

Report on an unannounced inspection of

HMYOI Aylesbury

by HM Chief Inspector of Prisons

30 September – 11 October 2019

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hmiprisons.enquiries@hmiprisons.gsi.gov.uk

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3rd floor
10 South Colonnade
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E14 4PU
England

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Glossary of terms

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

Introduction

HMYOI Aylesbury is a young offender institution (YOI) holding male prisoners aged between 18 and 20. The overwhelming majority are serving sentences from four years to life imprisonment. The establishment was last inspected in 2017, at which time we raised serious concerns across a range of issues, but expressed particular worry about safety, for which we awarded our lowest grading of poor. The YOI has since been placed into special measures by HM Prison and Probation Service (HMPPS), and as a consequence of this the roll has been halved from around 400 to just over 200. At the time of the previous inspection, we judged performance in the remaining three of our healthy prison tests to be not sufficiently good.

On this occasion we found that in all four tests, the appropriate grade was not sufficiently good, so while there had been an improvement in safety, the rest of the grades remained the same. However, it would be quite wrong to infer that there had been no progress made in the time since the last inspection. What we found was that there had been some distinct movement and indeed some improvements within the gradings, but not sufficient to raise any of them to the acceptable standard of reasonably good.

In terms of safety, the overall rate of violence had increased, but the seriousness of most of it had declined. It is quite possible that this was a consequence of introducing some 'freeflow' in the prison. This has made it easier for prisoners to gain access to one another and fight, but at the same time more likely to be in the sight of officers who are able to intervene and de-escalate situations before they become very serious. This is a phenomenon that we have seen elsewhere. However, it was not possible to say whether this was definitely the case at Aylesbury because there was insufficient analysis of the violence and no clear violence reduction action plan. This was one of our key concerns flowing from this inspection.

We were also concerned by the quality of the relationships between staff and prisoners, with a significant number of the latter saying they had been verbally abused or victimised by staff. There was some evidence that key working was beginning to have an impact, but it remained the case that far more needed to be done to improve consultation, focus properly on issues of equality and diversity, handle complaints more effectively and improve the regime so that there could be far greater opportunity for meaningful contact and relationships to develop between staff and prisoners.

The regime had been inadequate at Aylesbury for many years, and it remained the case that, for much of the week, there was no evening association, time out of cell was poor and often unpredictable and there was no opportunity at all for prisoners to eat together. For these very basic socialisation processes to be absent or poor in a prison holding young adults was clearly unacceptable and needed to be addressed. The fact that the population had halved while staff levels had remained the same should have enabled more positive changes to have been made. There had been some progress, but more needed to be done.

At the last inspection we found that the nationally mandated process for assessing the risks presented by, and the needs of, prisoners (OASys) was not working as it should. We made a main recommendation that concerted action should be taken to reduce the OASys backlog but inexplicably, considering the risks presented by the population at Aylesbury, this had not been acted upon. We found that over a quarter of the prisoners did not have an OASys at all, and too few of the remainder had received proper or timely reviews. Staff tried to work around these failures in a pragmatic way, but could not replicate the comprehensive nature of the approved but failing national process. In recent times HM Inspectorate of Prisons has frequently reported that as a process of risk management and sentence progression, OASys is showing worrying signs of systemic failure, in some places verging on collapse. We have been told on many occasions that when the Offender Management in Custody (OMiC) programme is fully implemented, with responsibility for completion transferred to Aylesbury, the situation will improve. I had little confidence that this would be the

case. It was clear that the Offender Management Unit did not have the resources to absorb the extra work. These weaknesses form one of the key concerns identified by this inspection, and I trust that, unlike our main recommendation at the last inspection, it will not be ignored.

It was clear to me that Aylesbury was an institution in transition. It was reassuring that in this instance I was able to see some positive impact from the prison being in 'special measures'. The halving of the roll, closure of wings pending refurbishment and attempts to relax the regime had had a positive impact. It was easy for me to see a real sense of ownership and teamwork in support of the measures that were being taken to improve performance. However, I was concerned by suggestions that there might be plans to return the roll to its previous number of around 400, but without increasing staff numbers. If this were to happen, and I hope it does not, at least in the short term, I would be very worried about the potential impact on the treatment of and conditions experienced by the prisoners. There were some positive signs of progress at Aylesbury, an establishment that has experienced some very challenging times. It would be a pity if that progress were to be put in jeopardy. For the moment, I would encourage the leadership there to continue on their current path and to build the findings of this inspection into their current plans.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

October 2019

Fact page

Task of the establishment

HMYOI Aylesbury is a closed young offender institution holding 18 to 20-year-old males serving from four years to life imprisonment.

Certified normal accommodation and operational capacity¹

Prisoners held at the time of inspection: 208

Baseline certified normal capacity: 209

In-use certified normal capacity: 209

Operational capacity: 209

Notable features from this inspection

Since May 2019, more than half the population had been moved out of Aylesbury and placed in other prisons.

84% of the population was assessed as high or very high risk of harm.

60% of the population were from a black or ethnic minority background.

99% of prisoners were serving long sentences of four years or more.

The Aylesbury pathway service provided a good range of therapeutic interventions for up to 45 prisoners.

Prison status (public or private) and key providers

Public

Physical health provider: Care UK Health and Rehabilitation Services Ltd

Mental health provider: Barnet, Enfield & Haringey Mental Health NHS Trust

Substance use psychosocial services: Inclusion, part of Midland Partnership NHS Foundation Trust

Prison education framework provider: Milton Keynes College

Community rehabilitation company (CRC): Thames Valley Community Rehabilitation Company

Escort contractor: GeoAmey

Prison group/Department

Long Term and High Security Estate

Brief history

The prison was opened as a County Gaol in 1847 and served as such until 1890 when it became a women's prison. Two new wings were added in 1902 serving initially as an Inebriates Centre and in the 1930s as a girls' Borstal. In 1959 the prison was converted to house adult male prisoners and in 1961 it changed again to house young male offenders aged between 18 and 20. In 1989 Aylesbury was designated as a long-term young offender institution. Aylesbury holds the longest sentenced young adult males in the English prison system.

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

Short description of residential units

B & G wings: main prison population

D wing: main prison population and induction

F wing: holds prisoners less able to cope on a mainstream wing and is an enabling environment

A, C & E wings: closed for refurbishment

Name of governor and date in post

Laura Sapwell, July 2016

Independent Monitoring Board chair

Colin Lambert

Date of last inspection

April 2017

About this inspection and report

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

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

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

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

Respect Prisoners are treated with respect for their human dignity.

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

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

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

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

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

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

This report

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

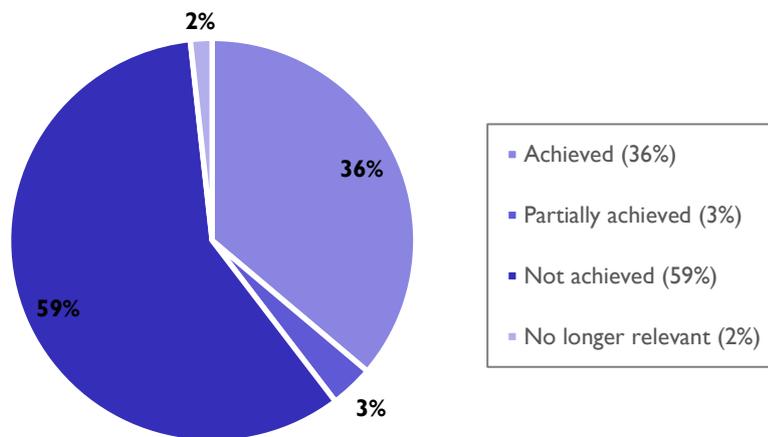
² <https://www.justiceinspectorates.gov.uk/hmiprison/our-expectations/prison-expectations/>

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

Summary

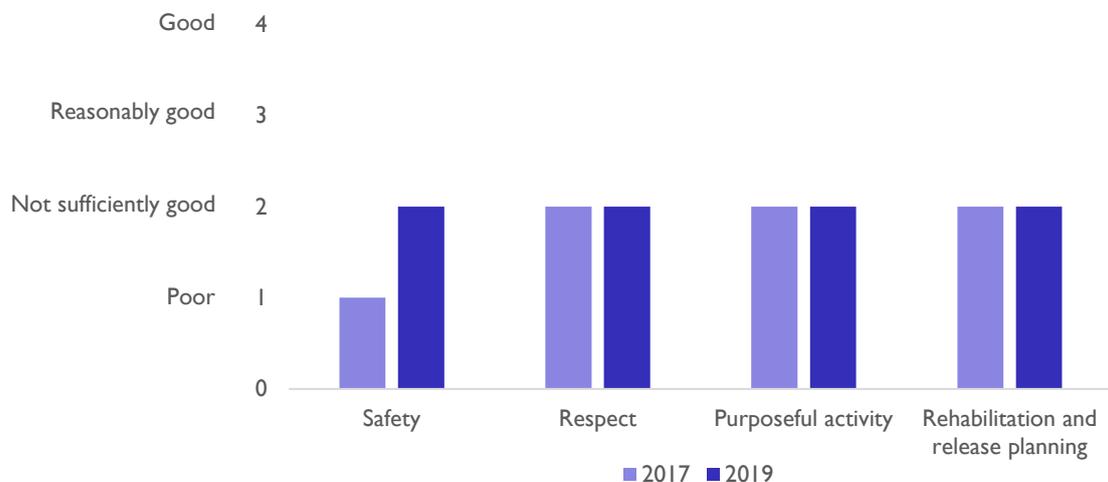
- S1 We last inspected HMYOI Aylesbury in 2017 and made 58 recommendations overall. The prison fully accepted 35 of the recommendations and partially (or subject to resources) accepted 18. It rejected five of the recommendations.
- S2 At this follow-up inspection we found that the prison had achieved 21 of those recommendations, partially achieved two recommendations and not achieved 34 recommendations. One recommendation was no longer relevant.

Figure 1: HMYOI Aylesbury progress on recommendations from last inspection (n=58)



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

Figure 2: HMYOI Aylesbury healthy prison outcomes 2017 and 2019⁴



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.

Safety

- S4 *The experience for new arrivals of reception and first night was reasonably good but induction needed to be better organised. In our survey, 27% of prisoners currently felt unsafe, and violence remained high. However, the number of serious incidents had reduced significantly. The incentives and earned privileges scheme remained ineffective. Use of force was high but governance had improved. The segregation unit was a decent environment, but the regime was basic and some stays were very long. Management of security had improved and was good. Self-harm had reduced and was low. ACCT⁵ management had improved but care maps remained variable. The safeguarding of vulnerable adults was underdeveloped. **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 Aylesbury were poor against this healthy prison test. We made 15 recommendations in the area of safety.⁶ At this inspection we found that six of the recommendations had been achieved and nine had not been achieved.*
- S6 Reception and first night processes were reasonably good, but only 58% of prisoners in our survey said they felt safe on their first night. There were no specific first night cells or peer mentor support. Induction was not always timely and prisoners frequently missed sessions. Prisoners on induction were locked up for long periods.
- S7 In our survey, 53% of prisoners said they had felt unsafe during their time at Aylesbury. The number of fights per 100 prisoners had increased since our last inspection and the rate of assaults remained high. However, far fewer of these incidents were serious in nature. There was no analysis of the reasons for violence and no plan to reduce it. Challenge support and intervention plans (CSIPs⁷) had been introduced to manage perpetrators of violence and antisocial behaviour. However, staff on residential units did not know which prisoners were on a CSIP or what their targets were.
- S8 The incentives and earned privileges (IEP) scheme did not provide enough incentive for good behaviour and managerial oversight was poor. The number of adjudications had increased and was much higher than in comparable establishments. We found many low-level charges that could have been better dealt with through the IEP scheme. Adjudication tariffs were disproportionately severe for some more minor offences. Governance had improved with better enquiry and very few outstanding hearings.
- S9 Use of force was high and had increased since our last inspection. In our survey, nearly half the prisoners said they had been physically restrained at Aylesbury. Oversight had improved, with very few outstanding use of force reports. Good levels of de-escalation were evident in nearly all the incidents that we reviewed.
- S10 The use of segregation had increased and was higher per 100 prisoners than comparable establishments. A small but significant number of prisoners were segregated for long periods. Communal areas were generally clean and bright, but many cells and exercise yards contained graffiti and toilets required lids and descaling. The segregation regime was basic. It was positive that managers had made efforts to deliver gym sessions and contributions from psychology and offending behaviour programmes to prisoners in the segregation unit.

⁵ Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

⁶ This included recommendations about substance use treatment, which in our updated Expectations (Version 5, 2017) now appear under the healthy prison area of respect.

⁷ CSIPs (challenge, support and intervention plans) are used by all adult prisons to manage those prisoners who are violent or pose a heightened risk of being violent. These prisoners are managed and supported on a plan with individualised targets and regular reviews. Some prisons also use the CSIP framework to support victims of violence.

Authorisation for segregation was missing from some prison records and prison group director authority for continued segregation was often late. Reintegration planning remained poor.

- S11 Security was better managed and more proportionate than at the time of the last inspection. Intelligence was handled promptly. There was a very small backlog of intelligence reports and far fewer than we have seen elsewhere. The gang database was kept up to date and staff knew how to access it. The random mandatory drug test rate was about 12% which was higher than comparable establishments. However, the local drug reduction policy was robust. The prison was conducting intelligence-based suspicion drug tests and cell searches were better than we see at comparable sites.
- S12 Self-harm had reduced since the last inspection and was lower than other establishments. The monthly safer prisons meeting was reasonably well attended but key managers were not always represented. Some data were discussed at the meeting but did not always inform tangible actions. ACCT reviews took place on time and were well attended. However, they did not all have care maps and some ACCTs had been closed before all the actions had been fully addressed. Constant watch had been used five times in the previous six months. We observed one prisoner on a constant watch who received good support from staff, but his cell was filthy.
- S13 Local safeguarding procedures were underdeveloped and many staff we spoke to were unaware of how or to whom to report safeguarding concerns.

Respect

S14 *Prisoners continued to have some poor perceptions about staff and the regime allowed little time for staff to build meaningful relationships with prisoners. Cleanliness had improved across the prison and most cells were reasonably well furnished. Access to showers and other essentials had improved and was good. However, there was still some graffiti. Consultation had improved. The complaints system was not always effective. Equality and diversity work was in disarray which was a significant concern in a prison holding such a diverse population. The enthusiastic chaplaincy offered a very good service. Health and substance misuse services were reasonably good, but access required further improvement. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S15 *At the last inspection in 2017, we found that outcomes for prisoners in Aylesbury were not sufficiently good against this healthy prison test. We made 24 recommendations in the area of respect. At this inspection we found that four of the recommendations had been achieved, two had been partially achieved and 18 had not been achieved.*

- S16 In our survey, 59% of prisoners said that most staff treated them with respect. However, we had concerns about the large number of prisoners who reported victimisation by staff. We observed examples of positive interactions by staff on some residential units, but the restricted regime limited the opportunity and time for staff to build good relationships with prisoners in their care. There was evidence that frequent key work sessions were starting to have a positive impact on relationships between staff and prisoners.
- S17 External exercise areas were well maintained and communal areas were reasonably clean, although some were worn. All prisoners now lived in single cells. Most cells were clean and adequately furnished, but some needed painting and graffiti remained on cell doors and walls. Showers had been refurbished on two wings and access was now good. In our survey,

prisoners were positive about their access to everyday essentials which was a significant improvement since the previous inspection.

- S18 The quality and variety of the food remained reasonably good. The cleanliness of wing serveries had improved. There were still no facilities for prisoners to cook for themselves or eat together.
- S19 Consultation had improved and changes had been carried out for prisoners as a result of this. Organisation and oversight of the applications process had recently improved. Most prisoners said that it was easy to make an application, but responses still took too long. The number of complaints had increased and was very high. The complaints system was not always effective and some responses did not address the issues raised. We submitted two complaints as part of the inspection process, and they did not receive a response. Provision for legal rights was adequate, but legal visits still took place in the open visits room which compromised confidentiality.
- S20 Equality work was inadequate. There was no up-to-date policy or action plan and equality meetings lacked purpose and direction. Management of the discrimination complaints process was chaotic. Complaints boxes on the wings did not contain any blank forms. Discrimination complaints often did not receive a response and many that were responded to had not been adequately investigated.
- S21 There were no consultation forums for prisoners in protected groups which left the establishment poorly placed to understand some negative perceptions held by black and minority ethnic and Muslim prisoners, from our survey and focus groups. Equality monitoring data were not routinely analysed and disproportionality had not been investigated. The establishment was not meeting the needs of foreign national prisoners and appropriate immigration advice and guidance were not provided. Faith provision was very good. The chaplaincy provided compassionate and consistent pastoral care. All prisoners had access to a chaplain of their faith.
- S22 The quality of health provision was reasonably good, although further work was needed to ensure consistent and prompt access to health care. There had been a lack of progress in completing appropriate alterations to health care treatment rooms which affected patient care. There was a positive approach to health promotion and wellbeing and good collaboration with the gym and other areas of the prison.
- S23 There was a suitable range of primary health care services with reasonable waiting times. The few patients with long-term conditions were managed well. The dental service delivered an appropriate range of treatments. New patients waited six weeks for an initial appointment and up to three months for treatment, which was too long. The management of medicines was reasonable, but supervision of medicine queues and the waiting area was inconsistent.
- S24 Although their work was of good quality, mental health services lacked the breadth of specialisms required to work with this population. Funding had been agreed to increase provision and there was a new focus on joint work with other health teams. The Pathways service had a well-resourced, multidisciplinary team who delivered an impressive range of therapeutic interventions in individual and group sessions.
- S25 The drug and alcohol recovery team provided a responsive service and offered good psychosocial support.

Purposeful activity

- S26 *Time out of cell remained poor and too many prisoners were locked up during the working day. Access to the gym and library had improved since the previous inspection. Teaching and learning in education had improved and behaviour in most sessions was good. Outcomes in key subjects including English and mathematics had also improved since our last inspection, although there remained significant areas for improvement. There was not enough activity to engage the population fully and there were few opportunities for prisoners to achieve qualifications in prison work. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S27 *At the last inspection in 2017, we found that outcomes for prisoners in Aylesbury were not sufficiently good against this healthy prison test. We made 10 recommendations in the area of purposeful activity. At this inspection we found that seven of the recommendations had been achieved and three had not been achieved.*
- S28 Time out of cell for most prisoners remained poor, despite a 50% reduction in the population. During our roll checks we found that a third of prisoners were locked up during the core day which was too many for a prison holding a young, long-term population. Association periods were still not provided on weekday evenings and were regularly reduced or cancelled at weekends.
- S29 Improvements had been made in engaging unemployed prisoners during the core day with weekly visits to the gym and library. However, some prisoners were still unlocked for less than an hour each day. Access to the library had improved since our last inspection with additional time allowed for each visit. The library was well managed with a good range of books.
- S30 Gym facilities were good and PE staff were passionate in supporting a range of health and wellbeing activity for prisoners and staff. The classes reflected the needs of the population. Attendance during the week was not high enough.
- S31 Effective joint working between prison and college managers had resulted in improvements in the quality of education, learning and skills. College leaders had been particularly effective in supporting teachers in English and mathematics to improve their professional practice. There were not enough full-time activity places for the population and the number of unemployed prisoners was too high. No accredited qualifications were offered to prisoners engaged in prison work.
- S32 Most teachers planned interesting lessons which engaged and motivated prisoners. Teachers questioned prisoners carefully to check what they knew and adapted learning to enable them to consolidate their understanding. Prisoners enjoyed learning and could explain the practical skills that they had gained. Teachers' feedback on prisoners' written work did not always identify how prisoners could improve their work to achieve higher grades.
- S33 Most prisoners developed very useful personal, social and work skills which aided their transition to the adult estate. Prisoners demonstrated a good work ethic and behaved well during purposeful activities. Teachers improved prisoners' awareness of equality topics such as discrimination and Black History Month was celebrated. Punctuality had improved and was now good, but attendance required further improvement.
- S34 Qualification achievement rates in English and mathematics courses had improved since the last inspection and were now high. The proportion of prisoners who completed their courses was high.

Rehabilitation and release planning

- S35 *Work to support prisoners to maintain contact with family and friends had improved and visits now started at the advertised time. Rehabilitation work was fundamentally undermined by the inability of the National Probation Service to complete assessments of risk and need. A simple screening for prisoners devised locally only partially addressed this deficit. Staff shortages affected contact between prisoners and prison offender managers. Public protection work was good. Prisoners had access to a wide range of interventions, including offending behaviour programmes and the Aylesbury Pathways Service. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S36 *At the last inspection in 2017, we found that outcomes for prisoners in Aylesbury were not sufficiently good against this healthy prison test. We made nine recommendations in the area of resettlement.⁸ At this inspection we found that four of the recommendations had been achieved, four had not been achieved and one was no longer relevant.*
- S37 The Prison Advice and Care Trust (PACT) were contracted to provide support for prisoners to maintain family ties. A recent family forum had generated actions that were being progressed jointly by the prison and PACT. Visits started more promptly than at the previous inspection. We observed respectful interactions between staff and visitors but fewer prisoners than the comparator said that visitors were usually treated respectfully. Visits facilities were adequate, apart from closed visits. Prisoners benefited from in-cell telephones which was an improvement since the previous inspection.
- S38 The reducing reoffending strategy had been reviewed recently and a range of partners contributed to the delivery of reducing reoffending work. The strategy lacked assessment of the population to inform identification of need and the development of an action plan was based solely on a prisoner survey. Eighty-four per cent of the population was assessed as high or very high risk of harm, many of whom had not had a comprehensive initial assessment of risk and need to inform their sentence progression. Only 32 of those who had had an assessment had been reviewed following a significant event such as a move to Aylesbury. Responsibility for carrying out most of these assessments (OASys) lay with the National Probation Service but, in the cases that we reviewed, requests for assessments from offender management unit (OMU) staff had not led to completion of these assessments.
- S39 Managers continued to use locally devised systems to manage the absence of these assessments but, as we reported in 2017, these pragmatic initiatives could not fully replace the comprehensive and nationally approved assessment tool. The future transfer to the prison of responsibility for preparing OASys assessments as part of offender management in custody⁹ (OMiC) would lead to a significant increase in workload in the OMU at Aylesbury. We found that current and realistic future resources in the department were not sufficient to manage this increase.
- S40 There were vacancies at most levels in the offender management team and caseloads were too high, even with a reduced population. Levels of contact between prison offender managers and prisoners were low and largely focused on processes rather than sentence progression. It was creditable that all the prison offender managers received regular

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 The offender management in custody (OMiC) model was introduced in 2017. In the first stage, prison officer keyworkers were introduced with the aim of having regular contact with named prisoners. The second phase sees the introduction of core offender management and prison offender managers.

supervision from a senior probation officer (SPO). Good progress had been made with the introduction of OMiC keyworkers and there was evidence of them contributing to prisoners' progression and liaising well with other staff involved in reducing reoffending work.

- S41 Family days were held twice a year, but there was otherwise nothing to differentiate the management of the 17% of prisoners serving indeterminate sentences from their peers.
- S42 Re-categorisation processes were reasonably prompt, but transfers to the adult estate remained slow for some 21-year old prisoners.
- S43 Internal public protection processes were effective. The identification of multi-agency public protection arrangements (MAPPA) categories and confirmation of levels were prompt and there remained effective systems to track, monitor and escalate risk of harm issues. The probation officers prepared MAPPA F reports which were of a good standard and countersigned by the SPO. The interdepartmental risk management team meeting was a good forum for discussing and sharing understanding of the risks posed by prisoners, although in many cases the lack of an OASys risk assessment hindered the identification of risk.
- S44 Few prisoners were released from Aylesbury. There were suitable services when necessary to support their release into the community, including through-the-gate mentoring.
- S45 The prison offered a wide range of accredited interventions and other programmes. Access to interventions was determined by an assessment of need and discussion at a monthly meeting where the most suitable option and timeframe for the intervention were decided. Prisoners also benefited from other targeted work by resettlement partners which supported their progression, including substance misuse, dealing with the effects of violence and mentoring. The Aylesbury Pathways Service continued to support some of the more complex prisoners in the system.

Key concerns and recommendations

- S46 Key concern: Adjudications were used to manage low-level poor and antisocial behaviour. The incentives and earned privileges scheme was largely ineffective. Measures to address this type of behaviour took place slowly and were excessively punitive.

Recommendation: A motivational and transparent rewards and sanctions scheme should be put in place to promote good behaviour and to address poor and antisocial behaviour swiftly and proportionately.

- S47 Key concern: Violence was increasing and several multi-agency meetings and procedures were used to review perpetrators, victims and antisocial behaviour. No strategy or action plan was derived from these meetings or the data provided. The drivers for violence were not understood by the prison and there was no plan to reduce it.

Recommendation: A violence reduction action plan should be developed from all available data and used to reduce levels of violence.

- S48 Key concern: The segregation regime was very poor and prisoners spent too much time locked up with little to do. Prisoners were bored and frustrated and the education offered to them was limited to worksheets. There was no procedure for recording and monitoring regime activities when they did take place.

Recommendation: The governor should improve the regime for prisoners who are segregated; risk assessments should be carried out for prisoners who can be reintegrated; activities, including education, should be properly scheduled; and records should be kept of activities undertaken by prisoners.

- S49 Key concern: Prisoners' perceptions of the quality of their relationship with staff were poor. A significant number said that, at some point, they had felt victimised by staff. The limited regime enabled them to move prisoners or unlock them for basic daily tasks rather than build and develop relationships with prisoners. This inhibited the potential for staff-prisoner relationships to be fully effective.

Recommendation: Managers should ensure there is enough time for staff to develop meaningful and effective relationships with prisoners.

- S50 Key concern: Systems for redress were weak. The number of complaints had risen significantly since the previous inspection. Responses to complaints did not always address the issues raised and not all confidential complaints received a sufficiently good response. Prisoners lacked confidence in the complaints system. The discrimination incident report form (DIRF) system did not function well and responses to DIRFs were inadequate.

Recommendation: The management of all types of complaints should be improved and meaningful investigations should be carried out to ensure that prisoners receive focused responses and redress.

- S51 Key concern: The management of equality work was inadequate. There was no up-to-date policy and equality meetings lacked purpose and direction. Prisoners in some protected groups were identified inaccurately, for example sexual orientation and disability. There was no consultation with prisoners in any protected group. Analysis of equality monitoring data was limited and disproportionality had not been addressed. Foreign national prisoners were not supported.

Recommendation: A new equality policy and action plan should be implemented with effective consultation and analysis of data and oversight by purposeful equality meetings, so that the needs of prisoners in all protected characteristic groups are understood and met.

- S52 Key concern: Attendance at health care was not prioritised sufficiently and the reasons for non-attendance were not fully understood. There had been a lengthy delay in separating the medicine administration room from the main waiting area and an inconsistent approach by officers supervising these areas which had led to a lack of privacy and the potential for bullying and altercation. Some prisoners did not attend health care for fear of confrontation on the way or in the waiting area. This situation was having a detrimental effect on prisoners' health and wellbeing.

Recommendation: All prisoners should have appropriate and prompt access to health services.

- S53 Key concern: Time out of cell for most prisoners remained poor and too many were locked up during the core day. The unlock and lock-up times were not adhered to and prisoners were not receiving association on weekdays and had significantly reduced association at weekends.

Recommendation: Prisoners should have a predictable regime throughout the week, with at least 10 hours out of their cell including evening association time.

- S54 Key concern: There was a lack of clear feedback from teachers to help prisoners improve their written work. A few teachers failed to ensure that all prisoners, including those lacking in confidence, made good progress.

Recommendation: Leaders and managers should improve the feedback that prisoners receive on their written work and ensure that teachers help all prisoners, including those lacking in confidence, to progress as well as their peers.

- S55 Key concern: Managers were still not providing opportunities for prisoners working in industries to study for an accredited qualification relevant to their job role.

Recommendation: Leaders and managers should provide opportunities for prisoners working in industries to gain a qualification related to their job.

- S56 Key concern: There was poor attendance at purposeful activity and insufficient activity spaces for the population, which had resulted in a high prisoner unemployment rate.

Recommendation: Leaders and managers should improve attendance, reduce unemployment, and provide sufficient and purposeful high-quality learning, skills and work activities that meet the needs of the population.

- S57 Key concern: A quarter of prisoners did not have any OASys assessment of their risks and needs. Responsibility to complete many assessments had lain with the National Probation Service who had not provided them despite requests from the offender management unit. The lack of assessments using the comprehensive and nationally approved assessment tool reduced the certainty that all risks had been identified. Prisoners lacked comprehensive sentence plans and focused objectives to ensure that all necessary steps were taken in a timely manner to address offending behaviour.

Recommendation: All prisoners should have an up-to-date assessment of risk and need using the nationally approved assessment tool (OASys).

- S58 Key concern: There were vacancies in the prison offender manager (POM) group which were having a negative impact on the contact that prisoners had with their POM. Caseloads were too high for the probation officers managing the high and very high risk of harm prisoners to see them regularly or do any proactive work with them. The team was taking on responsibility for completion of OASys assessments for all prisoners as part of OMiC arrangements. This would necessitate more individual work which the team was not resourced to deliver.

Recommendation: All prisoners should have regular contact with their prison offender manager to support their sentence progression.

Section 1. Safety

Prisoners, particularly the most vulnerable, are held safely.

Early days in custody

Expected outcomes:

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

- I.1 The prison was in special measures. Since May 2019, more than half the population had been moved to other prisons and Aylesbury had only received an average of four prisoners a week for the previous six months.
- I.2 The one escort van that we looked at was clean and free of graffiti.
- I.3 Prisoners were moved through reception very quickly. The two prisoners we observed spent less than an hour in reception.
- I.4 The duty governor saw all new receptions. A member of induction staff started the process in reception and escorted the prisoner to his cell. Both of these initiatives were good.
- I.5 Prisoners were able to make a phone call at reception and were given two pounds phone credit. They could buy a vape pack to last until the next shop delivery.
- I.6 Two cells had been converted to holding rooms. They were clean and had comfortable chairs. A larger interview room was used for interviews. No meals or drinks were provided on arrival. Meals could only be sourced out of hours if the kitchen had something left over.
- I.7 There were no peer mentors in reception or the induction unit. There was a 'welcome rep' but this prisoner had had no training for the role and had no material to give to prisoners for their first night.
- I.8 The induction unit was on a large wing which did not have specific first night cells. New arrivals could be located anywhere in the prison and, although most went to the induction unit, a significant number were located elsewhere. Cells were not always properly equipped for a new arrival, and our survey showed that only 33% said they had been offered toiletries and other basic items, 25% a shower and 56% something to eat. These percentages were all significantly lower than at comparator prisons.
- I.9 First night care was reasonably good. Prisoners were seen by health care for an initial screening and induction staff spent time with each individual. Night staff were aware of the location of new receptions and any enhanced observations that were needed. Despite this, only 58% of prisoners in our survey said they felt safe on their first night against the comparator of 78%.
- I.10 The induction programme started on the day following arrival. Elements of the programme were delivered when staff were available. Prisoners were given a booklet and attendance at an induction session was recorded on a spreadsheet. We saw examples of prisoners who had not completed the full programme weeks after their arrival. This led to prisoners on induction being locked up for long periods, delays in gaining work and access to the gym.

- I.11** In our survey, only 84% of prisoners said that they had had an induction and 37% said that it told them what they needed to know against respective comparators of 94% and 52%.

Managing behaviour

Expected outcomes:

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

Encouraging positive behaviour

- I.12** The rate of violence had increased since our last inspection and remained higher than in similar prisons. In our survey, 53% of prisoners said they had felt unsafe during their time at Aylesbury and 27% felt unsafe at the time of inspection.
- I.13** The level of assaults against staff and prisoners remained similar to our previous inspection, but fights had increased significantly. During the previous six months, the rate of violent incidents per 100 prisoners was more than double that at similar prisons. The number of serious assaults had reduced considerably to just three over the previous six months compared to 33 during a similar period before the previous inspection.
- I.14** Some effort had been made to reduce the number of complex keep-apart protocols which restricted prisoners' access to work and education. There was now a free-flow system for all wings to move at the same time, maximising the time available in work.
- I.15** The safer custody team collated a range of data on violence and bullying for the monthly safer custody meeting, where self-harm, segregation and use of force were also discussed. The meetings were chaired by the governor and some immediate actions were agreed, although there was little evidence that actions were used to inform a longer-term strategy for violence reduction (see key concern S47).
- I.16** The psychology department had been instrumental in developing care, support and intervention plans (CSIPs¹⁰) which were of very good quality. The action plans included 'know your prisoner' sheets describing individual triggers for violence to help staff manage each prisoner. It was disappointing to find that not all wing staff knew of these plans and minutes of the safer custody intervention meeting did not indicate any discussion of prisoners on CSIPs.
- I.17** Each violent incident was investigated and a referral process was used to decide if prisoners should be monitored through a CSIP. At the time of the inspection, seven prisoners had CSIPs, all of whom were perpetrators of violence. There was no formal support for victims if they were identified. A few prisoners were self-isolating for their own protection. Measures to protect prisoners from bullying and violence too often resulted in victims being segregated or locked up for long periods. Some prisoners with identified gang associations were unable to leave their wing or not permitted to attend some activity areas.
- I.18** There was a lack of incentives for prisoners who behaved well at Aylesbury. The difference between the lower two levels of the incentives and earned privileges (IEP) scheme, basic and standard, was minimal. Each prisoner was reviewed seven days after a downgrade or sooner

¹⁰ CSIPs (challenge, support and intervention plans) are used by all adult prisons to manage those prisoners who are violent or pose a heightened risk of being violent. These prisoners are managed and supported on a plan with individualised targets and regular reviews. Some prisons also use the CSIP framework to support victims of violence.

if they had demonstrated improved behaviour. Prisoners involved in a violent incident were routinely downgraded to basic for 14 days.

- I.19** The wing supervising officer managed and monitored the IEP scheme but oversight was poor. Decisions were not always recorded on the database which rendered ineffective the weekly quality assurance checks by the custodial managers.
- I.20** Most prisoners who had been promoted to the highest level of the IEP scheme at their previous prison were unable to retain their privileges on arrival at Aylesbury. Instead they were routinely downgraded to the standard regime without justification.

Adjudications

- I.21** The number of adjudications had increased since our last inspection and was much higher than in comparable establishments. The practice remained of placing prisoners on multiple charges for similar incidents rather than for the most serious offence.
- I.22** The most common reasons for adjudications were violence, an unauthorised article in possession and disobeying a lawful order. Some of the lower-level offences should have been dealt with by the IEP scheme, and in some cases, could have been resolved by talking to the prisoner (see key concern S46).
- I.23** The adjudication process was conducted in a respectful manner. Oversight had improved and, at the time of inspection, only 40 adjudications remained outstanding. The quality of enquiry had improved and was now good. The independent adjudicator attended on a monthly basis.
- I.24** The tariff guide used by adjudicating governors had little difference between the punishments for minor charges and more serious incidents including violence. This led to excessive punishments on occasion for more minor offences.
- I.25** The segregation monitoring and review group met each quarter to analyse adjudication trends and monitor the process, which it did effectively.

Use of force

- I.26** Use of force had increased since our last inspection and was higher than in comparable prisons. However, records indicated that much of this increase involved the use of low-level force and guiding holds. Assaults against staff and prisoners had remained at the same levels, but fights had increased (see paragraph I.13).
- I.27** There was good emphasis on de-escalation in the incidents that we viewed and the application of control and restraint techniques was better than we see in other prisons, and notable in an establishment with a large number of inexperienced staff. Any footage of concern or complaints received from prisoners were reviewed at the monthly control and restraint meeting, trends were analysed and the use of force monitored. CCTV coverage was good with real-time recording and high-resolution footage, complemented by an increased use of body-worn cameras, which aided the effective monitoring and review of incidents.
- I.28** Oversight and management of the use of force were good. The deputy governor led a team of two use of force coordinators and an administrator. The process was now embedded and the number of outstanding reports had reduced significantly. At the time of inspection, only

14 remained outstanding and all managers ensured that outstanding reports were completed. This enabled complaints or inappropriate use of force to be addressed swiftly and ensured effective quality assurance.

- I.29** The use of batons remained the same as at the previous inspection and we saw no examples of inappropriate use. We observed incidents of staff using batons to protect prisoners and prevent others joining in fights without striking the prisoners involved.
- I.30** Health care staff did not automatically respond to spontaneous incidents and needed to be called by an officer on the scene. We saw prisoners who needed medical attention following an assault having lengthy waits before staff could help them to health care which was poor.

Recommendation

- I.31** **A health care professional should respond to all incidents to prevent delays in the care of injured prisoners.**

Good practice

- I.32** *A senior manager had driven a significant reduction in outstanding use of force reports and held line managers to account for delays. Two use of force coordinators and an administrator quality assured the use of force to a high standard. The application of approved use of force techniques was consistently good despite the high percentage of staff who were only recently recruited.*

Segregation

- I.33** The communal areas inside the segregation wing (see Appendix IV) were clean and bright and attempts had been made to soften the environment with decorative images of trees and motivational messages. However, graffiti remained in many cells and toilets still lacked lids and required descaling. The lack of ventilation in the showers had resulted in mould and peeling paint which made them unpleasant for prisoners to use. The two exercise yards were austere and had graffiti on the walls. The relationships between staff and prisoners that we observed were polite, but most conversations took place through the door. In our survey, 54% of prisoners said they were treated well by segregation staff. Special accommodation (cellular confinement with no water or electricity) had been used once over the previous year for two hours which was comparable to other sites. The prison had since decommissioned its special cell and was considering options to use it for prisoner activities.
- I.34** At the time of inspection, 14 prisoners were located in the segregation unit. Segregation had been used 119 times in the previous six months, an increase since our previous inspection and more than comparable prisons. Most prisoners had been located there for their own protection and were awaiting transfer to another prison. One prisoner had been segregated for more than five months and there was no clear plan for his transfer. This was true of most other prisoners in the same situation and had led to boredom and frustration. Some prisons refused to accept prisoners but staff at Aylesbury did not effectively escalate these lengthy delays to senior managers which exacerbated the problem. Only nine prisoners had been moved from segregation to other prisons in the previous six months. Prison managers had not addressed the lack of regime for long-term residents, and reintegration planning was ineffective.
- I.35** Prisoners received a shower, phone call and time on the exercise yard on most days. The regime was poor and prisoners spent very long periods locked up. Education did provide

worksheets that were slipped under the door for some prisoners, but this needed to be developed further (see key concern S48).

- I.36** The regime on the segregation unit was punitive. Prisoners had to wear prison clothes and kettles and televisions were banned even for those displaying good behaviour. The recent establishment of a television room was a good idea, but there was no remote control and the application of the child lock made it impossible for prisoners to operate it. The very complicated booking system made access to the television even more difficult.
- I.37** A small selection of books was held on the wing, and prisoners could apply to the main library if they wanted a specific book rather than attend the library to browse the books themselves. It took two weeks for the book to be delivered, which was far too long.
- I.38** No risk assessments were being carried out to enable prisoners who could mix to share exercise or participate jointly in other activities. Prison managers addressed this when we pointed it out and we observed prisoners exercising in the fresh air together, which they appreciated. A weekly session for segregated prisoners was held in the gym, which was good, but no records were kept of which prisoners attended the gym or how frequently.
- I.39** Overall, segregation record keeping was poor. We found several examples of late, missing or incomplete documentation. Weekly reviews to authorise continued segregation were poorly documented and did not specify the reason for continued segregation or outline a plan for the prisoner's progress. This was a huge source of frustration for prisoners. At the time of the inspection, the prison group director's authority for segregation beyond 42 days was overdue for four prisoners, which was concerning. This was rectified when we brought it to the attention of the deputy governor. The defensible decision log for prisoners on ACCTs¹¹ who were segregated were not always updated by the duty governor and electronic case notes were not completed each day by staff who had contact with these prisoners.
- I.40** Data presented at the quarterly segregation meeting included data on ethnicity, but the disproportionate number of black and minority ethnic prisoners segregated was not investigated or addressed.

Recommendations

- I.41 Prisoners on the segregation unit should be allowed entitlements consistent with their level on the incentives and earned privileges scheme, such as wearing their own clothes and access to a television and kettle.**
- I.42 Authorisation, including by prison group directors, should be in place for all segregated prisoners.**

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

¹¹ Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

relationships. Prisoners are safe from exposure to substance use and effective drug supply reduction measures are in place.

- I.43** Prison managers had worked hard to improve the management and sharing of security information, and intelligence was processed promptly and proportionately. Security managers were seeing 30% more intelligence reports than at our previous inspection, and the backlog was minimal. A security manager conducted a daily assessment of submitted intelligence to ensure that it was prioritised appropriately.
- I.44** Many staff we spoke to were aware of potential threats. A gang database was used and staff knew how to access data to inform the safe location of prisoners with gang affiliations. However, as at the previous inspection, the database was usually referred to retrospectively and gang affiliation information did not routinely link into the safer custody team.
- I.45** There were good systems to manage extremism and risks of radicalisation. The prison had useful support from regional and national centres and corruption prevention systems were robust. Most staff we spoke to knew how to report concerns in any of these areas.
- I.46** A logical approach had been applied to managing prisoners who did not leave their wings because of the risks they presented, and reviews were on time. This was also the case for the 14 prisoners on closed visits at the time of the inspection. The decision to place a prisoner on closed visits was applied proportionately and consistently, and was regularly reviewed.
- I.47** Routine rub-down searches were carried out for all prisoners leaving residential units or work activities, but these were often rushed and not always thorough. In most cases no contraband or weapons were found and we remained of the view that staff time could have been better used in other ways.
- I.48** In contrast, intelligence-led searches to disrupt the supply of unauthorised articles, in particular drugs and mobile phones, were good. During the previous six months, there had been 124 finds, nine of which were drugs and 18 mobile phones. The netting at the perimeter remained in use which prevented illicit items from being thrown over the wall, often as part of an organised distribution of contraband. All prisoners were prevented from receiving property parcels which, while reducing supply, was an excessively punitive and unfair approach which prisoners found very frustrating.
- I.49** In our survey, 24% of prisoners said they could obtain drugs easily and 9% that they could obtain alcohol, which was similar to comparable prisons. The mandatory drug test (MDT) rate was 12% which had doubled since our last inspection and was now higher than the comparable prison rate of 9.6%. However, it was notable that the monthly rate of positive drug detections had dropped to the lowest so far in 2019 and was on a downward trajectory. The most prevalent drug was cannabis and then psychoactive substances¹² (PS). The detection rate for NPS had dropped and the prison was investigating if all substances were being detected.
- I.50** The drug supply and reduction policy was robust but the monthly meeting was not always attended by key senior managers and the minutes reflected discussions rather than outcomes. Action points were sparse and not attributed to named individuals to coordinate the work with the drug and alcohol recovery team, health care, residence and the security department. The supply reduction action plan had lost focus and did not reflect the minutes of the drug supply reduction meetings or the policy.

¹² New psychoactive substances: generally, refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vapourised and inhaled in e-cigarettes and other devices.

- I.51** The prison was conducting suspicion tests very effectively and had completed 79 in the previous six months. This represented a remarkable improvement since our previous inspection and was a far better rate of testing than we see in similar prisons. Of the 79 tested, 37% had returned positive samples which demonstrated the effectiveness of the prison's intelligence.
- I.52** A frequent testing programme had also been implemented (prisoners tested for drugs based on a combination of intelligence and previous positive drug samples). This was scrutinised by managers and prisoners were removed from the list promptly after a weekly risk assessment.

Recommendation

- I.53 All prisoners should be able to receive parcels containing clothes, footwear and books.**

Good practice

- I.54** *Security managers were rigorous in ensuring that responses to intelligence related measures such as wing restrictions and closed visits were proportionate and only applied for the length of time required to reduce risk. This ensured that these systems were fair for prisoners and visitors.*

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.55** There had been one self-inflicted death during 2019. The Prisons and Probation Ombudsman (PPO) report had been received by the establishment a few days before our inspection. Prison managers told us that they would meet after our inspection to progress the implementation of the PPO recommendations.
- I.56** The number of self-harm incidents had reduced since the last inspection and was now lower than at comparable prisons, but the number of ACCTs opened had increased. Prison managers attributed this to robust ACCT management, including timely ACCT reviews which they had worked hard to address and notably high-quality assessments. Most reviews were multidisciplinary but many documents that we looked at had no care maps or had been closed before the actions in the care map had been fulfilled. The entries in the records were observational rather than relating to the care of the prisoner. Prisoners were on ACCTs for an average of 10 days. In our survey, only 53% of those who had been on an ACCT said they felt cared for by staff, which was concerning.
- I.57** At the last inspection, the Listener¹³ scheme had only recently been introduced and at that time 18% of prisoners said they could access Listeners. Only three trained prisoners remained in the prison following the reduction in the population and it was disappointing to

¹³ Prisoners trained and supported by the Samaritans.

see no improvement in the scheme. The Listeners had no rota and very few call outs, some of which were almost two months apart. Prison managers confirmed that no records were kept of the number of prisoners requesting a Listener and that they did not consult the Listeners to identify and resolve issues that were detrimental to the Listener service.

- I.58** Constant watch had been used twice for one day each in the previous six months and one prisoner was on constant watch at the time of the inspection. The care that we observed from staff towards the prisoner was excellent. Staff were interacting with the prisoner with the cell door open and ensuring that he received everything he was entitled to. However, the cell he was occupying was filthy with cobwebs on the ceiling and old food stains on the walls. Prison leaders said they would address this when we brought it to their attention.
- I.59** The safer custody team collated a range of data, some of which were discussed at the monthly safer custody meeting. However, the data did not include levels or frequency of self-harm or identify which prisoners were affected. Minutes of the meetings were not focused on outcomes and reflected discussions rather than actions attributed to specific managers to take forward. Actions from previous meetings were noted as ongoing with no plan for their implementation.

Protection of adults at risk¹⁴

- I.60** The local safeguarding strategy had not been updated since 2017. It did not identify the prison safeguarding lead, nor did it explain how to make a safeguarding referral.
- I.61** Most staff we spoke to did not know how to make a safeguarding referral or who to speak to if they had a safeguarding concern. Prisoners who disclosed historical or current risk of abuse could not, therefore, be supported swiftly through the most appropriate channels, which was unacceptable.
- I.62** There was a tenuous link with the local safeguarding authority and prison managers had not developed stronger links. The two safeguarding referrals sent to the local authority to investigate in the previous six months had been returned to the prison for internal resolution because they were deemed unsuitable for local authority intervention.

Recommendation

- I.63** **The safeguarding policy should be reviewed and all staff should be aware of how and to whom safeguarding concerns should be reported.**

¹⁴ 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, 59% of prisoners said that most staff treated them with respect. However, 53% against the comparator of 38% said that they had experienced verbal abuse from staff, which was concerning.
- 2.2 We observed positive interactions by staff on some residential units, although the limited regime often did not provide sufficient opportunity for staff to build good relationships with prisoners. For example, the process of unlocking prisoners for daily showers on residential units and returning them directly to their cells limited meaningful engagement. This was compounded by the very restricted time for association (see key concern S49).
- 2.3 Weekly key work sessions were beginning to have a positive impact on relationships between staff and prisoners, which was promising. In our survey, 61% of prisoners who said that they had a personal or named officer said that they were helpful, against the comparator of 40%. Most prisoners to whom we spoke were positive about the support they received from their key worker. Most records that we looked at on P-Nomis (electronic prison records) reflected this: they were detailed and demonstrated that staff knew the individual prisoners they were supporting well.

Daily life

Expected outcomes:

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

Living conditions

- 2.4 Living conditions for prisoners had improved since the previous inspection. Three of the older wings, A, C and E, had been closed following the reduction in the population. Some areas on the remaining older units, F and G wings, were worn and in need of refurbishment. External exercise areas were well maintained (see Appendix IV) and communal living areas were reasonably clean.
- 2.5 Association areas on each wing were reasonably well equipped. F and G wings also had smaller association rooms containing a range of books. However, some association areas were messy, wing stairwells were occasionally dirty and some hallways needed painting. On the main landings, some plastic privacy screens for telephone use were broken. The quality of display notices varied across the wings with some up-to-date and others not.

- 2.6** All cells were now single occupancy which was good. Most cells were clean and adequately furnished with a cabinet, chair and curtains and all toilets had a lid. Cell windows were in reasonable condition. Prisoners did not have bins in their cells, which sometimes resulted in a build-up of rubbish. Offensive graffiti remained on many cell doors and walls, some of which had been there for long periods. Paint was peeling from some cell doors and painting projects had been started to address this.
- 2.7** The 12 communal showers on F and G wings had been refurbished (see Appendix IV) and were now clean and decent. However, the showers on B and D wings were shabby with some graffiti. The flooring outside some showers needed replacing.
- 2.8** Prisoners now had improved access to everyday essentials. In our survey, prisoners were more positive about being able to access clean sheets and clothes and cleaning materials than at comparator prisons and the previous inspection. Prisoners had recently been issued with tea towels to dry their bowls and plates, rather than tissue paper. Access to daily showers had improved and, in our survey, 87% of prisoners said they could shower each day compared to 25% at the previous inspection.
- 2.9** Prisoners on main wings could wear their own clothes and clothes parcels for enhanced prisoners were due to restart imminently. Not all prisoners had raincoats.
- 2.10** Random manual checks of cell bell response times had recently been implemented, but it was too early to know whether this provided effective oversight. In our survey, 19% of prisoners stated that their cell bell was normally answered within five minutes. Automatic monitoring (only in place for B wing) of response times showed that some were unanswered for more than five minutes. The longest we found was 6 minutes 14 seconds.

Recommendation

- 2.11** **The response times to cell bells should be monitored effectively to ensure that prisoners do not wait for more than five minutes.**

Residential services

- 2.12** The quality and variety of the food remained reasonably good. In our survey, 48% of prisoners said the food was very or quite good. There was a sufficient range of food to meet prisoners' dietary requirements. Breakfast packs were issued the day before they were due to be eaten, and lunch was served at approximately midday. Prisoners received a hot meal in the evening at about 5pm.
- 2.13** Serveries on F and G wings had been refurbished (see Appendix IV) and cleanliness had improved overall. Serveries were supervised, but some servery workers did not always wear appropriate protective clothing. The main kitchen was well equipped, although some areas were untidy and in need of cleaning. The prisoners' changing room was dirty and unkempt. There was appropriate separation of halal and meat cooking utensils. Kitchen workers were risk assessed and received training in level 1 food safety and hygiene.
- 2.14** Most prisoners continued to eat all their meals alone in their cells. There were few opportunities for prisoners to prepare food for themselves or to eat together.
- 2.15** The canteen and shop arrangements were adequate. In our survey, 57% of prisoners said that the shop and canteen sold the things that they needed against 35% at the previous inspection. New arrivals could buy basic provisions such as tea and coffee but had to wait to

place shop orders for other purchases. The prison provided a weekly Argos collection service for prisoners to avoid delivery charges, which was good.

Recommendation

2.16 Prisoners should be able to eat in association. (Repeated recommendation 2.73)

Prisoner consultation, applications and redress

- 2.17** Consultation had improved and had effected changes for prisoners, for example improvements to the outside exercise equipment. A monthly prison council meeting was facilitated by User Voice (which aims to engage people involved in the criminal justice system to encourage reform). The meetings were chaired by a governor and attended by representatives from each wing. Prisoners were consulted on their views through a survey and themes were discussed at the council meeting.
- 2.18** Organisation and oversight of the applications process had improved recently. In our survey, 81% of prisoners said that it was easy for them to make an application and 59% of those who had made an application said they were usually dealt with fairly against respective comparators of 68% and 44%. Representatives from each wing could distribute application forms each day and there was a tracking system to monitor response times. Some responses still took too long, particularly from departments outside the residential units.
- 2.19** During the previous six months, 558 complaints had been received, a significant increase and very high in comparison to similar establishments. In our survey, only 15% of the prisoners who had made a complaint said that they were usually dealt with within seven days. We submitted two complaints which did not receive a response during the week of the inspection.
- 2.20** Responses to complaints varied: some were of reasonable quality, but others did not address the issues raised. Ten per cent of complaints were quality assured. It was concerning that complaints about discrimination were not routinely transferred on to a discrimination incident report form (DIRF) and followed up by the equality team (see key concern S50). The responses to confidential access complaints were not always adequate. Most prisoners we spoke to had little confidence in the complaints system.
- 2.21** Relevant legal sentencing books were available in the library together with a 'how to guide' for prisoners on applying to the Criminal Cases Review Commission for further legal advice after sentencing. Legal visits still look place in the main social visits hall which risked compromising confidentiality and was inappropriate.

Recommendation

2.22 A private area should be made available to prisoners for legal visits.

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 characteristics¹⁵ 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

- 2.23** The management of equality was inadequate and equality work had been neglected since our previous inspection, which was unacceptable. There was no up-to-date equality policy and consultation on equality was poor, with no forums for prisoners in protected characteristic groups. The establishment was failing to deliver its Public Sector Equality Duty, which requires public bodies to eliminate discrimination and advance equality of opportunity for all, including those in protected characteristic groups (see key concern S51).
- 2.24** Equality monitoring data on the treatment of prisoners in protected groups were not scrutinised effectively. Our analysis of data indicated disproportionate treatment of certain groups, for example proven adjudications showed an over-representation of black prisoners. These trends had not been investigated or addressed.
- 2.25** Equality meetings had been held every two months throughout 2019. However, the meetings lacked purpose and direction and did not address key basic deficiencies in provision, such as ineffective analysis of equality data and poor consultation. There were no trained equality prisoner representatives and no contributions from prisoners to the meetings. No equality action plan had been produced and omissions had not been addressed.
- 2.26** The equality team consisted of a head of function, a custodial manager and an equality officer. Routine redeployment of the team severely undermined the effectiveness of the function. There had been no staff training in equality since our previous inspection.
- 2.27** During the previous six months, there had been 14 discrimination complaints. Complaint boxes on the wings did not contain any blank forms and in recent weeks no discrimination complaints had been submitted. Management of these complaints was chaotic: about half the 14 had not been investigated or responded to and responses to the remainder were unsatisfactory and indicated the inadequacy of investigations.
- 2.28** Black History Month had been celebrated, but there was no promotion of equality work for other groups.

Protected characteristics

- 2.29** Consultation with prisoners from protected groups had not taken place and therefore the prison could not be confident that all prisoners received equal access to services and were treated fairly.
- 2.30** At the time of the inspection, 60% of the population were from a black and minority ethnic background, and 30% were white. Equality monitoring data indicated under-representation of black prisoners on the enhanced level of the behaviour management scheme, but this had not been analysed or investigated.
- 2.31** In our survey, black and minority ethnic prisoners responded more negatively in some areas than white prisoners, for example 19% of black and minority ethnic prisoners said that staff

¹⁵ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

helped them with their problems on arrival and 58% said they had been restrained in the last six months against the comparator for white prisoners of 31%.

- 2.32** Muslim prisoners comprised 38% of the population. They responded more negatively than non-Muslims in our survey with 66% saying they were treated well in reception compared with 90% of non-Muslims. Similarly, only 8% of Muslims compared to 41% said they had been treated fairly in the behaviour management scheme.
- 2.33** In our focus groups for black and minority ethnic and Muslim prisoners, they spoke of negative experiences, particularly in relation to staff treatment and attitudes. The lack of consultation with prisoners in protected groups left the establishment poorly placed to understand these negative perceptions.
- 2.34** The identification of prisoners with a disability was ineffective. We requested an up-to-date list, but this was not provided. The daily prison briefing recorded one prisoner with a hearing impairment requiring a personal emergency evacuation plan (PEEP), but wing staff told us of a second prisoner with a PEEP who used a crutch to aid walking. Night staff were only aware of the first prisoner, but could not locate his plan.
- 2.35** At the time of the inspection, two prisoners were from a Traveller background. There was no provision to support this group.
- 2.36** In our survey, 2% of prisoners said they were gay or bisexual and a further 2% identified themselves as transgender or transsexual. The prison had no record of these prisoners and support for them was deficient.
- 2.37** The needs of foreign national prisoners were not being met and no immigration advice and guidance was provided. The Home Office immigration enforcement officer did not attend regularly and no independent legal advice was available for foreign national prisoners. In our survey, no foreign national prisoners said that staff had helped them with their problems (see key concern S51).

Faith and religion

- 2.38** Faith provision was very good. The managing chaplain continued to give strong leadership and compassionate and consistent pastoral care was provided.
- 2.39** The chaplaincy consisted of an extensive team of 30 chaplains covering numerically larger and smaller faiths. A further 10 chaplains volunteered for Sunday services. All prisoners had access to a chaplain of their faith and a bereavement counsellor attended weekly for counselling sessions. A comprehensive induction, including a compact agreement and literature on the appropriate religion, was delivered within 24 hours of arrival.
- 2.40** In our survey, 73% of prisoners said that their religious beliefs were respected and 79% that they were able to speak to a chaplain of their faith in private.
- 2.41** The chaplaincy was well integrated and attended all key meetings. Prisoners who were subject to an ACCT¹⁶ and those who were segregated were visited each day by a member of the chaplaincy.
- 2.42** A number of programmes were offered by the chaplaincy, including an Alpha course (a programme written by Alpha UK to explore the basics of the Christian faith) and Sycamore Tree (a victim awareness course focused on restorative justice). The fathers' day event, an

¹⁶ Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

excellent initiative by the chaplaincy to build and maintain links with prisoners' children, had only been held once since the previous inspection (see paragraph 4.7).

- 2.43** The visitor volunteer scheme supported prisoners who were socially isolated or self-isolating. At the time of the inspection, there were four volunteers and one prisoner was receiving this service.

Good practice

- 2.44** *An extensive team of chaplains and a bereavement counsellor delivered comprehensive, compassionate and consistent pastoral care to prisoners.*

Health, well-being and social care

Expected outcomes:

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

- 2.45** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)¹⁷ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. The CQC found there were no breaches of the relevant regulations.

Strategy, clinical governance and partnerships

- 2.46** Health care services were commissioned by NHS England and provided by Care UK Health and Rehabilitation Services Ltd (Care UK). Care UK subcontracted a range of services, including secondary mental health services to Barnet, Enfield and Haringey Mental Health NHS Trust (BEH). Inclusion, part of Midland Partnership NHS Foundation Trust, were subcontracted to provide psychosocial services delivered by the drug and alcohol recovery team (DART).
- 2.47** A recent health and social care needs analysis was being used to develop the service and additional funding had been agreed to enhance the mental health provision. Support for prisoners who had experienced sexual abuse was not covered in the needs analysis and the need for this service was not met.
- 2.48** Some aspects of strategic governance and partnership working had been ineffective but there had recently been a renewed focus on improvement. Access to health care had started to improve but attendance and ready access to the health centre and treatment were continuing concerns.
- 2.49** There was an emphasis on shared learning from incidents and consultation with patients, but these were not yet formally embedded. We saw evidence of changes to the service following learning and consultation. Only two local concerns and one complaint had been submitted in the previous six months. These had been resolved but written responses to the concerns did not explain escalation if the prisoner was dissatisfied with the response. There was no quality assurance, but this was rectified during the inspection.

¹⁷ 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>.

- 2.50** There was a small health care team with some vacant posts, which were filled by long-term agency staff and overtime. Staff were skilled and well supported. There was good compliance with mandatory training, appraisals and supervision for all teams, including reflective practice sessions.
- 2.51** The health care facilities were clean with appropriate infection prevention and control arrangements. Health care staff used the limited clinical space effectively. Health equipment was regularly checked and calibrated. Nurses were regularly present on the wings and spoke to prisoners who did not attend appointments. There were no treatment rooms on residential units.
- 2.52** The health care waiting area was cold and the television supplying health promotion information was broken. Two officers were now allocated to health care, but the waiting area was not always well supervised. Waiting times before and after appointments had decreased since the last inspection, but some prisoners still waited too long. We observed crowding around the small medicine hatch while medicines were administered and patients were waiting for their appointment. Work on creating a separate medicine administration room to improve this situation had started more than two years ago but was still not completed (see key concern S52).
- 2.53** The rigour of checks on emergency equipment varied. Well-equipped bags in health care were checked regularly but the two automated external defibrillators (AEDs) owned by the prison had defibrillator pads which had expired in 2016, demonstrating poor oversight and irregular checks. Health staff were up to date with intermediate life support training.
- 2.54** Many discipline staff we spoke to were uncertain where to locate an AED in an emergency. This was particularly concerning as health staff were not on site at night and it had been raised as a concern following the most recent death in custody. The communications room did not call an ambulance until the health team had arrived and verified the need for an ambulance. This posed a significant risk.
- 2.55** Prisoner consent was recorded on SystmOne (electronic clinical records) and nursing staff were familiar with their safeguarding responsibilities and attended relevant training. The clinical records that we reviewed were of a good standard. Each team regularly sampled clinical records to assess quality and drive improvement, which was positive.
- 2.56** The multi-professional complex case clinic (MPCCC) met each week with representatives of all health teams and specialisms. They supported clinicians in making decisions and helping complex patients to improve their health and wellbeing. The MPCCC had been extended to include psychology and the Aylesbury Pathway Service to ensure that patients were receiving the appropriate care from the most suitable service with clear care planning, case management and multi-professional input.

Recommendation

- 2.57** **A local operating instruction and improvement plan should be produced as a matter of urgency to ensure that there is an effective joint response to local emergencies.**

Good practice

- 2.58** *The MPCCC meeting consisted of representatives of all health and specialist teams based in the prison who focused on patients with complex needs to ensure the most suitable care for the individual.*

Promoting health and well-being

- 2.59** There was a collaborative approach to health promotion, including weight management sessions in the gym and sessions for prisoners under the Pathways service. Health promotion days had recently been facilitated, including a day in the segregation unit, which was positive. The DART team delivered responsive health promotion campaigns linked to security information. Relevant health promotion material was displayed in the health centre and on the units.
- 2.60** Despite a concerted effort by health care staff to offer and promote age-appropriate vaccinations and screening, including for chlamydia, the take-up was low.
- 2.61** Sexual health services were available on site. The training for clinical staff delivering these services was not equivalent to community primary sexual health services, but suitable training had been booked. Condoms were available from the health centre but were not well advertised. External appointments could be made for complex sexual health services, but this reduced the confidentiality for the patient who had to be accompanied by prison staff.
- 2.62** The health care team had useful links with Public Health England. Communicable disease outbreak plans were in place and accessible to staff.
- 2.63** Telephone interpreting services were available and health literature could be translated if needed.

Primary care and inpatient services

- 2.64** Health screening of new arrivals was well managed by a registered nurse, and early identification of risk ensured prompt access to continuing support. The health screening room in reception contained the only entrance to the staff toilet and was unsuitable for private consultations. The relocation of the room was in progress.
- 2.65** A secondary health screening was offered promptly but was not always taken up within the seven days outlined by NICE guidance. Health care staff looked into the reasons for this and rebooked appointments (see key concern S52).
- 2.66** Prisoners could access health services by speaking to health staff or using pictorial application forms which were collected each day. Each wing had a peer wellbeing representative, who delivered the appointment slips in confidential envelopes. Health care staff met the representatives regularly and their role was to become more formal and paid.
- 2.67** There was a suitable range of primary health care services, including the optician and physiotherapist, and waiting times were reasonable. Access to nurse triage was usually prompt and prisoners needing to see a GP were allocated an appointment within three days.
- 2.68** Nursing staff were available between 7.45am and 8.00pm from Monday to Thursday, between 7.45am and 6.00pm on Friday and between 8.30am and 5.45pm at the weekend.

- 2.69** Prisoners on the segregation unit were seen each day by a nurse and three times a week by a GP.
- 2.70** The few prisoners with long-term conditions received regular reviews and a good standard of care. Health staff liaised with the GP and community specialists to ensure a coordinated approach.
- 2.71** Work was in progress to reduce the high rate of non-attendance at some clinics which wasted valuable clinical time. Some prisoners cited a fear of violence in the waiting room or on the way to health care as a reason for missing appointments. We encountered a few prisoners for whom this had had a detrimental effect on their health (see key concern S52).
- 2.72** There was an effective process for monitoring external hospital referrals. The reasons for rescheduling appointments were recorded and few were cancelled because there were no officer escorts.

Social care

- 2.73** The memorandum of understanding with Buckinghamshire County Council had recently been updated. We tested the referral process which we found to be protracted, although the health team were responsive when we spoke to them. The Council allocated a duty social worker to attend on receipt of a referral. No domiciliary care providers had been specified, but the Council indicated that there were several providers if required. There was a low level of need and health staff were confident that the detailed screening carried out on reception would identify need. Prison staff had a lack of understanding of social care and the referral process and were confused about safeguarding processes which needed to be addressed.

Mental health care

- 2.74** Care UK employed one primary mental health nurse. Secondary care was delivered on weekdays by an in-reach mental health team from BEH which included mental health and learning disability nurses and a psychiatrist for two days a week. The small team were skilled and used motivational techniques to build rapport and trust with patients. However, the team did not include a speech and language therapist, counsellor or psychologist. Funding had been agreed to increase provision and there was a new focus on joint work with Pathways and other health teams. There was a comprehensive range of self-help material.
- 2.75** The primary mental health caseload consisted of six patients and the in-reach team 10, all of whom received regular contact appropriate to their risk and needs. Two patients were being supported effectively under the care programme approach (CPA), which ensures continuity of care for patients with mental illness.
- 2.76** The Pathways service was separately commissioned by HMPPS and NHS England specialist commissioners. They provided support for prisoners with high risk of harm and longstanding emotional problems (see paragraph 4.28). An in-reach nurse co-facilitated some DART and Pathways groups with plans to introduce additional sessions.
- 2.77** All referrals to mental health services were triaged and assessed promptly. Prisoners who were prescribed medicines for mental health conditions were monitored.

- 2.78** Mental health nurses regularly attended ACCT reviews and contributed to the management of vulnerable prisoners, helping prison staff to understand communication barriers and individual needs.
- 2.79** Mental health nurses contributed to basic suicide and self-harm training for staff. A mental health first aid course had not been delivered because prison officers had not been available to attend.
- 2.80** There had been no transfers under the Mental Health Act during 2019, although four referrals had been made for patients with complex mental health and learning disability needs. Decisions were awaited following external assessment of two patients who had been referred in September 2019.

Substance use treatment¹⁸

- 2.81** A drug strategy and needs assessment had been carried out recently which informed joint working in the prison. Regular substance misuse and supply reduction meetings were well structured and attended and were a good forum for information sharing.
- 2.82** All new arrivals were assessed and given harm reduction information. Two peer mentors supported prisoners in recovery and attended substance misuse meetings.
- 2.83** The clinical substance misuse service was delivered by Care UK, but there had been no clinical patients for more than three years. There was no stock of opiate substitution medicine and the service was not therefore ready to treat a prisoner arriving without notice. There was an appropriately trained GP and staff were skilled to issue this medication but were less confident to carry out wider health checks associated with opiate use. There was good communication among teams, particularly concerning prisoners suspected of using spice¹⁹ and we observed a joint CPA review with the mental health in-reach team.
- 2.84** The DART team delivered a responsive service and offered good psychosocial support. There were approximately 26 referrals a month to the DART team and prisoners were seen within 15 working days. Caseloads had reduced following the decrease in the population and the active caseload was 56 compared with 92 at our last inspection. Some groups, such as psychosocial groups focusing on recovery and harm minimisation, were proving difficult to facilitate because there were fewer prisoners on site and competing regime requirements. DART staff facilitated individual sessions as an alternative, which were effective. The 16-session recovery programme had been delivered three times since January 2019. New referrals were streamed through the MPCCC meetings to prevent duplication and facilitate joint working.
- 2.85** SystmOne had recently been introduced and staff were being trained at the time of our inspection. Paper records were comprehensive and demonstrated good care planning and interventions.

Medicines optimisation and pharmacy services

- 2.86** The pharmacy room was clean and tidy. Daily monitoring of drug refrigerators ensured that heat-sensitive items were stored within the correct temperature range. The room

¹⁸ 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).

¹⁹ A synthetic drug that mimics the effects of cannabis but is much stronger, with no discernable odour and unpredictable effects.

temperature was also recorded each day. All medicines were stored securely and medicine cabinets were in good order.

- 2.87** Individually labelled medicines were dispensed promptly by Sigma Pharmacy with patient information leaflets. There was no pharmacy team at the prison and medicines were managed by nurses. However, following a recent audit, the senior nurse had arranged for a pharmacy dispenser from HMP Springhill to attend every three weeks to complete regular audits of the stock and scrutinise the pharmacy processes. This was positive but professional pharmacy advice was still not available to patients.
- 2.88** All prisoners received an in-possession medication risk assessment on reception. The in-possession policy allowed prisoners to take responsibility for appropriate medication, such as antibiotics, inhalers and ointments, following a risk assessment. At the time of the inspection, 13 patients were receiving supervised medication. Missed doses were followed up for prisoners on supervised or in-possession medication. Controlled drugs were prescribed, principally for ADHD, and were received on a named patient basis and administered under supervision.
- 2.89** Medicines were prescribed and recorded on SystmOne. Medicines were administered competently three times a day and the team had good rapport with the patients. Privacy at the hatch was frequently compromised (see paragraph 2.55 and key concern S52).
- 2.90** There was a good range of policies and operating procedures and a reasonable range of patient group directions which allowed nurses to administer specific medications, including vaccinations and treatments for minor ailments, without an individual prescription.
- 2.91** Medicines for prisoners on the segregation unit were taken in a locked box with a printed prescription and administered on the unit.
- 2.92** A medicines management meeting focused appropriately on key issues, but attendance was poor. Prescribing data were analysed at the meetings and medicine management incidents were discussed. Prescribers used an agreed formulary.

Dental services and oral health

- 2.93** One dental session was delivered each week by a dentist and dental nurse from Time for Teeth, a subcontracted service which offered a range of community equivalent treatments. New referrals were now seen for routine assessment within six weeks which was an improvement. However, subsequent treatment appointments took about three months, which was excessive. The dental suite was clean, with modern equipment and a separate decontamination suite. However, the x-ray machine had not been serviced since May 2018, which was concerning. This had not been formally escalated by Time for Teeth to the main health provider and the prison.

Recommendations

- 2.94 Prisoners should receive dental treatment within a reasonable timescale.**
- 2.95 Governance arrangements should ensure effective oversight of maintenance checks and timely escalation of risks associated with dental equipment.**

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 Time out of cell for most prisoners remained poor despite a 50% reduction in the population. During our roll checks we found 33% of prisoners locked up during the core day. This was too many for a prison holding a young, long-term population (see key concern S53).
- 3.2 In our survey, 37% of prisoners said that the unlock and lock-up times were usually adhered to against the comparator of 58%. No prisoners said they had association more than five days in a typical week.
- 3.3 A revised daily regime introduced in May 2019 had delivered welcome improvements to the core day, particularly in engaging unemployed prisoners (see paragraph 3.41). All prisoners now received a daily shower and weekly visits to the gym and library. However, association was still not provided on weekday evenings and some prisoners were still only unlocked for less than an hour each day. At weekends, a double association period of 5.5 hours was scheduled, but we found that most prisoners were only receiving 45 minutes (see key concern S53).
- 3.4 In April 2019, the management of the library had transferred to Milton Keynes College and it was staffed full time on weekdays by a librarian and a library assistant. The library was warm and welcoming and well organised.
- 3.5 Attendance at the library had improved since our last inspection and additional time was now offered for each session. In our survey, 53% of prisoners said they went to the library once a week or more against the comparator of 31% and 23% at the previous inspection.
- 3.6 The library had well stocked shelves, including fiction, audio books, legal texts and some texts in different languages. However, the range of books, for example fiction, did not always appeal to the diverse population. In our survey, only 41% of the black and minority ethnic population said there was a wide enough range of materials to meet their needs. This was confirmed in our focus group.
- 3.7 Working relationships between the library and the education provider had improved and teaching staff had been consulted about stock purchases.
- 3.8 A number of activities were offered to promote literacy and reading. Good partnership working with the Literacy Trust had resulted in the supply of 800 books a year, some of which were used to create wing libraries. Some of the titles had been selected to relate to the client group, for example books written by ex-offenders who had turned their lives around. In the main library, Storybook Dads (an initiative to help parents in prison to record bedtime stories and messages for their children) was hardly used and had recently been extended to include younger siblings.

- 3.9** Gym facilities were good with a range of cardiovascular and strengthening equipment. Prisoners had good access to a range of indoor and outdoor sports facilities, which were well maintained. The provision was led by PE staff who were passionate about delivering a range of health and wellbeing activities for both prisoners and staff. All prisoners received an appropriate induction before using the gym and exercise equipment.
- 3.10** A good range of classes was provided throughout the week which reflected the needs of the population. However, classes during the core day were not fully attended. Employed prisoners attended a gym session twice a week at the end of their working day. Prisoners complained to us that they were not able to eat between work and gym sessions, which meant that they had had no food for about eight hours. This was not conducive to healthy living.
- 3.11** The team offered a good range of courses accredited to level 3, the Duke of Edinburgh bronze award and a number of clubs such as football and Parkrun. PE staff had recently introduced circuit training for segregated prisoners. This was a progressive initiative which was not yet fully embedded.
- 3.12** The PE team had a good working relationship with other departments in the prison, including health care (see paragraph 2.59).

Education, skills and work activities (Ofsted)²⁰

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.²¹

- 3.13** *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>Good</i>
<i>Quality of education, skills and work provision, including the quality of teaching, training, learning and assessment:</i>	<i>Good</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

- 3.14** Prison leaders and managers had failed to provide sufficient full-time purposeful activity places for the population. About one in five prisoners were unemployed, which was too

²⁰ 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.

²¹ In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

many. Prison leaders delivered a limited part-time regime for most prisoners and too many were confined to their cell for long periods during the core day (see key concern S56).

- 3.15** There were limited opportunities for prisoners employed in prison industries to study a qualification, and the valuable skills they had developed were not externally accredited. This applied to prisoners working in the bicycle repair workshop, the prison gardens, laundry, recycling facility and the commercial print shop (see key concern S55).
- 3.16** Quality improvement arrangements had improved since the previous inspection and were now effective. College managers made better use of observations of teaching and learning to support teachers. They provided teachers with useful and regular constructive feedback to help them improve. The attention given to teachers' performance in the classroom had led to a significant improvement in the quality of learning sessions, particularly English and mathematics.
- 3.17** The quality improvement plan contained clearly identified actions, responsibilities and timescales. Many of the recommendations identified at our previous inspection had been achieved.
- 3.18** The self-assessment report made suitable use of data to support judgements about the quality of provision. However, it gave insufficient weight to weaknesses, particularly in relation to the number of jobs and activity places available in the prison.
- 3.19** Prison leaders placed a high priority on developing prisoners' skills in English and mathematics. This had contributed to good rates of qualification achievements in these subjects. Prison and college managers worked well together, which had resulted in a range of improvements.
- 3.20** Efforts to tackle poor attendance by prisoners had led to some improvement, but it was not yet good in all areas.
- 3.21** Managers monitored the performance of different groups well. There were no significant differences in achievement between different groups.
- 3.22** The curriculum was based on a suitably detailed needs analysis of the population. Prisoners could participate in an appropriate range of learning, skills and work activities. The number of prisoners studying the wide range of Open University and distance learning courses was relatively high and had increased since the last inspection. The virtual campus ((internet access for prisoners to community education, training and employment opportunities) enabled them to make use of online learning resources and to write and submit assignment work.
- 3.23** The allocation process was effective in scheduling new arrivals promptly to suitable education classes or work roles. However, the lack of available activity places severely hampered the extent to which prisoners could benefit from purposeful activity.
- 3.24** College staff provided suitably comprehensive information, advice and guidance on jobs and careers in custody and helped prisoners to understand how they could use their time in prison productively. A very small number of prisoners were discharged from the establishment and no pre-release course was offered.
- 3.25** Leaders had recently appointed an information, advice and guidance worker to carry out one-to-one interviews with each new prisoner. Individual action plans were drawn up to identify and record prisoners' long-term aspirations and career goals while in custody. It was too early to assess the impact of this initiative.

- 3.26** Prison managers ensured that the few pay disparities did not act as a disincentive to prisoners who chose to attend learning, skills and work activities.

Quality of provision

- 3.27** Most teachers planned interesting lessons which engaged and motivated prisoners. They questioned prisoners carefully to check and reinforce their understanding and adapted learning to enable all prisoners to progress and achieve.
- 3.28** Prisoners on most courses could articulate clearly what they had learned. Those on the barbering course could describe how to make different styles of plait and what shampoos to use for different types of hair. Prisoners on business and information technology courses could use formulae in spreadsheets and explain how to create business plans.
- 3.29** Teachers gave useful verbal feedback on prisoners' work which helped them to develop their knowledge and consolidate the skills they had learned.
- 3.30** College staff identified prisoners' additional learning needs during induction. They ensured that those who needed extra help received it promptly. Teachers made good use of the available information on prisoners' additional needs when planning and teaching sessions. They deployed the learning support assistant well to help prisoners with activities during learning sessions.
- 3.31** The standard of work produced by prisoners in English and mathematics met the requirements of the awarding body. Prisoners in barbering, horticulture and print design produced practical work of a high standard.
- 3.32** Teachers were well qualified and experienced, particularly teachers of English and mathematics. They used their skills and knowledge to teach good-quality lessons that helped prisoners to progress and achieve well.
- 3.33** Teachers promoted equality and diversity effectively through the curriculum. They used topics such as Black History Month to engage prisoners in discussions about diversity and discrimination in modern Britain. Teachers encouraged prisoners to listen to the views of others and to understand the values of tolerance and respect for alternative opinions.
- 3.34** Staff promoted healthy living effectively in lessons, for example gym instructors delivering fitness courses discussed with prisoners the effects of steroid abuse and how a healthy lifestyle can maintain heart function.
- 3.35** Teachers did not always give prisoners clear feedback on their written work. Feedback was often generic and did not identify how prisoners could improve their written work to gain higher grades (see key concern S54).
- 3.36** A few teachers did not check prisoners' learning carefully enough or question them effectively to help them explain what they had learned. They allowed more confident prisoners to dominate and did not check adequately the progress of quieter members of the class. As a result, a few of these prisoners made slow progress (see key concern S54).

Personal development and behaviour

- 3.37** Most prisoners arrived at education, training and work punctually. They were ready to work and developed confidence through their participation in learning.

- 3.38** Prisoners worked well with each other and with teachers. They listened to others carefully and took responsibility for their own learning.
- 3.39** Most prisoners behaved well in education, training and work. They achieved qualifications within the planned period and were well prepared for the next stage of their time in custody.
- 3.40** Most prisoners were positive about their education and work and responded well to instructions from teachers. They took pride in their practical work and developed suitable personal and social skills to aid their rehabilitation.
- 3.41** The college's learning mentor and workshop facilitators worked effectively with teachers, instructors, education staff and uniformed prison staff to engage unemployed prisoners in education, work and training. They improved prisoners' participation in education and training and helped them to understand the value of the skills they had learned.
- 3.42** Prisoners' attendance at purposeful activity had improved since the previous inspection but was not yet good.

Outcomes and achievements

- 3.43** Achievement rates for most classroom-based and vocational qualifications were very high. There were no significant differences in achievement between different groups of prisoners, including those with special educational needs. All groups of prisoners developed vocational skills and achieved well, which prepared them for their transition to an adult prison.
- 3.44** Achievements in functional skills qualifications in English and mathematics had improved significantly since the previous inspection. They were now high at entry levels and at levels 1 and 2.
- 3.45** The number of prisoners who completed their courses was high.

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 Since the previous inspection, in-cell telephones had been installed which were appreciated by prisoners. In our survey, 96% said they were able to use a phone every day against the comparator of 68%.
- 4.2 Prison data suggested that 35% of prisoners were more than 50 miles from home and, in our survey, only 34% said it was easy for their family or friends to get to Aylesbury.
- 4.3 PACT (Prison Advice and Care Trust) was commissioned to manage the visitors' centre. They provided refreshments and gave useful information and support to visitors. PACT workers also supported individual prisoners to maintain family ties or parental rights. As part of their strategy for families work, the prison had organised a visitors' forum with PACT for the first time. Actions from the forum were being taken forward.
- 4.4 Visits could be booked online or by telephone for sessions on four weekday and weekend afternoons. Weekday visits at the time of the inspection were not fully booked. Staff said that this was common since the reduction in prisoner numbers and that weekend visits sessions were busier.
- 4.5 Visits times had changed since the previous inspection and they now started promptly. We saw respectful interaction between staff and visitors, but in our survey only 56% of prisoners who had visits said their visitors were usually treated respectfully by staff against the comparator of 76%.
- 4.6 The first-floor visits hall was a reasonable environment with a small play area for children and a tea bar with a range of hot and cold options to suit dietary needs. Alternative visits facilities were available for visitors or prisoners who could not get to the visits hall. Closed visits booths had been refurbished but were still a poor environment for visits.
- 4.7 Family visits or celebration events took place once a month. These were open to all prisoners, but there was scope to improve attendance at some events. Managers had plans to do this and to extend their use of letters to families when a prisoner had achieved something of note. The fathers' day event, an excellent initiative by the chaplaincy to build and maintain links with prisoners' children, had only been held once since the previous inspection.

- 4.8** The only parenting course was an in-cell package offered by Milton Keynes College and take up of 'Storybook Dads' was limited (see paragraph 3.8). The Aylesbury Pathways Service delivered individual family therapy to prisoners on their caseload who required it. Families were invited to participate in appropriate cases.

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.

- 4.9** The reducing reoffending strategy had been updated in August 2019. A good range of partner organisations contributed to reducing reoffending work. The strategy was managed at a quarterly strategy meeting which had reasonable attendance from Aylesbury managers but less from partner organisations. A recent survey of prisoners was being used to develop an action plan which offered useful pointers to prisoners' perceptions of weaknesses in the provision. However, this afforded only a limited view of prisoners' needs and was not supported by an analysis of data about the population, such as offences, length of sentence and protected characteristics. Nearly all the population were serving sentences of four years or more and 84% were assessed as presenting high or very high risk of harm to others.
- 4.10** At the time of the inspection, 27% of prisoners did not have an OASys (offender assessment system) of their risks and needs. Too few of the remainder had had their assessments reviewed after a significant event such as a move to Aylesbury. Community offender supervisors were responsible for most of these prisoners. If there was no OASys, prison offender managers contacted community offender managers but often to no avail. We were not convinced that the escalation process between the establishment and the National Probation Service was sufficiently robust to overcome this systemic weakness (see key concern S57).
- 4.11** There were several vacant posts in the offender management unit (OMU). The offender management in custody arrangements²² (OMiC) required two heads of the OMU, a senior probation officer and a prison manager. The prison manager post had not been occupied for nearly three years.
- 4.12** There were also vacancies in the prison offender manager (POM) group with only one full-time and one part-time probation officer and three non-operational prison staff in post. They were all managed by the senior probation officer. The two probation officers were responsible for the high and very high risk of harm prisoners. One had a case load of 115 and the other more than 50. The three prison staff helped them to manage their cases by undertaking much of the contact with prisoners while managing their own caseloads of medium- and low-risk prisoners. OASys assessments were completed for these prisoners when other work pressures allowed, with quality assurance by the probation officers. All the POMs received regular professional supervision by the senior probation officer, which was creditable. A small administrative support group completed the OMU team. There was a vacancy in this group which compounded the pressures on the OMU, but staff were committed to providing the best possible service (see key concern S58).

²² Following a review of offender management in 2015, HMPPS began to introduce a new offender management model from 2017. The new model is being implemented in stages, starting with new prison officer key workers. The second phase, core offender management, and the introduction of prison offender managers (POM) is being introduced gradually, from 2019.

- 4.13** The OMU team had limited time with prisoners to ensure progress in reducing their risk of harm to others and the likelihood of further offending. The probation officers spent most of their time on parole cases and public protection. Effective communication was also hampered by the limited interview facilities.
- 4.14** We reviewed 12 cases which included prisoners who had recently arrived or were due for release in the next three months or were serving a long sentence and had been held at Aylesbury for more than a year. There was no up-to-date OASys in five of the cases and we were not confident that all risks had been properly identified. In some cases, there was no comprehensive sentence plan or focused objectives to address offending behaviour in a timely manner. Despite this, prisoners were able to access offending behaviour work with the Pathways team and the psychology team.
- 4.15** To mitigate the dearth of OASys assessments, the establishment had developed its own basic assessment regarded locally as a 'make do and mend' approach. This was completed promptly when prisoners arrived and discussed at the monthly interdepartmental risk management team (IRMT) meeting where decisions were made on how to address the identified needs. A basic sentence plan was prepared for each prisoner based on these assessments. Similar arrangements had been in place at the previous inspection in 2017, but we remained of the view that these pragmatic initiatives did not fully take the place of the comprehensive and nationally approved assessment tool. The very recent transfer to Aylesbury of responsibility for preparing OASys assessments under OMiC afforded the opportunity to improve this situation but we were concerned that resources in the OMU were not adequate to manage the increased workload (see key concern S58).
- 4.16** Operational staff had been trained to take on the role of keyworkers to help prisoners to progress. Records in the 12 cases that we reviewed indicated that this was working well. Contacts were regular and detailed notes helped prisoners to progress, with keyworkers referring prisoners to programmes. Keyworkers were located in the OMU office and provided a developing interface between prisoners and their POMs.
- 4.17** At the time of the inspection, there were 36 prisoners with indeterminate sentences, 17% of the population. Family days had been introduced twice a year for this group of prisoners but there was otherwise nothing to distinguish their management from that of other prisoners. Plans to use lifer representatives and hold forums had stalled while managers focused on the priorities identified in their special measures action plan.
- 4.18** Transition work had been given more priority since the previous inspection with a dedicated POM to liaise with young offender institutions (YOIs) and secure training centres (STCs) holding children who were preparing to move to the young adult estate after their 18th birthday. Relationships were developed with the originating establishment and prisoners were contacted before their move to Aylesbury to assess their needs and ease transition. One of the psychologists at Aylesbury contributed to this initiative. An open day had been held for staff working with children approaching transition at YOIs and STCs and there were plans to arrange another open day.
- 4.19** Release on temporary licence was not appropriate for the population. Similarly, very few prisoners had sentences that allowed home detention curfew, but these cases were processed efficiently when they arose.

Recommendation

- 4.20** **The prison should understand and address the distinctive needs of indeterminate sentence prisoners.** (Repeated recommendation 4.20)

Public protection

- 4.21** The IRMT remit included prisoners who were six months and one month from release, new receptions (see paragraph 4.15), transitions from the juvenile estate and prisoners whose level of risk was cause for concern. It provided an effective forum for multidisciplinary discussion about the management of risk.
- 4.22** OMU staff now had access to the national probation case management IT system (N-Delius) which enabled them to identify the risk of serious harm of prisoners and to record these on the alerts section of P-Nomis (prisoner case records). Contact restrictions were applied promptly and reviewed regularly.
- 4.23** MAPPA (multi-agency public protection arrangements) categories and levels were identified in a timely manner and recorded on P-Nomis. At the time of the inspection, three prisoners were due for release in the next three months and there was evidence of productive communication with community offender managers to ensure effective management of their release. MAPPA Fs prepared by probation officers in the establishment were of a good standard and were countersigned by the senior probation officer.

Categorisation and transfers

- 4.24** Categorisation of prisoners to adult security classification started a month before their 21st birthday. At the time of the inspection, 26 prisoners were aged 21. Some had remained at Aylesbury for good reason, for example completing an intervention or approaching a parole consideration. Others had not transferred because of the difficulty of finding a suitable establishment.

Recommendation

- 4.25** **Prisoners over 21 should be transferred promptly to prisons that meet their identified needs to progress their sentence.** (Repeated recommendation 4.18)

Interventions

Expected outcomes:

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

- 4.26** A range of accredited programmes and other interventions were offered. A needs analysis had been conducted when the population reduced, and the programmes team now delivered Kaizen (for prisoners at high risk of violence), Resolve (for prisoners at medium risk of violence and aggression), Individual Engagement (for prisoners not ready to engage and lacking motivation) and Choices and Changes for prisoners who would access other interventions later in their sentence. Half the target of 41 completions by April 2020 had been achieved. The team was preparing to offer Identity Matters, an intervention for prisoners whose offending behaviour was linked to gang issues. Allocation to these programmes was determined by assessment of need and discussion at a joint psychology and programmes meeting. Criteria such as release dates were taken into account.
- 4.27** Prisoners had access to other interventions that supported their progression. The psychology team carried out interventions and assessments with individual prisoners. Project 507, a contracted service, also worked individually with prisoners on violence reduction and self-development. The two practitioners managed a caseload of about 40 prisoners.

4.28 The Aylesbury Pathways service formed part of the contract for the national offender personality disorder framework. An outreach and day centre service was provided for prisoners who were high risk of harm or had emerging personality disorder traits. The team had recently been accredited by the Royal College of Psychiatrists as an ‘enabling team’, which was positive. At the time of the inspection, Pathways engaged with 39 prisoners using resources based on the prisoner’s individual needs. There was a waiting list of more than 40 prisoners. Pathways offered an impressive range of one-to-one and group work interventions including trauma, family therapy and self-harm support.

Good practice

4.29 *The Aylesbury Pathways service continued to offer an impressive range of one-to-one and group work interventions for prisoners who were at high risk of serious harm or had emerging personality disorder traits.*

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.

4.30 Five prisoners had been released in the previous six months and one in the first week of the inspection. Arrangements for release were effective. A member of staff from the community rehabilitation company attended the prison to prepare a resettlement plan with the prisoner which addressed accommodation, finance, benefit and debt. Prisoners who were within six months of their release were also offered one-to-one mentoring from Trailblazers who were contracted to provide through-the-gate support. Prisoners were given a copy of their release licence and conditions.

4.31 Five of the six most recent releases had gone to approved premises, and one to live with family. Only one had lived less than 50 miles from Aylesbury. The contracted CF03²³ project worker from Ixion (a not-for-profit group of companies) assisted prisoners within three months of release to open a bank account with a high street bank and to work on employment skills and preparing job applications.

4.32 Arrangements for the day of release were well organised. Prisoners who were not being met at the gate received a travel warrant and information on how to get to public transport. Staff went through their release licences and reporting instructions with them before they left. Plain bags were available at reception for prisoners to carry their property and there was a limited amount of non-prison clothing.

4.33 The health care team engaged effectively with patients and their families and community mental health professionals to develop care plans and support in the prison and on release into the community. The primary health care team provided prisoners who were being released with information about registering with a GP and issued a supply of medication or a prescription where appropriate. The DART prepared release plans, provided harm reduction and overdose prevention advice and supplied Naloxone for those at risk of overdose on release.

²³ A European Social Fund initiative to promote employment.

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:

S46	<p>Key concern: Adjudications were used to manage low-level poor and antisocial behaviour. The incentives and earned privileges scheme was largely ineffective. Measures to address this type of behaviour took place slowly and were excessively punitive.</p> <p>Recommendation: A motivational and transparent rewards and sanctions scheme should be put in place to promote good behaviour and to address poor and antisocial behaviour swiftly and proportionately.</p>	The Governor
S47	<p>Key concern: Violence was increasing and several multi-agency meetings and procedures were used to review perpetrators, victims and antisocial behaviour. No strategy or action plan was derived from these meetings or the data provided. The drivers for violence were not understood by the prison and there was no plan to reduce it.</p> <p>Recommendation: A violence reduction action plan should be developed from all available data and used to reduce levels of violence.</p>	The Governor
S48	<p>Key concern: The segregation regime was very poor and prisoners spent too much time locked up with little to do. Prisoners were bored and frustrated and the education offered to them was limited to worksheets. There was no procedure for recording and monitoring regime activities when they did take place.</p> <p>Recommendation: The governor should improve the regime for prisoners who are segregated: risk assessments should be carried out for prisoners who can be reintegrated; activities, including education, should be properly scheduled; and records should be kept of activities undertaken by prisoners.</p>	The Governor
S49	<p>Key concern: Prisoners' perceptions of the quality of their relationship with staff were poor. A significant number said that, at some point, they had felt victimised by staff. The limited regime enabled them to move prisoners or unlock them for basic daily tasks rather than build and develop relationships with prisoners. This inhibited the potential for staff-prisoner relationships to be fully effective.</p>	The Governor

	Recommendation: Managers should ensure there is enough time for staff to develop meaningful and effective relationships with prisoners.	
S50	<p>Key concern: Systems for redress were weak. The number of complaints had risen significantly since the previous inspection. Responses to complaints did not always address the issues raised and not all confidential complaints received a sufficiently good response. Prisoners lacked confidence in the complaints system. The discrimination incident report form (DIRF) system did not function well and responses to DIRFs were inadequate.</p> <p>Recommendation: The management of all types of complaints should be improved and meaningful investigations should be carried out to ensure that prisoners receive focused responses and redress.</p>	The Governor
S51	<p>Key concern: The management of equality work was inadequate. There was no up-to-date policy and equality meetings lacked purpose and direction. Prisoners in some protected groups were identified inaccurately, for example sexual orientation and disability. There was no consultation with prisoners in any protected group. Analysis of equality monitoring data was limited and disproportionality had not been addressed. Foreign national prisoners were not supported.</p> <p>Recommendation: A new equality policy and action plan should be implemented with effective consultation and analysis of data and oversight by purposeful equality meetings, so that the needs of prisoners in all protected characteristic groups are understood and met.</p>	The Governor
S52	<p>Key concern: Attendance at health care was not prioritised sufficiently and the reasons for non-attendance were not fully understood. There had been a lengthy delay in separating the medicine administration room from the main waiting area and an inconsistent approach by officers supervising these areas which had led to a lack of privacy and the potential for bullying and altercation. Some prisoners did not attend health care for fear of confrontation on the way or in the waiting area. This situation was having a detrimental effect on prisoners' health and wellbeing.</p> <p>Recommendation: All prisoners should have appropriate and prompt access to health services.</p>	The Governor
S53	<p>Key concern: Time out of cell for most prisoners remained poor and too many were locked up during the core day. The unlock and lock-up times were not adhered to and prisoners were not receiving association periods on weekdays and had significantly reduced association at weekends.</p> <p>Recommendation: Prisoners should have a predictable regime throughout the week, with at least 10 hours out of their cell including evening association time.</p>	The Governor

S54	<p>Key concern: There was a lack of clear feedback from teachers to help prisoners improve their written work. A few teachers failed to ensure that all prisoners, including those lacking in confidence, made good progress.</p> <p>Recommendation: Leaders and managers should improve the feedback that prisoners receive on their written work and ensure that teachers help all prisoners, including those lacking in confidence, to progress as well as their peers.</p>	The Governor
S55	<p>Key concern: Managers were still not providing opportunities for prisoners working in industries to study for an accredited qualification relevant to their job role.</p> <p>Recommendation: Leaders and managers should provide opportunities for prisoners working in industries to gain a qualification related to their job.</p>	The Governor
S56	<p>Key concern: There was poor attendance at purposeful activity and insufficient activity spaces for the population, which had resulted in a high prisoner unemployment rate.</p> <p>Recommendation: Leaders and managers should improve attendance, reduce unemployment, and provide sufficient and purposeful high-quality learning, skills and work activities that meet the needs of the population.</p>	The Governor
S57	<p>Key concern: A quarter of prisoners did not have any OASys assessment of their risks and needs. Responsibility to complete many assessments had lain with the National Probation Service who had not provided them despite requests from the offender management unit. The lack of assessments using the comprehensive and nationally approved assessment tool reduced the certainty that all risks had been identified. Prisoners lacked comprehensive sentence plans and focused objectives to ensure that all necessary steps were taken in a timely manner to address offending behaviour.</p> <p>Recommendation: All prisoners should have an up-to-date assessment of risk and need using the nationally approved assessment tool (OASys).</p>	HMPPS
S58	<p>Key concern: There were vacancies in the prison offender manager (POM) group which were having a negative impact on the contact prisoners could have with their POM. Caseloads were too high for the probation officers managing the high and very high risk of harm prisoners to see them regularly or do any proactive work with them. The team was taking on responsibility for completion of OASys assessment for all prisoners as part of OMiC arrangements. This would necessitate more individual work which the team was not resourced to deliver.</p> <p>Recommendation: All prisoners should have regular contact with their prison offender manager to support their sentence progression.</p>	The Governor

General recommendations		Directed to:
1.31	A health care professional should respond to all incidents to prevent delays in the care of injured prisoners.	The Governor
1.41	Prisoners on the segregation unit should be allowed entitlements consistent with their level on the incentives and earned privileges scheme, such as wearing their own clothes and access to a television and kettle.	The Governor
1.42	Authorisation, including by prison group directors, should be in place for all segregated prisoners.	HMPPS
1.53	All prisoners should be able to receive parcels containing clothes, footwear and books.	The Governor
1.63	The safeguarding policy should be reviewed and all staff should be aware of how and to whom safeguarding concerns should be reported.	The Governor
2.11	The response times to cell bells should be monitored effectively to ensure that prisoners do not wait for more than five minutes.	The Governor
2.16	Prisoners should be able to eat in association.	The Governor
2.22	A private area should be made available to prisoners for legal visits.	The Governor
2.57	A local operating instruction and improvement plan should be produced as a matter of urgency to ensure that there is an effective joint response to local emergencies.	The Governor
2.94	Prisoners should receive dental treatment within a reasonable timescale.	The Governor
2.95	Governance arrangements should ensure effective oversight of maintenance checks and timely escalation of risks associated with dental equipment.	The Governor
4.20	The prison should understand and address the distinctive needs of indeterminate sentence prisoners.	The Governor
4.25	Prisoners over 21 should be transferred promptly to prisons that meet their identified needs to progress their sentence.	The Governor
Examples of good practice		
1.32	A senior manager had driven a significant reduction in outstanding use of force reports and held line managers to account for delays. Two use of force coordinators and an administrator quality assured the use of force to a high standard. The application of approved use of force techniques was consistently good despite the high percentage of staff recently recruited.	
1.54	Security managers were rigorous in ensuring that responses to intelligence related measures such as wing restrictions and closed visits were proportionate and only applied for the length of time required to reduce risk. This ensured that these systems were fair for prisoners and visitors.	
2.54	An extensive team of chaplains and a bereavement counsellor delivered comprehensive, compassionate and consistent pastoral care to prisoners.	
2.59	The MPCCC meeting consisted of representatives of all health and specialist teams based in the prison who focused on patients with complex needs to ensure the most suitable care for the individual.	
4.29	The Aylesbury Pathways service continued to offer an impressive range of one-to-one and group work interventions for prisoners who were at high risk of serious harm or had emerging personality disorder traits.	

Section 6. Appendices

Appendix I: Inspection team

Peter Clarke	Chief inspector
Angus Mulready-Jones	Team leader
Angela Johnson	Inspector
David Foot	Inspector
Esra Sari	Inspector
Rebecca Stanbury	Inspector
Nadia Syed	Inspector
Keith Humphreys	Inspector
Amilcar Johnson	Researcher
Chloe Moore	Researcher
Sharlene Andrew	Researcher
Rahul Jalil	Researcher
Maureen Jamieson	Lead health and social care inspector
Tania Osborne	Health and social care inspector
Joanne MacDonald	Care Quality Commission inspector
Jai Sharda	Ofsted inspector
Andy Fitt	Ofsted inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection in 2017, the reception environment was good, but initial assessments of new arrivals did not focus enough on identifying vulnerabilities. Induction was poor. In our survey, almost a third of prisoners currently felt unsafe, and there had been a significant increase in violence. Violence reduction work was underdeveloped. Self-harm was high and the quality of case management documents was mixed. Security arrangements were generally adequate and there were concerted efforts to address a significant drug problem. The incentives and earned privileges (IEP) scheme was ineffective in behaviour management. Governance of use of force was poor. Prisoners were positive about their treatment in segregation but too many were there for long periods. Substance misuse services were good. Outcomes for prisoners were poor against this healthy prison test.

Main recommendations

Violent incidents should be substantially reduced as part of a comprehensive violence reduction strategy that includes systematic consultation with prisoners. The safer custody team should be adequately resourced to monitor and address violent behaviour and to support victims. (5.1)

Not achieved

Use of force should be justified, fully documented, and subject to quality assurance and rigorous scrutiny at regular use of force meetings. (5.2)

Achieved

Recommendations

Escort vans should be clean and graffiti free. (1.2)

Achieved

The incentives and earned privileges scheme should focus more on promoting good behaviour. Prisoners on the basic regime should have access to facilities that ensure decency and maintain family ties, and their period on basic should be reviewed after shorter intervals. (1.36)

Not achieved

New arrivals on D wing should have a full induction programme and be allocated to activity promptly on completion of the induction. They should be out of their cells for 10 hours a day while on the unit. (1.8)

Not achieved

Managers should oversee the data collected on adjudications and take action to improve the quality of enquiry and reduce the high number of hearings. Less serious offences should be dealt with through other means. (1.40)

Not achieved

The regime for longer stay prisoners in the segregation unit should include purposeful activities to help prevent psychological deterioration. (1.49)

Not achieved

There should be individual care and reintegration plans to manage prisoners effectively during long periods of segregation and to help prisoners return to normal location. (1.50)

Not achieved

Assessment, care in custody and teamwork (ACCT) case management documentation should demonstrate consistent care for prisoners at risk of self-harm. Support should include good quality individual care planning and multidisciplinary reviews. (1.21)

Achieved

The prison should develop a prison-wide strategy to support prisoners and prevent self-harm that is based on evidence about the nature of incidents, patterns and trends. This should include purposeful activity and the full engagement with prisoners from prison officers and managers, particularly those working on residential units. (1.22)

Not achieved

The Listener scheme should be fully supported by staff, and prisoners should have 24-hour access. All staff should be aware of the appropriate action to take if a prisoner reports current or historic abuse. (1.23)

Not achieved

All staff should be aware of the appropriate action to take if a prisoner reports current or historic abuse. (1.25)

Not achieved

Security objectives should reflect the current intelligence threat assessment and be communicated to staff appropriately. (1.32)

Achieved

Procedural security measures should be proportionate to the evidence of intelligence concerns and not unnecessarily restrict prisoner access to a full regime. (1.33)

Achieved

There should be an annual substance misuse needs analysis to inform the drug and alcohol strategy and action plan, and to ensure that interventions are responsive to trends and emerging need. (1.57)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection in 2017, parts of the prison were very dirty, some cells had large amounts of graffiti and a number of showers were in poor condition. Prisoners were more negative about relationships with staff than at the previous inspection. Most staff appeared too busy to engage consistently with the prisoners in

their care. Equality and diversity work was weak. Faith provision was very good. The management of complaints had recently started to improve. Health services were good. The quality of food was reasonable. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

Communal areas and cells should be clean and free from graffiti, toilets should be properly screened and clean, showers should be maintained in good condition, and prisoners should be able to shower every day. (5.3)

Not achieved

The needs of all prisoners with protected characteristics should be identified and addressed, including through regular consultation and support groups. Prompt management action should be taken to deal with evidence of potential discrimination. (5.4)

Not achieved

Recommendations

Cells designed to hold one prisoner should not be used to hold two. (Repeated recommendation 2.7)

Achieved

Emergency cell call bells should be answered promptly and within five minutes. (Repeated recommendation 2.8)

Not achieved

Applications should be tracked and followed up when not responded to. (2.9)

Achieved

Staffing levels should be sufficient and staff should actively engage with prisoners and help support them through their sentence. They should challenge inappropriate conduct and behave fairly and consistently when responding to help prisoners meet their basic needs. (2.13)

Not achieved

Investigations into discrimination incident reports should be thorough and fully documented, and lead to appropriate follow-up actions. (2.18)

Not achieved

Oversight and quality assurance of prisoner complaints should ensure that they are dealt with promptly and subject to appropriate investigation to enable a full and helpful response. (2.29)

Not achieved

The kitchen should be clean and in a good state of repair, and wing serveries and food trolleys should be clean and well maintained. (2.71)

Achieved

Serveries should be properly supervised by staff, and serveries workers should wear appropriate protective clothing. (2.72)

Not achieved

Prisoners should be able to eat in association. (2.73)

Not achieved (Recommendation repeated, 2.16)

New arrivals should be able to buy items from the prison shop within their first 24 hours. (2.77)

Not achieved

Prisoners should not be charged an administration fee for catalogue orders. (2.78)

Not achieved

Prisoners should be able to have a private legal visit, and the prison should investigate the prisoner perception that their legally privileged mail is opened inappropriately by staff. (2.31)

Not achieved

All prison staff should have up-to-date basic life support skills, including use of an emergency defibrillator. (2.40)

Not achieved

All prisoners should be able to attend internal and external health care appointments. Patients should be routinely notified in advance of all internal health care appointments. (2.46)

Partially achieved

Prisoners should be collected from their appointments in the health care centre without delay. (2.47)

Not achieved

The significant level of patients who fail to attend planned appointments, including with the dentist, should be investigated and addressed, and nonattenders should be routinely followed up. (2.48)

Partially achieved

Pharmacy advice and support should be routinely available to prisoners. (2.54)

Not achieved

The health care waiting facility for prisoners receiving medication should be fully separated from patients waiting for appointments, and prison staff should supervise the medicine queue and the administration of medication. (2.55)

Not achieved

The health room in the segregation unit should comply with infection prevention standards. (2.56)

Achieved

All prisoners should have timely access to dental assessment and treatment. (2.59)

Not achieved

Prisoners should be able to access counselling services and specialist psychology input. (2.63)

Not achieved

Prisoners requiring treatment in hospital under the Mental Health Act should be transferred within established NHS guidelines. (2.64)

Not achieved

Purposeful activity

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

At the last inspection in 2017, time out of cell remained inadequate. Many prisoners were unemployed or under-occupied. Management of learning and skills had improved. Attendance and behaviour at education and work were good but punctuality was poor. The quality of education and vocational training had improved and achievements were good. Facilities for library and PE provision were reasonable but access was poor. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

Prisoners should be unlocked and engaged in constructive activity during the working day. The regime should be predictable and equitable and include at least one hour in the open air. (5.5)

Not achieved

Recommendations

The prison should rapidly increase the activity places in learning and skills and ensure that all prisoners are constructively engaged in work, education or workshops. New vocational workshops should be opened and appropriately staffed. (3.8)

Not achieved

There should be more opportunities for prisoner accreditation in vocational areas and industries. (3.13)

Not achieved

The specific needs of prisoners for whom English is an additional language should be identified and met. (3.17)

Achieved

The education induction arrangements should ensure that prisoners settle well into education and training. (3.18)

Achieved

Managers should ensure that prisoners arrive at activities on time. (3.21)

Achieved

Low prisoner achievement rates on underperforming courses should be addressed effectively, and there should be more opportunities for prisoners to develop their skills and qualifications at a higher level. (3.24)

Achieved

All prisoners should have access to the library, which should be effectively managed, staffed and fully operational, and the library service should reintroduce its former courses and programmes. (3.26)

Achieved

Staffing levels in the gym should be increased to enable the facility to be properly used. (3.28)

Achieved

There should be continued efforts to introduce additional health and well-being opportunities for prisoners in the gym. (3.29)

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, lack of staff in the offender management unit (OMU) undermined risk assessment and rehabilitation work. Managers had responded to the challenges with some innovative new working practices, but few prisoners had an up-to-date sentence plan and contact with offender supervisors was limited. Public protection processes were hindered by the lack of up-to-date offender assessment system (OASys) risk assessments. Visits facilities were basic but adequate; visits were often delayed. There was insufficient work to support family ties. Prisoners had access to an appropriate range of offending behaviour programmes. The work of the Aylesbury Pathways Service was exemplary. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

Concerted action should be taken to reduce the OASys backlog, and there should be sufficient offender supervisors to work effectively with prisoners towards meeting sentence plan targets. (5.6)

Not achieved

Recommendations

Visits should start at the advertised time, and all prisoners should have access to the full advertised period. (4.33)

Achieved

Closed visits facilities should be refurbished. (4.34)

Not achieved

Prisoners should be able to access support in building and maintaining family ties while at Aylesbury. (4.35)

Achieved

Community offender managers should ensure that MAPPA levels are set six months before the prisoner's release to ensure effective pre-release planning and to manage risk. (4.15)

Achieved

The offender management unit should have access to the national probation case management IT system (N-Delius) to provide basic and immediate risk information about prisoners. (4.16)

Achieved

Prisoners over 21 should be transferred promptly to prisons that meet their identified needs to progress their sentence. (4.18)

Not achieved (Recommendation repeated, 4.25)

The prison should understand and address the distinctive needs of indeterminate sentence prisoners. (4.20)

Not achieved (Recommendation repeated, 4.20)

Managers should monitor education, training and employment and National Careers Service arrangements more rigorously to ensure good outcomes for prisoners. (4.25)

No longer relevant

Appendix III: Prison population profile

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

Status	18–20 yr olds	21 and over	%
Sentenced	150	22	82.7%
Recall	1	1	1.0%
Convicted unsentenced	0	0	0.0%
Indeterminate Sentence	31	3	16.3%
Remand	0	0	0.0%
Civil prisoners	0	0	0.0%
Detainees	0	0	0.0%
Total	182	26	100%

Sentence	18–20 yr olds	21 and over	%
Unsentenced	0	0	0.0%
Less than 6 months	0	0	0.0%
6 months to less than 1 year	0	0	0.0%
12 months to less than 2 years	0	0	0.0%
2 years to less than 3 years	0	0	0.0%
3 years to less than 4 years	2	0	1.0%
4 years to less than 10 years	121	15	65.4%
10 years or more and less than life	26	8	16.3%
Life (Non ISPP)	33	3	17.3%
Total	182	26	100.0%

Age	Number of prisoners	%
Please state minimum age here:	18	-
Under 21 years	182	87.5%
21 years to 29 years	26	12.5%
30 years to 39 years	0	0.0%
40 years to 49 years	0	0.0%
50 years to 59 years	0	0.0%
60 years to 69 years	0	0.0%
70 plus years	0	0.0%
Please state maximum age here:	22	0.0%
Total	208	100.0%

Nationality	18–20 yr olds	21 and over	%
British	145	25	81.7%
Foreign nationals	37	1	18.3%
Total	182	26	100.0%

Security category	18–20 yr olds	21 and over	%
Provisional A	1	0	0.5%
Category A	0	0	0.0%
Category B	1	10	5.3%
Category C	0	13	6.3%
Category D	0	0	0.0%
YOI closed	180	3	88.0%
Total	182	26	100.0%

Ethnicity	18–20 yr olds	21 and over	%
White			
British	55	8	30.3%
Irish	1	0	0.5%
Gypsy/Irish Traveller	2	0	1.0%
Other white	13	0	6.3%
Total	71	8	38.0%
Mixed			
White and black Caribbean	9	6	7.2%
White and black African	4	0	1.9%
White and Asian	1	0	0.5%
Other mixed	5	0	2.4%
Total	19	6	12.0%
Asian or Asian British			
Indian	5	1	2.9%
Pakistani	3	0	1.4%
Bangladeshi	8	3	5.3%
Chinese	5	2	3.4%
Other Asian	0	0	0.0%
Total	21	6	13.0%
Black or black British			
Caribbean	32	2	16.3%
African	19	1	9.6%
Other black	16	3	0.0%
Total	67	6	35.1%
Other ethnic group			
Arab	2	0	1.0%
Other	1	0	0.5%
Total	3	0	1.4%
Total	182	26	100.0%

Religion	18–20 yr olds	21 and over	%
Baptist	0	0	0.0%
Church of England	16	3	9.1%
Roman Catholic	27	4	14.9%
Other Christian denominations	29	6	16.8%
Muslim	70	10	38.5%
Sikh	0	0	0.0%
Hindu	2	0	1.0%
Buddhist	2	0	1.0%
Jewish	0	0	0.0%
Other	6	1	3.4%
No religion	30	2	15.4%
Total	182	26	0

Other demographics	18–20 yr olds	21 and over	%
Veteran (ex-armed services)	0	0	0.0%
Total	0	0	0.0%

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	14	6.7%	0	0.0%
1 month to 3 months	26	12.5%	0	0.0%
3 months to 6 months	14	6.7%	0	0.0%
6 months to 1 year	66	31.7%	6	2.9%
1 year to 2 years	55	26.4%	16	7.7%
2 years to 4 years	7	3.4%	4	1.9%
4 years or more	0	0.0%	0	0.0%
Total	182	87.5%	26	12.5%

Appendix IV: Photographs



Segregation unit



Outside exercise area



Refurbished showers on F wing



Refurbished serveries on F wing

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 (HMIP) researchers have developed a self-completion questionnaire to support HMIP *Expectations*. The questionnaire consists of structured questions covering the prisoner 'journey' from reception to release, together with demographic and background questions which enable us to compare responses from different sub-groups of the prisoner population. There are also three open questions at the end of the questionnaire which allow prisoners to express, in their own words, what they find most positive and negative about the prison.²⁴

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 HMIP researchers from a P-Nomis prisoner population printout ordered by cell location. Using a robust statistical formula, HMIP researchers calculate the minimum sample size required to ensure that the survey findings can be generalised to the entire population of the establishment.²⁵

Distributing and collecting questionnaires

HMIP 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.²⁶ Prisoners are made aware that participation in the survey is voluntary; prisoners who decline to participate are not replaced within the sample. Those who agree to participate are provided with a sealable envelope for their completed questionnaire and told when we will be returning to collect it. We make arrangements to administer the questionnaire via a face-to-face interview for respondents who disclose literacy difficulties.

Survey response

At the time of the survey on 30 September 2019, the prisoner population at HMYOI Aylesbury was 208. Using the sampling method described above, questionnaires were distributed to 138 prisoners. We received a total of 127 completed questionnaires, a response rate of 92%. Five prisoners declined to participate in the survey and six questionnaires were either not returned at all or returned blank.

²⁴ Qualitative analysis of these written comments is undertaken by HMI Prisons researchers and used by inspectors.

²⁵ 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments).

²⁶ 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/hmiprisons/about-our-inspections/>

Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for HMYOI Aylesbury. For the comparator analyses, each question was reformulated into a binary ‘yes/no’ format and affirmative responses compared.²⁷ Missing responses have been excluded from all analyses and for some questions, responses from a sub-group of the sample are reported (as indicated in the data).

Full survey results

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

Responses from HMYOI Aylesbury 2019 compared with those from other HMIP surveys²⁸

- Survey responses from HMYOI Aylesbury in 2019 compared with survey responses from other young adult training prisons.
- Survey responses from HMYOI Aylesbury in 2019 compared with survey responses from HMYOI Aylesbury in 2017.

Comparisons between self-reported sub-populations of prisoners within HMP Aylesbury 2019²⁹

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

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group.³⁰

In the comparator analyses, statistically significant differences are indicated by shading.³¹ Results that are significantly more positive are indicated by green shading and results that are significantly more negative are indicated by blue shading. Orange shading has been used to show a statistically significant difference in demographic or other background details. If there is no shading, any difference between the two results is not statistically significant and may have occurred by chance. Grey shading indicates that there are no valid comparative data for that question.

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

²⁷ Using the Chi-square test (or Fisher’s exact test if there are fewer than five responses in a group).

²⁸ 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.

²⁹ These analyses are carried out on summary data from selected survey questions only.

³⁰ A minimum of 10 responses which must also represent at least 10% of the total response.

³¹ 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 houseblock are you currently living on?	
	B wing.....	43 (34%)
	D wing.....	25 (20%)
	F wing.....	27 (21%)
	G wing.....	26 (20%)
	Segregation unit.....	6 (5%)
I.2	How old are you?	
	Under 21	108 (86%)
	21 - 25.....	18 (14%)
	26 - 29.....	0 (0%)
	30 - 39.....	0 (0%)
	40 - 49.....	0 (0%)
	50 - 59.....	0 (0%)
	60 - 69.....	0 (0%)
	70 or over.....	0 (0%)
I.3	What is your ethnic group?	
	White - English/ Welsh/ Scottish/ Northern Irish/ British.....	32 (26%)
	White - Irish.....	2 (2%)
	White - Gypsy or Irish Traveller.....	1 (1%)
	White - any other White background.....	6 (5%)
	Mixed - White and Black Caribbean	11 (9%)
	Mixed - White and Black African	2 (2%)
	Mixed - White and Asian	1 (1%)
	Mixed - any other Mixed ethnic background.....	3 (2%)
	Asian/ Asian British - Indian.....	0 (0%)
	Asian/ Asian British - Pakistani.....	9 (7%)
	Asian/ Asian British - Bangladeshi.....	8 (6%)
	Asian/ Asian British - Chinese.....	0 (0%)
	Asian - any other Asian Background.....	2 (2%)
	Black/ Black British - Caribbean	18 (15%)
	Black/ Black British - African	16 (13%)
	Black - any other Black/ African/ Caribbean background.....	5 (4%)
	Arab.....	2 (2%)
	Any other ethnic group.....	6 (5%)
I.4	How long have you been in this prison?	
	Less than 6 months.....	30 (24%)
	6 months or more	94 (76%)
I.5	Are you currently serving a sentence?	
	Yes	124 (98%)
	Yes - on recall.....	2 (2%)
	No - on remand or awaiting sentence.....	0 (0%)
	No - immigration detainee.....	0 (0%)

1.6 How long is your sentence?

Less than 6 months.....	0 (0%)
6 months to less than 1 year.....	1 (1%)
1 year to less than 4 years.....	7 (6%)
4 years to less than 10 years.....	68 (54%)
10 years or more.....	26 (21%)
IPP (indeterminate sentence for public protection).....	0 (0%)
Life.....	24 (19%)
Not currently serving a sentence.....	0 (0%)

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

Yes.....	26 (21%)
No.....	87 (69%)
Don't remember.....	13 (10%)

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

Less than 2 hours.....	69 (55%)
2 hours or more.....	44 (35%)
Don't remember.....	13 (10%)

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

Yes.....	86 (69%)
No.....	21 (17%)
Don't remember.....	18 (14%)

2.4 Overall, how were you treated in reception?

Very well.....	25 (20%)
Quite well.....	73 (58%)
Quite badly.....	13 (10%)
Very badly.....	7 (6%)
Don't remember.....	7 (6%)

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

Problems getting phone numbers.....	23 (18%)
Contacting family.....	36 (29%)
Arranging care for children or other dependants.....	1 (1%)
Contacting employers.....	1 (1%)
Money worries.....	17 (14%)
Housing worries.....	7 (6%)
Feeling depressed.....	25 (20%)
Feeling suicidal.....	7 (6%)
Other mental health problems.....	17 (14%)
Physical health problems.....	2 (2%)
Drug or alcohol problems (e.g. withdrawal).....	2 (2%)
Problems getting medication.....	14 (11%)
Needing protection from other prisoners.....	14 (11%)
Lost or delayed property.....	30 (24%)
Other problems.....	16 (13%)
Did not have any problems.....	29 (23%)

2.6 Did staff help you to deal with these problems when you first arrived?

Yes.....	22 (18%)
No.....	71 (58%)
Did not have any problems when I first arrived.....	29 (24%)

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.....	24 (19%)
Toiletries / other basic items	41 (33%)
A shower.....	32 (25%)
A free phone call.....	35 (28%)
Something to eat.....	70 (56%)
The chance to see someone from health care	58 (46%)
The chance to talk to a Listener or Samaritans.....	9 (7%)
Support from another prisoner (e.g. Insider or buddy)	8 (6%)
Wasn't offered any of these things.....	25 (20%)

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

Very clean	3 (2%)
Quite clean	36 (29%)
Quite dirty.....	38 (30%)
Very dirty.....	47 (37%)
Don't remember	2 (2%)

3.3 Did you feel safe on your first night here?

Yes	73 (58%)
No.....	36 (29%)
Don't remember	16 (13%)

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

	Yes	No	Don't remember
Access to the prison shop / canteen?	40 (32%)	78 (62%)	7 (6%)
Free PIN phone credit?	33 (26%)	87 (70%)	5 (4%)
Numbers put on your PIN phone?	41 (34%)	70 (57%)	11 (9%)

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

Yes.....	39 (31%)
No.....	67 (53%)
Have not had an induction.....	20 (16%)

On the wing

4.1 Are you in a cell on your own?

Yes.....	127 (100%)
No, I'm in a shared cell or dormitory.....	0 (0%)

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

Yes.....	24 (19%)
No.....	94 (75%)
Don't know.....	8 (6%)
Don't have a cell call bell.....	0 (0%)

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

	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	92 (72%)	34 (27%)	1 (1%)
Can you shower every day?	111 (87%)	14 (11%)	2 (2%)
Do you have clean sheets every week?	96 (76%)	28 (22%)	2 (2%)
Do you get cell cleaning materials every week?	83 (65%)	44 (35%)	0 (0%)
Is it normally quiet enough for you to relax or sleep at night?	74 (60%)	47 (38%)	3 (2%)
Can you get your stored property if you need it?	35 (28%)	62 (50%)	28 (22%)

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

Very clean	2 (2%)
Quite clean	53 (43%)
Quite dirty	42 (34%)
Very dirty	27 (22%)

Food and canteen

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

Very good	4 (3%)
Quite good	54 (44%)
Quite bad	42 (34%)
Very bad	22 (18%)

5.2 Do you get enough to eat at mealtimes?

Always.....	14 (11%)
Most of the time.....	34 (27%)
Some of the time.....	46 (37%)
Never	31 (25%)

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

Yes	69 (57%)
No.....	50 (41%)
Don't know.....	3 (2%)

Relationships with staff

6.1 Do most staff here treat you with respect?

Yes	71 (59%)
No.....	50 (41%)

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

Yes	73 (59%)
No.....	50 (41%)

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

Yes	46 (38%)
No.....	76 (62%)

6.4	How helpful is your personal or named officer?	
	Very helpful.....	27 (23%)
	Quite helpful.....	42 (36%)
	Not very helpful	15 (13%)
	Not at all helpful.....	22 (19%)
	Don't know.....	8 (7%)
	Don't have a personal / named officer	4 (3%)
6.5	How often do you see prison governors, directors or senior managers talking to prisoners?	
	Regularly.....	9 (7%)
	Sometimes	28 (23%)
	Hardly ever.....	80 (66%)
	Don't know.....	4 (3%)
6.6	Do you feel that you are treated as an individual in this prison?	
	Yes.....	38 (31%)
	No.....	83 (69%)
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	
	Yes, and things sometimes change.....	14 (11%)
	Yes, but things don't change.....	55 (45%)
	No.....	35 (29%)
	Don't know.....	18 (15%)

Faith

7.1	What is your religion?	
	No religion.....	20 (16%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations).....	42 (34%)
	Buddhist.....	1 (1%)
	Hindu.....	1 (1%)
	Jewish	0 (0%)
	Muslim.....	53 (43%)
	Sikh	0 (0%)
	Other	5 (4%)
7.2	Are your religious beliefs respected here?	
	Yes.....	75 (61%)
	No.....	16 (13%)
	Don't know.....	12 (10%)
	Not applicable (no religion).....	20 (16%)
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	
	Yes.....	81 (66%)
	No.....	8 (7%)
	Don't know.....	14 (11%)
	Not applicable (no religion).....	20 (16%)
7.4	Are you able to attend religious services, if you want to?	
	Yes.....	79 (65%)
	No.....	20 (16%)
	Don't know.....	3 (2%)
	Not applicable (no religion).....	20 (16%)

Contact with family and friends

8.1	Have staff here encouraged you to keep in touch with your family / friends?	
	Yes	40 (33%)
	No.....	81 (67%)
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	85 (69%)
	No.....	39 (31%)
8.3	Are you able to use a phone every day (if you have credit)?	
	Yes	119 (96%)
	No.....	5 (4%)
8.4	How easy or difficult is it for your family and friends to get here?	
	Very easy.....	8 (7%)
	Quite easy.....	34 (28%)
	Quite difficult	38 (31%)
	Very difficult	38 (31%)
	Don't know.....	4 (3%)
8.5	How often do you have visits from family or friends?	
	More than once a week.....	2 (2%)
	About once a week	20 (17%)
	Less than once a week.....	74 (62%)
	Not applicable (don't get visits).....	23 (19%)
8.6	Do visits usually start and finish on time?	
	Yes	43 (46%)
	No.....	50 (54%)
8.7	Are your visitors usually treated respectfully by staff?	
	Yes	51 (56%)
	No.....	40 (44%)

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.....	36 (29%)
	Yes, but these times are not usually kept to.....	62 (50%)
	No.....	25 (20%)
9.2	How long do you usually spend out of your cell on a typical weekday (including time spent at education, work etc.)?	
	Less than 2 hours	42 (34%)
	2 to 6 hours.....	64 (52%)
	6 to 10 hours	8 (7%)
	10 hours or more	2 (2%)
	Don't know.....	7 (6%)
9.3	How long do you usually spend out of your cell on a typical Saturday or Sunday?	
	Less than 2 hours	99 (81%)
	2 to 6 hours.....	22 (18%)
	6 to 10 hours	1 (1%)
	10 hours or more	0 (0%)
	Don't know.....	0 (0%)

9.4	How many days in a typical week do you have time to do domestics (shower, clean cell, use the wing phones etc.)?		
	None	8	(7%)
	1 or 2	38	(31%)
	3 to 5.....	30	(25%)
	More than 5.....	34	(28%)
	Don't know.....	11	(9%)
9.5	How many days in a typical week do you get association, if you want it?		
	None	7	(6%)
	1 or 2	80	(66%)
	3 to 5.....	34	(28%)
	More than 5.....	0	(0%)
	Don't know.....	1	(1%)
9.6	How many days in a typical week could you go outside for exercise, if you wanted to?		
	None	0	(0%)
	1 or 2	2	(2%)
	3 to 5.....	3	(2%)
	More than 5.....	114	(94%)
	Don't know.....	2	(2%)
9.7	Typically, how often do you go to the gym?		
	Twice a week or more	33	(27%)
	About once a week	52	(42%)
	Less than once a week.....	14	(11%)
	Never	24	(20%)
9.8	Typically, how often do you go to the library?		
	Twice a week or more	16	(13%)
	About once a week	49	(40%)
	Less than once a week.....	27	(22%)
	Never	31	(25%)
9.9	Does the library have a wide enough range of materials to meet your needs?		
	Yes	41	(35%)
	No.....	46	(39%)
	Don't use the library	31	(26%)

Applications, complaints and legal rights

10.1	Is it easy for you to make an application?			
	Yes	99	(80%)	
	No.....	18	(15%)	
	Don't know.....	6	(5%)	
10.2	If you have made any applications here, please answer the questions below:			
		Yes	No	Not made any applications
	Are applications usually dealt with fairly?	67 (57%)	47 (40%)	4 (3%)
	Are applications usually dealt with within 7 days?	23 (20%)	90 (77%)	4 (3%)
10.3	Is it easy for you to make a complaint?			
	Yes	81	(68%)	
	No.....	21	(18%)	
	Don't know.....	18	(15%)	

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?	23 (20%)	66 (57%)	27 (23%)
Are complaints usually dealt with within 7 days?	13 (11%)	74 (65%)	27 (24%)

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

Yes	44 (37%)
No.....	57 (48%)
Not wanted to make a complaint.....	19 (16%)

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?	27 (23%)	37 (31%)	36 (30%)	19 (16%)
Attend legal visits?	48 (40%)	22 (18%)	31 (26%)	19 (16%)
Get bail information?	6 (5%)	27 (23%)	42 (36%)	42 (36%)

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

Yes	49 (41%)
No.....	42 (35%)
Not had any legal letters	29 (24%)

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	8 (6%)	44 (35%)	44 (35%)	20 (16%)	8 (6%)
Nurse	14 (11%)	60 (49%)	28 (23%)	15 (12%)	6 (5%)
Dentist	3 (2%)	19 (15%)	31 (25%)	55 (44%)	16 (13%)
Mental health workers	6 (5%)	41 (33%)	16 (13%)	14 (11%)	46 (37%)

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	9 (7%)	59 (48%)	25 (20%)	10 (8%)	19 (16%)
Nurse	18 (15%)	61 (50%)	21 (17%)	8 (7%)	14 (11%)
Dentist	5 (4%)	26 (21%)	22 (18%)	17 (14%)	51 (42%)
Mental health workers	10 (8%)	28 (23%)	9 (8%)	13 (11%)	60 (50%)

I1.3 Do you have any mental health problems?

Yes	34 (28%)
No.....	87 (72%)

11.4	Have you been helped with your mental health problems in this prison?	
	Yes	14 (12%)
	No.....	19 (16%)
	Don't have any mental health problems.....	87 (73%)

11.5	What do you think of the overall quality of the health services here?	
	Very good	2 (2%)
	Quite good	59 (49%)
	Quite bad	30 (25%)
	Very bad	19 (16%)
	Don't know.....	10 (8%)

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	25 (20%)
	No.....	98 (80%)

12.2	If you have a disability, are you getting the support you need?	
	Yes	6 (5%)
	No.....	13 (11%)
	Don't have a disability	98 (84%)

12.3	Have you been on an ACCT in this prison?	
	Yes	18 (15%)
	No.....	102 (85%)

12.4	If you have been on an ACCT in this prison, did you feel cared for by staff?	
	Yes	9 (8%)
	No.....	8 (7%)
	Have not been on an ACCT in this prison.....	102 (86%)

12.5	How easy or difficult is it for you to speak to a Listener, if you need to?	
	Very easy.....	6 (5%)
	Quite easy.....	18 (15%)
	Quite difficult	17 (14%)
	Very difficult	7 (6%)
	Don't know.....	63 (53%)
	No Listeners at this prison	9 (8%)

Alcohol and drugs

13.1	Did you have an alcohol problem when you came into this prison?	
	Yes	3 (2%)
	No.....	120 (98%)

13.2	Have you been helped with your alcohol problem in this prison?	
	Yes	2 (2%)
	No.....	1 (1%)
	Did not / do not have an alcohol problem	120 (98%)

13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	17 (14%)
	No.....	105 (86%)

13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	12 (10%)
	No.....	112 (90%)
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	4 (3%)
	No.....	120 (97%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	14 (11%)
	No.....	11 (9%)
	Did not / do not have a drug problem.....	99 (80%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy.....	20 (16%)
	Quite easy.....	10 (8%)
	Quite difficult	8 (7%)
	Very difficult	13 (11%)
	Don't know.....	72 (59%)
13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy.....	8 (7%)
	Quite easy.....	3 (2%)
	Quite difficult	4 (3%)
	Very difficult	23 (19%)
	Don't know.....	85 (69%)

Safety

14.1	Have you ever felt unsafe here?	
	Yes	63 (53%)
	No.....	57 (48%)
14.2	Do you feel unsafe now?	
	Yes	33 (27%)
	No.....	89 (73%)
14.3	Have you experienced any of the following types of bullying / victimisation from other prisoners here? (Please tick all that apply.)	
	Verbal abuse.....	39 (33%)
	Threats or intimidation.....	35 (30%)
	Physical assault.....	31 (26%)
	Sexual assault	2 (2%)
	Theft of canteen or property.....	21 (18%)
	Other bullying / victimisation.....	9 (8%)
	Not experienced any of these from prisoners here.....	69 (58%)
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	
	Yes	19 (16%)
	No.....	98 (84%)

I4.5 Have you experienced any of the following types of bullying / victimisation from staff here?*(Please tick all that apply.)*

Verbal abuse.....	66 (53%)
Threats or intimidation.....	52 (42%)
Physical assault.....	35 (28%)
Sexual assault	4 (3%)
Theft of canteen or property.....	16 (13%)
Other bullying / victimisation	27 (22%)
Not experienced any of these from staff here.....	48 (39%)

I4.6 If you were being bullied / victimised by staff here, would you report it?

Yes.....	42 (35%)
No.....	79 (65%)

Behaviour management**I5.1 Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?**

Yes.....	39 (32%)
No.....	73 (60%)
Don't know what the incentives / rewards are.....	10 (8%)

I5.2 Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?

Yes.....	32 (26%)
No.....	77 (64%)
Don't know.....	10 (8%)
Don't know what this is	2 (2%)

I5.3 Have you been physically restrained by staff in this prison in the last 6 months?

Yes.....	60 (49%)
No.....	63 (51%)

I5.4 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.....	21 (17%)
No.....	35 (28%)
Don't remember	4 (3%)
Not been restrained here in last 6 months.....	63 (51%)

I5.5 Have you spent one or more nights in the segregation unit in this prison in the last 6 months?

Yes.....	48 (39%)
No.....	74 (61%)

I5.6 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?	26 (54%)	22 (46%)
Could you shower every day?	37 (77%)	11 (23%)
Could you go outside for exercise every day?	39 (81%)	9 (19%)
Could you use the phone every day (if you had credit)?	34 (71%)	14 (29%)

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	76 (62%)	32 (26%)	13 (11%)	1 (1%)
Vocational or skills training	23 (19%)	52 (44%)	43 (36%)	1 (1%)
Prison job	30 (25%)	75 (64%)	13 (11%)	0 (0%)
Voluntary work outside of the prison	0 (0%)	25 (21%)	24 (20%)	69 (58%)
Paid work outside of the prison	0 (0%)	25 (21%)	23 (19%)	71 (60%)

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	79 (65%)	35 (29%)	8 (7%)
Vocational or skills training	48 (40%)	25 (21%)	46 (39%)
Prison job	46 (40%)	59 (51%)	10 (9%)
Voluntary work outside of the prison	14 (12%)	16 (14%)	87 (74%)
Paid work outside of the prison	15 (13%)	15 (13%)	86 (74%)

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

Yes	58 (48%)
No.....	64 (52%)
Not applicable (e.g. if you are retired, sick or on remand)	0 (0%)

Planning and progression

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

Yes	77 (63%)
No.....	45 (37%)

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

Yes	56 (75%)
No.....	13 (17%)
Don't know what my objectives or targets are.....	6 (8%)

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

Yes	23 (31%)
No.....	45 (61%)
Don't know what my objectives or targets are.....	6 (8%)

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	22 (30%)	10 (14%)	42 (57%)
Other programmes	26 (35%)	11 (15%)	38 (51%)
One to one work	27 (36%)	11 (15%)	37 (49%)
Being on a specialist unit	4 (5%)	8 (11%)	63 (84%)
ROTL - day or overnight release	0 (0%)	5 (7%)	70 (93%)

Preparation for release

18.1	Do you expect to be released in the next 3 months?			
	Yes	5	(4%)	
	No.....	116	(95%)	
	Don't know.....	1	(1%)	
18.2	How close is this prison to your home area or intended release address?			
	Very near.....	0	(0%)	
	Quite near.....	1	(25%)	
	Quite far.....	2	(50%)	
	Very far.....	1	(25%)	
18.3	Is anybody helping you to prepare for your release (e.g. a home probation officer, responsible officer, case worker)?			
	Yes.....	3	(60%)	
	No.....	2	(40%)	
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	0 (0%)	2 (40%)	3 (60%)
	Getting employment	1 (20%)	3 (60%)	1 (20%)
	Setting up education or training	2 (40%)	2 (40%)	1 (20%)
	Arranging benefits	0 (0%)	2 (40%)	3 (60%)
	Sorting out finances	0 (0%)	2 (40%)	3 (60%)
	Support for drug or alcohol problems	0 (0%)	0 (0%)	5 (100%)
	Health / mental health support	0 (0%)	0 (0%)	5 (100%)
	Social care support	1 (20%)	1 (20%)	3 (60%)
	Getting back in touch with family or friends	2 (40%)	1 (20%)	2 (40%)

More about you

19.1	Do you have children under the age of 18?		
	Yes.....	9	(7%)
	No.....	114	(93%)
19.2	Are you a UK / British citizen?		
	Yes.....	101	(81%)
	No.....	23	(19%)
19.3	Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?		
	Yes.....	6	(5%)
	No.....	118	(95%)
19.4	Have you ever been in the armed services (e.g. army, navy, air force)?		
	Yes.....	1	(1%)
	No.....	123	(99%)
19.5	What is your gender?		
	Male.....	124	(100%)
	Female.....	0	(0%)
	Non-binary.....	0	(0%)
	Other.....	0	(0%)

19.6 How would you describe your sexual orientation?

Straight / heterosexual.....	120 (98%)
Gay / lesbian / homosexual.....	1 (1%)
Bisexual.....	0 (0%)
Other	2 (2%)

19.7 Do you identify as transgender or transsexual?

Yes	2 (2%)
No.....	120 (98%)

Final question about this prison

20.1 Do you think your experiences in this prison have made you more or less likely to offend in the future?

More likely to offend.....	31 (25%)
Less likely to offend.....	42 (34%)

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

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

Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
83	41	53	69

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	100%	100%	100%	100%
	Are you 50 years of age or older?	0%	0%	0%	0%
1.3	Are you from a minority ethnic group?			89%	51%
7.1	Are you Muslim?	58%	15%		
11.3	Do you have any mental health problems?	20%	45%	29%	27%
12.1	Do you consider yourself to have a disability?	15%	33%	23%	18%
19.2	Are you a foreign national?	20%	15%	21%	15%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	1%	13%	0%	9%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	65%	81%	54%	79%
2.4	Overall, were you treated very / quite well in reception?	78%	85%	66%	90%
2.5	When you first arrived, did you have any problems?	79%	71%	85%	70%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	19%	32%	14%	31%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	63%	49%	61%	58%
3.5	Have you had an induction at this prison?	85%	81%	83%	86%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	33%	49%	37%	39%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	19%	20%	17%	22%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	68%	81%	60%	81%
	- Can you shower every day?	84%	93%	83%	90%
	- Do you have clean sheets every week?	74%	83%	68%	81%
	- Do you get cell cleaning materials every week?	70%	56%	72%	59%
	- Is it normally quiet enough for you to relax or sleep at night?	64%	49%	51%	68%
	- Can you get your stored property if you need it?	26%	35%	28%	30%

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Number of completed questionnaires returned

	Black and minority ethnic	White	Muslim	Non-Muslim
	83	41	53	69

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	36%	42%	37%	41%
5.3	Does the shop / canteen sell the things that you need?	51%	68%	46%	65%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	56%	68%	51%	64%
6.2	Are there any staff here you could turn to if you had a problem?	56%	68%	49%	68%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	41%	33%	34%	41%
6.6	Do you feel that you are treated as an individual in this prison?	25%	43%	26%	35%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	72%	72%	62%	86%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	78%	88%	74%	84%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	29%	41%	23%	42%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	70%	63%	70%	66%
8.3	Are you able to use a phone every day (if you have credit)?	95%	98%	93%	99%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	50%	69%	47%	62%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	32%	39%	32%	34%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	0%	2%	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?	41%	70%	40%	56%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	80%	80%	73%	87%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	51%	76%	52%	67%
10.3	Is it easy for you to make a complaint?	69%	63%	65%	70%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	21%	36%	15%	36%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	35%	62%	49%	37%

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Number of completed questionnaires returned

	Black and minority ethnic		Muslim	Non-Muslim
	Black and minority ethnic	White		
	83	41	53	69

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	37%	53%	30%	53%
	- Nurse?	57%	67%	55%	66%
	- Dentist?	19%	15%	15%	21%
	- Mental health workers?	40%	35%	38%	39%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	38%	47%	47%	41%
11.5	Do you think the overall quality of the health services here is very / quite good?	47%	58%	47%	55%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	14%	42%	22%	44%
SAFETY					
14.1	Have you ever felt unsafe here?	48%	62%	52%	51%
14.2	Do you feel unsafe now?	22%	37%	27%	24%
14.3	Not experienced bullying / victimisation by other prisoners	64%	47%	59%	59%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	15%	21%	12%	19%
14.5	Not experienced bullying / victimisation by members of staff	33%	54%	28%	46%
14.6	If you were being bullied / victimised by staff here, would you report it?	32%	38%	25%	42%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	30%	40%	19%	42%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	23%	34%	8%	41%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	58%	31%	55%	45%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	47%	23%	43%	36%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	41%	64%	36%	58%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	62%	69%	59%	67%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	32%	30%	21%	39%
PREPARATION FOR RELEASE					
<i>For those who expect to be released in the next 3 months:</i>					
18.3	Is anybody helping you to prepare for your release?	50%	100%	50%	67%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	33%	36%	21%	43%

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Comparison of survey responses between sub-populations of prisoners

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

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

Number of completed questionnaires returned

Foreign national	UK / British national
23	101

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 25 years of age?	100%	100%
	Are you 50 years of age or older?	0%	0%
1.3	Are you from a minority ethnic group?	73%	67%
7.1	Are you Muslim?	52%	42%
11.3	Do you have any mental health problems?	24%	29%
12.1	Do you consider yourself to have a disability?	19%	21%
19.2	Are you a foreign national?		
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	4%	5%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	70%	68%
2.4	Overall, were you treated very / quite well in reception?	74%	79%
2.5	When you first arrived, did you have any problems?	83%	75%
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	0%	31%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	36%	63%
3.5	Have you had an induction at this prison?	87%	84%
<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	30%	39%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	30%	17%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	65%	73%
	- Can you shower every day?	87%	87%
	- Do you have clean sheets every week?	83%	75%
	- Do you get cell cleaning materials every week?	70%	65%
	- Is it normally quiet enough for you to relax or sleep at night?	48%	62%
	- Can you get your stored property if you need it?	22%	29%

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

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

Foreign national	UK / British national
23	101

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%	38%
5.3	Does the shop / canteen sell the things that you need?	36%	60%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	48%	61%
6.2	Are there any staff here you could turn to if you had a problem?	33%	65%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	19%	42%
6.6	Do you feel that you are treated as an individual in this prison?	10%	37%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	70%	73%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	65%	82%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	10%	39%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	68%	68%
8.3	Are you able to use a phone every day (if you have credit)?	100%	96%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	47%	58%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	27%	35%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	5%	1%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	25%	51%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	82%	80%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	48%	61%
10.3	Is it easy for you to make a complaint?	85%	64%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	20%	27%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	43%	43%

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

Foreign national	UK / British national
23	101

Number of completed questionnaires returned

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	23%	46%
	- Nurse?	55%	61%
	- Dentist?	0%	21%
	- Mental health workers?	10%	44%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	20%	46%
11.5	Do you think the overall quality of the health services here is very / quite good?	35%	54%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	33%	31%
SAFETY			
14.1	Have you ever felt unsafe here?	68%	49%
14.2	Do you feel unsafe now?	44%	23%
14.3	Not experienced bullying / victimisation by other prisoners	52%	60%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	14%	17%
14.5	Not experienced bullying / victimisation by members of staff	44%	38%
14.6	If you were being bullied / victimised by staff here, would you report it?	36%	34%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	27%	33%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	14%	29%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	50%	49%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	29%	42%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	33%	51%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	67%	62%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	23%	33%
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?	100%	50%
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?	18%	37%

HMYOI Aylesbury 2019

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

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

- Summary statistics from most recent surveys of all other young adult prisons (3 prisons).
- Summary statistics from HMYOI Aylesbury in 2017. Please note that we do not have comparable data for the new questions introduced in September 2017.

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Number of completed questionnaires returned

n=number of valid responses to question (HMYOI Aylesbury 2019)

			HMYOI Aylesbury 2019	All other young adult prisons		HMYOI Aylesbury 2019	HMYOI Aylesbury 2017
		Number of completed questionnaires returned	127	477		127	149
SAFETY							
2.1	Were you given up-to-date information about this prison before you came here?	<i>n</i> =126	21%	17%		21%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n</i> =126	55%	68%		55%	66%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n</i> =125	69%	79%		69%	80%
2.4	Overall, were you treated very / quite well in reception?	<i>n</i> =125	78%	84%		78%	
2.5	When you first arrived, did you have any problems?	<i>n</i> =125	77%	72%		77%	64%
2.5	Did you have problems with:						
	- Getting phone numbers?	<i>n</i> =125	18%	33%		18%	15%
	- Contacting family?	<i>n</i> =125	29%	30%		29%	21%
	- Arranging care for children or other dependents?	<i>n</i> =125	1%	1%		1%	
	- Contacting employers?	<i>n</i> =125	1%	3%		1%	0%
	- Money worries?	<i>n</i> =125	14%	13%		14%	16%
	- Housing worries?	<i>n</i> =125	6%	10%		6%	11%
	- Feeling depressed?	<i>n</i> =125	20%	25%		20%	
	- Feeling suicidal?	<i>n</i> =125	6%	6%		6%	
	- Other mental health problems?	<i>n</i> =125	14%	13%		14%	
	- Physical health problems?	<i>n</i> =125	2%	7%		2%	5%
	- Drugs or alcohol (e.g. withdrawal)?	<i>n</i> =125	2%	9%		2%	
	- Getting medication?	<i>n</i> =125	11%	11%		11%	
	- Needing protection from other prisoners?	<i>n</i> =125	11%	10%		11%	11%
	- Lost or delayed property?	<i>n</i> =125	24%	23%		24%	25%
<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> =93	24%	28%		24%	23%

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Number of completed questionnaires returned

			HMYOI Aylesbury 2019	All other young adult prisons	HMYOI Aylesbury 2019	HMYOI Aylesbury 2017
			127	477	127	149
3.1	Before you were locked up on your first night, were you offered:					
	- Tobacco or nicotine replacement?	n=126	19%	51%	19%	82%
	- Toiletries / other basic items?	n=126	33%	47%	33%	53%
	- A shower?	n=126	25%	52%	25%	24%
	- A free phone call?	n=126	28%	70%	28%	46%
	- Something to eat?	n=126	56%	75%	56%	45%
	- The chance to see someone from health care?	n=126	46%	59%	46%	63%
	- The chance to talk to a Listener or Samaritans?	n=126	7%	16%	7%	26%
	- Support from another prisoner (e.g. Insider or buddy)?	n=126	6%	10%	6%	
	- None of these?	n=126	20%	8%	20%	
3.2	On your first night in this prison, was your cell very / quite clean?	n=126	31%	39%	31%	
3.3	Did you feel safe on your first night here?	n=125	58%	78%	58%	67%
3.4	In your first few days here, did you get:					
	- Access to the prison shop / canteen?	n=125	32%	29%	32%	20%
	- Free PIN phone credit?	n=125	26%	55%	26%	
	- Numbers put on your PIN phone?	n=122	34%	47%	34%	
3.5	Have you had an induction at this prison?	n=126	84%	94%	84%	89%
	<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	n=106	37%	52%	37%	
12.3	Have you been on an ACCT in this prison?	n=120	15%	17%	15%	
	<i>For those who have been on an ACCT:</i>					
12.4	Did you feel cared for by staff?	n=17	53%	61%	53%	
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=120	20%	19%	20%	
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=124	10%	8%	10%	11%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=124	3%	5%	3%	
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=123	24%	24%	24%	
13.8	Is it very / quite easy to get alcohol in this prison?	n=123	9%	9%	9%	
14.1	Have you ever felt unsafe here?	n=120	53%	45%	53%	61%
14.2	Do you feel unsafe now?	n=122	27%	21%	27%	29%
14.3	Have you experienced any of the following from other prisoners here:					
	- Verbal abuse?	n=118	33%	33%	33%	
	- Threats or intimidation?	n=118	30%	28%	30%	
	- Physical assault?	n=118	26%	17%	26%	
	- Sexual assault?	n=118	2%	2%	2%	

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Number of completed questionnaires returned

		HMYOI Aylesbury 2019	All other young adult prisons	HMYOI Aylesbury 2019	HMYOI Aylesbury 2017
		127	477	127	149
	- Theft of canteen or property? <i>n=118</i>	18%	15%	18%	
	- Other bullying / victimisation? <i>n=118</i>	8%	13%	8%	
	- Not experienced any of these from prisoners here <i>n=118</i>	59%	61%	59%	
14.4	If you were being bullied / victimised by other prisoners here, would you report it? <i>n=117</i>	16%	20%	16%	

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Number of completed questionnaires returned

			HMYOI Aylesbury 2019	All other young adult prisons	HMYOI Aylesbury 2019	HMYOI Aylesbury 2017
			127	477	127	149
14.5	Have you experienced any of the following from staff here:					
	- Verbal abuse?	n=124	53%	38%	53%	
	- Threats or intimidation?	n=124	42%	27%	42%	
	- Physical assault?	n=124	28%	17%	28%	
	- Sexual assault?	n=124	3%	2%	3%	
	- Theft of canteen or property?	n=124	13%	11%	13%	
	- Other bullying / victimisation?	n=124	22%	12%	22%	
	- Not experienced any of these from staff here	n=124	39%	54%	39%	
14.6	If you were being bullied / victimised by staff here, would you report it?	n=121	35%	37%	35%	
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	n=122	32%	41%	32%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	n=121	26%	25%	26%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	n=123	49%	35%	49%	35%
<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=60	35%	33%	35%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	n=122	39%	29%	39%	
<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=48	54%	45%	54%	
	Could you shower every day?	n=48	77%	46%	77%	
	Could you go outside for exercise every day?	n=48	81%	74%	81%	
	Could you use the phone every day (if you had credit)?	n=48	71%	34%	71%	
RESPECT						
4.1	Are you in a cell on your own?	n=127	100%	66%	100%	
4.2	Is your cell call bell normally answered within 5 minutes?	n=126	19%	25%	19%	12%
4.3	On the wing or houseblock you currently live on:					
	- Do you normally have enough clean, suitable clothes for the week?	n=127	72%	60%	72%	48%
	- Can you shower every day?	n=127	87%	88%	87%	25%
	- Do you have clean sheets every week?	n=126	76%	56%	76%	29%
	- Do you get cell cleaning materials every week?	n=127	65%	37%	65%	28%
	- Is it normally quiet enough for you to relax or sleep at night?	n=124	60%	57%	60%	46%
	- Can you get your stored property if you need it?	n=125	28%	25%	28%	17%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	n=124	44%	57%	44%	
5.1	Is the quality of the food in this prison very / quite good?	n=122	48%	40%	48%	
5.2	Do you get enough to eat at meal-times always / most of the time?	n=125	38%	35%	38%	
5.3	Does the shop / canteen sell the things that you need?	n=122	57%	60%	57%	35%

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Number of completed questionnaires returned

			HMYOI Aylesbury 2019	All other young adult prisons	HMYOI Aylesbury 2019	HMYOI Aylesbury 2017
			127	477	127	149
6.1	Do most staff here treat you with respect?	<i>n=121</i>	59%	62%	59%	57%
6.2	Are there any staff here you could turn to if you had a problem?	<i>n=123</i>	59%	60%	59%	47%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<i>n=122</i>	38%	31%	38%	31%
6.4	Do you have a personal officer?	<i>n=118</i>	97%	80%	97%	
<i>For those who have a personal officer:</i>						
6.4	Is your personal or named officer very / quite helpful?	<i>n=114</i>	61%	40%	61%	

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			127	477	127	149
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	n=121	7%	7%	7%	
6.6	Do you feel that you are treated as an individual in this prison?	n=121	31%	45%	31%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	n=122	57%	52%	57%	
	If so, do things sometimes change?	n=69	20%	24%	20%	
7.1	Do you have a religion?	n=122	84%	69%	84%	77%
<i>For those who have a religion:</i>						
7.2	Are your religious beliefs respected here?	n=103	73%	74%	73%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	n=103	79%	67%	79%	
7.4	Are you able to attend religious services, if you want to?	n=102	78%	84%	78%	
10.1	Is it easy for you to make an application?	n=123	81%	68%	81%	71%
<i>For those who have made an application:</i>						
10.2	Are applications usually dealt with fairly?	n=114	59%	44%	59%	41%
	Are applications usually dealt with within 7 days?	n=113	20%	17%	20%	12%
10.3	Is it easy for you to make a complaint?	n=120	68%	58%	68%	40%
<i>For those who have made a complaint:</i>						
10.4	Are complaints usually dealt with fairly?	n=89	26%	27%	26%	15%
	Are complaints usually dealt with within 7 days?	n=87	15%	20%	15%	7%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=101	44%	32%	44%	
<i>For those who need it, is it easy to:</i>						
10.6	Communicate with your solicitor or legal representative?	n=100	27%	22%	27%	
	Attend legal visits?	n=101	48%	45%	48%	
	Get bail information?	n=75	8%	12%	8%	
<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=91	54%	57%	54%	65%
11.1	Is it very / quite easy to see:					
	- Doctor?	n=124	42%	43%	42%	
	- Nurse?	n=123	60%	60%	60%	
	- Dentist?	n=124	18%	21%	18%	
	- Mental health workers?	n=123	38%	36%	38%	
11.2	Do you think the quality of the health service is very / quite good from:					
	- Doctor?	n=122	56%	57%	56%	
	- Nurse?	n=122	65%	60%	65%	
	- Dentist?	n=121	26%	38%	26%	
	- Mental health workers?	n=120	32%	40%	32%	

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Number of completed questionnaires returned

			HMYOI Aylesbury 2019	All other young adult prisons	HMYOI Aylesbury 2019	HMYOI Aylesbury 2017
			127	477	127	149
11.3	Do you have any mental health problems?	<i>n=121</i>	28%	36%	28%	
		<i>For those who have mental health problems:</i>				
11.4	Have you been helped with your mental health problems in this prison?	<i>n=33</i>	42%	57%	42%	
11.5	Do you think the overall quality of the health services here is very / quite good?	<i>n=120</i>	51%	47%	51%	

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			127	477	127	149
12.1	Do you consider yourself to have a disability?	n=123	20%	23%	20%	19%
<i>For those who have a disability:</i>						
12.2	Are you getting the support you need?	n=19	32%	36%	32%	
13.1	Did you have an alcohol problem when you came into this prison?	n=123	2%	11%	2%	11%
<i>For those who had / have an alcohol problem:</i>						
13.2	Have you been helped with your alcohol problem in this prison?	n=3	67%	61%	67%	93%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=122	14%	23%	14%	18%
<i>For those who had / have a drug problem:</i>						
13.6	Have you been helped with your drug problem in this prison?	n=25	56%	57%	56%	82%
PURPOSEFUL ACTIVITY						
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=123	80%	79%	80%	
<i>For those who know what the unlock and lock-up times are supposed to be:</i>						
9.1	Are these times usually kept to?	n=98	37%	58%	37%	
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	n=123	34%	36%	34%	39%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	n=123	2%	4%	2%	3%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=122	81%	78%	81%	
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=122	0%	1%	0%	
9.4	Do you have time to do domestics more than 5 days in a typical week?	n=121	28%	38%	28%	
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=122	0%	53%	0%	
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=121	94%	63%	94%	
9.7	Do you typically go to the gym twice a week or more?	n=123	27%	33%	27%	
9.8	Do you typically go to the library once a week or more?	n=123	53%	31%	53%	23%
<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=87	47%	70%	47%	42%
16.1	In this prison, is it easy to get into the following activities:					
	- Education?	n=122	62%	54%	62%	
	- Vocational or skills training?	n=119	19%	26%	19%	
	- Prison job?	n=118	25%	34%	25%	
	- Voluntary work outside of the prison?	n=118	0%	4%	0%	
	- Paid work outside of the prison?	n=119	0%	3%	0%	
16.2	In this prison, have you done the following activities:					
	- Education?	n=122	93%	85%	93%	84%
	- Vocational or skills training?	n=119	61%	64%	61%	68%
	- Prison job?	n=115	91%	74%	91%	81%
	- Voluntary work outside of the prison?	n=117	26%	36%	26%	

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- Paid work outside of the prison?	<i>n=116</i>	26%	34%	26%	

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			HMYOI Aylesbury 2019	All other young adult prisons	HMYOI Aylesbury 2019	HMYOI Aylesbury 2017
		Number of completed questionnaires returned	127	477	127	149
<i>For those who have done the following activities, do you think they will help you on release:</i>						
	- Education?	<i>n=114</i>	69%	61%	69%	61%
	- Vocational or skills training?	<i>n=73</i>	66%	61%	66%	54%
	- Prison job?	<i>n=105</i>	44%	44%	44%	52%
	- Voluntary work outside of the prison?	<i>n=30</i>	47%	55%	47%	
	- Paid work outside of the prison?	<i>n=30</i>	50%	55%	50%	
16.3	Do staff encourage you to attend education, training or work?	<i>n=122</i>	48%	58%	48%	
REHABILITATION AND RELEASE PLANNING						
8.1	Have staff here encouraged you to keep in touch with your family / friends?	<i>n=121</i>	33%	28%	33%	
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	<i>n=124</i>	69%	66%	69%	67%
8.3	Are you able to use a phone every day (if you have credit)?	<i>n=124</i>	96%	68%	96%	
8.4	Is it very / quite easy for your family and friends to get here?	<i>n=122</i>	34%	31%	34%	
8.5	Do you get visits from family/friends once a week or more?	<i>n=119</i>	19%	20%	19%	
<i>For those who get visits:</i>						
8.6	Do visits usually start and finish on time?	<i>n=93</i>	46%	54%	46%	
8.7	Are your visitors usually treated respectfully by staff?	<i>n=91</i>	56%	76%	56%	
17.1	Do you have a custody plan?	<i>n=122</i>	63%	60%	63%	
<i>For those who have a custody plan:</i>						
17.2	Do you understand what you need to do to achieve your objectives or targets?	<i>n=75</i>	75%	76%	75%	
17.3	Are staff helping you to achieve your objectives or targets?	<i>n=74</i>	31%	28%	31%	
17.4	In this prison, have you done:					
	- Offending behaviour programmes?	<i>n=74</i>	43%	38%	43%	
	- Other programmes?	<i>n=75</i>	49%	42%	49%	
	- One to one work?	<i>n=75</i>	51%	40%	51%	
	- Been on a specialist unit?	<i>n=75</i>	16%	20%	16%	
	- ROTL - day or overnight release?	<i>n=75</i>	7%	12%	7%	
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>						
	- Offending behaviour programmes?	<i>n=32</i>	69%	58%	69%	
	- Other programmes?	<i>n=37</i>	70%	62%	70%	
	- One to one work?	<i>n=38</i>	71%	64%	71%	
	- Being on a specialist unit?	<i>n=12</i>	33%	42%	33%	
	- ROTL - day or overnight release?	<i>n=5</i>	0%	25%	0%	
18.1	Do you expect to be released in the next 3 months?	<i>n=122</i>	4%	39%	4%	
<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=4</i>	25%	33%	25%	

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		Number of completed questionnaires returned	127	477	127	149
18.3	Is anybody helping you to prepare for your release?	<i>n</i> =5	60%	54%	60%	
18.4	Do you need help to sort out the following for when you are released:					
	- Finding accommodation?	<i>n</i> =5	40%	51%	40%	
	- Getting employment?	<i>n</i> =5	80%	62%	80%	
	- Setting up education or training?	<i>n</i> =5	80%	48%	80%	
	- Arranging benefits?	<i>n</i> =5	40%	55%	40%	
	- Sorting out finances?	<i>n</i> =5	40%	50%	40%	
	- Support for drug or alcohol problems?	<i>n</i> =5	0%	25%	0%	
	- Health / mental Health support?	<i>n</i> =5	0%	33%	0%	
	- Social care support?	<i>n</i> =5	40%	29%	40%	
	- Getting back in touch with family or friends?	<i>n</i> =5	60%	29%	60%	
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> =2	0%	49%	0%	
	- Getting employment?	<i>n</i> =4	25%	25%	25%	
	- Setting up education or training?	<i>n</i> =4	50%	25%	50%	
	- Arranging benefits?	<i>n</i> =2	0%	28%	0%	
	- Sorting out finances?	<i>n</i> =2	0%	33%	0%	
	- Support for drug or alcohol problems?	<i>n</i> =0		45%		
	- Health / mental Health support?	<i>n</i> =0		38%		
	- Social care support?	<i>n</i> =2	50%	33%	50%	
	- Getting back in touch with family or friends?	<i>n</i> =3	67%	46%	67%	
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	<i>n</i> =123	34%	49%	34%	

HMYOI Aylesbury 2019

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

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

- Summary statistics from most recent surveys of all other young adult prisons (3 prisons).
- Summary statistics from HMYOI Aylesbury in 2017. Please note that we do not have comparable data for the new questions introduced in September 2017.

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DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION						
1.2	Are you under 21 years of age?	<i>n</i> =126	86%	81%	86%	66%
	Are you 25 years of age or younger?	<i>n</i> =126	100%	99%	100%	
	Are you 50 years of age or older?	<i>n</i> =126	0%	0%	0%	0%
	Are you 70 years of age or older?	<i>n</i> =126	0%	0%	0%	0%
1.3	Are you from a minority ethnic group?	<i>n</i> =124	67%	51%	67%	57%
1.4	Have you been in this prison for less than 6 months?	<i>n</i> =124	24%	45%	24%	
1.5	Are you currently serving a sentence?	<i>n</i> =126	100%	93%	100%	100%
	Are you on recall?	<i>n</i> =126	2%	4%	2%	4%
1.6	Is your sentence less than 12 months?	<i>n</i> =126	1%	17%	1%	2%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n</i> =126	0%	0%	0%	2%
7.1	Are you Muslim?	<i>n</i> =122	43%	26%	43%	35%
11.3	Do you have any mental health problems?	<i>n</i> =121	28%	36%	28%	
12.1	Do you consider yourself to have a disability?	<i>n</i> =123	20%	23%	20%	19%
19.1	Do you have any children under the age of 18?	<i>n</i> =123	7%	20%	7%	16%
19.2	Are you a foreign national?	<i>n</i> =124	19%	7%	19%	11%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n</i> =124	5%	4%	5%	5%
19.4	Have you ever been in the armed services?	<i>n</i> =124	1%	2%	1%	0%
19.5	Is your gender female or non-binary?	<i>n</i> =124	0%	1%	0%	
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n</i> =123	2%	2%	2%	4%
19.7	Do you identify as transgender or transsexual?	<i>n</i> =122	2%	2%	2%	
ARRIVAL AND RECEPTION						
2.1	Were you given up-to-date information about this prison before you came here?	<i>n</i> =126	21%	17%	21%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n</i> =126	55%	68%	55%	66%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n</i> =125	69%	79%	69%	80%
2.4	Overall, were you treated very / quite well in reception?	<i>n</i> =125	78%	84%	78%	

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2.5	When you first arrived, did you have any problems?	<i>n</i> =125	77%	72%	77%	64%
2.5	Did you have problems with:					
	- Getting phone numbers?	<i>n</i> =125	18%	33%	18%	15%
	- Contacting family?	<i>n</i> =125	29%	30%	29%	21%
	- Arranging care for children or other dependents?	<i>n</i> =125	1%	1%	1%	
	- Contacting employers?	<i>n</i> =125	1%	3%	1%	0%
	- Money worries?	<i>n</i> =125	14%	13%	14%	16%
	- Housing worries?	<i>n</i> =125	6%	10%	6%	11%
	- Feeling depressed?	<i>n</i> =125	20%	25%	20%	
	- Feeling suicidal?	<i>n</i> =125	6%	6%	6%	
	- Other mental health problems?	<i>n</i> =125	14%	13%	14%	
	- Physical health problems?	<i>n</i> =125	2%	7%	2%	5%
	- Drugs or alcohol (e.g. withdrawal)?	<i>n</i> =125	2%	9%	2%	
	- Getting medication?	<i>n</i> =125	11%	11%	11%	
	- Needing protection from other prisoners?	<i>n</i> =125	11%	10%	11%	11%
	- Lost or delayed property?	<i>n</i> =125	24%	23%	24%	25%
	<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> =93	24%	28%	24%	23%
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> =126	19%	51%	19%	82%
	- Toiletries / other basic items?	<i>n</i> =126	33%	47%	33%	53%
	- A shower?	<i>n</i> =126	25%	52%	25%	24%
	- A free phone call?	<i>n</i> =126	28%	70%	28%	46%
	- Something to eat?	<i>n</i> =126	56%	75%	56%	45%
	- The chance to see someone from health care?	<i>n</i> =126	46%	59%	46%	63%
	- The chance to talk to a Listener or Samaritans?	<i>n</i> =126	7%	16%	7%	26%
	- Support from another prisoner (e.g. Insider or buddy)?	<i>n</i> =126	6%	10%	6%	
	- None of these?	<i>n</i> =126	20%	8%	20%	
3.2	On your first night in this prison, was your cell very / quite clean?	<i>n</i> =126	31%	39%	31%	
3.3	Did you feel safe on your first night here?	<i>n</i> =125	58%	78%	58%	67%
3.4	In your first few days here, did you get:					
	- Access to the prison shop / canteen?	<i>n</i> =125	32%	29%	32%	20%
	- Free PIN phone credit?	<i>n</i> =125	26%	55%	26%	
	- Numbers put on your PIN phone?	<i>n</i> =122	34%	47%	34%	
3.5	Have you had an induction at this prison?	<i>n</i> =126	84%	94%	84%	89%
	<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	<i>n</i> =106	37%	52%	37%	

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ON THE WING						
4.1	Are you in a cell on your own?	<i>n=127</i>	100%	66%	100%	
4.2	Is your cell call bell normally answered within 5 minutes?	<i>n=126</i>	19%	25%	19%	12%
4.3	On the wing or houseblock you currently live on:					
	- Do you normally have enough clean, suitable clothes for the week?	<i>n=127</i>	72%	60%	72%	48%
	- Can you shower every day?	<i>n=127</i>	87%	88%	87%	25%
	- Do you have clean sheets every week?	<i>n=126</i>	76%	56%	76%	29%
	- Do you get cell cleaning materials every week?	<i>n=127</i>	65%	37%	65%	28%
	- Is it normally quiet enough for you to relax or sleep at night?	<i>n=124</i>	60%	57%	60%	46%
	- Can you get your stored property if you need it?	<i>n=125</i>	28%	25%	28%	17%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	<i>n=124</i>	44%	57%	44%	
FOOD AND CANTEEN						
5.1	Is the quality of the food in this prison very / quite good?	<i>n=122</i>	48%	40%	48%	
5.2	Do you get enough to eat at meal-times always / most of the time?	<i>n=125</i>	38%	35%	38%	
5.3	Does the shop / canteen sell the things that you need?	<i>n=122</i>	57%	60%	57%	35%
RELATIONSHIPS WITH STAFF						
6.1	Do most staff here treat you with respect?	<i>n=121</i>	59%	62%	59%	57%
6.2	Are there any staff here you could turn to if you had a problem?	<i>n=123</i>	59%	60%	59%	47%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<i>n=122</i>	38%	31%	38%	31%
6.4	Do you have a personal officer?	<i>n=118</i>	97%	80%	97%	
	<i>For those who have a personal officer:</i>					
6.4	Is your personal or named officer very / quite helpful?	<i>n=114</i>	61%	40%	61%	
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	<i>n=121</i>	7%	7%	7%	
6.6	Do you feel that you are treated as an individual in this prison?	<i>n=121</i>	31%	45%	31%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	<i>n=122</i>	57%	52%	57%	
	If so, do things sometimes change?	<i>n=69</i>	20%	24%	20%	
FAITH						
7.1	Do you have a religion?	<i>n=122</i>	84%	69%	84%	77%
	<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	<i>n=103</i>	73%	74%	73%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	<i>n=103</i>	79%	67%	79%	
7.4	Are you able to attend religious services, if you want to?	<i>n=102</i>	78%	84%	78%	

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CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	n=121	33%	28%	33%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	n=124	69%	66%	69%
8.3	Are you able to use a phone every day (if you have credit)?	n=124	96%	68%	96%
8.4	Is it very / quite easy for your family and friends to get here?	n=122	34%	31%	34%
8.5	Do you get visits from family/friends once a week or more?	n=119	19%	20%	19%
<i>For those who get visits:</i>					
8.6	Do visits usually start and finish on time?	n=93	46%	54%	46%
8.7	Are your visitors usually treated respectfully by staff?	n=91	56%	76%	56%
TIME OUT OF CELL					
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=123	80%	79%	80%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>					
9.1	Are these times usually kept to?	n=98	37%	58%	37%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	n=123	34%	36%	34%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	n=123	2%	4%	2%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=122	81%	78%	81%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=122	0%	1%	0%
9.4	Do you have time to do domestics more than 5 days in a typical week?	n=121	28%	38%	28%
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=122	0%	53%	0%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=121	94%	63%	94%
9.7	Do you typically go to the gym twice a week or more?	n=123	27%	33%	27%
9.8	Do you typically go to the library once a week or more?	n=123	53%	31%	53%
<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=87	47%	70%	47%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	n=123	81%	68%	81%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	n=114	59%	44%	59%
	Are applications usually dealt with within 7 days?	n=113	20%	17%	20%
10.3	Is it easy for you to make a complaint?	n=120	68%	58%	68%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	n=89	26%	27%	26%
	Are complaints usually dealt with within 7 days?	n=87	15%	20%	15%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=101	44%	32%	44%

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<i>For those who need it, is it easy to:</i>						
10.6	Communicate with your solicitor or legal representative?	n=100	27%	22%	27%	
	Attend legal visits?	n=101	48%	45%	48%	
	Get bail information?	n=75	8%	12%	8%	
<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=91	54%	57%	54%	65%
HEALTH CARE						
11.1	Is it very / quite easy to see:					
	- Doctor?	n=124	42%	43%	42%	
	- Nurse?	n=123	60%	60%	60%	
	- Dentist?	n=124	18%	21%	18%	
	- Mental health workers?	n=123	38%	36%	38%	
11.2	Do you think the quality of the health service is very / quite good from:					
	- Doctor?	n=122	56%	57%	56%	
	- Nurse?	n=122	65%	60%	65%	
	- Dentist?	n=121	26%	38%	26%	
	- Mental health workers?	n=120	32%	40%	32%	
11.3	Do you have any mental health problems?	n=121	28%	36%	28%	
<i>For those who have mental health problems:</i>						
11.4	Have you been helped with your mental health problems in this prison?	n=33	42%	57%	42%	
11.5	Do you think the overall quality of the health services here is very / quite good?	n=120	51%	47%	51%	
OTHER SUPPORT NEEDS						
12.1	Do you consider yourself to have a disability?	n=123	20%	23%	20%	19%
<i>For those who have a disability:</i>						
12.2	Are you getting the support you need?	n=19	32%	36%	32%	
12.3	Have you been on an ACCT in this prison?	n=120	15%	17%	15%	
<i>For those who have been on an ACCT:</i>						
12.4	Did you feel cared for by staff?	n=17	53%	61%	53%	
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=120	20%	19%	20%	
ALCOHOL AND DRUGS						
13.1	Did you have an alcohol problem when you came into this prison?	n=123	2%	11%	2%	11%
<i>For those who had / have an alcohol problem:</i>						
13.2	Have you been helped with your alcohol problem in this prison?	n=3	67%	61%	67%	93%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=122	14%	23%	14%	18%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=124	10%	8%	10%	11%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=124	3%	5%	3%	
<i>For those who had / have a drug problem:</i>						
13.6	Have you been helped with your drug problem in this prison?	n=25	56%	57%	56%	82%
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=123	24%	24%	24%	
13.8	Is it very / quite easy to get alcohol in this prison?	n=123	9%	9%	9%	

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SAFETY						
14.1	Have you ever felt unsafe here?	n=120	53%	45%	53%	61%
14.2	Do you feel unsafe now?	n=122	27%	21%	27%	29%
14.3	Have you experienced any of the following from other prisoners here:					
	- Verbal abuse?	n=118	33%	33%	33%	
	- Threats or intimidation?	n=118	30%	28%	30%	
	- Physical assault?	n=118	26%	17%	26%	
	- Sexual assault?	n=118	2%	2%	2%	
	- Theft of canteen or property?	n=118	18%	15%	18%	
	- Other bullying / victimisation?	n=118	8%	13%	8%	
	- Not experienced any of these from prisoners here	n=118	59%	61%	59%	
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	n=117	16%	20%	16%	
14.5	Have you experienced any of the following from staff here:					
	- Verbal abuse?	n=124	53%	38%	53%	
	- Threats or intimidation?	n=124	42%	27%	42%	
	- Physical assault?	n=124	28%	17%	28%	
	- Sexual assault?	n=124	3%	2%	3%	
	- Theft of canteen or property?	n=124	13%	11%	13%	
	- Other bullying / victimisation?	n=124	22%	12%	22%	
	- Not experienced any of these from staff here	n=124	39%	54%	39%	
14.6	If you were being bullied / victimised by staff here, would you report it?	n=121	35%	37%	35%	
BEHAVIOUR MANAGEMENT						
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	n=122	32%	41%	32%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	n=121	26%	25%	26%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	n=123	49%	35%	49%	35%
	<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=60	35%	33%	35%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	n=122	39%	29%	39%	
	<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=48	54%	45%	54%	
	Could you shower every day?	n=48	77%	46%	77%	
	Could you go outside for exercise every day?	n=48	81%	74%	81%	
	Could you use the phone every day (if you had credit)?	n=48	71%	34%	71%	

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n=number of valid responses to question (HMYOI Aylesbury 2019)

EDUCATION, SKILLS AND WORK									
16.1	In this prison, is it easy to get into the following activities:								
	- Education?	n=122	62%	54%	62%				
	- Vocational or skills training?	n=119	19%	26%	19%				
	- Prison job?	n=118	25%	34%	25%				
	- Voluntary work outside of the prison?	n=118	0%	4%	0%				
16.2	In this prison, have you done the following activities:								
	- Education?	n=122	93%	85%	93%	84%			
	- Vocational or skills training?	n=119	61%	64%	61%	68%			
	- Prison job?	n=115	91%	74%	91%	81%			
	- Voluntary work outside of the prison?	n=117	26%	36%	26%				
	- Paid work outside of the prison?				n=116	26%	34%	26%	
	<i>For those who have done the following activities, do you think they will help you on release:</i>								
	- Education?	n=114	69%	61%	69%	61%			
	- Vocational or skills training?	n=73	66%	61%	66%	54%			
	- Prison job?	n=105	44%	44%	44%	52%			
	- Voluntary work outside of the prison?	n=30	47%	55%	47%				
	- Paid work outside of the prison?	n=30	50%	55%	50%				
16.3	Do staff encourage you to attend education, training or work?				n=122	48%	58%	48%	
PLANNING AND PROGRESSION									
17.1	Do you have a custody plan?				n=122	63%	60%	63%	
	<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=75	75%	76%	75%	
17.3	Are staff helping you to achieve your objectives or targets?				n=74	31%	28%	31%	
17.4	In this prison, have you done:								
	- Offending behaviour programmes?	n=74	43%	38%	43%				
	- Other programmes?	n=75	49%	42%	49%				
	- One to one work?	n=75	51%	40%	51%				
	- Been on a specialist unit?	n=75	16%	20%	16%				
	- ROTL - day or overnight release?	n=75	7%	12%	7%				
	<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>								
	- Offending behaviour programmes?	n=32	69%	58%	69%				
	- Other programmes?	n=37	70%	62%	70%				
	- One to one work?	n=38	71%	64%	71%				
	- Being on a specialist unit?	n=12	33%	42%	33%				
	- ROTL - day or overnight release?	n=5	0%	25%	0%				

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

Number of completed questionnaires returned

	HMYOI Aylesbury 2019	All other young adult prisons	HMYOI Aylesbury 2019	HMYOI Aylesbury 2017
	127	477	127	149

n=number of valid responses to question (HMYOI Aylesbury 2019)

PREPARATION FOR RELEASE						
18.1	Do you expect to be released in the next 3 months?	n=122	4%	39%	4%	
<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?	n=4	25%	33%	25%	
18.3	Is anybody helping you to prepare for your release?	n=5	60%	54%	60%	
18.4	Do you need help to sort out the following for when you are released:					
	- Finding accommodation?	n=5	40%	51%	40%	
	- Getting employment?	n=5	80%	62%	80%	
	- Setting up education or training?	n=5	80%	48%	80%	
	- Arranging benefits?	n=5	40%	55%	40%	
	- Sorting out finances?	n=5	40%	50%	40%	
	- Support for drug or alcohol problems?	n=5	0%	25%	0%	
	- Health / mental Health support?	n=5	0%	33%	0%	
	- Social care support?	n=5	40%	29%	40%	
	- Getting back in touch with family or friends?	n=5	60%	29%	60%	
18.4	Are you getting help to sort out the following for when you are released, if you need it:					
	- Finding accommodation?	n=2	0%	49%	0%	
	- Getting employment?	n=4	25%	25%	25%	
	- Setting up education or training?	n=4	50%	25%	50%	
	- Arranging benefits?	n=2	0%	28%	0%	
	- Sorting out finances?	n=2	0%	33%	0%	
	- Support for drug or alcohol problems?	n=0		45%		
	- Health / mental Health support?	n=0		38%		
	- Social care support?	n=2	50%	33%	50%	
	- Getting back in touch with family or friends?	n=3	67%	46%	67%	
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?	n=123	34%	49%	34%	

HMYOI Aylesbury 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
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Number of completed questionnaires returned

Have a disability				Do not have a disability			
	25				98		
Mental health problems				No mental health problems			
	34				87		

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	100%	100%	100%	100%
	Are you 50 years of age or older?	0%	0%	0%	0%
1.3	Are you from a minority ethnic group?	48%	72%	47%	74%
7.1	Are you Muslim?	50%	42%	46%	43%
11.3	Do you have any mental health problems?	88%	13%		
12.1	Do you consider yourself to have a disability?			65%	3%
19.2	Are you a foreign national?	16%	18%	15%	19%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	8%	4%	12%	2%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	60%	71%	71%	68%
2.4	Overall, were you treated very / quite well in reception?	67%	81%	73%	81%
2.5	When you first arrived, did you have any problems?	96%	71%	94%	68%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	25%	24%	27%	24%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	50%	62%	49%	64%
3.5	Have you had an induction at this prison?	80%	86%	82%	86%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	40%	37%	36%	38%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	8%	23%	12%	23%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	68%	72%	65%	75%
	- Can you shower every day?	72%	91%	71%	94%
	- Do you have clean sheets every week?	80%	75%	74%	78%
	- Do you get cell cleaning materials every week?	64%	66%	53%	71%
	- Is it normally quiet enough for you to relax or sleep at night?	44%	64%	35%	70%
	- Can you get your stored property if you need it?	21%	31%	27%	29%

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Number of completed questionnaires returned

	Have a disability	Do not have a disability	Mental health problems	No mental health problems
	25	98	34	87

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	46%	36%	39%	37%
5.3	Does the shop / canteen sell the things that you need?	44%	60%	50%	59%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	57%	60%	50%	63%
6.2	Are there any staff here you could turn to if you had a problem?	79%	54%	64%	58%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	44%	37%	47%	35%
6.6	Do you feel that you are treated as an individual in this prison?	25%	33%	33%	32%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	60%	76%	61%	78%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	75%	80%	75%	81%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	30%	34%	34%	33%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	79%	65%	70%	68%
8.3	Are you able to use a phone every day (if you have credit)?	96%	97%	97%	97%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	57%	57%	63%	54%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	38%	32%	30%	34%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	0%	2%	0%	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?	36%	50%	44%	49%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	72%	83%	79%	81%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	54%	61%	64%	57%
10.3	Is it easy for you to make a complaint?	75%	65%	72%	66%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	27%	24%	24%	24%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	63%	37%	60%	35%

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

Number of completed questionnaires returned

	Have a disability	Do not have a disability	Mental health problems	No mental health problems
	25	98	34	87

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	40%	43%	50%	39%
	- Nurse?	63%	59%	67%	58%
	- Dentist?	4%	21%	15%	18%
	- Mental health workers?	60%	33%	56%	31%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	52%	25%	42%	
11.5	Do you think the overall quality of the health services here is very / quite good?	48%	52%	61%	47%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	32%		35%	0%
SAFETY					
14.1	Have you ever felt unsafe here?	60%	50%	65%	46%
14.2	Do you feel unsafe now?	40%	22%	38%	21%
14.3	Not experienced bullying / victimisation by other prisoners	33%	65%	32%	70%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	28%	13%	24%	14%
14.5	Not experienced bullying / victimisation by members of staff	16%	44%	24%	44%
14.6	If you were being bullied / victimised by staff here, would you report it?	40%	33%	38%	33%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	24%	34%	24%	35%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	20%	28%	27%	26%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	76%	42%	56%	47%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	60%	34%	44%	37%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	40%	50%	47%	49%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	72%	61%	68%	62%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	22%	34%	26%	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?		60%		60%
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?	20%	38%	27%	38%

HMYOI Aylesbury 2019

Comparison of survey responses between sub-populations of prisoners

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

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

Number of completed questionnaires returned

	21 and under	Over 21
Number of completed questionnaires returned	108	18

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 25 years of age?	100%	100%
	Are you 50 years of age or older?	0%	0%
1.3	Are you from a minority ethnic group?	66%	72%
7.1	Are you Muslim?	45%	33%
11.3	Do you have any mental health problems?	28%	29%
12.1	Do you consider yourself to have a disability?	22%	12%
19.2	Are you a foreign national?	21%	0%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	6%	0%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	66%	89%
2.4	Overall, were you treated very / quite well in reception?	77%	89%
2.5	When you first arrived, did you have any problems?	77%	72%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	22%	36%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	58%	67%
3.5	Have you had an induction at this prison?	82%	94%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	36%	41%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	19%	22%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	72%	72%
	- Can you shower every day?	87%	89%
	- Do you have clean sheets every week?	77%	71%
	- Do you get cell cleaning materials every week?	64%	72%
	- Is it normally quiet enough for you to relax or sleep at night?	58%	67%
	- Can you get your stored property if you need it?	28%	28%

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

	21 and under	Over 21
Number of completed questionnaires returned	108	18

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	36%	50%
5.3	Does the shop / canteen sell the things that you need?	56%	63%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	61%	44%
6.2	Are there any staff here you could turn to if you had a problem?	55%	83%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	38%	39%
6.6	Do you feel that you are treated as an individual in this prison?	32%	28%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	74%	67%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	77%	87%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	32%	41%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	68%	72%
8.3	Are you able to use a phone every day (if you have credit)?	96%	94%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	55%	67%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	34%	29%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	2%	0%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	48%	46%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	80%	82%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	59%	59%
10.3	Is it easy for you to make a complaint?	68%	65%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	24%	29%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	42%	47%

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

Number of completed questionnaires returned

	21 and under	Over 21
	108	18

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	45%	24%
	- Nurse?	61%	50%
	- Dentist?	18%	18%
	- Mental health workers?	41%	24%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	41%	50%
11.5	Do you think the overall quality of the health services here is very / quite good?	50%	56%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	35%	0%
SAFETY			
14.1	Have you ever felt unsafe here?	52%	53%
14.2	Do you feel unsafe now?	28%	18%
14.3	Not experienced bullying / victimisation by other prisoners	62%	41%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	17%	12%
14.5	Not experienced bullying / victimisation by members of staff	41%	29%
14.6	If you were being bullied / victimised by staff here, would you report it?	36%	24%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	34%	24%
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?	51%	41%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	39%	41%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	43%	77%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	63%	65%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	27%	55%
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%	50%
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?	34%	35%