

Report on an unannounced inspection of

HMP Wealstun

by HM Chief Inspector of Prisons

15–25 October 2019

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Glossary of terms

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

Introduction

HMP Wealstun is a category C training and resettlement prison for adult men, situated a few miles from Wetherby in Yorkshire. At the time of this inspection some 820 prisoners were being held there. The population was transient and young, with two-thirds of the prisoners having been held there for less than six months, and around a third being aged under 30.

The prison was last inspected in 2015, on which occasion it was judged to be good or reasonably good in all four of our healthy prison tests. This recent inspection showed there had been a decline in two of those areas, safety and purposeful activity, in which we found that outcomes were now insufficiently good.

The ready availability of illicit drugs undermined much of what the prison was trying to achieve. In our survey, 69% of prisoners told us it was easy to obtain drugs, and nearly a quarter of all prisoners said they had acquired a drug habit since entering the jail – a remarkable figure given the short time that many prisoners stayed there. The prison had benefitted, belatedly, from being part of the ‘10 Prisons Project’ set up under the last but one Prisons Minister, and as a result now had some modern technology in place to help detect drugs and enhanced physical security to help keep them out. We were told that although the project had been set up in August 2018, support at a local level had not materialised until March 2019, and it could well be that the longer-term benefits of the project have yet to be felt.

The positive impact of technology and physical security improvements was compromised by the lack of response to intelligence reports. Far too little targeted searching or testing had been carried out, which, in view of the fact that the intelligence itself appeared to be of a good quality, was a missed opportunity. There was no clear overall strategy to deal with the drugs supply problem. Until such time as there is a comprehensive action plan in place, that not only requires an effective response to intelligence but is also proactive in seeking out incoming supply routes, the harms caused by the ready availability of drugs will not be reduced.

It was disturbing to find that levels of self-harm had increased six-fold since the last inspection. As in many prisons that we inspect, not enough had been done to analyse and understand what sat behind this huge increase. Until such analysis is carried out, it will not be possible to know whether the excessive amount of time that prisoners spent locked in their cells was a contributory factor or not. For a training prison such as Wealstun to have 28% of prisoners locked in their cells during the working day, as we found during this inspection, was simply counter-productive and unacceptable. Far too many prisoners failed to attend their allocated activity, which was a lost opportunity as we found that those who did attend generally had a positive attitude to learning and work, and in many cases were proud of their achievements.

I frequently refer in inspection reports to the weaknesses in the Offender Assessment System (OASys) which seem to afflict so many prisons. Given that nearly half of the prisoners were assessed as presenting a high risk of serious harm to others, it was concerning to find that Wealstun suffered from these same weaknesses, which appear to be systemic. OASys is supposed to provide the basis for managing risk, informing sentence planning, making re-categorisation decisions and planning for release. However, we found that 75% of prisoners who were arriving at Wealstun were doing so without an assessment, and more than a quarter had one that had not been updated for more than a year. There had been some creditable work carried out locally to try to devise sentence plans, but two-thirds of these were missing in the cases we looked at, and where they did exist they were ineffective. The widespread shortcomings of OASys comprise in my view a strategic failure that undermines so much good work that we see being carried out at a local level, and demands a more co-ordinated and serious response from HM Prison and Probation Service (HMPPS) than has been the case to date.

Given the failure in so many cases to properly assess the risks presented by prisoners, it was perhaps inevitable that we should find other serious weaknesses in public protection and release planning. These are set out in detail in the report, but in essence amount to failures in what should be standard procedures.

I have deliberately focused on a number of key weaknesses, because they inevitably undermined much of the very good work that was being carried out at Wealstun. The relationships between staff and prisoners were generally very good, although at times we did see poor behaviour going unchallenged. Healthcare was good, and in many cases living conditions had improved considerably. Overall, we judged that outcomes in our respect test were good, our highest grade, and that is to the credit of the establishment, given the challenges they face in so many areas. I have little doubt that if the key areas of illicit drug supply and failure to assess risks were to be addressed, Wealstun could recover from the decline in grades since the last inspection, and indeed move on to better serve the needs of its prisoners.

Peter Clarke OBE CVO QPM
HM Chief Inspector of Prisons

October 2019

Fact page

Task of the establishment

HMP Wealstun is a category C adult training and resettlement prison for men.

Certified normal accommodation and operational capacity¹

Prisoners held at the time of inspection: 823

Baseline certified normal capacity: 820

In-use certified normal capacity: 812

Operational capacity: 812

Notable features from this inspection

Two-thirds of the population had been at the prison for six months or less.

Nearly half of the population had been assessed as presenting a high risk of serious harm to others.

In our survey, far more prisoners than at similar prisons reported arriving at the prison feeling suicidal or withdrawing from drugs and alcohol.

The population was relatively young, in comparison with similar prisons; 35% of prisoners were under 29 years of age and only 6% were over the age of 50.

Most prisoners lived in single accommodation.

At the time of the inspection, around a third of prison officers had less than one year of service.

Prison status (public or private) and key providers

Public

Physical health provider: Care UK

Mental health provider: Care UK

Substance use treatment provider: Midlands Partnership NHS Foundation Trust and Care UK

Prison education framework provider: Novus

Community rehabilitation company (CRC): Interserve Justice, known as West Yorkshire CRC

Escort contractor: GeoAmev

Prison group/Department

Yorkshire

Brief history

On 1 April 1995, HM Prisons Thorp Arch and Rudgate amalgamated to form HMP Wealstun. This created a category C (closed) side and category D (open) side within one establishment. In 2008, the open prison closed and the prison underwent a conversion to an entirely category C prison, which

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.

was fully operational in May 2010. Since May 2015, it has served a resettlement function for the West Yorkshire area.

Short description of residential units

There are 10 residential units and a 13-bed segregation unit.

A and B wings are the original 1960 remand centre buildings, which between them hold 230 prisoners in a combination of single and double cells. A wing is split in to two units, a standard residential unit and a residential support unit (RSU). The purpose of the RSU is to support prisoners who struggle to cope until they can be successfully reintegrated back onto one of the main residential units.

C wing holds 180 prisoners in single cells, and includes two safer cells. This wing also accommodates the majority of prisoners on the integrated drug treatment system programme (90 spaces). D wing is a prefabricated single-cell accommodation unit, holding 120 prisoners. Half of D wing supports the incentivised substance-free living initiative.

E, F, G, H, I and J wings were converted from open category D accommodation to closed category C accommodation. Between them, they hold 300 prisoners, with approximately 50 on each unit, in single-cell accommodation.

I wing supports prisoners on induction/first night but also holds some of the older population.

Name of governor and date in post

Diane Lewis (October 2015)

Independent Monitoring Board chair

Rebecca Major

Date of last inspection

17–28 August 2015

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

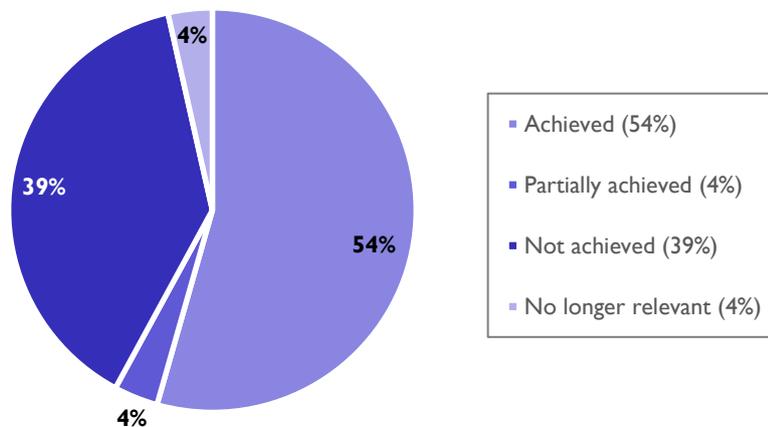
² <https://www.justiceinspectorates.gov.uk/hmiprison/our-expectations/prison-expectations/>

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 HMP Wealstun in 2015 and made 57 recommendations overall. The prison fully accepted 41 of the recommendations and partially (or subject to resources) accepted 11. It rejected five of the recommendations.
- S2 At this follow-up inspection, we found that the prison had achieved 31 of those recommendations, partially achieved two recommendations and did not achieve 22 recommendations. Two recommendations were no longer relevant.

Figure 1: HMP Wealstun progress on recommendations from last inspection (n=57)



- S3 Since our last inspection of HMP Wealstun, outcomes for prisoners declined in two healthy prison areas, with Safety and Purposeful activity declining from reasonably good to not sufficiently good. Outcomes stayed in the same in two areas, with Respect remaining good and Rehabilitation and release planning remaining sufficiently good.

Figure 2: HMP Wealstun healthy prison outcomes 2015 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** *Early days support had improved and was good. The proportion of prisoners feeling unsafe at the time of the inspection was similar to that in other category C prisons. Violence levels were slightly higher than in similar prisons, although most incidents at Wealstun were low level. Too many adjudications were not proceeded with. The use of PAVA was not always necessary. Treatment and conditions on the segregation unit were good. Important improvements to physical security had been introduced but not enough searching and testing was being undertaken, which made illicit drugs far too easily available, and this was having an impact on some of the most important outcomes for prisoners. The number of self-harm incidents was very high but a large proportion were committed by a small number of prisoners. Care for those in crisis was reasonably good. Safeguarding work was better than we often see. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S5** *At the last inspection, in 2015, we found that outcomes for prisoners in HMP Wealstun were reasonably good against this healthy prison test. We made 17 recommendations in the area of safety.⁵ At this inspection, we found that nine of the recommendations had been achieved, one had been partially achieved and seven had not been achieved.*
- S6** Prisoners no longer had to wait on escort vans over the staff lunch period. Reception processes were efficient. Initial interviews in reception were focused on safety, which was appropriate as, in our survey, prisoners reported a wide range of vulnerability issues on arrival at the establishment. Peer support during the early days in custody had improved and was now good. The prison was appropriately focused on reducing the risk of debts during a prisoner's first few days in custody, which was good practice.
- S7** The induction unit had been relocated and provided well-equipped, clean, single-cell accommodation. First night procedures were sound, and staff undertook additional safety checks on new prisoners during their first night. The induction programme was reliably delivered and covered all the necessary information.
- S8** The staffing of the safer custody team had been increased and it was now much more effective. In our survey, the proportion of prisoners feeling unsafe had increased but was now similar to that at other category C prisons we have inspected recently. Over the last year, levels of violence had fluctuated and were now slightly higher than the average across all other category C prisons, although few incidents were serious. Most of the violence was caused by drug use and associated debts. The prison was aware of these issues and discussed individual prisoners in detail, but had not yet developed a focused violence reduction action plan that could show positive outcomes.
- S9** Some wings were not supervised well enough and some staff failed to challenge poor behaviour by prisoners. Challenge, support and intervention plans⁶ were of good quality, and most wing staff we spoke to were aware of them. However, there were few formal interventions to support victims.
- S10** The regime for those living on the main wings who needed protection from others was poor, with many unable to access basic facilities, such as outdoor exercise. The residential support unit (RSU), which housed prisoners who had either been segregated for their own

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

⁶ 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.

protection or were self-isolating in fear of reprisals due to debt, was a good initiative but lacked a therapeutic approach to enable successful reintegration.

- S11 Just under half of the prisoners in our survey said that the incentives and earned privileges (IEP) scheme encouraged them to behave well. Targets for prisoners on the basic level of the scheme were not always individualised, and reviews were sometimes late or missed.
- S12 The number of adjudications was high and too many were not proceeded with, which undermined staff in their efforts to challenge poor behaviour. Tariffs were severe for minor offences, and too many charges were for low-level offences that could have been dealt with by other means, such as the IEP scheme.
- S13 Levels of use of force were similar to those at other category C prisons. Most paperwork was up to date and all incidents were reviewed, including those that involved the use of PAVA.⁷ However, body-worn cameras were rarely used and we were concerned that, in the incidents we reviewed, the use of PAVA had not always been necessary.
- S14 Segregation was not used excessively and most stays were short. The routine use of unauthorised special accommodation for those being admitted to the unit was unnecessary. The unit was reasonably well maintained, and relationships between segregation staff and prisoners were good. Reintegration planning was effective and transfers out were used appropriately.
- S15 A large number of intelligence reports had been submitted in the previous six months. Analysis of the intelligence was timely but far too little searching and drug testing had been undertaken, which undermined the prison's attempts to reduce the influx of drugs. However, there had been some good joint work between the prison, police and the regional team, and there had been a huge investment in technology and physical security. Despite this, the availability of illicit drugs remained a huge concern and was underpinning much of the prisoner debt and associated violence. In our survey, 69% of prisoners said that illicit drugs were easy to get hold of, which was higher than in other category C prisons, and it was clear that psychoactive substances (PS)⁸ were still a serious problem. Large numbers of prisoners had been seen to be under the influence of these over the previous six months, and almost all of the 211 ambulance callouts in that period had been PS related, reflecting the ready availability of drugs in the prison.
- S16 Since the previous inspection, there had been four deaths in custody and a further two deaths in the community shortly after release. One of the deaths in custody was directly linked to the use of PS. Recommendations from the published Prisons and Probation Ombudsman reports following a death in custody were taken seriously and the monitoring of progress against these was good.
- S17 The number of self-harm incidents was high, and had increased sharply since the previous inspection. However, a small number of prisoners carried out a large proportion of these. Data analysis was now good, and had led to some improvements by the safer custody team. However, this had not been used well enough to develop a whole-prison approach to reducing self-harm and addressing the underlying causes of self-harm. Prisoners we spoke to who were subject to assessment, care in custody and teamwork (ACCT) case management procedures for prisoners at risk of suicide or self-harm generally felt well supported. However, the quality of recording in ACCT documents was far too variable.

⁷ PAVA (pelargonic acid vanillylamide) spray is classified as a prohibited weapon by section 5(1) (b) of the Firearms Act 1988.

⁸ Psychoactive substances are either naturally occurring, semi-synthetic or fully synthetic compounds. When taken they affect thought processes or individuals' emotional state. In prisons, these substances are commonly referred to as 'spice'. For more information see <https://www.gov.uk/guidance/psychoactive-substances-in-prisons#what-are-psychoactive-substances>.

- S18 Access to Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) was reasonably good but there was no Listener's suite, which was concerning, given the high levels of self-harm. At the time of the inspection, access to the Samaritans telephone helpline was poor but the prison was taking action to address this.
- S19 The new multidisciplinary safeguarding meeting was effective, and we saw examples of action being taken to protect vulnerable prisoners from abuse. However, residential staff we spoke to did not always have a clear understanding about adult safeguarding or the procedures in place.

Respect

S20 *Working relationships between staff and prisoners remained a strength. Considerable effort had been made to improve living conditions, although a couple of units remained in need of substantial investment. Food and shop provision were reasonable. Responses to applications and complaints were not sufficiently timely. Consultation arrangements were reasonable overall. Equality and diversity work was improving but data analysis was still too limited. More work was needed to ensure that the needs of the small number of prisoners with physical disabilities were fully met, and the large population of younger prisoners needed more planned support. Faith provision was reasonable. Health care provision and substance misuse work were good. **Outcomes for prisoners were good against this healthy prison test.***

S21 *At the last inspection, in 2015, we found that outcomes for prisoners in HMP Wealstun were good against this healthy prison test. We made 22 recommendations in the area of respect. At this inspection, we found that 11 of the recommendations had been achieved, one had been partially achieved, eight had not been achieved and two were no longer relevant.*

- S22** In our survey, most respondents, and more than in similar prisons, said that staff treated them respectfully, and most said that they had someone to turn to for help. The interactions we observed were positive, and staff generally knew prisoners well. Implementation of the key worker scheme was developing well.
- S23** Outside areas were tidy, and most communal areas well maintained. Most prisoners lived in single-cell accommodation. Cells were well equipped, and most were clean and tidy. Considerable efforts had been made to improve living conditions across the prison, but the quality of accommodation on A and B wings remained outdated and in need of substantial investment. Some showers had been refurbished to a good standard but others had poor drainage and ventilation.
- S24** The quality of the food provided was reasonable, and breakfast provision had improved. Few prisoners working on the wing serveries wore appropriate clothing. The main kitchen was well ordered, clean and run impressively, similarly to a commercial kitchen. As at the previous inspection, new prisoners had to wait far too long for their first full shop order, which increased the risk of accruing debt.
- S25** Consultation with prisoners was reasonably good. The governor's monthly 'Question Time' meeting was positive and effective, but wing forums were not held consistently. In our survey, prisoners' perceptions about the application process were far worse than at the time of the previous inspection. Although we considered that applications were easy to make, prisoners were frustrated by the lack of timely responses, and what they perceived to be an unwillingness by some staff to resolve issues informally, to remove the need for a formal application to be made. Responses to complaints were polite and generally addressed the

issues raised. However, not all were timely and trend analysis was limited. There were insufficient legal visits sessions to meet demand.

- S26 The management of equality had begun to improve, following a period of decline, but was still not given sufficient priority. Although the analysis of equality data was improving, it remained limited and was not leading to improvements. Investigations into discrimination incident report forms were appropriate and quality assurance was reasonable. Dedicated and regular consultation with prisoners with protected characteristics was evolving but still limited. Senior managers had been identified for each relevant protected characteristic but they had not yet identified prisoner representatives to work with them.
- S27 Around a quarter of the population were from a black and minority ethnic background. Our survey showed few negative perceptions from this group, and we saw no evidence of disproportionate treatment. There was no specific support for the small number of foreign national prisoners held at the establishment. Some needs of prisoners with disabilities were not being met. For example, not all reasonable adjustments had been made and there were no formal prisoner carers in post, which made daily living difficult for the small number of prisoners with physical disabilities. Older prisoners received adequate support. Despite a third of the population being young (aged under 30), there was too little specific support for them.
- S28 Faith provision was reasonable and a senior chaplain was being recruited, which would be a positive addition to the team. Prisoners had good access to a chaplain of their own faith. Pastoral support was positive, and links with community faith groups had improved.
- S29 Health services were good, with well-developed and effective governance arrangements and partnership working. An appropriate range of health services was provided by a caring and skilled staff group. However, prisoners did not always attend health care appointments, which wasted clinical time.
- S30 Appropriate services were available to assess and provide social care for those meeting the threshold. Treatment services for prisoners with drug and alcohol problems continued to meet demand, with some good practice, including the introduction of the incentivised substance-free living wing, which provided a positive enabling environment. The mental health team provided a good service.
- S31 Pharmacy and medicines management was adequate, although in-possession risk assessments needed better governance. Prisoners waited too long to see a dentist for routine care.

Purposeful activity

S32 *A full regime was now in place and it was reliably delivered. Prisoners in full-time activity had a reasonably good amount of time out of cell during the working week. However, time out of cell for some others was poor. We found too many prisoners locked in their cell during the working day. Ofsted graded the overall effectiveness of education, skills and work as 'requires improvement'. The quality of teaching, learning and assessment was good, prisoners' outcomes were positive, and prisoners developed their personal and work-related skills well. However, too many prisoners did not attend their allocated activities and too many left courses before the end. Managers were aware of many of the weaknesses in their provision, yet insufficient progress had been made to date.*
Outcomes for prisoners were not sufficiently good against this healthy prison test.

S33 *At the last inspection, in 2015, we found that outcomes for prisoners in HMP Wealstun were reasonably good against this healthy prison test. We made eight recommendations in the area of*

purposeful activity. At this inspection, we found that six of the recommendations had been achieved and two had not been achieved.

- S34 A full regime had been reinstated and ran to time, but in our spot checks, we found approximately 28% of prisoners locked in their cells during the working day, which was far too high for a training prison.
- S35 Most fully employed prisoners could have about nine hours out of their cell each day during the week. However, some others – for example, those on the basic level of the IEP scheme – had as little as one hour out of their cell each day during the week and less at the weekend, which was poor.
- S36 A wide range of relevant and useful material was available in the two main libraries. Access had improved, and in our survey more prisoners than at the time of the previous inspection said that they went to the library at least once a week. PE facilities were good, and included evening and weekend sessions and dedicated sessions for specific groups, although the football pitch was not in use at the time of the inspection.
- S37 The governor had a clear oversight of the education, skills and work provision. She was engaged in a range of meetings and carefully tracked the impact of actions taken. Prison leaders worked well with the education delivery partners, and leaders held them to account well. A wide range of provision was available, and the courses on offer had been aligned to the local employment opportunities available on release. Leaders had ensured that there was suitable provision for careers education, information, advice and guidance.
- S38 Leaders and managers had self-assessed the quality of provision accurately. They were aware of most of the key weaknesses within their provision. Attendance at purposeful activity had improved but was still not high enough. Too many prisoners who started qualifications did not complete them. Leaders and managers did not gather or analyse information about the proportion of prisoners who progressed to education, training or work on release.
- S39 Most teaching and instructing was of good quality and enabled prisoners to develop their skills well. Most prisoners benefited from useful and helpful feedback on their work. In education classes, most tutors carefully corrected prisoners' spelling and grammatical errors. As a result, prisoners improved the quality of their work over time. Peer mentors were used in education and work well. Most tutors used challenging activities to ensure that prisoners worked well and did more than the minimum needed to achieve qualifications. Most prisoners were making the progress expected of them, based on their starting points. A few tutors in education did not check prisoners' understanding of concepts before they moved on to new learning. Prisoners in work did not have their additional support needs identified or supported well enough. Too few prisoners with wing-based work were kept purposefully occupied for the duration of the work session.
- S40 Most prisoners demonstrated a positive attitude to their learning and work, and most were proud of the work they produced. Generally, prisoners were well behaved and showed respect to each other, staff and visitors. Prisoners in education classes produced work that was appropriate for the level of their programme. The standard of practical work produced by those in vocational training was particularly high.
- S41 Prisoners did not receive comprehensive information about the full range of qualifications and training that was available in prison work. Too few prisoners in prison workshops used their 'skills portfolios' to record and recognise the development of their personal and employment-related skills.

- S42 The proportion of prisoners who achieved their qualifications was high for most subject areas. Prisoners in work and vocational training developed good, vocationally relevant skills. They were able to explain how they had developed their skills, and were clear about how these would help them in the future. Most prisoners engaged in education developed knowledge and skills that enhanced their understanding of the subject that they were studying. However, the proportion who achieved qualifications in English and mathematics was too low.

Rehabilitation and release planning

S43 *Support for prisoners to build and maintain family ties had improved and was now very good. Work to reduce reoffending was reasonably good. However, too many prisoners did not have an up-to-date offender assessment system (OASys) assessment and the levels of contact with prison offender managers did not drive sentence progression. Home detention curfew processes were sound. Some public protection measures were poorly understood. Planning for the release of the large number of high-risk prisoners was inconsistent. Accredited offending behaviour programmes were delivered reliably but there were too few other opportunities for prisoners to address their offending behaviour. Support for finance, benefit and debt was good and most prisoners were released to sustainable accommodation. Release planning was good. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S44 *At the last inspection, in 2015, we found that outcomes for prisoners in HMP Wealstun were reasonably good against this healthy prison test. We made 10 recommendations in the area of resettlement.⁹ At this inspection, we found that five of the recommendations had been achieved and five had not been achieved.*

- S45 Family engagement workers from a charity (Jigsaw) were now in place and provided some good support to prisoners, including some excellent work with family members in the community. A parenting course had been introduced since the previous inspection. In addition, a good number of family days were run by the prison, and valued by prisoners, and all prisoners were eligible to apply for them.
- S46 There were sufficient visits sessions for the population, and some proactive steps had been taken to improve the timeliness of the sessions. The installation of a telephone in each cell was a positive development which was valued by prisoners.
- S47 At the time of the inspection, the prison's data indicated that nearly half of prisoners were assessed as presenting a high risk of serious harm to others, and two-thirds of the total population had been at the establishment for six months or less, which presented challenges to good offender management.
- S48 Strategic work to reduce reoffending was reasonably good. The strategy was underpinned by a range of useful data but needed updating to reflect the needs of the current population. The action plan did not cover some of the resettlement pathways. Although regular meetings to coordinate reducing reoffending work had continued, they were not well attended.
- S49 Despite efforts by the offender management unit (OMU), about 40% of eligible prisoners did not have an up-to-date offender assessment system (OASys) assessment, with far too many arriving at the establishment without one. Levels of recorded contact with prison offender

⁹ 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.

managers were poor overall, and did not drive sentence progression. Key worker delivery was not yet good or regular enough to support and enhance the work of the OMU. Home detention curfew processes were sound, and a large proportion were approved.

- S50 The application of some core public protection procedures was inadequate and not well understood by staff and managers. Arrangements to monitor prisoners' telephone calls were ineffective as there was a large backlog of calls waiting to be listened to. Restrictions imposed on prisoners who presented a continuing risk to children were not always enforced. Although visits restrictions for these prisoners were managed well, procedures for stopping these prisoners corresponding with children by letter were not effective.
- S51 A number of high-risk prisoners were released from the establishment every month but risk management planning was inconsistent. There was little evidence of prison-based offender managers liaising with external offender managers to confirm arrangements and plans.
- S52 There was no analysis of need, to evidence the full range of offending behaviour work required. Existing accredited programmes were delivered reliably but there were too few other opportunities for prisoners to address their offending behaviour, including domestic violence. There was no specific support or help for prisoners who had experienced abuse or other personal trauma. The 'problem support mentor scheme' was a good idea but needed to be better supported in practice.
- S53 About one in eight prisoners left the prison without sustainable accommodation on the day of release. St Giles Trust provided one-to-one support for any prisoner with an identified accommodation need but outcomes were not tracked to evidence effectiveness after release. Support to help prisoners to manage their finances was good.
- S54 The demand for resettlement help had increased since the previous inspection. Despite staffing challenges, West Yorkshire Community Rehabilitation Company workers identified prisoners' resettlement needs promptly before release, and the plans were of a reasonable quality. Casework to meet resettlement needs was reasonably good. The monthly resettlement hub was a good innovation which allowed prisoners to engage with a variety of agencies shortly before release.

Key concerns and recommendations

- S55 Key concern: The prison did not adequately act on the information gained from analysing the large number of intelligence reports submitted, and had not used these to inform a plan to reduce violence and drug supply in the prison.

Recommendation: The analysis of intelligence should be used to inform a plan that leads to a clear reduction in drug supply and associated violence.

- S56 Key concern: Despite some improvements to physical security, drugs were far too easily available. Drug use was having a negative effect on outcomes for prisoners, including levels of violence, bullying and intimidation, and the immediate and long-term consequences to their health.

Recommendation: The availability of drugs in the prison should be reduced substantially, providing improved outcomes for prisoners in terms of less violence, bullying, intimidation and reduced immediate and long-term risks to their health.

S57 Key concern: The level of self-harm was six times higher than at the time of the previous inspection. Interviews with all prisoners who had self-harmed were carried out, to help staff to understand the causes of the problem. However, there was no clear strategy to reduce the level of self-harm.

Recommendation: Evidence from data analysis and information gained from prisoners about their reasons for self-harming should be used to develop an effective strategy and action plan that address the underlying causes and reduce the number of incidents of self-harm.

S58 Key concern: Over 28% of prisoners were locked in their cells during the working day, which was far too many for a training prison.

Recommendation: There should be sufficient structured purposeful activity to ensure that all eligible prisoners are engaged in work or training activities during the working day.

S59 Key concern: Too few prisoners attended their allocated activity sessions owing to conflicting priorities during the working day.

Recommendation: The number of prisoners attending their allocated activity sessions during the working day should be increased, by removing conflicting priorities within the prison regime.

S60 Key concern: During the inspection, 12% of eligible prisoners did not have an OASys assessment. A further 27% had an out-of-date assessment, which did not reflect their recent behaviour in custody. The lack of effective assessments undermined sentence progression and access to appropriate interventions for some.

Recommendation: All eligible prisoners should have an up-to-date offender assessment system (OASys) assessment to inform their progression and access to interventions.

S61 Key concern: Levels of contact with prison offender managers were poor, which undermined sentence progression.

Recommendation: All eligible prisoners should have regular contact with an appropriately trained prison offender manager, in order to progress.

S62 Key concern: The application of some public protection procedures was inadequate. For example, arrangements to monitor prisoners' telephone calls were ineffective as there was a large backlog of calls waiting to be listened to. Restrictions on sending and receiving correspondence were not always enforced. When prisoners had applied for contact with specific children, there was often no evidence of the outcome.

Recommendation: Contact restrictions to protect the public should be appropriately enforced and managed.

S63 Key concern: The interdepartmental risk management meeting did not review release plans for all high-risk prisoners and there was too little evidence of contact with the community-based offender manager to discuss risk management release plans, including MAPPA management levels.

Recommendation: The release of prisoners who present a high risk of harm to others in the community should be robustly overseen by the interdepartmental

risk management meeting and include regular and meaningful contact with the community-based offender manager, including confirmation of multi-agency public protection arrangements (MAPPA) management levels where relevant.

Section 1. Safety

Prisoners, particularly the most vulnerable, are held safely.

Early days in custody

Expected outcomes:

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

- I.1 Most journeys to the prison were short, with most prisoners arriving from nearby prisons. They were taken off vans promptly on arrival at the prison. When prisoners arrived just before the staff lunch hour, they were not made to wait unnecessarily on vans while reception was closed, but were taken off and held in reception, which was an improvement since the previous inspection. Prisoners we spoke to said that escort staff had treated them well, and most said that the escort vans were reasonably clean.
- I.2 The prison's video-link facility was under-used, and at the time of the inspection was not used to reduce the number of court productions for those facing further charges; this led to unnecessary journeys to court for some.
- I.3 Reception and early days processes were sound. The prison received about 35 new prisoners a week. All prisoners had a health screening and a first night interview in private, which was sufficiently focused on safety. This was appropriate as, in our survey, considerably more prisoners than at similar prisons reported feeling suicidal (16%) and far more said that they were withdrawing from drugs or alcohol (18%) on arrival at the prison. Moreover, 37% of respondents said that they had felt depressed on arrival and 28% that they had mental health problems.
- I.4 The reception area was clean and provided lots of information for new arrivals. New prisoners were supported by a Listener (a prisoner trained by the Samaritans to provide confidential emotional support to fellow prisoners) and induction orderlies, who provided them with information and reassurance. Peer support during the early days at the establishment had improved. In our survey, 85% of respondents said that they had been treated very or quite well in reception. Strip-searching was undertaken only when intelligence suggested that it was necessary.
- I.5 The induction wing had been relocated, providing a smaller, calmer environment. All new prisoners were escorted from reception to the induction wing by staff and one of the induction orderlies, who helped to settle them in and provide them with bedding packs and utensils. Prisoners usually stayed on the induction wing for one night before being allocated to another wing.
- I.6 First night cells were clean and well prepared. In our survey, far more prisoners (58%) than in similar prisons (41%) said that their first-night cell had been clean. Access to the showers was good, and most new prisoners could have a period of association before being locked up for the night, which gave them a further opportunity to ask questions of the induction orderlies or the Listener located on the induction unit.

- I.7** The prison completed additional first night checks for all new arrivals, and in our survey more prisoners (84%) than at similar prisons (74%) said that they had felt safe on their first night.
- I.8** The following morning, the induction orderlies, supported by safer custody representatives, completed a short induction, to ensure that all new arrivals were familiar with processes at the prison and how to access the things they needed before they were moved on to one of the main residential wings. Induction material was available in languages other than English, although the need for this was low.
- I.9** After induction, all prisoners were seen by a safer custody representative, to see how they were settling in and obtain their feedback about the induction process. However, this information was yet to be analysed, to help with learning, although the prison was in the process of addressing this.
- I.10** Newly arriving prisoners were offered an advance of money, to enable them to buy some basic items while waiting for their first shop order (see paragraph 2.16). Advances could also be given as a one-off payment from prisoners' private spending accounts, in order to reduce the risk of them getting in to debt.

Good practice

- I.11** *Prisoners could pay off advances of money on reception from their private spending account, in order to minimise the risk of them getting into debt.*

Managing behaviour

Expected outcomes:

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

Encouraging positive behaviour

- I.12** In our survey, 48% of respondents said that they had felt unsafe at the prison at some point, and 24% that they currently felt unsafe, both figures being in line with those at similar prisons we have visited recently. Levels of violence had undergone some considerable peaks and troughs over the last year; they were currently slightly higher than they had been a year earlier, and higher than in comparable prisons, although few of these incidents were serious.
- I.13** The staffing of the safer custody team had been increased recently, which allowed them to be more proactive in their approach, and three safer custody officers now investigated every violent incident. The new head of function had provided clear direction, targeting the use of challenge, support and intervention plans (CSIPs)¹⁰ more effectively. There were 27 active CSIPs at the time of the inspection, including for nine prisoners who were self-isolating as they felt under threat from others, two who were victims of violence, and all prisoners who were segregated. These plans were of good quality and provided effective actions and monitoring to support the individuals involved. Wing managers acted as the case managers

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.

for these CSIPs, holding reviews and sharing information among wing staff, who were aware of each case on their wing.

- I.14** The monthly safety meeting had been combined with the security meeting, and a large amount of data was fed into this forum. This was a detailed meeting; it had an overview of all cases of self-harm and violence across the prison, viewed all quality assurance data and brought together a number of key areas in creating a safer prison. However, it did not produce any focused actions or plans to reduce violence across the prison.
- I.15** The monthly safety intervention meeting fed into the broader safety and security meeting, and was effective. It was multi-agency and appropriately focused, looking at each individual CSIP and any referrals for prisoners, providing good outcomes for the prisoners discussed. We saw examples of progressive transfers, mental health interventions and release planning being discussed through this forum. Prisoners who were vulnerable or at risk were also discussed there, and measures were put in place to protect them from abuse.
- I.16** We saw several examples of low-level poor behaviour going unchallenged by staff on some wings, and a lack of supervision, with some staff spending time in offices while prisoners were on association (see also paragraph 2.4).
- I.17** Most of the 17 prisoners who were self-isolating told us that they were in debt for drugs, and as a result feared reprisal from others. They had very little time out of cell; for example, none had time on the exercise yard in the open air, and all had their meals brought to their cell door.
- I.18** The prison had created the residential support unit (RSU), to house prisoners who had either been segregated for their own protection or were self-isolating in fear of reprisal due to debt. This unit could accommodate 27 prisoners, and at the time of the inspection it was fully occupied. It provided a full regime and work for those who lived on it. Two prisoners on the unit had got into debt while on the RSU and were isolating themselves there. There was no strategy or plan for any of the prisoners on the unit to reintegrate, and no debt-related work to reduce the cause of their separation.
- I.19** The incentives and earned privileges (IEP) scheme had recently been relaunched and had yet to become embedded as an effective behavioural management tool. In our survey, just under half of those surveyed said that the scheme encouraged good behaviour, and a similar proportion said that the scheme was administered fairly.
- I.20** At the time of the inspection, there were 78 prisoners on the basic level of the IEP scheme, most because of single serious incidents and the prison's policy on zero tolerance of violence. Although the length of time on the basic level was designed to be dependent on seven-day reviews, it was evident that prisoners could expect to remain on this level of the scheme for 28 days, regardless of their improved behaviour. The case notes we checked showed that, in too many cases, these reviews were either late or missed out altogether. The improvement targets we saw were too often generic, and did not sufficiently address the issues that had led to the prisoner's demotion to the basic level.

Adjudications

- I.21** The number of adjudications conducted over the previous six months was high. The prison had struggled to cope with this large number, and around 20% of all adjudications had not been proceeded with, which undermined staff in their efforts to challenge poor behaviour.

- I.22** Punishment tariffs for low-level offences were disproportionately punitive. An award of three days' cellular confinement, a high-level restrictive punishment, for assault was the starting tariff, and there were examples of seven days' cellular confinement as the starting point for far less serious offences.
- I.23** A large number of charges were for minor offences which could have been dealt with through other means, such as the IEP scheme, reducing the strain on the adjudications system and promoting good behaviour.
- I.24** Adjudication hearings were conducted in a respectful manner and the level of enquiry was good.

Use of force

- I.25** Levels of use of force were similar to those at other category C training prisons we had inspected recently. Wealstun was one of the initial sites to receive PAVA¹¹ incapacitant spray, and around two-thirds of staff on duty carried it.
- I.26** Oversight of the use of force was good. Incidents were monitored by a senior manager, with a full-time officer working as a use of force coordinator. The quality of use of force reports was good, and there were few outstanding; the coordinator assured the process and actively challenged staff whose reports were not up to standard.
- I.27** The coordinator also viewed all video footage of incidents, and brought any concerns to the monthly use of force meeting. This meeting was comprehensive; it looked at all complaints and concerns, and analysed data surrounding the use of force. In addition, the meeting also reviewed footage from a number of incidents, including all uses of PAVA and batons.
- I.28** The quality assurance process was robust but impeded by the fact that little body-worn camera footage was useable. Only around a fifth of staff responding to incidents turned their cameras on.
- I.29** The prison had initiated several enquiries as a result of its monitoring of the use of force. However, we found instances where use of PAVA had been deemed to be excessive but no action had been taken (see below).
- I.30** In the video footage of the incidents we viewed, we saw evidence of de-escalation in most cases, and force generally being used as a last resort. PAVA had been drawn 15 times in the previous six months and sprayed 13 times. We reviewed about half of these incidents and saw examples of unnecessary use of PAVA. Although 82% of staff had received refresher training in the use of force during the previous 12 months, there was no provision for refresher training for the use of PAVA, which meant that some staff had not been retrained in its use for nearly two years.
- I.31** Special accommodation (cells with no furniture, toilet or running water) was routinely used as holding rooms for prisoners as they arrived on the segregation unit, or as a calm-down cell following violent or aggressive behaviour. There was no authorisation sought for this and there were no safeguards, such as a health care risk assessment, for placement in these cells, which was unsafe.

¹¹ PAVA (pelargonic acid vanillylamide) spray is classified as a prohibited weapon by section 5(1) (b) of the Firearms Act 1988.

Recommendation

- I.32 The prison should ensure that all staff receive annual refresher training on the use of PAVA.**

Segregation

- I.33** Segregation had been used 89 times in the previous six months, which was lower than in comparable prisons, and at the time of the previous inspection.
- I.34** Although the segregation unit was in the oldest part of the prison, successful efforts had been made to make the environment positive. It was bright and clean, and the cells were in good condition, with little graffiti.
- I.35** Staff–prisoner relationships on the unit were good, and staff regularly interacted with prisoners there. However, prisoners were still routinely strip-searched on arrival on the unit, which was unnecessary (see also paragraph I.37). Each prisoner had a behaviour plan, with suitable targets explained to them on arrival. There were also individualised reintegration plans for each prisoner, and these had proved a success, with few prisoners being segregated for more than three weeks. There was an agreement with prisons in the local area to accept prisoners who were segregated because they felt at risk from others in the prison, giving them an opportunity to return to a normal wing and regime elsewhere.
- I.36** The quarterly segregation monitoring and review group looked at a wide range of data concerning the reasons for segregation, and this information had been used to reduce the number of prisoners segregated.

Security

Expected outcomes:

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

- I.37** Security procedures were not overbearing for a training prison but the practice of using routine, instead of intelligence-led, strip-searching in areas such as visits and on arrival on the segregation unit remained. Security procedures were not overbearing for a training prison but the routine use of strip searching, for example, after visits and on entry to the segregation unit needed to be kept under constant review to ensure that it was still an appropriate response aimed at stemming the flow of illicit drugs in the prison. We witnessed prisoners being asked to squat as part of the strip-searching process, which was not appropriate.
- I.38** A relatively large number of intelligence reports was submitted, with 6,692 in the previous six months. This intelligence was swiftly processed by a central team of analysts, based outside of the prison, at a regional centre.
- I.39** This model of intelligence management produced good, targeted actions. However, the prison was solely reliant on the regional search team to conduct these targeted searches, and only around 50% of them were completed. To compound matters, targeted drug tests had been completed only seven times in the previous six months. This meant that the prison

was unable to respond effectively to the high-quality intelligence produced (see key concern and recommendation S55).

- I.40** A wide range of information was taken to the monthly security meeting, where good analysis took place. This meeting highlighted and monitored the prisoners linked to organised crime and extremism well. Several areas around the prison had been identified as hot spots for drug supply, and the prison had either improved physical security or had conducted searches to stem the flow. The amount of joint working between the police, the regional search team and the prison was impressive, with several searches of visitors, their vehicles and areas in the prison conducted collaboratively.
- I.41** A body scanner which could detect items hidden inside the person had been purchased, and all prisoners went through it on arrival and following a targeted search. Security staff also photocopied all incoming mail, to reduce the instances of psychoactive substances (PS)¹² being concealed in the paper; this had been achieved without any delays for prisoners in receiving their mail (see also paragraph 4.5).
- I.42** Despite this, the use of PS remained a serious problem for the prison. In our survey, 69% and 49% of respondents said that illicit drugs and alcohol, respectively, were easy to get hold of, both of which were far higher than in similar prisons (48% and 31%, respectively). The prison had called out the ambulance service on 211 occasions in the previous six months, 200 of which had been PS related, reflecting the ready availability of drugs in the prison and the detrimental effects on prisoners' immediate and, potentially, long-term health. Staff reported seeing prisoners under the influence of PS regularly, and we also witnessed this. This led to high levels of debt and subsequent violence, and many of the prisoners we spoke to confirmed this (see key concern and recommendation S56).

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.43** Since the previous inspection, there had been four deaths in custody and a further two in the community shortly after release. At least one of the deaths in custody had been directly linked to the use of PS. Recommendations from the Prisons and Probation Ombudsman were taken seriously, and monitored by both the performance, and safety, security and drug strategy meetings. More recently, the safer custody team had started dip-sampling actions, to ensure ongoing compliance, which was a positive step.
- I.44** The number of self-harm incidents was high, reflecting the complexity of the prisoner population held by the establishment. According to the prison's own data, the level of self-harm was six times higher than at the time of the previous inspection, and it was far higher than at other category C prisons we have recently inspected. Of all the incidents of self-

¹² Psychoactive substances are either naturally occurring, semi-synthetic or fully synthetic compounds. When taken they affect thought processes or individuals' emotional state. In prisons, these substances are commonly referred to as 'spice'. For more information see <https://www.gov.uk/guidance/psychoactive-substances-in-prisons#what-are-psychoactive-substances>.

harm, nearly half each month were carried out by just five or six prisoners (see key concern and recommendation S57).

- I.45** The prison was aware of this problem and, as a result of investing in a new data analyst role, data collection was now good. However, this had not been used to develop a whole-prison approach to reducing self-harm and addressing the underlying causes. Information was analysed to determine the nature of the issues and identify steps that could be taken to manage these prisoners. Following a peak at the beginning of 2019, levels of self-harm had reduced, although it was too early to see if this would be a long-term trend. The safer custody team had recently interviewed the prison's most prolific self-harmers, to try to understand their issues and take action to address them; again, this work was too new to assess its impact on levels of self-harm but it was a positive step to take.
- I.46** During the inspection, 30 prisoners were receiving support through the assessment, care in custody and teamwork (ACCT) case management process. The standard of ACCT documents was too variable, ranging from very good to weak. The prison was aware of these issues through their quality assurance process, and was providing training and guidance to staff when weaknesses were identified. Defensible decision logs were in place for prisoners being supported through the ACCT process and located on the segregation unit, and these individuals were case managed by a member of the management team, which was appropriate.
- I.47** Prisoners we spoke to who were on an ACCT generally felt well supported. This support was undermined, however, by limited access to the Samaritans telephone helpline for those in crisis, which was concerning, considering the high levels of self-harm. At the time of the inspection, four wings had no in-cell telephone access to the Samaritans because of connection issues; the prison was aware of this and was trying to resolve the matter. In addition, in-cell telephones were turned off at 11pm, and so after this time prisoners would need to access the wing Samaritans telephone if they wished to contact the Samaritans (see also paragraph 4.6). During the inspection, some wing staff were unable to locate their Samaritans telephone.
- I.48** The Listener scheme was resourced appropriately, and access to Listeners was reasonably good. However, the prison did not have a Listener suite, making it difficult for prisoners in double cells to access the scheme at night.
- I.49** A weekly self-harm support group, called Time Out, was run by the safer custody team to offer additional support and give vulnerable prisoners an opportunity to come together in a safe environment. This was complemented by a further programme, run by the education department in conjunction with the safer custody team, called Calm, for vulnerable prisoners and prolific self-harmers, to share awareness and build relationships.
- I.50** During our night visit, not all staff were carrying an anti-ligature knife, which, given the high levels of self-harm, was concerning.

Recommendations

- I.51 Prisoners should be able to access Samaritans telephones 24 hours a day.**
- I.52 A Listener suite should be available, to allow prisoners in double cells access to Listeners at night.**
- I.53 All staff should carry an anti-ligature knife.**

Good practice

- I.54** *The prison had interviewed their most prolific self-harmers to try to understand the issues to be addressed.*

Protection of adults at risk¹³

- I.55** An adult safeguarding policy was in place. It contained clear instructions for staff, to help them to identify vulnerable adults and those at risk of abuse, and clarify how to complete a safeguarding referral. The prison was represented at the local safeguarding adults board in the community.
- I.56** Residential staff we spoke to did not always have a clear understanding of adult safeguarding or the procedures in place, and not all of them had completed training in adult safeguarding.
- I.57** A new multidisciplinary safeguarding meeting was now in place, involving the offender management and health care teams. This discussed prisoners at risk of abuse, as well as social care referrals. We saw examples of action being taken to protect vulnerable prisoners from abuse.

¹³ 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, more prisoners than at comparator prisons said that staff treated them respectfully (79% compared with 69%). Most said that they had a key worker, and that they had someone they could turn to for help. This was echoed in our conversations with prisoners throughout the inspection.
- 2.2 About a third of officers had been in post for less than a year and 58% had been in post for less than two years. A wide range of developmental initiatives had been put in place to support them in their role.
- 2.3 The key worker scheme was developing well. All prisoners had been allocated a key worker, and reviews of electronic case notes evidenced a recent increase in staff contact. There was good oversight of the process, and daily management support for key workers.
- 2.4 As at the last inspection, there was more engagement evident on the newer wings, where the layout was much more open and staff were easily accessible. Most interactions we saw during the daytime were positive and staff demonstrated a good knowledge of those in their care. During association periods, when there were more prisoners on the wings, we witnessed staff on some wings appearing to lack the confidence to exert their authority in challenging a range of poor behaviour, such as vaping on the landings, aggressive horseplay and playing music excessively loudly.

Daily life

Expected outcomes:

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

Living conditions

- 2.5 Outside areas were clean and well maintained, and a prisoner work party routinely patrolled the grounds, clearing away any litter thrown from wings or dropped on walkways.
- 2.6 Most prisoners lived in single cells, which was positive. Considerable effort had been made in improving living conditions across the prison since the previous inspection, especially on the older A and B wings, but they remained outdated and in need of substantial refurbishment. Communal areas were generally clean, and all cells we checked were well furnished, including shared cells, and had clean toilets, with lids and sufficient screening. The introduction of in-cell telephones had been welcomed by prisoners. Many clearly took pride in their cells, and

cleaning materials were readily available on request. We saw little graffiti, and the offensive display policy was enforced across the site. Regular management checks of all accommodation were in place and any identified deficiencies were quickly rectified.

- 2.7** A shower refurbishment programme was under way, and most had been refurbished to a reasonable standard. However, ventilation remained poor in most, which led to damp; some were dirty; and some others had inadequate drainage (see Appendix IV).
- 2.8** All wings had laundry facilities and, although some machines were out of action, there were sufficient facilities to ensure that all prisoners could have their clothes laundered weekly. There were sufficient supplies of prison clothing for those who needed it, and this could be exchanged weekly. Bedding was of a reasonable standard.

Recommendation

- 2.9 All showers should be clean and have good ventilation and drainage.**

Residential services

- 2.10** In our survey, 37% of respondents said that the food provided was very or quite good, in line with the previous inspection. We considered the food to be of a reasonable standard and were satisfied that the portion control measures in place ensured that prisoners received sufficient and equal amounts at mealtimes.
- 2.11** Published weekday mealtimes were appropriate but in practice meals continued to be served too early. For example, we saw one evening meal service start at 4.10pm, which was far too early. Weekend meals were planned to start too early, at 4.15pm, and prisoners told us that they usually collected their meals by 4pm.
- 2.12** Consultation with prisoners about the quality of the food served was good, with monthly discussions at the governor's 'Question Time' meeting" (see also paragraph 2.17) and at wing meetings. Additionally, an annual survey had been undertaken, in response to which some changes had been made, such as the provision of additional breakfast food and the installation of on-wing cooking facilities.
- 2.13** The kitchen was clean, well ordered and in a good state or repair. Training opportunities were good, with clear progression pathways. The well-trained prisoners worked in teams, in line with commercial kitchens, and obtained a wide range of skills. This included managerial roles for some, which were designed to help them secure employment after release.
- 2.14** Food trolleys and wing serveries were impressively clean and well maintained. However, the supervision of food service was often inadequate, leading to some poor hygiene practices, and few prisoners working on the wing serveries wore appropriate clothing.
- 2.15** Prisoners had the opportunity to buy items from the prison shop weekly, at a reasonable price, and the range of products available met the diverse needs of the population. In our survey, 70% of respondents said that the prison shop sold everything they needed. They could also pre-order newspapers weekly, and had access to a range of catalogues, through which to buy clothing, electrical items and hobby materials. These orders took place weekly, and there was no limit on the amount they could spend.
- 2.16** On arrival, new prisoners could buy telephone credit and a vaping or grocery pack, which included a small range of grocery items such as tea, milk, chocolate and sweets (see also

paragraph 1.10). However, those who arrived after the day when shop orders were placed could have to wait up to 11 days to make their first full shop order, which was too long and increased the risk of accruing debt.

Prisoner consultation, applications and redress

- 2.17** Consultation arrangements with prisoners was reasonably good. The monthly governor's 'Question Time' meeting was well attended by prisoner wing representatives and senior staff, and was a good example of genuine and inclusive involvement and information sharing. A range of topics was discussed, which led to some positive, practical outcomes for prisoners, such as the repair of television aerials and the installation of new washing machines and dryers. Individual wing forums also took place; however, they were not held consistently enough to be fully effective.
- 2.18** Although applications were easy to make, in our survey far fewer respondents than at the time of the previous inspection said that it was easy to make an application (71% compared with 86%). In addition, fewer said that they were usually dealt with fairly (46% compared with 67%) and within seven days (23% compared with 54%). Prisoners we spoke to were frustrated by the lack of timely responses and what they perceived to be an unwillingness by some staff to resolve issues informally, to remove the need for a formal application to be made. There was no quality assurance of the application process, to monitor the timeliness of responses or track whether prisoners actually received a response.
- 2.19** Complaint forms were replenished regularly on the wings, but some prisoner wing representatives held these forms in their cells, so they were not always visible and freely available. In the previous six months, 1,511 complaints had been submitted – more than in the same period at the time of the previous inspection. The complaint responses we examined were polite and generally addressed the issues raised. Poor access to property was a common theme of complaints.
- 2.20** Not all responses to complaints were timely, and in our survey, only 20% of respondents said that complaints were usually dealt with within seven days, which was far less than at the time of the previous inspection (44%). The prison had recently reviewed the complaints process. The timing of staff responses to complaints, and also to discrimination incident report forms (DIRFs; see paragraph 2.27), was tracked but this did not include tracing the timeliness of when the prisoner received the response. Systematic analysis to identify trends in complaints was limited.
- 2.21** There was no formal legal services officer but prisoners had good access to legal textbooks in the library.
- 2.22** Legal visits took place twice weekly and were held in private, in five bespoke rooms. However, there were insufficient legal visits to meet demand, with waiting times of about a month. Prisoners had access to video-link for parole hearings but these facilities were not used for legal visits, which was a missed opportunity.

Recommendation

- 2.23 Responses to applications, complaints and discrimination incident report forms should be tracked, to ensure that prisoners receive a timely response.**

Equality, diversity and faith

Expected outcomes:

There is a clear approach to promoting equality of opportunity, eliminating unlawful discrimination and fostering good relationships. The distinct needs of prisoners with particular protected characteristics¹⁴ and any other minority characteristics are recognised and addressed. Prisoners are able to practise their religion. The chaplaincy plays a full part in prison life and contributes to prisoners' overall care, support and rehabilitation.

Strategic management

- 2.24** The overall management of equality had recently begun to improve, following a period of decline. In the previous six months, the prison had employed a part-time head of equality, supported by a part-time member of staff, and there had been some improvements in the leadership and strategic oversight of this work. However, there were still insufficient resources to develop and complete all of the work needed to support protected groups effectively.
- 2.25** There was a new equality and diversity policy, which adequately defined the prison's vision for this area of work. The accompanying action plan showed some evidence of actions being taken forward, although it was too early to judge its overall impact on improving outcomes for prisoners.
- 2.26** The diversity and equality action team (DEAT) meeting took place monthly, and attendance at these meetings had recently improved. The analysis of equality data was improving but it did not drive coordinated and dynamic action planning for the whole prison. In-depth analysis to identify any disproportionate treatment of prisoners from protected groups remained limited and was not yet leading to improvements.
- 2.27** During the previous six months, 72 DIRFs had been submitted, which was more than in the same period at the time of the previous inspection. DIRFs were investigated thoroughly, and responses were appropriate. Although there was no external quality assurance of DIRFs, internal measures were reasonable; all were reviewed by either the governor or deputy governor, and a sample of redacted DIRFs were now shared with DEAT meeting members, for extra scrutiny and assurance. A regional prison-led scrutiny panel had also recently been implemented. Improvements had been made in the tracking of DIRF replies from staff, but this did not detail when prisoners actually received a response (see also paragraph 2.20 and recommendation 2.23).
- 2.28** There were two committed prison equality staff members but their time was split with other responsibilities. These staff were supported by members of the senior management team, each of whom took a lead for one of the protected characteristics represented at the prison, but they had not yet identified prisoner representatives to work with them. Dedicated consultation with prisoners from protected groups was evolving but not regular enough to be fully effective. There were two prisoner equality representatives. During the inspection, a further five were recruited, but there were still not enough to ensure equitable representation across the establishment.

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

Recommendations

- 2.29** Comprehensive analysis of data relating to equality and diversity should be used to develop further the action plan for the whole prison, and this should include addressing any disproportionate treatment of prisoners with protected characteristics.
- 2.30** Regular and effective consultation should be in place for all prisoners with protected characteristics.

Protected characteristics

- 2.31** Around one-quarter of the population were from a black and minority ethnic background. Our survey showed few negative perceptions from this group, and we saw no evidence of disproportionate treatment for them when compared with white prisoners. Prisoners reported positively on the recent celebrations for Black History Month.
- 2.32** In our survey, 5% of respondents said that they were from a Traveller community. There were no dedicated forums to engage with this group, but the prison had recently hosted a Gypsy, Roma, Traveller celebration event, which was positive.
- 2.33** There were only four foreign national prisoners at the time of the inspection, but provision for them was poor. There were no dedicated forums and they had no access to independent legal advice. Staff from the Home Office immigration and enforcement department no longer attended the prison, and the foreign national prisoners we spoke to were frustrated by this. There was little translated material available. Professional telephone interpreting services were available if needed.
- 2.34** In our survey, 40% of respondents said that they had a disability. Not all the needs of some of these prisoners were being met. The lack of reasonable adjustments, such as adaptations to toilets and showers, made daily living difficult for some of these prisoners and there were no formal prisoner carers in post to provide help and support them.
- 2.35** One prisoner we met was unable to carry out daily tasks without help, and had waited four months for a formal social care assessment, which was too long; this eventually took place during the week of the inspection. There were eight prisoners with physical disabilities who needed help in the event of an evacuation, and in all but one instance staff knew who they were, where the evacuation plans were located and what their needs were.
- 2.36** About 6% of the population were aged over 50, and these prisoners received adequate support. Consultation arrangements with this group had led to some positive outcomes, such as the introduction of a dedicated older persons unit on I wing.
- 2.37** About a third of the population was under the age of 30, and there was too little support for them. Some data suggested that these prisoners were subject to differential treatment – for example, higher levels of use of force, complaints and adjudications charged and proven – and the prison had been too slow to act on this. The prison had only recently begun to consult these prisoners to develop specific support.
- 2.38** Support for care leavers was good. Monthly mutual aid support groups took place, supported by the Care Leavers Association. Referrals were made to the local authority for prisoners to access their individual care records, and for additional resettlement support and advice.

- 2.39** In our survey, 3% of prisoners identified as gay or bisexual but the prison was aware of only two prisoners, suggesting under-reporting. Despite some efforts to promote engagement with these prisoners, provision was limited. There were no transgender prisoners at the prison at the time of the inspection, but one had been held in the previous six months, and we saw evidence that high-quality care had been provided. The prison had an up-to-date policy for the treatment of such prisoners, based on HMPPS guidance.
- 2.40** At the time of the inspection, there were four veterans but no specific support was available to them.

Recommendations

- 2.41 Prisoners with disabilities should be identified and given good, consistent and organised support.**
- 2.42 Action should be taken to address the potentially disproportionate treatment of younger prisoners and provide them with specific support tailored to their needs.**
- 2.43 The needs of the small number of veterans should be analysed, and support provided as needed.**

Good practice

- 2.44** *The provision offered to care leavers by the prison and Care Leavers Association provided prisoners with good support whilst in prison and opportunities to access further support upon release.*

Faith and religion

- 2.45** Faith provision was reasonable. In our survey, 66% of respondents said that their religious beliefs were respected, which was in line with comparator prisons.
- 2.46** Prisoners had good access to a chaplain of their own faith, and a range of weekly worship opportunities. In our survey, 89% of respondents said that they could attend religious services if they wanted to.
- 2.47** The main chapel and world faith centre were well equipped, with a wide range of appropriate resources. The main chapel was impressive and provided a pleasant and spacious environment for worship and private contemplation.
- 2.48** The chaplaincy provided good pastoral care. The team attended some reviews of prisoners being supported through assessment, care in custody and teamwork (ACCT) case management, but this was not routine. Chaplains also supported prisoners dealing with bereavement, complemented by support provided by Cruise (a bereavement charity).
- 2.49** Despite never having had a senior/managing chaplain, the team was reasonably well integrated into the wider daily life of the prison, and was represented at most key functional meetings. It was positive that resources had recently been secured to recruit a senior chaplain.
- 2.50** Links with community faith groups had improved, and were now good.

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.

2.51 The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)¹⁵ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. The CQC found no breaches of the relevant regulations.

Strategy, clinical governance and partnerships

2.52 NHS England had commissioned Care UK Health & Rehabilitation Services Limited ('Care UK') as the lead provider of health services, with a range of subcontracting arrangements, since 2016. A recent health needs analysis (July 2019) and associated service improvement plan was guiding service developments.

2.53 Health care staff were well integrated into the prison, with monthly prison health operational group meetings and attendance at daily and weekly prison senior management team meetings.

2.54 Patient feedback was gathered and analysed through questionnaires following clinic appointments, and quarterly patient council meetings had started in July 2019. There was a clear mechanism for reporting incidents, which was understood by staff we spoke to, and lessons were learned from these, and informed practice.

2.55 Health services operated from 7am to 7.30pm, seven days a week, and NHS 111 was used for out-of-hours emergencies. Leadership of the team was strong and all staff we spoke to felt supported. Mandatory training requirements were met, and clinical and managerial supervision systems were in place and recorded. Daily staff handover meetings and weekly multidisciplinary complex case meetings demonstrated effective joint working. All staff we spoke to understood their safeguarding responsibilities.

2.56 Health care rooms generally complied with infection prevention standards and were clean and well ordered; however, not all areas in the dental suite met these standards (see paragraph 2.102).

2.57 All of the patient interactions we observed were respectful, caring and professional, and staff clearly knew their patients well. Health complaints were mainly resolved face to face, and the response letters we sampled were appropriate and contained information on how to escalate the complaint.

2.58 There was good clinical oversight of the risk register; evidence risks were reviewed regularly, and information was shared.

2.59 Arrangements for dealing with medical emergencies were comprehensive, and further enhanced by the addition of a paramedic and senior paramedic to the team since the previous inspection. Registered clinical staff were trained in immediate life support and had

¹⁵ 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>.

access to suitable and regularly checked equipment. Officers we spoke to were familiar with the emergency code protocol, and ambulances were called promptly in an emergency.

Promoting health and well-being

- 2.60** Although there was no strategic prison-wide approach to the promotion of health and well-being, health promotion materials linked to national campaigns were displayed throughout the establishment. At the time of the inspection, there were no health care peer champions, but there were advanced plans to implement this role.
- 2.61** Immunisations were available and promoted for blood-borne viruses and influenza, and national screening campaigns, such as for abdominal aortic aneurysm, were evident. Prescribed smoking cessation was available and uptake was good. Sexual health advice was offered by health staff, and condoms were available and offered on release.
- 2.62** There were appropriate policies to manage outbreaks of communicable diseases.

Primary care and inpatient services

- 2.63** A registered general nurse carried out an initial health screen for all prisoners on arrival. This identified immediate health, substance use and mental health needs, along with risks, and resulted in appropriate health care referrals being made. General health care information was provided, including the range of services available and how these could be accessed.
- 2.64** Secondary health screens were not always completed within the first seven days after a prisoner's arrival. In September 2019, only 29.5% of secondary health screens had been completed in a timely way.
- 2.65** Primary healthcare services were appropriate to the age profile of the prison and met patients' needs. Health care staff wore identity badges and were clearly identifiable to prisoners. Prisoners we spoke to told us that they were satisfied with the services they received. Professional telephone interpreting services were available for prisoners whose first language was not English.
- 2.66** An appropriate range of primary health care services was available, including daily nurse triage clinics. Long-term conditions were appropriately managed by a long-term conditions nurse and GP clinics. Care plans were detailed and patient centred, and demonstrated effective ongoing care and treatment.
- 2.67** There were five GP sessions per week, provided by a team of doctors from a local community health centre. The waiting time for a routine appointment was commensurate with that in the community, and prisoners had access to 'on the day' urgent GP appointments. However, in our survey, prisoners' perceptions of GP services were mixed. The waiting time for a routine appointment was commensurate with that in the community, and prisoners had access to 'on the day' urgent GP appointments.
- 2.68** A range of secondary health care services was available onsite, including ultrasound scans, X-rays and telemedicine, leading to improved access to timely investigation. Prisoners could request a chaperone to be present during examinations but this service was not advertised.
- 2.69** Clinic wait times were reasonable, but failure to attend rates were high, resulting in wasted clinical time. Non-attendance rates for GP, dental and physiotherapist clinics had been consistently high between June 2019 and September 2019, with an increase in missed

appointments for optician and podiatry clinics in September 2019. Nurse-led clinics had the highest level of failed attendance.

- 2.70** Prisoners submitted a paper application when requesting to see a health care professional. All applications were subsequently reviewed and an appointment was allocated to the relevant clinic. Prisoners were informed of their appointment via 'slips', which were taken to individual wings for distribution by officers to prisoners. However, prisoners told us that they did not always receive an appointment slip.
- 2.71** External hospital appointments were managed appropriately.

Recommendation

- 2.72** **Health care managers, in collaboration with the prison, should investigate the reasons for high failure to attend rates and implement measures to ensure that prisoners' health care needs are met.**

Social care

- 2.73** Leeds City Council (LCC) commissioned Care UK to provide social care. The prison, LCC and Care UK had a suitable information-sharing agreement to facilitate joint working.
- 2.74** Prisoners were screened for potential social care needs on arrival, or identified and referred by Care UK to LCC. Assessment by an LCC social worker occurred promptly, usually within a week. In the previous two years, six patients had been referred for assessment but only one had met the threshold for care. His care plan was appropriate and had been suitably reviewed and revised, with advice from an occupational therapist.

Mental health care

- 2.75** Ninety-five per cent of custody staff had received mental health awareness training, and appropriate referrals were made to the mental health team. The mental health team was well integrated within the prison, and all custody staff we spoke to valued the service.
- 2.76** All prisoners were screened for mental health problems at reception, and onward referrals made. All referrals were discussed and allocated in the weekly referral meeting, which was integrated with substance use services. Urgent referrals were seen on the same or next day and non-urgent referrals were seen in a timely manner. Mental health staff were involved in initial ACCT reviews and attended the segregation unit daily.
- 2.77** Mental health staff were now co-located with substance use practitioners, which improved integration and communication (see also paragraph 2.83). The team had a rich skill mix and was competent in delivering evidence-based mental health care. The training compliance of staff was good, and records were kept of regular clinical and managerial supervision. All staff we spoke to felt supported in their role.
- 2.78** Patients receiving mental health care were managed using a stepped-care model. Those suffering from common problems, such as anxiety and depression, received psychologically informed therapies, such as cognitive behavioural therapy and guided self-help, and those with severe and enduring needs were managed effectively under the care programme approach. There were plans to introduce a second psychologist into the team to provide specialist dialectical behavioural therapy.

- 2.79** Extensive information on mental health problems and care pathways was available on each wing, and prisoners were given a mental health resource toolkit on arrival, which included information on common mental health problems, how to access support, guided self-help and distraction techniques.
- 2.80** The clinical records we sampled were of good quality, and the care plans we saw were evidence based and person centred. With consent, mental health treatment plans were shared with education and wing staff, and families and carers were encouraged to contribute. A mental health pathway containing all relevant documentation and rating scales had been developed for the whole of Yorkshire; this was available on the electronic notes and ensured seamless care.
- 2.81** In the previous six months, one patient had been transferred to hospital under the Mental Health Act, and the transfer had been achieved within national guidance timeframes.

Good practice

- 2.82** *All prisoners were given a mental health resource toolkit on arrival, which included information on common mental health problems, how to access support, guided self-help and distraction techniques.*

Substance use treatment¹⁶

- 2.83** The drug and alcohol strategy, separate psychoactive substance (PS)¹⁷ strategy and associated action plans addressed demand reduction and treatment. The implementation of actions was coordinated via well-attended and minuted meetings.
- 2.84** Care UK contracted Inclusion (from Midlands Partnership Foundation Trust) to provide drug and alcohol recovery services (DARS). DARS were co-located with mental health services, which facilitated better joint working (see also paragraph 2.76). Staffing in DARS and clinical teams had improved since the previous inspection.
- 2.85** DARS were readily available five days a week. All new arrivals were screened at reception, and seen by a peer recovery worker during induction to encourage engagement. The caseload at the time of the inspection was 225, which was high, but the small team worked efficiently to meet demand. Interventions were individualised into brief, low-intensity or high-intensity psychosocial packages of treatment (including one-to-one work, PS awareness and the inclusion recovery programme), and multiple group options. Programmes were continuous with those at HMP Leeds, so that participants arriving at Wealstun could continue their packages of treatment without interruption.
- 2.86** The incentivised substance-free living wing was impressive. It effectively encouraged recovery by providing pro-social activities and community mutual aid, and ensured compliance by assertive voluntary drug testing, which the prisoners appreciated.
- 2.87** Two valued peer recovery workers reached out to recovering prisoners across the prison, co-facilitated group treatments and helped to provide Narcotics Anonymous and Alcoholics Anonymous mutual aid groups. There was an active approach to ensuring staff awareness about PS, including updates and training sessions.

¹⁶ 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).

¹⁷ Psychoactive substances are either naturally occurring, semi-synthetic or fully synthetic compounds. When taken they affect thought processes or individuals' emotional state. In prisons, these substances are commonly referred to as 'spice'. For more information see <https://www.gov.uk/guidance/psychoactive-substances-in-prisons#what-are-psychoactive-substances>.

- 2.88** The Care UK clinical support team, comprising GPs and prescribing nurses, held daily clinics and was easily accessible. At the time of the inspection, 160 patients were receiving opiate substitution treatment, of whom 20% were appropriately on reducing regimes. Treatments were evidence based and patient focused. Controlled drug administration was safe and well supervised. However, five-day and 13-week reviews were not completed jointly with DARS. We observed a new coordinating ‘dashboard’ within SystmOne (the electronic clinical record), to be used from November 2019, which was expected to ensure that joint reviews took place in future.
- 2.89** DARS worked closely with the offender management unit, contributed to the monthly ‘resettlement hub’ run by St Giles Trust, and had productive links with community drug teams. Good release planning included harm reduction advice and naloxone training and supplies (to treat opiate overdose in the community).

Good practice

- 2.90** *Access to the same psychosocial programmes at HMPs Leeds and Wealstun for transferees ensured that patients in recovery from addiction could continue their packages of treatment without interruption.*
- 2.91** *The incentivised substance-free living wing encouraged recovery by providing pro-social activities and community mutual aid, and ensured compliance by assertive voluntary drug testing.*

Medicines optimisation and pharmacy services

- 2.92** Medicines were supplied by an on-site pharmacy against legally valid prescriptions, recorded on SystmOne. Paper prescriptions were used for all controlled drug prescriptions. Pharmacy technicians monitored when repeat prescriptions were required, and tasked these to be filled.
- 2.93** There was a full range of standard operating procedures and policies. The range of medicines available without prescription via patient group directions (which enable nurses to supply and administer prescription-only medicine) and the minor ailment policy were under review, following the appointment of the pharmacist. There were regular multidisciplinary meetings to review complex cases, and plans to introduce a pharmacy-led clinic.
- 2.94** A prescribing formulary (a list of medications used to inform prescribing) was in place, and used. Medicines that were not given in-possession were administered safely from the wings twice daily by pharmacy technicians or nurses. As a result of the prison regime, dosing three and four times a day was not possible without providing the medicines in-possession, and there was no provision for night-time administration. Prisoners requiring such dosing schedules were provided with their medicines in-possession, even when they had been risk assessed as not to receive medications in-possession. The interactions we observed during medicines administration were good, although systems to follow up non-attendance were not audited robustly. The medicines administration queues we observed were generally well supervised.
- 2.95** There was an in-possession policy and risk assessments were carried out, although the reasons for decisions to override the outcome were not always recorded. The process for assessing new prisoners’ medication needs was under review at the time of the inspection. Around 75% of medication was given to prisoners in-possession. These medicines were supplied as patient-named items, with appropriate labelling and a dispensing audit trail.

Prisoners had no access to lockable storage in their cells, but we were told that locked safes were on order.

- 2.96** Transfer of medicines to the wings was secure. There was adequate space and storage available in wing treatment rooms, and these were tidy and clean. Patients waiting for medicines at the world faith centre had to queue in the open air, which meant that they would be exposed to the elements in bad weather. Controlled drug management was generally good. There was auditing of prescribing, including the use of tradable medicines.
- 2.97** Prisoners were given seven days' supply of medication on planned discharge, or provisions were made for them to obtain medication in the community.

Recommendations

- 2.98 Systems to audit non-attendance at medication administration should be developed.**
- 2.99 Any variances made to in-possession risk assessments should be recorded consistently.**

Dental services and oral health

- 2.100** Time for Teeth provided a full range of NHS treatments. A dentist provided two sessions per week and a dental therapist attended one day per week. A weekly dental triage clinic was held in the health centre, attended by a dental nurse, providing advice on oral hygiene and pain relief. However, this service was not audited. Prisoners had prompt access to urgent care.
- 2.101** Prisoners we spoke to were positive and complimentary about the dental service provided, but were dissatisfied with current access arrangements.
- 2.102** There was a high demand for dental services. Failure-to-attend rates were sometimes too high. At the time of the inspection, 76 prisoners were waiting to see a dentist, with the longest wait being eight weeks and five days. Prisoners told us that they did not always receive an appointment slip notifying them of an appointment (see also paragraph 2.69). The dental chair had been out of operation for the previous 10 weeks, and this had resulted in an increase in an already long waiting list.
- 2.103** The dental suite contained appropriate equipment, and this was maintained to suitable clinical standards. However, not all areas of the dental surgery met infection prevention standards.
- 2.104** Governance arrangements were appropriate and there was some evidence of learning from incidents. Dental staff were trained and supported to maintain their professional registration requirements.

Recommendations

- 2.105 Prisoners should be supported to access routine and planned ongoing dental care and treatment in a timely way.**
- 2.106 The dental surgery should comply with infection control standards.**

Section 3. Purposeful activity

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

Time out of cell

Expected outcomes:

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

- 3.1 Fully employed prisoners could expect to be unlocked for around nine hours a day during the working week, and around seven hours a day at weekends. However, for many others this could be around three and a half hours a day, and for many of those on the basic regime could be as little as one hour a day, and even less at weekends, which was unacceptable. As at the previous inspection, during our roll checks we found too many (28%) prisoners locked up during the core day and, overall, around 40% of the population was on the wings, which was far too high for a training prison (see key concern and recommendation S58).
- 3.2 Long-standing regime restrictions had ended in March 2019 and the prison was operating a full regime, both during the working week and at weekends. The regime ran to time, and movements to activities were well managed by staff, reducing delays in activity start times. All wings had daily association and exercise periods, and these were rarely curtailed. Exercise yards, although generally clean and tidy, were austere, with only a few having any benches and only one having fixed exercise equipment.
- 3.3 All wings had some association equipment but prisoners still complained of a lack of structured activity at weekends, which remained limited to association, recreational gym and family visits.
- 3.4 Library services were provided by Novus. There were two main libraries plus four smaller wing-based facilities, and access had improved. The libraries provided a quiet reflective space for prisoners, and in our survey 56% of respondents said that they used the library at least once a week, which was far more than at the time of the previous inspection (36%).
- 3.5 Prisoners could access a wide range of materials from the library, including a reasonably wide range of books (including books in languages other than English), legal texts, magazines, DVDs, jigsaw puzzles and CDs. They could also engage in creative events that the library ran throughout the year, such as making cards. There were arrangements for the library to exchange its stock and obtain requested books from local public libraries. Computers were available in the library, for prisoners' use.
- 3.6 There was a range of initiatives to promote literacy, including Storybook Dads (in which prisoners record stories for their children; see also paragraph 4.2) and the 'Six-Book Challenge' (an initiative inviting individuals to select six books and record their reading in a diary), and the Shannon Trust ran a programme on the wings, to encourage prisoners to read and improve their literacy levels, led by peer mentors.
- 3.7 Indoor PE facilities were good, and included a main gym and sports hall, and a smaller gym. At the time of the inspection, the football pitch was not being used, so there was no outside sports provision.

- 3.8** Access to PE was adequate, and recreational gym was available during the evenings and at weekends, so as not to affect attendance at work, educational and vocational skills sessions. Accredited PE courses were delivered, and this included up to level 3 in personal training, which was impressive.
- 3.9** The gym provided a wide range of activities for smaller groups of prisoners during the working day, including older prisoners, those in drug and alcohol recovery, vulnerable prisoners and self-isolators, as well as those who had been referred to the gym by the GP to assist their physical health.
- 3.10** The library and gym collated a limited amount of data. However, they did not carry out monitoring by ethnicity, age or other prisoner characteristics, to ensure that attendance was representative of the prisoner population or to ascertain which group of prisoners were not accessing their services.

Education, skills and work activities (Ofsted)¹⁸

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.¹⁹

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

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

- 3.12** Leaders and managers had self-assessed the quality of provision accurately. They were aware of most of the key weaknesses within their provision, such as low attendance at purposeful activity and the small proportion of prisoners who achieved functional skills qualifications. They had started to address the weaknesses they had identified. However, it was too early to judge the impact of these actions on improving the quality of provision.
- 3.13** Too many prisoners did not attend their allocated activity owing to conflicting priorities within the prison regime. Managers had acted to tackle this weakness. The proportion of

¹⁸ 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.

¹⁹ In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

prisoners who attended their allocated activity had improved in recent months, but was not yet high enough (see key concern and recommendation S59).

- 3.14** The proportion of prisoners who started qualifications but did not complete them was too high. Many prisoners were withdrawn from learning, for operational or security reasons. In addition, in too many cases, prisoners were allocated to activities when they did not have enough time left in prison to complete their programme. Managers scrutinised and analysed closely the reasons why prisoners were withdrawn from programmes early, and had started to try to reduce this number.
- 3.15** Leaders and managers did not systematically collect detailed information about prisoners' training and employment destinations after leaving prison, and did not sufficiently analyse the information they had available to them. As a result, they were unable to identify the proportion of prisoners who moved into education, training or work on release.
- 3.16** The governor had a clear oversight of the education, skills and work provision. She had made substantial investment in physical resources to support education, skills and work, such as the introduction of the catering academy. Through being directly involved in a range of meetings and performance reviews, she understood the key strengths and key weaknesses of the provision. Senior leaders in the prison were challenged to improve the quality of provision, and reported regularly to the governor about the progress that they were making against action plans.
- 3.17** Prison leaders worked well with the education delivery partners. The governor held monthly meetings with the main education provider and reviewed the quality of its delivery closely. Leaders held quarterly performance meetings, where contract compliance and quality issues were reviewed, to ensure that the education provider was held to account for improvements. As a result, leaders from the prison were able to assure themselves that the education provider was performing to the expected standards.
- 3.18** A wide range of education and vocational training programmes was provided, including gym-based qualifications, distance learning and Open University courses. Leaders had considered the labour market information available through the local enterprise partnership. They had carefully aligned the courses offered to the skills gaps and employment opportunities local to the prison. For example, managers had introduced logistics and construction vocational training, which was intended to enable prisoners to progress into available work on their release.

Recommendation

- 3.19** **Leaders and managers should greatly reduce the proportion of prisoners who start qualifications but do not complete them, by ensuring that they allocate prisoners to activities according to the length of time they have left to serve.**

Quality of provision

- 3.20** Through effective teaching and instructing, most prisoners made the progress expected of them, based on their starting points. Most tutors in education and vocational training planned their courses carefully, so that prisoners were able to develop substantial new skills in their subject areas. Prisoners completed challenging activities which involved them doing more than the minimum needed to achieve qualifications. Instructors in prison work ensured that prisoners quickly developed the required vocational skills that enabled them to produce the necessary standard and quantity of work.

- 3.21** Most prisoners benefited from useful and helpful feedback on their work. In work, instructors provided prisoners with constructive verbal feedback, highlighting when the standard of work was not good enough and what they needed to do to meet the expected standard. In education classes, most tutors provided useful feedback on prisoners' written work, including the careful correction of prisoners' spelling and grammatical errors. As a result, most prisoners improved the quality of their work over time.
- 3.22** Tutor and instructors were well qualified and suitably experienced in their subjects. They benefited from effective professional development that enhanced their teaching craft, such as support for developing questioning techniques to enable them to test learners' understanding of topics. Support for prisoners who were identified as underperforming was effective. As a result, managers had ensured that the quality of teaching, learning and assessment had been maintained since the previous inspection.
- 3.23** Peer mentors were used well in education and work. They worked closely with tutors and instructors to understand the planned outcomes for each session. In the textiles workshop, the peer mentor was responsible for quality controlling items that the prisoners produced. However, only a few peer mentors had formal qualifications. Prison managers had recently made training available to them, and many intended to undertake this training in the near future.
- 3.24** In a few education sessions, tutors did not plan activities well enough and some did not sufficiently check that prisoners had consolidated their knowledge before moving on to new content. A small number of prisoners were not able to recall what they had previously learned. As a result, prisoners in these sessions did not make rapid enough progress towards securing their knowledge.
- 3.25** Prisoners in work did not have their additional support needs identified or addressed well enough. Managers were aware of this and had recently acted to rectify this. However, it was too early to judge the impact of this work.
- 3.26** A large number of prisoners were allocated to wing-based work, and too many were not sufficiently occupied for the duration of the work session. Prisoners working as wing cleaners, laundry workers, wing painters or servery workers were often found to have finished work before the end of the working day and were taking additional association time.

Recommendation

- 3.27** **Leaders and managers should ensure that teachers plan the activities that they use in classes carefully, so that prisoners find them interesting and useful. Teachers should ensure that they check sufficiently learners' understanding of topics taught before they move on to new learning.**

Personal development and behaviour

- 3.28** Most prisoners who were able to attend activities demonstrated a positive attitude towards their learning and work. They were keen to engage in the activities and worked with their peers well. In prison workshops, they worked as a team and produced the necessary volume of work.
- 3.29** Most prisoners demonstrated pride in the work that they produced. In education classes, prisoners presented their written work carefully and neatly. In vocational training, they were understandably proud of their practical work, as it was of high quality. For example, items

from furniture restoration were produced to a high standard and sold to the public, to support a local charity. Prisoners who had professional skills in construction, joinery and decorating were well used by prison leaders to carry out prison-wide refurbishment work to a high standard.

- 3.30** Generally, prisoners were well behaved and respectful of each other, staff and visitors. They worked well alongside each other in work and training environments. Relationships with staff were productive and enabled activities to take place uninterrupted. On the rare occasions when prisoners did not behave well, staff responded quickly to restore order, and prisoners returned to tasks swiftly.
- 3.31** Prisoners received impartial and effective careers education, information, advice and guidance that helped them to think about their next steps for life after prison. They were supported through comprehensive career interviews. However, in too many cases prisoners did not receive detailed information about the full range of qualifications and training opportunities that were available in prison work as part of their education, skills and work induction.
- 3.32** Too few prisoners in prison workshops providing few or no qualifications recognised the personal and employment-related skills that they had developed. Prison staff had introduced 'skills portfolios' as a way of recording these, but prisoners were confused about their practical use. Staff were unable to give clear or helpful directions about how they were to be used. As a result, too many prisoners did not record information about the skills they had developed.

Recommendation

- 3.33** **Leaders and managers should ensure that prisoners engaged in prison work use their skills portfolios effectively, to record the knowledge and skills that they are developing.**

Outcomes and achievements

- 3.34** In most subjects, the majority of the prisoners who completed the programme achieved their qualification. The proportion achieving qualifications in art and design, catering and information technology was particularly high.
- 3.35** Almost all prisoners in work and vocational training developed good, vocationally relevant skills. They were able to explain how they had developed their new skills, and were clear about how these would help them in the future. Most prisoners engaged in education developed knowledge and skills that enhanced their understanding of the subject that they were studying.
- 3.36** Prisoners engaged in vocational training produced practical work that was of a high standard, such as in tiling, joinery, and catering. Prisoners in education classes produced work that was appropriate for the level of their programme. Those working on external contracts produced work that was suitable for the client's requirements.
- 3.37** The proportion of prisoners who achieved their qualifications in English and mathematics was too low. While this had improved from a very low proportion in the previous year, it was still not high enough.

Recommendation

- 3.38 Leaders and managers should ensure that the proportion of prisoners who achieve their functional skills qualifications in English and mathematics improves substantially.**

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 Work to improve family ties had improved considerably since the previous inspection and the range of work was now good. Support was provided by the charity, Jigsaw, and included the provision of 2.5 full-time-equivalent family engagement workers to help prisoners and their families build and maintain positive relationships. This was supported by a good number of family days run by the prison, which all prisoners were eligible to apply for, whereby they could have an extended full-day visit, including a meal.
- 4.2 The prison was now running an accredited parenting skills course, as well as support groups. These included homework clubs in school holidays, where prisoners helped their children with their schoolwork, and cooking visits for prisoners approaching release, where they cooked a meal with their family and they ate together. Jigsaw provided some 'through-the-gate' support for families and prisoners on release, and the prison ran the Storybook Dads scheme (in which prisoners record stories for their children; see also paragraph 3.6) through the library.
- 4.3 The visitors centre was a reasonable facility and opened an hour before the start of visits, to give visitors a place to wait. Staff were on hand to provide help and support to visitors, and hot drinks and snacks were available. A small area was now available for children to play in.
- 4.4 There were sufficient visits sessions for the population. Visitors we spoke to said that most staff treated them respectfully, and we observed searching being carried out appropriately. In our survey, fewer prisoners (27%) than at similar prisons (50%) said that visits started and finished on time. The prison was aware of this, and had taken steps to improve the start times. The visits hall was clean and included facilities for visitors to buy food and drinks.
- 4.5 In our survey, far more prisoners than at the time of the previous inspection said that they had problems in sending or receiving mail (61% versus 31%). The prison photocopied all incoming mail, to ensure that drugs did not enter the prison (see also paragraph 1.41), although this measure was appropriately reviewed every three months to ensure that it remained justified. The prison ran the 'email a prisoner' scheme, which allowed prisoners to receive emails from family and friends.
- 4.6 It was excellent that prisoners had in-cell telephones, which promoted contact with family and friends, and which they valued. However, these were turned off at 11pm which seemed an unnecessary restriction (see also paragraph 1.47 and recommendation 1.51).

Reducing risk, rehabilitation and progression

Expected outcomes:

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

- 4.7** At the time of the inspection, the prison's data indicated that 46% of prisoners were assessed as presenting a high risk of serious harm to others. Most of the total population had been at the establishment for only six months or less, which presented challenges to good offender management.
- 4.8** Strategic work to reduce reoffending was reasonably good overall. The strategy was underpinned by a range of useful data taken from offender assessment system (OASys) assessments and other sources, but this was now over a year old and required updating to reflect the needs of the current population. A stand-alone needs analysis that had been carried out, based on a prisoner survey with a response rate of only 20%, was too limited.
- 4.9** The reducing reoffending action plan failed to cover some major resettlement pathways, including housing, finance and offending behaviour programmes. It was commendable that regular meetings to coordinate reducing reoffending work had continued, despite the recent challenges that the prison had faced to maintain safety, but these were not yet well attended.
- 4.10** Too many eligible prisoners did not have an up-to-date OASys assessment: 12% of eligible prisoners did not have an initial OASys assessment, and a further 27% had an assessment and sentence plan which were more than 12 months old, and therefore potentially did not reflect their recent behaviour in custody. The lack of initial OASys assessments was mainly caused by 75% of eligible new arrivals transferring to the establishment without one, a persistent problem which undermined the efforts of the offender management unit (OMU) (see key concern and recommendation S60).
- 4.11** The lack of up-to-date OASys assessments for so many prisoners potentially adversely affected sentence progression for some. Managers had tried to address this gap by providing prisoners without an OASys assessment with a locally devised sentence plan. However, in the cases we reviewed two-thirds were missing, and those we found were too generic and ineffective.
- 4.12** The prison had just implemented the new Offender Management in Custody (OMiC) model²⁰ and had managed to fill most prison offender manager (POM) posts. It was appropriate that probation-trained POMs carried the high-risk cases. Uniformed POMs were only rarely cross-deployed to other duties, which was an improvement since the previous inspection.
- 4.13** Levels of recorded contact with POMs were poor overall. We found little evidence of routine, planned contact with prisoners to drive sentence progression. In some cases, the last recorded contact dated back six or 12 months. Where there had been more recent contact, this tended to be triggered by events such as parole board hearings or recategorisation reviews. It was positive that all contact was now recorded and shared on the P-Nomis system (electronic case notes), an improvement since the previous inspection (see key concern and recommendation S61).

²⁰ The OMiC model was introduced in 2017. In the first stage, prison officer key workers were introduced with the aim of having regular contact with individual prisoners. The second phase sees the introduction of core offender management and prison offender managers.

- 4.14** No OMU sessions or surgeries were held on the wings, which was a missed opportunity to deal with prisoner queries in the absence of regular one-to-one contact with POMs. Key worker delivery was not yet good or regular enough to support and enhance the work of the OMU. Key workers' contact with prisoners was not yet sufficiently well focused on sentence plans and progression.
- 4.15** Home detention curfew (HDC) processes were sound. Of the 208 prisoners considered for release on HDC in the previous six months, 160 (77%) had been approved. In the previous six months, about 20% of prisoners released on HDC had left the prison after their eligibility date, a lower proportion than we often see.
- 4.16** At the time of the inspection, there were 28 prisoners serving indeterminate sentences, and there was too little support for them. For example, consultation with the OMU had halted and there was no peer worker in place for these prisoners.

Public protection

- 4.17** The application of some core public protection procedures was inadequate and not always well understood by staff and managers.
- 4.18** Arrangements to monitor prisoners' telephone calls were ineffective. During the inspection, there were about 90 prisoners subject to telephone monitoring but there was only one member of staff allocated to listen to these calls. Consequently, there was a large backlog of calls waiting to be listened to, which meant that decisions about whether to continue or end monitoring were often postponed because there was no up-to-date evidence in the call logs to inform an appropriate risk assessment. As new prisoners who required monitoring continued to arrive at the prison, and existing monitoring arrangements often had to be extended, the overall number of calls which needed monitoring had increased and become unmanageable (see key concern and recommendation S62).
- 4.19** Some prisoners subject to monitoring spoke in foreign languages during their calls. It was positive that the prison arranged for some, although not all, of these calls to be interpreted, to understand the risk that these prisoners presented.
- 4.20** Managers routinely identified new prisoners who presented a continuing risk to children. Based on these decisions, there were currently at least 49 prisoners who were not supposed to have any contact with children. These restrictions were managed reasonably well by staff who booked social visits, and we were satisfied that face-to-face contact would be prevented. However, procedures for stopping these prisoners from corresponding with children by letter were not effective, as mail room staff were not stopping letters in all of these cases (see key concern and recommendation S62).
- 4.21** Applications from these prisoners to allow them contact with specific children were poorly managed. Numerous applications from the previous two years were still outstanding, with no clear outcome recorded.
- 4.22** At least 51 high-risk prisoners were due to be released from the establishment in the three months following the inspection. Risk management planning for these prisoners was inconsistent. Managers discussed some cases with POMs during supervision, but others were not discussed. The interdepartmental risk management meeting did not routinely consider all high-risk prisoners approaching release, and there was insufficient evidence of POMs liaising with community offender managers to confirm risk management plans in the months leading up to release (see key concern and recommendation S63).

- 4.23** For example, over 300 prisoners were managed under multi-agency public protection arrangements (MAPPA). There was little evidence of POMs routinely confirming MAPPA management levels with the community offender manager, which evidenced the lack of joint release planning. We checked the cases of six prisoners subject to MAPPA arrangements who were due to be released in the week after the inspection, and only three had a confirmed MAPPA management level (see key concern and recommendation S63).

Categorisation and transfers

- 4.24** Processes to recategorise prisoners were generally timely, and reviews were completed by POMs, which was appropriate.
- 4.25** In the previous six months, 53 prisoners had transferred to open conditions and there were currently 14 category D prisoners waiting for a transfer. A few of these prisoners had a confirmed date to move to an open prison, but in some other cases prisoners had been waiting several months, and more work was needed to progress them.
- 4.26** We found examples of some prisoners being considered and approved for category D without an up-to-date OASys assessment. This meant that the decision to move these prisoners to open conditions was not supported by a full risk assessment which considered their most recent behaviour in custody.

Interventions

Expected outcomes:

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

- 4.27** There was no up-to-date analysis of need, to evidence the full range of offending behaviour work required.
- 4.28** The prison continued to offer the same accredited offending behaviour programmes as at the time of the previous inspection – namely, the Thinking Skills Programme and Resolve (an intervention for violent offenders). These were delivered reliably, and there had been about 70 completions during the current financial year. There were also well-attended sessions for prisoners to complete motivational pre-programme work and then consolidate learning after completing a programme.
- 4.29** Overall, there were too few other, non-accredited opportunities to enable prisoners to address their offending behaviour. The chaplaincy offered the Sycamore Tree victim awareness course to 60 prisoners each year. Managers had identified that there were over 300 prisoners with a history of perpetrating domestic violence. Staff from the Leeds Rhinos Foundation had been attending the prison for two years, delivering ‘On Side’ (a thinking skills course) and ‘Tackle it’ (a domestic violence intervention). Funding for these courses had lapsed at the time of the inspection but there were plans to reintroduce them.
- 4.30** Plans by West Yorkshire Community Rehabilitation Company (CRC) to deliver a range of brief interventions had been delayed by short staffing (see also paragraph 4.36). There was no specific, systematic support or help for prisoners who had experienced abuse or other personal trauma.
- 4.31** The programmes team, alongside the University of York, had developed the ‘problem support mentor scheme’. About 40 prisoners had completed this training, although only eight remained in the prison. The scheme was a good idea but needed to be better

supported in practice. The mentor we spoke to had mostly helped prisoners to reconsider their negative involvement in drugs, which was encouraging, but the scheme was poorly advertised on his wing, and staff and prisoners were unaware of his role.

- 4.32** St Giles Trust provided one-to-one support for any prisoner with an identified accommodation need. The team was fully staffed, with 3.8 full-time-equivalent case workers. About one in eight prisoners left the prison without any form of sustainable accommodation on the day of release, which was much lower than we have seen in some other prisons. As cases were not tracked to see the longer-term outcomes in terms of accommodation, it was impossible to evidence effectiveness.
- 4.33** Support to help prisoners to manage their finances was reasonably good. St Giles Trust delivered one-to-one casework on debts and court fines. Some money management advice was offered within courses offered by the prison learning and skills provider. A Jobcentre Plus worker was on site three days a week. The facility to open bank accounts, provided by Jobcentre Plus, had briefly lapsed but had now resumed, and there were plans for St Giles Trust to take on this work.

Recommendation

- 4.34** **An up-to-date analysis of the offending behaviour needs of the population should inform the provision of an appropriate range of accredited programmes and other interventions to help prisoners address their attitudes, thinking and behaviour.**

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.

- 4.35** The demand for resettlement help was high. On average, 82 prisoners were released each month, compared with 60 at the time of the previous inspection. The prison had a designated resettlement function, and this worked unusually well. In the previous six months, 87% of released prisoners had gone to local addresses in the West Yorkshire area.
- 4.36** The delivery of resettlement services had changed since April 2019, when a new, integrated through-the-gate service had been introduced. West Yorkshire CRC was supposed to provide five staff but currently had only two case workers. Nevertheless, these case workers identified prisoners' resettlement needs promptly, sensibly working to the earliest possible release date. Resettlement plans and casework to meet any identified resettlement needs were good. CRC staff had a good focus on potential risk issues, such as prisoners returning to family addresses, and worked well alongside their St Giles Trust colleagues. However, casework relied too heavily on the views of prisoners, partly because staff lacked access to all possible sources of information, such as Delius, the probation service recording system. Where needs were identified, there was evidence of appropriate onward referrals. In most cases, checks were also in place near to release, to confirm that prisoners' resettlement needs had been addressed.
- 4.37** A monthly resettlement hub was held, to which prisoners being released in the subsequent four weeks were invited. This was a good innovation which allowed prisoners to engage with a variety of resettlement agencies. About 25 prisoners chose to attend each month.

4.38 Practical release arrangements were reasonably good, with the prison located on a main bus route into Leeds. A small number of prisoners with more complex needs were met at the prison gates on release by the Prison Advice and Care Trust.

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:
S55	<p>Key concern: The prison did not adequately act on the information gained from analysing the large number of intelligence reports submitted, and had not used these to inform a plan to reduce violence and drug supply in the prison.</p> <p>Recommendation: The analysis of intelligence should be used to inform a plan that leads to a clear reduction in drug supply and associated violence.</p>	The governor
S56	<p>Key concern: Despite some improvements to physical security, drugs were far too easily available. Drug use was having a negative effect on outcomes for prisoners, including levels of violence, bullying and intimidation, and the immediate and long-term consequences to their health.</p> <p>Recommendation: The availability of drugs in the prison should be reduced substantially, providing improved outcomes for prisoners in terms of less violence, bullying, intimidation and reduced immediate and long-term risks to their health.</p>	The governor
S57	<p>Key concern: The level of self-harm was six times higher than at the time of the previous inspection. Interviews with all prisoners who had self-harmed were carried out, to help staff to understand the causes of the problem. However, there was no clear strategy to reduce the level of self-harm.</p> <p>Recommendation: Evidence from data analysis and information gained from prisoners about their reasons for self-harming should be used to develop an effective strategy and action plan that address the underlying causes and reduce the number of incidents of self-harm.</p>	The governor
S58	<p>Key concern: Over 28% of prisoners were locked in their cells during the working day, which was far too many for a training prison.</p> <p>Recommendation: There should be sufficient structured purposeful activity to ensure that all eligible prisoners are engaged in work or training activities during the working day.</p>	The governor

S59	<p>Key concern: Too few prisoners attended their allocated activity sessions owing to conflicting priorities during the working day.</p> <p>Recommendation: The number of prisoners attending their allocated activity sessions during the working day should be increased, by removing conflicting priorities within the prison regime.</p>	The governor
S60	<p>Key concern: During the inspection, 12% of eligible prisoners did not have an OASys assessment. A further 27% had an out-of-date assessment, which did not reflect their recent behaviour in custody. The lack of effective assessments undermined sentence progression and access to appropriate interventions for some.</p> <p>Recommendation: All eligible prisoners should have an up-to-date offender assessment system (OASys) assessment to inform their progression and access to interventions.</p>	The governor
S61	<p>Key concern: Levels of contact with prison offender managers were poor, which undermined sentence progression.</p> <p>Recommendation: All eligible prisoners should have regular contact with an appropriately trained prison offender manager, in order to progress.</p>	The governor
S62	<p>Key concern: The application of some public protection procedures was inadequate. For example, arrangements to monitor prisoners' telephone calls were ineffective as there was a large backlog of calls waiting to be listened to. Restrictions on sending and receiving correspondence were not always enforced. When prisoners had applied for contact with specific children, there was often no evidence of the outcome.</p> <p>Recommendation: Contact restrictions to protect the public should be appropriately enforced and managed.</p>	The governor
S63	<p>Key concern: The interdepartmental risk management meeting did not review release plans for all high-risk prisoners and there was too little evidence of contact with the community-based offender manager to discuss risk management release plans, including MAPPA management levels.</p> <p>Recommendation: The release of prisoners who present a high risk of harm to others in the community should be robustly overseen by the interdepartmental risk management meeting and include regular and meaningful contact with the community-based offender manager, including confirmation of multi-agency public protection arrangements (MAPPA) management levels where relevant.</p>	The governor

General recommendations		Directed to:
1.32	The prison should ensure that all staff receive annual refresher training on the use of PAVA.	The governor
1.51	Prisoners should be able to access Samaritans telephones 24 hours a day.	The governor
1.52	A Listener suite should be available, to allow prisoners in double cells access to Listeners at night.	The governor
1.53	All staff should carry an anti-ligature knife.	The governor
2.9	All showers should be clean and have good ventilation and drainage.	The governor
2.23	Responses to applications, complaints and discrimination incident report forms should be tracked, to ensure that prisoners receive a timely response.	The governor
2.29	Comprehensive analysis of data relating to equality and diversity should be used to develop further the action plan for the whole prison, and this should include addressing any disproportionate treatment of prisoners with protected characteristics.	The governor
2.30	Regular and effective consultation should be in place for all prisoners with protected characteristics.	The governor
2.41	Prisoners with disabilities should be identified and given good, consistent and organised support.	The governor
2.42	Action should be taken to address the potentially disproportionate treatment of younger prisoners and provide them with specific support tailored to their needs.	The governor
2.43	The needs of the small number of veterans should be analysed, and support provided as needed.	The governor
2.72	Health care managers, in collaboration with the prison, should investigate the reasons for high failure to attend rates and implement measures to ensure that prisoners' health care needs are met.	The governor
2.98	Systems to audit non-attendance at medication administration should be developed.	The governor
2.99	Any variances made to in-possession risk assessments should be recorded consistently.	The governor
2.105	Prisoners should be supported to access routine and planned ongoing dental care and treatment in a timely way.	The governor
2.106	The dental surgery should comply with infection control standards.	The governor
3.19	Leaders and managers should greatly reduce the proportion of prisoners who start qualifications but do not complete them, by ensuring that they allocate prisoners to activities according to the length of time they have left to serve.	The governor
3.27	Leaders and managers should ensure that teachers plan the activities that they use in classes carefully, so that prisoners find them interesting and useful. Teachers should ensure that they check sufficiently learners' understanding of topics taught before they move on to new learning.	The governor
3.33	Leaders and managers should ensure that prisoners engaged in prison work use their skills portfolios effectively, to record the knowledge and skills that they are developing.	The governor
3.38	Leaders and managers should ensure that the proportion of prisoners who achieve their functional skills qualifications in English and mathematics improves substantially.	The governor
4.34	An up-to-date analysis of the offending behaviour needs of the population should inform the provision of an appropriate range of accredited programmes and other interventions to help prisoners address their attitudes, thinking and behaviour.	The governor

Examples of good practice		
1.11	Prisoners could pay off advances of money on reception from their private spending account, in order to minimise the risk of them getting into debt.	
1.54	The prison had interviewed their most prolific self-harmers to try to understand the issues to be addressed.	
2.44	The provision offered to care leavers by the prison and Care Leavers Association provided prisoners with good support whilst in prison and opportunities to access further support upon release.	
2.82	All prisoners were given a mental health resource toolkit on arrival, which included information on common mental health problems, how to access support, guided self-help and distraction techniques.	
2.90	Access to the same psychosocial programmes at HMPs Leeds and Wealstun for transferees ensured that patients in recovery from addiction could continue their packages of treatment without interruption.	
2.91	The incentivised substance-free living wing encouraged recovery by providing pro-social activities and community mutual aid, and ensured compliance by assertive voluntary drug testing.	

Section 6. Appendices

Appendix I: Inspection team

Peter Clarke	Chief inspector
Sandra Fieldhouse	Team leader
Jade Richards	Inspector
Jonathan Tickner	Inspector
Paul Rowlands	Inspector
Caroline Wright	Inspector
David Foot	Inspector
Hayley Edwards	Inspector
Joe Simmonds	Researcher
Becky Duffield	Researcher
Claudia Vince	Researcher
Billie Powell	Researcher
Shaun Thomson	Lead health and social care inspector
Paul Tarbuck	Health and social care inspector
Sue Melvin	Pharmacist
Kathleen Byrne	Care Quality Commission inspector
Ken Merry	Ofsted inspector
Mary Devane	Ofsted inspector
Elaine Price	Ofsted inspector
Martyn Griffiths	Offender management inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2015, reception and first night processes were generally good. Few prisoners felt unsafe, despite a relatively high number of mostly low-level violent incidents. There were good systems to reduce violence but more needed to be done to manage those at risk. Suicide and self-harm processes were mostly good. Drugs were easily available and the use of psychoactive substances was particularly problematic and put the safety of prisoners at risk, although the prison was responding well to the challenges. The application of the incentives and earned privileges scheme was inconsistent and inflexible. The number of adjudications was high but they were well governed. Levels of use of force were high but oversight was effective. Too many prisoners were transferred or discharged from the segregation unit without their issues being addressed. The demand for substance misuse services was high and provision was good. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

Security intelligence should be promptly and fully analysed and effective action taken in response to the concerns identified. (S50)

Not achieved

Recommendations

Prisoners should not have to wait in cellular vehicles if they arrive at the establishment during the lunch hour. (1.4)

Achieved

Peer supporters should be systematically involved in the first night process. (1.10)

Achieved

The first night landing should be used only to accommodate new arrivals. (1.11)

Achieved

The induction programme should be designed to meet the needs of all prisoners, including of those new to prison and those with a poor understanding of English. (1.12)

Achieved

Violent behaviour should be challenged and addressed through the use of interventions appropriate for the individual prisoner. (1.19)

Not achieved

Prisoners identified as victims should be actively supported in order to maximise their participation in the regime, and it should be ensured that all staff have a clear understanding of the needs of individuals. (1.20)

Not achieved

Prisons and Probation Ombudsman recommendations should be reviewed regularly to ensure continued compliance. (1.27)

Achieved

A safeguarding adults policy should be developed, detailing procedures and overall responsibility. Wing staff should be trained in the processes and be aware of their responsibilities under the Care Act. (1.32)

Partially achieved

Strip-searching should be carried out only after a risk assessment indicates that it is necessary. (1.40)

Not achieved

Visits restrictions should not be imposed for non-visits-related incidents. (1.41)

Achieved

Prisoners should be consulted over their poor perceptions of the incentives and application of the incentives and earned privileges (IEP) system. (1.47)

Achieved

The application of the IEP scheme should be reviewed to ensure adherence to local policy, the setting of individualised improvement targets, and timely and meaningful responses to poor behaviour. (1.48)

Not achieved

Prisoners held in special accommodation should have a mattress, when a risk assessment permits, and documentation should clearly record the clothing that prisoners are left with. (1.55)

Achieved

Care and reintegration plans should be introduced to ensure that the underlying causes behind poor or vulnerable behaviour are addressed effectively and that options for prisoners' safe integration back into the main prison or transfer are identified. (1.62)

Achieved

Toilets on the segregation unit should be cleaned and screened, and graffiti in cells should be removed. (1.63)

Not achieved

The regime on the segregation unit should be improved and (subject to risk assessment) include access to on- and off-unit activities and in-cell electricity. (1.64)

Not achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2015, external areas and wings were generally clean but some of the older wings required refurbishment. Access to telephones, laundry facilities and showers was good. Staff-prisoner

relationships were positive. Most prisoners with protected characteristics were reasonably satisfied with their treatment but there was too little dedicated consultation and insufficient interrogation of equality data. Faith provision was satisfactory. Complaints were well managed. Health provision was good. Food was generally good but served too early. Outcomes for prisoners were good against this healthy prison test.

Recommendations

A, B, C and D wings should be refurbished to match the standard found on the newer wings. All cells should contain furniture of a suitable standard and toilets should be screened. (2.7)

Achieved

Communal showers should be cleaned thoroughly and kept well ventilated. (2.8)

Not achieved

All telephone areas should provide adequate privacy. (2.9)

No longer relevant

Equality impact assessments should be undertaken and adverse data from the equality monitoring tool should be examined promptly. Consequent actions should be included in the action plan and progress reported to the diversity and equality action team (DEAT) meeting. (2.23)

Partially achieved

Regular forums/support groups should be held with prisoners in all protected groups. Actions arising from them should be included in the action plan and progress reported to the DEAT meeting. (2.24)

Not achieved

Personal emergency and evacuation plans should clarify how assistance is provided to prisoners identified as requiring help in an emergency. (2.33)

Achieved

Provision for foreign national prisoners should be improved. They should have adequate access to legal advice on immigration matters and to the Home Office Immigration Service. Professional telephone interpreting services should be used for confidential or sensitive communication with those who speak little English, and always in reception and health care interviews. (2.34)

Not achieved

Chaplains should have cell keys and attend assessment, care in custody and teamwork (ACCT) reviews where relevant. (2.42)

Achieved

The chaplaincy should develop links with community faith groups to provide support during imprisonment and on release. (2.43)

Achieved

All medical equipment should be accounted for and routine checks of all emergency equipment should be audited and form part of the internal reporting matrix provided to the health care manager. Custody staff should be trained in the use of automated external defibrillators and have ready access to a device. (2.63)

Achieved

The clinical assessment rooms in reception should comply with infection control and prevention standards. (2.72)

Achieved

Waiting times to see the optician should be equivalent to those found in the community. (2.73)

Achieved

The prison should monitor failure to attend rates for all clinics and explore the reasons for non-attendance robustly. (2.74)

No longer relevant

In-possession risk assessments should consider the risks of the drug as well as the patient, and be completed routinely and consistently. The policy should be followed robustly and reasons for the determination recorded. (2.82)

Not achieved

Medicine queues should be supervised closely by discipline staff. (2.83)

Achieved

Pharmacy-led clinics and medicine use reviews should be developed. (2.84)

Not achieved

Waiting times to see the dentist should be reduced to ensure that they are equivalent to those found in the community. (2.89)

Achieved

All prison staff should attend refresher mental health awareness training as part of mandatory training. (2.93)

Achieved

Breakfast packs should be more substantial and served on the day they are to be eaten, and lunch should not be served before midday and dinner before 5pm. (2.99)

Not achieved

Food hygiene should be maintained by keeping food trolleys, serveries and eating areas clean. (2.100)

Achieved

Prisoners should not be charged an administrative fee for placing catalogue orders. (2.105)

Not achieved

Prisoners should not have to wait up to 10 days to receive their first shop order. (2.106)

Not achieved

Purposeful activity

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

At the last inspection, in 2015, the amount of time out of cell was good for most but too many prisoners were locked up during the working day. The management of learning and skills and work activities was good, with a suitable focus on employability. The range and breadth of provision met needs. There were sufficient activity places but they were not fully utilised. The quality of teaching, training and learning was good. Standards of work were good and prisoners achieved well. The library provided a reasonable service but was underused. PE provision was comprehensive and accessible. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

Activity places should be fully utilised, staff absences and vacancies should be covered and prisoners' attendance should be managed robustly. (S51)

Achieved

Recommendations

Association and exercise should be supervised effectively at all times on all wings. (3.5)

Not achieved

Prisoners should be provided with sufficient activities at weekends. (3.6)

Not achieved

Targets in the quality improvement action plan should be precise and measurable, to enable managers to assess the effectiveness of their actions in securing improvement. (3.15)

Achieved

Long-term unemployed prisoners should be supported effectively back into activities. (3.21)

Achieved

The quality of target setting should be improved, to ensure that teachers use language that learners understand, so that they know how to improve further and where they might receive additional help. (3.30)

Achieved

Learners' achievements in functional skills in mathematics at level 1 should be improved. (3.34)

Achieved

Prisoners should be able to visit the library at least once a week and action should be taken to increase its use. (3.39)

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 2015, the strategic management of resettlement was good. Offender management was undermined by a backlog of offender assessment system (OASys) assessments and the redeployment of uniformed offender supervisors. Contact with offender supervisors was limited and the quality of sentence plans was too variable. Home detention curfew and recategorisation processes were sound. Public protection arrangements were mostly good but more needed to be done before release. The demand for resettlement services was reasonably high and prisoners were supported well across most of the pathways, although more work could be done to improve family and children support. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

All prisoners should have an offender assessment system (OASys) assessment and sentence plan which identifies targets for progression and reducing reoffending. Contact between prisoners and offender supervisors should be regular and meaningful, and should encourage and monitor progress. (S52)

Not achieved

Recommendations

The resettlement needs analysis should include OASys information about risk and the likelihood of reoffending, so that resettlement services can be planned which meet the needs of prisoners and will reduce reoffending. (4.5)

Achieved

Recorded contact with prisoners should be accessible to all staff responsible for their care. (4.13)

Achieved

Public protection procedures should include clarification of the multi-agency public protection arrangements (MAPPA) level and assurance that the risks presented by prisoners due for release will be well managed. (4.17)

Not achieved

The virtual campus should be used to support job search. (4.31)

Not achieved

A financial education and money management course should be available. (4.39)

Not achieved

A family support worker and relationship counselling should be provided. (4.44)

Achieved

The length of family days should be extended, and all families should be able to attend, regardless of the IEP status of the prisoner. (4.45)

Achieved

Visitors should be consulted about their experience of visiting, to identify and plan improvements. (4.46)

Achieved

Interventions addressing thinking skills should be available for prisoners who are not suitable for accredited programmes. (4.51)

Not achieved

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-year-olds	21 and over	%
Sentenced	0	704	85.5
Recall	0	97	11.8
Convicted unsentenced	0	0	0
Remand	0	0	0
Civil prisoners	0	0	0
Detainees	0	0	0
Indeterminate sentence	0	22	2.7
Total	0	823	100

Sentence	18–20-year-olds	21 and over	%
Unsentenced	0	0	0
Less than six months	0	0	0
six months to less than 12 months	0	31	3.8
12 months to less than 2 years	0	95	11.5
2 years to less than 3 Years	0	176	21.4
3 years to less than 4 years	0	154	18.7
4 years to less than 10 years	0	306	37.2
10 years and over (not life)	0	34	4.1
ISPP (indeterminate sentence for public protection)	0	13	1.6
Life	0	14	3.3
Total	0	823	100

Age	Number of prisoners	%
Please state minimum age here: 21	-	-
Under 21 years	0	0
21 years to 29 years	289	35.1
30 years to 39 years	304	36.9
40 years to 49 years	178	21.6
50 years to 59 years	46	5.6
60 years to 69 years	5	0.6
70 plus years	1	0.1
Please state maximum age here: 71	-	-
Total	823	100

Nationality	18–20-year-olds	21 and over	%
British	0	816	99.1
Foreign nationals	0	7	0.9
Total	0	823	100

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced			
Uncategorised sentenced			
Category A			

Category B			
Category C	0	803	97.6
Category D	0	20	2.4
Other			
Total	0	823	100

Ethnicity	18–20-year-olds	21 and over	%
White			
British	0	603	73.3
Irish	0	6	0.7
Gypsy/Irish Traveller	0	9	1.1
Other white	0	6	0.7
Mixed			
White and black Caribbean	0	28	3.4
White and black African	0	0	0
White and Asian	0	7	0.9
Other mixed	0	7	0.9
Asian or Asian British			
Indian	0	22	2.7
Pakistani	0	85	10.3
Bangladeshi	0	3	0.4
Chinese	0	0	0
Other Asian	0	9	1.1
Black or black British			
Caribbean	0	17	2.1
African	0	5	0.6
Other black	0	6	0.7
Other ethnic group			
Arab	0	0	0
Other ethnic group	0	0	0
Not stated	0	10	1.2
Total	0	823	100

Religion	18–20-year-olds	21 and over	%
Baptist	0	0	0
Church of England	0	152	18.5
Roman Catholic	0	138	16.8
Other Christian denominations	0	52	6.3
Muslim	0	157	19.1
Sikh	0	8	1.0
Hindu	0	1	.01
Buddhist	0	8	1.0
Jewish	0	2	0.2
Other	0	4	0.5
No religion	0	301	36.6
Total	0	823	100

Other demographics	18–20-year-olds	21 and over	%
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Veteran (ex-armed services)	0	4	0.12
Total	0	4	0.12

Sentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	0	0	105	12.8
1 month to 3 months	0	0	219	26.6
3 months to six months	0	0	217	26.4
six months to 1 year	0	0	172	20.9
1 year to 2 years	0	0	88	10.7
2 years to 4 years	0	0	21	2.6
4 years or more	0	0	1	0.1
Total	0	0	823	100

Sentenced prisoners only

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

Unsentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	0	0	0	0
1 month to 3 months	0	0	0	0
3 months to six months	0	0	0	0
six months to 1 year	0	0	0	0
1 year to 2 years	0	0	0	0
2 years to 4 years	0	0	0	0
4 years or more	0	0	0	0
Total		0	0	0

Main offence	18–20-year-olds	21 and over	%
Violence against the person			
Sexual offences			
Burglary			
Robbery			
Theft and handling			
Fraud and forgery			
Drugs offences			
Other offences			
Civil offences			
Offence not recorded /holding warrant			
Total			

Appendix IV: Photographs



B wing shower



H2 shower



C wing shower (Ground)

Appendix V: Prisoner survey methodology and results

Prisoner survey methodology

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

HM Inspectorate of Prisons (HMI Prisons) researchers have developed a self-completion questionnaire to support HMI Prisons' *Expectations*. The questionnaire consists of structured questions covering the prisoner 'journey' from reception to release, together with demographic and background questions which enable us to compare responses from different sub-groups of the prisoner population. There are also three open questions at the end of the questionnaire which allow prisoners to express, in their own words, what they find most positive and negative about the prison.²¹

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

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

Sampling

On the day of the survey a stratified random sample is drawn by HMI Prisons researchers from a P-NOMIS prisoner population printout ordered by cell location. Using a robust statistical formula HMI Prisons researchers calculate the minimum sample size required to ensure that the survey findings can be generalised to the entire population of the establishment.²² In smaller establishments we may offer a questionnaire to the entire population.

Distributing and collecting questionnaires

HMI Prisons researchers distribute and collect the questionnaires in person. So that prisoners can give their informed consent to participate, the purpose of the survey is explained and assurances are given about confidentiality and anonymity.²³ Prisoners are made aware that participation in the survey is voluntary; refusals are noted but not replaced within the sample. Those who agree to participate are provided with a sealable envelope for their completed questionnaire and told when we will be returning to collect it. We make arrangements to administer the questionnaire via a face-to-face interview for respondents who disclose literacy difficulties.

Survey response

At the time of the survey on 15 October 2019 the prisoner population at HMP Wealstun was 819. Using the sampling method described above, questionnaires were distributed to 213 prisoners. We received a total of 176 completed questionnaires, a response rate of 83%. This included two questionnaires completed via face-to-face interview. Sixteen prisoners declined to participate in the survey and 21 questionnaires were either not returned at all, or returned blank.

²¹ Qualitative analysis of these written comments is undertaken by HMI Prisons researchers and used by inspectors.

²² 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments).

²³ For further information about the ethical principles which underpin our survey methodology, please see *Ethical principles for research activities* which can be downloaded from HMI Prisons' website <http://www.justiceinspectorates.gov.uk/hmiprison/about-our-inspections/>

Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for HMP Wealstun. For the comparator analyses, each question was reformulated into a binary ‘yes/no’ format and affirmative responses compared.²⁴ Missing responses have been excluded from all analyses.

Full survey results

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

Responses from HMP Wealstun 2019 compared with those from other HMIP surveys²⁵

- Survey responses from HMP Wealstun in 2019 compared with survey responses from other category C training prisons inspected since September 2017.
- Survey responses from HMP Wealstun in 2019 compared with survey responses from HMP Wealstun in 2015.

Comparisons between different residential locations within HMP Wealstun 2019

- Responses of prisoners on the old accommodation (A and B wings) are compared with the rest of the establishment.

Comparisons between self-reported sub-populations of prisoners within HMP Wealstun 2019²⁶

- Responses of prisoners aged 25 and under compared with those over 25.
- 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.

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group.²⁷

In the comparator analyses, statistically significant differences are indicated by shading.²⁸ Results that are significantly more positive are indicated by green shading and results that are significantly more negative are indicated by blue shading. Orange shading has been used to show a statistically significant difference in demographic or other background details. If there is no shading, any difference between the two results is not statistically significant and may have occurred by chance. Grey shading indicates that there is no valid comparative data for that question.

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

²⁴ Using the Chi-square test (or Fisher’s exact test if there are fewer than five responses in a group).

²⁵ 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.

²⁶ These analyses are carried out on summary data from selected survey questions only.

²⁷ A minimum of 10 responses which must also represent at least 10% of the total response.

²⁸ 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?	
	Wing A	14 (8%)
	Wing B	27 (15%)
	Wing C	37 (21%)
	Wing D	28 (16%)
	Wing E	12 (7%)
	Wing F	13 (7%)
	Wing G	11 (6%)
	Wing H	9 (5%)
	Wing I	11 (6%)
	Wing J	12 (7%)
	Segregation unit	2 (1%)
I.2	How old are you?	
	Under 21	0 (0%)
	21 - 25	27 (16%)
	26 - 29	31 (18%)
	30 - 39	64 (37%)
	40 - 49	40 (23%)
	50 - 59	10 (6%)
	60 - 69	1 (1%)
	70 or over	0 (0%)
I.3	What is your ethnic group?	
	White - English/ Welsh/ Scottish/ Northern Irish/ British	117 (68%)
	White - Irish	2 (1%)
	White - Gypsy or Irish Traveller	7 (4%)
	White - any other White background	0 (0%)
	Mixed - White and Black Caribbean	4 (2%)
	Mixed - White and Black African	0 (0%)
	Mixed - White and Asian	7 (4%)
	Mixed - any other Mixed ethnic background	0 (0%)
	Asian/ Asian British - Indian	2 (1%)
	Asian/ Asian British - Pakistani	21 (12%)
	Asian/ Asian British - Bangladeshi	1 (1%)
	Asian/ Asian British - Chinese	0 (0%)
	Asian - any other Asian Background	0 (0%)
	Black/ Black British - Caribbean	8 (5%)
	Black/ Black British - African	1 (1%)
	Black - any other Black/ African/ Caribbean background	0 (0%)
	Arab	1 (1%)
	Any other ethnic group	0 (0%)
I.4	How long have you been in this prison?	
	Less than 6 months	69 (41%)
	6 months or more	99 (59%)

1.5	Are you currently serving a sentence?	
	Yes	145 (84%)
	Yes - on recall	28 (16%)
	No - on remand or awaiting sentence	0 (0%)
	No - immigration detainee	0 (0%)
1.6	How long is your sentence?	
	Less than 6 months	6 (3%)
	6 months to less than 1 year	13 (8%)
	1 year to less than 4 years	77 (45%)
	4 years to less than 10 years	63 (37%)
	10 years or more	9 (5%)
	IPP (indeterminate sentence for public protection)	1 (1%)
	Life	3 (2%)
	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	23 (13%)
	No	138 (80%)
	Don't remember	11 (6%)
2.2	When you arrived at this prison, how long did you spend in reception?	
	Less than 2 hours	54 (32%)
	2 hours or more	110 (64%)
	Don't remember	7 (4%)
2.3	When you were searched in reception, was this done in a respectful way?	
	Yes	137 (81%)
	No	27 (16%)
	Don't remember	6 (4%)
2.4	Overall, how were you treated in reception?	
	Very well	36 (21%)
	Quite well	106 (63%)
	Quite badly	14 (8%)
	Very badly	9 (5%)
	Don't remember	3 (2%)
2.5	When you first arrived here, did you have any of the following problems?	
	Problems getting phone numbers	33 (20%)
	Contacting family	30 (18%)
	Arranging care for children or other dependants	5 (3%)
	Contacting employers	1 (1%)
	Money worries	28 (17%)
	Housing worries	32 (19%)
	Feeling depressed	63 (37%)
	Feeling suicidal	27 (16%)
	Other mental health problems	48 (28%)
	Physical health problems	31 (18%)
	Drug or alcohol problems (e.g. withdrawal)	31 (18%)
	Problems getting medication	39 (23%)
	Needing protection from other prisoners	7 (4%)
	Lost or delayed property	38 (22%)

Other problems	30 (18%)
Did not have any problems	45 (27%)

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

Yes	34 (21%)
No	86 (52%)
Did not have any problems when I first arrived	45 (27%)

First night and induction

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

Tobacco or nicotine replacement	135 (80%)
Toiletries / other basic items	70 (42%)
A shower	90 (54%)
A free phone call	65 (39%)
Something to eat	124 (74%)
The chance to see someone from health care	87 (52%)
The chance to talk to a Listener or Samaritans	45 (27%)
Support from another prisoner (e.g. Insider or buddy)	42 (25%)
Wasn't offered any of these things	12 (7%)

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

Very clean	24 (14%)
Quite clean	73 (44%)
Quite dirty	37 (22%)
Very dirty	31 (19%)
Don't remember	1 (1%)

3.3 Did you feel safe on your first night here?

Yes	141 (84%)
No	22 (13%)
Don't remember	5 (3%)

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

	Yes	No	Don't remember
Access to the prison shop / canteen?	47 (29%)	109 (68%)	5 (3%)
Free PIN phone credit?	94 (59%)	58 (37%)	6 (4%)
Numbers put on your PIN phone?	88 (58%)	59 (39%)	6 (4%)

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

Yes	92 (55%)
No	63 (38%)
Have not had an induction	13 (8%)

On the wing

4.1 Are you in a cell on your own?

Yes	157 (93%)
No, I'm in a shared cell or dormitory	12 (7%)

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

Yes	44 (26%)
No	111 (66%)

Don't know	14 (8%)
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?	112 (68%)	50 (30%)	3 (2%)
Can you shower every day?	155 (94%)	8 (5%)	2 (1%)
Do you have clean sheets every week?	77 (48%)	77 (48%)	7 (4%)
Do you get cell cleaning materials every week?	84 (52%)	74 (45%)	5 (3%)
Is it normally quiet enough for you to relax or sleep at night?	96 (59%)	65 (40%)	3 (2%)
Can you get your stored property if you need it?	30 (19%)	85 (53%)	44 (28%)

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

Very clean	8 (5%)
Quite clean	83 (52%)
Quite dirty	47 (29%)
Very dirty	22 (14%)

Food and canteen

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

Very good	4 (2%)
Quite good	56 (34%)
Quite bad	65 (40%)
Very bad	38 (23%)

5.2 Do you get enough to eat at mealtimes?

Always	11 (7%)
Most of the time	38 (23%)
Some of the time	67 (40%)
Never	50 (30%)

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

Yes	112 (70%)
No	45 (28%)
Don't know	3 (2%)

Relationships with staff

6.1 Do most staff here treat you with respect?

Yes	130 (79%)
No	34 (21%)

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

Yes	121 (75%)
No	41 (25%)

6.3	In the last week, has any member of staff talked to you about how you are getting on?	
	Yes	59 (36%)
	No	107 (64%)
6.4	How helpful is your personal or named officer?	
	Very helpful	31 (19%)
	Quite helpful	50 (31%)
	Not very helpful	12 (7%)
	Not at all helpful	19 (12%)
	Don't know	30 (19%)
	Don't have a personal / named officer	19 (12%)
6.5	How often do you see prison governors, directors or senior managers talking to prisoners?	
	Regularly	13 (8%)
	Sometimes	37 (22%)
	Hardly ever	105 (64%)
	Don't know	10 (6%)
6.6	Do you feel that you are treated as an individual in this prison?	
	Yes	75 (45%)
	No	90 (55%)
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	
	Yes, and things sometimes change	23 (14%)
	Yes, but things don't change	68 (41%)
	No	51 (31%)
	Don't know	24 (14%)

Faith

7.1	What is your religion?	
	No religion	67 (41%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	53 (33%)
	Buddhist	1 (1%)
	Hindu	2 (1%)
	Jewish	1 (1%)
	Muslim	35 (21%)
	Sikh	3 (2%)
	Other	1 (1%)
7.2	Are your religious beliefs respected here?	
	Yes	65 (39%)
	No	19 (11%)
	Don't know	15 (9%)
	Not applicable (no religion)	67 (40%)
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	
	Yes	64 (39%)
	No	10 (6%)
	Don't know	23 (14%)
	Not applicable (no religion)	67 (41%)
7.4	Are you able to attend religious services, if you want to?	
	Yes	89 (53%)
	No	8 (5%)

Don't know	3 (2%)
Not applicable (no religion)	67 (40%)

Contact with family and friends

8.1	Have staff here encouraged you to keep in touch with your family / friends?	
	Yes	53 (32%)
	No	111 (68%)
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	101 (61%)
	No	64 (39%)
8.3	Are you able to use a phone every day (if you have credit)?	
	Yes	155 (95%)
	No	9 (5%)
8.4	How easy or difficult is it for your family and friends to get here?	
	Very easy	12 (7%)
	Quite easy	54 (33%)
	Quite difficult	57 (35%)
	Very difficult	31 (19%)
	Don't know	10 (6%)
8.5	How often do you have visits from family or friends?	
	More than once a week	2 (1%)
	About once a week	25 (16%)
	Less than once a week	92 (58%)
	Not applicable (don't get visits)	41 (26%)
8.6	Do visits usually start and finish on time?	
	Yes	31 (27%)
	No	85 (73%)
8.7	Are your visitors usually treated respectfully by staff?	
	Yes	72 (64%)
	No	41 (36%)

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	81 (50%)
	Yes, but these times are not usually kept to	64 (39%)
	No	18 (11%)
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	31 (19%)
	2 to 6 hours	55 (34%)
	6 to 10 hours	52 (32%)
	10 hours or more	11 (7%)
	Don't know	12 (7%)

9.3	How long do you usually spend out of your cell on a typical Saturday or Sunday?	
	Less than 2 hours	20 (12%)
	2 to 6 hours	105 (64%)
	6 to 10 hours	27 (16%)
	10 hours or more	5 (3%)
	Don't know	8 (5%)
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	7 (4%)
	1 or 2	23 (14%)
	3 to 5	31 (19%)
	More than 5	94 (58%)
	Don't know	8 (5%)
9.5	How many days in a typical week do you get association, if you want it?	
	None	8 (5%)
	1 or 2	9 (6%)
	3 to 5	24 (15%)
	More than 5	113 (70%)
	Don't know	8 (5%)
9.6	How many days in a typical week could you go outside for exercise, if you wanted to?	
	None	6 (4%)
	1 or 2	10 (6%)
	3 to 5	27 (16%)
	More than 5	116 (70%)
	Don't know	6 (4%)
9.7	Typically, how often do you go to the gym?	
	Twice a week or more	80 (49%)
	About once a week	11 (7%)
	Less than once a week	12 (7%)
	Never	61 (37%)
9.8	Typically, how often do you go to the library?	
	Twice a week or more	6 (4%)
	About once a week	86 (53%)
	Less than once a week	25 (15%)
	Never	46 (28%)
9.9	Does the library have a wide enough range of materials to meet your needs?	
	Yes	55 (35%)
	No	58 (36%)
	Don't use the library	46 (29%)

Applications, complaints and legal rights

10.1	Is it easy for you to make an application?	
	Yes	116 (71%)
	No	41 (25%)
	Don't know	6 (4%)

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?	64 (44%)	75 (51%)	7 (5%)	
	Are applications usually dealt with within 7 days?	31 (21%)	107 (74%)	7 (5%)	
10.3	Is it easy for you to make a complaint?				
	Yes			97 (60%)	
	No			39 (24%)	
	Don't know			25 (16%)	
10.4	If you have made any complaints here, please answer the questions below:	Yes	No	Not made any complaints	
	Are complaints usually dealt with fairly?	35 (23%)	81 (53%)	37 (24%)	
	Are complaints usually dealt with within 7 days?	21 (15%)	85 (59%)	37 (26%)	
10.5	Have you ever been prevented from making a complaint here when you wanted to?				
	Yes			41 (26%)	
	No			93 (58%)	
	Not wanted to make a complaint			25 (16%)	
10.6	In this prison, is it easy or difficult for you to...	Easy	Difficult	Don't know	Don't need this
	Communicate with your solicitor or legal representative?	47 (29%)	56 (35%)	25 (16%)	33 (20%)
	Attend legal visits?	53 (35%)	32 (21%)	31 (21%)	35 (23%)
	Get bail information?	25 (17%)	38 (26%)	38 (26%)	44 (30%)
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?				
	Yes				87 (53%)
	No				47 (29%)
	Not had any legal letters				29 (18%)

Health care

11.1	How easy or difficult is it to see the following people?	Very easy	Quite easy	Quite difficult	Very difficult	Don't know
	Doctor	6 (4%)	31 (20%)	55 (35%)	53 (34%)	13 (8%)
	Nurse	15 (10%)	49 (32%)	43 (28%)	33 (22%)	12 (8%)
	Dentist	4 (3%)	9 (6%)	28 (19%)	93 (62%)	17 (11%)
	Mental health workers	10 (6%)	27 (17%)	35 (23%)	50 (32%)	33 (21%)

11.2	What do you think of the quality of the health service from the following people?					
		Very good	Quite good	Quite bad	Very bad	Don't know
	Doctor	15 (10%)	53 (35%)	34 (22%)	26 (17%)	25 (16%)
	Nurse	19 (13%)	65 (43%)	22 (15%)	24 (16%)	21 (14%)
	Dentist	9 (6%)	21 (14%)	25 (17%)	42 (28%)	51 (34%)
	Mental health workers	9 (6%)	36 (25%)	27 (19%)	23 (16%)	50 (34%)
11.3	Do you have any mental health problems?					
	Yes					99 (63%)
	No					59 (37%)
11.4	Have you been helped with your mental health problems in this prison?					
	Yes					29 (18%)
	No					69 (44%)
	Don't have any mental health problems					59 (38%)
11.5	What do you think of the overall quality of the health services here?					
	Very good					9 (6%)
	Quite good					47 (30%)
	Quite bad					52 (33%)
	Very bad					35 (22%)
	Don't know					14 (9%)
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					64 (40%)
	No					95 (60%)
12.2	If you have a disability, are you getting the support you need?					
	Yes					15 (10%)
	No					45 (29%)
	Don't have a disability					95 (61%)
12.3	Have you been on an ACCT in this prison?					
	Yes					35 (22%)
	No					122 (78%)
12.4	If you have been on an ACCT in this prison, did you feel cared for by staff?					
	Yes					14 (9%)
	No					21 (13%)
	Have not been on an ACCT in this prison					122 (78%)
12.5	How easy or difficult is it for you to speak to a Listener, if you need to?					
	Very easy					29 (18%)
	Quite easy					33 (21%)
	Quite difficult					9 (6%)
	Very difficult					10 (6%)
	Don't know					71 (45%)
	No Listeners at this prison					6 (4%)

Alcohol and drugs

13.1	Did you have an alcohol problem when you came into this prison?	
	Yes	36 (23%)
	No	124 (78%)
13.2	Have you been helped with your alcohol problem in this prison?	
	Yes	19 (12%)
	No	16 (10%)
	Did not / do not have an alcohol problem	124 (78%)
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	66 (41%)
	No	94 (59%)
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	37 (23%)
	No	123 (77%)
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	25 (16%)
	No	133 (84%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	38 (25%)
	No	37 (24%)
	Did not / do not have a drug problem	79 (51%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy	78 (49%)
	Quite easy	32 (20%)
	Quite difficult	6 (4%)
	Very difficult	3 (2%)
	Don't know	41 (26%)
13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy	31 (19%)
	Quite easy	48 (30%)
	Quite difficult	15 (9%)
	Very difficult	4 (3%)
	Don't know	62 (39%)

Safety

14.1	Have you ever felt unsafe here?	
	Yes	78 (48%)
	No	86 (52%)
14.2	Do you feel unsafe now?	
	Yes	39 (24%)
	No	121 (76%)

14.3	Have you experienced any of the following types of bullying / victimisation from other prisoners here?	
	Verbal abuse	52 (35%)
	Threats or intimidation	55 (37%)
	Physical assault	38 (26%)
	Sexual assault	3 (2%)
	Theft of canteen or property	37 (25%)
	Other bullying / victimisation	34 (23%)
	Not experienced any of these from prisoners here	78 (53%)
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	
	Yes	48 (31%)
	No	109 (69%)
14.5	Have you experienced any of the following types of bullying / victimisation from staff here?	
	Verbal abuse	48 (31%)
	Threats or intimidation	40 (26%)
	Physical assault	22 (14%)
	Sexual assault	2 (1%)
	Theft of canteen or property	18 (12%)
	Other bullying / victimisation	25 (16%)
	Not experienced any of these from staff here	85 (56%)
14.6	If you were being bullied / victimised by staff here, would you report it?	
	Yes	64 (42%)
	No	90 (58%)
Behaviour management		
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	
	Yes	71 (45%)
	No	71 (45%)
	Don't know what the incentives / rewards are	17 (11%)
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	
	Yes	75 (46%)
	No	60 (37%)
	Don't know	17 (10%)
	Don't know what this is	10 (6%)
15.3	Have you been physically restrained by staff in this prison in the last 6 months?	
	Yes	29 (18%)
	No	135 (82%)
15.4	If you have been restrained by staff in this prison in the last 6 months, did anyone come and talk to you about it afterwards?	
	Yes	4 (2%)
	No	22 (13%)
	Don't remember	2 (1%)
	Not been restrained here in last 6 months	135 (83%)

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

Yes	17 (11%)
No	144 (89%)

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

	Yes	No
Were you treated well by segregation staff?	10 (63%)	6 (38%)
Could you shower every day?	9 (69%)	4 (31%)
Could you go outside for exercise every day?	9 (64%)	5 (36%)
Could you use the phone every day (if you had credit)?	8 (57%)	6 (43%)

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	97 (61%)	22 (14%)	39 (25%)	1 (1%)
Vocational or skills training	59 (40%)	43 (29%)	44 (30%)	2 (1%)
Prison job	84 (56%)	43 (29%)	22 (15%)	1 (1%)
Voluntary work outside of the prison	10 (7%)	35 (24%)	64 (44%)	36 (25%)
Paid work outside of the prison	8 (6%)	33 (23%)	62 (43%)	41 (28%)

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	60 (43%)	44 (32%)	35 (25%)
Vocational or skills training	52 (40%)	41 (31%)	38 (29%)
Prison job	49 (35%)	75 (53%)	17 (12%)
Voluntary work outside of the prison	22 (17%)	27 (21%)	81 (62%)
Paid work outside of the prison	26 (20%)	22 (17%)	82 (63%)

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

Yes	85 (54%)
No	64 (41%)
Not applicable (e.g. if you are retired, sick or on remand)	7 (4%)

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

Yes	76 (48%)
No	82 (52%)

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

Yes	63 (83%)
No	5 (7%)
Don't know what my objectives or targets are	8 (11%)

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

Yes	34 (46%)
No	32 (43%)
Don't know what my objectives or targets are	8 (11%)

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	31 (44%)	9 (13%)	31 (44%)
Other programmes	22 (35%)	9 (15%)	31 (50%)
One to one work	22 (35%)	7 (11%)	33 (53%)
Being on a specialist unit	6 (11%)	7 (12%)	44 (77%)
ROTL - day or overnight release	5 (8%)	3 (5%)	52 (87%)

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

Yes	49 (31%)
No	98 (62%)
Don't know	11 (7%)

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

Very near	3 (6%)
Quite near	25 (51%)
Quite far	16 (33%)
Very far	5 (10%)

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

Yes	29 (59%)
No	20 (41%)

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	6 (13%)	25 (54%)	15 (33%)
Getting employment	5 (12%)	23 (53%)	15 (35%)
Setting up education or training	1 (2%)	15 (34%)	28 (64%)
Arranging benefits	12 (26%)	23 (50%)	11 (24%)
Sorting out finances	2 (5%)	16 (39%)	23 (56%)
Support for drug or alcohol problems	8 (18%)	15 (33%)	22 (49%)
Health / mental health support	4 (9%)	25 (56%)	16 (36%)
Social care support	5 (12%)	12 (28%)	26 (60%)
Getting back in touch with family or friends	2 (5%)	15 (36%)	25 (60%)

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

Yes	81 (51%)
No	78 (49%)

19.2 Are you a UK / British citizen?

Yes	156 (99%)
No	2 (1%)

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

Yes	8 (5%)
No	150 (95%)

19.4	Have you ever been in the armed services (e.g. army, navy, air force)?	
	Yes	5 (3%)
	No	154 (97%)
19.5	What is your gender?	
	Male	157 (99%)
	Female	0 (0%)
	Non-binary	1 (1%)
	Other	1 (1%)
19.6	How would you describe your sexual orientation?	
	Straight / heterosexual	154 (97%)
	Gay / lesbian / homosexual	1 (1%)
	Bisexual	2 (1%)
	Other	1 (1%)
19.7	Do you identify as transgender or transsexual?	
	Yes	2 (1%)
	No	154 (99%)

Final questions about this prison

20.1	Do you think your experiences in this prison have made you more or less likely to offend in the future?	
	More likely to offend	17 (11%)
	Less likely to offend	78 (49%)
	Made no difference	64 (40%)

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

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

Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
45	126	35	128

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION		Black and minority ethnic	White	Muslim	Non-Muslim
1.2	Are you under 25 years of age?	16%	15%	17%	14%
	Are you 50 years of age or older?	4%	7%	6%	7%
1.3	Are you from a minority ethnic group?			74%	14%
7.1	Are you Muslim?	61%	8%		
11.3	Do you have any mental health problems?	52%	66%	61%	62%
12.1	Do you consider yourself to have a disability?	43%	39%	36%	40%
19.2	Are you a foreign national?	2%	1%	3%	0%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	7%	0%	5%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	64%	87%	66%	87%
2.4	Overall, were you treated very / quite well in reception?	70%	91%	77%	90%
2.5	When you first arrived, did you have any problems?	75%	73%	77%	71%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	27%	30%	24%	29%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	72%	88%	66%	91%
3.5	Have you had an induction at this prison?	91%	93%	86%	94%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	49%	63%	43%	62%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	19%	29%	17%	28%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	77%	65%	66%	70%
	- Can you shower every day?	91%	95%	89%	95%
	- Do you have clean sheets every week?	44%	48%	31%	54%
	- Do you get cell cleaning materials every week?	37%	58%	26%	59%
	- Is it normally quiet enough for you to relax or sleep at night?	47%	63%	43%	65%
	- Can you get your stored property if you need it?	15%	21%	9%	23%

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
45	126	35	128

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	28%	30%	31%	29%
5.3	Does the shop / canteen sell the things that you need?	54%	76%	58%	74%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	69%	83%	71%	82%
6.2	Are there any staff here you could turn to if you had a problem?	73%	75%	70%	77%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	33%	37%	29%	38%
6.6	Do you feel that you are treated as an individual in this prison?	45%	46%	44%	46%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	65%	66%	67%	70%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	66%	66%	74%	64%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	23%	35%	26%	35%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	67%	59%	62%	61%
8.3	Are you able to use a phone every day (if you have credit)?	90%	96%	94%	95%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	52%	68%	52%	66%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	12%	21%	18%	18%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	5%	8%	3%	8%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	42%	50%	35%	52%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	55%	77%	50%	79%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	29%	53%	28%	53%
10.3	Is it easy for you to make a complaint?	54%	62%	62%	61%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	24%	34%	21%	35%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	38%	27%	43%	27%

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Number of completed questionnaires returned

	Black and minority ethnic	White	Muslim	Non-Muslim
	45	126	35	128

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	19%	26%	15%	26%
	- Nurse?	39%	43%	35%	45%
	- Dentist?	7%	9%	3%	10%
	- Mental health workers?	19%	26%	18%	26%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	20%	31%	20%	33%
11.5	Do you think the overall quality of the health services here is very / quite good?	32%	37%	30%	36%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	25%	24%	33%	25%
SAFETY					
14.1	Have you ever felt unsafe here?	52%	45%	59%	41%
14.2	Do you feel unsafe now?	33%	20%	29%	22%
14.3	Not experienced bullying / victimisation by other prisoners	45%	55%	44%	57%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	35%	30%	32%	31%
14.5	Not experienced bullying / victimisation by members of staff	51%	56%	53%	59%
14.6	If you were being bullied / victimised by staff here, would you report it?	47%	41%	38%	45%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	43%	44%	35%	48%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	42%	47%	35%	52%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	19%	17%	18%	16%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	12%	10%	21%	7%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	46%	62%	45%	60%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	33%	52%	36%	53%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	29%	49%	46%	47%
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?	33%	67%	54%	61%
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?	44%	51%	41%	53%

HMP Wealstun 2019

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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

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

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

Number of completed questionnaires returned

Mental health problems	No mental health problems	Have a disability	Do not have a disability
99	59	64	95

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	12%	19%	13%	17%
	Are you 50 years of age or older?	4%	12%	5%	8%
1.3	Are you from a minority ethnic group?	23%	34%	29%	26%
7.1	Are you Muslim?	21%	22%	20%	23%
11.3	Do you have any mental health problems?			92%	42%
12.1	Do you consider yourself to have a disability?	60%	9%		
19.2	Are you a foreign national?	1%	2%	2%	1%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	5%	5%	5%	4%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	80%	86%	73%	89%
2.4	Overall, were you treated very / quite well in reception?	79%	95%	71%	95%
2.5	When you first arrived, did you have any problems?	83%	55%	87%	62%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	27%	24%	26%	26%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	80%	93%	79%	89%
3.5	Have you had an induction at this prison?	90%	95%	91%	93%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	53%	67%	54%	63%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	20%	35%	19%	31%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	59%	83%	59%	74%
	- Can you shower every day?	93%	97%	92%	96%
	- Do you have clean sheets every week?	45%	53%	45%	51%
	- Do you get cell cleaning materials every week?	45%	63%	53%	50%
	- Is it normally quiet enough for you to relax or sleep at night?	50%	72%	47%	67%
	- Can you get your stored property if you need it?	15%	23%	15%	21%

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Number of completed questionnaires returned

Mental health problems	No mental health problems	Have a disability	Do not have a disability
99	59	64	95

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	27%	30%	27%	30%
5.3	Does the shop / canteen sell the things that you need?	67%	72%	59%	76%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	76%	86%	75%	84%
6.2	Are there any staff here you could turn to if you had a problem?	73%	76%	78%	72%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	38%	31%	40%	33%
6.6	Do you feel that you are treated as an individual in this prison?	37%	55%	40%	48%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	63%	72%	55%	75%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	67%	63%	63%	67%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	29%	34%	28%	34%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	67%	55%	67%	58%
8.3	Are you able to use a phone every day (if you have credit)?	94%	95%	92%	96%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	61%	67%	65%	65%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	26%	6%	26%	14%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	9%	4%	11%	5%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	44%	59%	48%	50%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	65%	80%	66%	75%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	38%	59%	39%	52%
10.3	Is it easy for you to make a complaint?	56%	66%	51%	67%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	24%	43%	27%	34%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	33%	22%	31%	27%

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Number of completed questionnaires returned

	Mental health problems	No mental health problems		Have a disability	Do not have a disability
	99	59		64	95

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	23%	25%	21%	26%
	- Nurse?	40%	42%	41%	42%
	- Dentist?	8%	9%	10%	8%
	- Mental health workers?	24%	21%	29%	20%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	28%		32%	27%
11.5	Do you think the overall quality of the health services here is very / quite good?	28%	47%	30%	40%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	24%	40%	25%	
SAFETY					
14.1	Have you ever felt unsafe here?	57%	26%	58%	37%
14.2	Do you feel unsafe now?	29%	12%	34%	16%
14.3	Not experienced bullying / victimisation by other prisoners	41%	73%	41%	62%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	33%	26%	39%	24%
14.5	Not experienced bullying / victimisation by members of staff	40%	81%	38%	69%
14.6	If you were being bullied / victimised by staff here, would you report it?	40%	46%	38%	47%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	41%	48%	44%	44%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	40%	57%	39%	52%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	22%	9%	25%	11%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	11%	9%	14%	8%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	51%	64%	55%	58%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	46%	48%	52%	46%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	41%	50%	47%	45%
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?	58%	57%	59%	59%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	42%	60%	44%	53%

HMP Wealstun 2019

Comparison of survey responses from different residential locations

In this table responses from old accommodation (A and B wings) are compared with those from rest of the establishment.

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Number of completed questionnaires returned

Old accommodation (A and B wings)	Rest of the establishment
41	133

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	0%
	Are you 25 years of age or younger?	15%	15%
	Are you 50 years of age or older?	3%	8%
	Are you 70 years of age or older?	0%	0%
1.3	Are you from a minority ethnic group?	28%	25%
1.4	Have you been in this prison for less than 6 months?	31%	44%
1.5	Are you currently serving a sentence?	100%	100%
	Are you on recall?	18%	16%
1.6	Is your sentence less than 12 months?	15%	9%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	1%
7.1	Are you Muslim?	26%	20%
11.3	Do you have any mental health problems?	56%	65%
12.1	Do you consider yourself to have a disability?	40%	40%
19.1	Do you have any children under the age of 18?	60%	49%
19.2	Are you a foreign national?	0%	2%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	6%	4%
19.4	Have you ever been in the armed services?	3%	3%
19.5	Is your gender female or non-binary?	0%	2%
19.6	Are you homosexual, bisexual or other sexual orientation?	3%	3%
19.7	Do you identify as transgender or transsexual?	3%	1%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	13%	14%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	33%	31%
2.3	When you were searched in reception, was this done in a respectful way?	77%	81%
2.4	Overall, were you treated very / quite well in reception?	75%	88%

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Old accommodation (A and B wings)	Rest of the establishment
41	133

Number of completed questionnaires returned

2.5	When you first arrived, did you have any problems?	78%	72%
2.5	Did you have problems with:		
	- Getting phone numbers?	28%	17%
	- Contacting family?	30%	14%
	- Arranging care for children or other dependents?	3%	3%
	- Contacting employers?	3%	0%
	- Money worries?	18%	17%
	- Housing worries?	23%	18%
	- Feeling depressed?	38%	37%
	- Feeling suicidal?	23%	14%
	- Other mental health problems?	23%	30%
	- Physical health problems?	18%	19%
	- Drugs or alcohol (e.g. withdrawal)?	23%	17%
	- Getting medication?	23%	24%
	- Needing protection from other prisoners?	10%	2%
	- Lost or delayed property?	23%	23%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	45%	23%
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	63%	87%
	- Toiletries / other basic items?	38%	43%
	- A shower?	40%	57%
	- A free phone call?	45%	36%
	- Something to eat?	75%	73%
	- The chance to see someone from health care?	50%	52%
	- The chance to talk to a Listener or Samaritans?	25%	28%
	- Support from another prisoner (e.g. Insider or buddy)?	23%	26%
	- None of these?	13%	6%
3.2	On your first night in this prison, was your cell very / quite clean?	46%	62%
3.3	Did you feel safe on your first night here?	73%	87%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	13%	34%
	- Free PIN phone credit?	54%	61%
	- Numbers put on your PIN phone?	60%	57%
3.5	Have you had an induction at this prison?	95%	92%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	51%	62%

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Number of completed questionnaires returned

Old accommodation (A and B wings)	41	Rest of the establishment	133
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ON THE WING			
4.1	Are you in a cell on your own?	82%	96%
4.2	Is your cell call bell normally answered within 5 minutes?	26%	26%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	53%	73%
	- Can you shower every day?	92%	94%
	- Do you have clean sheets every week?	47%	49%
	- Do you get cell cleaning materials every week?	35%	56%
	- Is it normally quiet enough for you to relax or sleep at night?	44%	63%
	- Can you get your stored property if you need it?	11%	22%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	40%	63%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	33%	38%
5.2	Do you get enough to eat at meal-times always / most of the time?	38%	27%
5.3	Does the shop / canteen sell the things that you need?	60%	72%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	74%	81%
6.2	Are there any staff here you could turn to if you had a problem?	84%	72%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	34%	36%
6.4	Do you have a personal officer?	95%	87%
	<i>For those who have a personal officer:</i>		
6.4	Is your personal or named officer very / quite helpful?	63%	56%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	16%	5%
6.6	Do you feel that you are treated as an individual in this prison?	56%	42%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	51%	55%
	If so, do things sometimes change?	26%	24%
FAITH			
7.1	Do you have a religion?	50%	61%
	<i>For those who have a religion:</i>		
7.2	Are your religious beliefs respected here?	72%	65%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	77%	64%
7.4	Are you able to attend religious services, if you want to?	89%	90%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	34%	32%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	70%	59%
8.3	Are you able to use a phone every day (if you have credit)?	97%	94%
8.4	Is it very / quite easy for your family and friends to get here?	40%	41%
8.5	Do you get visits from family/friends once a week or more?	36%	12%
	<i>For those who get visits:</i>		
8.6	Do visits usually start and finish on time?	24%	27%
8.7	Are your visitors usually treated respectfully by staff?	59%	64%

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	Old accommodation (A and B wings)	Rest of the establishment
Number of completed questionnaires returned	41	133

TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	92%	88%
<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?	47%	59%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	8%	23%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	8%	7%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	11%	13%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	0%	4%
9.4	Do you have time to do domestics more than 5 days in a typical week?	53%	59%
9.5	Do you get association more than 5 days in a typical week, if you want it?	60%	72%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	56%	74%
9.7	Do you typically go to the gym twice a week or more?	53%	48%
9.8	Do you typically go to the library once a week or more?	53%	58%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	55%	48%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	61%	74%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	52%	44%
	Are applications usually dealt with within 7 days?	14%	23%
10.3	Is it easy for you to make a complaint?	54%	62%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	31%	30%
	Are complaints usually dealt with within 7 days?	18%	21%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	41%	28%

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	Old accommodation (A and B wings)	Rest of the establishment
Number of completed questionnaires returned	41	133

<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	30%	39%
	Attend legal visits?	36%	49%
	Get bail information?	21%	26%
<i>For those who have had legal letters:</i>			
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	63%	66%
HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	25%	23%
	- Nurse?	38%	42%
	- Dentist?	3%	10%
	- Mental health workers?	29%	22%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	53%	43%
	- Nurse?	53%	57%
	- Dentist?	21%	21%
	- Mental health workers?	29%	31%
11.3	Do you have any mental health problems?	56%	65%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	32%	28%
11.5	Do you think the overall quality of the health services here is very / quite good?	46%	33%
OTHER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	40%	40%
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	29%	22%
12.3	Have you been on an ACCT in this prison?	17%	23%
<i>For those who have been on an ACCT:</i>			
12.4	Did you feel cared for by staff?	50%	37%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	41%	39%
ALCOHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	28%	21%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	30%	64%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	39%	43%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	22%	22%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	14%	16%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	40%	53%
13.7	Is it very / quite easy to get illicit drugs in this prison?	67%	69%
13.8	Is it very / quite easy to get alcohol in this prison?	44%	51%

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	Old accommodation (A and B wings)	Rest of the establishment
Number of completed questionnaires returned	41	133

SAFETY			
14.1	Have you ever felt unsafe here?	50%	47%
14.2	Do you feel unsafe now?	25%	25%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	32%	36%
	- Threats or intimidation?	35%	38%
	- Physical assault?	29%	24%
	- Sexual assault?	3%	2%
	- Theft of canteen or property?	21%	27%
	- Other bullying / victimisation?	24%	23%
	- Not experienced any of these from prisoners here	59%	51%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	27%	32%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	22%	34%
	- Threats or intimidation?	25%	26%
	- Physical assault?	11%	15%
	- Sexual assault?	0%	2%
	- Theft of canteen or property?	8%	13%
	- Other bullying / victimisation?	11%	18%
	- Not experienced any of these from staff here	67%	52%
14.6	If you were being bullied / victimised by staff here, would you report it?	46%	41%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	54%	42%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	46%	46%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	19%	17%
	<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?	17%	14%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	3%	11%
	<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>		
15.6	Were you treated well by segregation staff?	0%	62%
	Could you shower every day?	0%	70%
	Could you go outside for exercise every day?	0%	64%
	Could you use the phone every day (if you had credit)?	0%	55%

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Number of completed questionnaires returned

Old accommodation (A and B wings)	Rest of the establishment
41	133

EDUCATION, SKILLS AND WORK		
16.1	In this prison, is it easy to get into the following activities:	
	- Education?	53% 65%
	- Vocational or skills training?	32% 43%
	- Prison job?	53% 58%
	- Voluntary work outside of the prison?	6% 7%
	- Paid work outside of the prison?	3% 6%
16.2	In this prison, have you done the following activities:	
	- Education?	76% 76%
	- Vocational or skills training?	69% 73%
	- Prison job?	81% 92%
	- Voluntary work outside of the prison?	38% 38%
	- Paid work outside of the prison?	31% 39%
<i>For those who have done the following activities, do you think they will help you on release:</i>		
	- Education?	56% 58%
	- Vocational or skills training?	50% 58%
	- Prison job?	32% 41%
	- Voluntary work outside of the prison?	55% 42%
	- Paid work outside of the prison?	78% 49%
16.3	Do staff encourage you to attend education, training or work?	63% 57%
PLANNING AND PROGRESSION		
17.1	Do you have a custody plan?	56% 47%
<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?	85% 82%
17.3	Are staff helping you to achieve your objectives or targets?	55% 43%
17.4	In this prison, have you done:	
	- Offending behaviour programmes?	79% 48%
	- Other programmes?	67% 45%
	- One to one work?	53% 44%
	- Been on a specialist unit?	33% 19%
	- ROTL - day or overnight release?	13% 14%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>		
	- Offending behaviour programmes?	87% 72%
	- Other programmes?	80% 67%
	- One to one work?	78% 75%
	- Being on a specialist unit?	80% 25%
	- ROTL - day or overnight release?	100% 50%

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Old accommodation (A and B wings)	Rest of the establishment
41	133

Number of completed questionnaires returned

PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	42%	28%
<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?	60%	58%
18.3	Is anybody helping you to prepare for your release?	67%	58%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	50%	76%
	- Getting employment?	50%	73%
	- Setting up education or training?	33%	39%
	- Arranging benefits?	71%	81%
	- Sorting out finances?	42%	46%
	- Support for drug or alcohol problems?	62%	48%
	- Health / mental Health support?	58%	69%
	- Social care support?	42%	40%
	- Getting back in touch with family or friends?	42%	41%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	17%	20%
	- Getting employment?	33%	14%
	- Setting up education or training?	0%	8%
	- Arranging benefits?	40%	32%
	- Sorting out finances?	20%	8%
	- Support for drug or alcohol problems?	38%	33%
	- Health / mental Health support?	14%	14%
	- Social care support?	20%	33%
	- Getting back in touch with family or friends?	20%	8%
FINAL QUESTION ABOUT THIS PRISON			
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	47%	50%

HMP Wealstun 2019

Survey responses compared with those from other HMIP surveys of Category C training prisons and with those from the previous survey

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

- Summary statistics from surveys of Category C training prisons conducted since the introduction of the new questionnaire in September 2017 (25 prisons). Please note that this does not include all Category C training prisons.
- Summary statistics from HMP Wealstun in 2015. 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			HMP Wealstun 2019	All other Category C training prisons surveyed since September 2017	HMP Wealstun 2019	HMP Wealstun 2015
1.2	Are you under 21 years of age?	<i>n=173</i>	0%	6%	0%	1%
	Are you 25 years of age or younger?	<i>n=173</i>	16%	26%	16%	
	Are you 50 years of age or older?	<i>n=173</i>	6%	12%	6%	4%
	Are you 70 years of age or older?	<i>n=173</i>	0%	1%	0%	0%
1.3	Are you from a minority ethnic group?	<i>n=171</i>	26%	32%	26%	28%
1.4	Have you been in this prison for less than 6 months?	<i>n=168</i>	41%	35%	41%	
1.5	Are you currently serving a sentence?	<i>n=173</i>	100%	100%	100%	100%
	Are you on recall?	<i>n=173</i>	16%	9%	16%	9%
1.6	Is your sentence less than 12 months?	<i>n=172</i>	11%	8%	11%	4%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n=172</i>	1%	3%	1%	4%
7.1	Are you Muslim?	<i>n=163</i>	22%	18%	22%	18%
11.3	Do you have any mental health problems?	<i>n=158</i>	63%	44%	63%	
12.1	Do you consider yourself to have a disability?	<i>n=159</i>	40%	33%	40%	14%
19.1	Do you have any children under the age of 18?	<i>n=159</i>	51%	50%	51%	53%
19.2	Are you a foreign national?	<i>n=158</i>	1%	9%	1%	7%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n=158</i>	5%	5%	5%	4%
19.4	Have you ever been in the armed services?	<i>n=159</i>	3%	6%	3%	3%
19.5	Is your gender female or non-binary?	<i>n=159</i>	1%	1%	1%	
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n=158</i>	3%	4%	3%	2%
19.7	Do you identify as transgender or transsexual?	<i>n=156</i>	1%	2%	1%	
ARRIVAL AND RECEPTION						
2.1	Were you given up-to-date information about this prison before you came here?	<i>n=172</i>	13%	16%	13%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n=171</i>	32%	47%	32%	72%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n=170</i>	81%	83%	81%	86%
2.4	Overall, were you treated very / quite well in reception?	<i>n=168</i>	85%	86%	85%	

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2.5	When you first arrived, did you have any problems?	<i>n=169</i>	73%	72%	73%	53%
2.5	Did you have problems with:					
	- Getting phone numbers?	<i>n=169</i>	20%	26%	20%	10%
	- Contacting family?	<i>n=169</i>	18%	26%	18%	8%
	- Arranging care for children or other dependents?	<i>n=169</i>	3%	2%	3%	
	- Contacting employers?	<i>n=169</i>	1%	2%	1%	0%
	- Money worries?	<i>n=169</i>	17%	17%	17%	9%
	- Housing worries?	<i>n=169</i>	19%	13%	19%	12%
	- Feeling depressed?	<i>n=169</i>	37%	29%	37%	
	- Feeling suicidal?	<i>n=169</i>	16%	9%	16%	
	- Other mental health problems?	<i>n=169</i>	28%	20%	28%	
	- Physical health problems?	<i>n=169</i>	18%	13%	18%	8%
	- Drugs or alcohol (e.g. withdrawal)?	<i>n=169</i>	18%	11%	18%	
	- Getting medication?	<i>n=169</i>	23%	20%	23%	
	- Needing protection from other prisoners?	<i>n=169</i>	4%	6%	4%	1%
	- Lost or delayed property?	<i>n=169</i>	23%	23%	23%	13%
<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=120</i>	28%	32%	28%	50%
FIRST NIGHT AND INDUCTION						
3.1	Before you were locked up on your first night, were you offered:					
	- Tobacco or nicotine replacement?	<i>n=168</i>	80%	66%	80%	86%
	- Toiletries / other basic items?	<i>n=168</i>	42%	52%	42%	56%
	- A shower?	<i>n=168</i>	54%	44%	54%	50%
	- A free phone call?	<i>n=168</i>	39%	44%	39%	39%
	- Something to eat?	<i>n=168</i>	74%	76%	74%	61%
	- The chance to see someone from health care?	<i>n=168</i>	52%	60%	52%	75%
	- The chance to talk to a Listener or Samaritans?	<i>n=168</i>	27%	27%	27%	38%
	- Support from another prisoner (e.g. Insider or buddy)?	<i>n=168</i>	25%	23%	25%	
	- None of these?	<i>n=168</i>	7%	7%	7%	
3.2	On your first night in this prison, was your cell very / quite clean?	<i>n=166</i>	58%	41%	58%	
3.3	Did you feel safe on your first night here?	<i>n=168</i>	84%	74%	84%	89%
3.4	In your first few days here, did you get:					
	- Access to the prison shop / canteen?	<i>n=161</i>	29%	42%	29%	32%
	- Free PIN phone credit?	<i>n=158</i>	60%	48%	60%	
	- Numbers put on your PIN phone?	<i>n=153</i>	58%	48%	58%	
3.5	Have you had an induction at this prison?	<i>n=168</i>	92%	95%	92%	91%
<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=155</i>	59%	56%	59%	

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ON THE WING						
4.1	Are you in a cell on your own?	<i>n=169</i>	93%	63%	93%	
4.2	Is your cell call bell normally answered within 5 minutes?	<i>n=169</i>	26%	31%	26%	40%
4.3	On the wing or houseblock you currently live on:					
	- Do you normally have enough clean, suitable clothes for the week?	<i>n=165</i>	68%	69%	68%	76%
	- Can you shower every day?	<i>n=165</i>	94%	89%	94%	96%
	- Do you have clean sheets every week?	<i>n=161</i>	48%	66%	48%	71%
	- Do you get cell cleaning materials every week?	<i>n=163</i>	52%	60%	52%	78%
	- Is it normally quiet enough for you to relax or sleep at night?	<i>n=164</i>	59%	68%	59%	75%
	- Can you get your stored property if you need it?	<i>n=159</i>	19%	25%	19%	23%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	<i>n=160</i>	57%	61%	57%	
FOOD AND CANTEEN						
5.1	Is the quality of the food in this prison very / quite good?	<i>n=163</i>	37%	42%	37%	
5.2	Do you get enough to eat at meal-times always / most of the time?	<i>n=166</i>	30%	36%	30%	
5.3	Does the shop / canteen sell the things that you need?	<i>n=160</i>	70%	61%	70%	62%
RELATIONSHIPS WITH STAFF						
6.1	Do most staff here treat you with respect?	<i>n=164</i>	79%	69%	79%	89%
6.2	Are there any staff here you could turn to if you had a problem?	<i>n=162</i>	75%	69%	75%	83%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<i>n=166</i>	36%	32%	36%	40%
6.4	Do you have a personal officer?	<i>n=161</i>	88%	83%	88%	
<i>For those who have a personal officer:</i>						
6.4	Is your personal or named officer very / quite helpful?	<i>n=142</i>	57%	47%	57%	
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	<i>n=165</i>	8%	12%	8%	
6.6	Do you feel that you are treated as an individual in this prison?	<i>n=165</i>	46%	43%	46%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	<i>n=166</i>	55%	52%	55%	
	If so, do things sometimes change?	<i>n=91</i>	25%	33%	25%	
FAITH						
7.1	Do you have a religion?	<i>n=163</i>	59%	68%	59%	70%
<i>For those who have a religion:</i>						
7.2	Are your religious beliefs respected here?	<i>n=99</i>	66%	70%	66%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	<i>n=97</i>	66%	69%	66%	
7.4	Are you able to attend religious services, if you want to?	<i>n=100</i>	89%	88%	89%	

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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=164	32%	28%	32%	
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	n=165	61%	57%	61%	31%
8.3	Are you able to use a phone every day (if you have credit)?	n=164	95%	88%	95%	
8.4	Is it very / quite easy for your family and friends to get here?	n=164	40%	35%	40%	
8.5	Do you get visits from family/friends once a week or more?	n=160	17%	17%	17%	
<i>For those who get visits:</i>						
8.6	Do visits usually start and finish on time?	n=116	27%	50%	27%	
8.7	Are your visitors usually treated respectfully by staff?	n=113	64%	75%	64%	
TIME OUT OF CELL						
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=163	89%	91%	89%	
<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=145	56%	58%	56%	
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	n=161	19%	16%	19%	7%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	n=161	7%	9%	7%	11%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=165	12%	22%	12%	
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=165	3%	3%	3%	
9.4	Do you have time to do domestics more than 5 days in a typical week?	n=163	58%	58%	58%	
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=162	70%	66%	70%	
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=165	70%	67%	70%	
9.7	Do you typically go to the gym twice a week or more?	n=164	49%	53%	49%	
9.8	Do you typically go to the library once a week or more?	n=163	56%	48%	56%	36%
<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=113	49%	56%	49%	58%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS						
10.1	Is it easy for you to make an application?	n=163	71%	74%	71%	86%
<i>For those who have made an application:</i>						
10.2	Are applications usually dealt with fairly?	n=139	46%	51%	46%	67%
	Are applications usually dealt with within 7 days?	n=138	23%	35%	23%	54%
10.3	Is it easy for you to make a complaint?	n=161	60%	63%	60%	61%
<i>For those who have made a complaint:</i>						
10.4	Are complaints usually dealt with fairly?	n=116	30%	32%	30%	44%
	Are complaints usually dealt with within 7 days?	n=106	20%	25%	20%	44%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=134	31%	27%	31%	

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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=128	37%	40%	37%
	Attend legal visits?	n=116	46%	49%	46%
	Get bail information?	n=101	25%	16%	25%
<i>For those who have had legal letters:</i>					
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=134	65%	58%	65%
HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	n=158	23%	31%	23%
	- Nurse?	n=152	42%	52%	42%
	- Dentist?	n=151	9%	15%	9%
	- Mental health workers?	n=155	24%	24%	24%
11.2	Do you think the quality of the health service is very / quite good from:				
	- Doctor?	n=153	44%	47%	44%
	- Nurse?	n=151	56%	57%	56%
	- Dentist?	n=148	20%	34%	20%
	- Mental health workers?	n=145	31%	29%	31%
11.3	Do you have any mental health problems?	n=158	63%	44%	63%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	n=98	30%	42%	30%
11.5	Do you think the overall quality of the health services here is very / quite good?	n=157	36%	43%	36%
OTHER SUPPORT NEEDS					
12.1	Do you consider yourself to have a disability?	n=159	40%	33%	40%
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	n=60	25%	31%	25%
12.3	Have you been on an ACCT in this prison?	n=157	22%	16%	22%
<i>For those who have been on an ACCT:</i>					
12.4	Did you feel cared for by staff?	n=35	40%	44%	40%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=158	39%	39%	39%
ALCOHOL AND DRUGS					
13.1	Did you have an alcohol problem when you came into this prison?	n=160	23%	14%	23%
<i>For those who had / have an alcohol problem:</i>					
13.2	Have you been helped with your alcohol problem in this prison?	n=35	54%	52%	54%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=160	41%	27%	41%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=160	23%	17%	23%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=158	16%	10%	16%
<i>For those who had / have a drug problem:</i>					
13.6	Have you been helped with your drug problem in this prison?	n=75	51%	48%	51%
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=160	69%	48%	69%
13.8	Is it very / quite easy to get alcohol in this prison?	n=160	49%	31%	49%

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SAFETY						
14.1	Have you ever felt unsafe here?	<i>n</i> =164	48%	46%	48%	26%
14.2	Do you feel unsafe now?	<i>n</i> =160	24%	22%	24%	10%
14.3	Have you experienced any of the following from other prisoners here:					
	- Verbal abuse?	<i>n</i> =148	35%	33%	35%	
	- Threats or intimidation?	<i>n</i> =148	37%	30%	37%	
	- Physical assault?	<i>n</i> =148	26%	17%	26%	
	- Sexual assault?	<i>n</i> =148	2%	2%	2%	
	- Theft of canteen or property?	<i>n</i> =148	25%	24%	25%	
	- Other bullying / victimisation?	<i>n</i> =148	23%	17%	23%	
	- Not experienced any of these from prisoners here	<i>n</i> =148	53%	55%	53%	
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<i>n</i> =157	31%	32%	31%	
14.5	Have you experienced any of the following from staff here:					
	- Verbal abuse?	<i>n</i> =153	31%	30%	31%	
	- Threats or intimidation?	<i>n</i> =153	26%	23%	26%	
	- Physical assault?	<i>n</i> =153	14%	10%	14%	
	- Sexual assault?	<i>n</i> =153	1%	2%	1%	
	- Theft of canteen or property?	<i>n</i> =153	12%	9%	12%	
	- Other bullying / victimisation?	<i>n</i> =153	16%	17%	16%	
	- Not experienced any of these from staff here	<i>n</i> =153	56%	58%	56%	
14.6	If you were being bullied / victimised by staff here, would you report it?	<i>n</i> =154	42%	48%	42%	
BEHAVIOUR MANAGEMENT						
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<i>n</i> =159	45%	41%	45%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<i>n</i> =162	46%	38%	46%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<i>n</i> =164	18%	13%	18%	9%
<i>For those who have been restrained in the last 6 months:</i>						
15.4	Did anyone come and talk to you about it afterwards?	<i>n</i> =28	14%	21%	14%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	<i>n</i> =161	11%	9%	11%	
<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>						
15.6	Were you treated well by segregation staff?	<i>n</i> =16	63%	61%	63%	
	Could you shower every day?	<i>n</i> =13	69%	77%	69%	
	Could you go outside for exercise every day?	<i>n</i> =14	64%	79%	64%	
	Could you use the phone every day (if you had credit)?	<i>n</i> =14	57%	66%	57%	

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EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	<i>n=159</i>	61%	62%	61%
	- Vocational or skills training?	<i>n=148</i>	40%	41%	40%
	- Prison job?	<i>n=150</i>	56%	48%	56%
	- Voluntary work outside of the prison?	<i>n=145</i>	7%	5%	7%
	- Paid work outside of the prison?	<i>n=144</i>	6%	4%	6%
16.2	In this prison, have you done the following activities:				
	- Education?	<i>n=139</i>	75%	80%	75%
	- Vocational or skills training?	<i>n=131</i>	71%	68%	71%
	- Prison job?	<i>n=141</i>	88%	81%	88%
	- Voluntary work outside of the prison?	<i>n=130</i>	38%	33%	38%
	- Paid work outside of the prison?	<i>n=130</i>	37%	33%	37%
<i>For those who have done the following activities, do you think they will help you on release:</i>					
	- Education?	<i>n=104</i>	58%	61%	58%
	- Vocational or skills training?	<i>n=93</i>	56%	67%	56%
	- Prison job?	<i>n=124</i>	40%	40%	40%
	- Voluntary work outside of the prison?	<i>n=49</i>	45%	54%	45%
	- Paid work outside of the prison?	<i>n=48</i>	54%	57%	54%
16.3	Do staff encourage you to attend education, training or work?		<i>n=149</i>	57%	61%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?		<i>n=158</i>	48%	58%
<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=76</i>	83%	84%
17.3	Are staff helping you to achieve your objectives or targets?		<i>n=74</i>	46%	46%
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	<i>n=71</i>	56%	50%	56%
	- Other programmes?	<i>n=62</i>	50%	44%	50%
	- One to one work?	<i>n=62</i>	47%	38%	47%
	- Been on a specialist unit?	<i>n=57</i>	23%	21%	23%
	- ROTL - day or overnight release?	<i>n=60</i>	13%	14%	13%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>					
	- Offending behaviour programmes?	<i>n=40</i>	78%	71%	78%
	- Other programmes?	<i>n=31</i>	71%	66%	71%
	- One to one work?	<i>n=29</i>	76%	66%	76%
	- Being on a specialist unit?	<i>n=13</i>	46%	48%	46%
	- ROTL - day or overnight release?	<i>n=8</i>	63%	39%	63%

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Number of completed questionnaires returned

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

HMP Wealstun 2019	All other Category C training prisons surveyed since September 2017	HMP Wealstun 2019	HMP Wealstun 2015
176	4,150	176	191

PREPARATION FOR RELEASE					
18.1	Do you expect to be released in the next 3 months?	<i>n=158</i>	31%	25%	31%
<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=49</i>	57%	40%	57%
18.3	Is anybody helping you to prepare for your release?	<i>n=49</i>	59%	58%	59%
18.4	Do you need help to sort out the following for when you are released:				
	- Finding accommodation?	<i>n=46</i>	67%	63%	67%
	- Getting employment?	<i>n=43</i>	65%	63%	65%
	- Setting up education or training?	<i>n=44</i>	36%	48%	36%
	- Arranging benefits?	<i>n=46</i>	76%	68%	76%
	- Sorting out finances?	<i>n=41</i>	44%	58%	44%
	- Support for drug or alcohol problems?	<i>n=45</i>	51%	43%	51%
	- Health / mental Health support?	<i>n=45</i>	64%	49%	64%
	- Social care support?	<i>n=43</i>	40%	36%	40%
	- Getting back in touch with family or friends?	<i>n=42</i>	41%	38%	41%
18.4	Are you getting help to sort out the following for when you are released, if you need it:				
	- Finding accommodation?	<i>n=31</i>	19%	38%	19%
	- Getting employment?	<i>n=28</i>	18%	24%	18%
	- Setting up education or training?	<i>n=16</i>	6%	25%	6%
	- Arranging benefits?	<i>n=35</i>	34%	29%	34%
	- Sorting out finances?	<i>n=18</i>	11%	25%	11%
	- Support for drug or alcohol problems?	<i>n=23</i>	35%	48%	35%
	- Health / mental Health support?	<i>n=29</i>	14%	30%	14%
	- Social care support?	<i>n=17</i>	29%	25%	29%
	- Getting back in touch with family or friends?	<i>n=17</i>	12%	31%	12%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	<i>n=159</i>	49%	50%	49%

HMP Wealstun 2019

Comparison of survey responses between sub-populations of prisoners

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

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Number of completed questionnaires returned

	25 and under	Over 25
	27	146

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION		
1.2	Are you under 21 years of age?	0%
	Are you 50 years of age or older?	8%
1.3	Are you from a minority ethnic group?	27% 26%
7.1	Are you Muslim?	25% 21%
11.3	Do you have any mental health problems?	52% 64%
12.1	Do you consider yourself to have a disability?	33% 41%
19.2	Are you a foreign national?	0% 2%
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?	77% 81%
2.4	Overall, were you treated very / quite well in reception?	73% 87%
2.5	When you first arrived, did you have any problems?	68% 74%
	<i>For those who had any problems when they first arrived:</i>	
2.6	Did staff help you to deal with these problems?	18% 30%
FIRST NIGHT AND INDUCTION		
3.3	Did you feel safe on your first night here?	80% 85%
3.5	Have you had an induction at this prison?	96% 92%
	<i>For those who have had an induction:</i>	
3.5	Did your induction cover everything you needed to know about this prison?	65% 59%
ON THE WING		
4.2	Is your cell call bell normally answered within 5 minutes?	16% 28%
4.3	On the wing or houseblock you currently live on:	
	- Do you normally have enough clean, suitable clothes for the week?	80% 66%
	- Can you shower every day?	92% 94%
	- Do you have clean sheets every week?	61% 45%
	- Do you get cell cleaning materials every week?	57% 51%
	- Is it normally quiet enough for you to relax or sleep at night?	75% 56%
	- Can you get your stored property if you need it?	35% 16%

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	25 and under	Over 25
Number of completed questionnaires returned	27	146

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	40%	28%
5.3	Does the shop / canteen sell the things that you need?	63%	72%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	60%	83%
6.2	Are there any staff here you could turn to if you had a problem?	71%	75%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	44%	34%
6.6	Do you feel that you are treated as an individual in this prison?	50%	45%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	87%	62%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	73%	65%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	42%	30%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	65%	60%
8.3	Are you able to use a phone every day (if you have credit)?	87%	96%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	65%	63%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	38%	16%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	8%	7%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	67%	46%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	75%	71%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	60%	44%
10.3	Is it easy for you to make a complaint?	63%	60%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	32%	30%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	38%	30%

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25 and under	Over 25
27	146

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	22%	24%
	- Nurse?	43%	42%
	- Dentist?	10%	9%
	- Mental health workers?	24%	24%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	39%	29%
11.5	Do you think the overall quality of the health services here is very / quite good?	42%	35%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	38%	24%
SAFETY			
14.1	Have you ever felt unsafe here?	52%	47%
14.2	Do you feel unsafe now?	36%	22%
14.3	Not experienced bullying / victimisation by other prisoners	61%	51%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	29%	31%
14.5	Not experienced bullying / victimisation by members of staff	54%	55%
14.6	If you were being bullied / victimised by staff here, would you report it?	36%	43%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	48%	43%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	36%	48%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	40%	14%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	25%	8%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	57%	57%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	36%	50%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	88%	40%
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?	75%	57%
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?	44%	50%