

Report on an unannounced inspection of

HMP Full Sutton

by HM Chief Inspector of Prisons

24 February–6 March 2020

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Glossary of terms

We try to make our reports as clear as possible, and this short glossary should help to explain some of the specialist terms you may find. If you need an explanation of any other terms, please see the longer glossary in our 'Guide for writing inspection reports', available on our website at: <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

Care Quality Commission

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>.

Certified normal accommodation and operational capacity

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.

Challenge, support and intervention plans (CSIP)

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.

Offender management in custody (OMiC)

Following a review of offender management in 2015, Her Majesty's Prison and Probation Service (HMPPS) began to introduce a new offender management model from 2017. OMiC is being implemented in two separate but interconnected and complementary phases. Phase I, key work, introduced the delivery of key work by Prison Officers in 2017. The second phase, case management, was implemented on 1 October 2019 across the male closed estate (public and private sector). This introduces the new role of Prison Offender Manager.

Protected characteristics

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

Protection of adults at risk

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).

Introduction

HMP Full Sutton is a high security dispersal prison for men, holding category A and B prisoners. It is situated near York, and at the time of this inspection held around 560 prisoners. Over 80% are assessed as presenting a high or very high risk of harm to others, and nearly 60% are serving indeterminate sentences. The prisoner population is complex, including prisoners convicted of a wide range of very serious offences.

At the last inspection, held in January 2016, we found the prison to be performing well, achieving grades of reasonably good in safety, respect and rehabilitation and release planning, and good for purposeful activity. On this occasion, the grades awarded for respect and rehabilitation and release planning remained the same, while safety improved to our highest grade of good, and purposeful activity declined to be not sufficiently good.

In terms of safety, Full Sutton had the lowest levels of violence in the high security estate, with a comparatively small proportion of prisoners (22%) reporting to us that they felt unsafe at the time of the inspection. It was pleasing to see that the segregation unit had improved considerably since the time of the last inspection. The incentives and earned privileges scheme (IEP) was used in a way that did genuinely encourage good behaviour, and it was good to find that Challenge, Support and Intervention Plans (CSIPs) were being well used. Less positively it was disappointing that drugs suspicion testing was not being used as effectively as it should be in an establishment such as Full Sutton, with only a third of requested tests being carried out, of which a third were proving positive. This represents a missed opportunity to make Full Sutton even safer than it already is.

Our survey found that those prisoners suffering with mental health problems or who were disabled (44% and 38% respectively) had more negative views of their treatment, including their safety, than others. The reasons behind these perceptions need to be properly analysed and action taken to address them. We also found that there was a lack of strategic management of equality and diversity issues, and when this is rectified it should help with addressing the negative perceptions of disabled prisoners and those with mental health problems.

Our findings in the area of purposeful activity were disappointing. There were not enough work or activity places for the population, and allocation was too slow in some cases. Our colleagues from Ofsted recognised that plans were in place to bring about improvements, but those had yet to materialise. For instance, knowledge and skills gained by prisoners were not recorded, and there was no opportunity to achieve accredited qualifications. Although the prison's plans around this were in place, they had not been implemented at the time of this inspection, and Ofsted were clear in their judgement that the provision of education, skills and work required improvement. The prison was very confident that its plans would come to fruition quite quickly, and said they would be encouraging Ofsted for an early re-appraisal of progress.

Public protection work was generally robust, which was an important finding given the high risk posed by so many of Full Sutton's prisoners. However, it was disappointing that around 40% of prisoners did not have an up to date assessment (OASys) of their risks and needs. In a prison such as this, with many prisoners serving very long sentences, it is obviously important that they should feel that their needs have been recognised and that there is an opportunity to make progress. We also found that more could be done to help prisoners maintain meaningful contact with families and friends. On a very positive note, psychology staff were well integrated across the prison, and we have identified the way in which this has been done at Full Sutton as good practice.

Overall, Full Sutton is a prison that performs its important function well. It is fundamentally a safe and decent establishment, benefitting from energetic leadership and a staff group who interact well with the prisoners in their charge. If the plans that are now in place to improve the provision of education, skills and work bear fruit, and a few key issues in other areas are addressed, there is no reason why Full Sutton could not aspire to be one of the best performing prisons in the country.

Peter Clarke CVO OBE QPM

HM Chief Inspector of Prisons

April 2020

Fact page

Task of the establishment

HMP Full Sutton is a high security men's establishment for category A and B prisoners.

Certified normal accommodation and operational capacity (see Glossary of terms)

Prisoners held at the time of inspection: 561

Baseline certified normal capacity: 597

In-use certified normal capacity: 597

Operational capacity: 586

Notable features from this inspection

59% of the population were serving indeterminate sentences.

More than a fifth of the population (22%) had category A security status.

83% were assessed as presenting a high or very high risk of harm.

98% of prisoners were subject to multi-agency public protection arrangements.

Prison data showed 44% of the population had a disability.

The supporting transition and enabling progression (STEP) unit, a national resource, accommodated a small number of long-term segregated prisoners.

Prison status (public or private) and key providers

Public

Physical and mental health and substance misuse treatment provider: Spectrum

Prison education framework provider: Milton Keynes College

Escort contractor: GEOAmev

Prison group

Long-term and high security estate

Brief history

HMP Full Sutton opened in 1987 and is a high security dispersal establishment, which is part of the newly formed long-term and high security estate directorate, housing a complex prisoner population. The population predominantly comprises indeterminate sentence prisoners and a substantial number of longer sentenced determinate prisoners who have category A or B status.

Short description of residential units

A unit – residential unit

B unit – vulnerable prisoners' unit and the STEP unit

C unit – vulnerable prisoners' unit

D unit – vulnerable prisoners' unit

E unit – residential unit

F unit – residential unit

Close supervision centre unit – not inspected

Separation centre – not inspected

Name of governor and date in post

Gareth Sands – February 2019

Independent Monitoring Board chair

Sally Hobbs

Date of last inspection

11–22 January 2016

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)* (available on our website at: <https://www.justiceinspectorates.gov.uk/hmiprisoners/our-expectations/prison-expectations/>). 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.

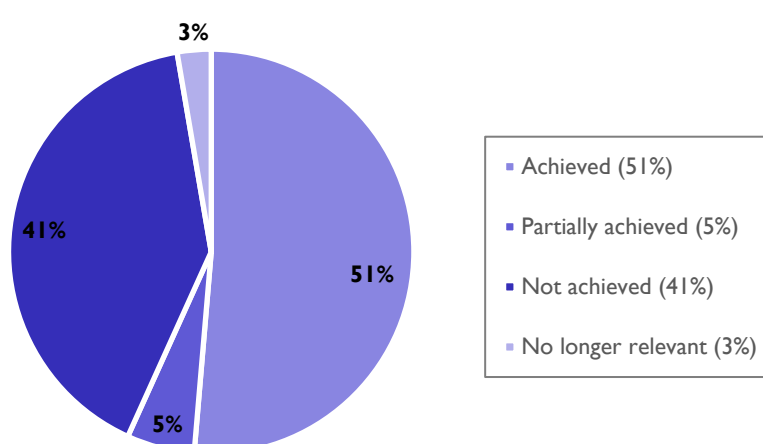
A11 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in the final appendix of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant. The significance 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 Full Sutton in 2016 and made 37 recommendations overall. The prison fully accepted 28 of the recommendations and partially (or subject to resources) accepted nine. It rejected none of the recommendations.
- S2 At this follow up inspection we found that the prison had achieved 19 of those recommendations, partially achieved two recommendations and not achieved 15 recommendations. One recommendation was no longer relevant.

Figure 1: HMP Full Sutton progress on recommendations from last inspection (n=37)

Please note that figures have been rounded and may not total 100%. This applies throughout the report.



- S3 Since our last inspection of HMP Full Sutton, outcomes for prisoners stayed the same in two healthy prison areas, with respect and rehabilitation and release planning remaining reasonably good. Safety improved from reasonably good to good and purposeful activity declined from good to not sufficiently good.

Figure 2: HMP Full Sutton healthy prison outcomes 2016 and 2020

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 provision was reasonably good overall and induction was improving. Full Sutton remained a safe place for most prisoners, there were relatively few reported violent incidents, and victims and perpetrators were managed well. The incentives and earned privileges (IEP) scheme was used well. Adjudications and the use of force were well managed. Oversight of segregation had improved and the *supporting transition and enabling progression (STEP) unit* was a promising initiative. Most aspects of security were proportionate. A range of measures were in place to tackle the availability of illicit drugs; however, drug testing was not always undertaken when necessary. Levels of self-harm were fairly high but had declined substantially over the previous year. Prisoners at risk of self-harm received good support and the standard of recording in assessment, care in custody and teamwork (ACCT) documents for those at risk of suicide or self-harm was reasonable. **Outcomes for prisoners were good against this healthy prison test.**

S5 At the last inspection in 2016 we found that outcomes for prisoners in Full Sutton were reasonably good against this health prison test. We made four recommendations in the area of safety (this included recommendations about substance use treatment, which in our updated Expectations (Version 5, 2017) now appear under the healthy prison area of respect). At this inspection we found that three of the recommendations had been achieved and one had not been achieved.

S6 The vast majority of prisoners said they had been treated well in reception; processes were swift and staff were friendly and helpful. However, new arrivals did not have an interview in private before being moved to a unit, or a standard health screening before being locked up, nor were additional safety checks carried out during their first night. New prisoners were provided with all the basic items of equipment they needed, including a kettle, but it took too long for some to access their property. Induction was now improving, but there was no formal peer input into the process, which the prison planned to remedy.

S7 In our survey, 22% of prisoners felt unsafe at the time of our inspection; however, prisoners with disabilities and mental health problems were far less positive. The level of reported assaults was low compared to similar prisons. However, some incidents were serious and there had been an alleged homicide in the previous year. We found some incidents of violence that had not been reported to the safer custody team for investigation, however, all of those reported had been investigated. The effective weekly safety intervention meeting

provided good support to individual prisoners with specific needs. Some analysis of violent incidents took place, but the data collected were not comprehensive and we could not see an action plan. The casework approach to managing perpetrators of violence and providing support for victims was good, although some plans lacked individual targets. The IEP scheme had been reviewed and clear differentials between the levels had been established. More prisoners than at comparator prisons said the IEP scheme encouraged them to behave well. We saw little evidence of other formal reward schemes to promote good behaviour.

- S8 The number of adjudications had increased since the previous inspection. Most charges were appropriate, although we found a small number of cases that could have been dealt with through the IEP scheme. There were very few cases outstanding and most adjudications were dealt with in time and appropriately.

- S9 The number of use of force incidents had increased since the previous inspection but was similar to the other four high security prisons. The use of force documentation we examined was up to date, justified the need for force and demonstrated good de-escalation techniques. Governance was a strength, and scrutiny of paperwork and video footage provided a good level of assurance.

- S10 Management of the segregation unit had improved and living conditions were better than we found at the previous inspection. The regime was limited but lengths of stay for most had decreased and reintegration planning was now good. Prisoners spoke positively about staff in the unit and interactions we observed demonstrated that staff knew the prisoners in their care. The STEP unit looked promising and provided a small number of prisoners with the opportunity to leave long-term segregation.

- S11 Security intelligence systems were effective and appropriate objectives were set. Prisoners were routinely strip-searched but there were no regular reviews to ensure the process was used proportionately. The prison's comprehensive drug strategy and action plan were discussed at well-attended meetings. There were numerous measures in place to tackle the availability of illicit drugs, including the use of technology. However, only one third of suspicion drug tests requested in the previous six months had been completed. There was an effective approach to managing extremism.

- S12 There had been one self-inflicted death since the previous inspection. Recommendations from the Prisons and Probation Ombudsman investigation were being addressed. The number of self-harm incidents had increased over recent years, but was now declining. Prisoners subject to assessment, care in custody and teamwork (ACCT) procedures for those at risk of suicide or self-harm received good support, including oversight from the weekly safety intervention meeting. Safer custody officers acting as keyworkers for prisoners with complex needs provided good additional support. The standard of recording in ACCT documentation was reasonable but the timing of some observations was far too predictable.

- S13 Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) and volunteers from the Samaritans provided the safer prisons support meeting, held every two months, with good input. The meeting reviewed data on self-harm to inform its continuing work to reduce the incidence. However, we were not confident that adult safeguarding work to protect those at risk of abuse or neglect was developed well enough.

Respect

S14 Staff-prisoner relationships remained a strength. Keyworkers were now in place but further work was required to ensure entries were recorded frequently enough and were of a good standard. Living conditions were reasonably good. Equality and diversity work remained underdeveloped. Some groups' negative perceptions of safety needed to be addressed. Faith provision was strong. The food and shop provision were good and self-catering arrangements were excellent. Prisoner consultation was good. Replies to applications were not tracked and the complaints process needed improving. Health care services were reasonably good. **Outcomes for prisoners were reasonably good against this healthy prison test.**

S15 At the last inspection in 2016 we found that outcomes for prisoners in Full Sutton were reasonably good against this healthy prison test. We made 19 recommendations in the area of respect. At this inspection we found that 13 of the recommendations had been achieved, one had been partially achieved and five had not been achieved.

S16 Relationships between staff and prisoners remained a strength – staff knew prisoners well and provided good levels of care. The introduction of the keyworker scheme was positive and in our survey, more prisoners than in similar prisons and compared with our previous inspection said a member of staff had spoken to them in the past week to see how they were getting on. The frequency and standard of recorded keyworker entries varied and records did not sufficiently focus on progression. The prison had developed a good peer support strategy that was about to be implemented.

S17 There was a focus on decency across the prison, which senior managers led well. Most prisoners had clean, properly equipped cells and communal areas were also clean. Older units (A to D), however, showed signs of wear and tear. Access to showers, clothing, bedding and cleaning equipment was good. Cell bells were answered promptly.

S18 Prisoners were very positive about the food and self-catering opportunities were very good. The shop provision remained good and the prison was responsive to prisoners' requests; however, some prisoners waited too long to receive their first order. The process for receiving catalogue items was too slow, causing frustration among prisoners.

S19 Prisoners were consulted effectively through the monthly prison council, chaired by the governor, and supported by an informative quarterly prisoner newsletter. Unit staff understood the new applications process well, but responses were not tracked, which made it impossible to monitor timeliness. The number of complaints submitted by prisoners was similar to comparable prisons. However, almost a quarter had been inappropriately rejected. According to the prison's own data, 14% of complaints had been answered late and the responses we checked were variable. The analysis of complaints data required improvement so that the prison could determine what issues were raised and take action to address the problems. Prisoners received little legal advice.

S20 Equality lead staff members for each protected characteristic were in post and worked hard to make progress but they were not always fully supported in their work. The equality action group, which met every two months, was not well attended and lacked focus. Although it had identified that black and minority ethnic prisoners experienced disproportionately poor treatment through the IEP scheme and adjudications, evidence of the disproportionate treatment of prisoners with other protected characteristics had not been explored or addressed. Some prisoners we spoke to had little confidence in the discrimination incident reporting form (DIRF) process. External scrutiny of DIRFs was in place, but the quality of the

responses we examined were variable and the process failed to involve prisoners as part of the investigation.

- S21 Support for prisoners with protected characteristics had begun to improve in some areas over the previous year. For example, for those who were transgender. However, the needs of some other groups of prisoners with protected characteristics needed to be analysed so action could be taken. For example, in our survey, prisoners with disabilities and mental health problems had far more negative perceptions of safety.
- S22 Faith provision was good and the chaplaincy was well-integrated across the prison. The chaplaincy provided a good range of support for prisoners, including well-being activities and a programme of staff training events to promote faith awareness.
- S23 There had been a large number of vacancies in the primary health care team, which had stretched delivery. Staffing was improving and we found an appropriate range of specialist clinical services being delivered and reasonable access to most provision. Many prisoners were frustrated about health care, particularly pain management, but we found clear multidisciplinary treatment decisions being made based on sound evidence. The inpatient unit provided a calm, well managed environment run by skilled officers. Clinical input was offered on a peripatetic basis but met most needs.
- S24 Five prisoners were receiving personal social care packages. Prisoners said they felt well cared for, but care was not always delivered consistently. Mental health services met most patients' needs and care for patients with mild to moderate disorders had improved. Pathways for prisoners with learning and neuro-disabilities had recently been re-established. Support for prisoners leaving the prison was appropriate, but there continued to be long delays in arranging transfers to hospital under the Mental Health Act.
- S25 The substance misuse service was very good – it was integrated with the mental health department and there was effective communication with primary health care services. Clinical treatment interventions were effective and tailored to the individual.
- S26 Pharmacy services and medicine management arrangements were very good. Dental services were not adequately governed and there was poor oversight of the service and complaints management, but the range of treatments and access were reasonable.

Purposeful activity

- S27 The amount of time prisoners spent unlocked was reasonable for most. The gym provision was adequate but the library service was limited. Ofsted judged that the education, skills and work provision required improvement. Weaknesses had been identified and there were plans in place to address them. There were insufficient activity places for the population, allocations to activities sometimes took too long and existing education places were often underused. Prison work was not accredited, the skills prisoners developed were insufficiently recorded and there was too little careers advice. **Outcomes for prisoners were not sufficiently good against this healthy prison test.**
- S28 At the last inspection in 2016 we found that outcomes for prisoners in Full Sutton were good against this healthy prison test. We made eight recommendations in the area of purposeful activity. At this inspection we found that one of the recommendations had been partially achieved and seven had not been achieved.

- S29 During our checks we found 21% of prisoners locked in their cells during the core working day. This was similar to our previous inspection and lower compared with most similar prisons. The daily regime was delivered reliably and most prisoners spent a reasonable amount of time unlocked, while those in full-time employment had a good amount of time out of their cells. However, those on induction spent too little time unlocked.
- S30 There were few recreational activities. Less than half of prisoners in our survey said they used the library at least once a week and the prison did not monitor usage to determine the level of attendance. The library stocked an adequate range of books, but the prison did not do enough to promote literacy. Access to the gym and PE facilities were reasonably good. They included an outside area and sports hall for team sports and an over 60s walking group. Data analysis on usage of the gym was comprehensive.
- S31 Leaders had accurately identified weaknesses in education, skills and work activities and established plans to address them. However, many of the planned changes were at an early stage. The curriculum had been reviewed to ensure prisoners developed their English and maths skills before progressing to other activities. However, prisoners had a negative perception of the education provision and places were underused. There were insufficient activity places but the prison had plans to address this. Allocations to activities sometimes took too long.
- S32 Teachers in education and vocational training subjects structured the delivery of the curriculum well. Most prisoners produced work of a good standard and built on their subject knowledge and skills over time. The outreach and distance learning curriculum focused well on prisoners' individual needs and re-engaged reluctant learners. Instructors provided little further training to enable prisoners to progress beyond the initial training provided after the induction to the course. Prisoners who worked in the DHL warehouse and prison kitchen developed good vocational knowledge and skills in busy, productive workplaces. The range and number of activities in other workshops was limited and prisoners sometimes got bored. Opportunities for prisoners to achieve accredited qualifications through work were very limited.
- S33 Good, respectful relationships in most activities resulted in a calm and orderly environment. Prison staff promoted interventions to improve prisoners' resilience and self-esteem well. The Learning Together programme helped participating prisoners to engage in challenging discussions. Limited careers advice arrangements were in place.

Rehabilitation and release planning

- S34 The provision for visits was good, but there was little other support to help prisoners maintain contact with their children and families. Strategic management of resettlement work was not yet effective. Offender assessment system (OASys) reports were good but not always reviewed often enough. Offender management was reasonable and contact levels were improving. Most public protection arrangements were robust. Categorisation review processes could have been improved. There was an adequate number of places on accredited programmes but very little provision for vulnerable prisoners. The psychology team provided an excellent range of support. Demand for resettlement support was low and the provision was appropriate. **Outcomes for prisoners were reasonably good against this healthy prison test.**
- S35 At the last inspection in 2016 we found that outcomes for prisoners in Full Sutton were reasonably good against this healthy prison test. We made six recommendations in the area of resettlement (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). At this inspection we found that three of the recommendations had been achieved, two had not been achieved and one was no longer relevant.

- S36 The provision of visits was good but wider initiatives under the children and families' pathway was limited. However, a family worker was being appointed to take forward this work. Visiting sessions no longer started late, the visits environment was good and prisoners appreciated the well-established family days. Prison managers met regularly with prisoners' visitors to explore areas for improvement. Inter-prison phone calls, accumulated visits and the official prison visiting scheme were used appropriately to promote prisoners' contact with families and friends.
- S37 There was a comprehensive resettlement needs analysis, but it was not used adequately to inform the strategy or an action plan. Most prisoners now had an OASys report and sentence plan, which were good, but they were not always up to date or reviewed when needed. Offender managers' contact with prisoners was not always frequent enough or sufficiently focused on progression. However, this was improving following the introduction of more probation officers in the offender management unit (OMU). Fifty-nine per cent of the population was serving an indeterminate sentence and received reasonably good support.
- S38 Public protection arrangements were generally robust. Regular meetings took place so that the highest risk cases, prisoners due for release and those under monitoring arrangements could be discussed. However, attendance was poor and staff from departments outside the OMU provided little input. Multi-agency public protection arrangement (MAPPA) levels were confirmed prior to release and reports for MAPPA meetings were timely and of a good standard.
- S39 Categorisation reviews were timely. However, prisoners were not routinely involved in the process and did not always receive clear information about what they needed to do to progress.
- S40 A comprehensive annual needs analysis was used to inform the prison's accredited programme delivery. There were sufficient spaces on the programmes for those assessed as suitable and waiting lists were well managed. However, vulnerable prisoners had little access to accredited programmes and only two prisoners had participated in a programme in the previous year. However, there were plans to deliver the Resolve programme to vulnerable prisoners in the coming year. Some prisoners, especially those who were category A prisoners, found it difficult to transfer to another establishment to complete the programmes outlined in their sentence plans. Psychology staff were well integrated across the prison and undertook some excellent one-to-one work. The prison had a limited range of non-accredited programmes but no formal interventions for prisoners who had experienced abuse.
- S41 The demand for resettlement help was very low and only seven prisoners had been released in the previous six months. The provision was appropriate. Prisoners' resettlement needs were reviewed approximately eight months before their release but were not formally revisited to establish what progress had been made.

Key concerns and recommendations

- S42 Key concern: In our survey, 44% of the population said they had mental health concerns and 38% identified as having a disability. Their perception of how they were treated was more negative than those who did not have a mental health problem or disability, including in the area of safety. Prisoners told inspectors that they were worried about medication being discontinued rather than violence from others; however more needed to be done to determine the reasons behind these perceptions and take action to address them.

Recommendation: The prison should analyse and improve the negative perceptions that prisoners with disabilities and mental health problems have of their treatment, in particular their views of safety.

- S43 Key concern: There were not enough activity places to enable those who could, to participate in purposeful activities. Managers had only recently reviewed the curriculum in education and work and prisoners did not understand why they were being allocated to certain activities, such as education, which created a negative attitude towards it.

Recommendation: The prison should increase the number of appropriate education and work activity places so all prisoners can engage in education and work, gaining the skills and knowledge that will help them sustain successful careers.

- S44 Key concern: Instructors in prison industries did not assess or record the knowledge and skills prisoners gained and there were very few opportunities for prisoners to achieve accredited qualifications through their work.

Recommendation: The knowledge and skills that prisoners gain through work should be assessed and recorded and where appropriate, prisoners should be able to achieve accredited qualifications.

- S45 Key concern: About 40% of prisoners did not have an up-to-date assessment of their risks and needs. Risk assessments and sentence plans were sometimes out of date and did not always reflect prisoners' current circumstances, which meant prisoners got frustrated because they did not always know what they needed to do to progress. This was compounded by prisoners having infrequent, reactive, contact with prison offender managers that did not always focus sufficiently on progression.

Recommendation: All prisoners should have an up-to-date OASys report with clear and relevant sentence plan objectives to help them reduce their risks and enable them to progress.

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 Some prisoners had lengthy journeys to Full Sutton, including overnight stays at other prisons. The escort vehicle seen during the inspection was reasonably clean and had necessary supplies and equipment, but there was graffiti in some of the cellular compartments. Most prisoners were handcuffed when disembarking from escort vehicles, but those who left the prison for medical appointments had individual assessments on the level of handcuffing they required. The prison continued to use a video link when possible to facilitate court appearances – in the previous six months it had been used 73 times.
- I.2 The reception area was small and functional and in our survey, 79% of prisoners said they were treated well in reception. Reception staff were friendly and helpful. The two reception holding rooms were clean and contained books to keep prisoners occupied. On average, between three and four new prisoners arrived each week, with a similar number leaving. Prisoners did not spend too long in reception.
- I.3 New arrivals were searched rigorously. The process included using a body scanner, an electronic pole and a search dog, and strip-searching all prisoners, to detect illicit items (see paragraph I.27).
- I.4 Initial interviews, which included some personal questions, took place at an open desk, which might have prevented prisoners from sharing confidential information or raising any immediate concerns. Initial health care checks took place once prisoners had moved to their allocated residential unit, but a full health care screening was not always undertaken before they were locked up on their first night. There were no peer supporters or Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) in reception to provide new arrivals with early support.
- I.5 All new arrivals received basic items in a pack that included clean bedding, plastic cutlery and crockery, a kettle, toiletries, snacks and drinks, a letter with free postage and information about the prison. They could also have a £2 advance in phone credit and buy a vape pack. The property prisoners arrived with remained in reception until it had been searched. Most prisoners were reunited with the property that had accompanied them within four days of arriving. Others experienced longer delays if their property had not travelled with them. It also took too long for prisoners to receive catalogue orders (see paragraph 2.14).
- I.6 The prison no longer had a dedicated first night unit. Instead, prisoners were allocated to a residential unit based on information and intelligence available prior to their arrival. New prisoners had an interview with the supervising officer in their unit, and could use showers and phones, but staff did not complete any additional first night safety checks on new arrivals.

- 1.7** In our survey, only 75% of prisoners, fewer than those at similar prisons (94%) said they had an induction at Full Sutton. Prior to the inspection, managers had recognised that the induction work had declined and had provided more resources. Induction was now improving. The induction period lasted two weeks and included input from staff from various departments. Some elements were timetabled, while others were provided on an ad-hoc basis. Tracking of induction completions had improved. Managers recognised the lack of formal peer input into induction and had plans to remedy this.

Recommendation

- 1.8 Prisoners should have prompt access to their property following transfer and should not have to wait a long time for their catalogue items.**

Managing behaviour

Expected outcomes:

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

Encouraging positive behaviour

- 1.9** As a high security prison, Full Sutton held prisoners serving long sentences, mainly for very serious violent offences. During the inspection, all but 12 were sentenced to over 10 years. Most prisoners we spoke to during the inspection said the prison was safe. This was supported by our survey results, which showed that only 22% of prisoners felt unsafe during the inspection. However, prisoners with disabilities and mental health problems were less positive. (See paragraph 2.37 and key concern and recommendation S42.)
- 1.10** Levels of reported assaults were low in comparison to the other four high security prisons; however, some incidents were serious and had resulted in severe injuries to prisoners and staff, and there had been an alleged homicide in the previous year. Some incidents of violence had not been reported to the safer custody team and as a result had not been investigated. For example, we found violent incidents recorded in unit observation books that had not been reported to the safer custody team or security department. However, when violent incidents were reported, they were investigated and appropriate action was taken, such as opening a challenge, support and intervention plan (CSIP) (see Glossary of terms).
- 1.11** The prison's casework approach to managing the perpetrators of violence and providing support for victims was good. There were 19 open CSIPs when we inspected, which included support for victims and perpetrators. Staff we spoke to were aware of the CSIP referral system and what CSIPs were intended to be used for. Those we looked at showed that investigations were thorough and timely, but there were some weaknesses, for example, some plans lacked individual behaviour targets and not all reviews were multidisciplinary.
- 1.12** The prison had an effective weekly safety intervention meeting (SIM), which provided good support to individual prisoners with specific needs. The SIM was used for enhanced case reviews of prisoners who had been involved in acts of violence. Staff from all areas of the prison were represented at the meeting we attended, and we saw evidence that action identified at previous SIMs were appropriately tracked until completed. Although the prison had a small dedicated safer custody team, there were no peer representatives, although there were plans to introduce them. Data analysis was not comprehensive – it lacked details

on longer-term trends and themes that could have been used to develop a prison-wide action plan.

- 1.13** The prison's incentives and earned privileges (IEP) scheme had been reviewed at the end of 2019 and there were now clear differentials between the three levels. The self-catering option available to some prisoners on the highest level was particularly valued (see paragraph 2.11). In our survey, 55% of prisoners, significantly more than at similar prisons (42%), said the scheme encouraged them to behave well, and nearly three quarters were on the highest level. Oversight of the scheme was good. However, we found little evidence of other formal reward systems to promote good behaviour.

Recommendations

- 1.14 All incidents of violence, bullying or intimidation should be reported to the safer custody team for investigation.**
- 1.15 A comprehensive range of data should be analysed and used to develop an effective prison-wide violence reduction action plan.**

Adjudications

- 1.16** According to the prison's own data, the number of adjudications had increased since the previous inspection but was lower than at similar prisons. Records we examined showed that most charges were appropriate, although we found a small number of cases that could have been dealt with through the IEP scheme. Adjudication hearings we attended were held in a relaxed environment and prisoners were given the chance to defend their alleged offence. The prison had very few adjudications outstanding and most were dealt with in time and appropriately; those that were waiting to be dealt with were very recent and the delay was for appropriate reasons.

Use of force

- 1.17** There had been 97 use of force incidents in the previous six months, which was an increase since the previous inspection but was similar to other high security prisons.
- 1.18** The use of force documentation we examined was up to date. Paperwork was detailed and demonstrated the need to use force. Use of force video footage and documentation we examined showed staff deploying good de-escalation skills. However, prisoners were not routinely debriefed after force was used against them.
- 1.19** Governance was a real strength and scrutiny of paperwork and video footage provided a good level of assurance. All use of force incidents were reviewed and Independent Monitoring Board staff provided some additional oversight. The prison could demonstrate action being taken in response to scrutiny, for example staff had been given advice and guidance and one incident had progressed to a formal investigation.
- 1.20** Special accommodation had only been used four times in the previous six months and the paperwork we reviewed provided sufficient justification for its use.

Segregation

- I.21** The use of segregation had increased slightly since our previous inspection, but was not excessive. Until recently some periods of segregation were too long, for example, two prisoners had been segregated for over two years. During the inspection, there were 23 prisoners in the unit and the prisoner who had stayed the longest had been there for 154 days, which remained a concern.
- I.22** Management of the segregation unit had improved and governance was now good. The decision to have some prisoners unlocked in the presence of more than two officers was justifiable, given individuals' violent behaviour towards staff. This position was regularly reviewed and changes were made at the earliest opportunity.
- I.23** Relationships between staff and prisoners in the unit remained a strength; staff knew the prisoners in their care, prisoners we spoke to were positive about staff and we observed some good interactions. Living conditions had improved. Communal areas and cells were clean, cells were free of graffiti and prisoners could clean them every day. Some cells had plug sockets, which enabled some to earn in-cell TVs as their behaviour improved and most prisoners were given wind-up radios. Showers were clean and well kept, but external exercise areas remained stark.
- I.24** The regime for those segregated was limited. The daily regime was restricted to a shower and a period of outside exercise. Access to a phone call was by application and only allowed if staff had time. Access to the wider prison regime was very limited – there were plans to introduce a gym session for segregated prisoners, but access to education was through in-cell work only. There was a good focus on reintegrating prisoners back into mainstream units.
- I.25** The supporting transition and enabling progression (STEP) unit on B wing provided up to 16 prisoners with the opportunity to leave long-term segregation. It aimed to provide a predictable regime with consistent staffing levels. Prisoners we spoke to in the unit who had previously come from long-term segregation were positive about being in the STEP unit and spoke highly of staff.

Recommendation

- I.26** **Prisoners who are segregated should have access to the wider prison regime as part of reintegration planning.**

Security

Expected outcomes:

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

- I.27** Security was well managed and supported by a range of technology, including a body scanner to detect illicit items on prisoners. (See also paragraph I.2.) Most aspects of security were proportionate, however, strip-searching of prisoners was routinely carried out without sufficient evidence of a threat and without a regular review to ensure a continuing need for it. For example, prisoners were being strip-searched when they attended the segregation unit for an adjudication without the decision being based on evidence of current risks.

- I.28** The number of security information reports had increased since the previous inspection. Intelligence was managed well and there was no backlog. Security objectives set were appropriate and the monthly tactical assessment meeting also ensured that action was agreed based on key threats.
- I.29** A dedicated team managed counter-terrorism and included a full-time detective constable. The prison had effective systems in place to manage extremism and had good working relationships with the offender management unit and other departments.
- I.30** The prison was aware of the risks of staff corruption, and prevention measures were organised and effective – they included a good range of staff awareness training. There were strong links with local police teams and well-developed working relationships with the three onsite police officers to support corruption prevention.
- I.31** The prison now had a comprehensive drug strategy and action plan, which were discussed at well-attended monthly meetings. Full Sutton had numerous measures in place to tackle the availability of illicit drugs and alcohol, including a robust approach to the use of the body scanner. However, only one third of requested suspicion drug tests in the previous six months had been completed. The availability of illicit substances was a concern. For example, the results of a third of suspicion drug tests were positive; in our survey 45% of prisoners said it was easy to get illicit drugs and 31% said it was easy to obtain alcohol at the prison.

Recommendations

- I.32 Prisoners should only be strip-searched on the basis of an up-to-date risk assessment that is regularly reviewed to demonstrate it is still required.**
- I.33 All requested suspicion drug tests should be completed.**

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.34** One prisoner had taken their own life since the previous inspection. Overall, there was evidence that the prison was making progress on implementing the Prisons and Probation Ombudsman's recommendations.
- I.35** Following the previous inspection, the number of self-harm incidents had risen significantly but had been decreasing more recently from a high of over 70 incidents in one month in 2018 to 10 in February 2020. Overall, in the previous six months the incidence of self-harm showed a downward trend. During that period, 43 prisoners had been responsible for 144 incidents of self-harm, with five prisoners accounting for nearly half of all self-harm incidents.
- I.36** Work to reduce self-harm included the introduction of a weekly multidisciplinary safety intervention meeting, which discussed all prisoners being managed by assessment, care in custody and teamwork (ACCT) processes for those at risk of suicide or self-harm. Staff

working with prisoners causing the most concern received details about their triggers, who supported them and other information relating to their needs. Safer custody officers were also keyworkers for this group of prisoners. Listeners and volunteers from the Samaritans regularly attended and provided the safer prisons support meeting with good input. A reasonable range of data were presented and discussed to inform the work to further reduce self-harm.

- I.37** The standard of ACCT case management was generally reasonably good. Assessments were prompt and many, although not all, case reviews were multidisciplinary. Notes from case reviews included the prisoner's views and feelings as well as evidence of individual action to support prisoners. There was some inconsistency in case managers, but the presence of safer custody officers at many reviews provided continuity. The timing of recorded observations was often predictable, but entries showed meaningful interactions had taken place. Action in care maps were checked before ACCTs were closed and post-closure reviews took place on time. Oversight of the need to locate prisoners on ACCTs in the segregation unit had been strengthened. Prisoners we spoke to who had received support through ACCT processes were positive about their care.
- I.38** The prison had 19 trained Listeners who received good support from the Samaritans. The assistance the Listeners could provide was hampered by the lack of a dedicated Listeners' suite where they could talk to prisoners privately. The prison was aware of this and was looking to identify a suitable venue. Each residential unit had a Samaritans phone, which prisoners could use free of charge in their cells.

Good practice

- I.39** *The use of safer custody officers as keyworkers for those judged to be most at risk of suicide or self-harm meant prisoners received good consistent support.*

Protection of adults at risk (see Glossary of terms)

- I.40** Safeguarding work required further development. The prison used a joint agency policy and processes document prepared by a number of Yorkshire area safeguarding adults boards. It set out how to identify vulnerable adults and those at risk of abuse and how to make a safeguarding referral. It had not been used to develop a Full Sutton policy and staff did not have a clear understanding of adult safeguarding or associated procedures.

Recommendation

- I.41** **Staff should know how to identify vulnerable adults and make referrals to appropriate agencies.**

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 Relationships between staff and prisoners remained among the prison's strengths. In our survey, 83% of prisoners said that staff treated them with respect. During our inspection we saw sensitive and caring interactions between staff and prisoners. Staff knew about prisoners in their care, including those who had only recently arrived at the prison. Strong staff-prisoner relationships supported a settled atmosphere during association and unlock times, despite the high security risk of many prisoners held.
- 2.2 Since our previous inspection, the introduction of the keyworker scheme had been a positive development that prisoners appreciated. In our survey, significantly more prisoners (58%), than in similar prisons (44%) and compared with our previous inspection (40%) said that a member of staff had spoken to them in the previous week to see how they were getting on. The frequency and standard of recorded keyworker entries varied, however, with some sessions being cancelled when staff were unavailable or deployed to other duties. Recorded entries did not focus enough on progression and instead provided social updates, which needed to be addressed through a better developed link between keyworkers and the offender management unit (OMU).
- 2.3 The prison had developed a good peer support strategy that was about to be implemented. It included clear guidance on supervision, expectations and support, promoted a sense of community and equipped prisoner representatives with transferable skills. Unit mentors were well embedded and available to inform prisoners about sources of help and support in the units.

Daily life

Expected outcomes:

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

Living conditions

- 2.4 Living conditions were good overall. There was a focus on decency across the prison, which senior managers led well. The leadership team for residential services had been expanded, allowing for greater oversight of cleanliness and living conditions, which had resulted in all areas being generally clean and tidy, particularly the supporting transition and enabling progression (STEP) unit and the newer units, E and F.

- 2.5** All prisoners lived in single cells, which were well kept and new pre-occupancy checks ensured they were well equipped and had appropriate furniture. All toilets had lids and screening and we did not see any graffiti during our inspection. Units A, B, C and D were older and beginning to show signs of wear and tear, and some flooring needed to be replaced. The condition of the showers was acceptable and access was good. In our survey, more prisoners (92%) than in other high security prisons (75%) said they received cell cleaning materials every week.
- 2.6** Communal association areas were mostly clean, but some of the smaller association rooms in A, B, C and D units were not well set up and many lacked suitable seating. Access to phones was good and most had screening so prisoners had some degree of privacy.
- 2.7** Laundry facilities were available in each unit and were well run. Prisoners had good access to clothing and bedding and kit rooms were well stocked. In our survey, most prisoners said they had weekly access to clean clothes (85%) and sheets (86%). Many prisoners said the mattresses were uncomfortable and could have two mattresses to sleep on.
- 2.8** Cell bells were answered promptly, and significantly more prisoners in our survey (64%) reported their cell call bell was normally answered within five minutes than in other similar prisons (45%). More prisoners than in other high security prisons (79% compared with 65%) and compared with the previous inspection (64%) also said it was quiet enough to sleep at night.

Residential services

- 2.9** Prisoners were very positive about the food. In our survey significantly more prisoners (61%) reported that the quality of the food was very or quite good compared to those in similar prisons (39%), while 60% said they got enough to eat at mealtimes compared with 39% at other comparable establishments.
- 2.10** The kitchen was well organised and produced a four-weekly menu that catered appropriately for varying dietary and religious needs. Thirty-five prisoners worked in the kitchen, including vulnerable prisoners and those from the general population. They could work towards food safety and preparation qualifications.
- 2.11** Self-catering opportunities were very good and better than we often see, and facilities in all units were excellent. Prisoners had access to them whenever they were unlocked. The prison continued to run an 'opt out' scheme for those who did not wish to receive prison meals but cooked their own food. During our inspection, 154 prisoners were taking part in the scheme and 25 were on the waiting list. The scheme provided each prisoner with a budget of £10 a week to order their own food and cook their own meals. We saw groups of prisoners cooking together, which provided them with the opportunity to socialise, plan meals and practise their budgeting skills.
- 2.12** Consultation arrangements for obtaining prisoners' views on the food were weak. Consultation meetings were not well attended and responses to a regular prisoner survey were not well used.
- 2.13** In our survey, 74% of prisoners said the prison sold the items they needed (compared with 65% in other similar prisons) and the prison shop continued to offer a broad range of items that prisoners could access every week. The prison was responsive to prisoners' requests. However, managers had not addressed our previous concern that newly arriving prisoners could wait up to 10 days before they could receive their first order. Prisoners told us the lack of provision meant they had to borrow items in their early days, leading to debt.

- 2.14** The range of catalogue products available was reasonable, however the prison's processes for distributing items to prisoners were too slow. We found parcels in reception that dated back five weeks but which had been ordered four weeks earlier. Prisoners found the lengthy delays frustrating.

Good practice

- 2.15** *The 'opt out' self-catering scheme supported community living and helped prisoners develop important life skills, such as budgeting and cooking.*

Prisoner consultation, applications and redress

- 2.16** Consultation arrangements were good overall. The prison ran a monthly council meeting chaired by the governor. It was well attended by prisoners, staff and senior management team members. The consultation was effective and action was taken as a result. The meeting was supported by monthly meetings in the units. However, they varied greatly in attendance, frequency and outcomes. The prison also produced a quarterly newsletter, which was informative, ensuring prisoners knew what was going on and what was coming up.
- 2.17** In our survey, 82% of prisoners said it was easy to make an application. A new applications process had been implemented to ensure minor queries were dealt with more efficiently in the unit and to improve the timeliness of responses to formal applications. Unit staff understood the new system well. Applications were logged, but responses were not tracked, which made it impossible to monitor timeliness and in our survey only 42% of prisoners compared with 63% in similar prisons said applications were normally dealt with on time.
- 2.18** In our survey, 31% of prisoners said they had been prevented from making a complaint. Prisoners told inspectors complaint forms were not always freely available and they had to ask prison staff for them. When we checked, we found that some wings did not have forms available by the complaints box, which confirmed prisoners' views. In the six months leading to the end of January 2020, 1281 complaints had been submitted, which was similar to comparable prisons. However, the number was not a true reflection, as the prison was sifting out those they felt did not need to be a complaint and returning them without logging them or the issues raised. Managers agreed this should not have been happening and the practice was to end.
- 2.19** Prison managers quality assured 10% of answered complaints, which was positive. However, only 38% of prisoners in our survey said that complaints were dealt with fairly and 45% said they had received a response within seven days, which was low. When we checked complaints, we found that the standard of responses was variable. Some answers were helpful and polite, others were abrupt and did not fully explore the issue or provide an adequate resolution. Staff did not routinely speak to prisoners as part of the investigation into the complaint, preventing managers from getting to the root of the problem and failing to reassure the prisoner that the matter was being handled robustly. The prison's data showed that 14% of complaints had been answered late and the system in place to track responses was not yet robust.
- 2.20** Some rudimentary data analysis of complaints was undertaken, but it was very basic and did not examine in detail what prisoners were complaining about so that issues and trends could be monitored and appropriate action taken.
- 2.21** As in other prisons, there was no longer a legal aid officer and there was little legal support for prisoners. However, the library held a good stock of up-to-date legal books that

prisoners could refer to. The morning sessions in the library were reserved for prisoners wishing to look at reference material and a comprehensive list of solicitors was also available. The legal visits rooms were private and suitable and we did not find problems with their availability.

- 2.22** In our survey, 55% of prisoners said their legal correspondence had been opened when they had not been present. Staff working in the mail room kept logs of legal post opened in error and only nine occasions had been documented in the previous six months, so the reasons for this perception were unclear.

Recommendations

- 2.23 All complaint forms submitted should be logged as a complaint. Responses should be on time and fully address the issues raised by the complainant.**
- 2.24 The prison should conduct a comprehensive analysis of complaint data so that emerging problems, themes and trends over time can be identified and addressed.**

Equality, diversity and faith

Expected outcomes:

There is a clear approach to promoting equality of opportunity, eliminating unlawful discrimination and fostering good relationships. The distinct needs of prisoners with particular protected characteristics (see Glossary of terms) 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

- 2.25** The equality team had been expanded in the previous year and now had a full-time equality manager and four prison officers who took the lead on protected characteristics. The officers worked hard to make improvements, but senior managers did not always support them to drive forward the work they were doing. Consultation with prisoners on equality had started but was weak. Over the previous five months, focus groups had begun for some protected characteristics, but apart from the meeting with black and minority ethnic prisoners, managers did not attend most of them and some had been cancelled due to staff shortages.
- 2.26** The equality action group (EAG) meeting, held every two months and chaired by the deputy governor, met regularly and prisoner representatives attended the meeting, but attendance by staff from key areas, such as education, resettlement, security and health care, was poor. The meeting lacked focus and planned action was not always implemented, although we did observe some improvements in more recent minutes.
- 2.27** Equality monitoring tool (EMT) data was produced quarterly and was useful. The latest available data showed that some prisoners with protected characteristics had experienced unequal treatment over the previous quarter. The EMT showed that younger prisoners, those with disabilities and prisoners from ethnic minorities were disproportionately represented in the areas of complaints, adjudications and incentives and earned privileges (IEP). However, prison managers had not fully investigated this finding.

- 2.28** Forty discrimination incident reporting forms (DIRFs) had been submitted in the six months prior to the inspection, which was much lower than in similar prisons. DIRFs were freely available in units and staff we spoke to were aware of the process. However, some prisoners told us they had little confidence in the process. We found that responses to too many DIRF complaints were late and the quality was poor in some as they did not demonstrate a sufficiently thorough investigation. For example, the prisoner was not always interviewed. An external advisory panel met quarterly to provide independent quality assurance but it was not yet effective.
- 2.29** Celebrations for Black History Month had taken place and Traveller and Hindu festivities had also been marked. The kitchen prepared food for Eid, which was very well received, as were motivational speakers for black and minority ethnic prisoners.

Recommendation

- 2.30 Responses to DIRFs should be timely and should involve talking to the prisoner as part of the investigation before a response is given.**

Protected characteristics

- 2.31** During the inspection, 26% of the prison population were from a black and minority ethnic background. In our survey, these prisoners reported treatment that was consistent with to white prisoners in all areas, except in reception. The reason for this latter perception was unclear.
- 2.32** Prison data showed that 16 prisoners were from the Traveller community. There had been a Traveller awareness week and an external motivational speaker had visited the prison. The chaplaincy held a monthly meeting with the prisoners, but beyond this, practical provision for this group was limited. Despite this, those we spoke to felt their needs were mostly met, but more could have been done to support them in maintaining contact with their children and families.
- 2.33** There were 47 foreign national prisoners at HMP Full Sutton during the inspection. Provision for this group was underdeveloped and the forum for foreign national prisoners had only met once early in 2020. Foreign national prisoners could swap unused visits for international phone credit and most foreign national prisoners we spoke to said they were aware of this.
- 2.34** Immigration enforcement surgeries took place twice a year, which was inadequate, and the prisoners we spoke to complained about poor communication regarding their immigration status. Some prisoners were very frustrated about long delays in Home Office decision-making and prisoners showed us some documentary evidence supporting their view that matters took too long.
- 2.35** The prison did not routinely use telephone interpreting for prisoners who could not understand or speak English very well. For example, language line had not been used in the previous six months for assessment, care in custody and teamwork (ACCT) reviews for prisoners at risk of suicide or self-harm or segregation reviews. This meant that any safety concerns for non-English speakers would not have been detected.
- 2.36** Prison data showed that 23% of prisoners were Muslim. The prison had been responsive to these prisoners' needs and had increased the number of Islamic Studies classes to twice a week to meet the demand (see also paragraph 2.47). Most Muslim prisoners we spoke to said they were treated reasonably. However, we observed problems with the cross-

contamination of utensils for serving halal food, which were being washed in the same water as non-halal utensils, which Muslim prisoners felt aggrieved about.

- 2.37** In our survey, 44% of the population identified as having mental health concerns and 38% as having a disability. These prisoners had far more negative perceptions of safety and their treatment on arrival at the prison and fewer than other prisoners felt they had enough suitable clothes to wear each week. Prisoners told us they were mainly anxious about prescribed medication being withdrawn without consultation, medication being discontinued in the event of a prison transfer and the impact on their mental health rather than being afraid of violence. (See key concern and recommendation S42.)
- 2.38** Prisoners with limited mobility were seen by the disability lead staff member and reasonable adjustments had been made to cells. There were no fully adapted cells in the prison and the cells were not large enough to properly accommodate a wheelchair. Some prisoners had personal emergency evacuation plans and staff knew who they were.
- 2.39** The prison had recently improved the quality of care planning they provided to transgender prisoners. They could order a number of items from a nationally approved list, but those we spoke to told us that almost half of the items were banned from Full Sutton because of its high security status, which prison managers confirmed. There were also inconsistencies in the products that they could have in possession or wear, such as makeup. Prison managers agreed that this needed to be looked at.
- 2.40** The monthly LGBT forums met frequently and provided prisoners with a good support network. The prison had adopted a sensible approach to a same-sex married couple, who were both detained at the prison, which meant they could receive social visits in the visits hall together to maintain ties.
- 2.41** Prison data showed that 19% of prisoners were under the age of 29, but provision for this group was limited. The younger prisoner policy was vague and lacked detail about what the prison would do to meet this group's needs. Gym staff were planning to arrange sessions for younger prisoners but they had not started.
- 2.42** Prison data showed that 13% of the population was over 60. The provision for older prisoners was reasonably good – there were walking clubs, a separate session in the gym and an activity session every day that was held in the chapel.

Recommendation

- 2.43** **Focus groups and forums for all prisoners with protected characteristics should take place frequently and be supported by prison managers.**

Faith and religion

- 2.44** The chaplaincy was almost fully staffed except for one full-time Anglican chaplain vacancy and the managing chaplain was actively recruiting to fill it. Faith provision was good and the chaplaincy was well-integrated across the prison. Chaplains provided a good range of support for prisoners, including well-being activities, such as yoga and mindfulness, alongside a programme of staff training events to promote faith awareness.
- 2.45** In our survey, 74% of prisoners said their religious beliefs were respected, 76% could speak to a chaplain in private if they needed to and 91% could attend religious services.

- 2.46** Prisoners we spoke to were positive about the chaplaincy provision and said they had been met by a member of the team within a day of arriving at the prison. Chaplains saw all segregated prisoners every day and played an active part in ACCT reviews. They also met all prisoners before their release and had links with community faith groups so that prisoners could access additional support.
- 2.47** The chapel was clean, bright and the multi-faith room was functional. There was a weekly programme of religious classes for all faiths. The chaplaincy maintained an annual programme of major festivals. The chaplaincy also organised volunteer prison visitors and during the inspection, 19 prisoners were receiving visits through the initiative. Prisoners we spoke to provided good examples of pastoral care and support for prisoners who had recently experienced a bereavement.

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.

- 2.48** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC) (see Glossary of terms) and HM Inspectorate of Prisons under a memorandum of understanding between the agencies. The Care Quality Commission issued a 'requirement to improve' notice following the inspection (see Appendix III).

Strategy, clinical governance and partnerships

- 2.49** Effective commissioning arrangements were in place and a recent health needs analysis provided coherent and strong direction towards improving the health of the population. Some subcontracted services were not sufficiently integrated into existing clinical governance processes, which meant some important patient issues had an insufficient profile. Not all partners were fully engaged with the local delivery board, which could have curtailed effective communication.
- 2.50** The leadership of clinical services was visible and operationally active. Staffing vacancies had stretched the service until recently, but the current staff profile had improved and was largely meeting demands. The current skills mix was being developed to better meet patients' needs and nursing input on the site was continuous. Mandatory training and clinical supervision were taking place and several staff were involved in ongoing professional development.
- 2.51** Clinical records we reviewed captured the core aspects of care, but the overall quality was variable. Information was shared appropriately within the bounds of medical confidentiality, with some trained officers acting as chaperones because of prisoners' risk assessments. Access to clinics was good and the regime ensured turnaround in the health care department was swift. Interpretation services were readily available for prisoners who needed them.
- 2.52** Prisoners were consulted well through a separate health forum and a group facilitated by an external agency to collect patients' experiences. The interactions we observed showed patients being treated with dignity and respect. Most activity was delivered in the health care

centre, which was relatively small, but it had sufficient rooms that mostly complied with infection prevention and control standards.

- 2.53** Skilled staff who were continually on site responded to health emergencies. Appropriate resuscitation equipment was readily accessible and checked regularly. Most prison staff had received first-aid training and knew how to use the automated external defibrillator placed in all units.
- 2.54** The health complaints process was generally well managed at a local level. We saw some formal complaints, handled by the regional team, that took several months to be dealt with and rarely involved patient contact, which was poor practice. Quality assurance at local level, particularly for complaints handled by other providers, was not sufficient (see paragraph 2.85).

Promoting health and well-being

- 2.55** There was no coordinated prison-wide approach to health promotion, which required a sharper focus, but a range of activities was provided, particularly for older prisoners. Information about services and health campaigns was displayed in the units. Effective health screening identified prisoners' needs and enabled them to have access to a range of vaccinations and national screening programmes; however, uptake was poor. A regular sexual health clinic was provided and barrier protection was discreetly available on request. There was a clear policy for managing outbreaks of communicable diseases.

Primary care and inpatient services

- 2.56** The number of prisoners transferring to the prison was relatively low, but the health care department was not always immediately informed of new admissions, which was not satisfactory. A brief cell-based health screening had been introduced to gauge the welfare of those prisoners until a more detailed assessment could be undertaken the following day. Changes in the way health care staff were notified of arrivals were introduced during the inspection.
- 2.57** Health care services were provided 24/7 by a caring, skilled staff group. Health care staff were visible and most patients told us they were generally satisfied with the services they received. Health care appointments were requested through written applications, which were reviewed and prioritised every day. Attendance at clinics was monitored and arrangements were in place to follow up non-attendance. Patients had access to a good range of primary care services, including GP clinics, daily nurse triage clinics and a daily walk-in centre in the workshops. Clinic waiting times were low, except for the optician, which had a six-week wait.
- 2.58** A regular team of GPs provided six clinical sessions a week. Waiting times for a routine appointment were similar to those in the community and patients had access to 'on-the-day' urgent GP appointments. Out-of-hours' GP cover was provided via a remote GP service, which offered advice.
- 2.59** The management and monitoring of long-term conditions undertaken by the lead nurse and lead GP were effective. A daily multidisciplinary health care professional meeting took place, attended by the primary care team. The meeting discussed prisoners' care needs and any immediate support required. Many prisoners were frustrated about health care, particularly pain management, but we found an effective multidisciplinary approach was taken to

overseeing and monitoring patients with pain management concerns, which facilitated consistent treatment decisions based on sound evidence.

- 2.60** Systems were in place for the effective management of referrals to secondary health care, including for ultrasound scans and x-rays. External hospital appointments were monitored, and cancellations were low. Proposed cancellations were assessed and prioritised by a GP or another lead clinician when required.
- 2.61** Experienced, skilled prison officers provided a calm well-managed environment in the small eight-bedded inpatient unit, supported by visiting nurses on a peripatetic basis. We observed positive interactions in the unit, and patients valued the support offered, particularly by officers. There were clear referral and discharge criteria and care met most needs. The environment was clean and cells catered for those with disabilities. Facilities in the unit were limited but adequate, and patients could attend off-ward activities, including the gym and library. End of life care facilities were available in the inpatient unit, but there were no prisoners on an end of life pathway during the inspection.

Social care

- 2.62** There was no current memorandum of understanding between the prison and the local authority, but we saw a draft copy during the inspection. However, there was good partnership working and dedicated social work support for prisoners. Overall, prisoners with social care needs were identified promptly and a formal assessment of their needs was undertaken; some prisoners received buddy support, which they appreciated. A prison operational manager ensured that prisoners had access to equipment and that adaptations were provided promptly and were appropriately maintained. Five prisoners were receiving personal care packages delivered by the primary care team. A number of these prisoners told us that officers supported them effectively, but that nurses were not consistently delivering the care they expected, which was borne out by the records we reviewed.

Recommendation

- 2.63 Prisoners receiving personal care packages should have the expected level of care at the times determined within the care package.**

Mental health care

- 2.64** A stepped care approach (mental health services that address low level anxiety and depression through to severe and enduring needs) was provided. The mental health service had improved since our previous inspection and met most prisoners' needs. It now operated seven days per week.
- 2.65** Despite vacancies in the nursing team, regular agency staff ensured the service provision was largely unaffected. Mental health nurses had relevant skills, including in delivering cognitive behavioural therapy (CBT). Three consultant psychiatrists continued to visit each week, and work was closely coordinated with the GP and integrated substance misuse and primary care staff at daily multidisciplinary meetings. Clinical staff knew their patients well.
- 2.66** There was an open referral system and the target of seeing all new patients within five days and urgent cases within 24 hours was being achieved. About 75 patients were on the caseload at any one time, with about 33% receiving support for mild to moderate problems. Fifty-four patients with complex or severe disorders were managed under the care

programme (CPA) (a framework that assesses and supports those with a mental illness), which was an unusually large number. Care planning and clinical record keeping were good.

- 2.67** Interventions were tailored to the individual and included in-cell workbooks, one-to-one therapies such as CBT, or solution-based short-term work. There was a plan to offer a wider range of therapy groups in 2020. Bereavement and loss counselling were accessible via the chaplaincy. Therapies for complex psychological issues, such as post-traumatic stress disorder, were unavailable due to a lack of senior clinical psychologists, but the service had decided to introduce trauma-related therapy, which would be helpful. Evidence-based pathways of treating prisoners with learning disabilities and neuro-disabilities had been re-established. Despite a lapse in 2019 due to low staffing, nine patients had supported living plans. Staff worked effectively with prison groups, such as the safer custody team and those involved in ACCT reviews.
- 2.68** No patient had been transferred to a mental health hospital since June 2017 within the current guideline (14 days) and five on the current list had waited from 10 weeks to 10 months. This was unacceptable. The pre-release preparation of patients using the CPA was appropriate and was coordinated with the OMU.
- 2.69** We were assured that, since 2017, all custody staff had received mental health awareness training. In the previous 18 months, 157 new officers who had undertaken prison officer entry level training had received further training and 12 officers had been trained by the service since January 2020 as part of a new monthly training initiative. Referrals from officers for mental health assessments were appropriate.

Recommendation

- 2.70** **Mental health services should provide appropriate therapies to respond to complex psychological needs.**

Substance misuse treatment

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

- 2.71** Drug and alcohol treatments were delivered through the integrated recovery team. There were enough recovery drug treatment service (DTS) workers to offer a comprehensive service. DTS staff contributed effectively to key prison working groups, such as those on the drugs strategy and safer custody. They were experienced, well trained and knew the patients in their care.
- 2.72** All new prisoners were screened for alcohol and substance misuse issues, using validated tools, within five days of entering the prison. This was followed by in-depth assessments as necessary, and treatment pathways for alcohol and drugs problems.
- 2.73** Psychosocial interventions included high-quality in-cell and guided workbooks; one-to-one personalised modules of care, and occasional group meetings focused on current issues, such as spice awareness.
- 2.74** Eight patients were receiving methadone (opiate substitution therapy (OST)) with the majority being on sensitive individual reducing regimes. The administration of OST was undertaken in private as prison staff supervision was consistent.

- 2.75** Clinical reviews occurred after five days and 13 weeks although, in practice, emerging issues were discussed by DTS workers, prescribers, mental health and primary care staff at the daily mandatory drug testing meetings, which coordinated seamless care. Pre-release preparation for patients was coordinated with the OMU and community substance misuse service providers.
- 2.76** Eighteen peer workers supported patients with their recovery programmes and provided feedback to enable service improvements. The prison planned to pay peer workers and involve them in helping to deliver a revised approach to group work from April 2020. Mutual support groups Alcoholics Anonymous and Narcotics Anonymous were organised and participants valued them.

Medicines optimisation and pharmacy services

- 2.77** Medicine management and pharmacy services were good. Medicines were supplied by an in-house pharmacy against valid prescriptions and stored on SystmOne (the electronic clinical information system). Fifty per cent of prisoners were prescribed medicines of whom 75% were given in-possession medicines. Current patient in-possession risk assessments were visible on SystmOne and when prescribing them, staff considered medicines and patient risks. The arrangements were reviewed every six months. Secure storage was available in cells and spot checks were undertaken of patients' in-possession medicines.
- 2.78** Medicines were stored securely at the correct temperature and transported appropriately. Treatment rooms were clean and tidy and in good decorative order. Medicines administration, including of controlled drugs, was well managed. Supervised medicines were administered by trained pharmacy technicians from two main areas twice a day, with provision for supplying medicines requiring interim doses outside these times. Administration was well organised and ensured there was a limited risk of diversion; queues were well managed and maintained patient privacy. Patients who did not attend medicine administration were followed up.
- 2.79** The pharmacist was an independent prescriber and ran a weekly clinic dealing with minor ailments and medicine use reviews. Pain management was formally reviewed every three months and potentially tradable medicines, such as tramadol (an opiate-based painkiller), gabapentin (an anti-epileptic medication) and pregabalin (an anti-convulsant), were administered through liquid or dispersible formulations (tablets that dissolve in water or in the mouth).
- 2.80** The pharmacy managed repeat prescriptions, re-ordered routine medicines and patients ordered their own 'ad hoc' medicines on a pharmacy application form. Review dates were adhered to and shown on SystmOne. Medicines that were for out-of-hours' supply were over-labelled by a licensed supplier. Over-the-counter remedies were administered through the policy on immediate health treatment without an appointment and patients could purchase a small number of medicines from the shop or through the pharmacy application form. Patients were given seven days' supply of medicine before being transferred or discharged.
- 2.81** The pharmacist chaired the monthly, multidisciplinary medicines and therapeutics committee meetings, where issues such as clinical audits, tradable medicines, policies, prescribing trends and patient safety, were discussed.

Dental services and oral health

- 2.82** A full range of NHS dental treatments was available. Governance arrangements were insufficient and did not effectively monitor service management, complaints, access to the service or staff training. Our review of waiting lists indicated waiting times were not too long, but we were not fully confident about this point. Previous recruitment problems had led to clinic cancellations, and in our survey, fewer patients (21%) than the comparator (33%) said it was very or quite easy to see the dentist. There was capacity to provide urgent care, with access to pain relief or to see the GP if required.
- 2.83** The dental suite was appropriately equipped and met infection prevention standards. The use of x-rays was recorded, but there was no external audit of x-ray use. Dental records were appropriately maintained. Advice on oral hygiene was provided during dental consultations, but information leaflets, although available, were not given to patients.
- 2.84** Non-attendance rates fluctuated and work had been undertaken to improve access. Patients were now advised of forthcoming appointments and those on the waiting list were offered the opportunity to attend cancelled appointments, however they could not always attend due to other commitments.
- 2.85** Patients had a negative perception of the dental service, reflected in complaints about access to treatment. Responses to complaints were inappropriate and did not always fully address the issue raised and there was no evidence of quality assurance (see paragraph 2.54). Feedback about the quality of the service was not gathered to improve patient outcomes.

Recommendation

- 2.86** **Governance arrangements require development to ensure the effective oversight and management of the day-to-day operation of the dental service.**

Section 3. Purposeful activity

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

Time out of cell

Expected outcomes:

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

- 3.1 Time out of cell was reasonable for most and good for those employed full time. Prisoners employed full time could be unlocked for 10 hours a day – some were unlocked over the lunchtime period and had their lunch in their workplace. During our checks we found 21% of prisoners locked in their cells during the core working day. This was similar to the previous inspection and lower than in most of the high security prisons. However, prisoners on the induction programme spent too much time locked in their cells.
- 3.2 Prisoners could spend an hour in the open air every day, including at the weekend. Significantly more prisoners in our survey (85%) reported being able to go outside for exercise more than five days in a typical week than at similar prisons (71%), although exercise yards remained bleak and provided prisoners with little to do.
- 3.3 The prison had organised some events, such as inspirational speakers. Overall, however, there were few ongoing or consistently held recreational activities, such as clubs or community competitions.
- 3.4 In our survey, 47% of prisoners said they used the library at least once a week, which was significantly lower than in similar prisons (63%). The library continued to collect limited data on library visits, but it did not monitor usage to determine the level of attendance or encourage prisoners to visit. The prison planned to move the library to a different location in the education department to help increase links with education and it hoped that this change would also improve attendance.
- 3.5 Prisoners had reasonable access to the library, which was open from Monday to Thursday, with the mornings being reserved for those wanting to work on legal matters (see paragraph 2.21). Vulnerable prisoners had equal access.
- 3.6 The library was welcoming and had an adequate range of reading material, including both fiction and non-fiction books, books in languages other than English and magazines and newspapers. However, there were no computers for prisoners to use for legal letters or study. Some prisoners also said they would like access to DVDs and computer games.
- 3.7 The library did not do enough to promote literacy. Although there were some Shannon Trust mentors in place to help prisoners learn to read, the library did not run any other initiatives, such as reading groups or Storybook Dads (which helps prisoners to record a story for their children to listen to at home).
- 3.8 Access to the gym and physical education (PE) facilities was reasonably good. Prisoners in full-time work and on the enhanced regime could have up to five gym sessions per week. Some of the more popular sessions, such as football, had a waiting list, but the activities team managed it well.

- 3.9** There were dedicated gym sessions for prisoners over 60, prisoners with mental health issues and those who needed remedial physiotherapy sessions. Vulnerable prisoners had equal access to PE facilities.
- 3.10** The main gym was a reasonable size and had a weights room, an indoor sports hall for team sports, such as football and badminton, a room with a small number of cardiovascular machines, a room with spinning bikes and an outdoor sports pitch that was used for football and the over 60s walking group.
- 3.11** Some of the equipment looked shabby, but all had the necessary health and safety certificates, and the weights and flooring were due to be replaced over the following few weeks. Prisoners who worked in the workshops also had access to a smaller gym and there were two cardiovascular machines in every unit, which prisoners valued.
- 3.12** The prison collected comprehensive data on which prisoners attended the gym, and unit officers or keyworkers spoke to those who were not attending to find out why. The prison had started to offer taster sessions for new group classes, such as spinning and circuits, which were initially proving to be popular.

Recommendation

- 3.13** The library should monitor usage to determine the level of attendance and take action to encourage prisoners to visit.

Education, skills and work activities (Ofsted)

Expected outcomes:

All prisoners are expected and enabled to engage in education, skills or work activities that promote personal development and employability. There are sufficient, suitable education, skills and work places to meet the needs of the population and provision is of a good standard.

This part of the inspection is conducted and written by Ofsted inspectors using Ofsted's inspection framework, available at <https://www.gov.uk/government/publications/education-inspection-framework>.

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

Ofsted inspects the provision of education, skills and work in custodial establishments using the same inspection framework and methodology it applies to further education and skills provision in the wider community. This covers four areas: quality of education, behaviour and attitudes, personal development and leadership and management. The findings are presented in the order of the learner journey in the establishment. Together with the key concerns and recommendations, provided in the summary section of this report, this constitutes Ofsted's assessment of what the establishment does well and what it needs to do better.

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

Overall effectiveness:	Requires improvement
Quality of education:	Requires improvement
Behaviour and attitudes:	Requires improvement
Personal development:	Requires improvement
Leadership and management:	Requires improvement

- 3.15** Following a period of insufficient leadership and oversight of purposeful activities, the standard of the provision had been allowed to decline. The new governor was taking an effective lead in promoting the need for change and had clarified well his expectations to improve education, skills and work, and recently appointed leaders had received support to do this. They had accurately identified weaknesses in the provision and established realistic plans to address them. However, many of the planned changes were at an early stage and had yet to have a positive impact on prisoners' experiences and outcomes.
- 3.16** The education and work curriculum had been reviewed and its purpose redefined to develop prisoners' learning to support their time in custody, as many had long sentences. Leaders planned to ensure that education and work were organised so that prisoners could gain knowledge, skills and accredited qualifications in English and mathematics before progressing to other education courses or work. However, this was not implemented well enough because too many prisoners had negative perceptions of education and refused to participate. This meant many education places were not used and sometimes it took too long to allocate prisoners to activities.
- 3.17** Prisoners had a limited understanding of the importance of planning activities in a logical order so that they could build their knowledge and expertise incrementally. Too many did not recognise how education, work and the additional activities available could support their personal development. The allocation of prisoners to prison work and industries was not based sufficiently on personal development needs, but on the prisoner's preference and/or security considerations. When prisoners moved roles, it was primarily due to security issues and not as part of planned progression in skills and knowledge development.
- 3.18** There was an insufficient number of activity places to enable prisoners who were able, to participate in purposeful activities. A few unemployed prisoners waited a long time before they were allocated to an activity. Leaders recognised this as a key priority for the prison and planned to increase the number of activity places and raise the standard. Plans to introduce a wood machining workshop were at an early stage, but, if implemented, had the potential to introduce up to 60 additional activity places, many of which were technically demanding. There was still a lack of higher-level education subjects to meet the needs of prisoners serving long sentences or with high levels of prior attainment. (See key concern and recommendation S43.)
- 3.19** The pay policy encouraged prisoners to undertake purposeful activity and provided equal pay between education and other work. However, prisoners participating in education did not have the same opportunities to earn bonuses as those involved in work.
- 3.20** There was insufficient access to impartial careers advice to help prisoners to plan activities that would better prepare them for their next steps in education, training or employment. Other than those taking distance learning courses, prisoners had minimal access to the

virtual campus (internet access for prisoners to community education, training and employment opportunities) so they could undertake research on potential future careers.

- 3.21** Teachers and instructors were suitably qualified and experienced. The recently appointed education manager had strengthened the performance management of teachers after it had lapsed in the time leading up to the transition from the previous education provider. Training and support for teachers were targeted appropriately towards developing their teaching skills. Prison instructors received little training or support to help them plan and deliver effective training activities in prison industries.
- 3.22** Teachers in education subjects and vocational training, such as industrial cleaning, knew their subjects and planned and taught them well. Most prisoners produced work of a good standard, showing that they had developed and built on their subject knowledge and skills. Teachers and instructors provided appropriate additional learning support for those who required it.
- 3.23** Too few prisoners had undertaken or gained qualifications in either English or mathematics. However, the number of prisoners who started courses had increased markedly since the change of education provider. It was too early to tell whether a recent move to starting all prisoners on an education course on the same date would improve their achievement rates. Although managers planned to introduce more opportunities for prisoners to achieve accredited qualifications at work, during the inspection, they were limited to only a few work activities, such as Braille transcribing, with very small numbers of prisoners participating. (See key concern and recommendation S44.)
- 3.24** Plans for delivering education outside classrooms and through a distance learning curriculum focused well on prisoners' needs. Teachers successfully worked with these prisoners and those who were reluctant were now participating. A small number of prisoners with very low-level literacy skills received targeted teaching and support, which enabled them to improve their knowledge and skills.
- 3.25** Overall, since the previous inspection, the number of prisoners taking Open University or distance learning courses had declined, but recent figures showed that the number participating was increasing in the current year. The achievement rates of those receiving support on these courses were high.
- 3.26** Leaders understood that the purpose of prison industries was for prisoners to develop good employability skills. Instructors were aware of this, but prisoners less so. New starters in each workshop participated in a structured induction programme, which included training in health and safety and safe lifting. In most workshops, prisoners' employability skills were recorded in a 'passport to employment' booklet during the four-week induction period. Booklets were often completed well and included encouraging and helpful feedback from instructors. However, because the booklet was not used beyond the initial induction period, the progress prisoners made in building new knowledge and skills and achieving personal development goals, was not assessed and went unrecognised. (See key concern and recommendation S44.)
- 3.27** A few busy, productive workplaces enabled prisoners to develop good vocational, social and teamworking skills. For example, the DHL workshop and the prison kitchen provided particularly useful work experience in busy, productive workplaces. However, they were the exception. In other workshops, instructors did not plan training activities to help prisoners further develop or consolidate their knowledge and skills. The textiles and cycle repair workshops did not have enough work available and prisoners became bored and disaffected. A few prisoners were not sufficiently motivated by the work in prison industries. This meant they developed negative attitudes, often undermining the development of a good work ethic in others.

- 3.28** Prisoners in wing cleaning roles took pride in their work and kept the wings clean. However, there were too many of them to keep them all purposefully occupied.
- 3.29** Staff set clear expectations about behaviour and most prisoners responded well. Prisoners felt safe in education and work activities. Respectful relationships between the large majority of prisoners and between prisoners and staff resulted in a calm and orderly learning and working environment. Attendance at prison work and industries was good. However, attendance rates were not high enough in education. Prisoners' movements were well managed, which ensured prisoners arrived on time.
- 3.30** Prison staff promoted courses provided by the prison to improve resilience and self-esteem well. Staff guided prisoners to additional sources of help to support their personal development and well-being. As a result, many prisoners recognised how their participation in these prison initiatives had improved their self-confidence and general outlook. Retired prisoners benefited from some social and leisure activities, such as social clubs, specific gym sessions and age-appropriate yoga classes. They helped them to participate actively in prison life.
- 3.31** The small number of prisoners who participated in the Learning Together project, delivered by Leeds Beckett University, benefited greatly from studying alongside and interacting with university students. They participated well in challenging and interesting discussions. Many of the prisoners described how the course had provided them with an ambition to study higher education courses in the future.
- 3.32** Most prisoners responded well to the action taken by managers and staff to promote equality and celebrate diversity. Prisoners participated well in a range of events planned to coincide with national awareness events, such as Black History Month and Great Britain Day, which recognised and celebrated the diverse backgrounds of the prison population.
- 3.33** Leaders had created a wide-ranging offer of additional qualifications and extra-curricular activities for prisoners, such as creative writing, creative art and a range of gym-based courses. However, they were only available sporadically and as a result, take-up of these opportunities was relatively low.

Recommendations

- 3.34** **The education provision should be extended so that the range of higher-level learning meets the needs of those serving longer sentences or with higher prior academic attainment.**
- 3.35** **Prisoners should receive impartial careers advice to help them plan an appropriate range of education and work activities to build their skills and knowledge incrementally and support their long-term career goals.**

Section 4. Rehabilitation and release planning

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

Children and families and contact with the outside world

Expected outcomes:

The prison supports prisoners' contact with their families and friends. Programmes aimed at developing parenting and relationship skills are facilitated by the prison. Prisoners not receiving visits are supported in other ways to establish or maintain family support.

- 4.1** In our survey, only 17% said they received a visit once a week and only 28% said it was easy for their family and friends to visit the prison. Prisoners we spoke to said it was difficult for their visitors to get to the prison using public transport and the prison did not provide alternative transport.
- 4.2** An appropriate range of initiatives were in place to promote direct contact with family and friends. For example, the assisted visits scheme helped with the costs of travel to and from the prison, accumulated visits were available, inter-prison phone calls were used when appropriate and the official prison visitor scheme was also available for those who did not have contact with their family. The email scheme to enable family and friends to stay in touch with prisoners was well used.
- 4.3** Access to phones on the wings was good and 94% of prisoners in our survey said they could use them every day. However, there were no plans to introduce technology to promote video calling, which would have provided prisoners with further direct contact with their family and friends. During the inspection, we found post that had been waiting for five days to be handed out and prisoners we spoke to said there were regular delays in receiving mail.
- 4.4** Prison managers held regular meetings with family members and friends who visited prisoners. The meetings were constructive and had informed changes, for example the visitors' centre was opened earlier to welcome people with children or those who had travelled long distances. A visitors' survey had also been undertaken – it provided practical feedback, such as ideas on how the refreshments in the visits hall could be improved.
- 4.5** The prison provided prisoners with 10 family visits a year catering for 12 prisoners per session. Prisoners described them as excellent and appreciated the way they were managed. They also said that the prison allowed all prisoners to apply and not just those on the enhanced level of the incentives and earned privileges (IEP) scheme.
- 4.6** There were few other initiatives or interventions to promote prisoners' relationships with family and friends, but the prison was appointing a family worker to take this work forward.
- 4.7** Most prisoners in our survey (72%) said their visitors were treated with respect. The visits hall and the high-risk category A visits room were bright, clean and appropriate. Partners of Prisoners (POPS) (a charity providing support to the families of prisoners) managed the

visitors' centre and prisoners told us their families found the service reasonable. There had been problems with keeping to scheduled visiting start and end times, but the situation had improved recently, which was confirmed by our observations and prisoners we spoke to.

Recommendation

- 4.8 A wider range of interventions and initiatives to enable prisoners to build positive relationships with their family and friends should be developed, implemented and evaluated.**

Reducing risk, rehabilitation and progression

Expected outcomes:

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

- 4.9** There was an up-to-date comprehensive resettlement needs analysis, which covered all the resettlement pathways and included information from P-Nomis (a database used in prisons for the management of offenders), offender assessment system (OASys) reports and a prisoner survey. However, the prison had not used the needs analysis effectively to inform its reducing reoffending strategy or action plan. Regular reducing reoffending meetings took place, but attendance was poor and often lacked a strategic focus, which had the potential to hinder communication and improvement across the resettlement pathways.
- 4.10** Most prisoners now had an OASys report outlining their risks and needs and the prison had worked hard to reduce a backlog of initial assessments over the previous six months. All prisoners should have had an initial assessment before arriving at Full Sutton, but 15% of all new arrivals (approximately two per month) arrived without one.
- 4.11** OASys documents were not being used proactively to evaluate progress made by individual prisoners or to promote their progression or continuing involvement with their sentence plan. For example, about 40% of prisoners had not had an OASys review within the previous year. The prison was following national guidance, which only required a review every two to three years or when there was a significant change. However, this meant that in some of the cases we looked at, assessments were out of date and sentence plans did not always reflect current circumstances, which left prisoners not knowing what was expected of them. We also found examples of assessments not being reviewed after significant events, such as a transfer to the prison. (See key concern and recommendation S45.) Despite all prisoners requiring a sentence plan, in our survey, only 76% said they had one.
- 4.12** The standard of the OASys reports we looked at was generally good – risk management plans were reasonably good and sentence plan objectives were specific. They were also countersigned by an appropriate manager.
- 4.13** The prison had recently implemented phase two of the offender management in custody (OMiC) model (see Glossary of terms), which transferred the management responsibility for a large number of high-risk of harm cases from the community to the prison offender manager (POM). This had resulted in an increase in probation POMs working in the offender management unit (OMU) and reducing the number of operational POMs.
- 4.14** Probation POMs managed the majority of high-risk and indeterminate sentence prisoners and were adequately trained. However, their caseloads were high and they typically managed

about 70 prisoners. Caseloads for operational POMs were lower, but the POMs' regular redeployment affected their ability to complete OMU tasks. In the cases we looked at, contact with prisoners was not always frequent enough or sufficiently focused on progression, but this was improving with the introduction of experienced probation POMs to the OMU, who could not be deployed elsewhere.

- 4.15** Fifty-nine per cent of the population was serving an indeterminate sentence and received reasonably good support. Most indeterminate sentence prisoners (ISPs) were allocated to a probation POM who met them on arrival. They also received some good support from the psychology team, especially if they were over tariff or going through the parole process. However, there were no ISP representatives or forums to determine whether their specific needs were being met. All prisoners, including ISPs, had access to good self-catering facilities (see paragraph 2.11), which helped develop their independent living skills. A large number of prisoners were going through the parole process and parole arrangements were well managed.

Public protection

- 4.16** During the inspection, the prison was holding a complex population and 83% were assessed as presenting a high or very high risk of harm to others. Public protection arrangements were generally robust. The prison held three different monthly meetings, which discussed the highest risk cases, prisoners due for release and those under monitoring or child contact restriction arrangements. Attendance at all three meetings was poor and mainly consisted of OMU and psychology staff. During the previous six months, security staff had never attended any of the three meetings and there was no evidence that the team submitted intelligence for discussion at the meetings to ensure good risk management of the most complex and high-risk prisoners.
- 4.17** Key security information was obtained and taken into account before major events, such as parole boards, sentence plan reviews and multi-agency public protection arrangement (MAPPA) meetings. However, getting this information was difficult and took up valuable POM time. In addition, the use of the violent and sex offender register (ViSOR) was poor, which meant that key risk information was not uploaded and shared on the database, hindering good communication. There was evidence of some good information sharing between the OMU and counter-terrorism departments about those convicted under the Terrorism Act.
- 4.18** Monitoring and child contact restriction arrangements were generally well managed, but overall responsibility for the process was split between the OMU and prison intelligence department, which, at times, meant it was disjointed, hindering good information sharing.
- 4.19** All prisoners were appropriately screened on arrival and placed under an initial period of phone and letter monitoring, which was reviewed after three months. However, we were not always confident that relevant information from different departments was considered when reviewing the monitoring decision. In addition, the prison did not routinely translate the letters or phone calls of those under public protection arrangements when they were in languages other than English, which meant key risk information could have been missed.
- 4.20** Child contact restriction arrangements were reasonably well managed. Visits staff knew which prisoners were under restrictions, and reviews were conducted annually. However, local authority children's services were not contacted during annual reviews to determine whether there had been a change in circumstances.

- 4.21** During the inspection, 98% of prisoners were subject to multi-agency public protection arrangements (MAPPA) because of the nature of their offence. MAPPA levels were confirmed prior to release and there was evidence of good communication with community probation officers prior to release to aid good risk management. Reports for MAPPA meetings in the community were timely and of a good standard.

Recommendations

- 4.22 Attendance at public protection meetings should be multidisciplinary and there should be good sharing of information between security and the OMU.**
- 4.23 The letters and phone calls of those under public protection monitoring should be translated if they are not in English.**

Categorisation and transfers

- 4.24** Categorisation reviews were timely, recommendations were implemented by the POMs and decisions were signed off by an appropriate manager.
- 4.25** More than a fifth of the population (22%) had category A security status. Re-categorisation decisions were generally well managed. There was clear evidence that the prisoner had been involved in the process and was notified of the outcome. OASys reports informing recommendations and decisions were often out of date, but it was clear from paperwork that information from multiple departments had been considered prior to making a decision.
- 4.26** Other categorisation decisions were not as well managed. There was often no evidence that the prisoner was involved in the process and POMs did not routinely speak to them prior to making their recommendations. It was also not always clear what information POMs had considered because again many of the OASys reports used to inform decisions were not up to date. Prisoners were sent a photocopy of the outcome, which included handwritten information that was hard to read and did not always clarify what prisoners needed to do to achieve a lower category or progression.
- 4.27** Transfers to other establishments were initiated by individual POMs, who requested a progressive move either to a lower security prison or to complete offending behaviour programmes. However, POMs told us about difficulties transferring some prisoners especially those convicted of sexual offences or where prisoners had a history of poor behaviour.

Recommendation

- 4.28 Prisoners should be actively involved in re-categorisation reviews, including being consulted prior to any decision and receiving clear information setting out the targets to be achieved.**

Interventions

Expected outcomes:

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

- 4.29** The programmes team completed a comprehensive needs analysis, which was used to inform accredited programme delivery and worked with other prisons across the high security estate.
- 4.30** During the inspection, the prison offered one main accredited programme Kaizen GV for high- or very high-risk prisoners who have committed a violent offence. The prison also offered the Healthy Sex Programme (HSP), a one-to-one programme for prisoners who had already completed a main sexual offending accredited programme, as well as the Healthy Identity Intervention (HII) for those convicted under the Terrorism Act.
- 4.31** There were enough programme spaces to meet the needs of those who were assessed as suitable for Kaizen GV or HII. Waiting lists were well managed and took account of prisoners' motivation and parole and release dates. The prison also responded to changes in prisoners' needs based on the annual analysis and was due to start offering Resolve (for medium-risk offenders) in April 2020.
- 4.32** However, there was very little provision for vulnerable prisoners. They could not participate in the Kaizen GV programme, and only two vulnerable prisoners had undertaken the HSP in the previous year. However, there were plans to deliver the Resolve programme to vulnerable prisoners in the current year.
- 4.33** Prisoners eligible for an accredited programme were required to transfer to another prison to complete it, which caused frustration among some who wanted to stay at Full Sutton. It was not always easy for prisoners to obtain a transfer to another prison, especially if they were category A prisoners who needed to undertake the Kaizen sexual offending programme. At the time of this inspection the only prison available for moves to complete a programme had a waiting list and we were given evidence that showed no prisoners had moved to that prison to complete a programme in the last six months.
- 4.34** A limited range of non-accredited interventions was available, including the Motivation and Engagement programme for prisoners who were not ready to complete an accredited programme. It was offered on a one-to-one or group basis and was available to mainstream and vulnerable prisoners.
- 4.35** The prison had started to roll out the Prisoner Engagement Framework which was delivered by the Interventions team. The framework included sessions delivered to keyworkers, to support their delivery of keyworker sessions under the OMiC model (see paragraph 2.2).
- 4.36** The psychology team also provided some excellent support to different departments, alongside undertaking one-to-one work with prisoners with complex needs. This included both emotional support and motivational work to help prepare prisoners to complete a group programme. The team allocated a named psychologist to different departments, such as the segregation and safer custody departments and the supporting transition and enabling progression unit. They attended all relevant meetings and supported prisoners, which aided good communication and allowed prisoners with the most complex needs to access regular psychological support. No specific support or interventions were available for those who had been victims of abuse.
- 4.37** Finance, benefit and debt support was reasonably good. The prison, primarily through the POMs, had supported about 15 prisoners to open bank accounts in the previous 12 months.

A small number of prisoners had also received assistance in obtaining identification. However, although demand was low, there was no formal system in place to help prisoners access benefit advice and support, and no finance, benefit or debt courses were available.

- 4.38** There were very few releases from Full Sutton – most were released to a probation hostel. Therefore, the need for accommodation support was low.

Recommendation

- 4.39** **There should be an adequate range of programmes and enough accredited programme spaces to meet the needs of vulnerable prisoners.**

Good practice

- 4.40** *The psychology team allocated a named psychologist to different departments across the prison so they could attend all relevant meetings and provide prisoners with the most complex needs with regular psychological support.*

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.

- 4.41** The demand for resettlement help was very low and only seven prisoners had been released in the previous six months. Because of the small number of releases, Full Sutton did not have formal resettlement services in place and relied on the POMs and the community offender manager working together.
- 4.42** We reviewed the cases of prisoners who had been released and found that resettlement provision was appropriate. All those being released were discussed at the public protection meeting eight months before release, but prisoners' cases were not formally revisited to determine what progress had been made. We did not find any gaps in the provision for seven prisoners who were released, but the failure to review prisoners' cases created the potential for some resettlement needs, such as benefits advice and support, to be overlooked (see paragraph 4.37).

Section 5. Summary of key concerns, 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

- 5.1** Key concern (S42): In our survey, 44% of the population said they had mental health concerns and 38% identified as having a disability. Their perception of how they were treated was more negative than those who did not have a mental health problem or disability, including in the area of safety. Prisoners told inspectors that they were worried about medication being discontinued rather than violence from others; however more needed to be done to determine the reasons behind these perceptions and take action to address them. (Directed to: the Governor)

Recommendation: The prison should analyse and improve the negative perceptions that prisoners with disabilities and mental health problems have of their treatment, in particular their views of safety.

- 5.2** Key concern (S43): There were not enough activity places to enable those who could, to participate in purposeful activities. Managers had only recently reviewed the curriculum in education and work and prisoners did not understand why they were being allocated to certain activities, such as education, which created a negative attitude towards it. (Directed to: the Governor)

Recommendation: The prison should increase the number of appropriate education and work activity places so all prisoners can engage in education and work, gaining the skills and knowledge that will help them sustain successful careers.

- 5.3** Key concern (S44): Instructors in prison industries did not assess or record the knowledge and skills prisoners gained and there were very few opportunities for prisoners to achieve accredited qualifications through their work. (Directed to: the Governor)

Recommendation: The knowledge and skills that prisoners gain through work should be assessed and recorded and where appropriate, prisoners should be able to achieve accredited qualifications.

- 5.4** Key concern (S45): About 40% of prisoners did not have an up-to-date assessment of their risks and needs. Risk assessments and sentence plans were sometimes out of date and did not always reflect prisoners' current circumstances, which meant prisoners got frustrated because they did not always know what they needed to do to progress. This was compounded by prisoners having infrequent, reactive, contact with prison offender managers that did not always focus sufficiently on progression. (Directed to: the Governor)

Recommendation: All prisoners should have an up-to-date OASys report with clear and relevant sentence plan objectives to help them reduce their risks and enable them to progress.

General recommendations

- 5.5** General recommendation (1.8): Prisoners should have prompt access to their property following transfer and should not have to wait a long time for their catalogue items. (Directed to: the Governor)
- 5.6** General recommendation (1.14): All incidents of violence, bullying or intimidation should be reported to the safer custody team for investigation. (Directed to: the Governor)
- 5.7** General recommendation (1.15): A comprehensive range of data should be analysed and used to develop an effective prison-wide violence reduction action plan. (Directed to: the Governor)
- 5.8** General recommendation (1.26): Prisoners who are segregated should have access to the wider prison regime as part of reintegration planning. (Directed to: the Governor)
- 5.9** General recommendation (1.32): Prisoners should only be strip-searched on the basis of an up-to-date risk assessment that is regularly reviewed to demonstrate it is still required. (Directed to: the Governor)
- 5.10** General recommendation (1.33): All requested suspicion drug tests should be completed. (Directed to: the Governor)
- 5.11** General recommendation (1.41): Staff should know how to identify vulnerable adults and make referrals to appropriate agencies. (Directed to: the Governor)
- 5.12** General recommendation (2.23): All complaint forms submitted should be logged as a complaint. Responses should be on time and fully address the issues raised by the complainant. (Directed to: the Governor)
- 5.13** General recommendation (2.24): The prison should conduct a comprehensive analysis of complaint data so that emerging problems, themes and trends over time can be identified and addressed. (Directed to: the Governor)
- 5.14** General recommendation (2.30): Responses to DIRFs should be timely and should involve talking to the prisoner as part of the investigation before a response is given. (Directed to: the Governor)
- 5.15** General recommendation (2.43): Focus groups and forums for all prisoners with protected characteristics should take place frequently and be supported by prison managers. (Directed to: the Governor)
- 5.16** General recommendation (2.63): Prisoners receiving personal care packages should have the expected level of care at the times determined within the care package. (Directed to: the Governor)
- 5.17** General recommendation (2.70): Mental health services should provide appropriate therapies to respond to complex psychological needs. (Directed to: the Governor)
- 5.18** General recommendation (2.86): Governance arrangements require development to ensure the effective oversight and management of the day-to-day operation of the dental service. (Directed to: the Governor)
- 5.19** General recommendation (3.13): The library should monitor usage to determine the level of attendance and take action to encourage prisoners to visit. (Directed to: the Governor)

- 5.20** General recommendation (3.34): The education provision should be extended so that the range of higher-level learning meets the needs of those serving longer sentences or with higher prior academic attainment. (Directed to: the Governor)
- 5.21** General recommendation (3.35): Prisoners should receive impartial careers advice to help them plan an appropriate range of education and work activities to build their skills and knowledge incrementally and support their long-term career goals. (Directed to: the Governor)
- 5.22** General recommendation (4.8): A wider range of interventions and initiatives to enable prisoners to build positive relationships with their family and friends should be developed, implemented and evaluated. (Directed to: the Governor)
- 5.23** General recommendation (4.22): Attendance at public protection meetings should be multidisciplinary and there should be good sharing of information between security and the OMU. (Directed to: the Governor)
- 5.24** General recommendation (4.23): The letters and phone calls of those under public protection monitoring should be translated if they are not in English. (Directed to: the Governor)
- 5.25** General recommendation (4.28): Prisoners should be actively involved in re-categorisation reviews, including being consulted prior to any decision and receiving clear information setting out the targets to be achieved. (Directed to: the Governor)
- 5.26** General recommendation (4.39): There should be an adequate range of programmes and enough accredited programme spaces to meet the needs of vulnerable prisoners. (Directed to: the Governor)

Examples of good practice

- 5.27** Good practice example (1.39): The use of safer custody officers as keyworkers for those judged to be most at risk of suicide or self-harm meant prisoners received good consistent support.
- 5.28** Good practice example (2.15): The 'opt out' self-catering scheme supported community living and helped prisoners develop important life skills, such as budgeting and cooking.
- 5.29** Good practice example (4.40): The psychology team allocated a named psychologist to different departments across the prison so they could attend all relevant meetings and provide prisoners with the most complex needs with regular psychological support.

Section 6. Appendices

Appendix I: Inspection team

Peter Clarke	Chief inspector
Sandra Fieldhouse	Team leader
Angela Johnson	Inspector
Alice Oddy	Inspector
Esra Sari	Inspector
Darren Wilkinson	Inspector
Caroline Wright	Inspector
Becky Duffield	Researcher
Rahul Jalil	Researcher
Billie Powell	Researcher
Joe Simmonds	Researcher
Steve Eley	Lead health and social care inspector
Paul Tarbuck	Health and social care inspector
Nicola Carlyle	Pharmacist
Kathleen Byrne	Care Quality Commission inspector
Nick Crombie	Ofsted inspector
Malcolm Fraser	Ofsted inspector
Ken Merry	Ofsted inspector
Steve Oliver-Watts	Ofsted inspector
Wendy Martin	HMI Probation 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 2016, reception was welcoming and efficient. First night arrangements were good, with a suitable focus on safety. The use of peer mentors to support and reassure new arrivals was effective. Few prisoners felt unsafe and levels of violence were low. Levels of self-harm were relatively low, and the care and management of prisoners at risk of self-harm were good on the wings, although there were examples of poor practice for such prisoners on the segregation unit. Security was proportionate and effective, and helped to maintain a stable and safe environment. Drug availability had increased and, although there was a good supply reduction strategy, it was not supported by good governance. Levels of use of force were low. The segregation unit was a concern; decisions were not always based on an adequate or ongoing assessment of risk. The regime on the unit was poor for many long-stay prisoners but the new reintegration unit was a good initiative. Substance misuse arrangements were good. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

Day-to-day oversight of decision making in the segregation unit should be adequate to ensure that actions are authorised appropriately. Unlock protocols should be proportionate to the risk posed. For prisoners at risk of self-harm, decisions to remove their clothing and locate them on the segregation unit should always be based on evidence of exceptional circumstances, and authorised by a senior manager. (S53)

Achieved

Recommendations

Prisoners' property should arrive with them, and should be issued within two days of arrival. (I.15)

Not achieved

The supply reduction strategy should be overseen and implemented with the involvement of the drug treatment service team. (I.36)

Achieved

The role of the reintegration unit should be clarified. (I.55)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2016, residential areas were calm and clean, and prisoners had good access to laundries and showers. Consultation arrangements were effective. Staff were competent and knew the prisoners in their care well. Relationships were respectful but formal and sometimes remote. The perceptions of black and minority ethnic and Muslim prisoners were very negative and some aspects of equality and diversity were underdeveloped. Complaints were well managed. Health services were reasonable overall. Catering arrangements and faith provision were good. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

Further action should be taken to understand and, where possible, improve black and minority ethnic and Muslim prisoners' negative perceptions of their treatment and conditions. (S54)

Achieved

Recommendations

The equality action group and senior management team should receive analysis of the implications of the equality monitoring tool data, decide on actions to be taken in consequence, and monitor the outcomes of those actions. (2.17)

Not achieved

Key prisoner information should be translated into relevant languages and professional interpreting services should be used for confidential matters. (2.26)

Not achieved

There should be a clear system for assessing and meeting the needs of those with disabilities, including safe and effective arrangements for peer support. (2.27)

Not achieved

A care plan should be in place and available to all staff for any prisoner seeking or contemplating gender reassignment. (2.28)

Achieved

All staff should participate in all aspects of core mandatory training, and clinical supervision should be available and taken up by all professional staff. (2.51)

Achieved

The emergency resuscitation equipment should be secured and maintained appropriately. (2.52)

Achieved

Custodial staff should be trained in basic life support, and know the location of and how to use automated external defibrillators. (2.53)

Achieved

There should be an ongoing timetable of health promotion activity that meets the needs of the population, supported by accessible literature, a health promotion action group and health promotion action plan. (2.54)

Not achieved

Access to smoking cessation and optician services should be improved and equivalent to community provision. (2.60)

Achieved

External appointments should not be cancelled unless there are exceptional reasons. (2.61)

Achieved

The inpatient unit should introduce a formal operational policy that establishes agreed admission and discharge criteria. (2.62)

Achieved

In-possession risk assessments should consider the risks of the drug as well as the patient and be reviewed regularly. (2.67)

Achieved

All supervised medicines should be transported and administered safely and in line with professional accountabilities. Confidentiality should be adhered to appropriately. (2.68)

Achieved

Access to the dentist should be equivalent to that in the community. (2.72)

Achieved

Mental health services should include clinical psychology, cognitive behavioural therapy and therapeutic groups. (2.77)

Partially achieved

Care programme approach planning arrangements should comply with national standards. (2.78)

Achieved

The transfer of patients to hospital under the Mental Health Act should occur within agreed Department of Health timescales. (2.79)

Not achieved

Mental health awareness training should be provided to all frontline prison staff. (2.80)

Achieved

Purposeful activity

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

At the last inspection, in 2016, the amount of time unlocked was good for most prisoners. The leadership and management of learning and skills and work activities were good, with a strong focus on personal and social development, English and mathematics. There were sufficient activity places and attendance was reasonable. The range and level of activities were adequate and set to improve further. The quality of most teaching and learning was good, and peer mentors were used well. Prisoners achieved well but some opportunities to record skills developed during unaccredited training were missed. The library facilities were reasonable and there was a good emphasis on literacy. Recreational PE was good and well used. Outcomes for prisoners were good against this healthy prison test.

Recommendations

Exercise areas should contain adequate seating and provide a pleasant environment for time outdoors. (3.4)

Not achieved

The analysis and use of data to identify areas of low participation and underperformance should be improved. (3.11)

Partially achieved

The education provision should be extended to include higher-level learning and a greater range of subjects to meet the needs of those serving longer sentences or with higher prior academic attainment. (3.17)

Not achieved

Opportunities for prisoners to gain accredited qualifications at work should be increased. (3.18)

Not achieved

The recording of skill development in education, training and work areas should be improved, to plan challenging progression targets. (3.26)

Not achieved

The recognition and recording of all behavioural, personal and social development to measure achievement on non-accredited courses should be improved. (3.27)

Not achieved

Support provided to learners on English courses should be improved so that all make good progress and achieve their planned qualifications. (3.36)

Not achieved

The analysis of data to monitor the use of the library should be improved. (3.40)

Not achieved

Resettlement

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

At the last inspection, in 2016, the strategic management of resettlement was adequate. The prison held a highly risky population but too many prisoners were without an offender assessment system (OASys) assessment. Some offender supervisors had good contact with prisoners and actively motivated them to reduce their risk but in too many cases the quality of contact was inadequate and prisoners struggled to progress. The oversight and management of public protection arrangements were mostly sound. Demand for resettlement services was very low. Pre-release planning was in place and most resettlement pathway provision was reasonable. Visits provision was continuing to improve and offending behaviour programmes generally met need. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

All prisoners should have an up-to-date offender assessment system (OASys) assessment. Offender supervisors should motivate and assist prisoners to reduce their risk and enable them to progress. (S55)

Not achieved

Recommendations

Multi-agency public protection arrangements (MAPPA) levels should be confirmed well ahead of release to enable the prison to be involved in pre-release risk management planning in all relevant cases. (4.17)

Achieved

Access to the National Probation Service case recording system should be provided, to improve communication and risk management information exchange. (4.18)

Achieved

The resettlement help provided by Advanced Personnel Management (APM) should be better publicised, and APM staff should attend the pre-release public protection meeting, to establish a risk-based resettlement plan. (4.24)

No longer relevant

All prisoners, whatever their privilege status, should be able to attend family visits, subject to security and risk assessments. (4.38)

Achieved

A family learning/parenting course should be reintroduced. (4.39)

Not achieved

Appendix III: Care Quality Commission Requirement Notice



Requirement Notices

Provider: Redbridge Associates Limited

Location: HMP Full Sutton

Location ID: 1-2124220572

Regulated activities: Diagnostic and screening procedures, surgical procedures and Treatment of disease, disorder or injury

Action we have told the provider to take

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

Regulation

Regulation 17 Good governance

Systems or processes must be established and operated effectively to ensure compliance with the requirements of the fundamental standards as set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

How the regulation was not being met:

There were no systems or processes that enabled the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular:

The management and oversight of the service had not identified or addressed gaps in the governance of the service, including;

- There was an absence of systems to manage and monitor responses to complaints. Some responses to complaints were inappropriate and did not fully address the complaint. Complainants were not advised of how to escalate their complaint if they remained unhappy with the response. There were no effective systems to record complaints or identify themes and learning.

- Essential audits to support the quality and safety of the service were not completed. Audits of radiography were not undertaken, and infection prevention audits were not undertaken at planned intervals.
- Patient feedback was not gathered on the quality of the service provided, for the purposes of continually evaluating and improving such services.

There were no systems or processes that ensured the registered person had maintained securely such records as are necessary to be kept in relation to persons employed in the carrying on of the regulated activity or activities. In particular:

- Records to provide assurance that all clinical staff, including associate dentists and dental nurses had adequate immunity for vaccine preventable infectious diseases.
- Records to provide assurance that staff had completed annual Cardiopulmonary Resuscitation (CPR), Infection Prevention training, Mental Capacity Assessment training and safeguarding training.

Requirement Notices

Provider: Spectrum Community Health C.I.C.

Location: Full Sutton HMPI

Location ID: 1-2124220572

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

Action we have told the provider to take

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

Regulation 17 Good governance

Systems or processes must be established and operated effectively to ensure compliance with the requirements of the fundamental standards as set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

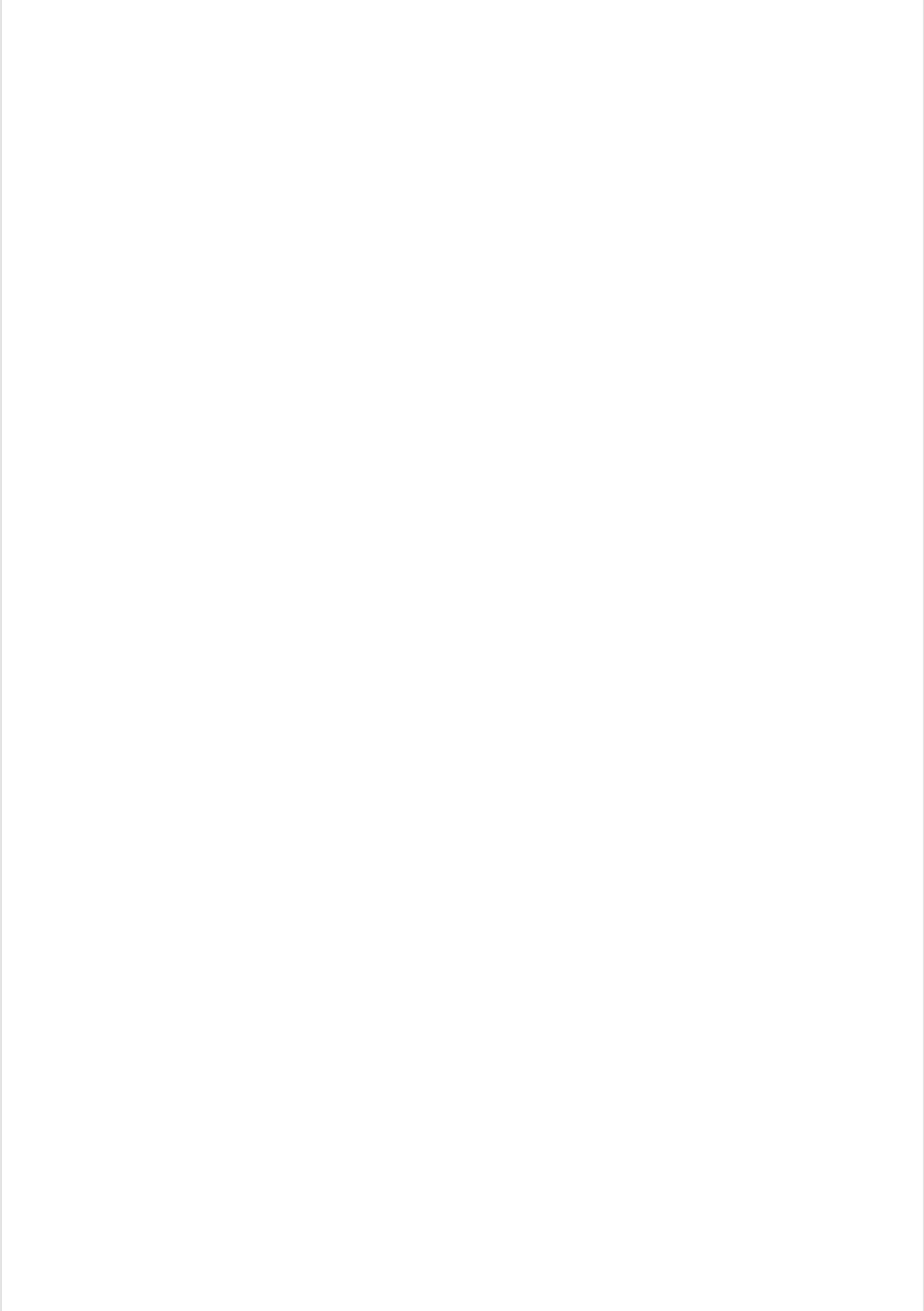
How the regulation was not being met:

There were no systems or processes that enabled the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular:

- Concerns regarding the governance of dental service were identified during the inspection. Contract monitoring meetings arrangements did not ensure that there was sufficient management and oversight of the service.
- Effective governance systems and processes in respect of complaints were not in place to assess, monitor and drive improvement in the quality and safety of the dental service, including the quality of the experience for people using the service.

There were no systems or processes that enabled the registered person to ensure that accurate, complete and contemporaneous records were being maintained securely in respect of each service user. In particular:

- Five prisoners were receiving personal care packages delivered by the primary health care team within the prison. Care plans were in place for these five prisoners, all of which detailed the care needs and level of support to be provided for each person. However, we observed that care records in respect of care provided were not maintained. For example, it wasn't clear when care or what care had been provided and sometimes no information was recorded.



Appendix IV: Prison population profile

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

Population breakdown by:

Status	21 and over	%
Sentenced	558	99
Recall	5	0.9
Convicted unsentenced	1	0.2
Remand	0	0
Civil prisoners	0	0
Detainees	0	0
Total	564	100%

Sentence	21 and over	%
Unsentenced	1	0.2
Less than 6 months	0	0
6 months to less than 12 months	0	0
12 months to less than 2 years	0	0
2 years to less than 4 years	0	0
4 years to less than 10 years	12	2.1
10 years and over (not life)	240	42.6
ISPP (indeterminate sentence for public protection)	24	4.3
Life	287	55.1
Total	564	100%

Age	Number of prisoners	%
Please state minimum age here:	22	
Under 21 years	0	0
21 years to 29 years	106	18.8
30 years to 39 years	168	29.8
40 years to 49 years	120	21.3
50 years to 59 years	95	16.8
60 years to 69 years	59	10.5
70 plus years	16	2.8
Please state maximum age here:	83	
Total	564	100%

Nationality	21 and over	%
British	517	91.7
Foreign nationals	47	8.3
Total	564	100%

Security category	21 and over	%
Uncategorised unsentenced	1	0.2
Uncategorised sentenced	0	0
Category A	124	22
Category B	433	76.8
Category C	5	0.9
Category D	1	0.2
Other	0	0
Total	564	100%

Ethnicity	21 and over	%
White		
British	362	64.2
Irish	4	0.7
Gypsy/Irish Traveller	16	2.8
Other white	33	5.9
Mixed		
White and black Caribbean	12	2.1
White and black African	4	0.7
White and Asian	3	0.5
Other mixed	8	1.4
Asian or Asian British		
Indian	8	1.4
Pakistani	41	7.3
Bangladeshi	6	1.1
Chinese	1	0.2
Other Asian	14	2.5
Black or black British		
Caribbean	21	3.7
African	13	2.3
Other black	13	2.3
Other ethnic group		
Arab	1	0.4
Other ethnic group	2	0.2
Not stated	2	0.4
Total	564	100%

Religion	21 and over	%
Baptist	0	0
Church of England	111	19.8
Roman Catholic	94	16.7
Other Christian denominations	49	8.7
Muslim	127	22.5
Sikh	1	0.2
Hindu	1	0.2
Buddhist	16	2.8
Jewish	3	0.5
Other	21	3.7
No religion	141	25
Total	564	100%

Other demographics	21 and over	%
Veteran (ex-armed services)	6	0.6
Total	6	0.6

Sentenced prisoners only

Length of stay	21 and over	
	Number	%
Less than 1 month	17	3
1 month to 3 months	31	5.5
3 months to 6 months	59	10.5
6 months to 1 year	100	17.6
1 year to 2 years	95	17
2 years to 4 years	103	18.3
4 years or more	157	27.8
Total	563	100%

Unsentenced prisoners only

Length of stay	21 and over	
	Number	%
Less than 1 month	1	100
1 month to 3 months	0	0
3 months to 6 months	0	0
6 months to 1 year	0	0
1 year to 2 years	0	0
2 years to 4 years	0	0
4 years or more	0	0
Total	1	100

Main offence	21 and over	%
Violence against the person	339	60.1
Sexual offences	169	30
Burglary	5	0.9
Robbery	31	5.5
Theft and handling	0	0
Fraud and forgery	0	0
Drugs offences	14	2.5
Other offences	6	1
Civil offences	0	0
Offence not recorded /holding warrant	0	0
Total	564	100

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

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 power calculation, 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 (95% confidence interval with a sampling error of 7%; the formula assumes a 75% response rate (65% in open establishments)).

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

Survey response

At the time of the survey on 17 February 2020 the prisoner population at HMP Full Sutton was 556. Using the sampling method described above, questionnaires were distributed to 193 prisoners. We received a total of 160 completed questionnaires, a response rate of 83%. This included one questionnaire completed via face-to-face interview. Eighteen prisoners declined to participate in the survey and 15 questionnaires were either not returned at all, or returned blank.

Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for HMP Full Sutton. For the comparator analyses, each question was reformulated into a binary 'yes/no' format and affirmative responses compared, using the Chi-square test (or Fisher's exact test if there are fewer than five responses in a group). Missing responses have been excluded from all analyses and for some questions, responses from a sub-group of the sample are reported (as indicated in the data).

Full survey results

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

Responses from HMP Full Sutton 2017 compared with those from other HMI Prisons surveys

Note: Percentages shown in the full breakdown may differ slightly from those shown in the comparative analyses. This is because the data has been weighted to enable valid statistical comparison between establishments. 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.

- Survey responses from HMP Full Sutton in 2020 compared with survey responses from other high security prisons inspected since September 2017.
- Survey responses from HMP Full Sutton in 2020 compared with survey responses from HMP Full Sutton in 2016.

Comparisons between different residential locations within HMP Full Sutton 2020

- Responses of prisoners on vulnerable prisoner wings (B, C and D wings) compared with those from the rest of the establishment.

Comparisons between self-reported sub-populations of prisoners within HMP Full Sutton 2020

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

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

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group. These analyses are carried out on summary data from selected survey questions only.

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

Survey summary

Background information

I.1	What wing or houseblock are you currently living on?	
	A Wing	27 (17%)
	B Wing	28 (18%)
	C Wing	29 (18%)
	D Wing	30 (19%)
	E Wing	24 (15%)
	F Wing	15 (9%)
	Segregation unit.....	5 (3%)
	Health care unit.....	2 (1%)
I.2	How old are you?	
	Under 21	0 (0%)
	21 - 25.....	16 (10%)
	26 - 29.....	19 (12%)
	30 - 39.....	45 (28%)
	40 - 49.....	32 (20%)
	50 - 59.....	23 (14%)
	60 - 69.....	18 (11%)
	70 or over.....	6 (4%)
I.3	What is your ethnic group?	
	White - English/ Welsh/ Scottish/ Northern Irish/ British	97 (62%)
	White - Irish.....	2 (1%)
	White - Gypsy or Irish Traveller.....	5 (3%)
	White - any other White background	12 (8%)
	Mixed - White and Black Caribbean	4 (3%)
	Mixed - White and Black African	3 (2%)
	Mixed - White and Asian	4 (3%)
	Mixed - any other Mixed ethnic background	0 (0%)
	Asian/ Asian British - Indian.....	2 (1%)
	Asian/ Asian British - Pakistani.....	14 (9%)
	Asian/ Asian British - Bangladeshi.....	1 (1%)
	Asian/ Asian British - Chinese.....	0 (0%)
	Asian - any other Asian Background	0 (0%)
	Black/ Black British - Caribbean.....	6 (4%)
	Black/ Black British - African	3 (2%)
	Black - any other Black/ African/ Caribbean background.....	1 (1%)
	Arab.....	1 (1%)
	Any other ethnic group.....	2 (1%)
I.4	How long have you been in this prison?	
	Less than 6 months	11 (7%)
	6 months or more.....	145 (93%)
I.5	Are you currently serving a sentence?	
	Yes.....	159 (100%)
	Yes - on recall.....	0 (0%)
	No - on remand or awaiting sentence.....	0 (0%)
	No - immigration detainee.....	0 (0%)

1.6 How long is your sentence?

Less than 6 months.....	0 (0%)
6 months to less than 1 year.....	0 (0%)
1 year to less than 4 years.....	0 (0%)
4 years to less than 10 years.....	11 (7%)
10 years or more.....	66 (42%)
IPP (indeterminate sentence for public protection).....	9 (6%)
Life.....	72 (46%)
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.....	18 (11%)
No.....	127 (80%)
Don't remember.....	13 (8%)

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

Less than 2 hours.....	110 (70%)
2 hours or more.....	28 (18%)
Don't remember.....	19 (12%)

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

Yes.....	122 (77%)
No.....	25 (16%)
Don't remember.....	11 (7%)

2.4 Overall, how were you treated in reception?

Very well.....	39 (25%)
Quite well.....	85 (54%)
Quite badly.....	20 (13%)
Very badly.....	2 (1%)
Don't remember.....	12 (8%)

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

Problems getting phone numbers.....	55 (35%)
Contacting family.....	50 (32%)
Arranging care for children or other dependants.....	1 (1%)
Contacting employers.....	1 (1%)
Money worries.....	20 (13%)
Housing worries.....	6 (4%)
Feeling depressed.....	38 (25%)
Feeling suicidal.....	13 (8%)
Other mental health problems.....	38 (25%)
Physical health problems.....	26 (17%)
Drug or alcohol problems (e.g. withdrawal).....	12 (8%)
Problems getting medication.....	38 (25%)
Needing protection from other prisoners.....	7 (5%)
Lost or delayed property.....	63 (41%)
Other problems.....	17 (11%)
Did not have any problems.....	34 (22%)

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

Yes.....	45 (30%)
No.....	70 (47%)
Did not have any problems when I first arrived.....	34 (23%)

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.....	69 (45%)
Toiletries / other basic items	79 (52%)
A shower.....	64 (42%)
A free phone call	33 (22%)
Something to eat.....	116 (76%)
The chance to see someone from health care	55 (36%)
The chance to talk to a Listener or Samaritans.....	20 (13%)
Support from another prisoner (e.g. Insider or buddy).....	25 (16%)
Wasn't offered any of these things	18 (12%)

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

Very clean	21 (13%)
Quite clean	79 (51%)
Quite dirty	23 (15%)
Very dirty	25 (16%)
Don't remember	8 (5%)

3.3 Did you feel safe on your first night here?

Yes	117 (75%)
No.....	28 (18%)
Don't remember	11 (7%)

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

	Yes	No	Don't remember
Access to the prison shop / canteen?	55 (36%)	82 (54%)	15 (10%)
Free PIN phone credit?	31 (21%)	102 (69%)	15 (10%)
Numbers put on your PIN phone?	64 (44%)	66 (46%)	15 (10%)

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

Yes.....	52 (35%)
No.....	61 (41%)
Have not had an induction.....	37 (25%)

On the wing

4.1 Are you in a cell on your own?

Yes.....	156 (100%)
No, I'm in a shared cell or dormitory.....	0 (0%)

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

Yes.....	99 (64%)
No.....	34 (22%)
Don't know.....	22 (14%)
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?	133 (85%)	22 (14%)	1 (1%)
Can you shower every day?	152 (98%)	1 (1%)	2 (1%)
Do you have clean sheets every week?	133 (86%)	18 (12%)	3 (2%)
Do you get cell cleaning materials every week?	140 (92%)	10 (7%)	3 (2%)
Is it normally quiet enough for you to relax or sleep at night?	123 (79%)	31 (20%)	1 (1%)
Can you get your stored property if you need it?	54 (36%)	43 (29%)	53 (35%)

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

Very clean	18 (12%)
Quite clean	86 (58%)
Quite dirty	35 (23%)
Very dirty	10 (7%)

Food and canteen

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

Very good	13 (9%)
Quite good	79 (52%)
Quite bad	40 (26%)
Very bad	20 (13%)

5.2 Do you get enough to eat at mealtimes?

Always	37 (24%)
Most of the time	54 (35%)
Some of the time	41 (27%)
Never	21 (14%)

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

Yes	113 (74%)
No	38 (25%)
Don't know	2 (1%)

Relationships with staff

6.1 Do most staff here treat you with respect?

Yes	124 (83%)
No	26 (17%)

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

Yes	122 (79%)
No	32 (21%)

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

Yes	91 (58%)
No	67 (42%)

6.4	How helpful is your personal or named officer?	
	Very helpful.....	57 (37%)
	Quite helpful.....	48 (31%)
	Not very helpful	21 (13%)
	Not at all helpful.....	23 (15%)
	Don't know.....	5 (3%)
	Don't have a personal / named officer	2 (1%)
6.5	How often do you see prison governors, directors or senior managers talking to prisoners?	
	Regularly.....	14 (9%)
	Sometimes.....	57 (37%)
	Hardly ever	76 (49%)
	Don't know.....	9 (6%)
6.6	Do you feel that you are treated as an individual in this prison?	
	Yes.....	73 (48%)
	No.....	78 (52%)
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	
	Yes, and things sometimes change.....	45 (29%)
	Yes, but things don't change.....	69 (44%)
	No.....	21 (13%)
	Don't know.....	22 (14%)

Faith

7.1	What is your religion?	
	No religion.....	51 (32%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	63 (40%)
	Buddhist.....	5 (3%)
	Hindu.....	0 (0%)
	Jewish	1 (1%)
	Muslim.....	31 (20%)
	Sikh	0 (0%)
	Other	6 (4%)
7.2	Are your religious beliefs respected here?	
	Yes.....	78 (50%)
	No.....	20 (13%)
	Don't know.....	8 (5%)
	Not applicable (no religion).....	51 (32%)
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	
	Yes.....	80 (51%)
	No.....	11 (7%)
	Don't know.....	15 (10%)
	Not applicable (no religion).....	51 (32%)
7.4	Are you able to attend religious services, if you want to?	
	Yes.....	95 (61%)
	No.....	6 (4%)
	Don't know.....	3 (2%)
	Not applicable (no religion).....	51 (33%)

Contact with family and friends

- 8.1 Have staff here encouraged you to keep in touch with your family / friends?**
 Yes 54 (36%)
 No 95 (64%)
- 8.2 Have you had any problems with sending or receiving mail (letters or parcels)?**
 Yes 72 (46%)
 No 83 (54%)
- 8.3 Are you able to use a phone every day (if you have credit)?**
 Yes 147 (94%)
 No 10 (6%)
- 8.4 How easy or difficult is it for your family and friends to get here?**
 Very easy 8 (5%)
 Quite easy 34 (22%)
 Quite difficult 42 (27%)
 Very difficult 53 (35%)
 Don't know 16 (10%)
- 8.5 How often do you have visits from family or friends?**
 More than once a week 4 (3%)
 About once a week 22 (15%)
 Less than once a week 69 (46%)
 Not applicable (don't get visits) 54 (36%)
- 8.6 Do visits usually start and finish on time?**
 Yes 35 (38%)
 No 58 (62%)
- 8.7 Are your visitors usually treated respectfully by staff?**
 Yes 63 (72%)
 No 25 (28%)

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 98 (64%)
 Yes, but these times are not usually kept to 49 (32%)
 No 7 (5%)
- 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 12 (8%)
 2 to 6 hours 51 (33%)
 6 to 10 hours 66 (43%)
 10 hours or more 16 (10%)
 Don't know 9 (6%)

- 9.3 How long do you usually spend out of your cell on a typical Saturday or Sunday?**
- | | |
|-------------------------|----------|
| Less than 2 hours | 10 (7%) |
| 2 to 6 hours..... | 93 (61%) |
| 6 to 10 hours | 39 (25%) |
| 10 hours or more | 3 (2%) |
| 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 | 0 (0%) |
| 1 or 2 | 10 (6%) |
| 3 to 5..... | 23 (15%) |
| More than 5..... | 114 (74%) |
| Don't know..... | 7 (5%) |
- 9.5 How many days in a typical week do you get association, if you want it?**
- | | |
|------------------|-----------|
| None | 1 (1%) |
| 1 or 2 | 7 (5%) |
| 3 to 5..... | 13 (8%) |
| More than 5..... | 128 (83%) |
| Don't know..... | 5 (3%) |
- 9.6 How many days in a typical week could you go outside for exercise, if you wanted to?**
- | | |
|------------------|-----------|
| None | 3 (2%) |
| 1 or 2 | 2 (1%) |
| 3 to 5..... | 15 (10%) |
| More than 5..... | 133 (85%) |
| Don't know..... | 3 (2%) |
- 9.7 Typically, how often do you go to the gym?**
- | | |
|----------------------------|----------|
| Twice a week or more | 79 (52%) |
| About once a week..... | 8 (5%) |
| Less than once a week..... | 7 (5%) |
| Never | 59 (39%) |
- 9.8 Typically, how often do you go to the library?**
- | | |
|----------------------------|----------|
| Twice a week or more | 22 (14%) |
| About once a week..... | 51 (32%) |
| Less than once a week..... | 41 (26%) |
| Never | 43 (27%) |
- 9.9 Does the library have a wide enough range of materials to meet your needs?**
- | | |
|-----------------------------|----------|
| Yes..... | 60 (40%) |
| No..... | 47 (31%) |
| Don't use the library | 43 (29%) |

Applications, complaints and legal rights

- 10.1 Is it easy for you to make an application?**
- | | |
|-----------------|-----------|
| Yes..... | 129 (82%) |
| No..... | 20 (13%) |
| Don't know..... | 9 (6%) |

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?	89 (61%)	50 (34%)	8 (5%)
Are applications usually dealt with within 7 days?	56 (39%)	79 (55%)	8 (6%)

10.3 Is it easy for you to make a complaint?

Yes.....	109 (70%)
No.....	25 (16%)
Don't know.....	21 (14%)

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?	39 (28%)	65 (46%)	37 (26%)
Are complaints usually dealt with within 7 days?	47 (33%)	58 (41%)	37 (26%)

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

Yes.....	38 (25%)
No.....	84 (56%)
Not wanted to make a complaint	28 (19%)

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?	70 (47%)	33 (22%)	26 (17%)	20 (13%)
Attend legal visits?	65 (46%)	17 (12%)	34 (24%)	25 (18%)
Get bail information?	10 (7%)	12 (9%)	46 (34%)	67 (50%)

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

Yes.....	74 (48%)
No.....	61 (40%)
Not had any legal letters	19 (12%)

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

	Very easy	Quite easy	Quite difficult	Very difficult	Don't know
Doctor	13 (8%)	51 (33%)	59 (38%)	25 (16%)	6 (4%)
Nurse	29 (19%)	82 (53%)	25 (16%)	11 (7%)	7 (5%)
Dentist	7 (5%)	25 (16%)	51 (34%)	53 (35%)	16 (11%)
Mental health workers	12 (8%)	43 (30%)	18 (12%)	26 (18%)	46 (32%)

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	24 (16%)	69 (45%)	27 (18%)	23 (15%)	9 (6%)
Nurse	31 (21%)	66 (44%)	25 (17%)	19 (13%)	8 (5%)
Dentist	20 (13%)	53 (35%)	25 (17%)	26 (17%)	27 (18%)
Mental health workers	22 (15%)	34 (23%)	15 (10%)	24 (16%)	53 (36%)

11.3 Do you have any mental health problems?

Yes	68 (44%)
No.....	85 (56%)

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

Yes	38 (25%)
No.....	30 (20%)
Don't have any mental health problems.....	85 (56%)

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

Very good	15 (10%)
Quite good	69 (45%)
Quite bad	41 (26%)
Very bad	23 (15%)
Don't know.....	7 (5%)

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	58 (38%)
No.....	95 (62%)

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

Yes	22 (15%)
No.....	33 (22%)
Don't have a disability	95 (63%)

12.3 Have you been on an ACCT in this prison?

Yes	23 (15%)
No.....	128 (85%)

12.4 If you have been on an ACCT in this prison, did you feel cared for by staff?

Yes	8 (5%)
No.....	13 (9%)
Have not been on an ACCT in this prison.....	128 (86%)

12.5 How easy or difficult is it for you to speak to a Listener, if you need to?

Very easy	30 (20%)
Quite easy	39 (26%)
Quite difficult	10 (7%)
Very difficult	4 (3%)
Don't know.....	66 (43%)
No Listeners at this prison	3 (2%)

Alcohol and drugs

13.1	Did you have an alcohol problem when you came into this prison?	
	Yes	21 (14%)
	No.....	134 (86%)
13.2	Have you been helped with your alcohol problem in this prison?	
	Yes	9 (6%)
	No.....	11 (7%)
	Did not / do not have an alcohol problem	134 (87%)
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	24 (15%)
	No.....	131 (85%)
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	18 (12%)
	No.....	135 (88%)
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	12 (8%)
	No.....	140 (92%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	18 (12%)
	No.....	15 (10%)
	Did not / do not have a drug problem.....	117 (78%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy	44 (29%)
	Quite easy	25 (16%)
	Quite difficult	5 (3%)
	Very difficult	5 (3%)
	Don't know.....	75 (49%)
13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy	24 (16%)
	Quite easy	23 (15%)
	Quite difficult	10 (7%)
	Very difficult	12 (8%)
	Don't know.....	84 (55%)

Safety

14.1	Have you ever felt unsafe here?	
	Yes	72 (46%)
	No.....	85 (54%)
14.2	Do you feel unsafe now?	
	Yes	33 (22%)
	No.....	119 (78%)

- I4.3 Have you experienced any of the following types of bullying / victimisation from other prisoners here?**
- | | |
|---|----------|
| Verbal abuse..... | 56 (38%) |
| Threats or intimidation..... | 44 (30%) |
| Physical assault..... | 24 (16%) |
| Sexual assault..... | 3 (2%) |
| Theft of canteen or property..... | 38 (26%) |
| Other bullying / victimisation | 32 (21%) |
| Not experienced any of these from prisoners here..... | 81 (54%) |
- I4.4 If you were being bullied / victimised by other prisoners here, would you report it?**
- | | |
|-----------|----------|
| Yes | 62 (41%) |
| No..... | 88 (59%) |
- I4.5 Have you experienced any of the following types of bullying / victimisation from staff here?**
- | | |
|---|----------|
| Verbal abuse..... | 41 (27%) |
| Threats or intimidation..... | 40 (26%) |
| Physical assault..... | 12 (8%) |
| Sexual assault..... | 0 (0%) |
| Theft of canteen or property..... | 11 (7%) |
| Other bullying / victimisation | 25 (16%) |
| Not experienced any of these from staff here..... | 93 (61%) |
- I4.6 If you were being bullied / victimised by staff here, would you report it?**
- | | |
|-----------|----------|
| Yes | 86 (57%) |
| No..... | 65 (43%) |

Behaviour management

- I5.1 Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?**
- | | |
|--|----------|
| Yes | 83 (55%) |
| No..... | 57 (38%) |
| Don't know what the incentives / rewards are | 11 (7%) |
- I5.2 Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?**
- | | |
|-------------------------------|----------|
| Yes | 83 (55%) |
| No..... | 44 (29%) |
| Don't know..... | 13 (9%) |
| Don't know what this is | 11 (7%) |
- I5.3 Have you been physically restrained by staff in this prison in the last 6 months?**
- | | |
|----------|-----------|
| Yes..... | 12 (8%) |
| No..... | 144 (92%) |
- I5.4 If you have been restrained by staff in this prison in the last 6 months, did anyone come and talk to you about it afterwards?**
- | | |
|--|-----------|
| Yes | 2 (1%) |
| No..... | 10 (6%) |
| Don't remember | 0 (0%) |
| Not been restrained here in last 6 months..... | 144 (92%) |
- I5.5 Have you spent one or more nights in the segregation unit in this prison in the last 6 months?**
- | | |
|-----------|-----------|
| Yes | 32 (21%) |
| No..... | 118 (79%) |

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?	13 (42%)	18 (58%)
Could you shower every day?	12 (40%)	18 (60%)
Could you go outside for exercise every day?	16 (53%)	14 (47%)
Could you use the phone every day (if you had credit)?	9 (31%)	20 (69%)

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	67 (45%)	51 (34%)	31 (21%)	0 (0%)
Vocational or skills training	21 (15%)	63 (45%)	43 (31%)	12 (9%)
Prison job	40 (27%)	96 (64%)	12 (8%)	1 (1%)
Voluntary work outside of the prison	0 (0%)	17 (12%)	29 (20%)	97 (68%)
Paid work outside of the prison	0 (0%)	15 (11%)	26 (18%)	101 (71%)

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	64 (45%)	48 (34%)	30 (21%)
Vocational or skills training	38 (28%)	44 (32%)	55 (40%)
Prison job	40 (28%)	77 (55%)	24 (17%)
Voluntary work outside of the prison	20 (14%)	13 (9%)	105 (76%)
Paid work outside of the prison	21 (15%)	13 (9%)	105 (76%)

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

Yes	85 (56%)
No.....	56 (37%)
Not applicable (e.g. if you are retired, sick or on remand)	10 (7%)

Planning and progression

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

Yes	114 (76%)
No.....	36 (24%)

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

Yes	99 (88%)
No.....	6 (5%)
Don't know what my objectives or targets are.....	7 (6%)

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

Yes	63 (59%)
No.....	37 (35%)
Don't know what my objectives or targets are.....	7 (7%)

17.4 If you have done any of the following things in this prison, did they help you to achieve your objectives or targets?

	Yes, this helped	No, this didn't help	Not done / don't know
Offending behaviour programmes	38 (35%)	16 (15%)	55 (50%)
Other programmes	29 (28%)	13 (13%)	61 (59%)
One to one work	29 (28%)	12 (12%)	62 (60%)
Being on a specialist unit	7 (7%)	3 (3%)	89 (90%)
ROTL - day or overnight release	0 (0%)	2 (2%)	95 (98%)

Preparation for release

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

Yes	1 (1%)
No.....	143 (94%)
Don't know.....	8 (5%)

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

Very near.....	0 (0%)
Quite near.....	1 (100%)
Quite far.....	0 (0%)
Very far.....	0 (0%)

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

Yes.....	1 (100%)
No.....	0 (0%)

18.4 Are you getting help to sort out the following things for when you are released?

	Yes, I'm getting help with this	No, but I need help with this	No, and I don't need help with this
Finding accommodation	0 (0%)	1 (100%)	0 (0%)
Getting employment	0 (0%)	1 (100%)	0 (0%)
Setting up education or training	0 (0%)	1 (100%)	0 (0%)
Arranging benefits	0 (0%)	1 (100%)	0 (0%)
Sorting out finances	0 (0%)	1 (100%)	0 (0%)
Support for drug or alcohol problems	0 (0%)	0 (0%)	1 (100%)
Health / mental health support	0 (0%)	1 (100%)	0 (0%)
Social care support	0 (0%)	1 (100%)	0 (0%)
Getting back in touch with family or friends	0 (0%)	0 (0%)	1 (100%)

More about you

19.1 Do you have children under the age of 18?

Yes.....	67 (44%)
No.....	85 (56%)

19.2 Are you a UK / British citizen?

Yes.....	139 (91%)
No.....	13 (9%)

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

Yes.....	11 (7%)
No.....	141 (93%)

- 19.4 Have you ever been in the armed services (e.g. army, navy, air force)?**
 Yes 12 (8%)
 No 141 (92%)
- 19.5 What is your gender?**
 Male 152 (100%)
 Female 0 (0%)
 Non-binary 0 (0%)
 Other 0 (0%)
- 19.6 How would you describe your sexual orientation?**
 Straight / heterosexual 142 (94%)
 Gay / lesbian / homosexual 4 (3%)
 Bisexual 5 (3%)
 Other 0 (0%)
- 19.7 Do you identify as transgender or transsexual?**
 Yes 1 (1%)
 No 146 (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 4 (3%)
 Less likely to offend 86 (61%)
 Made no difference 52 (37%)

HMP Full Sutton 2020

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

Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
41	116	31	126

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	10%	10%	10%	10%
	Are you 50 years of age or older?	22%	33%	13%	34%
1.3	Are you from a black and minority ethnic group?			84%	12%
7.1	Are you Muslim?	63%	4%		
11.3	Do you have any mental health problems?	26%	49%	39%	45%
12.1	Do you consider yourself to have a disability?	26%	41%	40%	37%
19.2	Are you a foreign national?	8%	9%	0%	11%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	3%	9%	4%	8%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	61%	83%	47%	86%
2.4	Overall, were you treated very / quite well in reception?	66%	83%	63%	83%
2.5	When you first arrived, did you have any problems?	68%	81%	77%	78%
For those who had any problems when they first arrived:					
2.6	Did staff help you to deal with these problems?	48%	36%	36%	41%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	75%	76%	70%	77%
3.5	Have you had an induction at this prison?	84%	72%	76%	75%
For those who have had an induction:					
3.5	Did your induction cover everything you needed to know about this prison?	59%	42%	59%	44%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	73%	61%	70%	63%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	90%	84%	87%	86%
	- Can you shower every day?	97%	99%	97%	99%
	- Do you have clean sheets every week?	93%	85%	93%	84%
	- Do you get cell cleaning materials every week?	85%	94%	80%	94%
	- Is it normally quiet enough for you to relax or sleep at night?	88%	77%	84%	79%
	- Can you get your stored property if you need it?	41%	34%	33%	38%

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

Black and minority ethnic	White	Muslim	Non-Muslim
41	116	31	126

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	68%	57%
5.3	Does the shop / canteen sell the things that you need?	68%	77%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	83%	83%
6.2	Are there any staff here you could turn to if you had a problem?	77%	80%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	59%	58%
6.6	Do you feel that you are treated as an individual in this prison?	45%	50%
FAITH			
For those who have a religion:			
7.2	Are your religious beliefs respected here?	77%	72%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	77%	75%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	33%	37%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	50%	45%
8.3	Are you able to use a phone every day (if you have credit)?	95%	93%
For those who get visits:			
8.7	Are your visitors usually treated respectfully by staff?	75%	71%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	3%	8%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	8%	12%
For those who use the library:			
9.9	Does the library have a wide enough range of materials to meet your needs?	38%	64%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	73%	85%
For those who have made an application:			
10.2	Are applications usually dealt with fairly?	49%	69%
10.3	Is it easy for you to make a complaint?	80%	68%
For those who have made a complaint:			
10.4	Are complaints usually dealt with fairly?	18%	46%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	28%	32%

57%	61%
64%	77%
75%	84%
72%	82%
52%	59%
38%	51%
63%	77%
77%	76%
39%	35%
57%	44%
97%	93%
65%	73%
0%	10%
0%	13%
35%	62%
68%	86%
42%	69%
83%	68%
17%	43%
31%	32%

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

Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
41	116	31	126

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	43%	41%
	- Nurse?	67%	74%
	- Dentist?	23%	20%
	- Mental health workers?	35%	38%
For those who have mental health problems:			
11.4	Have you been helped with your mental health problems in this prison?	40%	58%
11.5	Do you think the overall quality of the health services here is very / quite good?	53%	55%
OTHER SUPPORT NEEDS			
For those who have a disability:			
12.2	Are you getting the support you need?	25%	41%
SAFETY			
14.1	Have you ever felt unsafe here?	33%	50%
14.2	Do you feel unsafe now?	13%	24%
14.3	Not experienced bullying / victimisation by other prisoners	72%	48%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	49%	39%
14.5	Not experienced bullying / victimisation by members of staff	61%	63%
14.6	If you were being bullied / victimised by staff here, would you report it?	53%	57%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	56%	55%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	56%	55%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	5%	8%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	16%	23%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	63%	59%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	74%	76%
For those who have a custody plan:			
17.3	Are staff helping you to achieve your objectives or targets?	52%	62%
PREPARATION FOR RELEASE			
For those who expect to be released in the next 3 months:			
18.3	Is anybody helping you to prepare for your release?	0%	100%
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?	62%	61%

50%	39%
73%	72%
20%	22%
41%	37%
36%	59%
60%	52%
30%	42%
43%	46%
10%	24%
73%	51%
38%	43%
62%	61%
48%	59%
66%	52%
59%	54%
7%	8%
25%	21%
59%	61%
77%	76%
47%	61%
0%	100%
56%	62%

HMP Full Sutton 2020

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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

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

Number of completed questionnaires returned

Have a disability	Do not have a disability	Mental health problems	No mental health problems
58	95	68	85

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	9%	10%	10%	9%
	Are you 50 years of age or older?	32%	31%	19%	40%
1.3	Are you from a black and minority ethnic group?	18%	31%	15%	33%
7.1	Are you Muslim?	21%	19%	16%	20%
11.3	Do you have any mental health problems?	70%	28%		
12.1	Do you consider yourself to have a disability?			61%	20%
19.2	Are you a foreign national?	4%	11%	8%	10%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	4%	9%	5%	9%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	74%	84%	71%	85%
2.4	Overall, were you treated very / quite well in reception?	78%	82%	74%	82%
2.5	When you first arrived, did you have any problems?	91%	69%	90%	70%
For those who had any problems when they first arrived:					
2.6	Did staff help you to deal with these problems?	34%	46%	38%	43%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	55%	88%	55%	92%
3.5	Have you had an induction at this prison?	78%	72%	78%	73%
For those who have had an induction:					
3.5	Did your induction cover everything you needed to know about this prison?	36%	55%	35%	57%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	59%	69%	60%	68%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	78%	92%	75%	95%
	- Can you shower every day?	96%	100%	97%	100%
	- Do you have clean sheets every week?	80%	89%	81%	90%
	- Do you get cell cleaning materials every week?	93%	91%	89%	94%
	- Is it normally quiet enough for you to relax or sleep at night?	67%	86%	69%	87%
	- Can you get your stored property if you need it?	35%	38%	30%	40%

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

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

	Have a disability	Do not have a disability	
	58	95	
	Mental health problems	No mental health problems	
	68	85	

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	57%	63%
5.3	Does the shop / canteen sell the things that you need?	64%	82%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	79%	85%
6.2	Are there any staff here you could turn to if you had a problem?	77%	83%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	56%	59%
6.6	Do you feel that you are treated as an individual in this prison?	54%	47%
FAITH			
For those who have a religion:			
7.2	Are your religious beliefs respected here?	73%	74%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	76%	77%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	35%	37%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	51%	44%
8.3	Are you able to use a phone every day (if you have credit)?	95%	95%
For those who get visits:			
8.7	Are your visitors usually treated respectfully by staff?	81%	67%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	7%	8%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	11%	11%
For those who use the library:			
9.9	Does the library have a wide enough range of materials to meet your needs?	62%	55%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	76%	87%
For those who have made an application:			
10.2	Are applications usually dealt with fairly?	62%	68%
10.3	Is it easy for you to make a complaint?	63%	76%
For those who have made a complaint:			
10.4	Are complaints usually dealt with fairly?	30%	44%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	34%	29%

60%	62%
69%	81%
75%	88%
79%	81%
53%	60%
49%	49%
67%	79%
69%	82%
39%	33%
56%	41%
93%	94%
71%	73%
6%	10%
10%	10%
57%	56%
74%	88%
59%	69%
56%	81%
27%	49%
42%	25%

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

Number of completed questionnaires returned

	Have a disability	Do not have a disability		
	58	95	Mental health problems	No mental health problems
			68	85

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	48%	38%
	- Nurse?	75%	71%
	- Dentist?	24%	20%
	- Mental health workers?	43%	35%
For those who have mental health problems:			
11.4	Have you been helped with your mental health problems in this prison?	50%	69%
11.5	Do you think the overall quality of the health services here is very / quite good?	48%	59%
OTHER SUPPORT NEEDS			
For those who have a disability:			
12.2	Are you getting the support you need?	41%	
SAFETY			
14.1	Have you ever felt unsafe here?	60%	36%
14.2	Do you feel unsafe now?	40%	11%
14.3	Not experienced bullying / victimisation by other prisoners	47%	58%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	41%	44%
14.5	Not experienced bullying / victimisation by members of staff	51%	67%
14.6	If you were being bullied / victimised by staff here, would you report it?	63%	53%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	53%	57%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	47%	62%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	16%	3%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	32%	14%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	55%	63%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	73%	79%
For those who have a custody plan:			
17.3	Are staff helping you to achieve your objectives or targets?	71%	54%
PREPARATION FOR RELEASE			
For those who expect to be released in the next 3 months:			
18.3	Is anybody helping you to prepare for your release?	0%	100%
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?	57%	63%

38%	43%
72%	71%
19%	21%
48%	28%
56%	
46%	59%
34%	50%
63%	31%
35%	12%
40%	65%
23%	54%
46%	73%
55%	56%
45%	60%
38%	67%
12%	5%
29%	16%
54%	63%
68%	81%
61%	59%
100%	0%
54%	65%

HMP Full Sutton 2020
Survey responses compared with those from other HMIP surveys of high secure prisons
and with those from the previous survey

In this table summary statistics from HMP Full Sutton 2020 are compared with the following HMIP survey data:

- Summary statistics from surveys of high secure prison's conducted since the introduction of the new questionnaire in September 2017 (3 prisons). Please note that this does not include all high secure prisons.
- Summary statistics from HMP Full Sutton in 2016. Please note that we do not have comparable data for the new questions introduced in September 2017.

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

Number of completed questionnaires returned

HMP Full Sutton 2020	All other high secure prisons surveyed since September 2017	HMP Full Sutton 2020	HMP Full Sutton 2016
160	519	160	184

n=number of valid responses to question (HMP Full Sutton 2020)

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION						
1.2	Are you under 21 years of age?	<i>n=159</i>	0%	1%	0%	0%
	Are you 25 years of age or younger?	<i>n=159</i>	10%	7%	10%	
	Are you 50 years of age or older?	<i>n=159</i>	30%	34%	30%	32%
	Are you 70 years of age or older?	<i>n=159</i>	4%	4%	4%	4%
1.3	Are you from a black and minority ethnic group?	<i>n=157</i>	26%	27%	26%	30%
1.4	Have you been in this prison for less than 6 months?	<i>n=156</i>	7%	9%	7%	
1.5	Are you currently serving a sentence?	<i>n=159</i>	100%	99%	100%	99%
	Are you on recall?	<i>n=159</i>	0%	1%	0%	1%
1.6	Is your sentence less than 12 months?	<i>n=158</i>	0%	0%	0%	0%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n=158</i>	6%	5%	6%	10%
7.1	Are you Muslim?	<i>n=157</i>	20%	20%	20%	21%
11.3	Do you have any mental health problems?	<i>n=153</i>	44%	40%	44%	
12.1	Do you consider yourself to have a disability?	<i>n=153</i>	38%	37%	40%	27%
19.1	Do you have any children under the age of 18?	<i>n=152</i>	44%	41%	44%	35%
19.2	Are you a foreign national?	<i>n=152</i>	9%	9%	9%	7%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n=152</i>	7%	4%	7%	3%
19.4	Have you ever been in the armed services?	<i>n=153</i>	8%	13%	8%	7%
19.5	Is your gender female or non-binary?	<i>n=152</i>	0%	1%	0%	
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n=151</i>	6%	7%	6%	6%
19.7	Do you identify as transgender or transsexual?	<i>n=147</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=158</i>	11%	13%	11%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n=157</i>	70%	48%	70%	67%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n=158</i>	77%	75%	77%	69%
2.4	Overall, were you treated very / quite well in reception?	<i>n=158</i>	79%	79%	79%	

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2.5	When you first arrived, did you have any problems?	n=155	78%	76%	78%	76%
2.5	Did you have problems with:					
	- Getting phone numbers?	n=155	36%	32%	36%	34%
	- Contacting family?	n=155	32%	29%	32%	33%
	- Arranging care for children or other dependents?	n=155	1%	1%	1%	
	- Contacting employers?	n=155	1%	1%	1%	0%
	- Money worries?	n=155	13%	12%	13%	14%
	- Housing worries?	n=155	4%	4%	4%	3%
	- Feeling depressed?	n=155	25%	34%	25%	
	- Feeling suicidal?	n=155	8%	11%	8%	
	- Other mental health problems?	n=155	25%	17%	25%	
	- Physical health problems?	n=155	17%	14%	17%	18%
	- Drugs or alcohol (e.g. withdrawal)?	n=155	8%	6%	8%	
	- Getting medication?	n=155	25%	22%	25%	
	- Needing protection from other prisoners?	n=155	5%	6%	5%	10%
	- Lost or delayed property?	n=155	41%	29%	41%	33%
	For those who had any problems when they first arrived:					
2.6	Did staff help you to deal with these problems?	n=115	39%	39%	39%	37%
FIRST NIGHT AND INDUCTION						
3.1	Before you were locked up on your first night, were you offered:					
	- Tobacco or nicotine replacement?	n=152	45%	49%	45%	49%
	- Toiletries / other basic items?	n=152	52%	47%	52%	48%
	- A shower?	n=152	42%	35%	42%	29%
	- A free phone call?	n=152	22%	19%	22%	14%
	- Something to eat?	n=152	76%	67%	76%	57%
	- The chance to see someone from health care?	n=152	36%	50%	36%	50%
	- The chance to talk to a Listener or Samaritans?	n=152	13%	17%	13%	20%
	- Support from another prisoner (e.g. Insider or buddy)?	n=152	16%	25%	16%	
	- None of these?	n=152	12%	11%	12%	
3.2	On your first night in this prison, was your cell very / quite clean?	n=156	64%	59%	64%	
3.3	Did you feel safe on your first night here?	n=156	75%	68%	75%	71%
3.4	In your first few days here, did you get:					
	- Access to the prison shop / canteen?	n=152	36%	36%	36%	27%
	- Free PIN phone credit?	n=148	21%	21%	21%	
	- Numbers put on your PIN phone?	n=145	44%	39%	44%	
3.5	Have you had an induction at this prison?	n=150	75%	94%	75%	81%
	For those who have had an induction:					
3.5	Did your induction cover everything you needed to know about this prison?	n=113	46%	53%	46%	

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ON THE WING					
4.1	Are you in a cell on your own? <i>n=156</i>	100%	99%	100%	
4.2	Is your cell call bell normally answered within 5 minutes? <i>n=155</i>	64%	45%	64%	52%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week? <i>n=156</i>	85%	86%	85%	81%
	- Can you shower every day? <i>n=155</i>	98%	96%	98%	97%
	- Do you have clean sheets every week? <i>n=154</i>	86%	87%	86%	84%
	- Do you get cell cleaning materials every week? <i>n=153</i>	92%	75%	92%	92%
	- Is it normally quiet enough for you to relax or sleep at night? <i>n=155</i>	79%	65%	79%	64%
	- Can you get your stored property if you need it? <i>n=150</i>	36%	35%	36%	32%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean? <i>n=149</i>	70%	77%	70%	
FOOD AND CANTEEN					
5.1	Is the quality of the food in this prison very / quite good? <i>n=152</i>	61%	39%	61%	
5.2	Do you get enough to eat at meal-times always / most of the time? <i>n=153</i>	60%	39%	60%	
5.3	Does the shop / canteen sell the things that you need? <i>n=153</i>	74%	65%	74%	64%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect? <i>n=150</i>	83%	79%	83%	78%
6.2	Are there any staff here you could turn to if you had a problem? <i>n=154</i>	79%	77%	79%	74%
6.3	In the last week, has any member of staff talked to you about how you are getting on? <i>n=158</i>	58%	44%	58%	40%
6.4	Do you have a personal officer? <i>n=156</i>	99%	97%	99%	
For those who have a personal officer:					
6.4	Is your personal or named officer very / quite helpful? <i>n=154</i>	68%	63%	68%	
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners? <i>n=156</i>	9%	14%	9%	
6.6	Do you feel that you are treated as an individual in this prison? <i>n=151</i>	48%	46%	48%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues? <i>n=157</i>	73%	71%	73%	
	If so, do things sometimes change? <i>n=114</i>	40%	34%	40%	
FAITH					
7.1	Do you have a religion? <i>n=157</i>	68%	78%	68%	80%
For those who have a religion:					
7.2	Are your religious beliefs respected here? <i>n=106</i>	74%	66%	74%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to? <i>n=106</i>	76%	71%	76%	
7.4	Are you able to attend religious services, if you want to? <i>n=104</i>	91%	89%	91%	

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CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends? <i>n=149</i>	36%	41%	36%	
8.2	Have you had any problems with sending or receiving mail (letters or parcels)? <i>n=155</i>	47%	58%	47%	46%
8.3	Are you able to use a phone every day (if you have credit)? <i>n=157</i>	94%	94%	94%	
8.4	Is it very / quite easy for your family and friends to get here? <i>n=153</i>	28%	27%	28%	
8.5	Do you get visits from family/friends once a week or more? <i>n=149</i>	17%	12%	17%	
For those who get visits:					
8.6	Do visits usually start and finish on time? <i>n=93</i>	38%	35%	38%	
8.7	Are your visitors usually treated respectfully by staff? <i>n=88</i>	72%	70%	72%	
TIME OUT OF CELL					
9.1	Do you know what the unlock and lock-up times are supposed to be here? <i>n=154</i>	96%	95%	96%	
For those who know what the unlock and lock-up times are supposed to be:					
9.1	Are these times usually kept to? <i>n=147</i>	67%	58%	67%	
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday? <i>n=154</i>	8%	10%	8%	8%
	Do you usually spend 10 hours or more out of your cell on a typical weekday? <i>n=154</i>	10%	7%	10%	16%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday? <i>n=153</i>	7%	8%	7%	
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday? <i>n=153</i>	2%	1%	2%	
9.4	Do you have time to do domestics more than 5 days in a typical week? <i>n=154</i>	74%	70%	74%	
9.5	Do you get association more than 5 days in a typical week, if you want it? <i>n=154</i>	83%	85%	83%	
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to? <i>n=156</i>	85%	71%	85%	
9.7	Do you typically go to the gym twice a week or more? <i>n=153</i>	52%	47%	52%	
9.8	Do you typically go to the library once a week or more? <i>n=157</i>	47%	63%	47%	33%
For those who use the library:					
9.9	Does the library have a wide enough range of materials to meet your needs? <i>n=107</i>	56%	69%	56%	55%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application? <i>n=158</i>	82%	82%	82%	87%
For those who have made an application:					
10.2	Are applications usually dealt with fairly? <i>n=139</i>	64%	55%	64%	62%
	Are applications usually dealt with within 7 days? <i>n=135</i>	42%	35%	42%	39%
10.3	Is it easy for you to make a complaint? <i>n=155</i>	70%	76%	70%	73%
For those who have made a complaint:					
10.4	Are complaints usually dealt with fairly? <i>n=104</i>	38%	31%	38%	35%
	Are complaints usually dealt with within 7 days? <i>n=105</i>	45%	35%	45%	41%
10.5	Have you ever been prevented from making a complaint here when you wanted to? <i>n=122</i>	31%	25%	31%	

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For those who need it, is it easy to:						
10.6	Communicate with your solicitor or legal representative?	n=129	54%	55%	54%	
	Attend legal visits?	n=116	56%	55%	56%	
	Get bail information?	n=68	15%	14%	15%	
For those who have had legal letters:						
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=135	55%	58%	55%	59%
HEALTH CARE						
11.1	Is it very / quite easy to see:					
	- Doctor?	n=154	42%	36%	42%	
	- Nurse?	n=154	72%	68%	72%	
	- Dentist?	n=152	21%	33%	21%	
	- Mental health workers?	n=145	38%	36%	38%	
11.2	Do you think the quality of the health service is very / quite good from:					
	- Doctor?	n=152	61%	56%	61%	
	- Nurse?	n=149	65%	71%	65%	
	- Dentist?	n=151	48%	60%	48%	
	- Mental health workers?	n=148	38%	36%	38%	
11.3	Do you have any mental health problems?	n=153	44%	40%	44%	
For those who have mental health problems:						
11.4	Have you been helped with your mental health problems in this prison?	n=68	56%	59%	56%	
11.5	Do you think the overall quality of the health services here is very / quite good?	n=155	54%	52%	54%	
OTHER SUPPORT NEEDS						
12.1	Do you consider yourself to have a disability?	n=153	38%	37%	38%	27%
For those who have a disability:						
12.2	Are you getting the support you need?	n=55	40%	41%	40%	
12.3	Have you been on an ACCT in this prison?	n=151	15%	25%	15%	
For those who have been on an ACCT:						
12.4	Did you feel cared for by staff?	n=21	38%	52%	38%	
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=152	45%	51%	45%	
ALCOHOL AND DRUGS						
13.1	Did you have an alcohol problem when you came into this prison?	n=155	14%	12%	14%	13%
For those who had / have an alcohol problem:						
13.2	Have you been helped with your alcohol problem in this prison?	n=20	45%	66%	45%	87%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=155	16%	18%	16%	14%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=153	12%	11%	12%	3%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=152	8%	7%	8%	
For those who had / have a drug problem:						
13.6	Have you been helped with your drug problem in this prison?	n=33	55%	58%	55%	67%
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=154	45%	44%	45%	
13.8	Is it very / quite easy to get alcohol in this prison?	n=153	31%	23%	31%	

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SAFETY					
14.1	Have you ever felt unsafe here?	n=157	46%	54%	46% 51%
14.2	Do you feel unsafe now?	n=152	22%	22%	22% 19%
14.3	Have you experienced any of the following from other prisoners here:				
	- Verbal abuse?	n=149	38%	40%	38%
	- Threats or intimidation?	n=149	30%	33%	30%
	- Physical assault?	n=149	16%	17%	16%
	- Sexual assault?	n=149	2%	4%	2%
	- Theft of canteen or property?	n=149	26%	26%	26%
	- Other bullying / victimisation?	n=149	22%	25%	22%
	- Not experienced any of these from prisoners here	n=149	54%	47%	54%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	n=150	41%	40%	41%
14.5	Have you experienced any of the following from staff here:				
	- Verbal abuse?	n=153	27%	33%	27%
	- Threats or intimidation?	n=153	26%	29%	26%
	- Physical assault?	n=153	8%	9%	8%
	- Sexual assault?	n=153	0%	3%	0%
	- Theft of canteen or property?	n=153	7%	8%	7%
	- Other bullying / victimisation?	n=153	16%	23%	16%
14.6	- Not experienced any of these from staff here	n=153	61%	52%	61%
	If you were being bullied / victimised by staff here, would you report it?	n=151	57%	50%	57%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	n=151	55%	42%	55%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	n=151	55%	47%	55%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	n=156	8%	7%	8% 7%
For those who have been restrained in the last 6 months:					
15.4	Did anyone come and talk to you about it afterwards?	n=12	17%	10%	17%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	n=150	21%	12%	21%
For those who have spent one or more nights in the segregation unit in the last 6 months:					
15.6	Were you treated well by segregation staff?	n=31	42%	56%	42%
	Could you shower every day?	n=30	40%	39%	40%
	Could you go outside for exercise every day?	n=30	53%	66%	53%
	Could you use the phone every day (if you had credit)?	n=29	31%	46%	31%

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EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	n=149	45%	49%	45%
	- Vocational or skills training?	n=139	15%	25%	15%
	- Prison job?	n=149	27%	55%	27%
	- Voluntary work outside of the prison?	n=143	0%	3%	0%
	- Paid work outside of the prison?	n=142	0%	2%	0%
16.2	In this prison, have you done the following activities:				
	- Education?	n=142	79%	84%	79%
	- Vocational or skills training?	n=137	60%	69%	60%
	- Prison job?	n=141	83%	89%	83%
	- Voluntary work outside of the prison?	n=138	24%	25%	24%
	- Paid work outside of the prison?	n=139	25%	24%	25%
For those who have done the following activities, do you think they will help you on release:					
	- Education?	n=112	57%	58%	57%
	- Vocational or skills training?	n=82	46%	57%	46%
	- Prison job?	n=117	34%	39%	34%
	- Voluntary work outside of the prison?	n=33	61%	56%	61%
	- Paid work outside of the prison?	n=34	62%	59%	62%
16.3	Do staff encourage you to attend education, training or work?	n=141	60%	60%	60%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	n=150	76%	73%	76%
For those who have a custody plan:					
17.2	Do you understand what you need to do to achieve your objectives or targets?	n=112	88%	85%	88%
17.3	Are staff helping you to achieve your objectives or targets?	n=107	59%	52%	59%
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	n=109	50%	56%	50%
	- Other programmes?	n=103	41%	48%	41%
	- One to one work?	n=103	40%	41%	40%
	- Been on a specialist unit?	n=99	10%	14%	10%
	- ROTL - day or overnight release?	n=97	2%	5%	2%
For those who have done the following, did they help you to achieve your objectives or targets:					
	- Offending behaviour programmes?	n=54	70%	68%	70%
	- Other programmes?	n=42	69%	65%	69%
	- One to one work?	n=41	71%	70%	71%
	- Being on a specialist unit?	n=10	70%	61%	70%
	- ROTL - day or overnight release?	n=2	0%	36%	0%

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PREPARATION FOR RELEASE					
18.1	Do you expect to be released in the next 3 months? <i>n=152</i>	1%	1%	1%	
For those who expect to be released in the next 3 months:					
18.2	Is this prison very / quite near to your home area or intended release address? <i>n=1</i>	100%	20%	100%	
18.3	Is anybody helping you to prepare for your release? <i>n=1</i>	100%	60%	100%	
18.4	Do you need help to sort out the following for when you are released:				
	- Finding accommodation? <i>n=1</i>	100%	60%	100%	
	- Getting employment? <i>n=1</i>	100%	50%	100%	
	- Setting up education or training? <i>n=1</i>	100%	50%	100%	
	- Arranging benefits? <i>n=1</i>	100%	50%	100%	
	- Sorting out finances? <i>n=1</i>	100%	60%	100%	
	- Support for drug or alcohol problems? <i>n=1</i>	0%	25%	0%	
	- Health / mental health support? <i>n=1</i>	100%	75%	100%	
	- Social care support? <i>n=1</i>	100%	75%	100%	
	- Getting back in touch with family or friends? <i>n=1</i>	0%	60%	0%	
18.4	Are you getting help to sort out the following for when you are released, if you need it:				
	- Finding accommodation? <i>n=1</i>	0%	33%	0%	
	- Getting employment? <i>n=1</i>	0%	0%	0%	
	- Setting up education or training? <i>n=1</i>	0%	0%	0%	
	- Arranging benefits? <i>n=1</i>	0%	0%	0%	
	- Sorting out finances? <i>n=1</i>	0%	0%	0%	
	- Support for drug or alcohol problems? <i>n=0</i>		0%		
	- Health / mental health support? <i>n=1</i>	0%	33%	0%	
	- Social care support? <i>n=1</i>	0%	0%	0%	
	- Getting back in touch with family or friends? <i>n=0</i>		33%		
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=142</i>	61%	56%	61%	

HMP Full Sutton 2020

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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25 and under	Over 25	50 and over	Under 50
16	143	47	112

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	0%			0%
	Are you 70 years of age or older?		4%	13%	
1.3	Are you from a black and minority ethnic group?	27%	26%	19%	29%
7.1	Are you Muslim?	19%	20%	9%	25%
11.3	Do you have any mental health problems?	47%	44%	28%	51%
12.1	Do you consider yourself to have a disability?	36%	38%	38%	37%
19.2	Are you a foreign national?	0%	10%	2%	11%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	19%	6%	7%	8%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	60%	79%	92%	71%
2.4	Overall, were you treated very / quite well in reception?	60%	80%	85%	76%
2.5	When you first arrived, did you have any problems?	87%	77%	83%	76%
For those who had any problems when they first arrived:					
2.6	Did staff help you to deal with these problems?	17%	41%	54%	31%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	75%	75%	76%	75%
3.5	Have you had an induction at this prison?	60%	77%	84%	72%
For those who have had an induction:					
3.5	Did your induction cover everything you needed to know about this prison?	11%	49%	62%	38%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	56%	65%	71%	61%
4.3					
	- Do you normally have enough clean, suitable clothes for the week?	75%	86%	94%	82%
	- Can you shower every day?	94%	99%	100%	97%
	- Do you have clean sheets every week?	88%	86%	91%	84%
	- Do you get cell cleaning materials every week?	92%	91%	98%	89%
	- Is it normally quiet enough for you to relax or sleep at night?	80%	79%	76%	81%
	- Can you get your stored property if you need it?	0%	40%	42%	33%

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Number of completed questionnaires returned

	25 and under	Over 25	
	16	143	
	50 and over	Under 50	
	47	112	

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	44%	61%
5.3	Does the shop / canteen sell the things that you need?	69%	75%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	63%	85%
6.2	Are there any staff here you could turn to if you had a problem?	63%	81%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	56%	58%
6.6	Do you feel that you are treated as an individual in this prison?	40%	49%
FAITH			
For those who have a religion:			
7.2	Are your religious beliefs respected here?	73%	73%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	82%	76%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	21%	37%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	67%	45%
8.3	Are you able to use a phone every day (if you have credit)?	94%	94%
For those who get visits:			
8.7	Are your visitors usually treated respectfully by staff?	64%	72%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	25%	5%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	6%	11%
For those who use the library:			
9.9	Does the library have a wide enough range of materials to meet your needs?	36%	58%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	69%	83%
For those who have made an application:			
10.2	Are applications usually dealt with fairly?	46%	66%
10.3	Is it easy for you to make a complaint?	50%	73%
For those who have made a complaint:			
10.4	Are complaints usually dealt with fairly?	25%	39%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	62%	28%

70%	56%
80%	71%
93%	78%
85%	77%
57%	58%
54%	45%
83%	70%
83%	74%
41%	34%
44%	48%
98%	92%
91%	64%
7%	8%
11%	10%
70%	51%
87%	79%
78%	58%
79%	67%
69%	25%
17%	37%

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Number of completed questionnaires returned

	25 and under	Over 25
	16	143

	50 and over	Under 50
	47	112

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	33%	42%
	- Nurse?	67%	73%
	- Dentist?	0%	23%
	- Mental health workers?	29%	39%
For those who have mental health problems:			
11.4	Have you been helped with your mental health problems in this prison?	29%	58%
11.5	Do you think the overall quality of the health services here is very / quite good?	50%	54%
OTHER SUPPORT NEEDS			
For those who have a disability:			
12.2	Are you getting the support you need?	25%	40%
SAFETY			
14.1	Have you ever felt unsafe here?	63%	44%
14.2	Do you feel unsafe now?	38%	19%
14.3	Not experienced bullying / victimisation by other prisoners	56%	54%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	19%	44%
14.5	Not experienced bullying / victimisation by members of staff	40%	64%
14.6	If you were being bullied / victimised by staff here, would you report it?	53%	57%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	36%	57%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	40%	56%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	25%	6%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	60%	17%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	53%	61%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	80%	76%
For those who have a custody plan:			
17.3	Are staff helping you to achieve your objectives or targets?	40%	61%
PREPARATION FOR RELEASE			
For those who expect to be released in the next 3 months:			
18.3	Is anybody helping you to prepare for your release?		100%
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?	40%	63%

46%	39%
77%	70%
26%	18%
43%	36%
54%	56%
62%	51%
59%	30%
49%	44%
18%	22%
39%	61%
73%	28%
64%	60%
67%	52%
55%	54%
64%	51%
2%	10%
9%	26%
69%	57%
82%	74%
66%	56%
100%	
64%	59%

HMP Full Sutton 2020

Comparison of survey responses from different residential locations

In this table responses from the Vulnerable Prisoner Unit (B, C and D wings) are compared with those from the rest of the establishment.

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Number of completed questionnaires returned

Vulnerable Prisoner Unit (B, C and D wings)	Rest of the establishment
87	66

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	0%
	Are you 25 years of age or younger?	7%	9%
	Are you 50 years of age or older?	48%	8%
	Are you 70 years of age or older?	7%	0%
1.3	Are you from a black and minority ethnic group?	19%	39%
1.4	Have you been in this prison for less than 6 months?	7%	8%
1.5	Are you currently serving a sentence?	100%	100%
	Are you on recall?	0%	0%
1.6	Is your sentence less than 12 months?	0%	0%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	8%	3%
7.1	Are you Muslim?	12%	33%
11.3	Do you have any mental health problems?	48%	38%
12.1	Do you consider yourself to have a disability?	46%	26%
19.1	Do you have any children under the age of 18?	38%	51%
19.2	Are you a foreign national?	6%	13%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	7%	6%
19.4	Have you ever been in the armed services?	10%	6%
19.5	Is your gender female or non-binary?	0%	0%
19.6	Are you homosexual, bisexual or other sexual orientation?	10%	2%
19.7	Do you identify as transgender or transsexual?	1%	0%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	13%	11%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	71%	68%
2.3	When you were searched in reception, was this done in a respectful way?	84%	70%
2.4	Overall, were you treated very / quite well in reception?	83%	74%

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Vulnerable Prisoner Unit (B, C and D wings)	Rest of the establishment
87	66

Number of completed questionnaires returned

2.5	When you first arrived, did you have any problems?	77%	79%
2.5	Did you have problems with:		
	- Getting phone numbers?	30%	42%
	- Contacting family?	30%	34%
	- Arranging care for children or other dependents?	1%	0%
	- Contacting employers?	0%	2%
	- Money worries?	13%	12%
	- Housing worries?	5%	3%
	- Feeling depressed?	27%	20%
	- Feeling suicidal?	10%	8%
	- Other mental health problems?	24%	25%
	- Physical health problems?	24%	5%
	- Drugs or alcohol (e.g. withdrawal)?	8%	5%
	- Getting medication?	29%	20%
	- Needing protection from other prisoners?	6%	0%
	- Lost or delayed property?	38%	46%
	For those who had any problems when they first arrived:		
2.6	Did staff help you to deal with these problems?	48%	29%
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	40%	47%
	- Toiletries / other basic items?	50%	53%
	- A shower?	37%	50%
	- A free phone call?	21%	23%
	- Something to eat?	77%	77%
	- The chance to see someone from health care?	37%	34%
	- The chance to talk to a Listener or Samaritans?	16%	11%
	- Support from another prisoner (e.g. Insider or buddy)?	17%	17%
	- None of these?	13%	11%
3.2	On your first night in this prison, was your cell very / quite clean?	68%	59%
3.3	Did you feel safe on your first night here?	74%	80%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	42%	29%
	- Free PIN phone credit?	23%	19%
	- Numbers put on your PIN phone?	43%	48%
3.5	Have you had an induction at this prison?	79%	75%
	For those who have had an induction:		
3.5	Did your induction cover everything you needed to know about this prison?	51%	40%

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Number of completed questionnaires returned

Vulnerable Prisoner Unit (B, C and D wings)	Rest of the establishment
87	66

ON THE WING			
4.1	Are you in a cell on your own?	100%	100%
4.2	Is your cell call bell normally answered within 5 minutes?	70%	56%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	85%	89%
	- Can you shower every day?	96%	100%
	- Do you have clean sheets every week?	82%	92%
	- Do you get cell cleaning materials every week?	94%	89%
	- Is it normally quiet enough for you to relax or sleep at night?	70%	92%
	- Can you get your stored property if you need it?	43%	28%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	69%	69%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	66%	53%
5.2	Do you get enough to eat at meal-times always / most of the time?	60%	59%
5.3	Does the shop / canteen sell the things that you need?	75%	73%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	86%	80%
6.2	Are there any staff here you could turn to if you had a problem?	84%	73%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	64%	48%
6.4	Do you have a personal officer?	99%	100%
For those who have a personal officer:			
6.4	Is your personal or named officer very / quite helpful?	74%	65%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	8%	8%
6.6	Do you feel that you are treated as an individual in this prison?	50%	45%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	77%	70%
	If so, do things sometimes change?	42%	38%
FAITH			
7.1	Do you have a religion?	65%	69%
For those who have a religion:			
7.2	Are your religious beliefs respected here?	77%	65%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	83%	63%
7.4	Are you able to attend religious services, if you want to?	95%	88%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	46%	26%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	41%	51%
8.3	Are you able to use a phone every day (if you have credit)?	98%	89%
8.4	Is it very / quite easy for your family and friends to get here?	18%	39%
8.5	Do you get visits from family/friends once a week or more?	15%	21%
For those who get visits:			
8.6	Do visits usually start and finish on time?	44%	31%
8.7	Are your visitors usually treated respectfully by staff?	80%	63%

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Vulnerable Prisoner Unit (B, C and D wings)	Rest of the establishment
87	66

TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	92%	100%
For those who know what the unlock and lock-up times are supposed to be:			
9.1	Are these times usually kept to?	70%	61%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	8%	3%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	14%	5%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	6%	2%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	2%	2%
9.4	Do you have time to do domestics more than 5 days in a typical week?	71%	78%
9.5	Do you get association more than 5 days in a typical week, if you want it?	79%	89%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	77%	95%
9.7	Do you typically go to the gym twice a week or more?	41%	70%
9.8	Do you typically go to the library once a week or more?	40%	53%
For those who use the library:			
9.9	Does the library have a wide enough range of materials to meet your needs?	59%	56%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	86%	79%
For those who have made an application:			
10.2	Are applications usually dealt with fairly?	69%	58%
	Are applications usually dealt with within 7 days?	47%	37%
10.3	Is it easy for you to make a complaint?	68%	75%
For those who have made a complaint:			
10.4	Are complaints usually dealt with fairly?	46%	29%
	Are complaints usually dealt with within 7 days?	43%	47%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	26%	37%

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Vulnerable Prisoner Unit (B, C and D wings)	Rest of the establishment
87	66

For those who need it, is it easy to:			
10.6	Communicate with your solicitor or legal representative?	60%	48%
	Attend legal visits?	61%	55%
	Get bail information?	13%	16%
For those who have had legal letters:			
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	55%	52%
HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	40%	42%
	- Nurse?	73%	72%
	- Dentist?	24%	17%
	- Mental health workers?	43%	32%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	65%	58%
	- Nurse?	62%	71%
	- Dentist?	54%	43%
	- Mental health workers?	45%	30%
11.3	Do you have any mental health problems?	48%	38%
For those who have mental health problems:			
11.4	Have you been helped with your mental health problems in this prison?	63%	50%
11.5	Do you think the overall quality of the health services here is very / quite good?	52%	58%
OTHER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	46%	26%
For those who have a disability:			
12.2	Are you getting the support you need?	47%	25%
12.3	Have you been on an ACCT in this prison?	22%	3%
For those who have been on an ACCT:			
12.4	Did you feel cared for by staff?	47%	0%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	57%	29%
ALCOHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	17%	9%
For those who had / have an alcohol problem:			
13.2	Have you been helped with your alcohol problem in this prison?	62%	17%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	18%	13%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	11%	9%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	9%	6%
For those who had / have a drug problem:			
13.6	Have you been helped with your drug problem in this prison?	60%	50%
13.7	Is it very / quite easy to get illicit drugs in this prison?	50%	38%
13.8	Is it very / quite easy to get alcohol in this prison?	25%	38%

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Number of completed questionnaires returned

Vulnerable Prisoner Unit (B, C and D wings)	Rest of the establishment
87	66

SAFETY			
14.1	Have you ever felt unsafe here?	55%	28%
14.2	Do you feel unsafe now?	26%	9%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	52%	16%
	- Threats or intimidation?	42%	12%
	- Physical assault?	22%	7%
	- Sexual assault?	4%	0%
	- Theft of canteen or property?	36%	12%
	- Other bullying / victimisation?	27%	13%
	- Not experienced any of these from prisoners here	37%	80%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	58%	23%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	31%	18%
	- Threats or intimidation?	30%	19%
	- Physical assault?	8%	5%
	- Sexual assault?	0%	0%
	- Theft of canteen or property?	6%	8%
	- Other bullying / victimisation?	18%	13%
	- Not experienced any of these from staff here	55%	70%
14.6	If you were being bullied / victimised by staff here, would you report it?	62%	52%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	59%	53%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	61%	52%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	7%	5%
For those who have been restrained in the last 6 months:			
15.4	Did anyone come and talk to you about it afterwards?	0%	0%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	18%	19%
For those who have spent one or more nights in the segregation unit in the last 6 months:			
15.6	Were you treated well by segregation staff?	54%	17%
	Could you shower every day?	42%	8%
	Could you go outside for exercise every day?	67%	17%
	Could you use the phone every day (if you had credit)?	36%	17%

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Number of completed questionnaires returned

Vulnerable Prisoner Unit (B, C and D wings)	Rest of the establishment
87	66

EDUCATION, SKILLS AND WORK			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	51%	39%
	- Vocational or skills training?	19%	12%
	- Prison job?	35%	19%
	- Voluntary work outside of the prison?	0%	0%
	- Paid work outside of the prison?	0%	0%
16.2	In this prison, have you done the following activities:		
	- Education?	84%	79%
	- Vocational or skills training?	67%	57%
	- Prison job?	88%	84%
	- Voluntary work outside of the prison?	22%	29%
	- Paid work outside of the prison?	23%	28%
For those who have done the following activities, do you think they will help you on release:			
	- Education?	52%	65%
	- Vocational or skills training?	37%	61%
	- Prison job?	42%	26%
	- Voluntary work outside of the prison?	63%	59%
	- Paid work outside of the prison?	59%	65%
16.3	Do staff encourage you to attend education, training or work?	70%	51%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	83%	72%
For those who have a custody plan:			
17.2	Do you understand what you need to do to achieve your objectives or targets?	92%	84%
17.3	Are staff helping you to achieve your objectives or targets?	68%	48%
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	49%	52%
	- Other programmes?	43%	38%
	- One to one work?	41%	40%
	- Been on a specialist unit?	12%	8%
	- ROTL - day or overnight release?	0%	6%
For those who have done the following, did they help you to achieve your objectives or targets:			
	- Offending behaviour programmes?	74%	65%
	- Other programmes?	69%	73%
	- One to one work?	84%	50%
	- Being on a specialist unit?	71%	67%
	- ROTL - day or overnight release?		0%

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Number of completed questionnaires returned

Vulnerable Prisoner Unit (B, C and D wings)	Rest of the establishment
87	66

PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	1%	0%
For those who expect to be released in the next 3 months:			
18.2	Is this prison very / quite near to your home area or intended release address?	100%	
18.3	Is anybody helping you to prepare for your release?	100%	
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	100%	
	- Getting employment?	100%	
	- Setting up education or training?	100%	
	- Arranging benefits?	100%	
	- Sorting out finances?	100%	
	- Support for drug or alcohol problems?	0%	
	- Health / mental Health support?	100%	
	- Social care support?	100%	
	- Getting back in touch with family or friends?	0%	
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	0%	
	- Getting employment?	0%	
	- Setting up education or training?	0%	
	- Arranging benefits?	0%	
	- Sorting out finances?	0%	
	- Support for drug or alcohol problems?		
	- Health / mental Health support?	0%	
	- Social care support?	0%	
	- Getting back in touch with family or friends?		
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?	62%	62%