lengthy delays in reception. First night risk interviews were now held in private and explored initial safety concerns, but usually lacked depth. Peer workers supported a reasonably effective induction process.

S7 In our survey, over a third of prisoners reported feeling unsafe. Violence had increased, but there was some evidence that staff assaults were being over-reported. Assaults involving weapons had reduced and the number of serious assaults was relatively low compared with

⁴ Please note that the criteria assessed under each healthy prison area were amended in September 2017. Healthy prison outcomes reflect the expectations in place at the time of each inspection.

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

similar prisons. A good safety strategy was in place. Gang activity was a significant issue for the prison and new funding had been allocated to address identified problems. Violence was systematically investigated. The quality of serious incident investigations was good, but others could be superficial. Residential staff did not use challenge, support and intervention plans (CSIPs)⁶ well enough to inform support for prisoners. A multidisciplinary safety intervention meeting provided good support for perpetrators. The incentives and earned privileges (IEP) scheme was not effective enough in promoting good behaviour.

- S8 The number of adjudications was high and there were too many low-level offences that could have been dealt with through other measures. Data collection and analysis were weak. The number of adjourned adjudications was high and it was unknown how many were discontinued because of delays. There was good quality assurance of hearings, but adjudication records were often inadequate.
- S9 Use of force had increased and was higher than at similar prisons. However, nearly a third of incidents did not involve full restraint, which was a significant improvement from the previous inspection. Use of special accommodation had also reduced. A recently introduced use of force committee reviewed every incident and lessons were being learned. The volume of outstanding paperwork was reducing, although about a quarter was still not completed promptly.
- S10 The number of prisoners segregated was similar to other local prisons. Communal areas of the segregation unit were clean, but some cells were in poor condition. The unit was managed actively and there were plans to improve the regime, although they were only just being implemented. Most prisoners were moved off the unit reasonably quickly, but reintegration planning was underdeveloped.
- S11 Physical and procedural security arrangements remained proportionate and there had been significant investment in technology. CCTV coverage had improved, and a machine to check mail for substances and a body scanner were in use. While the mandatory drug testing (MDT) rate had reduced to a level now similar to other prisons, survey results, finds and positive test results all indicated that drugs were easily available. Many positive tests were not referred to adjudication and very few suspicion tests were undertaken. Some positive tests were not referred for analysis at all, undermining deterrence and the legitimacy of published MDT figures. The drug strategy and associated action plan were very recent. The introduction of a local tactical assessment to manage intelligence was positive, but identified actions were not always addressed. There was a robust approach to corruption prevention and addressing extremism.
- S12 There had been four self-inflicted deaths and one homicide in the previous two years. There was a comprehensive action plan, but not all Prisons and Probation Ombudsman recommendations had been fully achieved. The number of self-harm incidents was high, although similar to other local prisons. The prison had taken too long to address significant weaknesses in its management of self-harm prevention, but there had been very good work since the beginning of 2019. There was a strategy to improve provision, and an excellent, comprehensive review of the quality of assessment, care in custody and teamwork (ACCT) case management for prisoners at risk of suicide or self-harm revealed some serious deficiencies in documented care. A series of measures were introduced to address these deficiencies. Our review of ACCT documentation indicated their quality was improving as a result but was still not consistently good enough. Many staff had not received training in helping prisoners with mental health problems; they felt they could offer better care if they

⁶ Used to manage the most violent prisoners and support the most vulnerable prisoners. Prisoners who are identified as the perpetrator of serious or repeated violence, or who are vulnerable due to being the victim of violence or bullying behaviour, are managed and supported on a plan with individualised targets and regular reviews.

had such training. Prisoners had reasonable access to an enthusiastic team of Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners). Adult safeguarding arrangements were improving, and good support was given to the most vulnerable prisoners on the Elizabeth Fry unit.

Respect

- S13** *Staff-prisoner relationships were generally positive, but affected by inconsistency of staffing and the slow implementation of the key worker scheme.⁷ The physical environment had improved significantly and the prison was generally clean. Prisoner access to basic items such as clothing had markedly improved. Consultation was mostly adequate. Complaints were managed reasonably well. There was inadequate tracking of applications. Equality and diversity work had improved substantially, but work with foreign nationals and gay and bisexual prisoners was underdeveloped. Faith provision was excellent. Health services were generally good. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S14** *At the last inspection in 2017 we found that outcomes for prisoners in Wormwood Scrubs were not sufficiently good against this healthy prison test. We made 14 recommendations in the area of respect. At this inspection we found that 11 of the recommendations had been achieved, one had been partially achieved and two had not been achieved.*
- S15** In our survey, 64% of prisoners said that most staff treated them with respect. We saw mostly positive interactions and received many positive reports on staff, but also complaints about unhelpful staff. Poor staff retention, high sickness and inexperience affected consistency of staffing and relationships on the wings. This was offset to an extent by wing-based managers who often provided visible support to staff and prisoners. However, relationships were further undermined by the fact that fewer than 40% of prisoners had a key worker. For those who did, levels of contact varied and the quality of key working was often not good enough. Some staff told us they lacked adequate mental health training. There was effective use of peer workers across many aspects of prison life.
- S16** The standard of accommodation had improved significantly. Most cells had been painted and there was much less graffiti; we saw few broken windows; many showers had been refurbished; and overall cleanliness had improved substantially, although some outside areas still suffered from litter. Eleven per cent of cells designed for one prisoner were used for two. Prisoners had much improved access to basic items, such as cleaning materials, clean clothing and bedding. Although managers made spot checks, there was no systematic electronic monitoring of cell bell response times, and we saw some long delays in responses to them. Access to property was poor; there were hundreds of outstanding property applications and a large number of complaints about property.
- S17** In our survey, nearly 80% of prisoners described the food as bad, significantly worse than at similar prisons. Food consultation was weak and did not lead to sufficient changes. There had been no food survey for a year. Meals were still served too early, and breakfast packs were distributed the day before they were meant to be eaten. New arrivals could still wait almost two weeks to receive their first shop order, although the prison had recently introduced a 'tuck shop' to mitigate this.

⁷ Introduced under the Offender Management in Custody (OMiC) model, prison officer key workers aim to have regular contact with named prisoners.

- S18 Prisoner consultation arrangements were reasonable. Monitoring of the application process was inadequate and did not show the timeliness of responses, but survey responses about applications had improved since our previous inspection. Oversight of the complaints process was reasonably good, and responses to those we looked at were generally polite and helpful.
- S19 The attention to equality issues had improved considerably since the previous inspection. Detailed monitoring of data for several key areas of prisoner experience had led to useful analysis and some consequent progress, especially in the area of race equality. Monthly equality meetings were now well established and there was a motivated group of equality representatives. The investigation of alleged incidents of discrimination had not been timely enough, but the quality was often very good. More than a quarter of the population were foreign national prisoners and support for them was insufficient. There was no foreign national coordinator, although there was useful input from onsite Home Office immigration staff. There was a regular forum for Gypsy, Roma and Traveller prisoners, with some practical outcomes. Provision for those with disabilities had improved and individual evacuation plans were in place. Forums had been held for older and for younger prisoners but, like many aspects of equality, some of this was recent or one-off and required further embedding. Work to support gay and bisexual prisoners was underdeveloped.
- S20 The chaplaincy provided an exceptionally wide and comprehensive set of services. There was a strong employed team and over 100 volunteers. The chaplaincy made a significant contribution to rehabilitation and equality work in particular.
- S21 Health services were well-coordinated and patients could access nurse practitioners and medical support on the wings. A range of specialist primary care services were delivered from the health care centre with prompt access to most provision. Patients described some staff as rude but we saw mostly professional interactions. Management of long-term conditions did not systematically address patient need. The inpatient environment was run-down but the regime and direct care provided were good. Governance of social care had improved and prisoners received more coordinated support. Impressive, integrated specialist mental health services provided a range of accessible interventions. However, prisoners needing treatment in hospital waited too long to be transferred. Clinical substance misuse treatment was sound and offered safe, clinically responsive care. First night support for patients detoxing from drugs or alcohol had improved and was now thorough. About 350 prisoners accessed a range of psychosocial support. Pharmacy and medicine management arrangements had improved but officer supervision of medicine queues was inconsistent. Access to dental services was good and there was an appropriate range of provision.

Purposeful activity

- S22** *Time out of cell remained inadequate for most prisoners, and over 38% were locked up during the working day. Access to the library had improved but was poor for the gym. Leadership and management of activities was leading to clear improvements, but outcomes were still insufficient. There were enough places for all prisoners to have at least part-time activity, but attendance was often poor, especially in education. The quality of teaching was mixed and often ineffective in English. A wide range of courses was offered and prisoners could develop good vocational skills in some workshops. Pass rates were poor in English and mathematics courses. Prisoners in most industrial workshops could not gain a vocational skills qualification, but pass rates were good on most education vocational courses. **Outcomes for prisoners against this healthy prison test were not sufficiently good.***

- S23 At the last inspection in 2017 we found that outcomes for prisoners in Wormwood Scrubs were not sufficiently good against this healthy prison test. We made seven 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 three had not been achieved.*
- S24 The regime had not improved since the previous inspection, although a reduced population and more staff enabled it to be delivered more consistently. Over 38% of prisoners were locked up during our roll checks during main work periods. Many prisoners still had little time for association and domestic tasks, especially at weekends. The library provided an adequate service, and prisoners had better access to it than at the previous inspection. The gym offered good courses and activities, but access was inadequate, largely due to redeployment of gym staff to other duties.
- S25 Managers had set clear targets for improvement of activities and had developed detailed plans, but many actions had yet to be completed. They had made efforts to improve the attendance and allocation processes, and some improvement had been achieved. For example, allocation to activities had risen during the year from 44% to 67% of the population, and allocation to education places was now good. However, attendance and punctuality still required improvement, particularly in education classes. Attendance had been particularly poor in education induction at around 50%. Too many prisoners were unemployed – almost a third of the population. There were sufficient part-time places for the population, but many were not filled.
- S26 Managers had developed strong partnerships with key agencies and contractors, enabling them to improve the range of courses. Some industrial workshops were of a very good commercial standard, particularly the laundry. Managers had developed a range of mentor, supervisor and orderly roles, which improved the prison regime and gave prisoners progression opportunities. Improved quality monitoring was being introduced but had not yet ensured consistently good teaching in education or workshops. The quality of teaching was mixed - some tutors planned activities that successfully helped prisoners develop new knowledge and skills, but too much teaching in English and some maths lessons was ineffective. While there had been some improvement in target-setting in individual learning plans, prisoners' progress was often not monitored and recorded sufficiently.
- S27 Classroom and workshop facilities were good. Open University students had access to the 'virtual campus' (internet access to community education, training and employment opportunities). In industry workshops, prisoners developed good vocational skills in most cases, particularly in textile and cleaning workshops, the coffee shop and on the Railtrack course. The pay policy was fair and did not disadvantage those attending learning activities, but for many prisoners their pay was not accurate or on time.
- S28 Prisoners behaved well in activities and showed a good attitude to learning, their tutor and each other. Prisoners took pride in their work. Their portfolios were well organised and presented good standards of work. In industrial workshops, prisoners were motivated and worked well independently and in small teams. They valued and enjoyed their learning, particularly in Railtrack, barista training and textiles. Attendance was good in industry workshops, but was too low in many education classes.
- S29 Too many prisoners dropped out of mathematics and English courses without completing them. Retention rates were particularly poor in English courses and in mathematics at level I. Pass rates were poor in English and mathematics level I. Prisoners achieved a good standard of work in most industrial workshops, but were not able to gain a vocational skills qualification. Prisoners achieved good pass rates on most vocational courses. Around a

quarter of prisoners released in August 2019 had a positive education, training or employment outcome.

Rehabilitation and release planning

S30 *There was a wide range of work to support prisoners' family ties. Visits provision was reasonable, although some visits started late. Coordination of rehabilitation work had greatly improved from a low starting point, but there were still shortcomings in strategic management. Prisoners had more contact with prison offender managers (POMs), but it was still insufficient except for at the end of sentence, when the quality of work was usually good. Despite improvements, a quarter of prisoners did not have an up-to-date assessment of risk and needs. Public protection procedures had improved but remained inconsistent. Home detention curfew (HDC) was managed well. Recategorisation decisions were robust but reviews were sometimes late. Resettlement services were generally good but data on accommodation outcomes had been limited. **Outcomes for prisoners against this healthy prison test were not sufficiently good.***

S31 *At the last inspection in 2017 we found that outcomes for prisoners in Wormwood Scrubs were poor against this healthy prison test. We made six recommendations in the area of resettlement.⁸ At this inspection we found that three of the recommendations had been achieved, one had been partially achieved and two had not been achieved.*

S32 The Prison Advice and Care Trust (PACT) provided good support to help prisoners resolve family issues. There was a good range of parenting courses and activities, including a weekly homework club. In addition to six family days a year, there were informal weekly children's visits, which was good practice. The prison offered more visits sessions than we usually see. Although there was still some slippage, most visits now started on time. Some visitors were not informed if their visits were cancelled. The visits centre provided a supportive environment for visitors. The visits hall was clean, but was becoming run down. Prisoners appreciated having a telephone in their cell to help them maintain contact with their family and friends.

S33 The strategic management and delivery of reducing reoffending work had improved since our previous inspection, and there were better working relationships between the offender management unit (OMU) and the community rehabilitation company (CRC)⁹. However, the reducing reoffending strategy was not informed by a comprehensive needs analysis and there was no action plan to drive progress. Although there was good attendance at reducing reoffending partnership meetings, they were not strategically focused and many actions were rolled over from meeting to meeting with little or no progress.

S34 In our survey, only 28% of prisoners said they had a custody plan, and only 37% of those said that staff were helping them to meet their objectives or targets. All eligible prisoners were now allocated a POM, depending on their risk of serious harm, but contact was irregular and often reactive; where there was contact, it was usually good quality. The OASys (offender assessment system) backlog had decreased, but a quarter of eligible prisoners did not have an up-to-date assessment of their risk and needs. Some of the outstanding assessments were

⁸ 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.

⁹ Since May 2015, rehabilitation services, both in custody and after release, have been organised through CRCs which are responsible for work with medium- and low-risk offenders. The National Probation Service has maintained responsibility for high- and very high-risk offenders.

the responsibility of the National Probation Service, but the prison did not always do enough to ensure that an assessment was in place. HDC was well managed; 67% of applications in the previous six months had been approved and most prisoners were released on time.

- S35 Public protection arrangements had improved and were mostly effective. The prison had introduced a well-attended inter-departmental risk management meeting (IDRMM), which had some good discussion of the most high-risk cases. However, actions raised at this meeting were not always focused on risk or carried out promptly. We also identified some high-risk cases due for release where risk management and release planning arrangements were inadequate.
- S36 Categorisation decisions were robust, although about a fifth of reviews were late. The prison had introduced a promising fortnightly transfer meeting to discuss moving prisoners to other establishments.
- S37 There was a range of short non-accredited programmes across several departments, such as the CRC's pre-release 'Getting it Right' course and the chaplaincy's victim awareness course. St Mungo's¹⁰ provided accommodation support for those identified by the CRC as having an accommodation need. The prison did not adequately monitor accommodation outcomes to ensure that provision was sufficient to meet needs. However, figures obtained during the inspection showed that in the previous six months 78% of those with an identified accommodation need, and 86% of those without, had been released to suitable and sustainable accommodation.
- S38 Finance, benefit and debt support was very good. Prisoners were supported for court fines, create bank accounts, debt courses and benefit applications by the Jobcentre Plus, Citizens Advice and the CRC. The CRC offered several interventions to help prisoners seeking employment after release.
- S39 The demand for resettlement services was high, with over 100 prisoners released each month. The CRC had improved release planning arrangements since our previous inspection and saw nearly all new arrivals within the first five days. Good quality resettlement plans were completed and then reviewed 12 weeks before release. The prison had also recently introduced a useful pre-release event where prisoners could meet key resettlement partners, such as the Jobcentre Plus.

Key concerns and recommendations

- S40 Key concern: Violence against both staff and prisoners had risen since the previous inspection. While serious violence was investigated well, other incidents were managed less thoroughly and not investigated to the same high standard. There was no formal support for victims. Residential staff did not use challenge, support and intervention plans (CSIPs) well enough.

Recommendation: The prison should challenge and reduce violence, offer greater support for victims and ensure that residential staff use the challenge, support and intervention plan process effectively. (To the governor)

- S41 Key concern: While the mandatory drug testing (MDT) rate had reduced to a level now similar to other prisons, survey results, finds and positive test results all indicated that drugs were easily available. Many positive tests were not referred to adjudication. Skilled staff were frequently redeployed and MDT officers had insufficient time to complete follow-up work or

¹⁰ <https://www.mungos.org>

suspicion testing. Some completed tests were not submitted for analysis at all. These factors undermined the MDT process as a deterrent to substance use, as well as the legitimacy of published MDT positive test rates.

Recommendation: The mandatory drug testing (MDT) process should be sufficiently resourced to provide assurance that it is a deterrent to the use and supply of drugs. (To the governor)

- S42 Key concern: The level of self-harm was high. The prison had taken too long to address significant weaknesses in its management of self-harm prevention, but there had been very good work since the beginning of 2019. The quality of case management documentation was improving, but was still not consistently good enough.

Recommendation: There should be an ongoing and strong focus on reducing self-harm and improving support for prisoners in crisis. Outcomes should be reviewed and evaluated and, where necessary, actions should be adapted to ensure maximum impact. (To the governor)

- S43 Key concern: Staff-prisoner relationships were adversely affected by a large number of inexperienced staff, a lack of consistency of wing staff and high sickness rates. Fewer than 40% of prisoners had a key worker to support welfare and progression. A number of staff told us they needed, but had not received, mental health training. All of these factors affected staff knowledge about prisoners in their care.

Recommendation: The prison should ensure that wing staff understand the needs of prisoners they are supporting, and have the knowledge and skills to do this effectively. (To the governor)

- S44 Key concern: The promotion of equality and diversity had improved, but at the time of inspection there was no member of staff with a dedicated role to develop it further. Many of the improvements were relatively recent, and largely sustained by day-to-day senior management engagement rather than embedded in the prison's life. Some groups of prisoners, particularly foreign nationals and gay and bisexual prisoners, were not yet receiving adequate support.

Recommendation: The equality strategy and action plan should set specific priorities and targets to ensure that equality work becomes part of the prison's daily business, and improves outcomes for all minority groups. (To the governor)

- S45 Key concern: There had been slight improvements in the predictability and continuity of the regime but not in the amount of time prisoners spent out of their cells, despite improved staffing levels and a reduction in population. Restricted access to the gym, exercise yards and library indicated the need to provide the level of regime found in most local prisons.

Recommendation: The prison should implement a core daily programme that gives prisoners reasonable access to all important facilities, together with realistic allocation of staff, and should monitor outcomes for prisoners to correct any failings. (To the governor)

- S46 Key concern: Too many prisoners were not engaged in purposeful activity, and too many of those with an activity did not attend. Industry workshops did not provide opportunities for prisoners to gain a vocational qualification, or to have their employability skills recognised and recorded. Quality improvement measures were not yet fully developed to be effective in raising standards in teaching and learning.

Recommendation: All prisoners should have their learning needs assessed, and be allocated to activities that meet their needs. Managers should further develop their ongoing work to engage all prison areas in improving prisoners' attendance to their allocated activity. Opportunities for the accreditation of prisoners' skills should be introduced in all appropriate areas. Quality improvement processes should be rigorous and make full use of all the data available, including that on prisoners' destinations, to identify strengths and areas for improvement. (To the governor)

- S47 Key concern: Too much teaching in education was not effective. Some classroom activities were not successful in helping prisoners to learn, and some teachers did not set targets for prisoners to help them understand what was required and make progress. Teachers' deployment of prisoner classroom assistants was not always well planned. Prisoners in work and training were not sufficiently aware of the importance of employability skills, and these were not recorded.

Recommendation: Tutors' planning of learning and assessment should be effective in engaging all prisoners in the class and helping them to learn. Managers should monitor the quality of learning documents to ensure that prisoners are set realistic targets for learning and that these are monitored. In workshop and industry areas, instructors should encourage prisoners to recognise the skills they are developing and see them as progressing towards employability after release. (To the governor)

- S48 Key concern: Too few prisoners made progress and achieved a qualification in English and mathematics. A minority of prison work was mundane and made little impact on prisoners' prospects for employment after release.

Recommendation: Prisoners on all education courses should be able to achieve good pass rates. All workshop areas should replicate, as far as possible, the standards and resources that apply in industry outside the prison. (To the governor)

- S49 Key concern: The strategic management of reducing reoffending work was weak. The reducing reoffending strategy was not informed by a comprehensive needs analysis and there was no action plan to drive progress. The reducing reoffending meetings were not effective, with limited analysis of performance data to enable the prison to determine if it met the resettlement needs of prisoners, and no link to the strategy or action plan, and actions raised at the meeting were rolled over with little or no progress.

Recommendation: The strategic management of reducing reoffending work should be effective and focus sufficiently on outcomes for prisoners to drive improvements across the resettlement pathways. (To the governor)

- S50 Key concern: Many prisoners did not know whether they had a custody plan or what it contained. A quarter of eligible prisoners did not have an up-to-date assessment of their risk and needs, and the prison was not doing enough to ensure that all prisoners had an up-to-date custody plan.

Recommendation: All eligible prisoners should have an up-to-date assessment of their risks and needs. (To the governor)

- S51 Key concern: Many prisoners said that no one was helping them to achieve their custody plan and did not know who their prison offender manager (POM) was. Contact between POMs and prisoners was irregular and reactive, with little one-to-one work. There was no

management oversight of contact levels, and prison officer POMs were often redeployed to other areas of the prison.

Recommendation: Prison offender manager contact with prisoners should be regular and meaningful. (To the governor)

S52 Key concern: The inter-departmental risk management meeting was not sufficiently focused on risk, and actions raised there were not always followed up promptly. There was an inadequate escalation process to ensure that prisoners' multi-agency public protection arrangements (MAPPA) levels were confirmed six months before their release, which meant that some high-risk prisoners could be released without a robust risk management plan.

Recommendation: Public protection procedures should ensure that there is a robust risk management plan in place well in advance of the prisoner's release. (To the governor)

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 Although arriving prisoners had relatively short journeys to the prison, they continued to experience lengthy delays at court and it was not unusual for them to be delayed for five hours before their arrival. New arrivals were not routinely handcuffed and were disembarked from escort vehicles promptly.
- I.2 The reception area was very busy but reasonably welcoming, and most communal areas were clean and spacious. Initial booking-in processes were efficient and staff were compassionate to new arrivals. However, all new arrivals were still routinely strip searched without an individual risk assessment and despite the availability of less intrusive methods, such as a body scanner (see paragraph I.34).
- I.3 Reception holding cells were clean but basic, with very little information for new arrivals. Although a small stock of books was available for prisoners, this was not promoted or accessible and lacked easy-read material, such as magazines. The reception provided prisoner peer support, including Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners), and peer workers introduced themselves to all new arrivals early on.
- I.4 Prison staff and health care staff conducted initial risk interviews in private. Prison staff interviews explored safety concerns, such as risk of self-harm, but often lacked sufficient depth. A useful safer custody questionnaire to identify any violence or gang affiliation concerns was given to new arrivals, but there was no evidence that this information was collated and used.
- I.5 Although there was a dedicated first night centre, it often did not have sufficient spaces, which meant that many new arrivals spent long periods in reception. In our survey, only 17% of respondents, against the comparator of 36%, had spent less than two hours in reception. In our sample check, it was not unusual to see delays of over three hours.
- I.6 The first night centre had been refurbished and was welcoming. Cells, including a dormitory, were well equipped and clean, and all prisoners received adequate bedding, toiletries and cutlery. They were offered a telephone call and reception pack. New arrivals received an initial introductory talk from supervised induction peer support workers. However, they had no supplementary interview with prison staff in their first 24 hours to focus on welfare, and enhanced welfare checks were only introduced during the inspection.
- I.7 The induction programme explained key elements of prison life and made effective use of peer support workers, with staff oversight. The programme was delivered over several days, and staff were supposed to complete an induction 'passport' for each prisoner to ensure that all aspects of the programme were covered. However, poor record keeping undermined the process and resulted in some prisoners missing critical aspects of induction; for example,

poor attendance at education assessments often led to unnecessary delays in their allocation to activity (see also paragraph 3.10).

Recommendations

- 1.8 New arrivals should only be strip searched on the basis of an individual risk assessment.**
- 1.9 The delivery of induction should be effectively monitored to ensure that all new arrivals complete it.**

Managing behaviour

Expected outcomes:

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

Encouraging positive behaviour

- 1.10** In our survey, 65% of prisoners said that they had felt unsafe at the prison at some time, and over a third reported feeling unsafe at the time of the inspection. This was similar to the previous inspection and comparable prisons.
- 1.11** Violence against both staff and prisoners had increased since the previous inspection. (See key concern and recommendation S40.) There had been 209 assaults against prisoners in the previous six months and 148 against staff, although there was some evidence that staff assaults were over-reported. We found that around 20% of incidents had been incorrectly recorded as an assault and on investigation no staff assault had occurred. Assaults involving weapons had reduced and the number of serious assaults was relatively low compared with similar prisons.
- 1.12** The safety strategy was comprehensive and specific to the prison. A well-resourced safer custody team analysed data well to identify priority areas. Most violent incidents related to gang problems and new funding had been allocated for specialist support services that could help to tackle this problem. The prison had also started to focus more effort on consulting and working with 21-29-year-old prisoners, who were found to be disproportionately involved in violence.
- 1.13** All violence was systematically investigated. The quality of serious incident investigations was good and resulted in suitable action. Other incidents were not investigated as thoroughly. The prison intended to investigate all violence to the same standard in future.
- 1.14** Challenge, support and intervention plans (CSIPs, see footnote 6) were of a good standard with some useful insights into the prisoner's behaviour. However, residential staff did not use them sufficiently to inform support for prisoners. A weekly safety intervention meeting discussed all prisoners managed under CSIP, and provided good multidisciplinary support for perpetrators of violence.
- 1.15** Only one prisoner was identified as self-isolating at the time of the inspection, and he was discussed at the weekly safety intervention meeting. Most prisoners with complex needs and those who might self-isolate were managed on the Elizabeth Fry unit (see paragraph 1.49).

There was no formal support for victims of violence, which was a gap in the provision. (See key concern and recommendation S40.)

- I.16** Despite a comprehensive incentives and earned privileges (IEP) strategy, only 42% of prisoners in our survey said that the scheme encouraged them to behave well. Both staff and prisoners complained that there were too few incentives. Prisoners were particularly critical of the lack of management oversight of the process. There were 38 prisoners on basic regime at the time of the inspection and they received a reasonable regime. Record-keeping on P-Nomis, the Prison Service IT system, was poor for prisoners on basic, and these prisoners were not involved in the review process.

Recommendation

- I.17 Managers should review and revise the approach to the incentives and earned privileges scheme, in consultation with prisoners, to ensure that it provides genuine incentives and promotes positive behaviour.**

Adjudications

- I.18** The number of adjudications had increased since the previous inspection and totalled 2,742 in the previous six months, which was much higher than we see in similar prisons. We found too many low-level offences that could have been dealt with through other measures. Management checks had recently started to address the problem but had yet to show results.
- I.19** The number of adjourned adjudications was high at 149, with a further 36 with the independent adjudicator and 43 referred to the police. All internal adjudications were automatically discontinued after three months, but it was not known how many were discontinued because of delays as the prison did not keep accurate records. Data collection and analysis were generally weak.
- I.20** There was good quality assurance of hearings by the governor and deputy governor who regularly observed the process, but subsequent adjudication records were often inadequate, with many lacking any detail or record of investigation. Many hearings took place without the prisoner attending even though they were invited. It was unclear why this was the case and no record was kept of the numbers affected.

Recommendation

- I.21 Comprehensive data should be collected, analysed and acted on to ensure that adjudications are conducted promptly and to a demonstrably high standard, and only for suitable cases.**

Use of force

- I.22** There had been 542 incidents involving use of force in the previous six months, which was higher than at the previous inspection and similar prisons. However, the seriousness of incidents had reduced markedly. Nearly a third of incidents did not involve full restraint, which was an improvement from the previous inspection when we had criticised the use of full restraint in all incidents. The use of batons had reduced from 25 in the six months before the last inspection to eight at this inspection. There had been one use of a baton compared

to four at the last inspection. Uses were investigated and justified. Special accommodation use had also reduced to seven in the previous six months, which was lower than at similar prisons.

- I.23** The prison was working hard to understand the reasons for the increased use of force and how it was linked to violence. The monthly use of force committee meeting reviewed data and had a strategic focus. A weekly use of force meeting, chaired by the deputy governor, now reviewed every incident to ensure that the restraint used had been necessary and to learn lessons. This meeting was effective and ensured thorough oversight. Although the amount of outstanding paperwork was reducing, about a quarter was still not completed promptly.

Good practice

- I.24** *The weekly use of force meeting reviewed all incidents, which gave assurance that all restraint used was necessary and to learn lessons where necessary.*

Segregation

- I.25** The segregation unit had improved since the previous inspection, but good plans had yet to be fully actioned. The unit manager was starting to implement measures to improve the regime.
- I.26** There had been 292 uses of segregation in the previous six months, which was similar to other local prisons. However, over half of prisoners were segregated pending adjudication, which was too many. Analysis of segregation data was limited, but the segregation monitoring and review group (SMARG) had just recommenced.
- I.27** Communal areas of the segregation unit were clean, but some cells were in poor condition and had graffiti, and cleanliness also varied. Prisoners now received daily exercise but the allotted 60 minutes was sometimes reduced if there was significant pressure on staff resources.
- I.28** All prisoners in the unit had reintegration plans, although many of them lacked meaningful information that could help a return to the main prison. However, most prisoners were moved out of the segregation unit reasonably quickly.
- I.29** The documented reasons for segregation were often lacking in detail. However defensible decision logs for prisoners at risk of suicide or self-harm who were segregated while on assessment, care in custody and teamwork (ACCT) case management were of a good standard. They contained useful information to help staff manage and support the prisoner.

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.30** Security arrangements were generally proportionate and did not restrict prisoners' access to purposeful activity. For example, prisoner orderlies were risk assessed to work in a number

of external areas. The installation of CCTV and replacement windows on residential units had also contributed to the enhancement of physical security, and daily accommodation fabric checks of living accommodation had been reintroduced.

- I.31** Some important aspects of procedural security were poor, such as mandatory and suspicion drug testing (see below). The flow of security intelligence was lower than we find in similar prisons with an average of just under 600 reports a month. Security managers had introduced several initiatives, including regular security bulletins and roadshows, to raise awareness and support new and less experienced staff to improve the flow of intelligence.
- I.32** A monthly local tactical assessment had recently been introduced to improve management of intelligence, identification of risk and creation of prison-wide security objectives. However, the previous month's identified actions and objectives were not always adequately addressed or outcomes assessed.
- I.33** There had been significant investment in technology to improve security, enhance safety and support the reduction of illicit items. As well as the enhancement of CCTV coverage across the prison, there was now a machine to identify any suspected drugs coming in through the mail and a new body scanner to detect and deter the trafficking of illicit items into the prison. Between May and August 2019, the scanner had been used effectively to prevent the entry of six mobile phones and seven drug packages into the prison.
- I.34** In our survey, 43% of respondents, against the comparator of 52%, said that drugs were readily available. There were fewer positive drug tests than at the previous inspection. The random mandatory drug testing (MDT) rate was 18.9% over the previous six months, of which 2.3% could be attributed to psychoactive substances.¹¹ No prisoner had tested positive for psychoactive substances in the previous five months, despite intelligence to indicate its presence in the prison.
- I.35** There were some shortcomings in the MDT process. Staff were frequently redeployed and MDT officers had insufficient time to complete follow-up work or suspicion testing. We found evidence that some completed tests were not submitted for analysis at all. These shortcomings meant that positive tests were not always referred to adjudication; in the previous six months, only 37% of positive test results had led to an adjudication and only two suspicion tests had taken place. This undermined the MDT process as a deterrent to illicit substance use, as well as the legitimacy of published MDT positive test rates. (See key concern and recommendation S41.)
- I.36** Following an HMPPS drug diagnostic visit in 2018, a newly appointed drug strategy lead had revised the drug strategy and associated action plan, which was implemented shortly before the inspection. A regular drug strategy meeting had been introduced and there was evidence that it addressed identified actions. However, attendance was inconsistent and often poor, which affected progress.
- I.37** The prison had a robust approach to corruption prevention and addressing extremism. It benefited from having onsite support from HMPPS specialist leads and officers from the London regional police intelligence team.

¹¹ Drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects.

Recommendation

- I.38 Security intelligence meetings should address identified actions, and analyse and monitor the outcomes.**

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.39** There had been four self-inflicted deaths and one homicide in the previous two years. There was a comprehensive action plan, but not all Prisons and Probation Ombudsman recommendations had been fully achieved.
- I.40** There had been 286 incidents of self-harm in the previous six months, an increase from 212 at our last inspection. Although high, it was similar to the level in other local prisons.
- I.41** The prison had taken too long to address significant weaknesses in its management of self-harm prevention, but there had been very good work since the beginning of 2019. There was a good strategy to improve provision, and an excellent, comprehensive review of the quality of ACCT documentation had revealed some serious deficiencies in documented care. Following consultation, a series of measures were introduced to address these deficiencies, and there were plans to repeat this process. Safeguarding action planning was reasonable and reflected the current identified risks.
- I.42** The monthly safety team meetings were reasonably productive. In addition, the weekly safety intervention meeting had useful multidisciplinary discussion of a small number of prisoners considered most at risk of harm.
- I.43** Serious incidents of self-harm were investigated to identify learning, but these were not routinely discussed in safety team meetings and lessons learned were not well enough communicated to staff.
- I.44** In the previous six months, 372 ACCTs had been opened. Our review of ACCT documentation indicated their quality was improving, but was still not consistently good enough. We saw some good examples of ACCT assessments and care planning. However, some plans were poor and did not address obvious need, and case management was still inconsistent. Although more case reviews were multidisciplinary, mental health staff still did not attend many reviews when needed. The ACCT review we observed was held in a wing landing office and was undermined by constant interruptions. In most cases, observations did not record sufficient engagement with the prisoners. (See key concern and recommendation S42.)
- I.45** Despite ongoing deficiencies in the ACCT process, the majority of prisoners on an ACCT who we spoke to felt well supported. Many staff had not received training in helping prisoners with mental health problems and told us they could offer better care if they had such training.

- I.46** Prisoners had reasonable access to an enthusiastic team of Listeners. Care suites were in better condition and used more than at our last inspection, but some Listener sessions still took place through locked doors.

Good practice

- I.47** *The prison had conducted an excellent, comprehensive review of the quality of assessment, care in custody and teamwork (ACCT) case management documentation and, following consultation, had introduced a range of measures to address the deficiencies identified.*

Protection of adults at risk¹²

- I.48** Safeguarding arrangements had improved, and there was now a single manager with responsibility for this area who attended the local safeguarding adults board. There was a safeguarding strategy and referral pathways for different types of concern. Although staff we spoke to were unfamiliar with the policy and pathways, we were assured that most would recognise concerns and raise them with their manager.
- I.49** There was good support for the more vulnerable prisoners located in the Elizabeth Fry unit, where they could be better safeguarded from prisoners in mainstream wings. The unit was well staffed and this helped offset safeguarding risks there. There was good input from staff from the psychology and other departments. Prisoners in the unit had communication and other support plans where needed, but plans were not always in place for prisoners on other wings.

¹² Safeguarding duties apply to an adult who:

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

Section 2. Respect

Prisoners are treated with respect for their human dignity.

Staff-prisoner relationships

Expected outcomes:

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

- 2.1** In our survey, 64% of prisoners said staff treated them with respect. We observed many positive staff-prisoner interactions and prisoners often told us of helpful staff. However, while the chronic staff shortages at the previous inspection had been alleviated, there were high sickness rates and poor staff retention. A reliance on staff temporarily loaned from other establishments contributed to the inconsistency of wing staff, many of whom were new and with limited experience. Many prisoners told us about staff who did not have the knowledge or people skills to help them. (See key concern and recommendation S43.) There had been 166 complaints about staff in the previous six months (see also paragraph 2.25).
- 2.2** Staff highlighted their desire for mental health training to help them manage challenging prisoners. Newer staff also said they appreciated the mentoring support that they had been given, and were concerned that it was being reduced for new starters. However, the prison had increased the number of wing managers to provide visible support for staff and prisoners, and in our survey 16% said they regularly saw senior managers talking to prisoners, against the comparator of 7%.
- 2.3** The implementation of the first phase of the offender management in custody (OMIC) model¹³ had been severely delayed. Every prisoner should have been allocated a key worker by July 2019, but at the time of the inspection less than 40% of prisoners had a named member of staff to support their welfare and progression. Where prisoners did have a key worker, their case notes indicated that contact was inconsistent, and the notes were often perfunctory. (See key concern and recommendation S43.)

Recommendation

- 2.4 Every prisoner should have regular contact with trained key workers who can support their welfare needs and progression goals.**

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

¹³ Following a review of offender management in 2015, HMPPS began to introduce a new offender management model from 2017. The new model is being implemented in stages, starting with new prison officer key workers. The second phase, core offender management, and the introduction of prison offender managers (POMs) is being introduced gradually, from 2019.

regularly and can apply for additional services and assistance. The complaints and redress processes are efficient and fair.

Living conditions

- 2.5** The standard of accommodation had improved significantly since the previous inspection. Cells and communal areas were clean, and we saw hardly any graffiti and no displays of offensive material. Some areas had benefited from refurbishment, including all wing serveries, many showers and some cells. The remaining cells were being repainted by prisoners as part of a prison-funded programme. (See also paragraph 3.32).
- 2.6** Too many prisoners were living in overcrowded conditions; 102 cells designed for one (11% of the total) were used to house two prisoners, with only a curtain to screen the toilet from the beds. Furnishings in most cells were in good order, and almost all wings had in-cell telephones (see paragraph 4.2).
- 2.7** Prison managers completed regular checks of living conditions, and repair work was now carried out more promptly. We found very few broken windows, and those that had been replaced were more secure in preventing items being brought into or thrown out of cells (see also paragraph 1.30).
- 2.8** Despite the efforts of cleaning parties, litter still accumulated daily in some external areas, particularly outside wings with older windows. The prison had increased vermin control measures, and we saw little evidence of infestation during our night visit, where we also found that wing serveries and cooking areas had been left clean.
- 2.9** Responses to our survey about access to basic items had improved but were still worse than similar prisons. Stores room on each wing had improved access to cleaning materials, clean clothing and bedding, and there were laundries on each wing for prisoners to wash their personal kit.
- 2.10** In our survey, only 15% of prisoners said that their cell call bell was answered within five minutes. There was no electronic monitoring of response times, and we observed several lengthy delays in staff answering them.
- 2.11** Prisoner access to their stored property was poor, with hundreds of outstanding property applications, some dating back to early July 2019, and over 300 complaints about property in the previous six months. A large amount of property at the prison belonged to prisoners who were no longer there.

Recommendations

- 2.12** **The painting and refurbishment programme should be completed and managers should ensure that decent living conditions are maintained.**
- 2.13** **Two prisoners should not be held in cells designed for one person.**
- 2.14** **An electronic cell bell monitoring system should be introduced and used to ensure that staff are responding promptly to cell call bells.**
- 2.15** **Prisoners should be able to access their property promptly following request.**

Residential services

- 2.16** In our survey, nearly 80% of prisoners described the food as bad, which was significantly worse than similar prisons. We sampled food that was adequate in quantity and quality, but menu choices were limited and food consultation was weak. While there had been food forums in the previous six months the minutes did not include suggestions for change. Food comment books were available on the wings, but only completed sporadically, and the last all-prisoner food survey had been in May 2018. Meals were still served too early, at 11.30am for lunch and 4pm for the evening meal. Complaints about the food had included the food provided during Ramadan.
- 2.17** The prison had introduced an in-house bakery. Lunch consisted of a cold meal eaten in cell, with breakfast packs for the following morning distributed at the same time. Some landings had toasters and microwaves for prisoners on the enhanced level of the IEP scheme.
- 2.18** Since the previous inspection, servery hot plates had been moved to specific servery areas that were more suited to supervision of queues. We observed that the serving of the evening meal was well supervised.
- 2.19** Record keeping for hazard analysis and critical control points was poor and the prison could not demonstrate that food was always served at the correct temperature. While prisoners working in the main kitchens had completed a level 2 certificate in food safety, hardly any wing workers had completed any food safety training.
- 2.20** The prison shop offered a wide range of goods, and regular shop forums in the previous six months had led to some changes in stock. The minutes highlighted that prisoners' orders were frequently distributed late, and were often incorrect; there had been over 100 complaints about the shop in the previous six months.
- 2.21** New arrivals could still wait for almost two weeks to receive their first order, although the prison had recently established a 'tuck shop' so they could make purchases during this time. Prisoners could also shop from a range of catalogues, although they were charged an administration fee by the prison for each order, which was inappropriate.

Recommendation

- 2.22** **Prisoner complaints about food should be understood and addressed through a range of measures, including regular and effective consultation, later service of lunch (not before 12pm) and dinner (not before 5pm), and adherence to hygiene regulations.**

Prisoner consultation, applications and redress

- 2.23** There was a monthly prisoner consultation group meeting chaired by the governor. While the minutes showed that some changes resulted from the meetings, other issues dropped off with no update or result recorded.
- 2.24** In our survey, more prisoners than at the previous inspection said that applications were dealt with fairly and on time. Prisoner application workers provided advice about how prisoners could access services and made a record of all applications submitted from the wing. However, responses were not monitored and the prison was unable to identify problems, such as the high number of outstanding applications in the property store. We

also found examples where complaints had been made due to a failure to respond to simple requests by application.

- 2.25** The number of complaints in the previous six months had gone up to 1,598 from 1,294 at the previous inspection. In our survey, only 27% of prisoners who had made a complaint said that complaints were usually dealt with fairly. The prison quality assured 20% of complaints. The responses to most complaints that we reviewed were polite and addressed the issues raised. However, there was little evidence of systematic monitoring and analysis to identify trends and areas to improve outcomes for prisoners. Almost 200 complaints in the previous six months had been categorised as 'other', including complaints about staff, offender management and faith-related matters. The prison had recently increased the data collected about complaints to improve this area.
- 2.26** There was no member of staff with suitable training and expertise to be the main contact on legal matters, but prisoners could work on legal cases in the prison library where there was a range of legal texts. Legal visits took place every day, and there was a small number of private booths for confidentiality.

Recommendation

- 2.27** **There should be robust tracking to monitor the timeliness of responses to applications.**

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 characteristics¹⁴ 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

- 2.28** Equality and diversity work was receiving much more attention than at the previous inspection. A well-qualified equality adviser had given a strong and effective lead, but was no longer in post. A member of the senior management team had been nominated to lead on each protected characteristic, and they had taken up this challenge with enthusiasm. The diversity and equality action team had met monthly for the past year, and the deputy governor was leading in ensuring that actions were carried through. An equality strategy and action plan had been implemented in 2018, although a planned 12-month review had not yet taken place.
- 2.29** There was monthly equality monitoring of data in some key areas of prisoner experience, especially concerning use of force, and disciplinary and behaviour management processes. This used current local data and had led to action in response to unequal outcomes, especially in relation to race and age. A group of prisoner equality representatives was doing effective work.

¹⁴ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

- 2.30** The number of reports alleging incidents of discrimination had been low, but was rising, probably as a result of greater confidence in the institutional responses. The Zahid Mubarek Trust¹⁵ provided very useful independent scrutiny of the investigation reports and outcomes, while senior management quality assurance had also raised the quality and depth of investigation. Too many reports had waited a long time to be investigated but this fault was being dealt with. The written responses to prisoners were full and courteous, frequently describing decisions and actions taken even if the complaint itself had not been upheld. Some very full responses had been translated into the prisoner's own language where they did not have sufficient English.
- 2.31** These were signs of strong progress, but much of this had taken place within the last year, some more recently than that, and depended on a small number of senior managers giving a strong commitment and considerable time to this work. In addition, the post of equality adviser had become vacant shortly before the inspection, and consolidation of the new initiatives was likely to depend both on the right new post holder and on mainstreaming equality work within the establishment. (See key concern and recommendation S44.)

Good practice

- 2.32** *Up-to-date data on possible areas of discrimination were collated and analysed each month, leading to relevant discussion and the identification of suitable actions at the monthly equality meetings.*

Protected characteristics

- 2.33** There was a well-developed awareness of race equality issues among staff and prisoners. A current project, facilitated by the Prison Reform Trust,¹⁶ had usefully focused on race issues on the basis of a survey with a good response rate; the governor had accepted almost all the recommendations arising from this largely prisoner-led project. There was a regular and well-attended monthly forum for Gypsy, Roma and Traveller prisoners, with some practical outcomes in culturally appropriate provision, and this forum was well supported by London-based staff of the Irish chaplaincy.
- 2.34** More than a quarter of the population were foreign national prisoners. The Home Office onsite team of a chief immigration officer and four immigration officers had improved their regular contacts with prisoners, with each wing allocated to one officer who visited it regularly. Bail for Immigration Detainees¹⁷ had recently started monthly visits, which also added value. At the time of inspection 20 prisoners were held under immigration powers having completed their sentence; most had spent relatively short periods on this status, although one had been held for eight months.
- 2.35** However, work with foreign nationals was insufficient overall. Despite their numbers, the prison provided no foreign national coordinator. Managers had been giving attention to issues such as improving telephone access for those needing to call family overseas. The chaplaincy did a great deal to fill some of the gaps; for example, it had held forums for Indian, Somali, Polish and Romanian prisoners (currently the four largest nationalities in the prison), bringing in volunteers from the local community as well as using the resources of the chaplaincy staff. A large number of prison staff spoke foreign languages and were well used for informal interpreting, with lists of their names widely published. However, although use of professional telephone interpreting for confidential conversations had risen a little during

¹⁵ <http://www.thezmt.org>

¹⁶ <http://www.prisonreformtrust.org.uk>

¹⁷ <https://www.biduk.org>

the current year, it was low and there were no records of the contexts in which it was used. (See key concern and recommendation S44.)

- 2.36** Provision for those with disabilities had improved; there were now two cells fully adapted for prisoners who used wheelchairs, and partnership arrangements with the local authority had begun to yield practical results in the provision of reasonable adjustments (see paragraph 2.70). Individual evacuation plans were up to date for all those needing help in an emergency, and the information was clearly displayed for staff. However, in our survey, 78% of respondents with a disability said that they had felt unsafe at some time in Wormwood Scrubs, compared with 57% of the rest of population.
- 2.37** Forums had been held for older and for younger prisoners. Activities for older prisoners included dedicated gym sessions, and a weekly ‘vintage’ group in the education department, which was appreciated. The younger prisoners’ group had been given more attention – for example, in a setting where 42% of those in the 18-20 age group were from black and minority ethnic backgrounds, organisations working with young black people had been brought into partnership. In our survey, only 44% of those under 25 said that most staff treated them with respect compared with 70% of those over 25.
- 2.38** Work to support gay and bisexual prisoners was less well developed than any other protected characteristic. Both staff and prisoners said that there was a general feeling that gay prisoners would not feel safe in identifying themselves. There had been no focus on changing the culture to affirm LGBT people, although senior managers were beginning to consider the issue.

Recommendation

- 2.39** **The prison should affirm LGBT identities in practical ways so that all prisoners feel able to speak openly about their sexuality if they so wish.**

Faith and religion

- 2.40** A full chaplaincy team took a notably united and energetic approach to ministry in the establishment, with worship and classes for all faiths. Provision was supplemented by four non-religious voluntary chaplains, who led a regular well-attended non-religious group. The facilities for worship were spacious, and well maintained and equipped, and prisoners had good access to worship and other activities relating to their religion or belief.
- 2.41** A remarkably high number of 121 volunteers worked with the chaplaincy in active support for prisoners. Their contributions included bereavement support, support for veterans, the victim awareness work of the Sycamore Tree course delivered regularly, the Alpha Christian faith course and other in-depth religious courses. There was also a portfolio of resettlement activity, mainly through the 17 mentors who gave through-the-gate support with the community chaplaincy, the local employment-focused charity PLIAS resettlement,¹⁸ and the charity Caring for Ex-Offenders.¹⁹ This activity was carefully integrated into the life of the establishment to promote safety and liaison with other rehabilitative work.

¹⁸ <https://www.pliasresettlement.co.uk>

¹⁹ <https://caringforexoffenders.org>

Good practice

- 2.42** *With its team of over 120 volunteers, the chaplaincy had access to a large number of local community organisations and individuals providing a range of services, including those focused on resettlement, rehabilitation and the needs of minority groups, with careful operational oversight.*

Health, well-being and social care

Expected outcomes:

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

- 2.43** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)²⁰ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. CQC identified areas that require improvement and subsequently issued a notice which is detailed in Appendix III.

Strategy, clinical governance and partnerships

- 2.44** Health care provision was led by Care UK Rehabilitative Services Ltd, the provider of primary care services, clinical substance misuse, pharmacy and primary mental health care. Other health care services were subcontracted, including mental health services which were provided by Barnet, Enfield and Haringey NHS Foundation Trust.
- 2.45** A health needs assessment from 2018 informed service delivery. Regular partnership meetings, contract reviews and quality assurance meetings were in place and well attended. A residential wing governor worked closely with health care, and provided a strong link between the service and the prison. A health care manager attended the prison daily morning meeting, and relationships between health care and the rest of the prison were improving. Health care staff met daily for a comprehensive handover to discuss clinical activity and share information.
- 2.46** Incidents were recorded on to Datix (an electronic reporting system), but too many were not investigated within agreed timescales and were not routinely analysed to identify themes and trends.
- 2.47** Prisoner consultation was now well developed. Regular meetings took place with wing health care representatives and patient feedback provided useful intelligence, which informed service delivery. Health care representatives told us there was a need for greater engagement and support from frontline health staff.
- 2.48** Some prisoners told us health staff could be rude, although the interactions we observed between staff and patients were professional. Staffing levels were adequate and regular agency nurses filled any gaps. Most staff were up to date with their mandatory training, and a wide range of other training had been provided. The provision and uptake of clinical and managerial supervision was inconsistent across the teams and needed to improve, but staff we spoke to said they felt supported.

²⁰ 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>.

- 2.49** Prisoners had good access to health services but there was too much reliance on prisoner health care representatives to facilitate applications for appointments, which compromised confidentiality.
- 2.50** New arrivals were routinely asked for their consent to share information, and applications for access to medical records by patients were well managed.
- 2.51** There were adequate rooms for health services. Although some treatment rooms were becoming run down, they were clean and well ordered. Infection control audits had been completed and refurbishment plans were in progress.
- 2.52** Health care staff responded appropriately to medical emergencies, and emergency equipment was checked daily. Occasional checks were missed, but consistent managerial oversight identified any concerns.
- 2.53** Although there was a well-advertised confidential complaints process, not all complaints were submitted through it as not all prisoners understood the arrangements. Responses by the service were led by the quality and governance manager who investigated concerns as needed. Responses were prompt and polite, but lacked sufficient detail.

Promoting health and well-being

- 2.54** Although there was health promotion literature and wall displays in the health care centre and on some wings, there was no overarching strategy based on national campaigns or a prison-wide approach to health promotion activity.
- 2.55** A group of well-supported health care representatives worked with primary health care staff to support wing-based services and smoking cessation. Almost three-quarters of all smokers were engaged in smoking cessation therapies.
- 2.56** There was an impressive blood-borne virus screening and treatment service, led by enthusiastic staff. A nurse offered all new arrivals blood-borne virus testing, with very good uptake. They were also offered testing for hepatitis B, hepatitis C and HIV. Age-appropriate national screening programmes for abdominal aortic aneurysm and bowel cancer were offered, in addition to NHS health checks, but uptake was low.
- 2.57** Condoms were freely available to patients attending the health care centre, but were not widely advertised in the rest of the prison.

Primary care and inpatient services

- 2.58** New arrivals received an initial health screen from a nurse, and a GP saw those with any immediate health or substance use problems. The GP could access summary care records and prescribe required medication.
- 2.59** Completion rates for secondary comprehensive health assessments were poor, with many transferred prisoners not receiving an assessment. This posed a risk that prisoners' health needs might not be identified or addressed. Care UK was working with the prison to improve prisoner access to assessments.
- 2.60** Prisoners could access a wide range of primary health services. Care UK and locum GPs ran daily wing clinics from Monday to Saturday, with routine appointments available in under a week and prompt emergency access. An advanced nurse practitioner also provided

additional duty clinics. Nurses staffed the service 24 hours a day and ran daily wing-based triage clinics. Non-attendance at clinics was monitored and followed up appropriately.

- 2.61** Care UK had recently refurbished the B wing treatment area by separating medicines administration and consultation rooms, to allow more clinic time. Funding was agreed to replicate this on other wings, which would further improve access to care. Allied health professionals included an optician, physiotherapist and podiatrist, and waiting times for these services were reasonable.
- 2.62** Identification and management of prisoners with long-term health conditions was not systematic. Those with conditions such as epilepsy and hypertension were not always reviewed promptly, and patient registers were not up to date. Few patients had care plans to inform their ongoing care. Care for diabetic patients was more advanced, with a weekly clinic run by an external specialist. The pharmacy had also recently introduced a bi-weekly clinic to support patients with asthma and chronic obstructive pulmonary disease (COPD). Care UK had recently employed an advanced nurse practitioner to lead on managing long-term conditions and was recruiting health care assistants to provide additional focused support.
- 2.63** There were regular escort slots for hospital appointments, and a patient requiring regular dialysis received additional support. External hospital appointments were generally well managed by Care UK, which had improved processes to monitor urgent referrals and reasons for cancellations. Cancellations by the prison had recently reduced, and most resulted from prisoner refusals.
- 2.64** Prisoners were reviewed by a nurse before their release and received advice on accessing further support, a discharge summary and an adequate supply of any prescribed medication.
- 2.65** The 17-bed inpatient unit offered good support to patients with physical and mental health needs based on agreed clinical criteria. Most inpatients had mental health needs, some with challenging presentations who were waiting to be transferred to hospital. A small number of patients had social care needs. The support provided was responsive with access to a therapeutic regime that included education, gym and regular access to fresh air. Clinical staffing was suitable and well led, with multidisciplinary oversight, and prison staff clearly knew the inpatients well. Inpatients' cells needed refurbishment.

Recommendations

- 2.66 All prisoners should receive a comprehensive secondary health assessment within seven days of arriving at the prison.**
- 2.67 Prisoners with long-term health conditions should receive regular reviews, informed by an evidence-based care plan.**

Social care

- 2.68** The overarching strategic approach to social care had recently improved. Social care support was currently provided by the NHS trust, but Care UK were to take over provision under new commissioning arrangements. There was an up-to-date memorandum of understanding between the prison, Care UK and London Borough of Hammersmith and Fulham, and a social care policy to inform delivery of care. Regular governance and patient-focused meetings now took place. The prison was also developing links with another prison that could better accommodate older prisoners with personal care needs.

- 2.69** Prisoners accessed social care through referral from staff or self-referral, and there were plans to better promote the service across the prison, including recruitment of 'Buddies' (peer supporters) to help with daily activities. A council social worker attended the prison weekly, which had improved the timeliness of social care assessments. The prison had recently introduced a stock of mobility aids on site.
- 2.70** Seven prisoners had care plans and received daily social and personal care. Two other prisoners had adaptations to help them in the wider prison. NHS trust health care assistants provided care, and recorded daily interactions with the prisoner. Prisoners were very complimentary about their care.

Mental health care

- 2.71** Barnet, Enfield and Haringey NHS Trust delivered effective, integrated mental health support through a stepped-care model. Routine services were delivered five days a week and included facilitated self-help, in-reach individual case management, groupwork, clinical therapies and complex care, including input to the inpatient unit. The team had a rich skill mix of experienced mental health nurses, a learning disability nurse, occupational therapists, psychologists, a speech and language therapist and psychiatry. The pathway also included general counselling services facilitated through Atrium and improving access to psychological therapies (IAPT) provided by the Forward Trust, which supported individuals with mild to moderate psychological problems such as low-level anxiety.
- 2.72** There was an open referral system and cases were regularly evaluated, with risk zone ratings determining the ongoing input required. A joint single point of referral meeting, which included all partners, allocated referrals and the team aimed to see routine cases within five days. A duty worker was available to respond to crises, including all ACCT initiations, and all urgent cases were reviewed within 24 hours. Demand was extremely high and, in a busy and changing environment, risk was well managed both on arrival and through the gate. The in-reach team's caseload had 76 prisoners who experienced enduring and severe mental health problems and were managed under the care programme approach. Access to services was timely; although there were some waits to access clinical psychology, these were similar or better than equivalent community services.
- 2.73** The Seacole day centre offered an impressive and varied level of support. Patients were actively involved in the operation of the facility, which provided a range of social and therapeutic activities making effective use of art and music. Patients with vulnerabilities on the Elizabeth Fry unit gained immeasurably from the centre's range of support.
- 2.74** The clinical records we examined were good and the range of interventions reflected need. Staff training opportunities, professional development and supervision arrangements were robust. Few prison staff had received mental health awareness training, but innovative modules were being rolled out. Prisoners needing treatment in hospital under the Mental Health Act waited too long to be transferred.

Recommendation

- 2.75** **Patients requiring admission to hospital under the Mental Health Act should be transferred within current Department of Health guidelines.**

Good practice

- 2.76** *The Seacole centre provided an extensive range of individual and group therapeutic activities which actively involved patients.*

Substance use treatment²¹

- 2.77** Care UK provided clinical input and Forward Trust delivered psychosocial support for prisoners with substance use needs. The providers worked collaboratively and delivered effective support. All new arrivals were screened and individuals with substance use problems, or experiencing acute withdrawal, had immediate access to specialist medical support that enabled prompt initiation of treatment. First night support for patients detoxing from drugs or alcohol was thorough, with patients placed on the Conibeere unit to closely monitor their health and continue stabilisation.
- 2.78** Forward Trust saw all new arrivals individually to explain how to access services. Information was available on all wings and peer mentors could provide support, although not all wings had this input. Referrals were accepted from any source and allocations were prioritised following a single point of referrals meeting, with new referrals assessed within two days.
- 2.79** The prison now had a dedicated drug recovery service on C wing. Forward Trust was located on the wing, which enabled ready access to these prisoners. In addition, the prison operated a drug-free unit on D wing providing a structured and supportive environment with prisoners signing up to compact-based drug testing. Forward Trust offered services to this unit as well as providing input across the whole prison, and supported around 351 prisoners at the time of the inspection. We saw evidence of good quality casework, and a range of tailored activity that included individual one-to-one work, group activities and mutual aid. Caseloads were stretched, with up to 50 prisoners allocated to each caseworker, but these were efficiently managed through the use of intensive structured input and more 'light-touch' support, based on prevailing need.
- 2.80** Clinical substance use treatment was well coordinated, offering safe, clinically responsive care that was flexible and patient-focused. Currently 226 patients were prescribed opiate substitution treatment with regular joint reviews by clinical and psychosocial staff. The service benefited from the input of a substance use consultant who held clinics for prisoners with complex prescribing needs, as well as providing guidance and staff training.
- 2.81** Strong external links and joint working with community treatment providers, including a regular pre-release forum involving all local boroughs, enabled very good throughcare arrangements and effective treatment continuation.

Medicines optimisation and pharmacy services

- 2.82** Pharmacy and medicine management arrangements had improved since our previous inspection. Medicines were supplied promptly by an in-house pharmacy, largely on a named-patient basis with very little use of stock medicine. In-possession risk assessments were undertaken appropriately but only around 30% of patients received their medicines in possession. Seven-day in-possession medicines were supplied in clear plastic bags, which were not suitable containers. There were no locked storage facilities for in-possession medicines, but regular cell checks indicated few problems. All prescriptions for in-possession

²¹ 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).

medicines were automatically ordered by the pharmacy, which meant that few prisoners took responsibility for managing their own health.

- 2.83** Medicines were administered by pharmacy technicians and nurses from the wings twice a day, and the technicians provided advice about medicines. Staff took appropriate action for patients who missed medicines. Medicine hatches opened directly on to the wings. Inconsistent supervision meant that patient confidentiality was not maintained and increased the likelihood of diversion, although there was little evidence of any major problems with tradable medicines. A programme of work to improve treatment rooms was being implemented (see paragraph 2.61).
- 2.84** Prescribing and administration were recorded on the SystemOne clinical IT system, and a pharmacist clinically reviewed all medicines to ensure the formulary was complied with. The pharmacist carried out medicines use reviews and also held an asthma clinic. One of the pharmacists had just become an independent prescriber, which would enhance support provided in the asthma clinic.
- 2.85** Medicines could be supplied without the need to see a doctor through minor ailments medication or patient group directions, although these could be used more effectively. There was adequate provision for the supply of medicines out of hours.
- 2.86** The pharmacy was well organised with good medicines practice on the wings. Medicines were stored safely, and fridge temperatures were well managed. Out-of-date and discontinued medicines were sent back to the pharmacy. Date checking records were kept but there were no reconciliation procedures on the wings for stock or minor ailments medication. Governance arrangements were good; well-attended monthly medicines and therapeutics meetings closely monitored abusable and high cost medicines.

Recommendation

- 2.87** **Prison officers should fully supervise all medicine administration to ensure patient confidentiality and reduce the risk of diversion.**

Dental services and oral health

- 2.88** Time for Teeth provided community-equivalent dental care to prisoners. Two dentists, supported by a dental nurse, provided eight treatment sessions a week. Although some prisoners told us waiting times were long, routine care was available in around three weeks, which compared favourably with community services. Emergency provision was effective.
- 2.89** The clean and well-maintained dental suite and separate decontamination room met current infection control standards. Dental equipment was serviced regularly and certificated. Clear and effective governance processes ensured the service was safe. Clinical records contained sufficient detail. The team provided oral health promotion to prisoners during appointments, and through a wide range of literature.

Section 3. Purposeful activity

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

Time out of cell

Expected outcomes:

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

- 3.1 The regime remained as at the previous inspection, although a reduced population and more staff enabled more consistent delivery of the published regime. There was evening association for only two wings, which housed those employed full time. This group had up to seven and a half hours out of cell on a weekday; others had considerably less, and some unemployed prisoners said that they had less than an hour out of their cell on a normal day, other than mealtimes. During our roll checks we found 38.5% of prisoners locked up during main work periods; this was a little better than at the previous inspection but still too high. Many prisoners still had little time for association and domestic tasks, especially at weekends: in our survey, 75% said that they usually spent less than two hours out of their cells on Saturdays and Sundays, against the comparator of 44%. (See key concern and recommendation S45.)
- 3.2 Although prisoners could access exercise yards during association periods, and the yards had been improved by the addition of a variety of exercise equipment, only just over a third of prisoners said that they could go outside for exercise more than five times a week; the short hours out of cell at weekends would have been a factor in this.
- 3.3 The library, run by the London Borough of Hammersmith and Fulham library service, was a large and welcoming area with a reasonable range of books, including a large number in 35 foreign languages. The full-time librarian and part-time library assistant were active in encouraging readers. Due to recent IT problems, they had not been able to track patterns of use or book loss effectively.
- 3.4 The number of library visits had been improving, even though wings did not have a regular slot; prisoners had to make a specific application to visit the library. The chief reason for this was that a uniformed officer was hardly ever allocated to the library, so that prisoners could only visit it at the beginning and end of the morning or afternoon work session. Nevertheless, in our survey 35% of prisoners said that they typically went to the library once a week or more, up from 20% at the previous inspection. Many education classes visited the library once a week, which raised the level of access, and new arrivals now visited it during their induction.
- 3.5 The gym had good facilities; the environment was basic but spacious, and all the equipment was in useable condition following a change to hiring rather than buying it. The outside all-weather pitch was used when staffing permitted. There was a good programme of courses, and the class we observed was lively, engaging and well run. There were good links with the community, including resettlement-focused links with Queens Park Rangers FC through the

Twinning Project,²² and participation in a local volleyball league, which held matches in the prison fortnightly during the season.

- 3.6** Although the PE staff group was almost complete, and despite the lower population in the prison, it was still normal for two or three instructors to be redeployed to other duties. Consequently, the recreational gym sessions for specific wings were often cancelled. In our survey, only 17% of prisoners, against the comparator of 39%, said that they typically went to the gym twice a week or more.

Education, skills and work activities (Ofsted)²³

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.²⁴

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

Overall effectiveness of education, skills and work:	Requires improvement
<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>

Management of education, skills and work

- 3.8** Leaders and managers had a good understanding of the challenges they faced, and had developed detailed action plans to improve the provision. These were communicated well to staff, many of who spoke positively of their role in developing better provision. However, many actions had not been completed, and most aspects of the provision still required improvement.
- 3.9** There were sufficient places for all prisoners to have at least part-time activity, but many were not filled. Managers had made determined and persistent efforts to improve the allocation of prisoners to activities, and had successfully increased the proportion of places allocated from 44% to 67% between April and August 2019. Nearly all of the 220 part-time education places were now filled. However, almost a third of the population were unemployed. (See key concern and recommendation S46.)

²² <https://www.twinningproject.co.uk>

²³ 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.

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

- 3.10** Prisoners' attendance at education classes had improved from 50% in June 2019 to almost 70% in August, but was still too low. Attendance at the education induction was particularly poor with only around half the allocated prisoners attending (see paragraph 1.7). This meant that many prisoners missed the initial assessment of their skills and knowledge, so could not be allocated an activity place. Prisoners' punctuality still required improvement, particularly in education classes. (See key concern and recommendation S46.)
- 3.11** Attendance in industry workplaces was good. Facilities such as the laundry and textile workshops were of a very good commercial standard and prepared prisoners well for work outside the prison. Prisoners also worked in industrial settings such as the kitchen, prison stores and in the gardens. Around 190 worked on the wings, including teams of prisoners employed to repaint and refurbish the cells and landings. Very few workplaces offered the opportunity for prisoners to gain a recognised qualification to help them into employment on release.
- 3.12** Since the previous inspection, managers had developed strong partnerships with the education contractor, training providers and other agencies, enabling them to improve the range of courses. Much of the education provision focused on developing prisoners' abilities in English and mathematics. Subcontractors and partners delivered most employment-related courses, such as barista training, Railtrack safety, construction site safety and garden tool refurbishment.
- 3.13** Managers had taken steps to improve quality monitoring of teaching and learning, but this remained weak. In education, managers' observation of classes did not focus enough on developing tutors' teaching and assessment skills, so was not effective in ensuring consistently good teaching. In industries, managers had begun to visit workshops to check on the quality of learning, but the records of these observations were insufficiently rigorous and did not identify actions needed to improve learning. (See key concern and recommendation S46.)
- 3.14** The prisoners' pay policy was fair and did not disadvantage those attending learning activities. However, many prisoners complained that their pay was not paid accurately or on time.
- 3.15** There was no careers advice for prisoners, although a new contract for this service was due to start. Prisoners approaching their release date could attend a range of short courses, including a job club to help them prepare for employment. Some job search tools were available through the 'virtual campus' (giving prisoners internet access to community education, training and employment opportunities), but few made use of these.
- 3.16** Managers did not have accurate data on the job or training outcomes for released prisoners, but data from the community rehabilitation company indicated that almost a quarter of those released in August 2019 were expected to move into work or a training place.

Quality of provision

- 3.17** Too much teaching in education was not effective, particularly in English, English for speakers of other languages (ESOL) and mathematics. The tasks and activities facilitated by tutors did not sufficiently help prisoners to develop the skills required by their course or retain basic foundation knowledge. Tutors did not always check prisoners' understanding of topics before moving on. Many prisoners were unable to recall prior learning, even though these targets had been signed off as completed. There were prisoner learning mentors in most classes, but tutors did not always plan their deployment effectively to improve prisoners' learning. (See key concern and recommendation S47.)

- 3.18** Although managers and staff had worked to improve the quality of individual learning plans, in too many subjects tutors did not set clear targets or record prisoners' progress sufficiently. As a result, prisoners did not always fully understand what their course required of them, and it was not clear whether they were making sufficient progress from their starting points. In work and vocational training there was little targeting or recording of the skills required by employers. (See key concern and recommendation S47.) However, in other subjects tutors planned sessions well and gave prisoners effective one-to-one support to develop their knowledge and skills. For example, in a self-employment course prisoners demonstrated how to analyse business strategy and prepare budgets. In music, they developed employability skills such as teamworking and problem solving. Most tutors gave prisoners helpful feedback on their work, enabling them to reflect on what they had done and how they could do better.
- 3.19** The education department provided a welcoming environment, with attractive wall displays in classrooms and corridors. There was good support for Open University students, including access to the virtual campus computers. A small number of prisoners who could not attend education received effective support from outreach tutors, such as help to prepare for job applications and interviews.
- 3.20** Learning support arrangements were satisfactory. The prison had recently appointed a learning support coordinator who identified prisoners' learning needs at induction and provided teachers with information and support to help them meet those needs. A small number of prisoners received good one-to-one learning support from the coordinator.
- 3.21** Instructors in industrial cleaning and tools refurbishment and in vocational training successfully developed prisoners' vocational skills. In textiles, prisoners quickly learned basic stitching and cutting skills, and worked to a high standard. Classroom and practical sessions ensured that Railtrack students fully understood the importance of track safety and railway communication systems. In the industrial cleaning and tools refurbishment workshops, instructors supported prisoners to improve their mathematics and English skills.

Personal development and behaviour

- 3.22** Prisoners demonstrated good behaviour in work and learning activities. In industrial workshops, prisoners showed good motivation and worked well both independently and in small teams. Prisoners employed as team leaders successfully mentored new workers and oversaw production to ensure targets were met.
- 3.23** In education, prisoners enjoyed their learning and were respectful to their tutor and each other. Work and education environments were clean and tidy, prisoners felt safe, and the atmosphere was calm. Attendance was good in industry workshops, but was not good enough in many education classes.
- 3.24** More than 60 prisoners were employed in responsible roles such as information mentor, education office worker and activities support mentor. These roles gave them opportunities to develop new skills and help other prisoners. For example, information mentors attended weekly meetings with the residential governor to discuss current job and education opportunities; they then provided information and support to prisoners on the wings.
- 3.25** Managers had recently introduced a scheme in the workshops to record prisoners' employability skills, but implementation was patchy and not all workshops participated. As a result, prisoners did not recognise the importance of these skills for their future employment prospects. (See key concern and recommendation S47.)

- 3.26** The education curriculum included opportunities for prisoners to consider issues relating to diversity and equality. For example, business students discussed the importance of promoting equality and diversity when developing recruitment policies and procedures. Tutors also supported prisoners to develop their technical English vocabulary in classes such as maths and information and communications technology (ICT).

Outcomes and achievements

- 3.27** In the great majority of industry workshops there was no opportunity for prisoners to gain a vocational qualification or to have their employability skills recognised and recorded. This reduced the effectiveness of the work areas in preparing prisoners for employment after release.
- 3.28** In education, prisoners' progress in English and some mathematics classes was not good enough. Too many dropped out of these courses without completing them. Retention and pass rates were particularly poor in English and in mathematics at level 1. (See key concern and recommendation S48) In other subjects, such as ICT, barbering, and ESOL, prisoners made good progress from their starting points and achieved good pass rates. Their portfolios were well organised and the standard of written work was good.
- 3.29** Prisoners achieved good standards of work in some work areas. For example, in the 'Toolshed' workshop prisoners refurbished old garden tools to good-as-new standard. In the barista shop, they demonstrated very good customer service skills. In the kitchens, prisoners produced work to an acceptable commercial standard.
- 3.30** A minority of prison work, in areas such as the clothing exchange store, was mundane with very little opportunity to develop skills. Most workshop facilities were good, but in some cases, such as waste management and gardens, resources were not sufficient to enable prisoners to develop relevant skills and knowledge. (See key concern and recommendation S48.)
- 3.31** Data showed no significant differences between the performance of different groups in education – prisoners with additional learning needs achieved results close to, or above, those of the population as a whole.
- 3.32** Around 20 prisoners were employed in a successful project to refurbish wing accommodation. Cells were stripped, cleaned and decorated to a good standard by enthusiastic teams who took pride in their work and in maintaining their craft skills. (See also paragraph 2.5.)

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 A Prison Advice and Care Trust (PACT)²⁵ family engagement officer supported prisoners to help resolve family issues. There were six themed family days a year, as well as informal weekly children's visits, and prisoners had far more opportunity to engage with their children in an informal setting than we usually see. There was a range of parenting and relationship courses and activities, including a weekly homework club.
- 4.2 Prisoners appreciated having a telephone in their cell, which helped them maintain contact with their family and friends. The 'email a prisoner' scheme was well used, and there were advanced plans to enable prisoners to reply to incoming emails.
- 4.3 There were 12 two-hour social visit sessions a week, which was more than we usually see. Visitors told us it was easy to book a visit. However, some said they were not informed if their visits were cancelled by the national HMPPS booking centre.
- 4.4 The visits centre, run by PACT, provided a supportive environment for visitors. There was a well-furnished waiting area with a wide range of information, a children's play area and clean toilet facilities.
- 4.5 The large visits hall was clean. There had been some effort to soften the environment with murals, but it was looking run down. The children's play area was staffed by PACT playworkers, and there was a snack bar. A second, smaller visits room used for weekly children's visits and family days provided a better environment. Closed visits booths were very cramped and poorly ventilated. Although there was still some slippage, most visits now started on time. All visitors we spoke to said that staff treated them with respect. Prisoners still wore yellow bibs during visits, which was not proportionate to risk. Both visitors and prisoners could go to the toilet and resume their visit.

Recommendation

- 4.6 **Visitors should always be notified if their visit is cancelled.**

²⁵ <https://www.prisonadvice.org.uk>

Good practice

- 4.7** *Weekly children's visits gave prisoners the opportunity to engage with their children in an informal setting.*

Reducing risk, rehabilitation and progression

Expected outcomes:

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

- 4.8** The strategic management of reducing reoffending work had improved since our previous inspection but more was still required. (See key concern and recommendation S49.) The reducing reoffending strategy was not informed by a comprehensive needs analysis and there was no action plan to drive progress. However, the prison had well-established plans to complete a new needs analysis and update its strategy.
- 4.9** Monthly reducing reoffending partnership meetings were well attended from agencies across the resettlement pathways. However, the meeting failed to take a strategic overview of reducing reoffending and had no meaningful impact on resettlement outcomes for prisoners. Each resettlement partner (such as Jobcentre Plus) provided monthly performance data but they were not analysed or used to determine whether provision met the needs of the population, and issues discussed at the meeting were not incorporated into the strategy. Where actions were raised they were not followed up, and many actions rolled over for four or more months with little or no progress. (See key concern and recommendation S49.)
- 4.10** The prison had reviewed its offender management strategy, which was now comprehensive, specific to the population and set out the offender management unit's (OMU's) challenges and strategic aims. Although there was no action plan to complement the strategy, regular OMU management meetings discussed issues in the strategy and took action on them. The meetings had also led to an improvement in working relationships between probation and prison staff.
- 4.11** The OMU had increased its staffing since our previous inspection. It now had a full-time senior probation officer (SPO) and a full complement (12) of operational (prison staff) and non-operational (probation) prison offender managers (POMs). However, there remained a 0.5 SPO vacancy and two probation POM vacancies. During our inspection, phase two of Offender Management in Custody (OMiC, see footnote 12) started and the prison had plans to manage the changes, but it was too early to assess its implementation. All prisoners were now promptly allocated a POM, who had all been trained in OASys (offender assessment system), and high risk and indeterminate sentence prisoners²⁶ were allocated a probation POM.
- 4.12** Although OMU staffing levels had improved, only 28% of prisoners in our survey said they had a custody plan, and only 37% of those prisoners said staff were helping them to meet their objectives and targets. The prison had worked hard to reduce its OASys backlog but a quarter of eligible prisoners still did not have an up-to-date assessment of their risks and needs. The prison had introduced an OASys tracker to monitor when POMs should complete an assessment but failed to take necessary action when needed. Some of the

²⁶ Refers both to life sentence prisoners and those serving indeterminate sentences for public protection.

OASys assessments were the responsibility of the National Probation Service (NPS) but the prison was not doing enough to ensure that these assessments were also completed on time. (See key concern and recommendation S50.)

- 4.13** The assessments we looked at were of a good quality but staff contact with prisoners was irregular and often reactive. Although POMs should have seen prisoners on their caseload at least once a month, we found examples of prisoners who had not been seen by their POM for over a year. Many of the prisoners we spoke to said they did not know who their allocated POM was, and others said that they struggled to contact their POM when they needed help. There was no evidence of management oversight of contact levels, and the contact we saw was often perfunctory with limited one-to-one work. OMU staff told us they struggled to see their cases once of month because of staffing issues and redeployment. Prison officer POMs were often redeployed to other areas of the prison (around a quarter of their time), and probation POMs were still catching up on previous staff shortages. These issues, in combination with low key worker numbers (see paragraph 2.4), meant that many prisoners told us that no one was helping them to achieve their custody plan or that they did not know what was on it. The prison had tried to address these issues through the introduction of fortnightly OMU wing surgeries, but not all staff and prisoners were aware of the surgeries and more needed to be done to promote them. (See key concern and recommendation S51.)
- 4.14** All the 38 indeterminate sentence prisoners at the time of the inspection were managed by probation POMs, and the prisoners on indeterminate sentences for public protection held beyond their sentence tariff received support from the psychology team. Most indeterminate sentence prisoners were transferred to more appropriate establishments promptly, but some stayed too long because of protracted parole holds outside the prison's control.
- 4.15** Home detention curfew (HDC) procedures were robust. In the previous six months, 67% of applications had been approved and most prisoners had been released on time. Decisions to refuse a prisoner for HDC were proportionate and the prison was able to evidence why a prisoner was released late – which was usually because of delayed reports from the community or the prisoner having transferred to the prison within their 12-week HDC window.

Public protection

- 4.16** A third of the sentenced population were assessed as posing a high or very high risk of serious harm to others, and over half were subject to multi-agency public protection arrangements (MAPPA) because of the nature of their offence.
- 4.17** The prison had introduced a monthly interdepartmental risk management meeting (IDRMM), which was chaired by the SPO. This meeting was well attended and discussed the riskiest prisoners in custody and all high-risk prisoners coming up for release. Although it had some in-depth discussion, the meeting was not always sufficiently focused on risk, and actions were not always followed up promptly. We found examples where release planning and risk management plans were not robust enough. In one case, a high-risk prisoner due for release did not have an up to date OASys assessment or a confirmed MAPPA level. Although he was discussed at the IDRMM, actions from this meeting were not followed up. In a second case, we found a prisoner due for release at the end of his sentence where the prison had not arranged a multi-agency risk assessment conference (MARAC) referral when there was a risk to a known adult. Therefore, we were not confident that release plans would have been robust if we had not intervened, leading the prison to take action. (See key concern and recommendation S52.)

- 4.18** The prison had a dedicated public protection team who screened all new arrivals to identify MAPPA-eligible cases. They also identified prisoners subject to child contact and monitoring arrangements, which was done robustly. MAPPA reports were of a good quality. Although MAPPA prisoners were identified on arrival, their risk management levels were not always confirmed six months before their release. Although this was the responsibility of the NPS, the prison had not done enough to escalate the issue. (See key concern and recommendation S52.)

Categorisation and transfers

- 4.19** Initial categorisation processes were sound. POMs were responsible for completing recategorisation reviews and the decisions we looked at were robust. POMs considered information from OASys, P-Nomis (prison national offender management information system), security and written representations from the prisoner before making a decision, which a manager then reviewed. However, there was limited management oversight to ensure that reviews were completed on time. At the time of our inspection, 20% of the reviews that should have taken place in August and September 2019 were late.
- 4.20** Oversight of transfers of prisoners to other prisons (around 100 a month) had improved but some strategic weaknesses remained. The prison had recently introduced a promising fortnightly meeting to discuss the transfer and progression of prisoners. However, it was not clear how the meeting decided which prisoners to discuss, and some prisoners were still transferred without an OASys or consideration of their custody plan. We also found too many out-of-date holds against transfer. The prison had a good relationship with the national population management unit and most prisoners were transferred to other establishments promptly. However, due to a shortage of spaces for category B prisoners, there had only been eight transfers of such prisoners in July and August 2019.

Recommendations

- 4.21** Recategorisation reviews should be completed on time.
- 4.22** The transfer of prisoners to other establishments should be prompt and underpinned by a custody plan.

Interventions

Expected outcomes:

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

- 4.23** New arrivals received a basic custody screening within 24 hours. The community rehabilitation company (CRC, see footnote 9) then followed this up to identify any resettlement needs and referrals to resettlement partners. In the previous six months, the CRC had seen 95% of prisoners within their first five days, which was 25% more than at our previous inspection. The CRC initial custody screenings we looked at were of a good quality, and the CRC made prompt referrals to partner agencies and interventions where necessary.
- 4.24** As a local prison, Wormwood Scrubs offered no accredited programmes but there was a range of short non-accredited programmes. In April 2019, the CRC had re-introduced 'Getting It Right', a short programme to help prisoners prepare for release, and other interventions across the prison included mentoring programmes, violence reduction courses and the Sycamore Tree victim awareness course (see paragraph 2.41). The prison had

developed a useful reducing reoffending directory listing all the interventions available, which had recently been shared with POMs and keyworkers.

- 4.25** In our survey, 64% of prisoners due to be released in the next three months said they needed help finding accommodation, but only 35% of these prisoners said they were getting help. The homelessness charity St Mungo's provided accommodation support for those identified by the CRC as having an accommodation need. This included tenancy support on arrival and accommodation referrals before release. Accommodation data were not easy to obtain but figures provided to us during the inspections showed that 78% of prisoners who the CRC had identified as having an accommodation need were released to sustainable accommodation compared with 86% of prisoners without an identified need. The prison did not adequately monitor accommodation outcomes for all releases to ensure its accommodation provision met the needs of its population. It also could not provide accommodation outcomes beyond the day of release.
- 4.26** The prison had improved its finance, benefit and debt support. Prisoners were now able to get help from the CRC to freeze court fines and open bank accounts, alongside very good benefit support from full-time Jobcentre Plus and Citizens Advice workers. The prison had also introduced a short finance, benefit and debt course, an employment disclosure letter course and a job club to help prisoners find employment on release. These courses were supported by a new dedicated employment broker to help prisoners find employment opportunities before release.

Recommendation

- 4.27** **The prison should monitor and analyse accommodation outcomes for all prisoners on release to ensure that its accommodation support is adequate for the needs of the population.**

Good practice

- 4.28** *The prison had developed a reducing reoffending directory including all interventions available across the prison, which was shared with prison offender managers and key workers.*

Release planning

Expected outcomes:

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

- 4.29** Demand for resettlement services was high with over 100 prisoners released each month. The CRC had improved awareness of its services and working relationship with the OMU through good attendance at key meetings and the introduction of resettlement wing surgeries for prisoners. The CRC saw most new arrivals to complete an initial resettlement plan (see paragraph 4.23), which was then reviewed for 95% of prisoners 12 weeks before release (compared with 54% of prisoners at our previous inspection). The review resettlement plans were of a good quality, and brought forward where needed because of an earlier HDC or parole release date.

- 4.30** A new pre-release event offered prisoners within their last 12 weeks the opportunity to see a range of resettlement partners, such as the Home Office and Jobcentre Plus. This was a promising initiative, which required further development to include more external agencies to support prisoners for release.
- 4.31** Practical release arrangements for prisoners were reasonably good. All prisoners were given an exit letter five days before release, which included information about support services in the community and appointments on release. Reception staff also provided prisoners with homelessness support information and clothing where needed. There were many smaller through-the-gate initiatives through St Mungo's, the employment worker and a new mentoring charity. However, there was limited oversight and ownership of through-the-gate projects as whole so that the prison could assure itself that prisoners were getting the practical support they needed after release.

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 in the left-hand column refer to the paragraph location in the main report.

Key concerns and recommendations		Directed to:
S40	<p>Key concern: Violence against both staff and prisoners had risen since the previous inspection. While serious violence was investigated well, other incidents were managed less thoroughly and there was no formal support for victims. Residential staff did not use challenge, support and intervention plans (CSIPs) well enough.</p> <p>Recommendation: The prison should challenge and reduce violence, offer greater support for victims and ensure that residential staff use the challenge, support and intervention plan process effectively.</p>	The governor
S41	<p>Key concern: While the mandatory drug testing (MDT) rate had reduced to a level now similar to other prisons, survey results, finds and positive test results all indicated that drugs were easily available. Many positive tests were not referred to adjudication. Skilled staff were frequently redeployed and MDT officers had insufficient time to complete follow-up work or suspicion testing. Some completed tests were not submitted for analysis at all. These factors undermined the MDT process as a deterrent to substance use, as well as the legitimacy of published MDT positive test rates.</p> <p>Recommendation: The mandatory drug testing (MDT) process should be sufficiently resourced to provide assurance that it is a deterrent to the use and supply of drugs.</p>	The governor
S42	<p>Key concern: The level of self-harm was high. The prison had taken too long to address significant weaknesses in its management of self-harm prevention, but there had been very good work since the beginning of 2019. The quality of case management documentation was improving, but was still not consistently good enough.</p> <p>Recommendation: There should be an ongoing and strong focus on reducing self-harm and improving support for prisoners in crisis. Outcomes should be reviewed and evaluated and, where necessary, actions should be adapted to ensure maximum impact.</p>	The governor
S43	<p>Key concern: Staff-prisoner relationships were adversely affected by a large number of inexperienced staff, a lack of consistency of wing staff and high sickness rates. Fewer than 40% of prisoners had a key worker to support welfare and progression. A number of staff told us they needed, but had not received, mental health training. All of these factors affected</p>	The governor

	<p>staff knowledge about prisoners in their care.</p> <p>Recommendation: The prison should ensure that wing staff understand the needs of prisoners they are supporting, and have the knowledge and skills to do this effectively.</p>	
S44	<p>Key concern: The promotion of equality and diversity had improved, but at the time of inspection there was no member of staff with a dedicated role to develop it further. Many of the improvements were relatively recent, and largely sustained by day-to-day senior management engagement rather than embedded in the prison's life. Some groups of prisoners, particularly foreign nationals and gay and bisexual prisoners, were not yet receiving adequate support.</p> <p>Recommendation: The equality strategy and action plan should set specific priorities and targets to ensure that equality work becomes part of the prison's daily business, and improves outcomes for all minority groups.</p>	The governor
S45	<p>Key concern: There had been slight improvements in the predictability and continuity of the regime but not in the amount of time prisoners spent out of their cells, despite improved staffing levels and a reduction in population. Restricted access to the gym, exercise yards and library indicated the need to provide the level of regime found in most local prisons.</p> <p>Recommendation: The prison should implement a core daily programme that gives prisoners reasonable access to all important facilities, together with realistic allocation of staff, and should monitor outcomes for prisoners to correct any failings.</p>	The governor
S46	<p>Key concern: Too many prisoners were not engaged in purposeful activity, and too many of those with an activity did not attend. Industry workshops did not provide opportunities for prisoners to gain a vocational qualification, or to have their employability skills recognised and recorded. Quality improvement measures were not yet fully developed to be effective in raising standards in teaching and learning.</p> <p>Recommendation: All prisoners should have their learning needs assessed, and be allocated to activities that meet their needs. Managers should further develop their ongoing work to engage all prison areas in improving prisoners' attendance to their allocated activity. Opportunities for the accreditation of prisoners' skills should be introduced in all appropriate areas. Quality improvement processes should be rigorous and make full use of all the data available, including that on prisoners' destinations, to identify strengths and areas for improvement.</p>	The governor
S47	<p>Key concern: Too much teaching in education was not effective. Some classroom activities were not successful in helping prisoners to learn, and some teachers did not set targets for prisoners to help them understand what was required and make progress. Teachers' deployment of prisoner classroom assistants was not always well planned. Prisoners in work and training were not sufficiently aware of the importance of employability</p>	The governor

	<p>skills, and these were not recorded.</p> <p>Recommendation: Tutors' planning of learning and assessment should be effective in engaging all prisoners in the class and helping them to learn. Managers should monitor the quality of learning documents to ensure that prisoners are set realistic targets for learning and that these are monitored. In workshop and industry areas, instructors should encourage prisoners to recognise the skills they are developing and see them as progressing towards employability after release.</p>	
S48	<p>Key concern: Too few prisoners made progress and achieved a qualification in English and mathematics. A minority of prison work was mundane and made little impact on prisoners' prospects for employment after release.</p> <p>Recommendation: Prisoners on all education courses should be able to achieve good pass rates. All workshop areas should replicate, as far as possible, the standards and resources that apply in industry outside the prison.</p>	The governor
S49	<p>Key concern: The strategic management of reducing reoffending work was weak. The reducing reoffending strategy was not informed by a comprehensive needs analysis and there was no action plan to drive progress. The reducing reoffending meetings were not effective, with limited analysis of performance data to enable the prison to determine if it met the resettlement needs of prisoners, and no link to the strategy or action plan, and actions raised at the meeting were rolled over with little or no progress.</p> <p>Recommendation: The strategic management of reducing reoffending work should be effective and focus sufficiently on outcomes for prisoners to drive improvements across the resettlement pathways.</p>	The governor
S50	<p>Key concern: Many prisoners did not know whether they had a custody plan or what it contained. A quarter of eligible prisoners did not have an up-to-date assessment of their risk and needs, and the prison was not doing enough to ensure that all prisoners had an up-to-date custody plan.</p> <p>Recommendation: All eligible prisoners should have an up-to-date assessment of their risks and needs.</p>	The governor
S51	<p>Key concern: Many prisoners said that no one was helping them to achieve their custody plan and did not know who their prison offender manager (POM) was. Contact between POMs and prisoners was irregular and reactive, with little one-to-one work. There was no management oversight of contact levels, and prison officer POMs were often redeployed to other areas of the prison.</p> <p>Recommendation: Prison offender manager contact with prisoners should be regular and meaningful.</p>	The governor
S52	<p>Key concern: The inter-departmental risk management meeting was not sufficiently focused on risk, and actions raised there were not always</p>	The governor

	<p>followed up promptly. There was an inadequate escalation process to ensure that prisoners' multi-agency public protection arrangements (MAPPA) levels were confirmed six months before their release, which meant that some high-risk prisoners could be released without a robust risk management plan.</p> <p>Recommendation: Public protection procedures should ensure that there is a robust risk management plan in place well in advance of the prisoner's release.</p>	
General recommendations		Directed to:
1.8	New arrivals should only be strip searched on the basis of an individual risk assessment.	The governor
1.9	The delivery of induction should be effectively monitored to ensure that all new arrivals complete it.	The governor
1.17	Managers should review and revise the approach to the incentives and earned privileges scheme, in consultation with prisoners, to ensure that it provides genuine incentives and promotes positive behaviour.	The governor
1.21	Comprehensive data should be collected, analysed and acted on to ensure that adjudications are conducted promptly and to a demonstrably high standard, and only for suitable cases.	The governor
1.38	Security intelligence meetings should address identified actions, and analyse and monitor the outcomes.	The governor
2.4	Every prisoner should have regular contact with trained key workers who can support their welfare needs and progression goals.	The governor
2.12	The painting and refurbishment programme should be completed and managers should ensure that decent living conditions are maintained.	The governor
2.13	Two prisoners should not be held in cells designed for one person.	HMPPS
2.14	An electronic cell bell monitoring system should be introduced and used to ensure that staff are responding promptly to cell call bells.	The governor
2.15	Prisoners should be able to access their property promptly following request.	The governor
2.22	Prisoner complaints about food should be understood and addressed through a range of measures, including regular and effective consultation, later service of lunch (not before 12pm) and dinner (not before 5pm), and adherence to hygiene regulations.	The governor
2.27	There should be robust tracking to monitor the timeliness of responses to applications.	The governor
2.39	The prison should affirm LGBT identities in practical ways so that all prisoners feel able to speak openly about their sexuality if they so wish.	The governor
2.66	All prisoners should receive a comprehensive secondary health assessment within seven days of arriving at the prison.	The governor
2.67	Prisoners with long-term health conditions should receive regular reviews, informed by an evidence-based care plan.	The governor
2.75	Patients requiring admission to hospital under the Mental Health Act should be transferred within current Department of Health guidelines.	The governor
2.87	Prison officers should fully supervise all medicine administration to ensure patient confidentiality and reduce the risk of diversion.	The governor
4.6	Visitors should always be notified if their visit is cancelled.	HMPPS
4.21	Recategorisation reviews should be completed on time.	The governor
4.22	The transfer of prisoners to other establishments should be prompt and underpinned by a custody plan.	HMPPS/The governor
4.27	The prison should monitor and analyse accommodation outcomes for all	The governor

	prisoners on release to ensure that its accommodation support is adequate for the needs of the population.	
Examples of good practice		
1.24	The weekly use of force meeting reviewed all incidents, which gave assurance that all restraint used was necessary and to learn lessons where necessary.	
1.47	The prison had conducted an excellent, comprehensive review of the quality of assessment, care in custody and teamwork (ACCT) case management documentation and, following consultation, had introduced a range of measures to address the deficiencies identified.	
2.32	Up-to-date data on possible areas of discrimination were collated and analysed each month, leading to relevant discussion and the identification of suitable actions at the monthly equality meetings.	
2.42	With its team of over 120 volunteers, the chaplaincy had access to a large number of local community organisations and individuals providing a range of services, including those focused on resettlement, rehabilitation and the needs of minority groups, with careful operational oversight.	
2.76	The Seacole centre provided an extensive range of individual and group therapeutic activities which actively involved patients.	
4.7	Weekly children's visits gave prisoners the opportunity to engage with their children in an informal setting.	
4.28	The prison had developed a reducing reoffending directory including all interventions available across the prison, which was shared with prison offender managers and key workers.	

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy Chief Inspector
Hindpal Singh Bhui	Team leader
Ian Dickens	Inspector
Deri Hughes-Roberts	Inspector
Martin Kettle	Inspector
Alice Oddy	Inspector
David Owens	Inspector
Emma Sunley	Inspector
Sharlene Andrew	Researcher
Natalie Hall	Researcher
Billie Powell	Researcher
Catherine Shaw	Researcher
Steve Eley	Lead health and social care inspector
Elizabeth Walsh	Health and social care inspector
Richard Chapman	Pharmacist
Tim Byrom	Care Quality Commission inspector
Jane Hughes	Ofsted inspector
Steve Oliver-Watts	Ofsted inspector
Allan Shaw	Ofsted inspector
Keith Humphreys	Offender management inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2017, prisoners experienced frequent delays in court cells before movement to the prison. Early days support at the prison had improved overall but significant gaps remained. Levels of violence were still too high and many incidents were serious. More prisoners than at the time of the previous inspection reported feeling unsafe, and there was insufficient attention to addressing poor behaviour and violence. Support for those at risk of self-harm was poor. Security staff understood the challenges faced by the prison but intelligence was rarely responded to. An almost exclusively punitive approach was taken to managing poor behaviour. Levels of use of force were high. Segregation arrangements were reasonable, given some very challenging prisoners held. Some aspects of substance misuse support needed to be improved.

Outcomes for prisoners were poor against this healthy prison test.

Main recommendations

The strategic response to managing and reducing violence should be strengthened. Sufficient staff should be allocated to safer custody and other key tasks to ensure a proactive approach to keeping prisoners safe. The success of this approach should be measured by reduced levels of violence. (S45)

Partially achieved

Levels of self-harm must be reduced. Prisoners who are vulnerable to self-harm should be supported effectively; staff should help them to manage their problems and improve their coping strategies. (S46)

Partially achieved

Recommendations

Peer workers should be actively managed and overseen by a member of staff. (I.12)

Achieved

Comprehensive adult safeguarding procedures should be embedded across the prison, and the prison should be represented on the local safeguarding adults board. (I.27)

Partially achieved

Actions identified from intelligence reports should be routinely completed and monitored, and the outcomes analysed. (I.34)

Not achieved

There should be robust management and oversight of the adjudications process, to ensure that it provides proper safeguards and an effective deterrent. (1.41)

Not achieved

There should be sufficient managerial oversight of all use of force and special accommodation, to ensure that it is used proportionately and only as a last resort. (1.46)

Achieved

The regime on the segregation unit should include purposeful activity and at least 60 minutes in the open air daily. (1.50)

Not achieved

All prisoners with substance misuse issues should have prompt access to a comprehensive range of psychosocial support which meet their identified needs throughout their stay. (1.55)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

*At the last inspection, in 2017, despite efforts to improve conditions, prisoners faced daily challenges and frustrations in living decently, and both the lived and external environment were poor. Problems with the maintenance services contract were also contributing to the challenges faced. Staff–prisoner relationships were generally good but staff were extremely stretched, which meant that they had limited capacity to get to know prisoners or provide support when needed. Equality and diversity work was weak, and outcomes for the protected characteristic groups varied greatly. The chaplaincy was excellent. Responses to complaints were inconsistent and not all replies were appropriate. Legal services needed to be improved. Health care provision was reasonably good overall. The food provided was poor and there were delays in getting a shop order on arrival. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

Main recommendations

The prison governor, staff and HMPPS should ensure that prisoners live in clean, properly equipped and respectful conditions. Prisoners must be provided with the equipment and kit as well as other requirements to live a decent life. (S47)

Achieved

Diversity and equality must be respected and promoted. Equality and diversity work should ensure outcomes and perceptions are measured and that the needs of prisoners with protected characteristics are understood and, where possible, met. (S48)

Partially achieved

Recommendations

Wing-based staff should have enough capacity to be able to manage prisoners safely and provide them with ongoing support. (2.11)

Achieved

The diversity and equality team should meet regularly, to provide strategic oversight of equality work and ensure that equality monitoring tool (EMT) data and other evidence suggesting the

disproportionate treatment of a protected group is investigated promptly. (2.18, repeated recommendation, 2.24)

Achieved

Prisoners' complaints should receive respectful responses that address the issues raised, and all should be investigated thoroughly. (2.31)

Achieved

Health care complaints should be investigated and used appropriately, to inform service development and learning. (2.47)

Achieved

All clinical areas should meet relevant cleaning and infection control standards. (2.48, repeated recommendation 2.79)

Achieved

Prisoners should have adequate time to attend health care appointments, including receiving their medication without having to choose between this and other necessary activities. (2.56, repeated recommendation 2.92)

Achieved

External hospital appointments should not be cancelled and custody escort arrangements should be adequate and effective to meet the health care needs of the prison population. (2.57, repeated recommendation 2.95)

Achieved

Prisoners should have access to targeted medicines use reviews and there should be a wider range of patient group directions. (2.67, repeated recommendation 2.105)

Achieved

Medicines should be stored appropriately, including secure in-cell storage for prisoners, administered at required times and intervals, and with adequate supervision to ensure confidentiality and prevent diversion. (2.68)

Not achieved

The transfer of patients to hospital under the Mental Health Act should occur within agreed Department of Health timescales. (2.78, repeated recommendation 2.115)

Not achieved

All prisoners with social care and continuing care needs should be identified, referred and assessed, and receive the required support promptly, within a robust governance framework. (2.81)

Achieved

There should be enough food for all prisoners and it should be served hygienically. (2.86)

Achieved

Purposeful activity

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

*At the last inspection, in 2017, considerable effort had gone into stabilising the regime. However, for a large number of prisoners, the amount of time out of cell was still inadequate and many were locked in cell during the working day. The leadership and management of learning and skills had improved and the number of activity places had increased. More prisoners were engaged in activities than at the time of the previous inspection, but still too many were not encouraged into activities, and attendance and punctuality were not good enough. The quality of much that was offered, and prisoners' achievements, were good, although our partners in Ofsted judged overall effectiveness of provision as 'requires improvement' in their assessment. Access to the library and gym was poor. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

Main recommendation

Maximum use should be made of the available activity places. Staff should actively encourage prisoners to attend, and the regime should ensure that men can do so consistently and punctually. (S49)

Not achieved

Recommendations

Managers should collect and evaluate a wider range of data, to ensure that all prisoners' identified needs are met, including the provision of accredited qualifications. (3.9)

Partially achieved

The collection and use of initial assessment results should be improved, to ensure that all prisoners are given appropriate, timely support. (3.20)

Achieved

Prisoners' skills development in all non-accredited learning should be recorded. (3.21)

Partially achieved

There should be more support for prisoners to develop their English and mathematics skills. (3.25)

Achieved

All prisoners should have weekly access to the library. (3.34)

Not achieved

Prisoners should have reliable weekly access to PE. (3.39)

Not achieved

Resettlement

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

*At the last inspection, in 2017, resettlement provision was not meeting prisoners' needs. Offender management work was very poor, and prisoners were not adequately supported in understanding and reducing their risk of harm to others. There were some serious deficiencies in public protection work. Much release preparation work was not effective, and there were some particularly poor outcomes in releasing prisoners to sustainable accommodation. The social visits experience was poor, but some good work was being done more broadly to support contact with children and families. **Outcomes for prisoners were poor against this healthy prison test.***

Main recommendations

Managers should implement offender management arrangements which ensure that prisoners have an up-to-date and adequate assessment of their risks and needs, a sentence plan and ongoing support to achieve their sentence plan objectives. (S50)

Not achieved

Prison and probation managers should urgently review their public protection arrangements and ensure that robust multi-agency arrangements to identify and manage risk are implemented correctly and consistently. (S51)

Partially achieved

All prisoners within 12 weeks of release should have a realistic resettlement plan which ensures that they receive the support they require and which is shared with offender managers. (S52)

Achieved

Recommendations

Prisoners should have adequate support to apply for jobs and access education and training on release. (4.26)

Achieved

Before release, prisoners with substance misuse issues should be able to access training on overdose management, including the use of naloxone. (4.29)

Achieved

Visits should always start on time. (4.38)

Not achieved

Appendix III: Care Quality Commission Requirement Notice



Requirement Notices

Provider: Care UK Health & Rehabilitation Services Limited

Location: HMP Wormwood Scrubs

Location ID: 1-3862840460

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

Action we have told the provider to take

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

Regulation 12 (1): Safe care and treatment

Care and treatment must be provided in a safe way for service users.

How the regulation was not being met:

The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:

Completion rates for secondary, comprehensive health assessments were poor, averaging 38% from April to June 2019. This posed a risk that patients' immediate health needs may not be identified or addressed.

There was no systematic management for prisoners with long-term health conditions such as epilepsy and hypertension. The care pathway for these patients was unclear and care and treatment was not well coordinated.

- Few patients with long-term health conditions had personalised care plans in place to inform their on-going care. Of 12 clinical records we reviewed for patients with a diagnosed long-term health condition, only three had a care plan in place.
- There were no regular nurse-led appointments or clinics to review and manage long-term health conditions.

- The systems in place to manage long-term health conditions were not effective. Registers and waiting lists of patients with long-term health conditions were not up to date and did not reflect the current patient population.

Incidents reported via the Datix electronic recording system were not routinely investigated within agreed timeframes.

- Over 50% of Datix investigations opened between June and September 2019 were not yet concluded at the time of our inspection. This limited opportunities to learn from incidents and reduce risks to the health and safety of service users.

Appendix IV: Prison population profile

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

Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced	16	473	47.5
Recall	1	129	12.6
Convicted unsentenced	17	102	11.6
Remand	35	229	25.6
Civil prisoners	0	2	0.2
Detainees	0	18	1.7
Other/unknown		6	0.8
Total	69	961	100

Sentence	18–20 yr olds	21 and over	%
Unsentenced	52	361	40.1
Less than 6 months	2	65	6.5
6 months to less than 12 months	3	48	5.0
12 months to less than 2 years	1	77	7.6
2 years to less than 4 years	1	121	11.8
4 years to less than 10 years	7	166	16.8
10 years and over (not life)	2	86	8.5
ISPP	1	16	3.7
Life	0	21	2.0
Total	69	961	100

Age	Number of prisoners	%
Under 21 years	69	6.7
21 years to 29 years	338	32.8
30 years to 39 years	313	30.4
40 years to 49 years	175	17.0
50 years to 59 years	101	9.8
60 years to 69 years	28	2.7
70 plus years: maximum age= 81	6	0.6
Total	1,030	100

Nationality	18–20 yr olds	21 and over	%
British	50	700	72.8
Foreign nationals	17	245	25.4
Not stated	2	16	1.7
Total	69	961	100

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced	46	426	45.8
Uncategorised sentenced	6	56	6.0
Cat B	0	90	8.7
Cat C	0	380	36.9
Cat D	0	7	0.7
YOI closed	17	2	1.8
Total	69	961	100

Ethnicity	18–20 yr olds	21 and over	%
White			
British	6	230	22.9
Irish	0	13	1.3
Other white	7	137	13.9
Mixed			
White and Black Caribbean	6	21	2.6
White and Black African	1	8	0.9
White and Asian	1	6	0.7
Other mixed	0	11	1.1
Asian or Asian British			
Indian	4	49	5.1
Pakistani	1	26	2.6
Bangladeshi	0	7	0.7
Other Asian	5	63	6.6
Black or Black British			
Caribbean	12	138	14.6
African	14	145	15.4
Other Black	4	70	7.2
Chinese or other ethnic group			
Chinese	1	2	0.3
Arab	2	6	0.8
Other ethnic group	2	19	2.0
Not stated	3	10	1.3
Total	69	961	100

Religion	18–20 yr olds	21 and over	%
Church of England	4	103	10.4
Roman Catholic	3	180	17.8
Other Christian denominations	18	149	16.2
Muslim	29	294	31.4
Sikh	1	26	2.6
Hindu	1	20	2.0
Buddhist	3	13	1.6
Jewish	0	12	1.2
Other	0	18	1.7
No religion	8	136	14.0
Not stated	2	10	1.2
Total	69	961	100

Other demographics	18–20 yr olds	21 and over	%
Gypsy/Romany/ traveller	1	17	1.7
Total	1	17	1.7

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	4	0.4	130	12.6
1 month to 3 months	7	0.7	143	13.9
3 months to 6 months	4	0.4	107	10.4
6 months to 1 year	2	0.2	122	11.8
1 year to 2 years	0	0	75	7.3
2 years to 4 years	0	0	21	2.0
4 years or more	0	0	1	0.1
Other	0	0	1	0.1
Total	17	1.7	600	58.3

Unsentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	12	2.9	120	29.1
1 month to 3 months	18	4.4	109	26.4
3 months to 6 months	16	3.9	82	19.9
6 months to 1 year	6	1.5	43	10.4
1 year to 2 years	0	0	6	1.5
2 years to 4 years	0	0	1	0.2
Total	52	5.0	361	35.0

Appendix V: Prisoner survey methodology and results

Prisoner survey methodology

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

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

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

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

Sampling

On the day of the survey a stratified random sample is drawn by HMI Prisons researchers from a P-NOMIS prisoner population printout ordered by cell location. Using a robust statistical formula HMI Prisons researchers calculate the minimum sample size required to ensure that the survey findings can be generalised to the entire population of the establishment.²⁸ In smaller establishments we may offer a questionnaire to the entire population.

Distributing and collecting questionnaires

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

Survey response

At the time of the survey on 16 September 2019 the prisoner population at HMP Wormwood Scrubs was 1,030. Using the sampling method described above, questionnaires were distributed to 229 prisoners. We received a total of 183 completed questionnaires, a response rate of 80%. This included two questionnaires completed via face-to-face interviews. Thirteen prisoners declined to participate in the survey and 33 questionnaires were either not returned at all, or returned blank.

²⁷ Qualitative analysis of these written comments is undertaken by HMI Prisons researchers and used by inspectors.

²⁸ 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments).

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

Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for HMP Wormwood Scrubs. For the comparator analyses, each question was reformulated into a binary ‘yes/no’ format and affirmative responses compared.³⁰ Missing responses have been excluded from all analyses.

Full survey results

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

Responses from HMP Wormwood Scrubs 2019 compared with those from other HMI Prisons surveys³¹

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

Comparisons between self-reported sub-populations of prisoners within HMP Wormwood Scrubs 2019³²

- Responses of prisoners from black or minority ethnic groups compared with those of white prisoners.
- Responses of foreign national prisoners compared with those of UK/British nationals.
- Responses of Muslim prisoners compared with those of non-Muslim prisoners.
- Responses of prisoners who reported that they had a disability compared to those who did not.
- Responses of prisoners who reported that they had mental health problems compared with those who did not.
- Responses of prisoners aged 50 and over compared with those under 50.
- Responses of prisoners aged 25 and under compared with those over 25.

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

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

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

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

³¹ 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.

³² These analyses are carried out on summary data from selected survey questions only.

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

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

Survey summary

Background information

I.1	What wing or house block are you currently living on?	
	A wing	35 (19%)
	B wing	46 (25%)
	C wing	43 (23%)
	D wing	29 (16%)
	E wing	23 (13%)
	First night centre	3 (2%)
	Segregation unit	1 (1%)
	Health care unit	3 (2%)
I.2	How old are you?	
	Under 21	12 (7%)
	21 - 25	23 (13%)
	26 - 29	26 (15%)
	30 - 39	58 (33%)
	40 - 49	31 (17%)
	50 - 59	26 (15%)
	60 - 69	1 (1%)
	70 or over	1 (1%)
I.3	What is your ethnic group?	
	White - English/ Welsh/ Scottish/ Northern Irish/ British	40 (23%)
	White - Irish	6 (3%)
	White - Gypsy or Irish Traveller	3 (2%)
	White - any other White background	18 (10%)
	Mixed - White and Black Caribbean	9 (5%)
	Mixed - White and Black African	2 (1%)
	Mixed - White and Asian	2 (1%)
	Mixed - any other mixed ethnic background	2 (1%)
	Asian/ Asian British - Indian	7 (4%)
	Asian/ Asian British - Pakistani	2 (1%)
	Asian/ Asian British - Bangladeshi	2 (1%)
	Asian/ Asian British - Chinese	3 (2%)
	Asian - any other Asian Background	6 (3%)
	Black/ Black British - Caribbean	29 (17%)
	Black/ Black British - African	24 (14%)
	Black - any other Black/ African/ Caribbean background	11 (6%)
	Arab	3 (2%)
	Any other ethnic group	3 (2%)
I.4	How long have you been in this prison?	
	Less than 6 months	105 (60%)
	6 months or more	69 (40%)
I.5	Are you currently serving a sentence?	
	Yes	80 (46%)
	Yes - on recall	26 (15%)
	No - on remand or awaiting sentence	63 (36%)
	No - immigration detainee	4 (2%)

1.6	How long is your sentence?	
	Less than 6 months	28 (16%)
	6 months to less than 1 year	17 (10%)
	1 year to less than 4 years	17 (10%)
	4 years to less than 10 years	22 (13%)
	10 years or more	17 (10%)
	IPP (indeterminate sentence for public protection)	5 (3%)
	Life	1 (1%)
	Not currently serving a sentence	67 (39%)

Arrival and reception

2.1	Were you given up-to-date information about this prison before you came here?	
	Yes	30 (17%)
	No	137 (77%)
	Don't remember	10 (6%)
2.2	When you arrived at this prison, how long did you spend in reception?	
	Less than 2 hours	30 (17%)
	2 hours or more	135 (76%)
	Don't remember	12 (7%)
2.3	When you were searched in reception, was this done in a respectful way?	
	Yes	124 (70%)
	No	46 (26%)
	Don't remember	7 (4%)
2.4	Overall, how were you treated in reception?	
	Very well	31 (18%)
	Quite well	96 (54%)
	Quite badly	31 (18%)
	Very badly	14 (8%)
	Don't remember	5 (3%)
2.5	When you first arrived here, did you have any of the following problems?	
	Problems getting phone numbers	81 (45%)
	Contacting family	79 (44%)
	Arranging care for children or other dependants	16 (9%)
	Contacting employers	15 (8%)
	Money worries	52 (29%)
	Housing worries	44 (25%)
	Feeling depressed	75 (42%)
	Feeling suicidal	25 (14%)
	Other mental health problems	35 (20%)
	Physical health problems	27 (15%)
	Drug or alcohol problems (e.g. withdrawal)	35 (20%)
	Problems getting medication	46 (26%)
	Needing protection from other prisoners	21 (12%)
	Lost or delayed property	41 (23%)
	Other problems	28 (16%)
	Did not have any problems	21 (12%)
2.6	Did staff help you to deal with these problems when you first arrived?	
	Yes	41 (24%)
	No	107 (63%)
	Did not have any problems when I first arrived	21 (12%)

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	124 (70%)
Toiletries / other basic items	113 (64%)
A shower	62 (35%)
A free phone call	120 (68%)
Something to eat	137 (78%)
The chance to see someone from health care	111 (63%)
The chance to talk to a Listener or Samaritans	32 (18%)
Support from another prisoner (e.g. Insider or buddy)	23 (13%)
Wasn't offered any of these things	11 (6%)

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

Very clean	11 (6%)
Quite clean	49 (28%)
Quite dirty	39 (22%)
Very dirty	74 (42%)
Don't remember	4 (2%)

3.3 Did you feel safe on your first night here?

Yes	92 (52%)
No	80 (45%)
Don't remember	5 (3%)

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

	Yes	No	Don't remember
Access to the prison shop / canteen?	37 (22%)	124 (74%)	7 (4%)
Free PIN phone credit?	96 (55%)	72 (42%)	5 (3%)
Numbers put on your PIN phone?	66 (40%)	92 (56%)	7 (4%)

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

Yes	49 (28%)
No	75 (43%)
Have not had an induction	52 (30%)

On the wing

4.1 Are you in a cell on your own?

Yes	69 (39%)
No, I'm in a shared cell or dormitory	109 (61%)

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

Yes	27 (15%)
No	137 (77%)
Don't know	12 (7%)
Don't have a cell call bell	2 (1%)

4.3 Please answer the following questions about the wing or house block you are currently living on:	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	85 (49%)	81 (47%)	6 (3%)
Can you shower every day?	113 (65%)	58 (33%)	3 (2%)
Do you have clean sheets every week?	90 (52%)	73 (42%)	10 (6%)
Do you get cell cleaning materials every week?	75 (45%)	91 (54%)	1 (1%)
Is it normally quiet enough for you to relax or sleep at night?	86 (51%)	75 (45%)	6 (4%)
Can you get your stored property if you need it?	40 (24%)	95 (57%)	32 (19%)

4.4 Normally, how clean or dirty are the communal / shared areas of your wing or house block (landings, stairs, wing showers etc.)?	
Very clean	21 (12%)
Quite clean	68 (40%)
Quite dirty	52 (30%)
Very dirty	30 (18%)

Food and canteen

5.1 What is the quality of food like in this prison?	
Very good	4 (2%)
Quite good	34 (19%)
Quite bad	62 (35%)
Very bad	77 (44%)
5.2 Do you get enough to eat at mealtimes?	
Always	16 (9%)
Most of the time	31 (18%)
Some of the time	64 (37%)
Never	64 (37%)
5.3 Does the shop / canteen sell the things that you need?	
Yes	103 (59%)
No	57 (33%)
Don't know	15 (9%)

Relationships with staff

6.1 Do most staff here treat you with respect?	
Yes	112 (64%)
No	62 (36%)
6.2 Are there any staff here you could turn to if you had a problem?	
Yes	115 (68%)
No	55 (32%)
6.3 In the last week, has any member of staff talked to you about how you are getting on?	
Yes	44 (25%)
No	132 (75%)

6.4	How helpful is your personal or named officer?	
	Very helpful	23 (13%)
	Quite helpful	20 (11%)
	Not very helpful	12 (7%)
	Not at all helpful	13 (7%)
	Don't know	8 (5%)
	Don't have a personal / named officer	99 (57%)
6.5	How often do you see prison governors, directors or senior managers talking to prisoners?	
	Regularly	28 (16%)
	Sometimes	45 (26%)
	Hardly ever	90 (51%)
	Don't know	13 (7%)
6.6	Do you feel that you are treated as an individual in this prison?	
	Yes	68 (40%)
	No	100 (60%)
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	
	Yes, and things sometimes change	25 (14%)
	Yes, but things don't change	50 (29%)
	No	69 (40%)
	Don't know	29 (17%)

Faith

7.1	What is your religion?	
	No religion	21 (12%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	82 (48%)
	Buddhist	3 (2%)
	Hindu	4 (2%)
	Jewish	2 (1%)
	Muslim	43 (25%)
	Sikh	8 (5%)
	Other	7 (4%)
7.2	Are your religious beliefs respected here?	
	Yes	104 (62%)
	No	23 (14%)
	Don't know	20 (12%)
	Not applicable (no religion)	21 (13%)
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	
	Yes	92 (54%)
	No	26 (15%)
	Don't know	32 (19%)
	Not applicable (no religion)	21 (12%)
7.4	Are you able to attend religious services, if you want to?	
	Yes	134 (77%)
	No	13 (8%)
	Don't know	5 (3%)
	Not applicable (no religion)	21 (12%)

Contact with family and friends

8.1	Have staff here encouraged you to keep in touch with your family / friends?	
	Yes	41 (24%)
	No	133 (76%)
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	98 (56%)
	No	76 (44%)
8.3	Are you able to use a phone every day (if you have credit)?	
	Yes	144 (81%)
	No	33 (19%)
8.4	How easy or difficult is it for your family and friends to get here?	
	Very easy	28 (16%)
	Quite easy	62 (36%)
	Quite difficult	31 (18%)
	Very difficult	35 (20%)
	Don't know	17 (10%)
8.5	How often do you have visits from family or friends?	
	More than once a week	13 (8%)
	About once a week	40 (24%)
	Less than once a week	55 (33%)
	Not applicable (don't get visits)	61 (36%)
8.6	Do visits usually start and finish on time?	
	Yes	37 (34%)
	No	71 (66%)
8.7	Are your visitors usually treated respectfully by staff?	
	Yes	70 (66%)
	No	36 (34%)

Time out of cell

9.1	Do you know what the unlock and lock-up times are supposed to be here (or roll check times if you are in an open prison)?	
	Yes, and these times are usually kept to	58 (34%)
	Yes, but these times are not usually kept to	73 (43%)
	No	39 (23%)
9.2	How long do you usually spend out of your cell on a typical weekday (including time spent at education, work etc.)?	
	Less than 2 hours	70 (42%)
	2 to 6 hours	62 (37%)
	6 to 10 hours	22 (13%)
	10 hours or more	6 (4%)
	Don't know	7 (4%)

9.3	How long do you usually spend out of your cell on a typical Saturday or Sunday?	
	Less than 2 hours	126 (75%)
	2 to 6 hours	29 (17%)
	6 to 10 hours	7 (4%)
	10 hours or more	3 (2%)
	Don't know	4 (2%)
9.4	How many days in a typical week do you have time to do domestics (shower, clean cell, use the wing phones etc.)?	
	None	21 (12%)
	1 or 2	36 (21%)
	3 to 5	37 (22%)
	More than 5	58 (34%)
	Don't know	17 (10%)
9.5	How many days in a typical week do you get association, if you want it?	
	None	16 (9%)
	1 or 2	15 (9%)
	3 to 5	44 (26%)
	More than 5	84 (50%)
	Don't know	10 (6%)
9.6	How many days in a typical week could you go outside for exercise, if you wanted to?	
	None	16 (9%)
	1 or 2	33 (19%)
	3 to 5	59 (34%)
	More than 5	58 (34%)
	Don't know	7 (4%)
9.7	Typically, how often do you go to the gym?	
	Twice a week or more	29 (17%)
	About once a week	36 (21%)
	Less than once a week	15 (9%)
	Never	91 (53%)
9.8	Typically, how often do you go to the library?	
	Twice a week or more	22 (13%)
	About once a week	39 (23%)
	Less than once a week	25 (14%)
	Never	87 (50%)
9.9	Does the library have a wide enough range of materials to meet your needs?	
	Yes	50 (29%)
	No	33 (19%)
	Don't use the library	87 (51%)

Applications, complaints and legal rights

10.1	Is it easy for you to make an application?	
	Yes	129 (74%)
	No	37 (21%)
	Don't know	8 (5%)

I0.2	If you have made any applications here, please answer the questions below:	Yes	No	Not made any applications
	Are applications usually dealt with fairly?	75 (48%)	75 (48%)	7 (4%)
	Are applications usually dealt with within 7 days?	50 (33%)	96 (63%)	7 (5%)

I0.3	Is it easy for you to make a complaint?			
	Yes			92 (53%)
	No			48 (28%)
	Don't know			34 (20%)

I0.4	If you have made any complaints here, please answer the questions below:	Yes	No	Not made any complaints
	Are complaints usually dealt with fairly?	26 (17%)	71 (47%)	54 (36%)
	Are complaints usually dealt with within 7 days?	19 (13%)	77 (51%)	54 (36%)

I0.5	Have you ever been prevented from making a complaint here when you wanted to?			
	Yes			39 (24%)
	No			81 (50%)
	Not wanted to make a complaint			41 (25%)

I0.6	In this prison, is it easy or difficult for you to...	Easy	Difficult	Don't know	Don't need this
	Communicate with your solicitor or legal representative?	71 (43%)	50 (30%)	30 (18%)	16 (10%)
	Attend legal visits?	87 (54%)	29 (18%)	29 (18%)	16 (10%)
	Get bail information?	29 (18%)	55 (35%)	48 (30%)	26 (16%)

I0.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?			
	Yes			73 (45%)
	No			61 (38%)
	Not had any legal letters			28 (17%)

Health care

I1.1	How easy or difficult is it to see the following people?	Very easy	Quite easy	Quite difficult	Very difficult	Don't know
	Doctor	7 (4%)	34 (20%)	57 (33%)	64 (37%)	10 (6%)
	Nurse	25 (15%)	59 (35%)	40 (24%)	33 (20%)	12 (7%)
	Dentist	4 (2%)	17 (10%)	40 (24%)	84 (49%)	25 (15%)
	Mental health workers	5 (3%)	19 (12%)	33 (20%)	48 (29%)	60 (36%)

I1.2	What do you think of the quality of the health service from the following people?	Very good	Quite good	Quite bad	Very bad	Don't know
	Doctor	17 (10%)	52 (31%)	36 (21%)	34 (20%)	30 (18%)
	Nurse	17 (10%)	60 (36%)	37 (22%)	33 (20%)	19 (11%)
	Dentist	12 (7%)	36 (22%)	26 (16%)	31 (19%)	58 (36%)
	Mental health workers	9 (6%)	23 (14%)	20 (12%)	30 (19%)	79 (49%)

11.3	Do you have any mental health problems?	
	Yes	75 (44%)
	No	95 (56%)
11.4	Have you been helped with your mental health problems in this prison?	
	Yes	21 (12%)
	No	55 (32%)
	Don't have any mental health problems	95 (56%)
11.5	What do you think of the overall quality of the health services here?	
	Very good	8 (5%)
	Quite good	48 (29%)
	Quite bad	43 (26%)
	Very bad	45 (27%)
	Don't know	23 (14%)

Other support needs

12.1	Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?	
	Yes	65 (38%)
	No	108 (62%)
12.2	If you have a disability, are you getting the support you need?	
	Yes	7 (4%)
	No	43 (27%)
	Don't have a disability	108 (68%)
12.3	Have you been on an ACCT in this prison?	
	Yes	22 (14%)
	No	140 (86%)
12.4	If you have been on an ACCT in this prison, did you feel cared for by staff?	
	Yes	6 (4%)
	No	17 (10%)
	Have not been on an ACCT in this prison	140 (86%)
12.5	How easy or difficult is it for you to speak to a Listener, if you need to?	
	Very easy	35 (21%)
	Quite easy	41 (25%)
	Quite difficult	16 (10%)
	Very difficult	10 (6%)
	Don't know	59 (36%)
	No Listeners at this prison	4 (2%)

Alcohol and drugs

13.1	Did you have an alcohol problem when you came into this prison?	
	Yes	38 (22%)
	No	135 (78%)
13.2	Have you been helped with your alcohol problem in this prison?	
	Yes	19 (11%)
	No	17 (10%)
	Did not / do not have an alcohol problem	135 (79%)

13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	51 (30%)
	No	119 (70%)
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	21 (12%)
	No	148 (88%)
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	16 (9%)
	No	154 (91%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	28 (17%)
	No	24 (15%)
	Did not / do not have a drug problem	111 (68%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy	52 (32%)
	Quite easy	18 (11%)
	Quite difficult	5 (3%)
	Very difficult	9 (5%)
	Don't know	80 (49%)
13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy	25 (15%)
	Quite easy	23 (14%)
	Quite difficult	10 (6%)
	Very difficult	14 (9%)
	Don't know	91 (56%)

Safety

14.1	Have you ever felt unsafe here?	
	Yes	113 (65%)
	No	60 (35%)
14.2	Do you feel unsafe now?	
	Yes	60 (36%)
	No	106 (64%)
14.3	Have you experienced any of the following types of bullying / victimisation from other prisoners here? (Please tick all that apply.)	
	Verbal abuse	56 (35%)
	Threats or intimidation	46 (29%)
	Physical assault	26 (16%)
	Sexual assault	1 (1%)
	Theft of canteen or property	43 (27%)
	Other bullying / victimisation	22 (14%)
	Not experienced any of these from prisoners here	82 (52%)

14.4	If you were being bullied / victimised by other prisoners here, would you report it?	
	Yes	60 (37%)
	No	101 (63%)
14.5	Have you experienced any of the following types of bullying / victimisation from staff here?	
	<i>(Please tick all that apply.)</i>	
	Verbal abuse	64 (40%)
	Threats or intimidation	41 (25%)
	Physical assault	22 (14%)
	Sexual assault	1 (1%)
	Theft of canteen or property	16 (10%)
	Other bullying / victimisation	24 (15%)
	Not experienced any of these from staff here	84 (52%)
14.6	If you were being bullied / victimised by staff here, would you report it?	
	Yes	82 (50%)
	No	81 (50%)
Behaviour management		
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	
	Yes	68 (42%)
	No	62 (38%)
	Don't know what the incentives / rewards are	33 (20%)
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	
	Yes	54 (33%)
	No	63 (38%)
	Don't know	24 (15%)
	Don't know what this is	23 (14%)
15.3	Have you been physically restrained by staff in this prison in the last 6 months?	
	Yes	22 (13%)
	No	143 (87%)
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	4 (2%)
	No	16 (10%)
	Don't remember	1 (1%)
	Not been restrained here in last 6 months	143 (87%)
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	
	Yes	18 (11%)
	No	145 (89%)

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?	11 (69%)	5 (31%)
Could you shower every day?	13 (81%)	3 (19%)
Could you go outside for exercise every day?	14 (88%)	2 (13%)
Could you use the phone every day (if you had credit)?	13 (81%)	3 (19%)

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	72 (46%)	33 (21%)	47 (30%)	4 (3%)
Vocational or skills training	41 (27%)	42 (28%)	64 (42%)	4 (3%)
Prison job	56 (35%)	77 (48%)	25 (16%)	3 (2%)
Voluntary work outside of the prison	7 (5%)	46 (30%)	64 (42%)	36 (24%)
Paid work outside of the prison	6 (4%)	43 (28%)	68 (44%)	36 (24%)

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	63 (43%)	36 (24%)	49 (33%)
Vocational or skills training	46 (33%)	31 (22%)	62 (45%)
Prison job	43 (30%)	63 (43%)	39 (27%)
Voluntary work outside of the prison	18 (13%)	27 (20%)	90 (67%)
Paid work outside of the prison	19 (14%)	23 (17%)	92 (69%)

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

Yes	46 (30%)
No	92 (60%)
Not applicable (e.g. if you are retired, sick or on remand)	16 (10%)

Planning and progression

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

Yes	44 (28%)
No	116 (73%)

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

Yes	34 (77%)
No	7 (16%)
Don't know what my objectives or targets are	3 (7%)

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

Yes	16 (37%)
No	24 (56%)
Don't know what my objectives or targets are	3 (7%)

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	13 (33%)	5 (13%)	21 (54%)
Other programmes	14 (36%)	5 (13%)	20 (51%)
One to one work	10 (26%)	9 (23%)	20 (51%)
Being on a specialist unit	1 (3%)	8 (21%)	29 (76%)
ROTL - day or overnight release	0 (0%)	7 (19%)	30 (81%)

Preparation for release

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

Yes	64 (39%)
No	62 (38%)
Don't know	37 (23%)

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

Very near	10 (16%)
Quite near	27 (43%)
Quite far	12 (19%)
Very far	14 (22%)

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

Yes	29 (45%)
No	35 (55%)

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	14 (22%)	26 (41%)	23 (37%)
Getting employment	12 (20%)	29 (48%)	20 (33%)
Setting up education or training	9 (16%)	18 (33%)	28 (51%)
Arranging benefits	12 (20%)	25 (42%)	22 (37%)
Sorting out finances	10 (17%)	24 (41%)	24 (41%)
Support for drug or alcohol problems	15 (25%)	10 (17%)	35 (58%)
Health / mental health support	8 (15%)	19 (35%)	28 (51%)
Social care support	4 (7%)	13 (24%)	37 (69%)
Getting back in touch with family or friends	7 (12%)	18 (32%)	32 (56%)

More about you

19.1 Do you have children under the age of 18?

Yes	77 (47%)
No	88 (53%)

19.2 Are you a UK / British citizen?

Yes	132 (80%)
No	33 (20%)

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

Yes	8 (5%)
No	152 (95%)

19.4	Have you ever been in the armed services (e.g. army, navy, air force)?	
	Yes	9 (6%)
	No	154 (94%)
19.5	What is your gender?	
	Male	161 (98%)
	Female	0 (0%)
	Non-binary	1 (1%)
	Other	2 (1%)
19.6	How would you describe your sexual orientation?	
	Straight / heterosexual	157 (98%)
	Gay / lesbian / homosexual	1 (1%)
	Bisexual	0 (0%)
	Other	3 (2%)
19.7	Do you identify as transgender or transsexual?	
	Yes	5 (3%)
	No	151 (97%)

Final questions about this prison

20.1	Do you think your experiences in this prison have made you more or less likely to offend in the future?	
	More likely to offend	20 (13%)
	Less likely to offend	72 (46%)
	Made no difference	64 (41%)

HMP Wormwood Scrubs 2019

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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

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

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

Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
105	67	43	127

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	23%	12%	28%	18%
	Are you 50 years of age or older?	17%	14%	9%	18%
1.3	Are you from a minority ethnic group?			95%	49%
7.1	Are you Muslim?	40%	3%		
11.3	Do you have any mental health problems?	44%	43%	46%	44%
12.1	Do you consider yourself to have a disability?	40%	34%	38%	37%
19.2	Are you a foreign national?	16%	27%	23%	18%
19.3	Are you from a Traveller community? (e.g. Gypsy, Roma, Irish Traveller)	2%	10%	0%	6%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	69%	73%	70%	72%
2.4	Overall, were you treated very / quite well in reception?	73%	74%	67%	74%
2.5	When you first arrived, did you have any problems?	87%	91%	86%	88%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	23%	35%	22%	31%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	49%	57%	40%	57%
3.5	Have you had an induction at this prison?	69%	71%	69%	73%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	39%	37%	31%	42%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	18%	11%	16%	14%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	51%	48%	50%	49%
	- Can you shower every day?	57%	77%	57%	68%
	- Do you have clean sheets every week?	46%	60%	46%	55%
	- Do you get cell cleaning materials every week?	40%	52%	35%	48%
	- Is it normally quiet enough for you to relax or sleep at night?	51%	49%	51%	52%
	- Can you get your stored property if you need it?	22%	30%	24%	25%

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

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

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

Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
105	67	43	127

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	27%	24%	24%	30%
5.3	Does the shop / canteen sell the things that you need?	53%	68%	49%	63%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	61%	71%	54%	70%
6.2	Are there any staff here you could turn to if you had a problem?	61%	76%	60%	74%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	19%	35%	19%	27%
6.6	Do you feel that you are treated as an individual in this prison?	37%	45%	44%	41%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	67%	80%	70%	71%
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	57%	74%	67%	59%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	18%	31%	24%	24%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	55%	57%	61%	54%
8.3	Are you able to use a phone every day (if you have credit)?	75%	89%	77%	85%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	61%	74%	73%	63%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	45%	37%	50%	38%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	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?	54%	66%	72%	60%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	70%	76%	78%	75%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	48%	52%	55%	50%
10.3	Is it easy for you to make a complaint?	53%	54%	49%	54%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	32%	19%	27%	29%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	33%	33%	32%	28%

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

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

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

Number of completed questionnaires returned

	Black and minority ethnic	White	Muslim	Non-Muslim
	105	67	43	127

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	26%	23%	33%	22%
	- Nurse?	50%	54%	55%	48%
	- Dentist?	13%	12%	17%	12%
	- Mental health workers?	13%	17%	18%	14%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	21%	35%	25%	28%
11.5	Do you think the overall quality of the health services here is very / quite good?	32%	39%	38%	34%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	19%	5%	0%	19%
SAFETY					
14.1	Have you ever felt unsafe here?	67%	62%	74%	60%
14.2	Do you feel unsafe now?	38%	33%	45%	33%
14.3	Not experienced bullying / victimisation by other prisoners	52%	53%	50%	53%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	40%	34%	40%	37%
14.5	Not experienced bullying / victimisation by members of staff	48%	59%	42%	59%
14.6	If you were being bullied / victimised by staff here, would you report it?	49%	53%	46%	51%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	42%	39%	36%	43%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	34%	37%	28%	35%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	15%	9%	18%	12%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	11%	12%	16%	9%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	27%	44%	26%	38%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	27%	28%	24%	29%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	41%	39%	44%	34%
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?	30%	59%	24%	51%
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?	42%	55%	40%	48%

HMP Wormwood Scrubs 2019

Comparison of survey responses between sub-populations of prisoners

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

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

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

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

Number of completed questionnaires returned

Foreign national	UK / British national
33	132

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 25 years of age?	6%	19%
	Are you 50 years of age or older?	13%	17%
1.3	Are you from a minority ethnic group?	44%	61%
7.1	Are you Muslim?	30%	24%
11.3	Do you have any mental health problems?	31%	47%
12.1	Do you consider yourself to have a disability?	34%	38%
19.2	Are you a foreign national?		
19.3	Are you from a Traveller community? (e.g. Gypsy, Roma, Irish Traveller)	7%	5%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	69%	72%
2.4	Overall, were you treated very / quite well in reception?	70%	71%
2.5	When you first arrived, did you have any problems?	79%	91%
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	30%	26%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	47%	52%
3.5	Have you had an induction at this prison?	67%	74%
<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	36%	40%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	25%	14%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	53%	49%
	- Can you shower every day?	75%	65%
	- Do you have clean sheets every week?	50%	54%
	- Do you get cell cleaning materials every week?	50%	45%
	- Is it normally quiet enough for you to relax or sleep at night?	53%	52%
	- Can you get your stored property if you need it?	42%	21%

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

Foreign national	UK / British national
33	132

Number of completed questionnaires returned

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	36%	26%
5.3	Does the shop / canteen sell the things that you need?	61%	61%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	61%	67%
6.2	Are there any staff here you could turn to if you had a problem?	69%	68%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	38%	23%
6.6	Do you feel that you are treated as an individual in this prison?	53%	38%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	71%	72%
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	74%	62%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	36%	21%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	38%	61%
8.3	Are you able to use a phone every day (if you have credit)?	84%	80%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	81%	63%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	36%	42%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	3%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	54%	65%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	79%	73%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	54%	50%
10.3	Is it easy for you to make a complaint?	46%	58%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	17%	31%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	32%	31%

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

Foreign national	UK / British national
33	132

Number of completed questionnaires returned

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	23%	24%
	- Nurse?	45%	52%
	- Dentist?	16%	12%
	- Mental health workers?	13%	15%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	40%	26%
11.5	Do you think the overall quality of the health services here is very / quite good?	34%	33%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	13%	13%
SAFETY			
14.1	Have you ever felt unsafe here?	67%	65%
14.2	Do you feel unsafe now?	46%	34%
14.3	Not experienced bullying / victimisation by other prisoners	69%	46%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	53%	33%
14.5	Not experienced bullying / victimisation by members of staff	56%	51%
14.6	If you were being bullied / victimised by staff here, would you report it?	69%	44%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	42%	40%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	25%	35%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	16%	13%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	20%	9%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	42%	29%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	45%	22%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	36%	37%
PREPARATION FOR RELEASE			
<i>For those who expect to be released in the next 3 months:</i>			
18.3	Is anybody helping you to prepare for your release?	42%	45%
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?	36%	48%

HMP Wormwood Scrubs 2019

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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

Have a disability		Do not have a disability		
	65		108	
Mental health problems		No mental health problems		
	75		95	

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	15%	21%	16%	21%
	Are you 50 years of age or older?	21%	13%	18%	15%
1.3	Are you from a minority ethnic group?	64%	59%	61%	60%
7.1	Are you Muslim?	26%	25%	26%	24%
11.3	Do you have any mental health problems?	82%	22%		
12.1	Do you consider yourself to have a disability?			68%	12%
19.2	Are you a foreign national?	18%	21%	14%	24%
19.3	Are you from a Traveller community? (e.g. Gypsy, Roma, Irish Traveller)	9%	2%	9%	1%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	65%	76%	73%	69%
2.4	Overall, were you treated very / quite well in reception?	65%	75%	70%	71%
2.5	When you first arrived, did you have any problems?	92%	86%	93%	84%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	23%	32%	28%	29%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	46%	55%	52%	52%
3.5	Have you had an induction at this prison?	75%	68%	73%	69%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	38%	41%	38%	44%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	17%	14%	13%	16%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	43%	55%	47%	54%
	- Can you shower every day?	70%	64%	67%	66%
	- Do you have clean sheets every week?	57%	51%	61%	47%
	- Do you get cell cleaning materials every week?	46%	45%	48%	44%
	- Is it normally quiet enough for you to relax or sleep at night?	46%	56%	44%	59%
	- Can you get your stored property if you need it?	24%	25%	26%	24%

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

	Have a disability	Do not have a disability		
	65	108	Mental health problems	No mental health problems
			75	95

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	25%	30%	26%	30%
5.3	Does the shop / canteen sell the things that you need?	55%	64%	59%	61%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	56%	70%	64%	66%
6.2	Are there any staff here you could turn to if you had a problem?	65%	70%	71%	66%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	20%	27%	25%	24%
6.6	Do you feel that you are treated as an individual in this prison?	44%	39%	44%	37%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	62%	77%	70%	72%
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	54%	68%	67%	58%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	15%	29%	20%	27%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	65%	51%	58%	55%
8.3	Are you able to use a phone every day (if you have credit)?	80%	82%	77%	84%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	60%	72%	55%	71%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	51%	37%	47%	37%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	0%	5%	3%	3%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	50%	69%	65%	61%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	69%	78%	69%	80%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	44%	56%	53%	53%
10.3	Is it easy for you to make a complaint?	50%	57%	57%	54%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	22%	31%	26%	30%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	38%	30%	35%	31%

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

		Have a disability	Do not have a disability
		65	108
		Mental health problems	No mental health problems
		75	95

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	21%	26%	32%	18%
	- Nurse?	48%	51%	55%	47%
	- Dentist?	5%	17%	11%	14%
	- Mental health workers?	12%	17%	20%	11%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	19%	46%	29%	
11.5	Do you think the overall quality of the health services here is very / quite good?	36%	32%	39%	28%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	14%		15%	14%
SAFETY					
14.1	Have you ever felt unsafe here?	78%	57%	73%	58%
14.2	Do you feel unsafe now?	46%	30%	41%	32%
14.3	Not experienced bullying / victimisation by other prisoners	31%	63%	36%	62%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	33%	41%	37%	38%
14.5	Not experienced bullying / victimisation by members of staff	41%	58%	44%	57%
14.6	If you were being bullied / victimised by staff here, would you report it?	48%	53%	46%	55%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	43%	41%	52%	35%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	26%	37%	32%	35%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	16%	12%	18%	10%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	18%	7%	18%	6%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	29%	36%	32%	35%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	25%	29%	31%	24%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	40%	37%	48%	25%
PREPARATION FOR RELEASE					
<i>For those who expect to be released in the next 3 months:</i>					
18.3	Is anybody helping you to prepare for your release?	43%	48%	42%	47%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	38%	51%	46%	46%

HMP Wormwood Scrubs 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 Wormwood Scrubs 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 (27 prisons). Please note that this does not include all local prisons.
- Summary statistics from HMP Wormwood Scrubs in 2017. Please note that we do not have comparable data for the new questions introduced in September 2017.

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

	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

HMP Wormwood Scrubs 2019	All other local prisons surveyed since September 2017	HMP Wormwood Scrubs 2019	HMP Wormwood Scrubs 2017
183	4,638	183	185

n=number of valid responses to question (HMP Wormwood Scrubs 2019)

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION						
1.2	Are you under 21 years of age?	<i>n</i> =178	7%	6%	7%	6%
	Are you 25 years of age or younger?	<i>n</i> =178	20%	22%	20%	
	Are you 50 years of age or older?	<i>n</i> =178	16%	13%	16%	10%
	Are you 70 years of age or older?	<i>n</i> =178	1%	1%	1%	1%
1.3	Are you from a minority ethnic group?	<i>n</i> =172	61%	26%	61%	56%
1.4	Have you been in this prison for less than 6 months?	<i>n</i> =174	60%	61%	60%	
1.5	Are you currently serving a sentence?	<i>n</i> =173	61%	70%	61%	62%
	Are you on recall?	<i>n</i> =173	15%	14%	15%	9%
1.6	Is your sentence less than 12 months?	<i>n</i> =174	26%	21%	26%	22%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n</i> =174	3%	3%	3%	2%
7.1	Are you Muslim?	<i>n</i> =170	25%	14%	25%	21%
11.3	Do you have any mental health problems?	<i>n</i> =170	44%	52%	44%	
12.1	Do you consider yourself to have a disability?	<i>n</i> =173	38%	41%	38%	27%
19.1	Do you have any children under the age of 18?	<i>n</i> =165	47%	52%	47%	49%
19.2	Are you a foreign national?	<i>n</i> =165	20%	10%	20%	28%
19.3	Are you from a Traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n</i> =160	5%	7%	5%	4%
19.4	Have you ever been in the armed services?	<i>n</i> =163	6%	7%	6%	3%
19.5	Is your gender female or non-binary?	<i>n</i> =164	2%	1%	2%	
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n</i> =161	3%	4%	3%	1%
19.7	Do you identify as transgender or transsexual?	<i>n</i> =156	3%	2%	3%	
ARRIVAL AND RECEPTION						
2.1	Were you given up-to-date information about this prison before you came here?	<i>n</i> =177	17%	17%	17%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n</i> =177	17%	36%	17%	14%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n</i> =177	70%	77%	70%	65%
2.4	Overall, were you treated very / quite well in reception?	<i>n</i> =177	72%	76%	72%	

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

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

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

Number of completed questionnaires returned

n=number of valid responses to question (HMP Wormwood Scrubs 2019)

HMP Wormwood Scrubs 2019	All other local prisons surveyed since September 2017	HMP Wormwood Scrubs 2019	HMP Wormwood Scrubs 2017
183	4,638	183	185

2.5	When you first arrived, did you have any problems?	<i>n</i> =179	88%	88%	88%	86%
2.5	Did you have problems with:					
	- Getting phone numbers?	<i>n</i> =179	45%	46%	45%	45%
	- Contacting family?	<i>n</i> =179	44%	47%	44%	42%
	- Arranging care for children or other dependents?	<i>n</i> =179	9%	4%	9%	
	- Contacting employers?	<i>n</i> =179	8%	7%	8%	8%
	- Money worries?	<i>n</i> =179	29%	29%	29%	29%
	- Housing worries?	<i>n</i> =179	25%	24%	25%	27%
	- Feeling depressed?	<i>n</i> =179	42%	49%	42%	
	- Feeling suicidal?	<i>n</i> =179	14%	19%	14%	
	- Other mental health problems?	<i>n</i> =179	20%	30%	20%	
	- Physical health problems?	<i>n</i> =179	15%	20%	15%	24%
	- Drugs or alcohol (e.g. withdrawal)?	<i>n</i> =179	20%	25%	20%	
	- Getting medication?	<i>n</i> =179	26%	31%	26%	
	- Needing protection from other prisoners?	<i>n</i> =179	12%	11%	12%	15%
	- Lost or delayed property?	<i>n</i> =179	23%	21%	23%	26%
	<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	<i>n</i> =148	28%	31%	28%	25%
FIRST NIGHT AND INDUCTION						
3.1	Before you were locked up on your first night, were you offered:					
	- Tobacco or nicotine replacement?	<i>n</i> =176	71%	71%	71%	78%
	- Toiletries / other basic items?	<i>n</i> =176	64%	52%	64%	57%
	- A shower?	<i>n</i> =176	35%	27%	35%	32%
	- A free phone call?	<i>n</i> =176	68%	48%	68%	67%
	- Something to eat?	<i>n</i> =176	78%	75%	78%	69%
	- The chance to see someone from health care?	<i>n</i> =176	63%	62%	63%	58%
	- The chance to talk to a Listener or Samaritans?	<i>n</i> =176	18%	25%	18%	21%
	- Support from another prisoner (e.g. Insider or buddy)?	<i>n</i> =176	13%	22%	13%	
	- None of these?	<i>n</i> =176	6%	6%	6%	
3.2	On your first night in this prison, was your cell very / quite clean?	<i>n</i> =177	34%	30%	34%	
3.3	Did you feel safe on your first night here?	<i>n</i> =177	52%	62%	52%	54%
3.4	In your first few days here, did you get:					
	- Access to the prison shop / canteen?	<i>n</i> =168	22%	33%	22%	16%
	- Free PIN phone credit?	<i>n</i> =173	56%	55%	56%	
	- Numbers put on your PIN phone?	<i>n</i> =165	40%	35%	40%	
3.5	Have you had an induction at this prison?	<i>n</i> =176	71%	81%	71%	64%
	<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	<i>n</i> =124	40%	48%	40%	

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

HMP Wormwood Scrubs 2019	All other local prisons surveyed since September 2017	HMP Wormwood Scrubs 2019	HMP Wormwood Scrubs 2017
183	4,638	183	185

n=number of valid responses to question (HMP Wormwood Scrubs 2019)

ON THE WING						
4.1	Are you in a cell on your own?	n=178	39%	34%	39%	
4.2	Is your cell call bell normally answered within 5 minutes?	n=178	15%	20%	15%	12%
4.3	On the wing or houseblock you currently live on:					
	- Do you normally have enough clean, suitable clothes for the week?	n=172	49%	54%	49%	33%
	- Can you shower every day?	n=174	65%	80%	65%	63%
	- Do you have clean sheets every week?	n=173	52%	63%	52%	31%
	- Do you get cell cleaning materials every week?	n=167	45%	50%	45%	26%
	- Is it normally quiet enough for you to relax or sleep at night?	n=167	52%	54%	52%	41%
	- Can you get your stored property if you need it?	n=167	24%	23%	24%	13%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	n=171	52%	55%	52%	
FOOD AND CANTEEN						
5.1	Is the quality of the food in this prison very / quite good?	n=177	22%	34%	22%	
5.2	Do you get enough to eat at meal-times always / most of the time?	n=175	27%	28%	27%	
5.3	Does the shop / canteen sell the things that you need?	n=175	59%	59%	59%	50%
RELATIONSHIPS WITH STAFF						
6.1	Do most staff here treat you with respect?	n=174	64%	68%	64%	62%
6.2	Are there any staff here you could turn to if you had a problem?	n=170	68%	70%	68%	64%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	n=176	25%	32%	25%	21%
6.4	Do you have a personal officer?	n=175	43%	62%	43%	
<i>For those who have a personal officer:</i>						
6.4	Is your personal or named officer very / quite helpful?	n=76	57%	50%	57%	
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	n=176	16%	7%	16%	
6.6	Do you feel that you are treated as an individual in this prison?	n=168	41%	39%	41%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	n=173	43%	40%	43%	
	If so, do things sometimes change?	n=75	33%	33%	33%	
FAITH						
7.1	Do you have a religion?	n=170	88%	67%	88%	84%
<i>For those who have a religion:</i>						
7.2	Are your religious beliefs respected here?	n=147	71%	68%	71%	
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	n=150	61%	64%	61%	
7.4	Are you able to attend religious services, if you want to?	n=152	88%	83%	88%	

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

HMP Wormwood Scrubs 2019	All other local prisons surveyed since September 2017	HMP Wormwood Scrubs 2019	HMP Wormwood Scrubs 2017
183	4,638	183	185

n=number of valid responses to question (HMP Wormwood Scrubs 2019)

CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	n=174	24%	26%	24%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	n=174	56%	54%	56%
8.3	Are you able to use a phone every day (if you have credit)?	n=177	81%	83%	81%
8.4	Is it very / quite easy for your family and friends to get here?	n=173	52%	45%	52%
8.5	Do you get visits from family/friends once a week or more?	n=169	31%	24%	31%
<i>For those who get visits:</i>					
8.6	Do visits usually start and finish on time?	n=108	34%	45%	34%
8.7	Are your visitors usually treated respectfully by staff?	n=106	66%	72%	66%
TIME OUT OF CELL					
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=170	77%	83%	77%
<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=131	44%	49%	44%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	n=167	42%	33%	42%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	n=167	4%	4%	4%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=169	75%	44%	75%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=169	2%	1%	2%
9.4	Do you have time to do domestics more than 5 days in a typical week?	n=169	34%	43%	34%
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=169	50%	42%	50%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=173	34%	46%	34%
9.7	Do you typically go to the gym twice a week or more?	n=171	17%	39%	17%
9.8	Do you typically go to the library once a week or more?	n=173	35%	39%	35%
<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=83	60%	54%	60%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	n=174	74%	66%	74%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	n=150	50%	47%	50%
	Are applications usually dealt with within 7 days?	n=146	34%	34%	34%
10.3	Is it easy for you to make a complaint?	n=174	53%	55%	53%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	n=97	27%	28%	27%
	Are complaints usually dealt with within 7 days?	n=96	20%	24%	20%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=120	33%	30%	33%

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

HMP Wormwood Scrubs 2019	All other local prisons surveyed since September 2017	HMP Wormwood Scrubs 2019	HMP Wormwood Scrubs 2017
183	4,638	183	185

n=number of valid responses to question (HMP Wormwood Scrubs 2019)

<i>For those who need it, is it easy to:</i>					
10.6	Communicate with your solicitor or legal representative?	n=151	47%	41%	47%
	Attend legal visits?	n=145	60%	59%	60%
	Get bail information?	n=132	22%	17%	22%
<i>For those who have had legal letters:</i>					
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=134	55%	52%	55%
HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	n=172	24%	25%	24%
	- Nurse?	n=169	50%	46%	50%
	- Dentist?	n=170	12%	12%	12%
	- Mental health workers?	n=165	15%	20%	15%
11.2	Do you think the quality of the health service is very / quite good from:				
	- Doctor?	n=169	41%	40%	41%
	- Nurse?	n=166	46%	51%	46%
	- Dentist?	n=163	29%	26%	29%
	- Mental health workers?	n=161	20%	25%	20%
11.3	Do you have any mental health problems?	n=170	44%	52%	44%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	n=76	28%	35%	28%
11.5	Do you think the overall quality of the health services here is very / quite good?	n=167	34%	34%	34%
OTHER SUPPORT NEEDS					
12.1	Do you consider yourself to have a disability?	n=173	38%	41%	38%
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	n=50	14%	26%	14%
12.3	Have you been on an ACCT in this prison?	n=162	14%	24%	14%
<i>For those who have been on an ACCT:</i>					
12.4	Did you feel cared for by staff?	n=23	26%	48%	26%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=165	46%	45%	46%
ALCOHOL AND DRUGS					
13.1	Did you have an alcohol problem when you came into this prison?	n=173	22%	23%	22%
<i>For those who had / have an alcohol problem:</i>					
13.2	Have you been helped with your alcohol problem in this prison?	n=36	53%	55%	53%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=170	30%	36%	30%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=169	12%	17%	12%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=170	9%	12%	9%
<i>For those who had / have a drug problem:</i>					
13.6	Have you been helped with your drug problem in this prison?	n=52	54%	50%	54%
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=164	43%	52%	43%
13.8	Is it very / quite easy to get alcohol in this prison?	n=163	29%	27%	29%

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

HMP Wormwood Scrubs 2019	All other local prisons surveyed since September 2017	HMP Wormwood Scrubs 2019	HMP Wormwood Scrubs 2017
183	4,638	183	185

n=number of valid responses to question (HMP Wormwood Scrubs 2019)

SAFETY						
14.1	Have you ever felt unsafe here?	n=173	65%	59%	65%	65%
14.2	Do you feel unsafe now?	n=166	36%	28%	36%	36%
14.3	Have you experienced any of the following from other prisoners here:					
	- Verbal abuse?	n=158	35%	39%	35%	
	- Threats or intimidation?	n=158	29%	35%	29%	
	- Physical assault?	n=158	17%	21%	17%	
	- Sexual assault?	n=158	1%	3%	1%	
	- Theft of canteen or property?	n=158	27%	32%	27%	
	- Other bullying / victimisation?	n=158	14%	21%	14%	
	- Not experienced any of these from prisoners here	n=158	52%	47%	52%	
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	n=161	37%	35%	37%	
14.5	Have you experienced any of the following from staff here:					
	- Verbal abuse?	n=161	40%	33%	40%	
	- Threats or intimidation?	n=161	26%	25%	26%	
	- Physical assault?	n=161	14%	13%	14%	
	- Sexual assault?	n=161	1%	2%	1%	
	- Theft of canteen or property?	n=161	10%	11%	10%	
	- Other bullying / victimisation?	n=161	15%	18%	15%	
	- Not experienced any of these from staff here	n=161	52%	55%	52%	
14.6	If you were being bullied / victimised by staff here, would you report it?	n=163	50%	47%	50%	
BEHAVIOUR MANAGEMENT						
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	n=163	42%	38%	42%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	n=164	33%	35%	33%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	n=165	13%	15%	13%	10%
<i>For those who have been restrained in the last 6 months:</i>						
15.4	Did anyone come and talk to you about it afterwards?	n=21	19%	19%	19%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	n=163	11%	10%	11%	
<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>						
15.6	Were you treated well by segregation staff?	n=16	69%	54%	69%	
	Could you shower every day?	n=16	81%	50%	81%	
	Could you go outside for exercise every day?	n=16	88%	61%	88%	
	Could you use the phone every day (if you had credit)?	n=16	81%	49%	81%	

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

HMP Wormwood Scrubs 2019	All other local prisons surveyed since September 2017
183	4,638

HMP Wormwood Scrubs 2019	HMP Wormwood Scrubs 2017
183	185

n=number of valid responses to question (HMP Wormwood Scrubs 2019)

EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	n=156	46%	53%	46%
	- Vocational or skills training?	n=151	27%	28%	27%
	- Prison job?	n=161	35%	35%	35%
	- Voluntary work outside of the prison?	n=153	5%	4%	5%
	- Paid work outside of the prison?	n=153	4%	4%	4%
16.2	In this prison, have you done the following activities:				
	- Education?	n=148	67%	72%	67%
	- Vocational or skills training?	n=139	55%	56%	55%
	- Prison job?	n=145	73%	72%	73%
	- Voluntary work outside of the prison?	n=135	33%	34%	33%
	- Paid work outside of the prison?	n=134	31%	34%	31%
<i>For those who have done the following activities, do you think they will help you on release:</i>					
	- Education?	n=99	64%	59%	64%
	- Vocational or skills training?	n=77	60%	58%	60%
	- Prison job?	n=106	41%	43%	41%
	- Voluntary work outside of the prison?	n=45	40%	51%	40%
	- Paid work outside of the prison?	n=42	45%	57%	45%
16.3	Do staff encourage you to attend education, training or work?	n=138	33%	45%	33%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	n=160	28%	27%	28%
<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=44	77%	79%	77%
17.3	Are staff helping you to achieve your objectives or targets?	n=43	37%	48%	37%
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	n=39	46%	46%	46%
	- Other programmes?	n=39	49%	45%	49%
	- One to one work?	n=39	49%	40%	49%
	- Been on a specialist unit?	n=38	24%	22%	24%
	- ROTL - day or overnight release?	n=37	19%	17%	19%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>					
	- Offending behaviour programmes?	n=18	72%	72%	72%
	- Other programmes?	n=19	74%	68%	74%
	- One to one work?	n=19	53%	68%	53%
	- Being on a specialist unit?	n=9	11%	50%	11%
	- ROTL - day or overnight release?	n=7	0%	51%	0%

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

HMP Wormwood Scrubs 2019	All other local prisons surveyed since September 2017
183	4,638

HMP Wormwood Scrubs 2019	HMP Wormwood Scrubs 2017
183	185

n=number of valid responses to question (HMP Wormwood Scrubs 2019)

PREPARATION FOR RELEASE						
18.1	Do you expect to be released in the next 3 months?	<i>n</i> =163	39%	32%	39%	
<i>For those who expect to be released in the next 3 months:</i>						
18.2	Is this prison very / quite near to your home area or intended release address?	<i>n</i> =63	59%	57%	59%	
18.3	Is anybody helping you to prepare for your release?	<i>n</i> =64	45%	48%	45%	
18.4	Do you need help to sort out the following for when you are released:					
	- Finding accommodation?	<i>n</i> =63	64%	68%	64%	
	- Getting employment?	<i>n</i> =61	67%	64%	67%	
	- Setting up education or training?	<i>n</i> =55	49%	51%	49%	
	- Arranging benefits?	<i>n</i> =59	63%	71%	63%	
	- Sorting out finances?	<i>n</i> =58	59%	60%	59%	
	- Support for drug or alcohol problems?	<i>n</i> =60	42%	53%	42%	
	- Health / mental Health support?	<i>n</i> =55	49%	60%	49%	
	- Social care support?	<i>n</i> =54	32%	45%	32%	
	- Getting back in touch with family or friends?	<i>n</i> =57	44%	44%	44%	
18.4	Are you getting help to sort out the following for when you are released, if you need it:					
	- Finding accommodation?	<i>n</i> =40	35%	30%	35%	
	- Getting employment?	<i>n</i> =41	29%	19%	29%	
	- Setting up education or training?	<i>n</i> =27	33%	16%	33%	
	- Arranging benefits?	<i>n</i> =37	32%	26%	32%	
	- Sorting out finances?	<i>n</i> =34	29%	16%	29%	
	- Support for drug or alcohol problems?	<i>n</i> =25	60%	42%	60%	
	- Health / mental Health support?	<i>n</i> =27	30%	23%	30%	
	- Social care support?	<i>n</i> =17	24%	17%	24%	
	- Getting back in touch with family or friends?	<i>n</i> =25	28%	27%	28%	
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</i> =156	46%	48%	46%	

HMP Wormwood Scrubs 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
	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

	25 and under	Over 25		50 and over	Under 50
	35	143		28	150

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	34%	0%	0%	8%
	Are you 70 years of age or older?	0%	1%	4%	0%
1.3	Are you from a minority ethnic group?	75%	58%	67%	60%
7.1	Are you Muslim?	35%	24%	15%	28%
11.3	Do you have any mental health problems?	36%	44%	48%	42%
12.1	Do you consider yourself to have a disability?	28%	38%	48%	34%
19.2	Are you a foreign national?	7%	22%	15%	21%
19.3	Are you from a Traveller community? (e.g. Gypsy, Roma, Irish Traveller)	8%	4%	0%	5%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	71%	71%	70%	71%
2.4	Overall, were you treated very / quite well in reception?	64%	75%	89%	70%
2.5	When you first arrived, did you have any problems?	86%	89%	89%	88%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	17%	30%	41%	25%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	55%	51%	52%	52%
3.5	Have you had an induction at this prison?	71%	71%	78%	70%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	42%	40%	57%	37%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	9%	16%	26%	13%
4.3					
	- Do you normally have enough clean, suitable clothes for the week?	53%	48%	50%	49%
	- Can you shower every day?	56%	67%	68%	64%
	- Do you have clean sheets every week?	55%	51%	43%	54%
	- Do you get cell cleaning materials every week?	44%	46%	50%	44%
	- Is it normally quiet enough for you to relax or sleep at night?	50%	52%	43%	53%
	- Can you get your stored property if you need it?	22%	24%	12%	26%

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

	25 and under	Over 25	50 and over	Under 50
	35	143	28	150

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	30%	26%	41%	24%
5.3	Does the shop / canteen sell the things that you need?	66%	58%	67%	58%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	44%	70%	79%	62%
6.2	Are there any staff here you could turn to if you had a problem?	66%	68%	70%	67%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	15%	27%	33%	23%
6.6	Do you feel that you are treated as an individual in this prison?	41%	41%	52%	39%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	65%	73%	78%	70%
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	54%	64%	58%	62%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	33%	21%	22%	24%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	65%	54%	52%	57%
8.3	Are you able to use a phone every day (if you have credit)?	82%	81%	96%	79%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	65%	65%	62%	66%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	58%	38%	33%	44%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	0%	5%	11%	2%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	43%	63%	65%	59%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	75%	74%	82%	73%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	65%	46%	61%	48%
10.3	Is it easy for you to make a complaint?	44%	56%	50%	54%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	17%	29%	42%	24%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	46%	30%	12%	36%

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

		25 and under	Over 25
		35	143
		50 and over	Under 50
		28	150

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	16%	26%	19%	25%
	- Nurse?	36%	53%	50%	50%
	- Dentist?	13%	13%	15%	12%
	- Mental health workers?	17%	14%	16%	15%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	25%	26%	46%	22%
11.5	Do you think the overall quality of the health services here is very / quite good?	30%	35%	39%	33%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	14%	15%	18%	14%
SAFETY					
14.1	Have you ever felt unsafe here?	63%	65%	54%	66%
14.2	Do you feel unsafe now?	30%	37%	20%	38%
14.3	Not experienced bullying / victimisation by other prisoners	66%	50%	48%	54%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	39%	37%	48%	35%
14.5	Not experienced bullying / victimisation by members of staff	48%	55%	65%	52%
14.6	If you were being bullied / victimised by staff here, would you report it?	41%	52%	62%	48%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	35%	42%	57%	38%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	24%	35%	33%	33%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	21%	11%	4%	14%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	10%	10%	0%	12%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	33%	34%	35%	33%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	37%	25%	21%	28%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	30%	42%	20%	42%
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?	67%	38%	22%	48%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	48%	46%	52%	45%