



**HM Chief Inspector of Prisons
for England and Wales
Annual Report 2019–20**

HM Chief Inspector of Prisons for England and Wales

Annual Report 2019–20

Presented to Parliament pursuant to Section 5A of the Prison Act 1952.

Ordered by the House of Commons to be printed on 20 October 2020.



© Crown Copyright 2020

This publication is licensed under the terms of the Open Government Licence v.3.0 except where otherwise stated.
To view this licence, visit: www.nationalarchives.gov.uk/doc/open-government-licence/version/3/

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

This publication is available at: www.gov.uk/official-documents and www.justiceinspectors.gov.uk/hmiprisons

Any enquiries regarding this publication should be sent to us at: hmiprison.enquiries@hmiprison.gov.uk

ISBN: 978-1-5286-2153-3

Printed on paper containing 75% recycled fibre content minimum.

Printed in the UK on behalf of the Controller of Her Majesty's Stationery Office.

CONTENTS

	Glossary	4
	Who we are and what we do	8
1	Introduction by the Chief Inspector of Prisons	12
2	Independent Reviews of Progress	22
3	The year in brief	28
4	Men in prison	32
	Prisons are still not safe enough	34
	Living conditions are poor but improving	40
	Locked up with too little to do	46
	Weaknesses impede rehabilitation and release planning	52
5	Women in prison	58
6	Children in custody	64
7	Immigration detention	76
8	Police custody	84
9	Court custody	90
10	The Inspectorate in 2019-20	94
11	Appendices	100
	1 Inspection reports published 1 April 2019 to 31 March 2020	101
	2 Healthy prison and establishment assessments 1 April 2019 to 31 March 2020	104
	3 Recommendations accepted in action plans received 1 April 2019 to 31 March 2020	106
	4 Recommendations achieved in inspection reports published 1 April 2019 to 31 March 2020	111
	5 Prisoner survey responses (adult men): diversity analysis	116
	6 Prisoner survey responses: men and women	155
	7 IRP assessments	162
12	Annex: The impact of COVID-19 and HM Inspectorate of Prisons' response	164

GLOSSARY

We try to make our reports as clear as possible, and this 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, available on our website at: <http://www.justiceinspectors.gov.uk/hmiprisoners>.

ACCT	Assessment, care in custody and teamwork (case management for prisoners at risk of suicide or self-harm).
ACDT	Assessment, care in detention and teamwork (case management for detainees at risk of suicide or self-harm in IRCs).
Adult at risk	Under the Care Act 2014, 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.
All-age, all-vulnerability model	Support to detainees who because of age, gender, sexuality, illness, disability, alleged offence or social circumstances may be more vulnerable to the impact and stress associated with detention and so require additional support in custody and pre-release.
Appropriate adults	Independent individuals who provide support to children and vulnerable adults in custody.
Category A	Prisoners on the highest category of security risk whose escape would be highly dangerous.
Category B	Prisoners for whom the highest conditions of security are not necessary but for whom escape must be made very difficult.
Category C	Prisoners who cannot be trusted in open conditions who do not have the will or resources to make a determined escape attempt.
Category D	Prisoners who can be reasonably trusted to serve their sentence in open conditions.
Code C (of PACE)	Covers the detention, treatment and questioning of persons by police officers.
CQC	Care Quality Commission.

CRC	Community rehabilitation company. Since May 2015 rehabilitation services, both in custody and after release, have been organised through CRCs which are responsible for work with medium- and low-risk offenders. The National Probation Service has maintained responsibility for high- and very high-risk offenders.
CSIP	Challenge, support and intervention plan. 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.
End of custody temporary release scheme	Risk-assessed prisoners who are within two months of their release date can be temporarily released from custody.
Estyn	Education and training inspectorate for Wales.
HCP	Health care professional.
HIW	Healthcare Inspectorate Wales.
HMCTS	Her Majesty's Courts & Tribunals Service.
HMICFRS	HM Inspectorate of Constabulary and Fire & Rescue Services.
HMPPS	Her Majesty's Prison and Probation Service.
IEP	Incentives and earned privileges.
IRC	Immigration removal centre.
IRP	Independent Review of Progress.
Key workers	Introduced under OMiC (see below), prison officer key workers aim to have regular contact with named prisoners.
Listeners	Prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners.
MAPPA	Multi-agency public protection arrangements.
Naloxone	Drug to manage substance misuse overdose.
NPM	National Preventive Mechanism.
OASys	Offender assessment system. A framework used by both prisons and probation for assessing the likelihood of reoffending and the risk of harm to others.

Ofsted	Office for Standards in Education, Children’s Services and Skills.
OMiC	The offender management in custody model was introduced in 2017. In the first stage, prison officer key workers were introduced with the aim of having regular contact with named prisoners. The second phase sees the introduction of core offender management and prison offender managers (POMs).
OPCAT	Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment.
PACE	Police and Criminal Evidence Act.
Parkrun	A non-profit organisation that supports more than 700 communities across the country to coordinate free volunteered events for walkers and runners.
PAVA	Incapacitant spray.
PECS	Prisoner Escort and Custody Services.
PER	Person escort record.
POM	Prison offender manager; introduced under OMiC.
PPO	Prisons and Probation Ombudsman.
Prosocial	Behaviour that benefits or takes account of others.
Protected characteristics	The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).
Psychoactive substances	Either naturally occurring, semi-synthetic or fully synthetic compounds. When taken they affect thought processes or individuals’ emotional state. In prisons, these substances are commonly referred to as ‘Spice’. For more information see: https://www.gov.uk/guidance/psychoactive-substances-in-prisons#what-are-psychoactive-substances
ROTL	Release on temporary licence.
Rule 35 (of Detention Centre Rules)	Requires notification to Home Office Immigration and Enforcement if a detainee’s health is likely to be injuriously affected by detention, including if they may have been the victim of torture.
Section 136	(of the Mental Health Act). Enables a police officer to remove from a public place someone who they believe to be suffering from a mental disorder and in need of immediate care and control, and take them to a place of safety. In exceptional circumstances, and if they are 18 or over, the place of safety may be police custody.

Shielding	Those who have health conditions that make them vulnerable to infection are held for at least 12 weeks in a shielding unit.
Solitary confinement	When detainees are confined alone for 22 hours or more a day without meaningful human contact (United Nations Standard Minimum Rules for the treatment of prisoners. Rule 44).
STC	Secure training centre.
STHF	Short-term holding facility.
Storybook Dads	A scheme enabling prisoners to record a story for their children.
Street triage	Joint initiatives between the police and NHS in which specialist mental health practitioners and specially trained police officers attend incidents and provide immediate help and advice to officers at the scene to ensure that potentially vulnerable members of the public get the help they need as quickly as possible.
TACT	Terrorism Act.
UN	Urgent Notification. Where an inspection identifies significant concerns about the treatment and conditions of detainees, the Chief Inspector will write an Urgent Notification to the Secretary of State within seven calendar days with the reasons for concerns and identifying issues that require improvement. The Secretary of State commits to respond publicly to the concerns raised within 28 calendar days.
Virtual campus	Internet access to community education, training and employment opportunities for prisoners.
YOI	Young offender institution.

WHO WE ARE AND WHAT WE DO

Our purpose

To ensure independent inspection of places of detention, report on conditions and treatment, and promote positive outcomes for those detained and the public.

Our values

- Independence, impartiality and integrity are the foundations of our work.
- The experience of the detainee is at the heart of our inspections.
- Respect for human rights underpins our expectations.
- We embrace diversity and are committed to pursuing equality of outcomes for all.
- We believe in the capacity of both individuals and organisations to change and improve, and that we have a part to play in initiating and encouraging change.

Our remit

Our remit is primarily set out in section 5A of the Prison Act 1952. We inspect:

- adult men's and women's prisons in England and Wales
- young offender institutions (YOIs) in England and Wales
- secure training centres (STCs) in England
- all forms of immigration detention throughout the UK and overseas escorts
- police custody in England and Wales
- court custody in England and Wales
- Border Force custody in England and Scotland
- military detention facilities throughout the UK, by invitation
- prisons in Northern Ireland, by invitation
- prisons and other custodial institutions in other jurisdictions with links to the UK, by invitation.

Most inspections take place together with other inspectorates, including Ofsted, Estyn, HM Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS), Care Quality Commission (CQC), Healthcare Inspectorate Wales, HM Inspectorate of Probation, Criminal Justice Inspection Northern Ireland, HM Inspectorate of Constabulary in Scotland, Care Inspectorate Wales and the General Pharmaceutical Council, appropriate to the type and location of the establishment.

OPCAT and the National Preventive Mechanism

All inspections carried out by HM Inspectorate of Prisons (HMI 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. HMI Prisons is one of 21 members making up the NPM in the UK and is part of its steering group. HMI Prisons also hosts the NPM secretariat, which coordinates the NPM's joint activities. More information about the NPM and its work can be found at:

www.nationalpreventivemechanism.org.uk and on Twitter at @uknpm.

Our approach

HMI Prisons' inspections are carried out against published inspection criteria known as *Expectations*. The Inspectorate sets its own inspection criteria to ensure transparency and independence. The starting point of all inspections is the outcome for detainees. The Inspectorate's *Expectations* are based on and referenced against international and regional human rights standards, with the aim of promoting treatment and conditions in detention which at least meet recognised human rights standards. All the Inspectorate's *Expectations* are available at: <https://www.justiceinspectorates.gov.uk/hmiprisons>.

Expectations for inspections of adult male and female prisons and YOIs are based on four tests of a healthy establishment. For adult male prisons, the four 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.

The tests for female prisons and YOIs vary slightly. The tests for immigration detention facilities are also similar but consider the specific circumstances applying to detainees, that they are not being held for committing a criminal offence and that their detention may not have been as a result of a judicial process.

In other inspection sectors, the principles underpinning the healthy establishment concept are applied but the specific focus varies, depending on the sector. These are described in more detail in the relevant sections of the report.

Each expectation describes the standards of treatment and conditions an establishment is expected to achieve. These are underpinned by a series of 'indicators', which describe evidence that may show the expectation being met. The list of indicators is not exhaustive and does not exclude other ways of achieving the expectation.

The inspection team assesses the establishment's performance against the healthy establishment tests using the following judgements:

<i>Numeric</i>	<i>Definition</i>
4	Outcomes for prisoners/detainees are good There is no evidence that outcomes for detainees are being adversely affected in any significant areas.
3	Outcomes for prisoners/detainees are reasonably good There is evidence of adverse outcomes for detainees in only a small number of areas. For the majority, there are no significant concerns.
2	Outcomes for prisoners/detainees are not sufficiently good There is evidence that outcomes for detainees are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of detainees. Problems/concerns, if left unattended, are likely to become areas of serious concern.
1	Outcomes for prisoners/detainees are poor There is evidence that outcomes for detainees are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for detainees. Immediate remedial action is required.

Inspectors use five key sources of evidence in making their assessments:

- observation
- prisoner/detainee surveys
- discussions with prisoners/detainees
- discussions with staff and relevant third parties
- documentation.

HMI Prisons operates an almost entirely unannounced inspection programme (other than in exceptional circumstances), with all inspections following up recommendations from the previous inspection. There is a minimum frequency for inspection of all types of establishments, with the timing of inspections deliberately unpredictable. Such an approach is based on, and responsive to, considered intelligence and proactive risk assessment.

Prisons are inspected at least once every five years, although we expect to inspect most every two to three years. Some high-risk establishments may be inspected more frequently, including those holding children, which are currently inspected annually.

We also conduct Independent Reviews of Progress (IRPs), short follow-up visits to up to 20 prisons a year. They aim to give the government independent evidence about how much progress has been made in improving the treatment and conditions for prisoners following our recommendations from particularly concerning inspections.

Every immigration removal centre (IRC) receives a full unannounced inspection at least once every four years, or every two years if it holds children. Non-residential short-term holding facilities (STHFs) are inspected at least once every six years. Residential STHFs are inspected at least once every four years. Within this framework, all immigration inspections are scheduled on a risk-assessed basis.

We inspect each police force's custody suites at least once every six years, or more often if concerns have been raised during a previous inspection or by other intelligence. Court custody facilities are inspected at least once every six years, and Border Force custody facilities are inspected at least once every two years.

In addition to inspections of individual establishments, we produce thematic reports on cross-cutting issues, singly or with other inspectorates, including as part of the Criminal Justice Joint Inspection process. We also use our inspection findings to make observations and recommendations relating to proposed legislative and policy changes.

1

Introduction by the Chief Inspector of Prisons



This is my fifth Annual Report. The COVID-19 pandemic has had such an enormous impact on prisons and other places of detention that it would make little sense to reflect only the findings of HM Inspectorate of Prisons during the ‘reporting year’ of April 2019 to March 2020. I have therefore decided to include an annex to this report, covering the period to the end of June 2020, allowing me to describe our initial response to the COVID-19 pandemic and to set out our findings. Our full inspection programme was suspended on 17 March 2020, and we developed short scrutiny visits (SSVs) to continue to fulfil our duty to scrutinise and report independently on treatment and conditions during the early stages of the crisis. An account of this work can be found in the annex at the end of this report.

Despite the impact of the COVID-19 pandemic on prisons, we must not forget what we had already seen during inspections earlier in the year. The challenges faced by many prisons, and the systemic weaknesses that we identified in some key areas, will not have gone away because of the health emergency. When the immediate crisis is over, there will still be an urgent need to address the serious issues that adversely affect the safety and decency of our prisons, the opportunity they offer for rehabilitation and their contribution to reducing reoffending.

Grounds for cautious optimism?

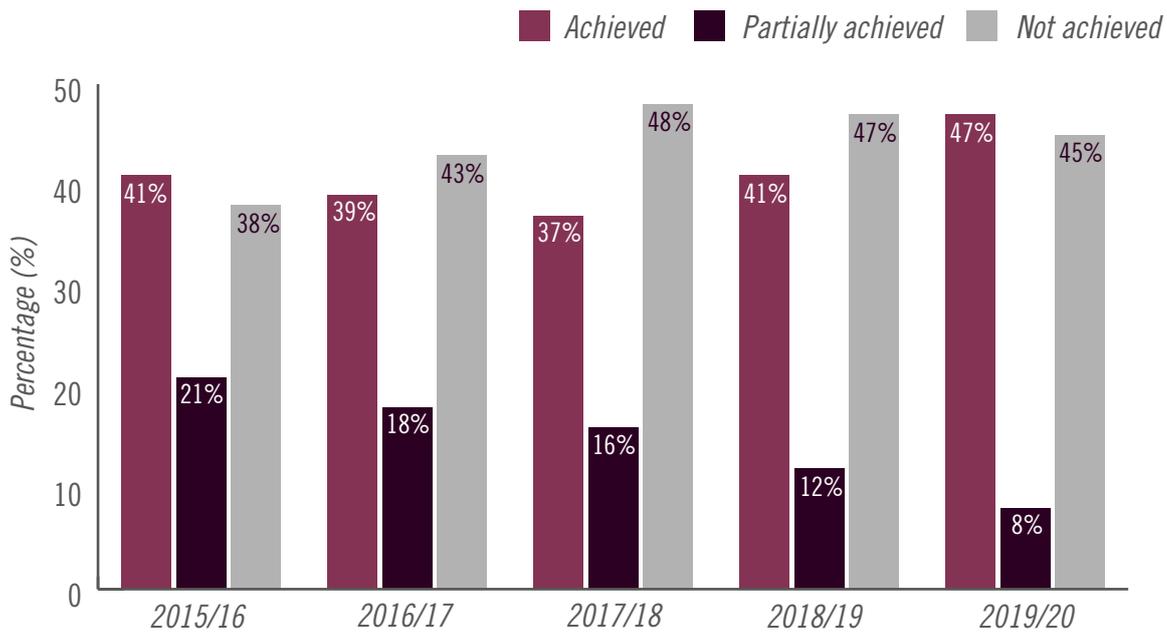
HM Inspectorate of Prisons often refers to the impact of leadership and good management on the outcomes experienced by prisoners. I have frequently pointed out the benefits of local initiatives and clear, focused leadership. In 2017, HMP Liverpool was the subject of one of the most damning inspection reports in recent years, and at the time I commented publicly on how there had been a failure of leadership at local, regional and national levels. A new governor was appointed and the process of recovery began. When I returned to Liverpool in September 2019, the prison was almost unrecognisable. The filth and vermin had gone, and prisoners

were no longer being held in degrading, squalid conditions. Staff and prisoners alike had contributed to the change. Some cynics have tried to persuade me that any jail could have achieved this with the resources that had been made available to HMP Liverpool. This is quite wrong and diminishes what has been achieved. The transformation came about because of leadership, teamwork and collaborative working between managers and staff. The tears and applause that greeted our positive feedback at the end of the 2019 inspection was, quite simply, an expression of pride in what had been achieved. This year it was also reassuring, during our Independent Reviews of Progress (IRPs), to see the positive impact that effective leadership had at other prisons that had suffered from poor performance, such as at Lewes and Channings Wood. However, we have also seen how poor or inconsistent leadership can and does lead to appalling failure, as was the case this year at HMYOI Feltham A.

In the past I have pointed out the correlation between the achievement of our recommendations and the performance of a prison. While we do not give prizes for following recommendations, as a general proposition it is true to say that better outcomes tend to occur where establishments have taken our recommendations seriously and done their best to implement them. For the past three years, a greater number of our recommendations have not been achieved than achieved. Therefore, it is good to see that this year, for the first time since 2015–16, a slightly higher proportion of our recommendations have been achieved than not. I hope this sets a pattern for the future as it is clear the correlation applies to all types of prison. For instance, Cardiff is a local prison that has faced many challenges, so it was particularly pleasing to see strong improvement there in 2019. The fact that Cardiff had fully achieved more than half of the recommendations made at the previous inspection was surely no coincidence. Similarly, Hatfield, an open prison where 24 out of 29 recommendations had been fully achieved, scored the highest grades in all our tests. In contrast, at Hewell we found that only 14 out of 57 recommendations

had been achieved, that performance had declined in the closed part of the prison and that the open prison had ceased to deliver its most basic functions. Overall, I have seen enough during the year to make me cautiously optimistic for the future, but only if the early signs of focus and momentum that we saw in some prisons can be replicated elsewhere, and survive the impact of the COVID-19 pandemic.

Figure 1: Recommendations achieved, 2015–16 to 2019–20



For many years safety and decency in prisons has been undermined by the prevalence of illicit drugs and the impact they have in generating debts, bullying and violence. The prison service was far too slow to respond to the impact of so-called new psychoactive substances, often referred to as Spice, when they began to ravage many jails over the course of the last decade. Far too slowly, technology that has been available for many years in other sectors has begun to be introduced into some prisons. For instance, scanners that can detect internally concealed drugs are now being introduced. My experience in those prisons where I have seen them operating is that they are warmly welcomed by staff, who feel safer. I have been given many examples of the deterrent and disruptive effect they have on the drugs trade in prisons. It is incumbent on HM Prison and Probation Service (HMPPS) to make sure that this technology, and others, are now used to their full potential.

Serious concerns remain

As a result of the 2017 inspection of HMP Liverpool, and a subsequent recommendation from the parliamentary Justice Select Committee, HMI Prisons was funded to carry out a new form of scrutiny called Independent Reviews of Progress (IRPs). These are not inspections, and are fundamentally different from our usual work in that we do not look so much at outcomes but rather what efforts management has put into responding to our recommendations from previous inspections. The IRPs have been carried out at establishments where there has either been an Urgent Notification to the Secretary of State or because there were other important issues that we felt needed to be reviewed earlier than would be the case during the normal inspection programme.

It was therefore disappointing to find that progress had too often been disappointingly slow. In several cases, it had been many months before there had been any meaningful progress. I have seen so-called action plans where there had been little action, and responses to Urgent Notifications where the element of urgency was completely lacking. For instance, at HMP Pentonville in January 2020 we found that little had been done to respond to a very poor inspection report in 2019 until a few days before the IRP itself. However, as if to prove that effective leadership produces results, very real progress had been made at HMP Birmingham after it had been subject to an Urgent Notification following some of the worst inspection findings we had ever seen in 2018. Similarly, at Lewes we found a prison with a renewed sense of purpose and direction, that had made good or reasonably good progress in three-quarters of the recommendations we reviewed, and had shaken off the shackles of years of ineffective ‘special measures’. Overall, IRPs carried out during the year found varying progress (see Appendix seven). IRPs can be an effective driver of improvement, especially when prison leaders respond to serious concerns as soon as possible after an inspection or Urgent Notification, and do not wait for months before acting. That we found good or satisfactory progress in half of the recommendations we reviewed shows what is possible. It is vital that HMPPS both demands and enables a rapid response to concerning inspection findings.

As well as the concern about the pace of progress following poor inspection reports, it was particularly worrying that IRPs found widespread poor performance in the area of purposeful activity. Purposeful activity sits at the heart of whether a prison can offer a safe, decent and rehabilitative environment. We found that no meaningful progress or insufficient progress had been made against 12 of the 15 recommendations we reviewed in this area. Our partners from Ofsted reviewed progress on a thematic basis, and found no significant progress against any theme they reviewed.

Time spent in purposeful activity is key to prisoners’ sense of well-being, to their mental and physical health, to their ability to acquire skills and to prepare for release. Our findings make for depressing reading. A mere 24% of our previous main recommendations had been achieved. Only five prisons had improved in this area – fewer than in any other test. There were far too often shortfalls in the number of jobs or education places available for prisoners, even in training prisons. Allocation to activities was too often haphazard, and the activities themselves mundane, offering little incentive for prisoners to attend.

Still too much time locked up for most prisoners

Given the obvious linkage between excessive time locked in cells and mental health issues, self-harm and drug abuse, it was concerning to find that the amount of time for which prisoners were unlocked for time out of cell was often unacceptably poor. Nineteen per cent of adult male prisoners told us that they were out of their cells for less than two hours on weekdays, including 32% in men’s local prisons. Is it any surprise that self-harm in prisons has been running at historically high levels during the past year? Prisoners often tell us they are harming themselves to gain some attention, for instance if their applications or complaints are being ignored.

We frequently find there is simply not enough being done to try to understand the reasons for self-harm. It is often measured, but not really understood. This must change, and sophisticated analysis is required to understand the issue in different prison settings, particularly in women’s prisons where, for many years, levels of self-harm have been far higher. Moreover, it was worrying, in the early stages of the COVID-19 crisis, that an apparent levelling off in self-harm was not properly analysed or explained, and some even tried to argue that longer periods locked in cells did not contribute to levels of self-harm. Such superficial commentary should, in my view, be treated with extreme caution.

Systemic failure in offender management

The ability of prisoners to rehabilitate and progress towards a safe and purposeful release back into the community is, in most cases, critically dependant on a process known as the Offender Assessment System (OASys). For several years we have found that this system is failing. We have found prisons where many hundreds of prisoners either have no documentation at all, or where it is hopelessly out of date. Over the years I have been repeatedly assured that all will be well when new staff become available, or when new ways of working are introduced. However, nobody at any level of HMPPS can tell me how many eligible prisoners do not have a current OASys. At local level it is not unusual for us to find that the prison themselves have little or no idea what the shortfall is. The system is broken, and there are indications that, during the COVID-19 lockdown, it has ceased to function at all in some places. An important part of the recovery plan after the pandemic recedes must be to take a strategic decision to either repair the broken system, or replace it with something new that serves the needs of prisoners and public alike. The following is an excerpt from my introduction to the HMP Wealstun inspection report:

OASys is supposed to provide the basis for managing risk, informing sentence planning, making re-categorisation decisions and planning for release. However, we found that 75% of prisoners who were arriving at Wealstun were doing so without an assessment, and more than a quarter had one that had not been updated for more than a year. There had been some creditable work carried out locally to try to devise sentence plans, but two-thirds of these were missing in the cases we looked at, and where they did exist they were ineffective. The widespread shortcomings of OASys comprise in my view a strategic failure that undermines so much good work that we see being carried out at a local level, and demands a more coordinated and serious response from HM Prison and Probation Service (HMPPS) than has been the case to date. **HMP Wealstun**

Children's custody – another systemic failure

In February 2017 I wrote to Dr Philip Lee, the minister responsible for youth justice, pointing out that, at that time, there was no establishment we inspected that we could say was safe to hold children. This was shortly after the publication of a report by Charlie Taylor, setting out a vision for children's custody centred around a concept of secure schools, where well-trained staff experienced in education, health and welfare would work with children in a supporting environment and where disincentives to learning should be avoided. Taylor's vision was broadly welcomed and secure schools were agreed by government as the blueprint for the future of children's custody. Later in 2017, HMPPS assumed operational responsibility for the newly created Youth Custody Service.

Nearly four years on, there is still no sign of secure schools becoming reality. One site has been identified, but the facility is unlikely to open before the end of 2021 at the earliest. There is no timeframe for other secure schools to open. There are now four models of children's custody in England and Wales: secure children's homes (SCHs), secure training centres (STCs), young offender institutions (YOIs), and secure schools, but no overarching strategic framework or clear vision for the future.

Meanwhile, the outcomes for many children have been appalling. In January 2020 we published a thematic inspection report about the separation of children in custody, where children are unable to mix with their peers either to maintain order, as part of a punishment, due to the prison running a limited regime, or their own decision to self-isolate. The findings were, frankly, a disgrace. The most usual euphemism I have heard is that they made for 'hard reading'. There was no consistency in governance or practice. There was no overall data. The extent of separation and therefore any disproportion in its use was simply not known. In many cases children were being held in circumstances that amounted to solitary confinement. The extraordinary and inexcusable fact is that all of this came as a surprise to the Youth Custody Service itself. There was simply

no appreciation of what was happening in the establishments for which they were responsible. Thankfully, my main recommendation – that the whole system of separation should in effect be scrapped and redesigned – has been accepted by the Secretary of State.

At the level of individual YOIs, we saw a mixed picture which is described in more detail in the ‘Children in custody’ section of this report. However, as far as I was concerned any progress in individual establishments was totally overshadowed by a catastrophic failure at HMYOI Feltham A.

Feltham has a troubled history, with upturns and declines in performance, usually determined by the quality of leadership offered by the incumbent governor. In January 2018 we inspected Feltham A and it was going through a better period. We found it to be reasonably good in three of our four tests. I was impressed with the energy of the governor, but warned in our report that ‘progress could easily prove to be fragile if investment falls away or leadership loses its focus.’

When we next inspected in January 2019 we found that, in the intervening year, the establishment had been left without a governor for some five months and unsurprisingly standards had slipped. In spring 2019 we heard disturbing reports, and carried out an unscheduled inspection in July 2019. Our fears were justified, as performance had almost totally collapsed. There was virtually ungoverned use of force, children were locked up for excessive periods, were not receiving proper education or reliable access to health care, and were subject to behaviour management that was almost exclusively focused on punishment. I had no hesitation in invoking the Urgent Notification protocol – something that I had hoped I would never have to do for an establishment holding children.

Our findings both in respect of the use of separation and the appalling situation that we found at Feltham A were indicative of strategic failure in the delivery and governance of children’s custody. As an inspectorate we look primarily at the outcomes experienced by children, and

restrict our comments to what we find at an operational level. However, it is difficult to escape the conclusion that children’s custody has become far too closely aligned with the policies and practices of adult prisons. As an example, we have seen during the COVID-19 crisis that even when local leaders in YOIs wanted to deliver some face-to-face education to children, they were prevented from doing so by a central direction from HMPPS.

The response to COVID-19

Following the suspension of our full inspection programme on 17 March 2020, we immediately started to explore how we could fulfil our statutory duties to provide independent scrutiny of places of detention. There are also international obligations placed on the UK as a result of its ratification of OPCAT (the Optional Protocol to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment), to ensure that places of detention are subject to independent scrutiny.

It was clearly not going to be feasible or safe, for the foreseeable future, to inspect prisons in the usual way. We therefore devised what we called ‘short scrutiny visits’ (SSVs), which were essentially short, announced visits to prisons by a small number of inspectors (usually two or three) for one day, when they would look at a small number of key issues relevant to the basic rights of prisoners: safety, decency and health. We would not carry out our usual survey of prisoners, and everything we did would be in accordance with the prevailing health advice.

The visits were arranged on a thematic basis, with the intention of visiting three establishments with a similar purpose simultaneously, such as YOIs, local prisons, training prisons, women’s prisons, immigration removal centres (IRCs), high security prisons and open prisons. The purpose of this was to enable us to compare approaches and outcomes at supposedly similar establishments, and therefore to comment on good practice in one establishment that could be used in another, or to point out discrepancies.

Our programme received welcome support from Ministers and HMPPS, and we also found that after some initial apprehension, governors and directors were appreciative of the visits, and welcomed our commentary. The findings were immediately fed back to governing teams, and the reports were published within a month of the visits taking place.

Broadly speaking, we found that the initial response to the crisis in prisons had been swift and well communicated to prisoners. Extremely restrictive regimes were quickly imposed in all prisons, and almost all prisoners were therefore confined to their cells for around 23 hours every day. This was accepted and understood by prisoners.

As the series of visits continued areas of good practice emerged and were shared with HMPPS so that they could be promulgated more widely. Some issues of concern also began to emerge.

- All social visits had been suspended in March, and by the end of June this was beginning to cause frustration among prisoners.
- HMPPS had set in motion a programme to deliver secure video calling for prisoners to be able to speak to their families. However, there was a strong perception among prisoners that this programme was frustratingly slow to be implemented. In May we had found women who had not been able to see their children for two months.
- Time out of cell was still extremely restricted for nearly all prisoners, and with the almost complete lack of work, training or education, frustrations were beginning to build.
- In the children's estate, there had been no face-to-face education (except at Parc and initially at Cookham Wood) since March.

As time moved on, and the discrepancy between the restrictions in prisons and the community grew, it became apparent that, as an inspectorate, we needed to broaden and deepen the scope of our visits, and to focus on individual establishments. As well as looking at more traditional 'inspection' issues, we also needed to be able to examine and come to a judgement on aspects that were particular to the COVID-19 emergency. For instance, were the restrictions that remained in place in prisons proportionate to the risk of infection? Were there other risks, as the threat of infection declined, that could begin to pose a greater risk to prisoners, such as the impact of prolonged confinement on their mental or physical health? Was the pace at which various restrictions were being lifted appropriate? To achieve this, we decided to move on to another and different type of scrutiny visit, which we would implement in July 2020.

Men's prisons

Safety

Safety was still a major problem in prisons holding adult men. Although outcomes had improved in a number of prisons, we still found that 12 of the 14 local prisons we inspected had poor or not sufficiently good outcomes. Far too many prisoners told us that they felt unsafe, and the quality of investigation and analysis of violence was too variable. This was no doubt linked to the fact that very often the documentation recording the use of force was inadequate or missing entirely. At Hewell we found that some 350 documents relating to the use of force were missing and even worse, in the children's estate at Feltham A, there were 900 missing records. This is clearly a serious issue that demands close management attention across all custodial settings.

Sadly, yet again I must report that recommendations made by the Prisons and Probation Ombudsman following deaths in custody were not responded to properly, with an inadequate response at some 40% of prisons. I find it hard to understand why senior HMPPS line management do not take a more intrusive approach to addressing these repeated failures.

Respect

There have been some encouraging improvements in this area, with most inspected prisons scoring well against our tests. Some prisons had improved living conditions, although as I have reported in previous years, far too many prisoners spend much of their lives locked in shared, overcrowded, insanitary cells. There is still a need to improve equality and diversity work in many prisons. Black and minority ethnic prisoners consistently report less favourably in our surveys about their experiences of prison life, but far too often we find that establishments have done little or nothing to understand these negative perceptions. It was good to find that health care provision was improving and reasonably good at most prisons.

Purposeful activity

As noted above, overall this is the area that has produced the poorest results over the past year. Less than a quarter of our main recommendations had been achieved, even partially, and, worryingly, training prisons did not perform well, when purposeful activity should be their *raison d'être*. More than half were judged to be poor or insufficiently good in this area. Yet again we found that prisoners had far too restricted time unlocked and out of their cells, and were generally offered far too little time outside. I hope that with the increased numbers of staff now available, regimes will change to allow prisoners to spend their time more productively.

Rehabilitation and release planning

It was pleasing to see some good examples of work to improve and maintain family ties. There is no doubt that the increasing availability of in-cell telephony has made a big difference to the lives of those prisoners who have access to it, and it is a very welcome development. I hope that one of the long-term impacts of the COVID-19 crisis will be to embed a more flexible use of technology to help prisoners maintain contact with their families.

A problem that afflicts many prisons is finding suitable accommodation for prisoners on their release. We saw nearly half of prisoners released homeless or to temporary accommodation, which is obviously unacceptable and heightens the risk of reoffending. Although the solution to this sits, to an extent, outside establishments, there are good examples of where partnership working with local authorities can help enormously – as at Liverpool.

On several occasions during the year we have been worried by failings in public protection work, with the requirements for phone and mail monitoring and child contact arrangements not properly understood.

Women's prisons

Women's prisons continued to hold some of the most vulnerable and victimised prisoners. Levels of self-harm remained high, but generally we saw good levels of care. Relationships between staff and prisoners continued to be a key strength in women's prisons, with 84% of women telling us they had a member of staff they could turn to if they needed help. A high proportion also said that most staff treated them with respect.

It was disappointing that so many women continued to be released from prison with significant gaps in their accommodation arrangements. At Eastwood Park, for instance, 42% of women had been released homeless or to very temporary or emergency accommodation in the six months prior to our inspection, and when 38% of women in the prisons we inspected this year told us they had arrived with drug or alcohol issues, the vulnerabilities created by releasing women homeless are obvious.

I took part in the inspection at Askham Grange and although it had remained an exceptionally decent and purposeful establishment, it had for a number of years, been labouring under uncertainty as to its future. It was to the credit of everyone working there that they had retained their positivity, enthusiasm and sense of innovation in these circumstances.

Children in custody

I have already referred to my deep concerns about the performance and lack of clarity about the future of custody arrangements for children. This is reflected in the inconsistent performance of YOIs, with improvements in some locations being matched by declines in performance at others. If one accepts that the basic responsibility of those holding children is to do so safely, then only two establishments met that standard, although it is true to say that there had been some improvements in the care of children at risk of self-harm and suicide at all establishments except Feltham A

As I have repeatedly said before, a fundamental problem in children's establishments is how to break the negative cycle of punishment and restriction that is all too often used to try to manage poor behaviour. Of course, staff must be confident and safe at their place of work, but history teaches us that in the long term a safer environment can only be produced through a balanced approach to behaviour management that includes incentives as well as punishments.

This year, by far the most successful YOI that we inspected was Parc. Compared to the others it is a small establishment, but it is not only its size that plays in its favour. The positive and engaging culture which is generated there is clear to see, and I noticed that the boys were keen to speak, to describe their experiences and talk about their lives. This was in almost complete contrast to my experience in other YOIs, and I do believe that there is much that could be learned from Parc. Surprisingly, there does not seem to be much willingness to do so, which I do not understand.

Immigration detention

At the time of writing, because of the COVID-19 crisis the number of detainees held in immigration detention had fallen dramatically, and it is too early to say what the future holds in terms of the size and shape of such detention in the future.

During the year our inspections showed, as usual, that immigration detainees suffered

a great deal of anxiety because of the uncertainty of their predicament. The slow progress of their immigration cases and the open-ended nature of their detention were issues for them. Notably, self-harm had risen at all centres.

Too many immigration detention facilities were still either designed as prisons, or closely resembled them. It is possible that this has an impact on other aspects of security that we sometimes judge to be used excessively, such as handcuffs and strip-searching. We also identified serious concerns about safeguarding and legality of detention in the British-run short-term holding facilities in France.

During the year a public enquiry was established, to be carried out by the Prisons and Probation Ombudsman, into a range of issues relevant to the treatment of detainees at Brook House IRC in 2016, prior to the broadcast of a BBC *Panorama* programme that made allegations of ill-treatment. We will be providing evidence to the enquiry.

Police custody

During the year we carried out the first inspections of the custody suites that are used for holding suspects arrested for terrorism or terrorist-related offences, together with HM Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS). Overall this was a very positive inspection, and the main issues were around the need to clarify the relationships and therefore the lines of accountability between the national police counter-terrorism network which investigates terrorism, and the forces which host and are therefore responsible for the custody suites themselves. These 'TACT' suites are probably the most highly regulated and supervised of all police custody facilities.

In our other police custody inspections we still found frequent weaknesses in the governance of the use of force. When force was used it was generally necessary and proportionate, but it was the recording and supervision that needed to be improved. We also regularly found breaches of the various PACE codes governing the treatment of suspects and their entitlements.

During the year we have been discussing the arrangements that exist between HMI Prisons and HMICFRS for our joint inspections of police custody. We have now agreed that the overall leadership of these inspections should pass from HMI Prisons to HMICFRS, but that we will continue to inspect issues in line with our respective skills and experience, and produce joint reports.

Acknowledgements

Throughout my tenure as Chief Inspector I have always been deeply impressed by the commitment, care, empathy and professionalism of so many staff who work in places of detention, be they prisons or elsewhere. The prisoners and detainees for whom they are responsible are often among the most challenging, vulnerable and sometimes violent in our society. The work can be dangerous, difficult and often goes unrecognised. However, I am repeatedly struck by how so many go 'above and beyond' to help those in their care. Anyone who has attended the annual Butler Trust Awards at St James's Palace, presented by HRH The Princess Royal, cannot fail to be humbled by the dedication and skill of the recipients. During my visits to prisons I have seen many more people doing excellent work who I am sure could be equally deserving. I am grateful for the excellent help and support that we receive from establishment staff during our inspections. At every inspection I ask that my thanks should be passed to all the staff who have supported the process of inspection, and I do so again here. Without their help we could not possibly succeed in our work.

I am also deeply grateful to every one of my colleagues at HMI Prisons who have been unfailingly supportive and helpful to me throughout my time as Chief Inspector. It has been a real privilege to work with them, to learn so much from them, and to share the experiences of being 'on the road' with them in the many and varied places where our prisons, IRCs, police stations, military detention facilities and courts are located. I wish them all the very best for the future.

2

Independent Reviews of Progress



IRPs find insufficient and varied progress across the prison estate

During the year, HM Inspectorate of Prisons introduced a programme of Independent Reviews of Progress (IRPs), a new type of visit which provide an independent assessment of the progress a prison has made in implementing recommendations. The impetus for IRPs began in January 2018, when the Justice Select Committee held an evidence session following the publication of HMI Prisons' report of its 2017 inspection of Liverpool. The Committee reported that: 'It appears that the prison's own reporting masked the extent of deterioration at HMP Liverpool after the 2015 inspection' and recommended that HMI Prisons be given additional resources to follow up on recommendations. HMI Prisons was subsequently provided with funding to carry out this work and developed its methodology to do so during 2018–19.

IRPs are not inspections and do not result in scores. Instead, judgements are made about the progress of the implementation of a selection of key recommendations from the previous full inspection. Prisons are selected for an IRP for a number of reasons, including repeated poor inspections and scores, potential risks and the vulnerability of those detained.

Overview of IRPs undertaken during the year

The first IRP took place in April 2019 and 16 reviews were carried out throughout the year, including at three establishments where the Urgent Notification protocol had been triggered. All of the establishments selected for visits during the year were men's prisons. The visits took place nine to 13 months after an establishment's full inspection and the number of recommendations reviewed ranged from nine to 15.

Ofsted joined HMI Prisons when the overall judgement for education, skills and work at the previous full inspection was either inadequate or required improvement; in 2019–20 Ofsted inspectors joined HMI Prisons inspectors on 12 IRPs. During these visits Ofsted carried out monitoring of progress against themes, considering three themes at each visit.

These were given one of three progress judgements: insufficient progress, reasonable progress or significant progress. Ofsted's first IRP visit was to The Mount, but during this visit inspectors did not make judgements against themes as their methodology was in development.

Of the HMI Prisons' recommendations selected for review, the majority related to safety (42%), followed by respect (30%), rehabilitation and release planning (20%) and purposeful activity (8%).

Varied progress found across and within establishments

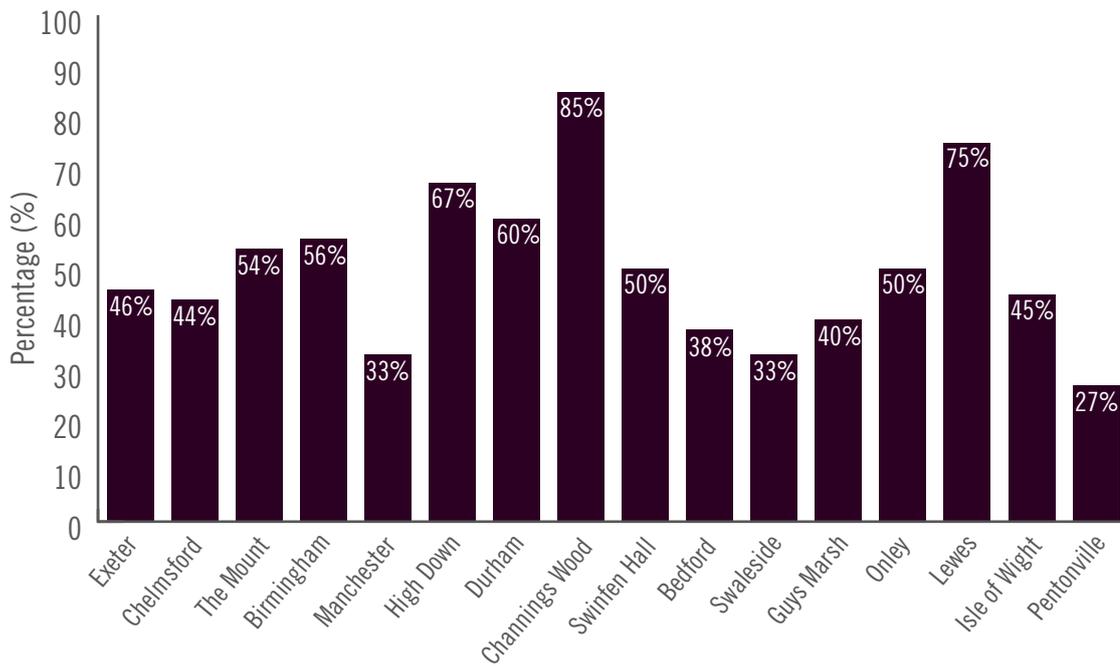
Progress against each recommendation is assessed at one of four levels: no meaningful progress; insufficient progress; reasonable progress; or good progress. Overall, progress had not been satisfactory. Inspectors found that insufficient or no meaningful progress had been made against half (50%) of the recommendations reviewed. Inspectors judged that no meaningful progress had been made against 18%, insufficient progress against 32%, reasonable progress against 29% and good progress against 21% (see Appendix seven).

Across the 16 prisons, the least progress had been made in purposeful activity – of the 15 purposeful activity recommendations reviewed, inspectors considered that there had been no meaningful progress or insufficient progress in 80% of them. Of the 36 themes that Ofsted reviewed, it considered that insufficient progress had been made against 58% and reasonable progress against 42%. Ofsted did not consider that there had been significant progress against any theme reviewed.

Better progress had been made in the other healthy prison assessment areas – inspectors judged that there had been reasonable or good progress against 55% of recommendations about safety, 52% of recommendations about respect and 49% of recommendations about rehabilitation and release planning.

IRPs found varying progress between establishments. Reasonable or good progress had been made in achieving only 27% of reviewed recommendations at Pentonville, compared with 85% at Channings Wood.

Figure 2: Percentage of reviewed recommendations against which good or reasonable progress had been made



As well as varying progress between establishments, IRPs found inconsistent progress in achieving recommendations within establishments themselves. For example, when inspectors assessed safety at Onley, good progress had been made to reduce levels of violence, which had fallen dramatically since the inspection. A substantial amount of work had been undertaken to understand the high levels of violence and a comprehensive safety strategy had been introduced. In contrast, no meaningful progress had been made on a drug supply reduction strategy and the availability of drugs remained a serious concern – the positive rate in random testing had increased since the full inspection.

At prisons where reasonable or good progress had been made on more than two-thirds of recommendations, inspectors considered that leaders and managers had understood the weaknesses and concerns identified at the full inspection and had focused on addressing them with a clear sense of direction – this was the case at Channings Wood, Lewes and High Down. During the inspection of Lewes, we recommended that a comprehensive

violence reduction action plan be developed. At the IRP, inspectors found that managers had carried out a wide range of consultation with prisoners and staff, along with some good data analysis. This had informed a new safety strategy and well-considered violence reduction action plan, which was reviewed regularly and robustly managed.

During the inspection of Channings Wood, inspectors found there were stark differences in culture and environments across living blocks and half of the prisoners lived in very poor conditions. At the time of the IRP, a single head of residence was leading the development of a unified approach to living conditions. Effective systems for checking cell conditions had been implemented. Broken furniture was replaced and cells with broken windows were put out of use. Communal areas were clean and brighter, with many areas newly painted.

Barriers to progress

Insufficient progress in implementing recommendations resulted from prisons being too slow to take action, poor local leadership and insufficient HM Prison and Probation Service (HMPPS) support.

Local leaders and managers had made too little progress on some key recommendations at several prisons. For example, at Swaleside, nine months after our inspection, strategic direction and initiative to support the reduction of self-harm was still lacking and no action plan had been developed. Similarly, there was no violence reduction strategy or action plan, and managerial oversight of the use of special accommodation remained poor.

At some establishments, recommendations were not acted on until shortly before the IRP took place.

Although the prison had produced a spreadsheet containing all the recommendations made following death in custody investigations since 2017, and despite a standing agenda item for the safer custody meeting to review these, no systematic reviews had taken place. A review began a week before our visit and continued while we were in the prison.

Manchester

At Pentonville, we recommended that a robust quality assurance process be introduced for assessment, care in custody and teamwork (ACCT) case management for prisoners at risk of suicide and self-harm, but this had only been introduced in the week prior to our IRP. There had been three self-inflicted deaths at both Pentonville and Manchester between the time of the inspection and the IRP. This demonstrated the urgent need for both prisons to act, but Pentonville had taken 10 months and Manchester had taken a year to begin to implement these recommendations.

Prisons slow to take action following an Urgent Notification

IRPs took place at three prisons – Exeter, Birmingham and Bedford – where the Urgent Notification process had been invoked at the previous full inspection.

At the time of the IRPs, all three had begun to respond to the concerns raised in the Urgent Notification process and had made improvements, but at Bedford and Exeter progress had been too slow.

Work to address weaknesses in suicide and self-harm prevention processes had been far too slow to develop following the Urgent Notification issued in September 2018. Leadership of safer custody had been weak, having been led by four different managers since the inspection. A strategy had only just been published but even this did not adequately address the unique challenges faced by the prison. **Bedford**

There had been a proactive response to some recommendations in critical areas at Exeter, but for too many serious concerns, there had not been a sufficient sense of urgency.

Equality and diversity had not been prioritised, despite being the subject of a main recommendation. Nobody had been leading in this area until the equality adviser took up post in January 2019 and, until that point, there had been little meaningful work to understand and respond to the needs of prisoners with protected characteristics. The first equality action team meeting for a year took place in April 2019 but without prisoner representation. **Exeter**

There was a lack of clarity about action plans at Exeter and Bedford. At Bedford, the centrally generated initial action plan was not properly linked to our recommendations. Managers at Bedford had generated their own plans that were focused on specific issues affecting the prison, which were more closely aligned to our concerns.

The prison was trying to manage several competing and sometimes confusing action plans to reduce violence. Actions did not always identify a responsible lead and were not always appropriately time bound. This affected the establishment's ability to track progress and resulted in several key actions remaining incomplete at the time of our visit. However, this was recognised and managers aimed to rationalise and simplify the planning process. **Exeter**

In contrast, at HMP Birmingham, reasonable progress had been made in over half of the reviewed recommendations and the governor's leadership was visible. Inspectors considered that a daily briefing from the governor to staff provided valued leadership and guidance. Nearly all staff and prisoners we spoke to said that they felt safer and that staff-prisoner relationships had improved. Some staff who spoke to inspectors were positive about the direction they were now following and prisoners who had been at the prison since the last inspection were keen to tell inspectors how it had improved.

Insufficient support from HMPPS

The lack of support from HMPPS was a barrier to making more meaningful progress at some prisons.

At HMP Isle of Wight, there was a significant difference between progress in areas local managers had responsibility for and those that required national support from HMPPS. Whereas local managers had made reasonable or good progress in five out of seven recommendations aimed at them, the four recommendations that required support from HMPPS had been rejected so no meaningful progress had been made. These recommendations included that single cells should only be used to accommodate one prisoner and all prisoners should have effectively screened in-cell toilets. During the IRP, inspectors assessed that there were about 160 prisoners sharing cells designed for one and the night-sanitation system was still in place for some prisoners. Many chose not to use the system due to its time restrictions and instead used a bucket.

At Chelmsford, inspectors judged that progress against our recommendation to reduce drug supply had been insufficient. The prison itself had taken a range of active steps to reduce the availability of drugs and other prohibited items but HMPPS had not prioritised providing up-to-date drug detection equipment.

Further progress over the last 10 months had been hindered by the failure of HMPPS to provide the prison with a full body scanner to help stem the flow of drugs and other illicit items into the prison. **Chelmsford**

Recommendations that HMPPS should use technology to disrupt drug supply were also reviewed during IRP visits at Bedford and Durham. At Bedford, inspectors noted that the ongoing lack of a full body scanner had continued to affect the prison's ability to reduce the supply of drugs, which like Chelmsford, had been insufficient. In contrast, at Durham, HMPPS had provided a body scanner and detector poles which were proving to be effective deterrents in reducing drug supply.

During the inspection of High Down, inspectors were told that the prison had been informed by HMPPS that it was to become a category C training prison, but there was no further detail about whether this would definitely happen or the timeframes involved. Consequently, there was uncertainty about the prison's future role and the plans and progress it should make. By the time the IRP took place, 13 months later, the prison had decided to focus on delivering a regime in accordance with its current category B status. This delay impacted on its progress in purposeful activity and Ofsted judged the prison to have been too slow in implementing action to improve the education, skills and work provision.



3

The year in brief

Between 1 April 2019 and 31 March 2020 we published 100 inspection and thematic reports.

Adult prisons (England and Wales):

- inspections of 37 prisons holding adult men
- Independent Review of Progress (IRP) visits to 16 adult male prisons
- inspections of five prisons holding adult women.

Establishments holding children and young people:

- seven inspections of five young offender institutions (YOIs) holding children under the age of 18 (the inspections of the Keppel Unit and Wetherby were published together in one report)
- two inspections of secure training centres (STCs) holding children aged 12 to 18, jointly with Ofsted.

Immigration detention:

- inspections of three immigration removal centres
- inspections of 13 short-term holding facilities
- two inspections of flight removals.

Police custody:

- inspections of police custody suites in six force areas, as well as TACT suites holding detainees arrested on suspicion of terrorism or terrorism-related offences, with HM Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS).

Court custody:

- inspections of three court custody areas.

Other publications

In 2019–20, we published the following additional publications:

- *Separation of children in young offender institutions*
- *Youth resettlement – final report into work in the community* (jointly with HM Inspectorate of Probation)
- *Youth resettlement work. Interim report into work in custody, October 2018–April 2019* (jointly with HM Inspectorate of Probation)
- *Children in custody 2018–19. An analysis of 12–18-year-olds’ perceptions of their experience in secure training centres and young offender institutions*
- *Monitoring places of detention. Tenth annual report of the United Kingdom’s National Preventive Mechanism 2018–19* (on behalf of the NPM)

During 2019–20, we also published jointly with HMICFRS the second edition of *Expectations for Border Force custody suites. Criteria for assessing the treatment of and conditions for detainees in Border Force custody*.

During the year we issued two Urgent Notification letters to the Justice Secretary expressing our serious concerns immediately following an inspection of a prison.

We also made written submissions to a range of consultations and inquiries, commented on draft Detention Services Orders, and gave oral evidence to Parliamentary committees, including:

Written submissions

- Justice Select Committee, Prison governance (May 2019)
- Home Office, Removal centre rules (June 2019)
- Home Office, Detention Services Order, Deaths in detention (June 2019)
- Health, Social Care and Sport Committee (National Assembly for Wales), Provision of health and social care in the adult prison estate (September 2019)
- Home Office, Detention Services Order, Mental incapacity/Disability in immigration detention (September 2019)
- Justice Select Committee, Children in custody (October 2019)
- Justice Select Committee, Children in custody – resettlement and rehabilitation (jointly with HM Inspectorate of Probation) (October 2019)
- Justice Select Committee, Ageing prison population (October 2019)
- Her Majesty’s Prison and Probation Service, X-ray body scanners policy framework (January 2020)
- Home Office, Detention Services Order, Video calling (January 2020)
- Her Majesty’s Prison and Probation Service, Arrangements for the management of cleaning in the workplace policy framework (February 2020)
- Youth Custody Service, Operational Guidance, The care and management of children and young people who are transgender in the youth secure estate (March 2020)

Oral evidence

- Justice Select Committee, Prison governance (16 July 2019)
- Health, Social Care and Sport Committee (National Assembly for Wales), Provision of health and social care in the adult prison estate (3 October 2019)

Our reports and publications are published online at:

<http://www.justiceinspectorates.gov.uk/hmiprisons>

Report publication and other news is notified via our Twitter account. Go to: <https://twitter.com/HMIPrisonnews> or [@HMIPrisonnews](https://twitter.com/HMIPrisonnews)

4

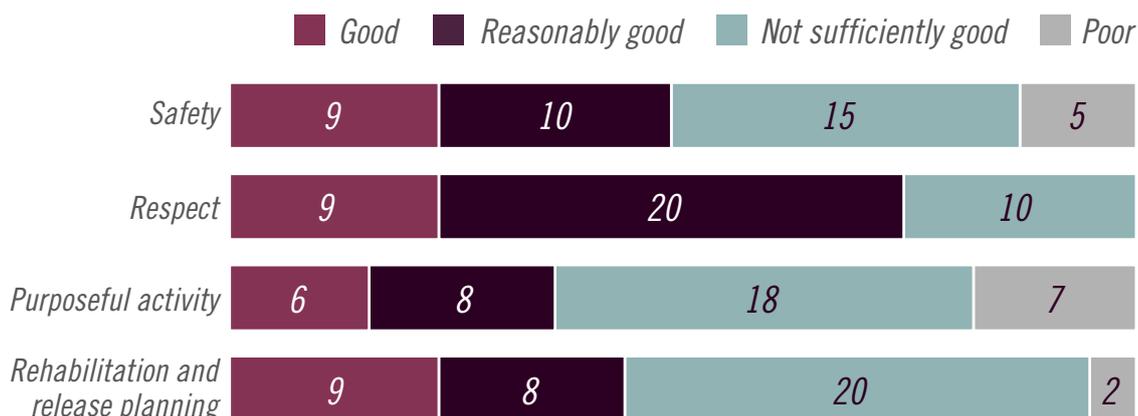
Men in prison



The findings from prison inspections reported in this section are based on the fifth edition of our *Expectations: Criteria for assessing the treatment of and conditions for men in prisons*, published in July 2017.

During our inspections in 2019–20, we visited 37 prisons and young offender institutions holding adult and young adult men and made 39 healthy prison assessments (figure 3). (We made separate assessments for the closed and open sites at Hewell, and for the category B and category C sites at Winchester.)

Figure 3: Published outcomes for all prisons and young offender institutions (YOIs) holding adult and young adult men (39)

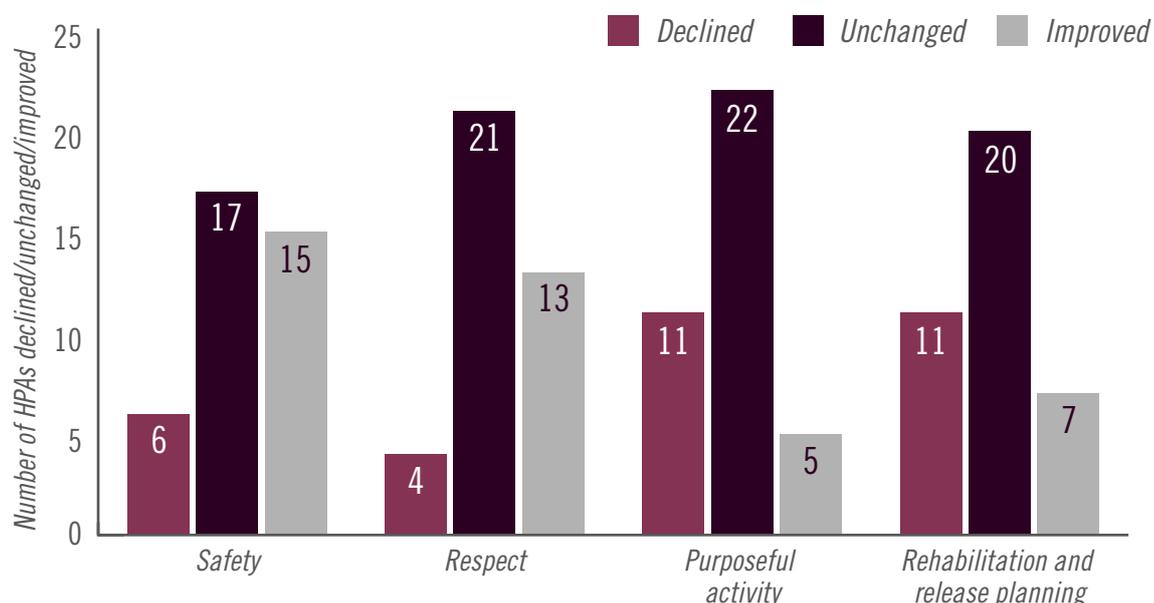


We have compared the outcomes for the prisons we reported on in 2019–20 with the outcomes we reported the last time we inspected the same establishments (figure 4). Details for each healthy prison area (HPA) are also shown in the tables on safety (p.34), respect (p.40), purposeful activity (p.46), and rehabilitation and release planning (p.52).

In addition to these full inspections, we also made Independent Review of Progress (IRP) visits to 16 prisons to follow up recommendations from our previous inspections (see also p.22).

Figure 4: Outcome changes from previous inspection of prisons and YOIs holding adult and young adult men (38)

(We carried out our first inspection of Berwyn during this period so there was no previous comparable data.)



Prisons are still not safe enough

- Safety outcomes remained poor or not sufficiently good in just over half of our inspections, especially in local prisons.
- Half of all prisoners told us they had felt unsafe at some time.
- Drug misuse, poor living conditions and a lack of purposeful activity contributed to high levels of violence and self-harm.
- The implementation of new intervention plans to manage perpetrators of violence varied across prisons, and support for victims remained weak.
- The governance of segregation was not always effective, and the regime for segregated prisoners was too limited.
- Drugs remained a significant problem, but the increasing use of technology was helping prisons to reduce the supply.
- Seventy-four adult male prisoners took their own lives during the 12 months to June 2020, and levels of self-harm continued to rise at an unprecedented rate.

Safety outcomes in adult male prisons had improved in 15 of the 38 inspections where we had comparable data (see figure 4) during the year but had declined in six. Despite this apparent marginal improvement, outcomes in 12 of 14 local prisons inspected were either poor or not sufficiently good.

Table 1: Safety outcomes in establishments holding adult and young adult men

	<i>Good</i>	<i>Reasonably good</i>	<i>Not sufficiently good</i>	<i>Poor</i>
Local prisons	0	2	8	4
Category B training prisons	0	2	2	0
Category C training prisons	2	5	3	1
Establishments holding sex offenders	3	0	1	0
Open prisons	4	0	0	0
Young adult prisons	0	1	1	0
Total	9	10	15	5

Outcome of previous recommendations

In the adult male prisons reported on in 2019–20, 50% of our previous recommendations in the area of safety had been achieved, 9% partially achieved and 41% not achieved. *(Figures have been rounded and may not total 100%. This applies throughout the report.)*

Early days

Prisoners continued to arrive late at their destination prison due to delays at court, which affected staff’s ability to carry out thorough first night procedures.

Routine strip searching of new arrivals, without any individual risk assessment or regular review to determine necessity, continued to be a feature of reception procedures in many prisons. Prisoners still experienced problems receiving their property when moving between prisons.

In around a quarter of prisons inspected, first night safety interviews were not held in private – which potentially reduced the likelihood of prisoners disclosing important information – and some assessments were not sufficiently thorough.

The standard of first night accommodation varied, and too many arrivals were placed in cells that were not adequately equipped or sufficiently clean. However, we did see some better practice in this area; at Stocken, for example, staff carried out a cell inventory with each new prisoner to ensure that cells were up to standard.

Prisoners already established in the prison were often used to support newcomers in their first few days in custody, helping to answer their questions and allay their fears. This was impressive in some prisons, such as Rye Hill, but others had still not embraced the opportunities and benefits of such peer support.

Peer workers were also often involved in the delivery of induction programmes, and at Brixton they took part in a useful weekly induction fair. However, staff in many prisons over-relied on peer workers without providing adequate oversight and support for what they were delivering. The overall quality of induction was inconsistent, varying between prisons and peer workers.

The early days experience of vulnerable prisoners – usually at risk due to the nature of their offence – was often poor. For example, at Doncaster they could not take part in the full induction programme available to other prisoners.

More positively, a growing number of prisons, including Liverpool, Wealstun and Highpoint, were taking action to reduce the risks of new prisoners accruing debt in their first few days and becoming vulnerable to potential bullying (see also p.41).

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

Violence still on the rise

Over half of our previous main recommendations on action to improve safety had not been achieved. Levels of violence had continued to rise across most of the adult male estate, including nearly all local prisons inspected. Our survey data indicated that 29% of prisoners in local prisons had felt unsafe at some point. As we have previously reported, violence was often linked to other issues, such as drugs, poor living conditions and a lack of purposeful activity, and limited support from staff to help prisoners deal with these issues.

At Forest Bank, around a quarter of the 400 recorded acts of violence were serious. At Pentonville, the high and increasing levels of violence that we found at our full inspection in April 2019 had increased even further when we conducted an Independent Review of Progress nine months later. However, we found an improving picture at Leeds.

Levels of violence against staff and prisoners alike had reduced, and were now lower than in most other local prisons. The level of serious assaults had reduced considerably. **Leeds**

Despite the introduction of challenge, support and intervention plans (CSIPs) across all prisons during 2019, the quality of investigation and intervention to manage the most prolific perpetrators of violence varied greatly. Support for the victims of violence and bullying remained weak. Prisons often failed to collate and analyse data well enough to inform effective violence reduction strategies. At Berwyn, nearly a quarter of prisoners in our survey said they felt unsafe, yet the prison did not analyse data on violent behaviour, and there had been no investigations into violence in the three months before our inspection. The effectiveness of safety strategies was often limited where prisons lacked multidisciplinary work and information sharing.

More positively, violence had reduced or stabilised in some training prisons. This was notable at Warren Hill, where a prison-wide approach to rehabilitation also had the effect of improving safety outcomes, and at Buckley Hall, where an active safety team had led several initiatives that had halved violent incidents.

Encouraging positive behaviour

The incentives schemes used to manage behaviour were mostly ineffective and applied inconsistently; there was often little for prisoners to aspire to as a reward for improving their behaviour. Traditional incentives and earned privileges (IEP) schemes focused on punishment more than reward, and were characterised by poor target setting, a failure to challenge bad behaviour and prisoners staying on the basic regime for long periods without review.

Measures to encourage positive behaviour were not well implemented and did not help prisoners work towards changing habits and attitudes to assist in achieving rehabilitation. **Portland**

However, a few prisons had a clearer understanding of what motivated prisoners. Warren Hill used an enhanced behaviour management system that incorporated creative and greatly valued incentives for prisoners. This approach underpinned a positive rehabilitative culture that motivated prisoners to progress and, as a consequence, the positive impact on behaviour had meant that the prison had operated without a segregation unit since 2017.

The more general failure to challenge poor behaviour at an earlier stage, and address its underlying causes, often created an escalation in rule-breaking. There had been an increase in the use of adjudications as punishment in most prisons, usually in response to violence and the possession of drugs. As we have found previously, too many adjudication reports had been delayed or dismissed due to procedural errors. This meant that serious offences sometimes went unpunished. At Hewell, for example, nearly

400 adjudications had been adjourned for up to six months.

Some prisons had reviewed the effectiveness of adjudications as a punishment and had developed their systems with a focus on rehabilitation and restorative justice.

Rather than relying solely on punishment, the adjudicator offered prisoners charged with a drug-related offence the opportunity to engage with relevant substance misuse services for one month in a bid to address the issues that led to the offence. **Liverpool**

Use of force and segregation

The use of force had increased since the previous year in just over half the adult male prisons we visited. In approximately a third of prisons, use of force documentation was incomplete or of poor quality; for example, at Hewell 350 reports were missing. Despite the availability of body-worn cameras as a check on incidents, officers often did not switch these on, and around a third of prisons did not have sufficient footage from them to aid an effective review of incidents. Such shortfalls made it difficult for prisons to provide assurance that the use of force was always necessary or proportionate. At Guys Marsh and Lewes we highlighted evidence of inappropriate or excessive force that had gone unchallenged by managers.

At Wealstun, we found the use of PAVA incapacitant spray was not justified on two of the 15 occasions it had been activated.

However, a few prisons had improved scrutiny in the use of force to good effect, and we noted good practice at Wormwood Scrubs, Parc and Aylesbury.

The governance of segregation varied greatly and was not always effective. Some managers did not have a grip on authorisation for prisoners to be in segregation and their lengths of stays, and reintegration planning was not always effective. We continued to find some prisoners segregated on residential wings without adequate oversight or safeguards in place.

In around half the prisons inspected, the regime for segregated prisoners was too limited; they were unable to shower or telephone their families every day, and had only 30 minutes a day in the fresh air. Although there had been improvements to the physical conditions in some segregation units, they remained poor for many prisoners.

One prisoner was in a cell with no access to running water, and others were in cells with no glass in the windows. **Hewell**

Despite poor conditions and a limited regime, relationships between segregation unit staff and prisoners were often good. Staff were knowledgeable about segregated prisoners and contributed to the safe management of those with complex needs and challenging behaviour.

We also highlighted good practice at Bullingdon, where psychology staff intervened to reduce the impact of isolation on the mental well-being of segregated prisoners.

... the psychology team... carried out complex needs reviews after prisoners had spent 15 days on the [segregation] unit, and staff valued the team's guidance in managing prisoners' challenging behaviour. **Bullingdon**

Drugs still a significant problem

The availability of illegal drugs, such as psychoactive substances, remained a threat to safety in many prisons.

Table 2: Is it very/quite easy to get illicit drugs in this prison?

Local prisons	53%
Category B training prisons	50%
Category C training prisons	46%
Establishments holding sex offenders	33%
Young adult prisons	19%
Open prisons	33%
Total	45%

Some prisons were now making effective use of technology to identify and prevent the trafficking of drugs and other illicit items, including machines that scanned property and mail. Some, such as Forest Bank, Wormwood Scrubs and Leeds, had introduced body scanners, which were reducing the number of illicit items brought into prison.

However, we frequently found that failings in the strategic management of security and drug supply reduction led to poor outcomes. For example, Pentonville had no drug supply reduction strategy and supply reduction meetings had been introduced only shortly before the inspection. Drug availability was high and nearly a third of prisoners had tested positive in random drug tests.

Suicide and self-harm continue to rise

There were 74 self-inflicted deaths in adult male prisons in England and Wales between 1 July 2019 and 3 June 2020, a decrease of 11% from 83 last year. Levels of self-harm continued to rise, with 52,496 reported incidents in male prisons between April 2019 and March 2020, an increase of 11% from 47,196 incidents in the 12 months to March 2019. The number of self-harm incidents in male prisons has now risen year-on-year for over a decade (See Safety in custody statistics, <https://www.gov.uk/government/statistics/safety-in-custody-quarterly-update-to-march-2020>).

We made main recommendations or key concerns and recommendations about suicide and self-harm prevention measures at just over half the prisons we reported on this year. In over two-thirds of prisons, managers had not done enough to understand the causes of self-harm, so had not developed an adequate strategy to reduce the number of incidents.

There had been five self-inflicted deaths since the previous inspection and over 300 incidents of self-harm in the previous six months. Despite these high levels, the prison had no clear strategic plan to reduce self-harm based on a robust analysis of data. **Lewes**

The Prisons and Probation Ombudsman (PPO) investigates all deaths in custody. It was of great concern that around 40% of prisons had not adequately implemented the recommendations from its investigations into all deaths in custody.

Care for prisoners in crisis, delivered through assessment, care in custody and teamwork (ACCT) case management, was not good enough at just over half the prisons. We were encouraged by efforts at Wormwood Scrubs to address weaknesses in ACCT support, but other prisons were struggling to cope.

'[The] number [of prisoners subject to ACCT procedures] was unmanageable, and the demands on wing staff, assessors and case managers on any given day inevitably compromised the quality of care which could be delivered. With such a large proportion of the population [more than 10%] under ACCT procedures, there was also a risk that staff became inured to the most serious risks within this group. **Bristol**

In our survey, only 47% of prisoners who had received ACCT support said they had felt cared for.

Too much time spent locked up and a lack of purposeful activity continued to undermine support for prisoners in crisis in some prisons.

Prisoners' distress was intensified because they had too little involvement in purposeful activity or too little time out of cell. Managers had not made the link between poor time out of cell and risk of self-harm even though it was very apparent. **Winchester**

However, at Norwich we praised efforts to find activity for prisoners subject to ACCT support.

At nearly a third of prisons, we had concerns about the delivery of constant supervision to prisoners in acute crisis. Prisoners were not always located in an appropriate cell or offered activities to vary their regime.

Prisoner access to Listeners was problematic at nearly two-thirds of prisons. There were typically too few Listeners, and in the worst cases these schemes had collapsed.

... there was only one [Listener] available to the general population of about 630 prisoners. **Moorland**

Safeguarding procedures to protect adults at risk of harm, abuse and neglect had improved at a few prisons, such as Hatfield and Garth. However, at over 40% of prisons staff still lacked sufficient understanding or training to identify concerns and make appropriate safeguarding referrals.

Urgent Notification: Bristol

In June 2019, we invoked the Urgent Notification process due to significant concerns about the treatment and conditions of prisoners at Bristol following an unannounced inspection.

HM Chief Inspector of Prisons Peter Clarke called on the Justice Secretary to intervene urgently following findings of high violence, squalid living conditions and poor training and education in the prison, even though it had been put into 'special measures' since an equally concerning inspection in 2017. He noted that Bristol had been in 'a state of drift and decline' for the best part of a decade.

Key findings raised in the Urgent Notification were:

- nearly two-thirds of prisoners said they had felt unsafe at some point during their stay at the prison, with over a third feeling unsafe at the time of the inspection
- recorded violence, much of it serious, had increased since the last inspection and was much higher than the average for local prisons
- the rate of self-harm had increased and remained higher than most other local prisons
- despite the fact there had been two self-inflicted deaths since the last inspection, recommendations following investigations by the Prisons and Probation Ombudsman had not been implemented, and inspectors saw examples of very poor care for prisoners at risk of suicide and self-harm
- most accommodation remained bleak and grubby with too many overcrowded cells
- even though there were sufficient activity places for all prisoners, only half had been allocated to an activity, and of those on average only about half attended.

Living conditions are poor but improving

- Nearly three-quarters of prisons reported on this year achieved reasonably good or good outcomes in our healthy prison test of respect.
- More than two-thirds of prisoners said staff treated them with respect.
- The key worker scheme was having some positive impact, but the lack of staff enforcement of some basic rules was often still a problem.
- Overcrowding persisted, and living conditions in some prisons needed significant improvement.
- Equality and diversity work was weak in many prisons, with too little support for some groups of prisoners.
- Health provision was generally improving, but many prisoners with mental ill health lacked adequate access to assessment and treatment.
- Many prisons still had no strategy to tackle substance misuse, although there was some effective joint work to care for individuals in need.

Outcome of previous recommendations

In the adult male prisons reported on in 2019–20, 46% of our previous recommendations in the area of respect had been achieved, 10% partially achieved and 44% not achieved.

Table 3: Respect outcomes in establishments holding adult and young adult men

	<i>Good</i>	<i>Reasonably good</i>	<i>Not sufficiently good</i>	<i>Poor</i>
Local prisons	1	6	7	0
Category B training prisons	0	4	0	0
Category C training prisons	4	6	1	0
Establishments holding sex offenders	2	2	0	0
Open prisons	2	1	1	0
Young adult prisons	0	1	1	0
Total	9	20	10	0

Relationships between staff and prisoners

Prisoners continued to be generally positive about their relationships with staff. In our survey, just under three-quarters said that most staff treated them with respect and that they had staff they could turn to for help. The effective use of key workers was helping in some prisons, as prisoners could explore their concerns or get queries addressed in regular one-to-one sessions with their dedicated officer.

The key worker scheme was the best that we have seen. All prisoners were quickly allocated a key worker, who had regular meaningful contact with them and were involved in all aspects of their rehabilitation and progression. **Warren Hill**

Although in our survey only 14% of prisoners said they regularly saw senior managers around the prison talking to prisoners, there were some exceptions.

Every day during the inspection we saw senior managers walking around the prison and speaking to prisoners... We saw them take time to help prisoners resolve their problems. **Highpoint**

Too often staff failed to enforce basic rules or actively engage with prisoners.

We saw staff and managers fail to challenge poor behaviour. Prisoners were routinely vaping where it was not permitted, dress codes were not being followed and inappropriate language was being used. We also saw prisoners actively involved in drug taking without wing staff intervening. **Norwich**

Daily life

Living conditions remained poor and overcrowded for many prisoners, with too many doubled up in small cells. In both Brixton and Forest Bank, for example, 60% of prisoners shared a cell designed for one.

Some prisons had made improvements to living conditions. For example, at Stocken there was an innovative, regular, prisoner-led audit to ensure decent living conditions. However, in many prisons, prisoners continued to live in inadequate conditions, even when we had raised this as requiring urgent attention at previous inspections of these prisons, as in this example.

We still found prisoners in cells without windows, and a prisoner located in a cell in the segregation unit that was filthy and not fit for use. **Exeter IRP**

Some conditions were unhygienic or affected by vermin. Elmley had a major problem with bird droppings inside buildings, and we saw birds flying around inside some of the house blocks and dead birds on the netting on top of the main walkways.

Given the high rate of suicide and self-harm across prisons, we were concerned to find long delays in some staff responses to cell call bells. The monitoring of response times was sometimes poor, which added to potential risks for prisoners in crisis.

Prisoner criticism about the quality of the food persisted and some prisons, particularly local prisons, continued to serve lunch and evening meals far too early. However, at Brixton 86% of respondents to our survey said the food was good, and some prisons had improved the quality of the breakfast packs, even though these were still issued the previous evening. Garth, Moorland and Stocken had introduced self-catering facilities for prisoners.

The prison shop provision was mostly adequate. Warren Hill had an innovative 'village shop' offering prisoners additional items. Some prisons had now enabled new arrivals to make their first shop order more quickly in an effort to avoid them getting into debt with other prisoners (see also p.35).

Prisoners make applications to access many aspects of their daily life. While application systems that were paper-based seldom worked well because it was not always possible to track the replies, tracking was possible when prisoners could make applications electronically using kiosks on the wings.

In too many prisons, consultation with prisoners remained infrequent or did not lead to change, which undermined their confidence in the process and its impact. But at Ashfield, regular consultation was supplemented by a weekly session where prisoners could book time with a manager to discuss concerns.

Prisoners continued to express a lack of confidence about the way complaints were dealt with, creating frustrations that could sometimes lead to poor behaviour. In some prisons, serious complaints against staff had not been properly investigated. There were better results where complaints were tracked robustly and effectively, such as at Doncaster, or where prisoners helped to quality assure some of the responses, such as at Rye Hill.

Arrangements to meet prisoners' legal needs continued to be limited, even where the need for advice and support was high. In several prisons, legal visits took place at the same time and in the same hall as social visits, which could compromise confidentiality.

Equality and diversity work

Equality and diversity work continued to be an area of weakness across many prisons. Although we noted improvements, for many it was from a low base, and overall processes for promoting equality and diversity remained underdeveloped or too recent to demonstrate improved outcomes.

Equality and diversity work had been neglected... There had been no equality meetings, no consideration of equality data and little consultation with prisoners in most protected groups. **Pentonville**

Equality and diversity work tended to be better where prison leaders and senior managers were involved in this area, and the prison had a clear strategic focus supported by an action plan and effective consultation with prisoners from protected characteristic groups.

Although many prisons reviewed equality data, this was often superficial, did not cover all protected characteristics and usually led to little action, even when potentially adverse outcomes were revealed.

Many prisons had poor systems to handle complaints about discrimination but some had better processes, including supportive links to outside agencies, which helped to improve the quality of replies and promote prisoner confidence in the process.

A community diversity officer from Ipswich and Suffolk Council for Racial Equality was employed one day a week and provided general advice, helped to deliver diversity events, trained and supported prisoner equality representatives and provided independent scrutiny of discrimination incident reporting forms. **Warren Hill**

In our survey, 29% of prisoners said they were from a black or minority ethnic background. As in previous years, in our survey these prisoners responded more negatively than white prisoners about some aspects of prison life, such as relationships with staff. Although consultation with black and minority ethnic prisoners was good at some prisons, such as Buckley Hall, this was not common, and these prisoners did not usually get the opportunity to meet together to discuss their experiences.

In our survey, 5% of male prisoners said they were from a Gypsy, Roma or Traveller background but few prisons provided adequate support. In contrast, provision at Elmley was positive: the prison allowed prisoners from this group to buy increased telephone credit to offset difficulties in receiving visits, and encouraged those with literacy issues to work with reading mentors. It was also planning a family day.

In our survey, foreign national prisoners gave mixed responses about their experiences. They were more negative than British prisoners about some aspects of prison life, such as relationships with staff and time spent locked up, and 30% compared with 22% said they currently felt unsafe. However, fewer foreign nationals reported having a drug or alcohol problem, they experienced less bullying and were more positive about the education they received in the prison. Support for these prisoners remained variable; while they received good provision at Doncaster, Dovegate and Parc, there were few such examples elsewhere. The scarcity of legal advice from independent sources about their immigration status persisted. We again found that prisons did not use professional telephone interpreting services when needed for basic day-to-day communication with prisoners who had little English.

Young adults aged 18 to 25 made up 21% of respondents to our survey and they were more negative than prisoners aged over 25 about most aspects of prison life. Crucially only 46%, compared with 54% of over 25-year-olds, thought their experiences in their prison made them less likely to offend in the future. Few prisons had specific strategies, policies or forums for young

adults. Even though this age group was over-represented in areas such as adjudications, use of force, violence and self-harm, too few prisons were identifying and seeking to remedy this. However, some had taken a more positive approach.

Following the identification of a disproportionality of [adjudication] charges for younger adults, there had been action and monitoring, and the most recent analysis showed there was no longer this disproportionality.
Kirkclevington Grange

In our survey, prisoners aged 50 or over – who made up 17% of our survey respondents – were generally positive about their treatment in custody. In some prisons they lived on specific wings and we found many examples of good provision, including age-specific activities, support from specialist voluntary agencies and day centres that offered a space for older prisoners to socialise together.

We found poor outcomes for some prisoners with disabilities. For example, in our survey, more prisoners with a disability than those without (63% compared with 39%) said they felt unsafe at the time of the inspection. At many prisons, accessibility remained an issue and, in some cases, a lack of reasonable adjustments made daily life very difficult.

One prisoner... was unable to walk unaided and had a wheelchair, but it did not fit through his cell door. His cell had had no adjustments made and he spent most of the day lying in bed, with a urine bottle tucked under his sheets. **Bristol**

Many prisons had identified prisoner peer mentors to support fellow prisoners with basic tasks, although they were not always trained or adequately supervised for the role.

In our survey, 2% of respondents held in men's prisons described themselves as transgender or transsexual. The quality of their care was mostly adequate, with good practice in one case.

The prison had identified a senior manager to chair local transgender case boards. The boards were used to agree a care and management plan with the prisoner on issues such as location, dress code, searching and showering. **Elmley**

But we found some examples of poor care elsewhere, including a transgender prisoner at Moorland who had not been able to shower for over a week because staff were unclear about her showering arrangements.

In our survey, 5% of all male survey respondents said they were gay, bisexual or other sexual orientation. Of these, 35% said they had been on an ACCT, compared with 18% of prisoners who were not gay or bisexual, and 64% (compared with 47%) said they had felt unsafe at their prison; they also reported more victimisation, intimidation and abuse. Most prisons did little to confront prejudice.

Faith provision remained positive overall. Chaplaincies were involved in a range of activity, including facilitating victim awareness courses, and establishing effective community support and mentoring links.

The chaplaincy had access to a large number of local community organisations and individuals providing a range of services, including those focused on resettlement, rehabilitation and the needs of minority groups. **Wormwood Scrubs**

Prison health services

Health provision in adult male prisons was reasonably good and a generally improving picture. Enhanced partnership agreements and management oversight had led to an improvement in the governance of services.

However, some health services worked in conditions that were cramped and required refurbishment, making it difficult to provide effective infection prevention and control.

There continued to be missed opportunities to promote health and well-being to prisoners, and two-thirds of the prisons inspected had not followed our previous recommendations to develop a prison-wide strategy. However, a few prisons, such as Swaleside, Forest Bank, Buckley Hall and Liverpool, had developed such an approach.

The active approach taken by the whole prison to promoting health and well-being was impressive; it helped to improve the general well-being of prisoners and generated a positive atmosphere in the prison. **Buckley Hall**

Recruitment of health staff remained a problem and affected health delivery at many sites through long waiting times and lack of provision. But the employment of paramedics and an increasing number of nurse prescribers had improved some services, and staff training and supervision were progressing.

There was now better secondary health screening of new prisoners, with most prisons meeting the national guidelines.

Medicines management was better in prisons that had consistent pharmacist oversight and well-trained technicians, but we saw deficits in at least 10 prisons, leading to recommendations such as this:

There should be sufficient professional pharmacy presence to ensure efficient medicines delivery systems, follow-up of patients failing to attend for medicines administration, and the monitoring of in-possession risk assessment rationales. **Doncaster**

The quality and governance of dental services had improved in many prisons, although waiting times remained too long at 15 prisons inspected.

Prisoners had inadequate access to mental health assessments and treatment at approximately half the prisons inspected. But some prisons had introduced mental health duty workers, which had meant a faster response for those needing urgent care, and better health care staff attendance at ACCT and segregation reviews, improving outcomes for those most at risk.

We repeatedly recommend that prisons train their officers in mental health awareness to recognise and refer prisoners with emerging mental health conditions. However, such training was still inadequate in a third of prisons.

We continued to find long and unacceptable delays in the transfer of patients with mental ill health to secure NHS beds; this was the case at 21 prisons.

Most prisons had an up-to-date and signed memorandum of understanding with their local authority to provide social care for prisoners who needed it. However, some prisons lacked adequate oversight of the provision of social care, and we found prisoners with unmet social care needs. In some prisons, such as Elmley, Stocken, Bristol and Hewell, other prisoners provided informal support to prisoners with social care needs with little training or supervision, which was a risk to these vulnerable prisoners.

Welsh Assembly evidence on health and social care in prisons across Wales

In 2019, HMI Prisons gave evidence to the National Assembly for Wales Health, Social Care and Sport Committee, as part of its consultation on the provision of health and social care in the adult prison estate in Wales. Our evidence drew on the most recent inspections of prisons in Wales, noting that the services available to meet high demand for mental health and substance misuse treatment did not always meet need. In addition, we raised concerns that most prisoners faced unacceptably long waits to access some primary care services, such as opticians and dentists.

Substance misuse

As in previous years, about a quarter of prisons did not have an effective drug strategy; this was particularly the case at prisons facing additional challenges related to the use of psychoactive substances and associated deaths. However, there were also many examples of the needs of prisoners being met through joint working, individualised care and clinical expertise.

The incentivised substance-free living wing encouraged recovery by providing prosocial activities and community mutual aid, and ensured compliance by assertive voluntary drug testing. **Wealstun**

The majority of prisons this year issued naloxone to prisoners at risk of overdose on release. However, a small number of prisons still failed to understand the needs for drug and alcohol stabilisation. For example, Garth, Stocken, Hewell and Portland continued to limit the availability of some drug treatments due to security concerns, even though this was not in line with national prescribing policy or national security practices.

Locked up with too little to do

- Activity outcomes for prisoners remained poor, and few prisons showed signs of improvement in this healthy prison test.
- Most prisoners still spent too much time locked in their cells, to the point of solitary confinement for a few.
- Some prisoners continued to lack access to a decent regime because of staff shortages.
- Local prisons still had too few activity places to occupy their prisoners, some prisons failed to allocate all their activity places, and poor prisoner attendance featured in most prisons.
- The overall effectiveness of education, skills and work was less than good in almost three-quarters of the prisons inspected. In Welsh prisons, Estyn reported more positively.
- While most prisoners behaved well in their activities, too few finished their course and achieved qualifications.

Outcome of previous recommendations

In the adult male prisons reported on in 2019–20, 48% of our previous recommendations in the area of purposeful activity had been achieved, 9% partially achieved and 43% not achieved.

Purposeful activity outcomes in adult male prisons remained poor, with only 14 out of 39 judged to be good or reasonably good this year, and especially bad outcomes in local prisons and YOIs. Only five prisons improved their purposeful activity score.

Table 4: Purposeful activity outcomes in establishments holding adult and young adult men

	<i>Good</i>	<i>Reasonably good</i>	<i>Not sufficiently good</i>	<i>Poor</i>
Local prisons	1	1	8	4
Category B training prisons	1	1	2	0
Category C training prisons	0	3	7	1
Establishments holding sex offenders	1	3	0	0
Open prisons	3	0	0	1
Young adult prisons	0	0	1	1
Total	6	8	18	7

Still too little time unlocked

Reasonable time out of cell is essential for prisoners' emotional and physical well-being. It allows them to complete necessary domestic activities, such as showering or collecting medicines, attend education and participate in activities designed to reduce reoffending, including building relationships with staff. We expect prisoners to be unlocked for 10 hours a day but on average only 13% of survey respondents said they received this.

In local prisons only 4% of prisoners said they had more than 10 hours out of cell on a weekday, and 32% of prisoners said that they had less than two hours. Time out of cell was even more restricted at weekends: at Leeds and Feltham B, over 80% of prisoners said they spent 22 hours a day locked up at weekends. Small numbers of prisoners had so little time out of cell that it potentially amounted to solitary confinement.

For prisoners on the basic regime [time out of cell] was reduced further to just 45 minutes a day, three days a week, which was unacceptable and among the worst we have seen. **Winchester**

In our roll checks in local prisons, we regularly found around a third of prisoners locked up during the working day, but in Hewell, Lewes, Doncaster and Leeds it was higher still.

The number of prisoners locked in their cells during our roll checks had risen from 46% of the population in 2016 to 61% at this inspection... Prisoners who were not working or in education (including those retired or disabled) were locked in their cells for almost 22 hours a day. **Hewell**

Cardiff was an exception, with only 18% of prisoners locked up during the working day.

Time out of cell was generally better in training prisons, but even here fewer than a quarter of prisoners said they received 10 hours a day out of cell. At Garth and Swaleside, we found as many prisoners locked up during the working day as we would typically find in a poorly performing local prison. At Swaleside, the proportion of prisoners locked up during the working day had increased from 33% at our inspection to 38% at our IRP nine months later.

Table 5: How long do you spend out of your cell on a weekday?

	<i>More than 10 hours out of cell (weekday) (%)</i>	<i>Less than two hours out of cell (weekday) (%)</i>
Local prisons	4	32
Category B training prisons	9	16
Category C training prisons	14	12
Young adult prisons	2	35
Establishments holding sex offenders	20	6
Open prisons	56	1
Average	13	19

Failure to deliver activities

Several factors, including shortages of staff, still hindered the delivery of a decent regime in some prisons. Managers tried to ensure predictability by planning temporary restrictions in advance. However, at Winchester the restricted regime in force at our previous inspection in July 2016 was still in place in 2019. In a minority of prisons, 'lockdowns' sometimes resulted in prisoners spending excessive periods locked up – for periods of nearly 60 hours on the Benbow wing at Portland.

Table 6: Rates of association, use of gym and exercise in establishments holding adult and young adult men

	<i>Go on association more than five times a week (%)</i>	<i>Go outside for exercise more than five days a week (%)</i>	<i>Use the gym two or more times a week (%)</i>
Local prisons	40	43	37
Category B training prisons	69	74	56
Category C training prisons	73	75	56
Young adult prisons	41	78	34
Establishments holding sex offenders	75	75	42
Open prisons	92	93	71
Average	60	64	47

Most prisons scheduled 30 minutes a day for outside exercise, half of what we expect. Prisoners often had to choose between going outside and completing essential domestic tasks.

The early morning slot did not encourage prisoners to spend time in the open air, and those on morning medications had to choose between medication or exercise. **Elmley**

For those able to exercise outside, exercise areas were often stark and cage-like, although some prisons, such as Brixton, had installed benches and exercise equipment.

Overall, 60% of prisoners in our survey said they could have association five times a week, but in most local prisons there were fewer opportunities. Forest Bank was a notable exception; 77% of prisoners there said they could have association five times a week. Most training prisons offered some evening association, but it was rare in local prisons and often restricted to prisoners on the enhanced regime and those in full-time employment.

Prisoners continued to value physical education sessions and we found generally good provision which met needs. This year we found several prisons offering Parkrun, which was innovative and helped normalise the prison environment.

Library services were generally good, but access was sometimes difficult. In local prisons, only 37% of prisoners surveyed said they could attend once a week. Many libraries ran activities to support literacy and other learning. Several training prisons ran extracurricular enrichment activities that helped promote a sense of community, encourage constructive use of time and develop living skills.

The range and volume of creative and enrichment activities was outstanding, and provided opportunities for self-expression, learning, socialising and community engagement. **Warren Hill**

Poor outcomes for young adults

Neither of the dedicated young adult sites inspected this year achieved good or reasonably good outcomes in purposeful activity. On average, young adults across all male prisons had the least time out of cell and the fewest opportunities to attend the gym. These prisoners, who often lacked emotional maturity, possibly had the greatest need for education and training and engagement with prosocial adults, but did not receive either in sufficient quantity.

Delivering education and skills and work

Our inspections of learning and skills and work in prisons are conducted in partnership with Ofsted in England and Estyn in Wales. Both Ofsted and Estyn make assessments of learning and skills and work provision.

This year almost three-quarters of the adult male prisons inspected in England were less than good in their overall effectiveness, and none was outstanding (although Hatfield had some outstanding features).

We inspected three Welsh prisons and found generally good or better outcomes.

Table 7: Ofsted assessments in establishments holding adult and young adult men in England

	<i>Overall effectiveness of education, skills and work</i>	<i>Achievements of prisoners engaged in education, skills and work</i>	<i>Quality of teaching, learning and assessment</i>	<i>Personal development and behaviour</i>	<i>Leadership and management of education, skills and work</i>
Outstanding	0	1	0	1	0
Good	10	13	14	16	10
Requires improvement	19	15	20	12	19
Inadequate	7	7	2	7	7
Total	36	36	36	36	36

Table 8: Estyn assessments in establishments holding adult and young adult men in Wales

	Standards	Well-being and attitudes to learning	Teaching and learning experiences	Care, support and guidance	Leadership and management
Excellent	1	2	1	0	0
Good	2	1	2	3	2
Adequate and needs improvement	0	0	0	0	1
Unsatisfactory and needs urgent improvement	0	0	0	0	0
Total	3	3	3	3	3

Leadership and management

Leadership and management of education, skills and work-related activities were good or better in improving outcomes for prisoners in only a third of prisons reported on (see Tables 7 and 8).

Some prisons, including several training prisons, did not have sufficient education, skills and work activity spaces to occupy their population. Some spaces were only part time and so prisoners were unoccupied, and often locked up, for part of the working week. Several prisons also failed to allocate all the available activity spaces effectively, and only a quarter of all prisons ensured good attendance at education, skills and work. In our survey, only 44% of respondents in local prisons said that staff encouraged them to attend education, training or work.

Although there were sufficient activity spaces for the whole prison population, at least part time, only about half the population were allocated. Of those allocated, as few as 50% attended. **Bristol**

Governors often failed to use data effectively to monitor the provision and manage performance, so did not identify areas for improvement or set appropriate strategic priorities for education, skills and work.

In too many prisons, the range of activities was too limited and too few accredited qualifications were offered; provision for vulnerable prisoners was particularly weak.

During the inspection, accredited bricklaying, horticulture, and industrial cleaning training were not offered due to staffing shortages... No accredited courses were offered in the commercial workshops. **Dovegate**

In a few prisons, such as Highpoint, managers had used prisoner feedback and local labour market information to develop the provision, but elsewhere vocational training was limited.

Managers did not provide enough vocational training or work... they failed to support prisoners making the transition into employment on release. **Winchester**

In Wales, prisoners had reasonable access to impartial careers advice, but in most prisons in England such provision was not yet effective. In addition to this gap, in around a third of establishments prisoners had little or no access to the 'virtual campus'.

However, some prisons had links with employers and provided good support for employment. For example, Standford Hill focused on preparing prisoners for employment and just over half had a job to go to on release.

Quality of teaching, learning and assessment

Teaching, learning and assessment were not good enough in six out of every 10 prisons inspected. Many prisoners were not sufficiently inspired or challenged, and did not get the individual support they needed to make good progress. In our survey, only 62% of those in education and 65% in vocational training thought that these activities would help them on release.

Teachers and trainers often did not assess prisoners' starting points and learning needs adequately, or failed to record and share the result of their assessment. As a result, too many prisoners were not aware of the importance of education and training and the opportunities they provided. Many did not always receive clear feedback about how they could improve their performance.

In too many prisons, teachers and trainers failed to record skills development, which prevented prisoners from demonstrating the employment-related skills they had acquired to prospective employers on release. But some prisons kept records that evidenced the targets, as well as the personal, social and employability skills that prisoners had achieved.

Prisoners with identified additional learning needs often did not have access to specialist learning support to help them make the expected progress. Only about a dozen prisons provided good support in this area.

The prison relied too heavily on prisoners declaring themselves to have learning needs. Staff did not have the experience or expertise to identify accurately those who had additional support needs but who did not declare them to staff. **Rye Hill**

Prisons continued to make good use of trained and supervised peer mentors to support learning.

Prisoners [in education and work] benefited from the valuable support and guidance of peer partners and mentors, who undertook their roles with commitment and enthusiasm. They demonstrated appropriate levels of empathy and understanding towards their fellow prisoners. **Parc (adult)**

Personal development and behaviour

Most prisoners behaved well in their activities and showed respect to each other and to their teachers and trainers. They also followed relevant health and safety standards.

Most prisoners' behaviour across activities and when moving to and from their workplaces or classes was good. They worked well together and demonstrated high levels of respect and tolerance of each other, staff and visitors. They had a good attitude to completing tasks and activities. **Moorland**

Outcomes and achievements

Prisoners' work showed substantial and sustained progress in only around half of prisons, and too few prisoners completed their education or training courses and achieved their qualifications successfully. This was often related to problems in their attendance.

Many prisoners achieved poor outcomes in English and mathematics. While Ashfield embedded English and mathematics learning into work and training activities, which helped engage reluctant learners, this opportunity was missed elsewhere.

In the best prisons, prisoners produced work of a good standard and developed good vocational and/or personal and social skills.

Through effective teaching and instructing, most prisoners made the progress expected of them, based on their starting points. Most tutors in education and vocational training planned their courses carefully, so that prisoners were able to develop substantial new skills in their subject areas. **Wealstun**

Weaknesses impede rehabilitation and release planning

- Work to support prisoners to maintain their family relationships was usually good, but was less effective in prisons holding sex offenders.
- Weaknesses in the completion of prisoners' risk and needs assessments impeded all subsequent aspects of their progression and risk management.
- Prison officer key working had developed well, but prison offender managers (POMs) were generally not active in driving forward sentence progression.
- There were too many weaknesses in public protection monitoring and pre-release risk planning.
- Many prisoners, notably sex offenders, did not receive enough interventions to address and help reduce their risk.
- There was evidence of improved through-the-gate provision for prisoners on their release.
- Homelessness or unstable accommodation on release continued to be a serious problem.

Of the adult male establishments reported on during the year, fewer than half of our assessments indicated outcomes for prisoners that were good or reasonably good. During this year, local and category C training prisons performed more poorly than the other prisons inspected. Most open prisons performed well, with the exception of the open site at Hewell (which has since closed).

Table 9: Rehabilitation and release planning outcomes in establishments holding adult and young adult males

	<i>Good</i>	<i>Reasonably good</i>	<i>Not sufficiently good</i>	<i>Poor</i>
Local prisons	2	3	9	0
Category B training prisons	1	2	0	1
Category C training prisons	2	2	7	0
Establishments holding sex offenders	1	0	3	0
Open prisons	3	0	0	1
Young adult prisons	0	1	1	0
Total	9	8	20	2

Outcome of previous recommendations

In the adult male prisons reported on in 2019–20, 45% of our previous recommendations in the area of rehabilitation and release planning had been achieved, 10% partially achieved and 45% not achieved.

Children and families and contact with the outside world

Maintaining and rebuilding family relationships is central to prisoner rehabilitation. Many prisons worked closely with voluntary and community organisations to provide family support services, which were mostly good – and in some cases, excellent. At Parc, for example, support to help prisoners maintain family ties was among the best we have seen, and the innovative ‘families and friends at the centre of throughcare’ scheme offered at both Doncaster and Ashfield was impressive.

All new prisoners were offered an additional visit to meet their family and key worker jointly... Families could maintain contact with key workers, to receive updates on a prisoner’s progress, and could engage with the family worker for additional support and help. **Doncaster**

Positive work in this area also included parenting courses, homework clubs, Storybook Dads and family days. However, in three of the four prisons holding sex offenders, family work was underdeveloped.

Social visits were a key part of many prisoners’ lives, but in our survey only 54% of prisoners who received a visit said it started on time. It was particularly difficult for visitors to reach Isle of Wight and Portland. The visits halls at Standford Hill and Warren Hill were among the best we have seen.

Prisoners who had easy access to telephones were better able to maintain family links. In our survey, 90% of prisoners said they were able to use the telephone every day, and an increasing number of prisons had installed in-cell telephones.

The introduction of in-cell telephones was excellent and greatly valued by prisoners, enabling them to talk to their friends and family in private and at times when they would be at home. **Liverpool**

A lack of strategy

Most prisons inspected did not fully understand the reducing reoffending and resettlement needs of their population, and the strategic management of reducing reoffending work was usually not good enough. Many prisons had not analysed their prisoners’ needs, and relevant meetings were poorly attended. They were not fully aware of the interventions and support they should offer, or whether it was more appropriate to transfer a prisoner to another prison to address their needs.

The prison had a strong focus on reducing reoffending but this was fundamentally undermined by the lack of a comprehensive needs analysis to inform the strategy... Just over a third of prisoners did not have an up-to-date assessment of their risk and needs. **Moorland**

A lack of strategic direction was particularly evident for those convicted of a sexual offence and indeterminate sentence prisoners. These groups often appeared to be ‘stuck’, unable to progress to prisons which could better meet their needs, while lacking tailored intervention or support in the prisons where they were held.

A cohort of prisoners convicted of a sexual offence, with outstanding treatment needs, had been introduced... They did not receive adequate offender management and there were no programmes available to enable them to reduce their risk of harm or progress. **Swaleside**

Although we made a main recommendation about this concern, at our subsequent Independent Review of Progress at Swaleside we found that there had been insufficient progress to address it.

Assessing risk, sentence planning and progression

HMPPS uses the offender assessment system (OASys) to assess and manage a prisoner's risk. POMs should use OASys assessments to develop sentence plan objectives aimed at reducing the risk of further offending and harm to others. However, systemic problems hindered the prompt completion of these assessments, impeding all subsequent aspects of prisoner progression and risk management.

We found a large number of prisoners without an up-to-date OASys in most prisons we reported on – affecting as many as 50% of eligible prisoners at Pentonville and 60% at Bullingdon. Backlogs in assessments were often caused by redeployment of POMs, difficulties in recruiting probation officers into prisons, and community offender managers not completing assessments for which they were responsible. These problems also affected the amount of contact between POMs and prisoners, which was too often infrequent and reactive. It was relatively rare to find POMs giving meaningful support to prisoners and actively driving forward their sentence progression and work towards reducing their risk.

Phase one of offender management in custody (OMiC) had been successful in introducing prison officer key workers during 2019. Key workers were given dedicated time to see named prisoners, who were often positive about the value of this contact, although it usually focused on practical and emotional support. While this was very important, it did not compensate for the lack of work to promote sentence progression or the general lack of contact from POMs.

All prisoners had a key worker... However, the case notes we reviewed demonstrated a variable frequency and depth of engagement, and too many entries were insufficiently focused on prisoner progression. **Bullingdon**

The lack of an up-to-date OASys assessment also resulted in the transfer of many prisoners to other prisons based on spaces across the estate, rather than their sentence plan or resettlement needs. For example, 69% of prisoners arrived at Brixton without an OASys assessment, a backlog that affected the routine work of the offender management unit and 'hindered the ability of staff to manage risks and plan for prisoners' release in good time.' This undermined the objective of a well-planned prison system where prisoners are placed in establishments best able to meet their offending-related needs and thereby reduce risk. For example, at Buckley Hall, which otherwise provided good outcomes for prisoners, 20 prisoners were assessed for their suitability for a programme for high or very high risk adult men convicted of a sexual, intimate partner violence or general violent offence; however, the prison did not offer the programme, and prisoners would have to move to another prison to receive it. Some prisoners transferred in to take this programme would have to transfer out again to complete it.

Recategorisation decisions were generally made in good time but, once again, many were made without an up-to-date OASys, which undermined the robustness of the decision. We also found persistent difficulties in transferring category B, category D and sexual offence prisoners due to a lack of spaces.

It was difficult for the prison to secure transfers for category B prisoners, and they stayed at the establishment for too long. At the time of the inspection, 30 prisoners were waiting for transfer, with delays of up to 11 months... This significantly impeded prisoners' ability to access the right interventions, progress in their sentence and reduce their risk of harm. **Bristol**

Very few category C prisons used release on temporary licence (ROTL) to aid prisoner progression. While two of the three open prisons we inspected made good use of ROTL to support rehabilitation and resettlement, this was not the case at Hewell.

Public protection

Most prisons held a regular public protection meeting but it rarely fulfilled its purpose of monitoring prisoners' risk information so that it could be shared promptly and acted on as needed. Very few had good attendance and many did not discuss all high-risk releases sufficiently. Many prisons were also not doing enough to ensure that prisoners subject to multi-agency public protection arrangements (MAPPA) had their management in the community levels set six months before their release. This meant that we could not be assured that plans to manage high-risk prisoners on release were robust.

Over half of the population were eligible for multi-agency supervision on release. The prison did not routinely contact community offender managers well in advance of these prisoners' release to confirm MAPPA management levels for them. Without establishing these levels, the [offender management unit] could not contribute effectively to multi-agency release planning. **Doncaster**

Public protection telephone and mail monitoring and child contact arrangements were particularly concerning. Many prisons failed to grasp what was required for these arrangements, which potentially placed the public at risk.

There was a two-month backlog of calls that had not been monitored, and the monitoring logs we looked at had typically ended two months' previously... The backlog meant that risks to the public were not promptly identified. **Berwyn**

Addressing offending behaviour

Shortcomings in strategic management of rehabilitation and release planning, and problems with OASys assessments and prisoner transfers, meant that many prisoners were often not in the right place at the right time to complete the appropriate programmes to address their offending behaviour. There were also often not enough programme spaces to meet the demands of the population, and waiting lists were too long. This was particularly an issue for those convicted of a sexual offence, and the concerns we raised in our 2018 thematic report on prisoners convicted of sexual offences continued to be a problem.

There were not enough treatment opportunities for the 319 prisoners convicted of sexual offences. Only 44 of them had ever completed some form of treatment to address their offending behaviour. **Moorland**

Release planning

Most prisoners were released from local resettlement prisons where there was a community rehabilitation company (CRC) to assess and support prisoners with their resettlement needs. The support from CRC resettlement workers had improved and was mostly good.

The CRC had improved release planning arrangements since our previous inspection and saw nearly all new arrivals within the first five days. Good quality resettlement plans were completed and then reviewed 12 weeks before release. **Wormwood Scrubs**

However, not all CRCs reviewed resettlement plans before release. The CRC at Pentonville, for example, had only completed 68% of review resettlement plans for prisoners being released in the six months before the inspection.

The use of enhanced through-the-gate services was a potentially promising recent response to longstanding concerns about shortcomings in resettlement services, including more resources for resettlement. Some prisons were using the resultant increased staffing to offer innovative support.

The resettlement hub in the visitors' centre gave prisoners an opportunity to meet their ITTG [integrated through-the-gate] case worker on release and agree an initial release plan. Prisoners could also leave the hub with a through-the-gate mentor if required. **Liverpool**

However, some prisoners were not released from their local resettlement prison because training prisons found it difficult to transfer them into one. Such prisoners found it more difficult to access the full support of a CRC to prepare them for release.

Stocken was not a designated resettlement prison and therefore did not have a community rehabilitation company to provide resettlement services... there was no systematic review of all prisoners' resettlement needs before they were released – a significant gap in provision. **Stocken**

Accommodation

Prisoner access to settled accommodation on their release continued to be a problem across the estate. In some local resettlement prisons, such as Bristol and Cardiff, nearly half of all prisoners were released homeless or to temporary accommodation. This was often due to circumstances outside the prison's control.

Despite the best efforts of the Nacro worker, a third of prisoners were released as homeless. The prison experienced difficulties securing accommodation due to a lack of spaces in supported housing and local authorities refusing to accept a housing duty. **Elmley**

However, Liverpool prison had worked hard to develop a meaningful relationship with the local authority and 85% of its prisoners were released into settled accommodation, showing what might be achieved.

Shortage of accommodation also affected the provision of home detention curfew (HDC). While most prisons had good systems to monitor HDC and decision-making was good, too many prisoners were released after their eligibility date. This was often due to prisoners being transferred to the prison outside their eligible date, delays in checks on accommodation by community probation staff and lack of bail hostels.

5

Women in prison



This section reviews five inspections of women’s prisons – Askham Grange, Bronzefield, Eastwood Park, Foston Hall and New Hall. The findings reported are based on *Expectations: Criteria for assessing the treatment of and conditions for women in prisons*, published in June 2014.

- Women’s prisons remained safe, with low levels of violence, and although violence had risen there were few serious incidents. Safety was underpinned by effective staff-prisoner relationships.
- The quality of care for those at risk of self-harm was good and enhanced by the effective use of peer workers, but recording in case management documents needed improving.
- Health provision had improved but the high demand for mental health care remained a challenge to address.
- Education, skills and work activity was good or outstanding, and resettlement work was adequate in all but one prison. However, the number of prisoners released homeless was a significant concern.

Outcomes in the five women’s prisons inspected were judged to be good or reasonably good in the healthy prison areas (HPAs) of safety, respect and purposeful activity. However, resettlement outcomes had deteriorated from reasonably good to not sufficiently good at Eastwood Park.

Outcome of previous recommendations

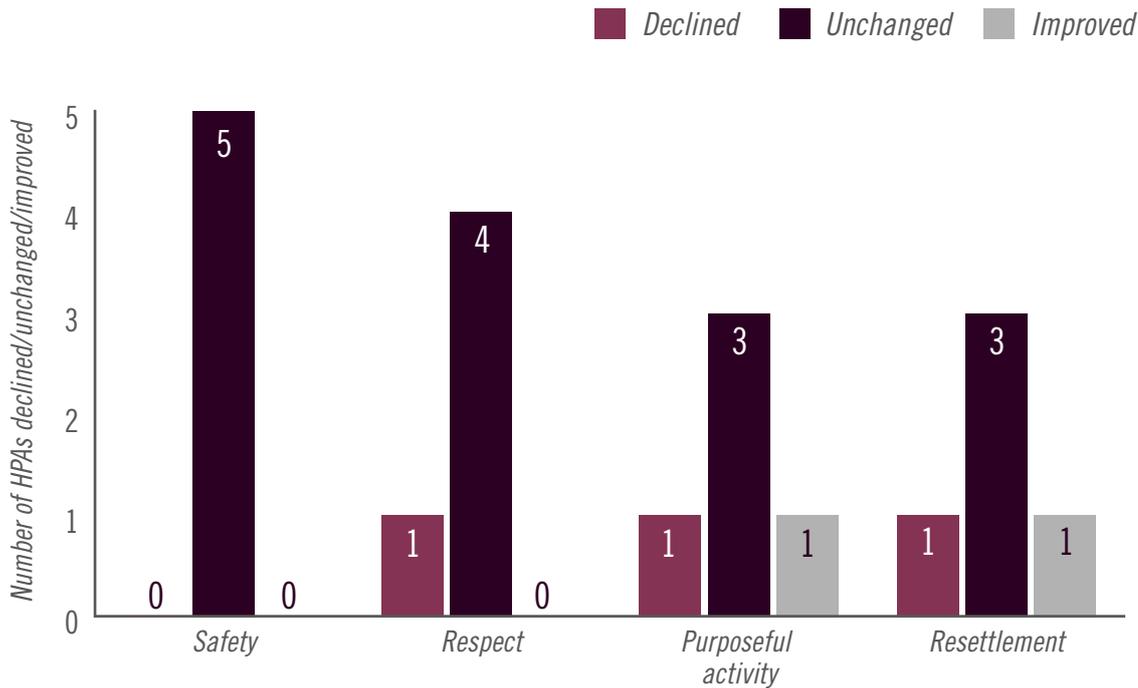
In the women’s prisons reported on in 2019–20:

- 46% of our previous recommendations in the area of safety had been achieved, 5% partially achieved and 49% not achieved
- 64% of our previous recommendations in the area of respect had been achieved and 36% not achieved
- 65% of our previous recommendations in the area of purposeful activity had been achieved, 10% partially achieved and 25% not achieved
- 50% of our previous recommendations in the area of resettlement had been achieved, 5% partially achieved and 45% not achieved.

Table 10: Outcomes in inspections of women’s prisons reported on in 2019–20

	<i>Safety</i>	<i>Respect</i>	<i>Purposeful activity</i>	<i>Resettlement</i>
Askham Grange	Good	Good	Good	Good
Bronzefield	Reasonably good	Good	Reasonably good	Good
Eastwood Park	Reasonably good	Reasonably good	Reasonably good	Not sufficiently good
Foston Hall	Reasonably good	Reasonably good	Reasonably good	Reasonably good
New Hall	Good	Reasonably good	Reasonably good	Good

Figure 5: Outcome changes from previous inspection of women's prisons (5)



Early days

Many prisoners arriving in women's prisons continued to have long journeys – often after lengthy waits in court – resulting in late arrivals, which limited their opportunity to settle in before being locked up for the first night.

Many prisoners were held at court for far too long after their hearing and, as a result of the large catchment area, often arrived at the prison late in the day or evening, which limited the provision of first night support. **Eastwood Park**

However, once at the prison arrangements for their early days, including first night procedures, were supportive.

Violence, self-harm and drug misuse

In our survey, significantly fewer prisoners in women's prisons than men's prisons (16% compared with 22%) reported feeling unsafe at the time of our inspection. Although much lower than in men's prisons, levels of violence had increased in three of the five sites inspected this year. However, very few incidents were serious. Prisoners reported threats and intimidation by other prisoners and debt as the main contributing factors.

Significantly more prisoners in women's than men's prisons (39% compared with 19%) reported being subject to assessment, care in custody and teamwork (ACCT) case management. The level of self-harm remained high in the closed prisons, often attributed to a smaller number of women with very complex needs. However, the quality of care was generally good, underpinned by staff's knowledge of these prisoners, and peer workers provided positive work as another avenue of support. Use of assessment, care in custody and teamwork (ACCT) case management for prisoners at risk of suicide and self-harm was good overall, but the quality of some entries in the records was inadequate.

The use of segregation had risen at Bronzefield and Eastwood Park. Where reintegration planning had improved, the time spent in segregation was fairly short, but this needed to be embedded across all sites.

There was a high demand for drug and alcohol clinical and psychosocial services in all the prisons inspected. Over a third of women in our survey reported problems with withdrawing from drugs and alcohol on arrival, compared with the 15% of respondents who reported this in men's prisons. Psychosocial and clinical support were generally good.

There was an effective prison-wide approach to supply reduction and the small team from a drug and alcohol agency focused on relapse prevention through a range of individual, group and peer-led initiatives. **Askham Grange**

Living conditions

Living conditions were decent at most sites, although at Eastwood Park conditions were poor in three of the 10 residential units, which had damp and peeling paint, and there was a backlog of repairs to bring the decaying fabric back to acceptable standards.

Staff-prisoner relationships remained a real strength in women's prisons. In our survey, proportionately more women than men said they had a member of staff they could turn to if they had a problem (84% compared with 72%), and that staff treated them with respect (79% compared with 71%). At Askham Grange, staff-prisoner relationships were among the very best we have seen.

Most staff in women's prisons had been trained in trauma-informed approaches to promote trauma responsive practice, although application of these principles was variable.

Equality and diversity work was reasonably good, with outcomes for prisoners with protected characteristics broadly in line with those for other prisoners. Faith provision was also good.

Mother and baby units provided very good facilities and were valued by new mothers, although at Bronzefield we saw the unit staffed overnight by a lone male officer, which was not appropriate. Prisoners who were pregnant and new mothers had access to midwifery and health visiting services at all sites.

Health care

Health provision and governance remained reasonably good, with partnership working, audit, oversight of incidents and complaints processes in place. Waiting times to see the GP and dentist were generally acceptable, but prisoners at New Hall could wait over three weeks for a routine GP appointment, and those at Eastwood Park had had to wait 11 weeks for a routine dental appointment.

Mental health needs were very high and provision varied. Eastwood Park had responded by introducing a new model of care and a crisis team. However, staff vacancies at New Hall undermined the mental health provision and resulted in the CQC inspectors issuing a requirement notice.

Over half the posts within the mental health team were vacant, assessments took too long, no group work was available and some reviews for those with more serious problems had been delayed. **New Hall**

At Foston Hall and New Hall, a daily mental health duty worker now attended case reviews, which was a positive development.

The team prioritised high-risk patients by regularly attending ACCT and segregation reviews. The duty nurse worked across the prison site and could support prisoners on an ad hoc basis, including those in the early stages of custody. **New Hall**

The supervision of queues for medicines administration varied between the prisons, although prisoners could access medicines relatively quickly and medicines management processes had improved.

The weekly in-possession risk assessment clinic ensured risk assessments were completed promptly and enabled patients to discuss their medication with pharmacy staff.

Foston Hall

Activities

Time out of cell remained reasonably good at all the closed sites, with between eight and 10 hours a day out of cell, and very good in open conditions, where prisoners were never locked in their rooms and had free access around the site for most of the day. Some prisons offered a range of recreational activities, although more was needed to occupy prisoners purposefully in their spare time.

Prisoners organised some recreational activities. However, they sometimes stopped taking place once the prisoner who organised them was released. The prison did not monitor prisoners' participation in recreational activities and there was scope for a more structured approach to the provision of activities to ensure they were meeting prisoners' needs. **Askham Grange**

Learning and skills

Ofsted's overall assessments of education, work and skills were good at all prisons, and outstanding at Askham Grange. All the prisons had sufficient activity spaces for the population, and these were generally well used. The activities were tailored to benefit both short-term and long-term prisoners. However, the provision offered at Eastwood Park left some long-term prisoners unemployed.

As prisoners serving short sentences made up most of the population, most educational and vocational courses were delivered over one to five weeks... As a result, the range of purposeful activity for prisoners serving sentences longer than 12 months was limited. **Eastwood Park**

There was good use of distance learning, and Bronzefield and Askham Grange worked in partnership with higher and further education providers to support prisoner access to these courses and vocational opportunities.

Managers had formed good links with local colleges so that prisoners could undertake studies that were not available at the prison, such as construction and higher-level beauty courses.

Askham Grange

Support for resettlement

There was generally positive support for women prisoners to maintain relationships with their children and families, with some innovative plans at Foston Hall to use digital technology to enable prisoners to speak directly with their children or other family members.

The strategic management of resettlement work was generally good, although in some prisons the prisoner needs analysis was not comprehensive enough and did not explore the specific needs of different groups of prisoners to inform the resettlement strategy.

Most prisoners had an up-to-date assessment of their risks and needs, but at Eastwood Park, staff shortages and cross-deployment in the offender management unit had affected its ability to complete these assessments.

Contact levels between prisoners and prison offender managers were reasonable. However, the contact that probation staff had with high-risk prisoners to manage their risk of harm and support them on release was better than that of prison offender managers with the low- and medium-risk prisoners they managed.

Public protection procedures were generally well managed. However, some prisoners covered by multi-agency public protection arrangements (MAPPA) did not have their management level confirmed before their release, which potentially undermined pre-release risk management planning. There were generally robust processes to manage contact restrictions, but at Askham Grange assessments for prisoners posing a risk to children were not always completed, and existing contact restrictions were not always enforced.

Closed sites still did not use release on temporary licence (ROTL) well enough to support resettlement. But Askham Grange provided very good access to ROTL and an impressive range of job opportunities, with almost half of all prisoners on ROTL involved in paid work.

Resettlement planning for release was mostly good, although the community rehabilitation company provision at Eastwood Park had been very limited for a long time and was too variable for the large number of prisoners with resettlement needs.

There were still significant gaps in providing accommodation for prisoners on release. Despite support, too many prisoners were released homeless or to very short-term accommodation, and none of the prisons inspected measured the sustainability of the accommodation into which prisoners were released.

Almost half of prisoners discharged in recent months had been released either homeless or to very temporary/emergency accommodation, including some high-risk prisoners. **Eastwood Park**

The lack of suitable accommodation, including the availability of bail hostel places, also affected the opportunities for home detention curfew.

The provision of work to address offending behaviour varied, and some prisons lacked a needs analysis to inform them of the provision needed. Support for prisoners who had experienced abuse, been involved in sex work or been trafficked was far too variable, with limited identification of prisoners who would benefit from work in this area.

New Expectations

During 2019–20, we began a review of our *Expectations* for those held in women's prisons. The review, the first since the 2014 edition, has been undertaken in consultation with a wide range of stakeholders, including focus groups with serving prisoners. This review will lead to updated criteria that focus more closely on the importance of fostering well-being for those held in women's prisons, the impact of life experiences, including trauma, and the significance to prisoners of their relationships and community – with their families, with wider support networks and within the prison community.

6

Children in custody



This section draws on seven inspections of five young offender institutions (YOIs) holding boys aged 15 to 18, and two inspections of secure training centres (STCs) holding children (boys and girls) aged 12 to 18. Inspections took place jointly with Ofsted and the Care Quality Commission in England and with Estyn and Healthcare Inspectorate Wales in Wales, as well as HM Inspectorate of Probation. All the findings from inspections in this section are based on the fourth edition of *Expectations: Criteria for assessing the treatment of children and conditions in prisons*, published in November 2018, and *Joint inspection framework: secure training centres*, published in February 2014, revised March 2019.

Young offender institutions

- ‘Keep-apart’ policies affected many children’s ability to experience a full regime of activities.
- Standards of care for children at risk of self-harm had improved in all YOIs except Feltham A, where self-harm had risen dramatically.
- Use of force had increased, and pain-inducing techniques continued to be used.
- Too many children had limited time out of their cell, and many received far less education than they were entitled to.
- There were weaknesses in planning for children’s successful release and resettlement.

Outcome of previous recommendations

In the YOIs reported on in 2019–20:

- 35% of our previous recommendations in the area of safety had been achieved, 1% partially achieved and 64% not achieved
- 40% of our previous recommendations in the area of respect had been achieved, 2% partially achieved and 58% not achieved
- 32% of our previous recommendations in the area of purposeful activity had been achieved, 9% partially achieved and 59% not achieved
- 24% of our previous recommendations in the area of resettlement had been achieved, 4% partially achieved and 72% not achieved.

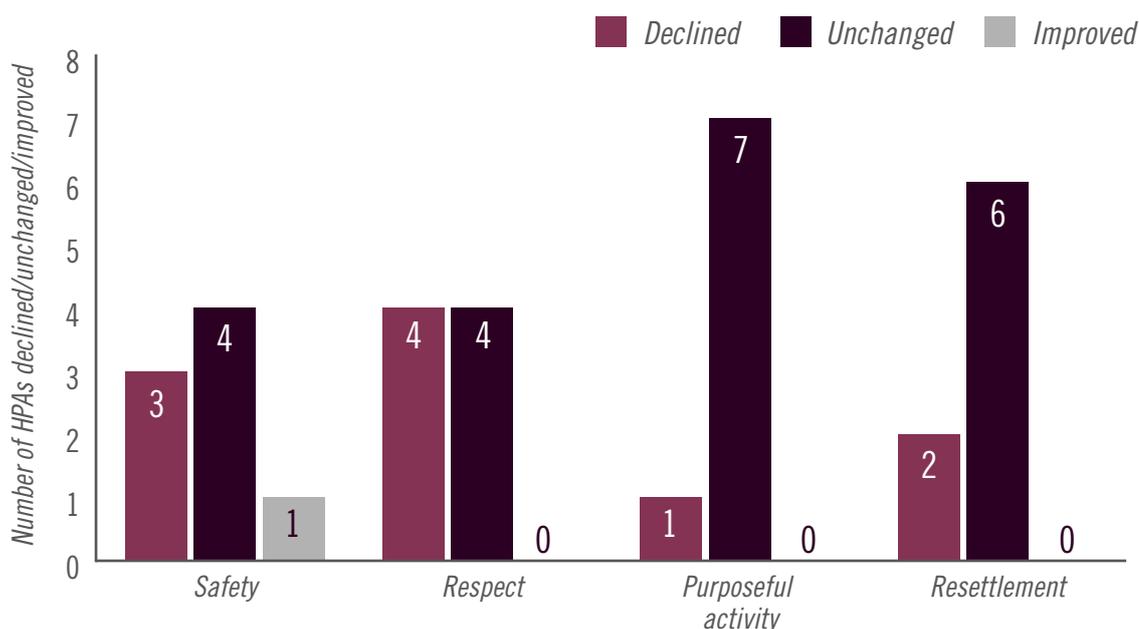
Table 11: Outcomes in YOI reports published in 2019–20

(There were separate assessments for the Keppel Unit at Wetherby, making eight sets of assessments for the seven inspections.)

	Safety	Respect	Purposeful activity	Resettlement
Cookham Wood December 2018 (published April 2019)	Not sufficiently good	Reasonably good	Not sufficiently good	Not sufficiently good
Cookham Wood September 2019	Not sufficiently good	Not sufficiently good	Not sufficiently good	Not sufficiently good
Feltham A January 2019 (published June 2019)	Not sufficiently good	Not sufficiently good	Not sufficiently good	Reasonably good
Feltham A (July 2019)	Poor	Poor	Poor	Not sufficiently good
Parc	Reasonably good	Good	Good	Reasonably good
Werrington	Not sufficiently good	Reasonably good	Reasonably good	Reasonably good
Wetherby	Reasonably good	Reasonably good	Reasonably good	Good
Keppel Unit	Good	Good	Reasonably good	Good

Figure 6: Outcome changes from previous inspection of YOIs (8)

(There were separate healthy prison area (HPA) assessments for the Keppel Unit at Wetherby, making eight sets of assessments for the seven inspections.)



Early days in custody

Children were still having to wait for long periods in court cells and in escort vehicles to be sent to their YOI, with many arriving after 7pm following circuitous journeys to other prisons first. This affected the time they had to mix with their peers and settle in before they were locked up on their first night. At Cookham Wood, the late arrival of many new receptions compromised the prison’s ability to identify risk and provide first night support.

Children’s experiences of their induction into the prison were good at Parc, Wetherby, Keppel and Cookham Wood.

Children were issued with a free MP3 player with a comprehensive recording of the induction programme which enabled them to listen to information in their own time. **Wetherby**

However, at Feltham A and Werrington, fewer children felt they got enough help and support on arrival.

Safeguarding

There were reasonable child safeguarding protocols in every establishment we visited. Governors sat on local authority safeguarding children boards, and dedicated staff working alongside social workers reviewed all safeguarding referrals made to them. However, in some YOIs these potentially good systems were undermined by delays in making referrals or lack of video footage from use of force incidents.

Suicide and self-harm prevention

Standards of care for children who self-harmed or were at risk of suicide had improved in each YOI we visited, except Feltham.

Self-harm was more than three times that at the previous inspection... while the population had decreased between the two inspections. Self-harm incidents included ligatures, cutting and fire setting, one of which had resulted in a child being hospitalised. Many of the self-harm incidents were a response to the poor and unpredictable regime children experienced. **Feltham A (July 2019)**

However, we found good practice at Werrington where a database recorded significant triggers for self-harm, such as bereavements, and staff were sent reminders to enhance their observations and be aware of any escalating behaviour.

At Wetherby, children who needed to be constantly observed because of their high risk of harm were encouraged to take part in as normal a regime as possible, including education classes, which was a good initiative. The Keppel Unit, which holds children with complex needs, had high levels of self-harm; the children there were well supported and their care was impressive.

All the prisons used assessment, care in custody and teamwork (ACCT) case management to support children at risk of self-harm. We described the quality of recorded interactions and care maps (action plans) as good in every YOI except Werrington, where they were adequate.

Children at risk of self-harm who had to be separated – and not mix with other children to minimise risk to themselves or others – were better supported than previously, with managers and health care staff discussing and recording the decisions to separate them and develop enhanced support plans. However, this was not always the case.

The justification for locating such children in segregation was not always recorded promptly. In one case, a child on an ACCT had been held in segregation for five days, with no consideration of whether it was an appropriate location for his care. **Werrington**

Security

Security procedures across the children's estate were generally appropriate, with YOIs having effective links with their local police forces. However, the high number of children who were being kept apart from one another to minimise conflict continued to affect children's access to education, activity and even basic facilities. This was particularly the case at Feltham A and Cookham Wood.

The management of children on keep-apart protocols absorbed too much staff time and affected the delivery of key work... this was seen most acutely when outreach workers and other specialists were routinely refused access to a child on a residential wing, staffed by at least three officers, because one child was using the telephone. **Feltham A (January 2019)**

Behaviour management, violence and antisocial behaviour

Behaviour management schemes offer additional time out of cell or small rewards for good behaviour, and challenge bad behaviour by removing these incentives. However, at Feltham A the scheme was undermined by poor staff-prisoner relationships, the lack of suitable role models among staff and poor regimes. These schemes were more effective in other YOIs that applied immediate rewards for good behaviour or where they were underpinned by good relationships between staff and children.

More children than at other YOIs said that staff told them when their behaviour was good, encouraged them to attend education and worked with them to achieve their resettlement objectives or targets. **Parc**

YOIs remained violent places, with nearly all experiencing increasing levels. At Feltham A, the number of violent incidents had increased by 45% in the six months between our two inspections in 2019. Assaults on staff had doubled at Werrington and fights had increased at Parc, although assaults had reduced. Wetherby, including the Keppel Unit, was the only site with a reduction in violence since our previous inspection.

Most establishments had suitable violence reduction strategies, but poor implementation and a reliance on separation and keeping children apart had not reduced incidents.

Use of force

Use of force had increased in every YOI, apart from Werrington. In our survey at Feltham A in July 2019, 74% of children said that they had been physically restrained while they had been there. Pain-inducing techniques continued to be used on children in every establishment, despite our previous recommendations that they should not be used in situations where there was no immediate threat of serious harm. Concerningly, batons, which under HMPPS policy should never be used in children's prisons, had been drawn on children at Feltham A when staff had been cross-deployed there from the adult Feltham B site in response to an incident.

We found significant backlogs in staff completing use of force reports at Feltham A and Cookham Wood. However, all the YOIs, apart from Feltham A, now interviewed children subjected to force within 48 hours, which was an improvement. Each YOI also had a meeting to review force and refer any safeguarding concerns to the local authority, although in July 2019 Feltham A had a backlog of 282 incidents that still required scrutiny. At Werrington, only 13% of use of force incidents were recorded on staff body-worn cameras. The safeguarding process was also undermined because staff did not attempt to de-escalate incidents.

We also saw too many examples of force being used too quickly and de-escalation not being used well enough. **Wetherby**

Separation thematic

In January 2020, we published the report of our thematic inspection *Separation of children in young offender institutions*. The findings – based on 85 interviews with separated children and the staff responsible for their care, and analysis of 57 cases of separation – were stark.

- Children’s experience of separation differed dramatically depending on the establishment they were held in, and even between different locations in the same YOI.
- The regime offered to most separated children was inadequate, and nearly all spent long periods in their cell without any meaningful human interaction.
- Some children were unable to access the very basics of everyday life, including a shower and telephone call; in the worst cases, children left their cells for just 15 minutes a day.

We found significant failures of oversight both locally and nationally, including that leaders and managers did not have enough information to identify and address problems with the regime that children were receiving.

Although the system of daily checks by managers, nurses and chaplains gave an illusion of oversight, these checks were cursory, often took place through a locked door and sometimes did not happen at all. This was compounded by weak or non-existent reintegration planning, which meant that some children were separated for far too long.

These failings meant most separated children experienced a regime that amounted to solitary confinement (see Glossary), which was prolonged for some children.

The weaknesses of practice and oversight were of such magnitude that we recommended that the current practice be replaced with an entirely new model of separation that enables managers to protect children from harm, and prevents separated children from being subjected to impoverished regimes. See: <https://www.justiceinspectorates.gov.uk/hmiprisons/wp-content/uploads/sites/4/2020/01/Separation-of-children-thematic-Web-2019.pdf>

Daily life

Relationships between staff and children needed to improve at Cookham Wood, Feltham A and Werrington. At Feltham A, 64% of children reported they had been victimised by staff. At Cookham Wood and Feltham, the very limited time out of cell prevented staff interacting with children and forming anything other than superficial relationships with them. As a consequence, children had poor perceptions of staff, which undermined their attempts to motivate children to engage in education or work to address their offending behaviour. In contrast, relationships were more positive at Parc and Wetherby, where children spent longer out of their cells.

All children in our one-to-one interviews felt cared for by at least one member of staff and were particularly complimentary about staff in education. In our survey, children were more likely to say that staff supported, helped or encouraged them than in other YOIs. Our observations supported this view; staff were patient with children and appropriately focused on meeting their needs. **Parc**

Living conditions were mostly reasonable across the estate, and better at Parc, Wetherby and Werrington. However, at Cookham Wood and Feltham A, many cells and communal areas contained graffiti, some of which was offensive, racist or gang-related. Children had a problem with access to basic facilities, including showers and laundry, at some sites. The quality of the food was mostly reasonable, if unpopular. Parc remained the only site where children could eat all their meals out of their cells.

The system holds a very diverse group of children; in our survey, 53% of children said they were from a black or minority ethnic background and 27% said they had a disability. These children were much less positive across a range of areas, such as feeling safe, than their white or non-disabled peers. We found that, with the exception of Parc, work to address equality issues needed greater prominence and managers needed to use data better to identify and address unequal access to activities and services.

Health care

Health services generally met most health needs for children, but they still had problems accessing them at several sites, and clinical time was often wasted because oversight and strategic partnerships were not strong enough. Regime restrictions impacted on children's ability to access health services at some sites, including receiving medication and mental health care.

Regime restrictions and curtailments affected children's access to health and substance misuse services, leading to unsatisfactory practices and unnecessary risks. **Feltham A (July 2019)**

There was, however, a more positive picture at Parc, where two dedicated nurses on the children's unit enabled effective continuity of care.

Despite numerous previous recommendations, four sites still lacked adequate emergency response arrangements. However, staff at Werrington had made positive changes following an incident.

Pharmacy services generally met need and we found examples of good practice in maintaining safety.

Mental health services were of good quality, and Cookham Wood and Wetherby had a dedicated speech and language therapist on their staff. The health and well-being team at Cookham Wood had developed a programme of group work sessions involving children who had used its services.

The service user development programme remained an excellent initiative to help remove the stigma of emotional and mental health needs and promote self-esteem.
Cookham Wood (December 2018)

Time out of cell

While children had reasonably good time out of cell on weekdays at Parc and Werrington, elsewhere they simply did not have enough time outside their cell – in many cases including time for education – to access everyday basics, including association, showers and telephone calls. At Feltham A, children were unlocked on average for only 4.2 hours on a weekday and much less at weekends. At the weekends, the experience of children was poor across the estate; in our survey, only 27% said they spent more than two hours out of their cell on a Saturday or Sunday.

Time spent in the open air was also not good enough; more than half of children said they did not get daily access to exercise outdoors.

The continued inability of many sites to provide children with enough time out of cell to access sufficient education, exercise and meaningful human contact with others significantly affected outcomes across all areas.

Education

Table 12: Ofsted assessments in YOIs holding children 2019–20
(including separate assessments for the Keppel Unit at Wetherby)

	<i>Overall effectiveness of learning and skills and work</i>	<i>Outcomes for children and young people</i>	<i>Quality of learning</i>	<i>Personal development</i>	<i>Leadership and management skills</i>
Outstanding	0	0	0	0	0
Good	3	3	3	3	3
Requires improvement	3	3	3	3	3
Inadequate	1	1	1	1	1
Total	7	7	7	7	7

Table 13: Estyn assessments in YOIs holding children 2019–20

	<i>Standards</i>	<i>Well-being and attitudes to learning</i>	<i>Teaching and learning experiences</i>	<i>Care, support and guidance</i>	<i>Leadership and management</i>
Excellent	1	0	1	1	1
Good	0	1	0	0	0
Adequate and needs improvement	0	0	0	0	0
Unsatisfactory and needs urgent improvement	0	0	0	0	0
Total	1	1	1	1	1

For many children in YOIs, custody presents an opportunity to start attending education and gain qualifications and skills to help them in the future. But despite some improved practice at Parc and Wetherby, too often this opportunity was missed.

Education was well led at Wetherby, Werrington and particularly at Parc, but there were fundamental weaknesses at Feltham A and Cookham Wood. All sites had enough activity places to meet children's needs, but their allocation to activity often depended more on 'keep-apart' or risk issues than their education needs.

While the regime at Parc ran on time and was efficient, elsewhere keep-apart issues had a significant impact on punctuality and attendance in education and training.

The timings of movements to education were dominated by keep-apart rules which were too complex and long-winded and caused very long delays. We observed about a third of children arriving at their allocated sessions up to an hour after the scheduled start, so that they missed the first lesson completely.
Cookham Wood (September 2019)

There continued to be insufficient outreach provision, where children were taught individually or in small groups on the residential units, to meet demand. As a result, these children received far less than the 15 hours' education a week they were entitled to.

Achievement rates for children at Wetherby and Parc were good, but at Cookham Wood fewer than half of children who started a course achieved the qualifications, at Feltham A achievement rates had declined in most subjects, and at Werrington children made slow progress in the key areas of English and mathematics.

Provision for resettlement

In August and October 2019, we published two thematic reports jointly with HMI Probation that described the experiences of 50 children before and after release. We found that for many children, there was not enough coordination of input from services within the YOI to deliver good resettlement outcomes.

In our inspections this year, we found that while children had regular sentence or remand planning meetings, these focused too often on the custodial part of the sentence and planning for release was left too late.

Caseworkers focused their assessments on how the child would manage in custody and the community assessment was left to the YOT [youth offending team]. In some cases, there were multiple targets to manage behaviour in custody, such as not to damage furniture and not to have demerits. **Werrington**

In better cases, YOIs and external agencies worked together to ensure that accommodation, education, training and employment, health, substance misuse and other services were in place on release. But critically, for some children accommodation was not identified in time to enable the other services needed for effective resettlement to be put in place.

At the time of our inspection, two children who were looked after by the local authority and due for imminent release did not have confirmed addresses. Education and health planning in the community was consequently not in place for these children. **Feltham A (July 2019)**

Despite some active work to support family ties, children still reported problems in maintaining regular contact with their parents, carers and friends. In our survey, under two-thirds of children said they could use a telephone every day and only 44% said that they had a weekly visit. YOIs made little use of current technology to help children maintain these contacts.

Urgent Notification: Feltham A

In July 2019, HM Chief Inspector of Prisons Peter Clarke invoked the Urgent Notification process after an inspection of Feltham A found that the treatment and conditions experienced by the children held there were ‘totally unacceptable’. The announced inspection took place after an earlier inspection in January 2019 found deterioration in the safety and care of children in the prison, a pattern that had emerged since 2017, when inspectors had rated safety and purposeful activity as poor. Despite a marked improvement in findings at the 2018 inspection, the Chief Inspector had warned then that: ‘the progress could easily prove to be fragile if investment falls away or leadership loses its focus.’

Calling on the Justice Secretary to take ‘decisive action’, Peter Clarke said: ‘We found that in the six months since the last inspection there had been what can only be described as a collapse in performance and outcomes for the children being held in Feltham A. There had been a decline in each of our tests, and in three of them our grades were now at the lowest possible level.’

The Urgent Notification noted:

- ‘overwhelming’ problems in safety, including violence against staff and between children
- levels of self-harm 14 times higher than in 2017
- poor relationships between staff and children
- a poor and unpredictable regime, dominated by the ‘keep-apart’ policy to separate children from rival gangs, which disrupted daily life, including access to education and training and health care
- little time out of cell for children
- deteriorating provision of and attendance in education, which was judged ‘inadequate’
- insufficient contact between children and their families
- many children released without stable accommodation, education, training or employment, or support from families.

Secure training centres

- The two STCs inspected had not made the changes necessary to improve their effectiveness, including their approaches to managing children’s behaviour.
- STCs continued to be characterised by violence and use of force, with too many injuries to staff and children.
- Both centres lacked joint working to resettle children.

The centres continued to use restraint techniques designed to cause pain when there was no immediate threat of serious harm. This was unacceptably poor practice. At Oakhill, governance of restraint was rigorous and a high proportion of referrals to the designated officer in the local authority concerned the excessive use of force. However, as at Medway, there was too little learning from incidents to help minimise the use of restraint.

Previous annual reports outlined the need for significant change in the overall effectiveness of STCs if outcomes for children were to improve. At the two STCs inspected, this change had not happened. Oakhill still required improvement. Medway had deteriorated and was inadequate.

Violence between children and towards staff, and the use of restraint, remained high. Much of the violence was relatively low level, but at both sites too many incidents resulted in injuries to staff and children that required medical treatment.

The help and protection available for some children who are frequently physically restrained by staff is insufficient to support them to break their complex cycle of behaviours. Across the centre, there is limited learning from incidents or significant and serious events to help to minimise the use of physical restraint. Consequently, some children continually experience poorly managed, overcrowded, frequent and prolonged physical restraints. **Medway**

There is an increase in the number of assaults on staff, some of which are very serious. In the last six months, staff have required hospital treatment on 14 occasions. **Medway**

Table 14: Outcomes in inspections of secure training centres 2019–20

	<i>Oakhill</i>	<i>Medway</i>
Overall experiences and progress of children and young people	Requires improvement to be good	Inadequate
Children’s education and learning	Requires improvement to be good	Good
Children’s health	Good	Requires improvement to be good
Children’s resettlement	Requires improvement to be good	Requires improvement to be good
How well children and young people are helped and protected	Requires improvement to be good	Inadequate
The effectiveness of leaders and managers	Requires improvement to be good	Inadequate

Despite the concerns we have reported previously, behaviour management systems were still not effective. At Oakhill, children did not see the scheme as fair or motivational, and staff were unsure how it operated. At Medway, an otherwise promising approach was undermined because the centre was not able to provide all children with the items they had earned. Across the two sites, only 22% of respondents to our survey thought the schemes encouraged them to behave well.

Use of separation had reduced at Medway and was mostly for short periods. At Oakhill, managers gave too little attention to ensuring children who were separated had access to fresh air, education and other basic entitlements.

One child was subjected to this restriction for 105 days. Records covering a 15-day period immediately prior to the inspection revealed that this child received an average of only five minutes of fresh air each day. The excessive duration of this restrictive measure is detrimental to children's welfare, health and well-being. **Oakhill**

Children had staff they trusted and could confide in, but both centres had weaknesses in sharing information about children. This did not help their progression, and contributed to the absence of centre-wide approaches to resettlement work. Less than two-thirds of children thought their experiences in a STC made them less likely to offend in the future.

7

Immigration detention



This section reports on the inspection of three immigration removal centres (IRCs), 13 short-term holding facilities (STHFs) and two detainee removal flights, one a charter flight operation and one on a scheduled flight. All of our findings are based on the fourth edition of our *Expectations: Criteria for assessing the conditions for and treatment of immigration detainees*, published in January 2018.

- Outcomes at Morton Hall and Brook House IRCs had improved to at least reasonably good in all our healthy establishment tests. While Colnbrook was now a reasonably respectful centre, safety outcomes had declined and were not sufficiently good.
- The number of people detained under immigration powers had reduced, but we continued to find some unacceptably lengthy periods of detention, which had no time limit.
- Anxiety about immigration status and removal led to many detainees feeling unsafe, but levels of violence were low. However, incidents of self-harm had risen substantially in all centres.
- While significant numbers of detainees at every centre were considered to be ‘adults at risk’, they were not always properly identified or supported.
- There was good welfare support for detainees being removed or released.
- Conditions in STHFs were generally reasonable for short stays. However, we identified serious concerns about safeguarding in the British-run holding facilities in France and legality of detention in the Calais Freight Lanes.
- Overseas removals were managed effectively but there was continuing disproportionate use of restraints on the overseas charter removal.

In the 12 months to 31 March 2020, 23,075 people entered detention, 5% fewer than the previous year and a continuation of the downward trend in the number of immigration detainees. On 31 March 2020, 555 people were held under immigration powers in the immigration detention estate and a further 340 in prisons. (All figures available at: <https://www.gov.uk/government/publications/immigration-statistics-year-ending-march-2020/how-many-people-are-detained-or-returned>). These figures do not include those held for short periods in non-residential STHFs. All the inspected centres had populations significantly below their allocated capacity.

Immigration removal centres

Outcome of previous recommendations

In the IRCs reported on in 2019–20:

- 27% of our previous recommendations in the area of safety had been achieved, 20% partially achieved and 53% not achieved
- 59% of our previous recommendations in the area of respect had been achieved, 14% partially achieved and 27% not achieved
- 53% of our previous recommendations in the area of activities had been achieved, 6% partially achieved and 41% not achieved
- 50% of our previous recommendations in the area of preparation for removal and release had been achieved, 6% partially achieved and 44% not achieved.

Table 15: Outcomes in inspections of IRCs 2019–20

<i>IRC and contractor</i>	<i>Safety</i>	<i>Respect</i>	<i>Activities</i>	<i>Preparation for removal and release</i>
Brook House (G4S)	Reasonably good	Reasonably good	Reasonably good	Reasonably good
Colnbrook (Care & Custody Mitie Group)	Not sufficiently good	Reasonably good	Reasonably good	Good
Morton Hall (HMPPS)	Reasonably good	Good	Good	Good

Perceptions of safety

In our surveys, around a third of detainees at Brook House and Morton Hall and almost half at Colnbrook said they felt unsafe. In each centre, we offered all detainees a confidential interview, partly to explore these perceptions. Interviewed detainees told us that several factors made them feel unsafe, such as fear of removal, concern about the progress on their immigration cases, the behaviour of other detainees frustrated at their confinement, and lengthy and open-ended detention.

Levels of violence were low in all IRCs and incidents were usually minor, although investigations into violence were not always sufficiently thorough. All staff groups in the inspected centres were asked to complete confidential online surveys, and we also interviewed a proportion of staff. Nearly all felt confident to use whistle-blowing procedures, although a minority said they would not use them because of concerns about confidentiality.

Brook House

Our inspection of Brook House was the first since a BBC TV *Panorama* programme in 2017 showed members of staff acting in what appeared to be a violent and inappropriate manner towards detainees. Using a methodology that allowed us multiple opportunities to identify potential concerns, we found no evidence that the abusive culture shown on the *Panorama* programme was present among the staff group during our inspection.

In our detainee survey and interviews, most detainees were positive about the way staff treated them. We found improved training of staff employed in the centre. Every member of staff who responded to our staff survey said that they would report inappropriate behaviour, and staff regularly submitted security information reports about potential staff corruption or other unacceptable behaviour.

In November 2019, a public inquiry was announced into the events at Brook House reported in the *Panorama* programme.

Rising self-harm and weaknesses in protection for some of the most vulnerable detainees

There were no confirmed self-inflicted deaths at IRCs in the reporting year. There had been one death of a detainee following release from Harmondsworth IRC, which was under investigation. However, in all centres a notable percentage of detainees said they had felt suicidal while there (46% in Colnbrook, 40% in Brook House and 29% in Morton Hall), reflecting a high level of distress among the population. The number of self-harm incidents had risen substantially in every centre and was particularly high in Morton Hall.

There had been 113 self-harm incidents in the previous six months, more than at the previous inspection. The reasons for this increase were unclear and required further investigation. **Morton Hall**

Procedures to monitor and care for detainees at risk of self-harm were generally good in Morton Hall and Colnbrook, but at Brook House assessment, care in detention and teamwork (ACDT) case management was not implemented well enough. At all centres, there was insufficient attendance at reviews by Home Office staff, even though the stress of uncertain immigration status, removal and detention without time limit were the most common risk factors. While detainees were held for shorter periods than we found previously, there were significant exceptions at all centres; for example, at Colnbrook, two detainees had been held for longer than two years, as had one detainee at Morton Hall. There were various reasons for lengthy detentions, but they often involved problems in obtaining travel documents, avoidable casework delays, poor availability of escorts and late legal challenges. In some cases, detainees had been granted bail but not released because of a lack of suitable accommodation.

Documentation problems and casework inefficiencies had prolonged detention in some cases. One detainee had so far been held for 11 months while awaiting a decision on their asylum claim. **Morton Hall**

At all sites, despite a high level of self-harm and constant watches, there had been very few completions of rule 35 reports – requiring notification to Immigration and Enforcement if a detainee’s health is likely to be injuriously affected by detention, including if they may have been the victim of torture – for detainees with thoughts of suicide or for other health concerns. For example, at Brook House, even though constant watch procedures had been used nearly 100 times in a six-month period because of an imminent risk of self-harm, there had been no rule 35 reports related to suicidal thoughts.

A high number of detainees were still kept in detention following a rule 35 report despite professional evidence of torture. For example, in nine out of 10 cases that we reviewed at Colnbrook, caseworkers maintained detention on the grounds that immigration factors outweighed the presumption to release.

Every centre had a significant number of detainees identified as vulnerable under the Home Office’s adults at risk in immigration detention policy (see https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/784634/adults-at-risk-policy-v5.0ext.pdf). At Brook House and Morton Hall, there was good joint working between the Home Office, contractor and health care staff to identify vulnerable adults, with reasonable support usually provided. However, at Colnbrook, there had been failures of communication between key agencies; the contractor did not have an up-to-date record of detainees at risk and could not therefore provide targeted support to all of them.

Detainees' health care needs were largely met, but at Colnbrook there were some weaknesses in governance and a lack of provision for detainees with low-level mental health needs. At Colnbrook and Brook House, detainees sometimes interpreted for others during health care appointments, which compromised accuracy and confidentiality.

Security and environment

Every centre inspected this year was too similar to a prison in design and feel, and not an environment suitable for people detained under immigration powers. Design problems at Brook House and Colnbrook included poor ventilation, sealed windows and very limited outside space.

One of the intractable problems at Colnbrook is that, with the exception of the women's unit, the centre is largely indistinguishable from a prison, and prisons are rarely suitable environments for immigration detainees. **Colnbrook**

The physical security features of the centre resembled a category B prison. **Brook House**

Outside areas were reasonably attractive, although the feel of the centre was heavily influenced by the large amount of razor wire, which created a more prison-like atmosphere. **Morton Hall**

Brook House had seen major refurbishment to improve the units, and there was a high standard of cleanliness. In contrast, the units at Colnbrook had ingrained dirt, some showers were broken and mouldy, and toilets were insufficiently screened and had no seats.

Physical security arrangements remained disproportionate. Detainees were often confined to their rooms for prolonged periods, both at night and at times during the day. Handcuffs were also used excessively at Colnbrook and Brook House for those attending outside appointments. The justification for strip searching at Brook House and Morton Hall was not properly recorded, so we could not be assured of its proportionality.

Staff-detainee relationships

Staff-detainee relationships were good at all sites, and especially positive at Colnbrook.

In our survey, 81% of detainees compared with 54% at the previous inspection said that most staff treated them with respect, and 66% said they had a member of staff they could turn to. Detainees whom we interviewed were also very positive about relationships with staff. **Colnbrook**

At Brook House the training programme for new officers had been redesigned to focus more heavily on the detainee experience and interpersonal skills, including an emphasis on mental health.

Preparation for removal and release

All centres provided detainees with good access to welfare services. At Morton Hall, trained advisers now saw most detainees who were leaving the centre to offer advice and support. The work of the Lincolnshire Action Trust (LAT) was particularly valuable.

Staff from LAT met families in the visitors' centre and made efforts to identify any welfare needs they may have had. As LAT also provided direct welfare support to detainees in the centre, they could quickly address any concerns families raised about their detained relatives. **Morton Hall**

Short-term holding facilities

Outcome of previous recommendations

In the STHFs reported on in 2019–20:

- 39% of our previous recommendations in the area of safety had been achieved, 5% partially achieved and 56% not achieved
- 29% of our previous recommendations in the area of respect had been achieved, 6% partially achieved and 65% not achieved
- 10% of our previous recommendations in the area of preparation for removal and release had been achieved and 90% not achieved.

We inspected 12 non-residential STHFs: four at airports, four at reporting centres, two at ports in France, two at the Eurotunnel site in France and one residential STHF at Manchester.

Conditions were generally reasonable for short stays. Detention staff were often helpful and caring towards detainees, and use of force was rare. However, fewer than a third of our total previous recommendations to help further improve the facilities had been achieved. Some detainees were held for unacceptably long periods in non-residential facilities. For example, the longest detention at Heathrow Terminal 2 was for over 34 hours; detainees there had no access to fresh air, adequate sleeping facilities or natural light.

In France, we inspected UK-run facilities alongside our colleagues in the French National Preventive Mechanism, the Contrôleur Général des Lieux de Privation de Liberté (CGLPL). We had serious concerns about some practices at both the Coquelles freight holding facility and in the Calais freight lanes. In the Calais freight lanes, detainees were routinely held in escort vehicles to await the arrival of the French border police; sometimes these vehicles were in very poor condition. It was concerning that the Border Force staff we spoke to during the inspection could not tell us the legal authority under which these detainees were held.

While Border Force staff in most facilities were alert to the signs of people trafficking and aware of their safeguarding duties, at Coquelles freight holding facility we found weak safeguarding practices for children.

We met a 17-year-old boy with an old gunshot injury who had been detained from a lorry and appeared unwell. Border Force took no action to ensure that the child's best interests were considered. Neither Border Force nor Mitie Care and Custody staff called for medical attention. The boy was not treated in accordance with either Mitie Care and Custody or Border Force child safeguarding policy, and Border Force staff were insensitive in their interactions with him.

Coquelles Freight

Border Force was unable to provide details on the number of safeguarding referrals at any of the French facilities at the time of our inspection.

A new and improved residential facility had opened at Manchester Airport. It provided better access to the open air and more facilities for women. The detainees we interviewed were very positive about the respectful and helpful approach of facility staff. However, the austere outside space resembled the design of a high-security prison yard, and was fully enclosed with overhead netting.

Overseas escorts

We inspected two overseas escorts during the reporting period. One was for the removal of a detainee considered to be high risk on a scheduled flight to Turkey. This was the first time we had carried out an inspection on a scheduled flight. This removal was well managed but there was a lack of resettlement support; the man had not lived in Turkey for over 20 years.

We inspected a charter flight to Nigeria and Ghana. Overall, this operation was managed reasonably well and escort staff interacted positively with detainees. However, despite repeated recommendations, some standards of common decency were not met; for example, detainees could only use toilets with the door left ajar, and they were not given pillows and blankets on long overnight flights. More than half of our previous recommendations had not been met. As with other flights, we continued to identify a disproportionate approach to risk and excessive use of restraints. In one case, a detainee was kept in a waist restraint belt for 14 hours, and it was unclear from the documentation how ongoing risk was being assessed.

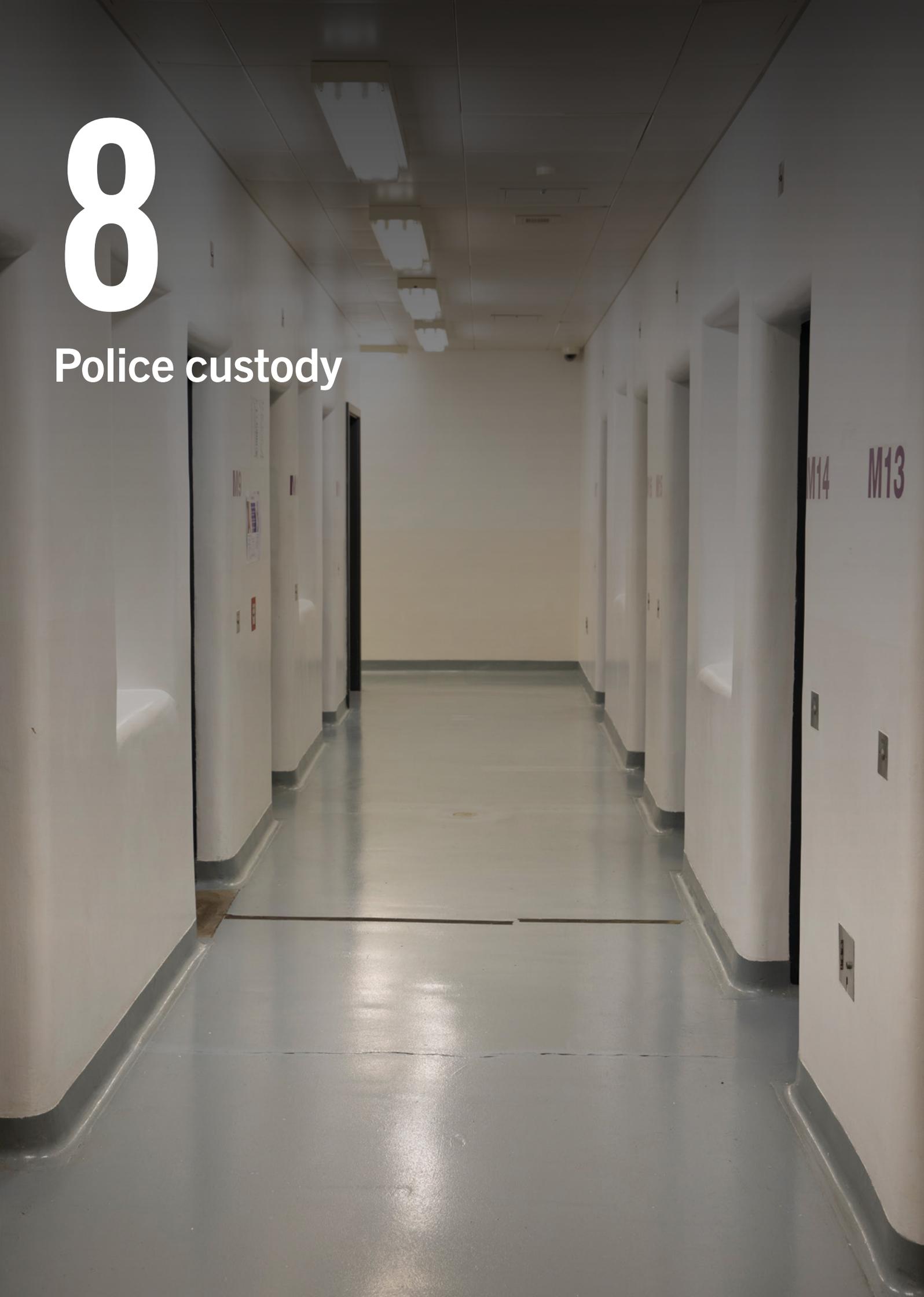
If a detainee said that they did not wish to be removed, this was considered to be sufficient justification for the use of a waist restraint belt, even if they were compliant and cooperative... In all cases, there was insufficient reassessment of ongoing risk, and restraints remained in place for too long.

Nigeria and Ghana escort and removal

A few escort staff were sleeping and not paying sufficient attention to the detainee they were supervising.

8

Police custody



All the findings from inspections in this section are based on the third edition of *Expectations for police custody: Criteria for assessing the treatment of and conditions for detainees in police custody*, published jointly with HM Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) in 2016, and revised in 2018. This section draws on six inspections of police custody suites in Bedfordshire, Devon and Cornwall, Durham, Northumbria, South Yorkshire and Sussex. In addition, we inspected facilities in the five police custody suites designated to hold detainees arrested on suspicion of terrorism or terrorism-related offences (TACT suites); the findings are reported separately at the end of this section.

- We found positive features in all the police custody facilities inspected, including a strategic focus on diverting children and vulnerable people away from custody.
- Most forces had weaknesses in leadership arrangements for custody, particularly in meeting the requirements of Police and Criminal Evidence Act (PACE), the collation and management of key data and, as reported in previous years, governance of the use of force.
- While there was a generally good approach to the identification of detainee risk, some features needed improvement.
- Custody staff treated detainees with respect, but aspects of detainee care were inconsistent and sometimes fell below our expectations, including insufficient attention to maintaining detainee dignity.
- Despite a general awareness of detainee vulnerability, the provision of appropriate adults for children and vulnerable adults was not always good enough, there was little alternative local authority accommodation for children, and too many detainees experiencing acute mental ill health remained in custody for too long.

All inspections of police custody in England and Wales are conducted jointly with HMICFRS and are unannounced. We visit custody suites during the day and night, including early morning visits to observe transfers to court and shift handovers, and night-time and weekend visits to observe the range of detainees held in custody. All police custody inspections also include an analysis of custody records and targeted case audits, which give closer scrutiny to areas of vulnerability, including mental ill health, children, use of force and detainees who are under the influence of alcohol and/or drugs.

Outcome of previous recommendations and areas for improvement

(There have been some changes in these areas under the revised Expectations 2018.)

In the police forces reported on in 2019–20:

- 44% of our previous recommendations and areas for improvement for strategy had been achieved, 37% partially achieved and 19% not achieved
- 33% of our previous recommendations and areas for improvement for treatment and conditions had been achieved, 38% partially achieved and 29% not achieved
- 24% of our previous recommendations and areas for improvement for individual rights had been achieved, 43% partially achieved and 33% not achieved
- 87% of our previous recommendations and areas for improvement for health care had been achieved and 13% not achieved.

Leadership

In all inspections we found a clear governance structure to provide accountability for the delivery of custody and many positive features in the way detainees were dealt with. Custody staff were generally well trained and there were mostly enough of them to ensure detention was safe. However, most forces had weaknesses in the oversight of custody, and too few had made sufficient progress on achieving our previous recommendations. It was of particular concern that the majority of the 22 main recommendations highlighted in our reports in this period centred on leadership issues.

A combination of factors often meant that force leaderships were not always properly focused on ensuring good outcomes for detainees. We found frequent gaps in key custody data that should have been collated and monitored to identify and address any shortfalls. It was also particularly concerning that forces did not always consistently meet the requirements of the relevant PACE codes of practice for the detention, treatment and questioning of individuals – this applied to all the forces inspected.

Although police forces made efforts to engage with partners to promote good outcomes for detainees, particularly children and those with mental ill health, partners, such as local authorities and mental health services, often lacked the capacity required, and good outcomes were not always realised.

The force had positive engagement with the three local authorities to improve outcomes for children who were charged and remanded in custody. However, this had not yet led to improved results. Although the overall number of children remanded in custody was low, these children were not moved into alternative local authority accommodation.

Bedfordshire

Risk assessment and detainee safety

All forces inspected were properly focused on keeping detainees safe during their stay in custody. They had a generally good approach to initial and ongoing assessment, and effective identification of individuals' risk, which was mostly well managed.

Detainees were generally checked at the required frequency to ensure they were well and in good health, and it was positive that most forces recognised the risks associated with detainees under the influence of drugs and/or alcohol. Most, but not all, took appropriate action to rouse those under the influence, in line with the relevant guidance. For detainees deemed to be at a higher risk of self-harm there was little use of anti-rip clothing, with most forces opting to offset risks through higher levels of observation, which was positive.

However, all forces continued to remove detainees' personal items, such as belts, footwear with laces and clothing with cords and jewellery, almost routinely and without an individual risk assessment – even when detainees were assessed as low risk. This was disproportionate, and sometimes affected detainee dignity. It was also of concern that, in most inspections, custody staff did not always answer cell call bells promptly.

Overall, however, there was an improved focus on ensuring detainees were released safely, with particular attention given to managing the safe release of children and vulnerable detainees.

Conditions and detainee care

Custody staff in all forces engaged respectfully with detainees, and many demonstrated compassion and empathy for those in their care. The suite booking-in areas, however, rarely provided sufficient privacy for detainees to disclose sensitive or confidential information to custody staff, and detainees were not always advised if their cell was monitored by CCTV.

In most forces, there was not enough attention to ensuring that detainees' dignity was maintained. Detainees could sometimes be seen on CCTV when using the toilet in

their cell. In a few cases detainees had their clothing removed by force, and they were sometimes left naked or without adequate replacement clothing in full view of CCTV monitors, which was unacceptable.

There was a reasonably good focus on meeting the diverse needs of detainees. In 2019, one of several changes made to code C of PACE was to ensure that the menstrual care needs of female detainees were met. We found an improving picture with a generally sufficient range of menstrual products, although these were not always offered routinely.

The welfare needs of detainees were broadly met, and almost all we spoke with told us that they had been treated well while in custody. They were offered food and drinks regularly, which were largely of an acceptable standard for most detainees who had relatively short stays in custody.

However, other aspects of detainee care were not always good enough. Few were routinely offered reading materials, exercise in the fresh air or showers/washing facilities, even when they had been in custody overnight or over the weekend. There were not always enough supplies of replacement clothing and blankets to ensure comfort and warmth, some mattresses were worn and thin, and many detainees walked around custody suites in socks or bare feet, even when there were sufficient stocks of replacement footwear. Better practice in one force indicated what could be achieved.

Staff paid good attention to meeting the welfare needs of those detained in custody. An excellent range of food was available. Detainees were regularly provided with blankets, replacement clothing, toilet paper and reading material. The force was also looking at innovative and safe ways of occupying detainees and had introduced foam footballs in some suites. Detainees' access to showers and exercise was limited, depending on the availability of detention officers. **Devon and Cornwall**

Although custody facilities were generally clean and well maintained, we continued to find potential ligature points in all the force areas inspected. Many were as a result of design issues that made them very expensive to rectify but, where possible, the forces responded positively to address our concerns. Some custody suites were ageing and lacked facilities that we would have expected, such as exercise yards and in-cell washbasins.

Use of force

Governance of the use of force was weak in all forces inspected. Data were often not readily available and were unreliable or inaccurate, and not all staff involved in using force against detainees routinely completed the individual forms required to justify its use. There was too little quality assurance of incidents where force was used. Although we have previously raised the use of force as an ongoing issue with all chief constables, this area continued to be a cause of concern or area for improvement in all our inspection reports.

Despite the weaknesses in governance, custody staff generally managed challenging detainees well, and de-escalated many situations effectively without resorting to using force. In the cases we reviewed in depth, including cross-referencing against CCTV footage of incidents where available, any force used was mostly necessary and proportionate to the risks or threat posed, and it was managed well overall. However, we did refer several cases back to forces for learning points, particularly on the poor use of techniques, such as the prolonged restraint of detainees in the prone position.

Vulnerable adults and children

Custody staff had a generally good awareness of vulnerability, but some adults were not identified as vulnerable and requiring the assistance of an appropriate adult, even when there were clear signs that this was needed. The provision of appropriate adults for children and vulnerable adults was mixed. Although there was some very good work in this area, appropriate adults were not always requested early enough or did not attend promptly to support detainees throughout their whole stay in custody.

It was positive that officers recognised the innate vulnerability of children and generally only arrested them when there was no alternative. Children were treated well by custody staff, but their specific needs were not always recognised and met. They were not always kept separate from adults, most were located in a cell rather than a more child-friendly space, they were not prioritised for booking in, did not always have face-to-face reviews of their detention, and were not routinely given material on their rights and entitlements in a child-friendly format that they could understand. There was, however, a strong focus on minimising the time children spent in custody and on avoiding overnight detention where possible.

As in previous years we continued to find that, despite the efforts of the forces, there was a lack of alternative local authority accommodation for the relatively few children who were charged and refused bail. This meant that some children were held for too long in custody when they should have been moved to accommodation arranged through the local authority, and this was a poor outcome.

Health care

In all forces inspected, there were clear clinical governance arrangements in health provision and evidence of effective partnership working between police and health bodies. Most health care professionals (HCPs) were embedded in custody suites, and were supported to extend their professional skills and knowledge. However, the arrangements for detainees to access HCPs in custody varied between forces, and not all were able to have a consultation in private, which impeded patient confidentiality and was inappropriate.

Patient care in all forces was good and detainees were seen within relevant timescales. Medicines management arrangements were generally effective, and most detainees could access their prescribed medicines. Most forces enabled detainees to go on to opiate substitution therapy in line with national guidance. Availability of nicotine replacement therapy continued to vary between forces.

Although all detainees could access symptomatic relief for drug and alcohol withdrawal, services for those experiencing substance misuse issues varied between the inspected forces, and provision was inequitable even within forces. In some forces, and in line with the NHS England national commissioning strategy, mental health liaison and diversion providers were beginning to offer an all-age, all-vulnerability model to meet the needs of detainees with substance misuse issues.

All the forces we inspected, bar one, had seven-day-a-week mental health liaison and diversion provision. Street triage and mental health professionals supporting force control rooms continued to be a valuable resource in diverting vulnerable people with mental health issues from custody if needed. Arrangements for post-custody support for vulnerable detainees were developing in some forces.

Detainees leaving custody could access mental health support for up to 12 weeks following release, which included counselling, social care and peer support. **Northumbria**

All forces had good links with local mental health providers, and custody was now rarely used specifically as a place of safety for individuals detained under section 136 of the Mental Health Act. However, we were concerned that too many detainees with acute mental ill health were spending too long in custody waiting for a Mental Health Act assessment, conveyance to a health-based place of safety or access to inpatient beds. Most forces did not collect or analyse relevant data to report on the full extent of delays and use this to improve outcomes for detainees with acute mental ill health.

Despite the rarity of use of section 136 to detain people in police custody as a place of safety, we began to see it being applied when people were waiting to receive a Mental Health Act assessment or to be transferred to an inpatient bed. The picture was complex, and further complicated by a lack of data and poor recording. If a detainees' wait was so long that their time to be detained lawfully under PACE was running out, the police could apply section 136 to detain and then transfer them to a health-based place of safety. We judged that many such detainees to whom this applied were not well served by mental health services and should have been moved from custody sooner without the use of section 136 powers in this way.

Delays in access to inpatient beds, conveyancing issues and difficulties in securing approved mental health professionals and doctors meant that far too many detainees with acute mental health needs did not have these met in custody. **Sussex**

Inspecting TACT detention

There are five 'TACT' police custody suites in England and Wales identified to hold specifically detainees arrested on suspicion of terrorism or terrorism-related offences. Detainees in these facilities can be held for up to 14 days, and legislation takes account of the impact of longer detention and sets out additional requirements to assure their health and welfare. Responsibility for the safe and respectful delivery of custody in the TACT suites rests with the chief constable of the force where the suite is situated. Counter Terrorism Policing oversees the provision of TACT custody, and has a national strategic role in directing, coordinating and supporting it.

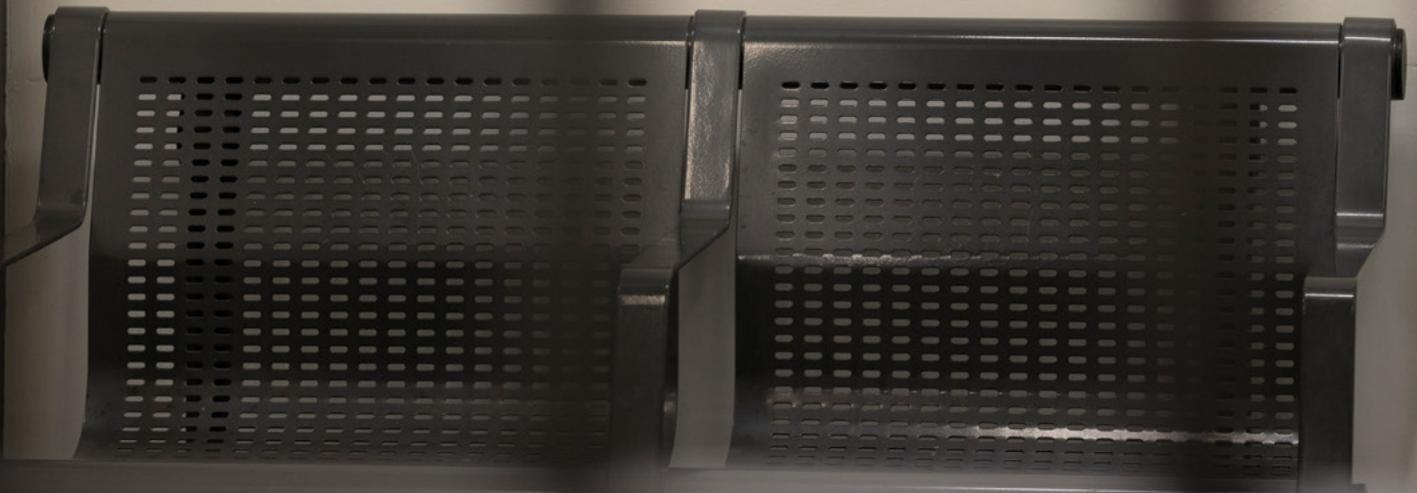
Our first inspection of such facilities – based on the joint HMI Prisons-HMICFRS *Expectations: criteria for assessing the treatment of and conditions for detainees in designated TACT custody suites*; <https://www.justiceinspectorates.gov.uk/hmiprisons/our-expectations/tact-custody-expectations/> – found many positive features and good outcomes for detainees overall. Custody staff provided good care for detainees, meeting, and in some cases exceeding, required standards. The environments and conditions in which detainees were held were generally of a good standard. However, there was a lack of integration between Counter Terrorism Policing and custody services in the host police forces.

The main areas we identified for improvement related to governance, oversight, and consistency of approaches and procedures across the facilities. Positively, forces had begun to address some of our concerns during the inspection.

9

Court custody

← Courts 1-2 & 7-8
Courts 3-6 & 9-12 →



All the findings from inspections in this section are based on *Expectations: Criteria for assessing the treatment of and conditions for detainees in court custody*, published in June 2012. This section draws on three inspections of court custody facilities – in Devon, Cornwall and Dorset; Hampshire, Wiltshire and Isle of Wight; and Greater Manchester – covering five Crown courts, 16 magistrates' courts, eight combined courts and one immigration and asylum chamber.

- All the inspections found reasonably good provision with many positive features.
- Leadership arrangements between the three key stakeholders – HM Courts & Tribunals Service (HMCTS), Prisoner Escort and Custody Services (PECS), and the contracted custody and escort provider – were generally good and reflected a shared responsibility.
- Court custody staff consistently treated detainees courteously and with compassion, and looked after them well.
- There was good attention to ensuring detainees' legal rights were met, but many detainees continued to be held in custody for longer than necessary.
- Children were held in court custody relatively infrequently but there was little acknowledgement of their specific needs.
- Despite an ageing estate, conditions for detainees were acceptable overall.
- The routine handcuffing of detainees in the absence of individual risk assessments was excessive, and an ongoing concern.

Leadership

In all the inspections we found a clear strategic focus on promoting safe and decent escort and custody services. The inter-agency relationships between the three bodies involved directly in the delivery of court custody – HMCTS, PECS and the contracted custody and escort provider – were well established and mostly effective.

Cleaning and maintenance services were contracted out and were generally, but not always, effective. There were some delays to maintenance work, particularly for larger or more costly tasks.

Staffing levels in custody were adequate to ensure the safety and well-being of detainees but there were some weaknesses in training, particularly in safeguarding, mental health awareness, and equality and diversity. Despite this, a positive staff culture meant detainees consistently received good care.

Despite our many previous recommendations, HMCTS still had no overarching safeguarding policy or framework.

Individual rights

In all the court custody facilities inspected, there was generally good attention to ensuring that detainees received their legal rights in custody.

Written information detailing detainees' rights was placed in each cell and was generally explained if required. Rights information was available in a range of languages. Custody staff rarely used professional telephone interpreting facilities to communicate with non-English-speaking detainees and generally relied on court-appointed interpreters, who usually only arrived after the detainee had been in custody for a while.

Although courts had a strong commitment to prioritising the cases of people already held in custody, this was not always achieved. We were concerned that some detainees spent longer in custody than was strictly necessary. A variety of factors contributed to this, including:

- the court not dealing with custody cases promptly, and not listing them first or early in the day
- the late attendance of legal representatives, who often dealt with their non-custody cases first or were stretched when representing multiple defendants
- delays awaiting the attendance of court-appointed interpreters
- detainees waiting for transport to prison for long periods after their case had concluded
- prisoners who had been released by the court but awaiting formal authority to be released from their sending establishment.

HMCTS needed to do more to understand the causes of these delays and encourage key stakeholders to address them.

Treatment and conditions

Detainees were generally kept in reasonable conditions and were treated well during their time in court custody.

Vehicles used to transport detainees were showing signs of age but were mostly clean. We continued to find women and children transported in the same vehicles as men, and often without the necessary safeguards to protect them.

Despite a lack of training, staff did their best to meet the diverse needs of those in their care. The provision for women was better than we have found in previous court inspections. Although relatively few children were held in custody, they were essentially treated the same as adults, with little consideration of their vulnerability and individual needs. Few court custody facilities were accessible for detainees with disabilities or poor mobility. Staff did their best with limited facilities and resources to assist and accommodate those with physical disabilities, but outcomes for these detainees were not good enough.

Detainees were positive about their treatment. Food and drink were provided regularly and some reading materials were available, but not always offered. However, 'distraction packs', including a range of puzzles and activities, were a welcome initiative, widely distributed and appreciated by detainees.

Custody staff treated detainees with courtesy and respect, and paid particular attention to reassuring them and addressing any anxieties... Detainees were treated well and were complimentary about the care they received. **Devon, Cornwall and Dorset**

Information about detainees' risks was not always sufficiently detailed in their person escort record (PER), but custody staff were mostly alert to risks and vulnerabilities, and the management of identified risk was generally good, including observations mostly conducted at the required frequency.

There was an improved focus on ensuring detainees, particularly the most vulnerable, were released safely with arrangements to provide them with the means to get home if required.

Custody staff were patient and reassuring, often de-escalating challenging situations well. Force was used relatively infrequently in custody, and seemed generally proportionate and reasonable when it was. However, it was of continued concern that, in all the courts inspected, detainees, including children, were subjected to routine and excessive handcuffing in the absence of individual risk assessments – and despite the secure and controlled environment of the court custody facilities.

Although much of the court custody estate was ageing and some cells were cramped and cold, there were efforts to keep them clean, graffiti-free and well maintained, and standards were acceptable overall. However, we found potential ligature points in all the facilities inspected.

Health care

There was still little demand for health services in court custody. Custody staff could use a nationally contracted telephone helpline for advice on detainees' health care needs, particularly medicines or reported symptoms. The health service could also attend courts to see detainees if required, but this rarely happened; staff were reluctant to use the service as it could take several hours for a health care professional to attend, if at all. Any acute deterioration in health usually led to the detainee being taken to hospital.

Most custody staff had received first aid training and had access to basic life support equipment. However, as in previous court inspections, they had few opportunities to practise these skills, which diminished their competence and confidence to provide this if required.

Detainees' personal medicines were safely stored and staff facilitated self-administration, consulting the health provider if necessary. PERs did not always record detainees' health needs, and some detainees continued to arrive from police custody without adequate medication.

The mental health needs of detainees were usually assessed before their arrival in court custody. In many contracted mental health services, practitioners worked across police custody and courts to enable some continuity of support. Across all court areas, NHS commissioners were reviewing mental health services using a nationally agreed model. This was seeing a greater input, resulting in increased provision of mental health services into Crown courts, for example. Most of these developments were still too new to assess outcomes for detainees. Too few detention staff had received any training in mental health and substance misuse issues.

Revising *Expectations*

Following wide consultation, we developed the second version of our *Expectations for court custody* (see <https://www.justiceinspectorates.gov.uk/hmiprisons/our-expectations/court-custody-expectations/>). These are our criteria for inspecting outcomes for detainees in court custody facilities and their transfer to and from these facilities. The *Expectations* are now divided into five sections that reflect the governance structures of court custody and also the experience of detainees throughout their time in court custody. The five sections are: leadership and multi-agency relationships; transfer to court custody; in the custody suite; in the custody cell; and release and transfer from court custody.

The revision of the *Expectations* incorporated learning from our court custody inspections to date and other best practice, and they are underpinned by human rights treaties and standards. We will start inspecting court custody against the revised *Expectations* during the 2020–21 inspection year.

10

The Inspectorate
in 2019-20

RECEPTION

A WING

B WING

C WING

D WING

VISITS

HEALTHCARE

EDUCATION

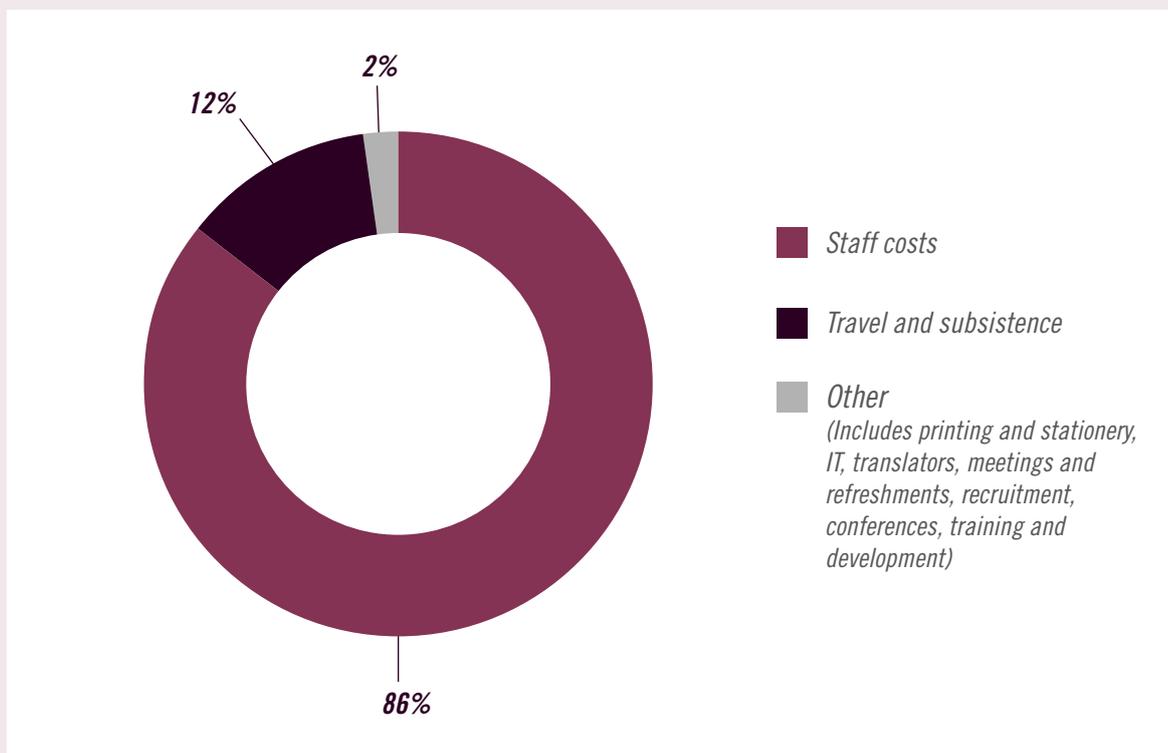
GYMNASIUM

Income and expenditure – 1 April 2019 to 31 March 2020

<i>Income</i>	£
MoJ (prisons and court cells)	4,283,000
Home Office (immigration detention)	352,220
Home Office (HMICFRS/police custody)	300,000
Youth Justice Commissioning Team (YJCT) (children's custody)	119,866
Other income (HMI Probation, Prisons and Probation Ombudsman, STC, Ministry of Defence, Border Force, Criminal Justice Inspectorate Northern Ireland, NPM Members)	161,928
Total	5,217,014

<i>Expenditure</i>	£	%
Staff costs (includes staff, fee-paid inspectors, secondees and joint inspection/partner organisation costs, e.g. General Pharmaceutical Council and contribution to secretariat support of the Joint Criminal Justice Inspection Chief Inspectors Group)	4,602,588	86%
Travel and subsistence	654,994	12%
Printing and stationery	10,955	0.20%
Information technology and telecommunications (includes the cost of renewing licenses for software (SPSS and SNAP - used by researchers to process and analyse survey data)	19,008	0.35%
Translators	13,458	0.25%
Training and development	38,380	0.71%
Other costs (including recruitment costs, conferences and professional memberships)	39,989	0.74%
Total	5,379,372	100%

Expenditure 1 April 2019 to 31 March 2020



Inspectorate staffing – 1 April 2019 to 31 March 2020

Our staff and fee-paid associates come from a range of professional backgrounds. While many have experience of working in prisons, others have expertise in social work, probation, law, youth justice, health care and drug treatment, social research and policy. Most staff are permanent, but we also take inspectors on loan from HM Prison and Probation Service (HMPPS) and other organisations. We engage associates based on their expertise in areas we inspect to enhance our employed staff. Currently, 12 staff are loaned from HMPPS, and their experience and familiarity with current practice are invaluable to our work.

Staff engagement

Every year we gather feedback from our staff. In 2019, we once again participated in the Civil Service People Survey, commissioned by the Cabinet Office. The survey was completed by 78% of HM Inspectorate of Prisons staff and the results indicated a score of 79% on the overall staff engagement index. This remains a very strong overall result; some 11 percentage points higher than even ‘high performing units’ across the civil service. In 2019 our results around learning and development were less positive than in our 2018 survey (down 12%). We have now created a Staff Learning and Development Committee to investigate the issue and improve outcomes for staff.

Staff and associates - 1 April 2019 to 31 March 2020

	Peter Clarke	Chief Inspector
	Martin Lomas	Deputy Chief Inspector
	Barbara Buchanan	Senior Personal Secretary to the Chief Inspector
	Ruth Mostyn-Dignan	Administrative Support Officer to the Deputy Chief Inspector
A Team (adult male prisons)	Natalie Heeks	Inspector
	Jade Richards	Inspector
	Paul Rowlands	Inspector
	Jonathan Tickner	Inspector
O Team (prisons holding women)	Sandra Fieldhouse	O Team Leader
	Hayley Edwards	Inspector
	Ian Macfadyen	Inspector
	Rebecca Stanbury	Inspector
	Darren Wilkinson	Inspector
	Caroline Wright	Inspector
N Team (adult male and young adult prisons)	Deborah Butler	N Team Leader
	Ian Dickens	Inspector
	Alice Oddy	Inspector
	David Owens	Inspector
	Nadia Syed	Inspector
Y Team (establishments holding children)	Angus Mulready-Jones	Y Team Leader
	David Foot	Inspector
	Angela Johnson	Inspector
	Esra Sari	Inspector
I Team (immigration detention)	Hindpal Singh Bhui	I Team Leader
	Colin Carroll	Inspector
	Michael Dunkley	Inspector
	Tamara Pattinson	Inspector
	Kam Sarai	Inspector

P team (police custody)	Kellie Reeve	Acting P Team Leader	
	Jeanette Hall	Inspector	
	Fiona Shearlaw	Inspector	
Health Services Team	Tania Osborne	Head of Health and Social Care Inspection	
	Steve Eley	Health and Social Care Inspector	
	Shaun Thomson	Health and Social Care Inspector	
Research, Development and Thematics	Catherine Shaw	Head of Research, Development and Thematics	
	Rahul Jalil	Senior Research Officer	
	Helen Ranns	Senior Research Officer	
	Becky Duffield	Research Officer	
	Amilcar Johnson	Research Officer	
	Joe Simmonds	Research Officer	
	Shannon Sahni	Research Assistant	
	Chloe Moore	Research Trainee	
	Billie Powell	Research Trainee	
	Secretariat	Louise Hopper	Head of Secretariat
		Lesley Young	Head of Finance, HR and Inspection Support
John Steele		Chief Communications Officer	
Jade Glenister		Senior Policy Officer	
Hannah Pittaway		Policy Officer	
Louise Finer		Head of NPM Secretariat	
Rosanna Ellul		Assistant NPM Coordinator	
Tamsin Williamson		Publications Manager	
Helen Saunders		Publications and Digital Communications Officer	
Umar Farooq		HR and Inspection Support Manager	
Stephen Seago		Finance and Inspection Support Manager	
Tanveer Ali		Inspection Support Officer	
Caroline Fitzgerald		Inspection Support Officer	
Charlie Pym		Inspection Support Officer	
Fee-paid associates		Anne Clifford	Editor
		Paddy Doyle	Inspector
	Sigrid Engelen	Drugs and Alcohol Inspector	
	Martyn Griffiths	Inspector	
	Deri Hughes-Roberts	Inspector	
	Keith Humphreys	Inspector	
	Maureen Jamieson	Health Inspector	
	Martin Kettle	Inspector	
	Brenda Kirsch	Editor	
	Stephen Oliver-Watts	Inspector	
	Adrienne Penfield	Editor	
	Alison Perry	Inspector	
	Yasmin Prabhudas	Editor	
	Christopher Rush	Inspector	
	Patricia Taflan	Research Officer	
	Paul Tarbuck	Inspector	

Staff and associates who left this reporting year

Beverley Alden	Inspector
Jon Allen	Inspector
Marilyn Anderson	Inspection Support Officer
Sharlene Andrew	Research Officer
Charli Bradley	Research Assistant
Rachel Duncan	Research Trainee
Fionnuala Gordon	Inspector
Monika Green	Publications Assistant
Nabila Heematally	Administrative Support Officer to the Deputy Chief Inspector
Jon Huby	Inspection Support Officer
Faraha Malique	Administrative Support Officer to the Deputy Chief Inspector
Gordon Riach	Inspector
Andy Rooke	Inspector
Fran Russell	Inspector
Sean Sullivan	Inspector
Emma Sunley	Inspector
Holly Tuson	Research Trainee
Claudia Vince	Research Officer
Liz Walsh	Inspector

Stakeholder feedback

We conduct an annual online survey of stakeholders. A link to the questionnaire is distributed to our mailing list of contacts by email. To reach a wider range of stakeholders we also publicise the survey via staff and professional bulletins, place a link on our website and on staff email footers, and alert our Twitter followers. The 2019 survey which was conducted in November and December 2019 received 165 complete responses.

Feedback was generally very positive about a range of our communications. Almost 80% of respondents had seen HMI Prisons represented in the national newspapers, radio, TV or in online media. Over 90% of respondents said that it was easy or very easy to find what they were looking for on our website. Over 90% of respondents who had used web-based *Expectations* reported that they were either very or quite easy to use.

Our inspection reports continue to be positively received, with favourable scores of over 75% in relation to each of length, structure, language, quantity of information, ease of navigation and treatment of diversity issues. However, around half the survey respondents agreed that our reports could do more to highlight positive findings or good practice. The survey sought early feedback about our Independent Review of Progress (IRP) reports. Over two-fifths of respondents had read an IRP report; of those over 90% agreed or strongly agreed that it was a useful tool for supporting improvement.

We asked stakeholders whether they agreed or disagreed with a series of statements relating to HMI Prisons' strategic themes (all percentages exclude those who responded 'don't know/can't say'):

- 83% agreed/strongly agreed that 'HMIP has fulfilled its statutory duty to report accurately, impartially and publicly on the treatment and conditions for detainees'
- 85% agreed/strongly agreed that 'HMIP has provided constructive challenge to those responsible for the establishments it inspects'
- 77% agreed/strongly agreed that 'Evidence from HMIP inspections has informed policy and practice'
- 81% agreed/strongly agreed that 'HMIP staff have the necessary skills and expertise to deliver quality inspections'
- 75% agreed/strongly agreed that 'HMIP has managed its resources efficiently, accounting for its performance and demonstrating value for money'
- 71% agreed/strongly agreed that 'HMIP has worked collaboratively with its criminal justice partners and other key stakeholders'.

Communications

We issued 86 media releases in the year, a significant increase on the 70 issued in the previous year. This reflected the fact that 2019–20 was the first year of publication of our independent reviews of progress (IRPs), in addition to full inspection and thematic reports. Many of our reports attracted broadcast and newspaper interest – both at regional and national level in England and Wales. The Chief Inspector's Urgent Notification (UN) of HMP Bristol generated significant regional interest, and the other UN in the year, at Feltham A young offender institution, and our thematic report on the separation of children (published in January 2020), were also widely reported at a national level, reflecting continued interest in our inspection work in the children's estate. Our published evidence on prisons and other places of detention, including immigration removal centres (IRCs), informed debate and comment across the media and on Twitter, and the Chief and Deputy Chief Inspectors were regularly invited to talk about our reports on TV and radio. We continued to publish our reports on our website and the media coverage we generated drove readers to the site, as did our Twitter feed, which at the end of March had almost 14,000 followers. During the year we carried out work to update and improve the accessibility of the website.

Although we suspended our inspection programme on 17 March 2020 in response to the COVID-19 pandemic, we continued to publish reports of inspections that had already taken place. We also published the first of a series of statements on the website giving information on how we would continue to fulfil our duty to provide scrutiny of places of detention and report independently during the pandemic.

11

Appendices

Appendix one

Inspection reports published 1 April 2019 to 31 March 2020 101

Appendix two

Healthy prison and establishment assessments
1 April 2019 to 31 March 2020 104

Appendix three

Recommendations accepted in action plans received
1 April 2019 to 31 March 2020 106

Appendix four

Recommendations achieved in inspection reports published
1 April 2019 to 31 March 2020 111

Appendix five

Prisoner survey responses (adult men): diversity analysis 116

Appendix six

Prisoner survey responses: men and women 155

Appendix seven

IRP assessments 162

Appendix one

Inspection reports published 1 April 2019 to 31 March 2020

ESTABLISHMENT	DATE PUBLISHED
Manchester Airport Terminal 2 STHF	16 April 2019
Manchester Airport Residential STHF	16 April 2019
Colnbrook IRC	16 April 2019
Cookham Wood	18 April 2019
Bronzeield	25 April 2019
Swaleside	8 May 2019
Garth	9 May 2019
Lewes	14 May 2019
Guys Marsh	21 May 2019
Exeter (IRP)	21 May 2019
Chelmsford (IRP)	24 May 2019
Stocken	29 May 2019
The Mount (IRP)	31 May 2019
Oakhill STC	3 June 2019
Feltham A	4 June 2019
Moorland	11 June 2019
Birmingham (IRP)	18 June 2019
Foston Hall	19 June 2019
Heathrow Terminal 2 STHF	20 June 2019
Heathrow Terminal 5 STHF	20 June 2019
Werrington	25 June 2019
New Hall	28 June 2019
Brixton	2 July 2019
Devon, Cornwall and Dorset court custody	5 July 2019
Berwyn	11 July 2019
Manchester (IRP)	11 July 2019
Askham Grange	16 July 2019
Wetherby and Keppel Unit	23 July 2019
High Down (IRP)	24 July 2019
Ashfield	30 July 2019
TACT custody suites	1 August 2019
Channings Wood (IRP)	6 August 2019
Durham (IRP)	6 August 2019
Nigeria and Ghana escorts and removals	9 August 2019
Isle of Wight	13 August 2019
Elmley	20 August 2019
Pentonville	21 August 2019
Eastwood Park	28 August 2019
Swinfen Hall (IRP)	3 September 2019
Forest Bank	4 September 2019

Inspection reports published 1 April 2019 to 31 March 2020 *(Continued)*

ESTABLISHMENT	DATE PUBLISHED
Devon and Cornwall police custody suites	11 September 2019
Bedford (IRP)	12 September 2019
Vulcan House STHF	12 September 2019
Capital Buildings STHF	12 September 2019
Dallas House STHF	12 September 2019
Bristol	18 September 2019
Brook House IRC	24 September 2019
Hewell	25 September 2019
Becket House STHF	27 September 2019
London City Airport STHF	27 September 2019
South Yorkshire police custody suites	1 October 2019
Bullingdon	15 October 2019
Durham police custody suites	22 October 2019
Feltham A	30 October 2019
Feltham B	30 October 2019
Cardiff	5 November 2019
Buckley Hall	5 November 2019
Swaleside (IRP)	6 November 2019
Medway STC	12 December 2019
Littlehey	17 December 2019
Guys Marsh (IRP)	18 December 2019
Onley (IRP)	18 December 2019
Hampshire, Wiltshire and Isle of Wight court custody	19 December 2019
Winchester	7 January 2020
Hatfield	9 January 2020
Kirklevington Grange	9 January 2020
Liverpool	14 January 2020
Portland	16 January 2020
Lewes (IRP)	17 January 2020
Highpoint	22 January 2020
Northumbria police custody suites	23 January 2020
Standford Hill	30 January 2020
Doncaster	4 February 2020
Rye Hill	7 February 2020
Wormwood Scrubs	11 February 2020
Dovegate	13 February 2020
Wealstun	13 February 2020
Isle of Wight (IRP)	14 February 2020
Cookham Wood	18 February 2020
Aylesbury	18 February 2020
Bedfordshire police custody suites	21 February 2020

Inspection reports published 1 April 2019 to 31 March 2020 *(Continued)*

ESTABLISHMENT	DATE PUBLISHED
Norwich	27 February 2020
Turkey escort and removals	28 February 2020
Parc (adult)	3 March 2020
Parc (children)	3 March 2020
Sussex police custody suites	5 March 2020
Morton Hall IRC	10 March 2020
Calais Tourism and Freight STHFs	11 March 2020
Coquelles Freight STHF	11 March 2020
Coquelles Tourist STHF	11 March 2020
Dunkerque STHF	11 March 2020
Pentonville (IRP)	12 March 2020
Warren Hill	19 March 2020
Leeds	24 March 2020
Greater Manchester court custody	26 March 2020

Appendix two

Healthy prison and establishment assessments 1 April 2019 to 31 March 2020

Key to table

- 1 Outcomes for prisoners/detainees are poor
 2 Outcomes for prisoners/detainees are not sufficiently good
 3 Outcomes for prisoners/detainees are reasonably good
 4 Outcomes for prisoners/detainees are good

ESTABLISHMENT	INSPECTION TYPE	SAFETY	RESPECT	PURPOSEFUL ACTIVITY	REHABILITATION AND RELEASE PLANNING
Local prisons					
Winchester	Unannounced	1	2	1	2
Lewes	Unannounced	2	2	1	2
Elmley	Unannounced	2	2	2	2
Pentonville	Unannounced	1	2	2	2
Forest Bank	Unannounced	2	3	3	4
Bristol	Unannounced	1	2	1	2
Hewell	Unannounced	1	2	1	2
Bullingdon	Unannounced	3	3	2	2
Cardiff	Unannounced	3	3	4	3
Liverpool	Announced	2	4	2	4
Doncaster	Unannounced	2	3	2	3
Wormwood Scrubs	Announced	2	3	2	2
Norwich	Unannounced	2	2	2	2
Leeds	Announced	2	3	2	3
Training prisons					
Swaleside	Unannounced	2	3	2	1
Garth	Announced	2	3	3	3
Guys Marsh	Announced	2	3	2	3
Stocken	Unannounced	3	3	2	2
Moorland	Unannounced	3	3	3	2
Brixton	Unannounced	3	3	2	2
Berwyn	Unannounced	2	3	2	2
Isle of Wight	Unannounced	2	3	3	2
Buckley Hall	Unannounced	4	4	2	4
Ashfield	Unannounced	4	4	4	2
Littlehey	Unannounced	4	4	3	2
Winchester (West Hill)	Unannounced	3	3	1	2
Portland	Unannounced	1	2	2	2
Highpoint	Unannounced	3	4	3	2
Rye Hill	Unannounced	4	3	3	4
Dovegate	Unannounced	3	3	2	3
Parc	Unannounced	3	3	4	4
Wealstun	Unannounced	2	4	2	3
Warren Hill	Unannounced	4	4	3	4

Healthy prison and establishment assessments 1 April 2019 to 31 March 2020

(Continued)

ESTABLISHMENT	INSPECTION TYPE	SAFETY	RESPECT	PURPOSEFUL ACTIVITY	REHABILITATION AND RELEASE PLANNING
Open prisons					
Hewell open	Unannounced	4	2	1	1
Kirklevington Grange	Unannounced	4	4	4	4
Hatfield	Unannounced	4	4	4	4
Standford Hill	Unannounced	4	3	4	4
Women's prisons					
Bronzefield	Unannounced	3	4	3	4
Foston Hall	Unannounced	3	3	3	3
New Hall	Unannounced	4	3	3	4
Eastwood Park	Unannounced	3	3	3	2
Askham Grange	Unannounced	4	4	4	4
Young adult prisons					
Feltham B	Announced	3	3	1	3
Aylesbury	Unannounced	2	2	2	2
Children's establishments					
Cookham Wood	Unannounced	2	3	2	2
Feltham A	Unannounced	2	2	2	3
Werrington	Unannounced	2	3	3	3
Wetherby	Unannounced	3	3	3	4
Keppel	Unannounced	4	4	3	4
Feltham A	Announced	1	1	1	2
Parc YOI	Unannounced	3	4	4	3
Cookham Wood	Unannounced	2	2	2	2
Immigration removal centres					
Colnbrook	Unannounced	2	3	3	4
Morton Hall	Unannounced	3	4	4	4
Brook House	Unannounced	3	3	3	3

Appendix three

Recommendations accepted in action plans received 1 April 2019 to 31 March 2020

Establishments with a dash (–) indicate that outstanding action plans were not returned within the specified deadline following publication of the inspection report, or were not due until after the end of the annual reporting period (31 March 2020).

ESTABLISHMENT	RECOMMENDATIONS			ACCEPTED			PARTIALLY ACCEPTED (Includes recommendations accepted in principle / accepted subject to resources)			REJECTED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
Local prisons												
Lewes	5	48	53	4	39	43	1	5	6	0	4	4
Elmley	11	20	31	10	17	27	1	3	4	0	0	0
Pentonville	16	23	39	11	15	26	5	6	11	0	2	2
Forest Bank	8	20	28	4	16	20	4	4	8	0	0	0
Bristol	15	19	34	13	16	29	1	3	4	1	0	1
Hewell (Local and Open)	16	19	35	15	16	31	1	3	4	0	0	0
Bullingdon	13	18	31	10	16	26	2	2	4	1	0	1
Cardiff	6	14	20	6	13	19	0	1	1	0	0	0
Winchester (Local and Training)	15	14	29	9	10	19	6	4	10	0	0	0
Liverpool	7	22	29	5	14	19	2	7	9	0	1	1
Doncaster	13	20	33	10	14	24	2	5	7	1	1	2
Wormwood Scrubs	13	21	34	12	15	27	1	4	5	0	2	2
Norwich	–	–	–	–	–	–	–	–	–	–	–	–
Leeds	–	–	–	–	–	–	–	–	–	–	–	–
TOTAL	138	258	396	109	201	310	26	47	73	3	10	13
				(79%)	(78%)	(78%)	(19%)	(18%)	(18%)	(2%)	(4%)	(3%)
Category B training prisons												
Swaleside	5	45	50	4	43	47	1	1	2	0	1	1
Garth	4	39	43	4	33	37	0	2	2	0	4	4
Dovegate	12	18	30	11	17	28	1	1	2	0	0	0
Parc	–	–	–	–	–	–	–	–	–	–	–	–
TOTAL	21	102	123	19	93	112	2	4	6	0	5	5
				(90%)	(91%)	(91%)	(10%)	(4%)	(5%)	(0%)	(5%)	(4%)

Recommendations accepted in action plans received 1 April 2019 to 31 March 2020
(Continued)

ESTABLISHMENT	RECOMMENDATIONS			ACCEPTED			PARTIALLY ACCEPTED (Includes recommendations accepted in principle / accepted subject to resources)			REJECTED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
Category C training prisons												
Guys Marsh	5	31	36	5	22	27	0	6	6	0	3	3
Stocken	5	48	53	5	38	43	0	9	9	0	1	1
Moorland	3	49	52	3	41	44	0	6	6	0	2	2
Brixton	5	29	34	2	23	25	2	4	6	1	2	3
Berwyn	11	27	38	10	24	34	1	2	3	0	1	1
Buckley Hall	5	19	24	4	17	21	0	2	2	1	0	1
Portland	15	16	31	14	15	29	1	1	2	0	0	0
Highpoint	9	18	27	6	14	20	3	2	5	0	2	2
Wealstun	–	–	–	–	–	–	–	–	–	–	–	–
Warren Hill	–	–	–	–	–	–	–	–	–	–	–	–
TOTAL	58	237	295	49	194	243	7	32	39	2	11	13
				(84%)	(82%)	(82%)	(12%)	(14%)	(13%)	(3%)	(5%)	(4%)
Prisons holding sex offenders												
Ashfield	4	20	24	2	18	20	2	2	4	0	0	0
Isle of Wight	15	20	35	11	14	25	0	3	3	4	3	7
Littlehey	8	20	28	7	11	18	1	7	8	0	2	2
Rye Hill	6	19	25	4	11	15	2	7	9	0	1	1
TOTAL	33	79	112	24	54	78	5	19	24	4	6	10
				(73%)	(68%)	(70%)	(15%)	(24%)	(21%)	(12%)	(8%)	(9%)
Prisons holding young adults												
Feltham B	14	10	24	12	9	21	1	1	2	1	0	1
Aylesbury	13	13	26	10	9	19	3	3	6	0	1	1
TOTAL	27	23	50	22	18	40	4	4	8	1	1	2
				(81%)	(78%)	(80%)	(15%)	(17%)	(16%)	(4%)	(4%)	(4%)
Open prisons												
Hatfield	3	11	14	2	8	10	1	1	2	0	2	2
Kirklevington Grange	2	13	15	2	11	13	0	2	2	0	0	0
Standford Hill	6	18	24	5	16	21	1	2	3	0	0	0
TOTAL	11	42	53	9	35	44	2	5	7	0	2	2
				(82%)	(83%)	(83%)	(18%)	(12%)	(13%)	(0%)	(5%)	(4%)

Recommendations accepted in action plans received 1 April 2019 to 31 March 2020
(Continued)

ESTABLISHMENT	RECOMMENDATIONS			ACCEPTED			PARTIALLY ACCEPTED (Includes recommendations accepted in principle / accepted subject to resources)			REJECTED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
Women's prisons												
Bronzefield	1	25	26	1	19	20	0	4	4	0	2	2
Foston Hall	1	36	37	1	30	31	0	3	3	0	3	3
New Hall	1	23	24	1	20	21	0	2	2	0	1	1
Askham Grange	1	12	13	1	8	9	0	3	3	0	1	1
Eastwood Park	10	18	28	6	16	22	4	2	6	0	0	0
TOTAL	14	114	128	10 (71%)	93 (82%)	103 (80%)	4 (29%)	14 (12%)	18 (14%)	0 (0%)	7 (6%)	7 (5%)
Children's establishments												
Werrington	9	21	30	9	16	25	0	3	3	0	2	2
Wetherby/Keppel Unit	4	23	27	4	22	26	0	1	1	0	0	0
Feltham	14	14	28	14	13	27	0	1	1	0	0	0
Cookham Wood December 2018	7	43	50	4	33	37	3	8	11	0	2	2
Cookham Wood September 2019	14	18	32	12	14	26	2	4	6	0	0	0
Parc	4	12	16	2	9	11	1	2	3	1	1	2
TOTAL	52	131	183	45 (87%)	107 (82%)	152 (83%)	6 (12%)	19 (15%)	25 (14%)	1 (2%)	5 (4%)	6 (3%)
PRISON TOTAL	354	986	1,340	287 (81%)	795 (81%)	1,082 (81%)	56 (16%)	144 (15%)	200 (15%)	11 (3%)	47 (5%)	58 (4%)

Recommendations accepted in action plans received 1 April 2019 to 31 March 2020
(Continued)

ESTABLISHMENT	RECOMMENDATIONS			ACCEPTED			PARTIALLY ACCEPTED (Includes recommendations accepted in principle / accepted subject to resources)			REJECTED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
	IRCs											
Colnbrook	3	33	36	0	24	24	3	7	10	0	2	2
Brook House	12	22	34	8	18	26	4	3	7	0	1	1
Morton Hall	–	–	–	–	–	–	–	–	–	–	–	–
TOTAL	15	55	77	8	42	50	7	10	17	0	3	3
				(53%)	(76%)	(65%)	(47%)	(18%)	(22%)	(0%)	(5%)	(4%)
STHFs												
Manchester Terminal 2 STHF	0	7	7	0	3	3	0	3	3	0	1	1
Manchester Airport Residential STHF	0	7	7	0	2	2	0	4	4	0	1	1
Heathrow Terminal 2 STHF	0	9	9	0	5	5	0	3	3	0	1	1
Heathrow Terminal 5 STHF	0	9	9	0	5	5	0	3	3	0	1	1
Vulcan House STHF	0	6	6	0	3	3	0	1	1	0	2	2
Capital House STHF (Liverpool Capital Building)	0	8	8	0	3	3	0	2	2	0	3	3
Dallas House STHF (Dallas Court)	0	5	5	0	3	3	0	1	1	0	1	1
Becket House STHF	0	12	12	0	6	6	0	4	4	0	2	2
Coquelles Tourist STHF	–	–	–	–	–	–	–	–	–	–	–	–
Coquelles Freight STHF	–	–	–	–	–	–	–	–	–	–	–	–
Calais Tourist STHF	–	–	–	–	–	–	–	–	–	–	–	–

Recommendations accepted in action plans received 1 April 2019 to 31 March 2020
(Continued)

ESTABLISHMENT	RECOMMENDATIONS			ACCEPTED			PARTIALLY ACCEPTED (Includes recommendations accepted in principle / accepted subject to resources)			REJECTED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
Dunkerque STHF	–	–	–	–	–	–	–	–	–	–	–	–
London City Airport STHF	0	8	8	0	2	2	0	5	5	0	1	1
TOTAL	0	71	71	0 (0%)	32 (45%)	32 (45%)	0 (0%)	26 (37%)	26 (37%)	0 (0%)	13 (18%)	13 (18%)
OVERSEAS ESCORTS												
Nigeria and Ghana	0	6	6	0	5	5	0	0	0	0	1	1
Turkey	–	–	–	–	–	–	–	–	–	–	–	–
TOTAL	0	6	6	0 (0%)	5 (83%)	5 (83%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (17%)	1 (17%)
COURTS												
Devon, Cornwall and Dorset	2	20	22	1	15	16	1	3	4	0	2	2
Hampshire, Isle of Wight and Wiltshire	2	11	13	2	10	12	0	0	0	0	1	1
Greater Manchester	–	–	–	–	–	–	–	–	–	–	–	–
TOTAL	4	31	35	3 (75%)	25 (81%)	28 (80%)	1 (25%)	3 (10%)	4 (11%)	0 (0%)	3 (10%)	3 (9%)

Appendix four

Recommendations achieved in inspection reports published 1 April 2019 to 31 March 2020

Establishments with an asterisk (*) indicate no follow up inspection, so no judgements on recommendations.

ESTABLISHMENT	RECOMMENDATIONS (excluding recommendations no longer relevant)			ACHIEVED			PARTIALLY ACHIEVED			NOT ACHIEVED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
Local prisons												
Lewes	4	50	54	0	10	10	1	15	16	3	25	28
Elmley	4	49	53	0	25	25	2	1	3	2	23	25
Pentonville	5	53	58	0	16	16	0	6	6	5	31	36
Forest Bank	3	52	55	0	32	32	1	5	6	2	15	17
Bristol	5	70	75	0	20	20	1	2	3	4	48	52
Hewell (Local and Open)	6	51	57	0	14	14	0	4	4	6	33	39
Bullingdon	6	60	66	2	24	26	1	5	6	3	31	34
Cardiff	4	49	53	2	27	29	1	4	5	1	18	19
Winchester (Local and Training)	5	49	54	0	13	13	0	5	5	5	31	36
Liverpool	6	66	72	5	44	49	0	4	4	1	18	19
Doncaster	5	41	46	0	17	17	1	3	4	4	21	25
Wormwood Scrubs	8	28	36	2	17	19	4	3	7	2	8	10
Norwich (Local and Open)	2	42	44	0	22	22	0	0	0	2	20	22
Leeds	4	51	55	1	29	30	1	3	4	2	19	21
TOTAL	67	711	778	12 (18%)	310 (44%)	322 (41%)	13 (19%)	60 (8%)	73 (9%)	42 (63%)	341 (48%)	383 (49%)
Category B training prisons												
Swaleside	5	44	49	1	24	25	1	6	7	3	14	17
Garth	5	52	57	2	23	25	1	3	4	2	26	28
Dovegate	5	40	45	1	21	22	0	0	0	4	19	23
Parc	3	33	36	1	16	17	0	2	2	2	15	17
TOTAL	18	169	187	5 (28%)	84 (50%)	89 (48%)	2 (11%)	11 (7%)	13 (7%)	11 (61%)	74 (44%)	85 (45%)

**Recommendations achieved in inspection reports published
1 April 2019 to 31 March 2020 (Continued)**

ESTABLISHMENT	RECOMMENDATIONS (excluding recommendations no longer relevant)			ACHIEVED			PARTIALLY ACHIEVED			NOT ACHIEVED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
Category C training prisons												
Guys Marsh	6	57	63	2	23	25	3	9	12	1	25	26
Stocken	3	56	59	0	28	28	1	3	4	2	25	27
Moorland	5	70	75	2	40	42	2	6	8	1	24	25
Brixton	6	59	65	3	32	35	2	7	9	1	20	21
Berwyn	*	*	*	*	*	*	*	*	*	*	*	*
Buckley Hall	4	43	47	3	24	27	1	5	6	0	14	14
Portland	5	61	66	0	19	19	1	0	1	4	42	46
Highpoint	3	58	61	2	27	29	0	3	3	1	28	29
Wealstun	3	52	55	1	30	31	0	2	2	2	20	22
Warren Hill	1	25	26	0	21	21	1	3	4	0	1	1
TOTAL	36	481	517	13 (36%)	244 (51%)	257 (50%)	11 (31%)	38 (8%)	49 (9%)	12 (33%)	199 (41%)	211 (41%)
Prisons holding sex offenders												
Ashfield	3	42	45	2	27	29	0	4	4	1	11	12
Isle of Wight	3	67	70	0	33	33	1	5	6	2	29	31
Littlehey	3	51	54	2	34	36	1	1	2	0	16	16
Rye Hill	2	55	57	1	34	35	0	7	7	1	14	15
TOTAL	11	215	226	5 (45%)	128 (60%)	133 (59%)	2 (18%)	17 (8%)	19 (8%)	4 (36%)	70 (33%)	74 (33%)
Prisons holding young adults												
Feltham B	6	60	66	0	19	19	2	12	14	4	29	33
Aylesbury	6	51	57	1	20	21	0	2	2	5	29	34
TOTAL	12	111	123	1 (8%)	39 (35%)	40 (33%)	2 (17%)	14 (13%)	16 (13%)	9 (75%)	58 (52%)	67 (54%)
Open prisons												
Hatfield	0	29	29	0	24	24	0	2	2	0	3	3
Kirklevington Grange	1	39	40	0	26	26	0	3	3	1	10	11
Standford Hill	1	38	39	0	28	28	1	6	7	0	4	4
TOTAL	2	106	108	0 (0%)	78 (74%)	78 (72%)	1 (50%)	11 (10%)	12 (11%)	1 (50%)	17 (16%)	18 (17%)

Recommendations achieved in inspection reports published
1 April 2019 to 31 March 2020 (Continued)

ESTABLISHMENT	RECOMMENDATIONS (excluding recommendations no longer relevant)			ACHIEVED			PARTIALLY ACHIEVED			NOT ACHIEVED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
Women's prisons												
Bronzefield	2	35	37	1	22	23	0	0	0	1	13	14
Foston Hall	3	50	53	2	32	34	1	2	3	0	16	16
New Hall	2	48	50	2	28	30	0	4	4	0	16	16
Askham Grange	1	20	21	1	14	15	0	0	0	0	6	6
Eastwood Park	3	45	48	1	18	19	1	2	3	1	25	26
TOTAL	11	198	209	7 (64%)	114 (58%)	121 (58%)	2 (18%)	8 (4%)	10 (5%)	2 (18%)	76 (38%)	78 (37%)
Children's establishments												
Werrington	1	26	27	0	11	11	0	1	1	1	14	15
Wetherby/Keppel Unit	3	52	55	1	28	29	1	3	4	1	21	22
Feltham January 2019	3	48	51	1	17	18	0	4	4	2	27	29
Feltham July 2019	6	51	57	0	7	7	0	0	0	6	44	50
Cookham Wood December 2018	4	57	61	0	29	29	0	0	0	4	28	32
Cookham Wood December 2019	7	43	50	0	7	7	1	0	1	6	36	42
Parc	2	16	18	0	8	8	1	0	1	1	8	9
TOTAL	26	293	319	2 (8%)	107 (37%)	109 (34%)	3 (12%)	8 (3%)	11 (3%)	21 (81%)	178 (61%)	199 (62%)
PRISON TOTAL	183	2,284	2,467	45 (25%)	1,104 (48%)	1,149 (47%)	36 (20%)	167 (7%)	203 (8%)	102 (56%)	1,013 (44%)	1,115 (45%)

Recommendations achieved in inspection reports published
1 April 2019 to 31 March 2020 (Continued)

ESTABLISHMENT	RECOMMENDATIONS (excluding recommendations no longer relevant)			ACHIEVED			PARTIALLY ACHIEVED			NOT ACHIEVED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
IRCs												
Colnbrook	3	44	47	1	19	20	1	3	4	1	22	23
Brook House	2	43	45	0	16	16	1	9	10	1	18	19
Morton Hall	4	37	41	0	24	24	2	3	5	2	10	12
TOTAL	9	124	133	1 (11%)	59 (48%)	60 (45%)	4 (44%)	15 (12%)	19 (14%)	4 (44%)	50 (40%)	54 (41%)
STHFs												
Manchester Terminal 2 STHF	0	19	19	0	5	5	0	0	0	0	14	14
Manchester Airport Residential STHF	*	*	*	*	*	*	*	*	*	*	*	*
Heathrow Terminal 2 STHF	0	18	18	0	5	5	0	0	0	0	13	13
Heathrow Terminal 5 STHF	0	18	18	0	5	5	0	1	1	0	12	12
Vulcan House STHF	0	13	13	0	8	8	0	1	1	0	4	4
Capital House STHF (Liverpool Capital Building)	0	12	12	0	7	7	0	0	0	0	5	5
Dallas House STHF (Dallas Court)	0	8	8	0	3	3	0	2	2	0	3	3
Becket House STHF	0	22	22	0	6	6	0	1	1	0	15	15
Coquelles Tourist STHF	0	9	9	0	1	1	0	1	1	0	7	7
Coquelles Freight STHF	0	8	8	0	2	2	0	1	1	0	5	5
Calais Tourist STHF	0	7	7	0	0	0	0	0	0	0	7	7
Dunkerque STHF	0	14	14	0	3	3	0	1	1	0	10	10
London City Airport STHF	0	33	33	0	13	13	0	1	1	0	19	19
TOTAL	0	181	181	0	58 (32%)	58 (32%)	0	9 (5%)	9 (5%)	0	114 (63%)	114 (63%)

Recommendations achieved in inspection reports published
1 April 2019 to 31 March 2020 (Continued)

ESTABLISHMENT	RECOMMENDATIONS (excluding recommendations no longer relevant)			ACHIEVED			PARTIALLY ACHIEVED			NOT ACHIEVED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
POLICE CUSTODY												
South Yorkshire	3	23	26	3	8	11	0	9	9	0	6	6
Durham	4	20	24	3	12	15	0	4	4	1	4	5
Northumbria	5	27	32	2	9	11	2	9	11	1	9	10
Bedfordshire	6	27	33	1	12	13	4	7	11	1	8	9
Sussex	4	29	33	0	13	13	0	5	5	4	11	15
Devon and Cornwall	2	8	10	1	3	4	1	4	5	0	1	1
TACT suites	*	*	*	*	*	*	*	*	*	*	*	*
TOTAL	24	134	158	10 (42%)	57 (43%)	67 (42%)	7 (29%)	38 (28%)	45 (28%)	7 (29%)	39 (29%)	46 (29%)
OVERSEAS ESCORTS												
Nigeria and Ghana	0	18	18	0	7	7	0	1	1	0	10	10
Turkey	*	*	*	*	*	*	*	*	*	*	*	*
TOTAL	0	18	18	0	7	7	0	1	1	0	10	10

Appendix five

Prisoner survey responses (adult men): diversity analysis

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

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

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

Ethnicity/religion

In this table the following analyses are presented:

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

Please note that these analyses are based on responses from prisoners in male establishments only.

		Black and minority ethnic	White	Muslim	Non-Muslim
NUMBER OF COMPLETED QUESTIONNAIRES RETURNED		1,796	4,359	980	5,084
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	15%	4%	16%	6%
	Are you 25 years of age or younger?	33%	16%	37%	18%
	Are you 50 years of age or older?	9%	21%	4%	20%
	Are you 70 years of age or older?	0%	3%	0%	3%
1.3	Are you from a minority ethnic group?			86%	18%
1.4	Have you been in this prison for less than 6 months?	41%	40%	42%	40%
1.5	Are you currently serving a sentence?	87%	88%	87%	88%
	Are you on recall?	9%	11%	9%	11%
1.6	Is your sentence less than 12 months?	11%	12%	9%	12%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	4%	4%	4%	5%
7.1	Are you Muslim?	48%	3%		
11.3	Do you have any mental health problems?	32%	53%	33%	49%
12.1	Do you consider yourself to have a disability?	25%	40%	24%	38%
19.1	Do you have any children under the age of 18?	47%	48%	46%	48%
19.2	Are you a foreign national?	12%	6%	15%	6%
19.3	Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?	1%	7%	2%	6%
19.4	Have you ever been in the armed services?	4%	9%	2%	8%

		Black and minority ethnic	White	Muslim	Non-Muslim
19.5	Is your gender female or non-binary?	1%	1%	1%	1%
19.6	Are you homosexual, bisexual or other sexual orientation?	3%	5%	3%	5%
19.7	Do you identify as transgender or transsexual?	2%	2%	2%	2%
ARRIVAL AND RECEPTION					
2.1	Were you given up-to-date information about this prison before you came here?	18%	19%	17%	19%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	43%	48%	41%	49%
2.3	When you were searched in reception, was this done in a respectful way?	76%	83%	74%	83%
2.4	Overall, were you treated very / quite well in reception?	78%	86%	75%	85%
2.5	When you first arrived, did you have any problems?	76%	74%	77%	74%
2.5	Did you have problems with:				
	- Getting phone numbers?	35%	31%	35%	31%
	- Contacting family?	34%	29%	35%	29%
	- Arranging care for children or other dependents?	3%	2%	3%	3%
	- Contacting employers?	4%	4%	5%	4%
	- Money worries?	19%	22%	20%	21%
	- Housing worries?	15%	17%	15%	16%
	- Feeling depressed?	32%	37%	34%	36%
	- Feeling suicidal?	9%	14%	11%	13%
	- Other mental health problems?	17%	27%	19%	25%
	- Physical health problems?	14%	17%	14%	17%
	- Drugs or alcohol (e.g. withdrawal)?	9%	18%	9%	16%
	- Getting medication?	19%	25%	20%	24%
	- Needing protection from other prisoners?	7%	7%	9%	7%
	- Lost or delayed property?	28%	19%	30%	20%
	For those who had any problems when they first arrived:				
2.6	Did staff help you to deal with these problems?	28%	37%	25%	36%
FIRST NIGHT AND INDUCTION					
3.1	Before you were locked up on your first night, were you offered:				
	- Tobacco or nicotine replacement?	55%	66%	57%	64%
	- Toiletries / other basic items?	48%	54%	43%	54%
	- A shower?	36%	40%	36%	40%
	- A free phone call?	48%	46%	47%	46%
	- Something to eat?	73%	75%	69%	76%
	- The chance to see someone from health care?	60%	61%	57%	61%
	- The chance to talk to a Listener or Samaritans?	20%	29%	20%	28%
	- Support from another prisoner (e.g. Insider or buddy)?	20%	28%	21%	26%
	- None of these?	9%	7%	10%	7%
3.2	On your first night in this prison, was your cell very / quite clean?	37%	47%	34%	46%
3.3	Did you feel safe on your first night here?	68%	75%	66%	74%

		Black and minority ethnic	White	Muslim	Non-Muslim
3.4	In your first few days here, did you get:				
	- Access to the prison shop / canteen?	41%	43%	40%	43%
	- Free PIN phone credit?	50%	52%	48%	52%
	- Numbers put on your PIN phone?	42%	48%	42%	47%
3.5	Have you had an induction at this prison?	89%	89%	90%	89%
	For those who have had an induction:				
3.5	Did your induction cover everything you needed to know about this prison?	52%	60%	51%	59%
ON THE WING					
4.1	Are you in a cell on your own?	57%	58%	58%	58%
4.2	Is your cell call bell normally answered within 5 minutes?	24%	28%	23%	28%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	68%	70%	65%	70%
	- Can you shower every day?	85%	90%	85%	90%
	- Do you have clean sheets every week?	66%	73%	63%	73%
	- Do you get cell cleaning materials every week?	54%	59%	53%	59%
	- Is it normally quiet enough for you to relax or sleep at night?	63%	63%	60%	64%
	- Can you get your stored property if you need it?	29%	31%	29%	31%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	52%	62%	50%	61%
FOOD AND CANTEEN					
5.1	Is the quality of the food in this prison very / quite good?	39%	46%	39%	45%
5.2	Do you get enough to eat at mealtimes always / most of the time?	36%	40%	35%	39%
5.3	Does the shop / canteen sell the things that you need?	51%	68%	52%	65%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	63%	75%	59%	74%
6.2	Are there any staff here you could turn to if you had a problem?	66%	75%	63%	74%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	35%	41%	32%	41%
6.4	Do you have a personal officer?	81%	83%	81%	83%
	For those who have a personal officer:				
6.4	Is your personal or named officer very / quite helpful?	53%	60%	52%	59%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	15%	14%	12%	15%
6.6	Do you feel that you are treated as an individual in this prison?	39%	47%	39%	46%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	48%	54%	52%	53%
	If so, do things sometimes change?	36%	38%	31%	38%
FAITH					
7.1	Do you have a religion?	87%	60%	100%	62%
	For those who have a religion:				
7.2	Are your religious beliefs respected here?	70%	69%	70%	70%

		Black and minority ethnic	White	Muslim	Non-Muslim
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	66%	69%	70%	68%
7.4	Are you able to attend religious services, if you want to?	87%	86%	90%	85%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	29%	37%	29%	36%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	52%	51%	51%	51%
8.3	Are you able to use a phone every day (if you have credit)?	86%	92%	87%	91%
8.4	Is it very / quite easy for your family and friends to get here?	38%	41%	35%	41%
8.5	Do you get visits from family/friends once a week or more?	20%	19%	18%	19%
	For those who get visits:				
8.6	Do visits usually start and finish on time?	48%	56%	50%	54%
8.7	Are your visitors usually treated respectfully by staff?	70%	80%	67%	78%
TIME OUT OF CELL					
9.1	Do you know what the unlock and lock-up times are supposed to be here?	88%	91%	88%	90%
	For those who know what the unlock and lock-up times are supposed to be:				
9.1	Are these times usually kept to?	54%	61%	53%	61%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	22%	18%	23%	19%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	10%	15%	9%	14%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	35%	24%	36%	26%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	6%	7%	5%	7%
9.4	Do you have time to do domestics more than 5 days in a typical week?	48%	60%	43%	59%
9.5	Do you get association more than 5 days in a typical week, if you want it?	55%	62%	53%	62%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	60%	67%	60%	65%
9.7	Do you typically go to the gym twice a week or more?	54%	44%	54%	46%
9.8	Do you typically go to the library once a week or more?	44%	45%	41%	45%
	For those who use the library:				
9.9	Does the library have a wide enough range of materials to meet your needs?	51%	60%	49%	59%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	68%	76%	64%	76%
	For those who have made an application:				
10.2	Are applications usually dealt with fairly?	45%	57%	41%	56%
	Are applications usually dealt with within 7 days?	31%	42%	29%	41%

		Black and minority ethnic	White	Muslim	Non-Muslim
10.3	Is it easy for you to make a complaint?	58%	65%	57%	64%
	For those who have made a complaint:				
10.4	Are complaints usually dealt with fairly?	27%	36%	24%	36%
	Are complaints usually dealt with within 7 days?	23%	29%	20%	29%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	33%	27%	36%	27%
	For those who need it, is it easy to:				
10.6	Communicate with your solicitor or legal representative?	42%	46%	41%	46%
	Attend legal visits?	54%	55%	53%	56%
	Get bail information?	15%	20%	16%	19%
	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?	60%	53%	62%	53%
HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	29%	34%	26%	34%
	- Nurse?	50%	55%	47%	54%
	- Dentist?	15%	20%	13%	20%
	- Mental health workers?	22%	26%	22%	25%
11.2	Do you think the quality of the health service is very / quite good from:				
	- Doctor?	47%	51%	46%	50%
	- Nurse?	53%	61%	51%	60%
	- Dentist?	33%	36%	31%	36%
	- Mental health workers?	25%	31%	24%	31%
11.3	Do you have any mental health problems?	32%	53%	33%	49%
	For those who have mental health problems:				
11.4	Have you been helped with your mental health problems in this prison?	36%	41%	32%	41%
11.5	Do you think the overall quality of the health services here is very / quite good?	40%	46%	38%	45%
OTHER SUPPORT NEEDS					
12.1	Do you consider yourself to have a disability?	25%	40%	24%	38%
	For those who have a disability:				
12.2	Are you getting the support you need?	21%	33%	21%	32%
12.3	Have you been on an ACCT in this prison?	12%	22%	12%	20%
	For those who have been on an ACCT:				
12.4	Did you feel cared for by staff?	41%	49%	30%	49%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	33%	47%	33%	45%

		Black and minority ethnic	White	Muslim	Non-Muslim
ALCOHOL AND DRUGS					
13.1	Did you have an alcohol problem when you came into this prison?	11%	20%	11%	18%
	For those who had / have an alcohol problem:				
13.2	Have you been helped with your alcohol problem in this prison?	48%	57%	46%	57%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	19%	31%	19%	28%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	10%	16%	11%	15%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	5%	11%	8%	10%
	For those who had / have a drug problem:				
13.6	Have you been helped with your drug problem in this prison?	48%	52%	43%	52%
13.7	Is it very / quite easy to get illicit drugs in this prison?	32%	51%	34%	47%
13.8	Is it very / quite easy to get alcohol in this prison?	22%	29%	25%	27%
SAFETY					
14.1	Have you ever felt unsafe here?	48%	48%	50%	47%
14.2	Do you feel unsafe now?	26%	21%	27%	21%
14.3	Have you experienced any of the following from other prisoners here:				
	- Verbal abuse?	28%	37%	29%	35%
	- Threats or intimidation?	25%	33%	26%	32%
	- Physical assault?	16%	19%	17%	18%
	- Sexual assault?	2%	3%	2%	3%
	- Theft of canteen or property?	19%	27%	20%	25%
	- Other bullying / victimisation?	15%	20%	16%	19%
	- Not experienced any of these from prisoners here	61%	51%	60%	52%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	32%	38%	32%	37%
14.5	Have you experienced any of the following from staff here:				
	- Verbal abuse?	35%	29%	40%	29%
	- Threats or intimidation?	30%	22%	32%	23%
	- Physical assault?	13%	9%	15%	9%
	- Sexual assault?	2%	1%	2%	2%
	- Theft of canteen or property?	11%	9%	11%	9%
	- Other bullying / victimisation?	22%	18%	25%	18%
	- Not experienced any of these from staff here	50%	60%	46%	59%
14.6	If you were being bullied / victimised by staff here, would you report it?	47%	51%	46%	51%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	41%	44%	38%	44%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	32%	45%	30%	43%

		Black and minority ethnic	White	Muslim	Non-Muslim
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	18%	11%	19%	11%
	For those who have been restrained in the last 6 months:				
15.4	Did anyone come and talk to you about it afterwards?	27%	23%	24%	25%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	14%	8%	15%	9%
	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?	53%	57%	53%	56%
	Could you shower every day?	49%	63%	53%	59%
	Could you go outside for exercise every day?	73%	76%	71%	77%
	Could you use the phone every day (if you had credit)?	46%	63%	51%	59%
EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	59%	63%	57%	63%
	- Vocational or skills training?	31%	39%	30%	38%
	- Prison job?	40%	53%	35%	52%
	- Voluntary work outside of the prison?	6%	8%	5%	7%
	- Paid work outside of the prison?	4%	6%	5%	5%
16.2	In this prison, have you done the following activities:				
	- Education?	83%	77%	84%	78%
	- Vocational or skills training?	68%	63%	69%	64%
	- Prison job?	80%	82%	81%	82%
	- Voluntary work outside of the prison?	39%	33%	40%	33%
	- Paid work outside of the prison?	38%	32%	40%	33%
	For those who have done the following activities, do you think they will help you on release:				
	- Education?	67%	60%	66%	62%
	- Vocational or skills training?	69%	63%	68%	64%
	- Prison job?	41%	45%	40%	44%
	- Voluntary work outside of the prison?	60%	50%	55%	53%
	- Paid work outside of the prison?	67%	56%	62%	59%
16.3	Do staff encourage you to attend education, training or work?	51%	59%	49%	58%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	51%	51%	49%	51%
	For those who have a custody plan:				
17.2	Do you understand what you need to do to achieve your objectives or targets?	85%	85%	83%	85%
17.3	Are staff helping you to achieve your objectives or targets?	44%	57%	43%	55%
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	55%	47%	54%	48%
	- Other programmes?	50%	44%	53%	44%

		Black and minority ethnic	White	Muslim	Non-Muslim
	- One-to-one work?	44%	41%	48%	41%
	- Been on a specialist unit?	22%	20%	26%	19%
	- ROTL - day or overnight release?	24%	19%	25%	19%
	For those who have done the following, did they help you to achieve your objectives or targets:				
	- Offending behaviour programmes?	72%	76%	69%	76%
	- Other programmes?	66%	74%	64%	74%
	- One-to-one work?	64%	75%	63%	74%
	- Being on a specialist unit?	40%	53%	36%	53%
	- ROTL - day or overnight release?	64%	69%	62%	69%
PREPARATION FOR RELEASE					
18.1	Do you expect to be released in the next 3 months?	24%	24%	24%	24%
	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?	44%	52%	41%	51%
18.3	Is anybody helping you to prepare for your release?	50%	59%	47%	58%
18.4	Do you need help to sort out the following for when you are released:				
	- Finding accommodation?	63%	66%	60%	66%
	- Getting employment?	72%	61%	73%	62%
	- Setting up education or training?	57%	46%	61%	47%
	- Arranging benefits?	69%	72%	68%	72%
	- Sorting out finances?	61%	59%	58%	60%
	- Support for drug or alcohol problems?	32%	49%	34%	46%
	- Health / mental health support?	42%	59%	48%	56%
	- Social care support?	36%	44%	42%	41%
	- Getting back in touch with family or friends?	39%	41%	43%	40%
18.4	Are you getting help to sort out the following for when you are released, if you need it:				
	- Finding accommodation?	33%	36%	32%	36%
	- Getting employment?	26%	22%	24%	24%
	- Setting up education or training?	27%	16%	25%	19%
	- Arranging benefits?	30%	34%	29%	33%
	- Sorting out finances?	23%	19%	24%	20%
	- Support for drug or alcohol problems?	37%	45%	36%	44%
	- Health / mental health support?	26%	25%	24%	26%
	- Social care support?	26%	19%	28%	20%
	- Getting back in touch with family or friends?	34%	29%	31%	31%
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?	51%	53%	49%	53%

Foreign nationals/travellers

In this table the following analyses are presented:

- responses of foreign national prisoners compared with those of British national prisoners
- responses of prisoners from traveller communities compared with those of prisoners not from traveller communities.

Please note that these analyses are based on responses from prisoners in male establishments only.

		Foreign national	British national	Traveller	Non-traveller
NUMBER OF COMPLETED QUESTIONNAIRES RETURNED		458	5,466	306	5,575
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	13%	7%	8%	7%
	Are you 25 years of age or younger?	26%	20%	26%	20%
	Are you 50 years of age or older?	8%	19%	10%	18%
	Are you 70 years of age or older?	0%	2%	0%	2%
1.3	Are you from a minority ethnic group?	47%	27%	8%	30%
1.4	Have you been in this prison for less than 6 months?	50%	39%	46%	40%
1.5	Are you currently serving a sentence?	76%	89%	82%	88%
	Are you on recall?	5%	11%	15%	10%
1.6	Is your sentence less than 12 months?	12%	12%	16%	11%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	3%	5%	5%	4%
7.1	Are you Muslim?	32%	15%	6%	16%
11.3	Do you have any mental health problems?	31%	48%	64%	46%
12.1	Do you consider yourself to have a disability?	23%	37%	53%	35%
19.1	Do you have any children under the age of 18?	43%	48%	66%	47%
19.2	Are you a foreign national?			14%	7%
19.3	Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?	10%	5%		
19.4	Have you ever been in the armed services?	14%	7%	13%	7%
19.5	Is your gender female or non-binary?	3%	1%	3%	1%
19.6	Are you homosexual, bisexual or other sexual orientation?	8%	4%	7%	5%
19.7	Do you identify as transgender or transsexual?	3%	2%	7%	1%
ARRIVAL AND RECEPTION					
2.1	Were you given up-to-date information about this prison before you came here?	21%	19%	24%	19%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	41%	48%	42%	48%
2.3	When you were searched in reception, was this done in a respectful way?	75%	82%	72%	82%
2.4	Overall, were you treated very / quite well in reception?	78%	84%	79%	84%
2.5	When you first arrived, did you have any problems?	74%	75%	83%	74%

		Foreign national	British national	Traveller	Non-traveller
2.5	Did you have problems with:				
	- Getting phone numbers?	36%	31%	37%	31%
	- Contacting family?	35%	30%	41%	29%
	- Arranging care for children or other dependents?	3%	3%	7%	2%
	- Contacting employers?	6%	4%	8%	4%
	- Money worries?	19%	21%	29%	20%
	- Housing worries?	9%	17%	17%	16%
	- Feeling depressed?	33%	36%	45%	35%
	- Feeling suicidal?	8%	12%	22%	12%
	- Other mental health problems?	12%	25%	31%	23%
	- Physical health problems?	13%	17%	22%	16%
	- Drugs or alcohol (e.g. withdrawal)?	9%	15%	25%	14%
	- Getting medication?	17%	24%	28%	23%
	- Needing protection from other prisoners?	7%	7%	11%	7%
	- Lost or delayed property?	22%	22%	20%	22%
	For those who had any problems when they first arrived:				
2.6	Did staff help you to deal with these problems?	31%	34%	35%	34%
FIRST NIGHT AND INDUCTION					
3.1	Before you were locked up on your first night, were you offered:				
	- Tobacco or nicotine replacement?	57%	63%	71%	63%
	- Toiletries / other basic items?	56%	53%	51%	53%
	- A shower?	38%	39%	32%	40%
	- A free phone call?	42%	46%	42%	46%
	- Something to eat?	68%	75%	69%	75%
	- The chance to see someone from health care?	50%	62%	55%	61%
	- The chance to talk to a Listener or Samaritans?	21%	27%	27%	27%
	- Support from another prisoner (e.g. Insider or buddy)?	22%	26%	25%	26%
	- None of these?	9%	7%	8%	7%
3.2	On your first night in this prison, was your cell very / quite clean?	44%	44%	38%	45%
3.3	Did you feel safe on your first night here?	61%	74%	64%	74%
3.4	In your first few days here, did you get:				
	- Access to the prison shop / canteen?	47%	42%	35%	43%
	- Free PIN phone credit?	50%	51%	53%	51%
	- Numbers put on your PIN phone?	46%	46%	42%	46%
3.5	Have you had an induction at this prison?	86%	89%	86%	89%
	For those who have had an induction:				
3.5	Did your induction cover everything you needed to know about this prison?	57%	57%	54%	58%

		Foreign national	British national	Traveller	Non-traveller
ON THE WING					
4.1	Are you in a cell on your own?	48%	59%	58%	58%
4.2	Is your cell call bell normally answered within 5 minutes?	34%	27%	21%	28%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	67%	70%	58%	70%
	- Can you shower every day?	85%	89%	89%	89%
	- Do you have clean sheets every week?	73%	71%	64%	72%
	- Do you get cell cleaning materials every week?	60%	58%	55%	58%
	- Is it normally quiet enough for you to relax or sleep at night?	62%	63%	52%	64%
	- Can you get your stored property if you need it?	34%	30%	31%	30%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	61%	59%	60%	59%
FOOD AND CANTEEN					
5.1	Is the quality of the food in this prison very / quite good?	46%	44%	42%	45%
5.2	Do you get enough to eat at mealtimes always / most of the time?	38%	39%	32%	39%
5.3	Does the shop / canteen sell the things that you need?	53%	64%	59%	64%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	68%	72%	67%	72%
6.2	Are there any staff here you could turn to if you had a problem?	66%	73%	69%	73%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	37%	40%	39%	40%
6.4	Do you have a personal officer?	80%	82%	80%	82%
	For those who have a personal officer:				
6.4	Is your personal or named officer very / quite helpful?	51%	59%	53%	58%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	14%	14%	14%	14%
6.6	Do you feel that you are treated as an individual in this prison?	44%	44%	40%	45%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	51%	53%	52%	53%
	If so, do things sometimes change?	34%	38%	35%	38%
FAITH					
7.1	Do you have a religion?	91%	66%	82%	67%
	For those who have a religion:				
7.2	Are your religious beliefs respected here?	73%	70%	70%	70%
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	63%	69%	68%	68%
7.4	Are you able to attend religious services, if you want to?	81%	87%	79%	87%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	35%	35%	40%	34%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	48%	51%	55%	51%

		Foreign national	British national	Traveller	Non-traveller
8.3	Are you able to use a phone every day (if you have credit)?	89%	91%	88%	91%
8.4	Is it very / quite easy for your family and friends to get here?	25%	41%	37%	40%
8.5	Do you get visits from family/friends once a week or more?	17%	19%	23%	19%
	For those who get visits:				
8.6	Do visits usually start and finish on time?	59%	53%	52%	54%
8.7	Are your visitors usually treated respectfully by staff?	78%	76%	73%	77%
TIME OUT OF CELL					
9.1	Do you know what the unlock and lock-up times are supposed to be here?	82%	91%	87%	90%
	For those who know what the unlock and lock-up times are supposed to be:				
9.1	Are these times usually kept to?	55%	60%	49%	60%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	23%	19%	26%	19%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	9%	14%	9%	14%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	37%	27%	33%	27%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	3%	7%	4%	6%
9.4	Do you have time to do domestics more than 5 days in a typical week?	47%	58%	46%	58%
9.5	Do you get association more than 5 days in a typical week, if you want it?	43%	62%	43%	62%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	49%	66%	53%	66%
9.7	Do you typically go to the gym twice a week or more?	50%	47%	45%	47%
9.8	Do you typically go to the library once a week or more?	45%	45%	46%	45%
	For those who use the library:				
9.9	Does the library have a wide enough range of materials to meet your needs?	49%	58%	56%	58%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	61%	75%	65%	74%
	For those who have made an application:				
10.2	Are applications usually dealt with fairly?	41%	54%	50%	54%
	Are applications usually dealt with within 7 days?	36%	39%	37%	39%
10.3	Is it easy for you to make a complaint?	51%	64%	60%	64%
	For those who have made a complaint:				
10.4	Are complaints usually dealt with fairly?	29%	34%	35%	33%
	Are complaints usually dealt with within 7 days?	24%	27%	29%	27%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	29%	29%	37%	28%
	For those who need it, is it easy to:				
10.6	Communicate with your solicitor or legal representative?	35%	46%	34%	46%

		Foreign national	British national	Traveller	Non-traveller
	Attend legal visits?	45%	56%	51%	55%
	Get bail information?	15%	19%	22%	18%
	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?	54%	55%	61%	54%
HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	29%	33%	32%	33%
	- Nurse?	50%	54%	46%	54%
	- Dentist?	16%	19%	18%	19%
	- Mental health workers?	26%	25%	28%	25%
11.2	Do you think the quality of the health service is very / quite good from:				
	- Doctor?	47%	50%	42%	50%
	- Nurse?	54%	59%	54%	59%
	- Dentist?	35%	36%	34%	36%
	- Mental health workers?	30%	29%	32%	29%
11.3	Do you have any mental health problems?	31%	48%	64%	46%
	For those who have mental health problems:				
11.4	Have you been helped with your mental health problems in this prison?	43%	40%	36%	40%
11.5	Do you think the overall quality of the health services here is very / quite good?	41%	44%	38%	44%
OTHER SUPPORT NEEDS					
12.1	Do you consider yourself to have a disability?	23%	37%	53%	35%
	For those who have a disability:				
12.2	Are you getting the support you need?	20%	31%	28%	31%
12.3	Have you been on an ACCT in this prison?	11%	19%	34%	18%
	For those who have been on an ACCT:				
12.4	Did you feel cared for by staff?	41%	48%	48%	47%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	35%	43%	50%	42%
ALCOHOL AND DRUGS					
13.1	Did you have an alcohol problem when you came into this prison?	12%	18%	29%	17%
	For those who had / have an alcohol problem:				
13.2	Have you been helped with your alcohol problem in this prison?	52%	56%	58%	55%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	16%	28%	44%	26%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	9%	14%	29%	13%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	5%	10%	24%	9%
	For those who had / have a drug problem:				
13.6	Have you been helped with your drug problem in this prison?	51%	51%	46%	52%

		Foreign national	British national	Traveller	Non-traveller
13.7	Is it very / quite easy to get illicit drugs in this prison?	28%	46%	55%	45%
13.8	Is it very / quite easy to get alcohol in this prison?	18%	28%	36%	26%
SAFETY					
14.1	Have you ever felt unsafe here?	54%	47%	62%	47%
14.2	Do you feel unsafe now?	30%	22%	35%	22%
14.3	Have you experienced any of the following from other prisoners here:				
	- Verbal abuse?	29%	35%	42%	34%
	- Threats or intimidation?	23%	32%	37%	31%
	- Physical assault?	15%	18%	27%	17%
	- Sexual assault?	4%	3%	7%	3%
	- Theft of canteen or property?	22%	25%	34%	24%
	- Other bullying / victimisation?	17%	19%	26%	18%
	- Not experienced any of these from prisoners here	56%	53%	42%	54%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	45%	36%	41%	36%
14.5	Have you experienced any of the following from staff here:				
	- Verbal abuse?	29%	31%	38%	31%
	- Threats or intimidation?	21%	25%	32%	24%
	- Physical assault?	10%	11%	17%	10%
	- Sexual assault?	3%	2%	4%	2%
	- Theft of canteen or property?	10%	9%	14%	9%
	- Other bullying / victimisation?	19%	20%	23%	19%
	- Not experienced any of these from staff here	56%	57%	46%	57%
14.6	If you were being bullied / victimised by staff here, would you report it?	57%	49%	47%	50%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	43%	43%	45%	43%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	27%	42%	35%	42%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	14%	12%	30%	12%
	For those who have been restrained in the last 6 months:				
15.4	Did anyone come and talk to you about it afterwards?	25%	25%	25%	25%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	10%	10%	24%	9%
	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?	50%	56%	56%	56%
	Could you shower every day?	44%	58%	63%	57%

		Foreign national	British national	Traveller	Non-traveller
	Could you go outside for exercise every day?	77%	75%	74%	75%
	Could you use the phone every day (if you had credit)?	54%	57%	67%	56%
EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	56%	62%	53%	62%
	- Vocational or skills training?	29%	37%	31%	37%
	- Prison job?	47%	49%	41%	49%
	- Voluntary work outside of the prison?	6%	7%	9%	7%
	- Paid work outside of the prison?	5%	5%	7%	5%
16.2	In this prison, have you done the following activities:				
	- Education?	82%	78%	79%	79%
	- Vocational or skills training?	60%	65%	68%	64%
	- Prison job?	80%	82%	83%	81%
	- Voluntary work outside of the prison?	38%	34%	52%	33%
	- Paid work outside of the prison?	38%	33%	50%	33%
	For those who have done the following activities, do you think they will help you on release:				
	- Education?	74%	61%	63%	62%
	- Vocational or skills training?	66%	65%	59%	65%
	- Prison job?	51%	43%	52%	43%
	- Voluntary work outside of the prison?	52%	53%	50%	54%
	- Paid work outside of the prison?	58%	60%	54%	60%
16.3	Do staff encourage you to attend education, training or work?	55%	57%	51%	57%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	45%	51%	45%	51%
	For those who have a custody plan:				
17.2	Do you understand what you need to do to achieve your objectives or targets?	80%	85%	81%	85%
17.3	Are staff helping you to achieve your objectives or targets?	44%	54%	57%	53%
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	42%	49%	53%	48%
	- Other programmes?	42%	46%	58%	45%
	- One-to-one work?	39%	42%	57%	41%
	- Been on a specialist unit?	22%	20%	37%	19%
	- ROTL - day or overnight release?	20%	20%	34%	19%
	For those who have done the following, did they help you to achieve your objectives or targets:				
	- Offending behaviour programmes?	62%	76%	73%	75%
	- Other programmes?	60%	73%	65%	72%
	- One-to-one work?	56%	73%	68%	72%

		Foreign national	British national	Traveller	Non-traveller
	- Being on a specialist unit?	34%	51%	50%	50%
	- ROTL - day or overnight release?	39%	69%	46%	69%
PREPARATION FOR RELEASE					
18.1	Do you expect to be released in the next 3 months?	29%	24%	33%	23%
	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?	38%	51%	50%	50%
18.3	Is anybody helping you to prepare for your release?	50%	57%	62%	56%
18.4	Do you need help to sort out the following for when you are released:				
	- Finding accommodation?	47%	66%	71%	64%
	- Getting employment?	54%	65%	72%	64%
	- Setting up education or training?	46%	49%	60%	48%
	- Arranging benefits?	42%	74%	74%	71%
	- Sorting out finances?	44%	61%	68%	59%
	- Support for drug or alcohol problems?	26%	46%	57%	43%
	- Health / mental health support?	33%	56%	69%	53%
	- Social care support?	30%	42%	59%	40%
	- Getting back in touch with family or friends?	37%	41%	60%	39%
18.4	Are you getting help to sort out the following for when you are released, if you need it:				
	- Finding accommodation?	33%	35%	38%	35%
	- Getting employment?	27%	23%	28%	22%
	- Setting up education or training?	27%	20%	19%	20%
	- Arranging benefits?	26%	33%	27%	32%
	- Sorting out finances?	18%	20%	20%	20%
	- Support for drug or alcohol problems?	44%	43%	44%	43%
	- Health / mental health support?	24%	26%	31%	25%
	- Social care support?	30%	20%	22%	20%
	- Getting back in touch with family or friends?	32%	30%	40%	29%
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?	50%	52%	52%	52%

Disability/mental health

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 responses from prisoners in male establishments only.

		Have a disability	Do not have a disability	Mental health problems	No mental health problems
NUMBER OF COMPLETED QUESTIONNAIRES RETURNED		2,146	3,843	2,793	3,159
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	5%	8%	5%	9%
	Are you 25 years of age or younger?	16%	23%	19%	22%
	Are you 50 years of age or older?	23%	15%	14%	21%
	Are you 70 years of age or older?	3%	1%	1%	3%
1.3	Are you from a minority ethnic group?	20%	34%	20%	37%
1.4	Have you been in this prison for less than 6 months?	42%	40%	44%	38%
1.5	Are you currently serving a sentence?	87%	89%	86%	90%
	Are you on recall?	14%	8%	15%	7%
1.6	Is your sentence less than 12 months?	14%	10%	14%	10%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	5%	4%	5%	3%
7.1	Are you Muslim?	11%	19%	11%	20%
11.3	Do you have any mental health problems?	78%	30%		
12.1	Do you consider yourself to have a disability?			60%	15%
19.1	Do you have any children under the age of 18?	47%	48%	52%	44%
19.2	Are you a foreign national?	5%	9%	5%	10%
19.3	Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?	8%	4%	7%	3%
19.4	Have you ever been in the armed services?	9%	6%	8%	7%
19.5	Is your gender female or non-binary?	1%	1%	1%	1%
19.6	Are you homosexual, bisexual or other sexual orientation?	7%	4%	6%	4%
19.7	Do you identify as transgender or transsexual?	3%	1%	2%	1%
ARRIVAL AND RECEPTION					
2.1	Were you given up-to-date information about this prison before you came here?	17%	20%	17%	21%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	41%	51%	43%	51%
2.3	When you were searched in reception, was this done in a respectful way?	77%	84%	79%	84%
2.4	Overall, were you treated very / quite well in reception?	79%	86%	80%	87%
2.5	When you first arrived, did you have any problems?	89%	67%	88%	63%

		Have a disability	Do not have a disability	Mental health problems	No mental health problems
2.5	Did you have problems with:				
	- Getting phone numbers?	37%	29%	38%	27%
	- Contacting family?	35%	27%	36%	25%
	- Arranging care for children or other dependents?	3%	2%	3%	2%
	- Contacting employers?	4%	4%	5%	3%
	- Money worries?	29%	17%	29%	14%
	- Housing worries?	24%	12%	24%	9%
	- Feeling depressed?	52%	26%	55%	18%
	- Feeling suicidal?	22%	7%	23%	3%
	- Other mental health problems?	46%	12%	48%	2%
	- Physical health problems?	32%	8%	24%	10%
	- Drugs or alcohol (e.g. withdrawal)?	25%	10%	25%	6%
	- Getting medication?	39%	15%	36%	12%
	- Needing protection from other prisoners?	12%	4%	10%	4%
	- Lost or delayed property?	24%	21%	23%	21%
	For those who had any problems when they first arrived:				
2.6	Did staff help you to deal with these problems?	33%	35%	32%	36%
FIRST NIGHT AND INDUCTION					
3.1	Before you were locked up on your first night, were you offered:				
	- Tobacco or nicotine replacement?	67%	61%	70%	56%
	- Toiletries / other basic items?	51%	54%	52%	53%
	- A shower?	37%	40%	37%	40%
	- A free phone call?	43%	48%	45%	47%
	- Something to eat?	74%	75%	75%	75%
	- The chance to see someone from health care?	62%	60%	63%	59%
	- The chance to talk to a Listener or Samaritans?	25%	28%	27%	26%
	- Support from another prisoner (e.g. Insider or buddy)?	23%	27%	24%	27%
	- None of these?	7%	8%	7%	8%
3.2	On your first night in this prison, was your cell very / quite clean?	40%	46%	41%	47%
3.3	Did you feel safe on your first night here?	64%	78%	66%	79%
3.4	In your first few days here, did you get:				
	- Access to the prison shop / canteen?	37%	45%	39%	45%
	- Free PIN phone credit?	50%	52%	51%	51%
	- Numbers put on your PIN phone?	41%	48%	43%	49%
3.5	Have you had an induction at this prison?	87%	90%	86%	91%
	For those who have had an induction:				
3.5	Did your induction cover everything you needed to know about this prison?	52%	61%	52%	62%

		Have a disability	Do not have a disability	Mental health problems	No mental health problems
ON THE WING					
4.1	Are you in a cell on your own?	61%	56%	59%	57%
4.2	Is your cell call bell normally answered within 5 minutes?	26%	28%	25%	29%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	62%	74%	62%	77%
	- Can you shower every day?	86%	91%	87%	91%
	- Do you have clean sheets every week?	67%	73%	66%	75%
	- Do you get cell cleaning materials every week?	54%	60%	53%	62%
	- Is it normally quiet enough for you to relax or sleep at night?	54%	68%	55%	70%
	- Can you get your stored property if you need it?	26%	33%	26%	35%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	59%	60%	57%	62%
FOOD AND CANTEEN					
5.1	Is the quality of the food in this prison very / quite good?	42%	45%	40%	48%
5.2	Do you get enough to eat at mealtimes always / most of the time?	33%	41%	32%	44%
5.3	Does the shop / canteen sell the things that you need?	59%	65%	63%	64%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	68%	74%	69%	74%
6.2	Are there any staff here you could turn to if you had a problem?	69%	74%	70%	75%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	38%	40%	38%	40%
6.4	Do you have a personal officer?	79%	84%	79%	85%
	For those who have a personal officer:				
6.4	Is your personal or named officer very / quite helpful?	54%	60%	55%	61%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	12%	16%	11%	17%
6.6	Do you feel that you are treated as an individual in this prison?	42%	46%	40%	49%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	50%	54%	50%	55%
	If so, do things sometimes change?	34%	38%	32%	42%
FAITH					
7.1	Do you have a religion?	69%	67%	66%	69%
	For those who have a religion:				
7.2	Are your religious beliefs respected here?	65%	73%	66%	73%
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	64%	70%	66%	69%
7.4	Are you able to attend religious services, if you want to?	83%	88%	83%	88%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	30%	37%	31%	38%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	56%	49%	57%	47%

		Have a disability	Do not have a disability	Mental health problems	No mental health problems
8.3	Are you able to use a phone every day (if you have credit)?	89%	91%	89%	91%
8.4	Is it very / quite easy for your family and friends to get here?	34%	44%	36%	44%
8.5	Do you get visits from family/friends once a week or more?	16%	21%	16%	22%
	For those who get visits:				
8.6	Do visits usually start and finish on time?	53%	54%	51%	56%
8.7	Are your visitors usually treated respectfully by staff?	75%	78%	74%	79%
TIME OUT OF CELL					
9.1	Do you know what the unlock and lock-up times are supposed to be here?	88%	91%	89%	91%
	For those who know what the unlock and lock-up times are supposed to be:				
9.1	Are these times usually kept to?	53%	63%	54%	64%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	25%	16%	24%	15%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	10%	15%	10%	17%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	32%	25%	31%	25%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	4%	8%	3%	9%
9.4	Do you have time to do domestics more than 5 days in a typical week?	53%	60%	54%	60%
9.5	Do you get association more than 5 days in a typical week, if you want it?	55%	64%	56%	65%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	60%	68%	61%	68%
9.7	Do you typically go to the gym twice a week or more?	35%	54%	38%	55%
9.8	Do you typically go to the library once a week or more?	42%	47%	43%	47%
	For those who use the library:				
9.9	Does the library have a wide enough range of materials to meet your needs?	53%	59%	52%	62%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	69%	76%	70%	76%
	For those who have made an application:				
10.2	Are applications usually dealt with fairly?	47%	57%	48%	59%
	Are applications usually dealt with within 7 days?	36%	40%	35%	42%
10.3	Is it easy for you to make a complaint?	62%	64%	63%	64%
	For those who have made a complaint:				
10.4	Are complaints usually dealt with fairly?	31%	35%	30%	36%
	Are complaints usually dealt with within 7 days?	26%	28%	25%	29%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	36%	24%	35%	22%

		Have a disability	Do not have a disability	Mental health problems	No mental health problems
	For those who need it, is it easy to:				
10.6	Communicate with your solicitor or legal representative?	40%	48%	41%	49%
	Attend legal visits?	51%	57%	53%	57%
	Get bail information?	17%	19%	16%	20%
	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?	61%	52%	60%	50%
HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	29%	34%	30%	34%
	- Nurse?	52%	54%	53%	54%
	- Dentist?	17%	20%	16%	21%
	- Mental health workers?	26%	24%	28%	22%
11.2	Do you think the quality of the health service is very / quite good from:				
	- Doctor?	45%	52%	46%	52%
	- Nurse?	58%	59%	57%	60%
	- Dentist?	33%	37%	33%	38%
	- Mental health workers?	33%	27%	39%	21%
11.3	Do you have any mental health problems?	78%	30%		
	For those who have mental health problems:				
11.4	Have you been helped with your mental health problems in this prison?	39%	41%	40%	
11.5	Do you think the overall quality of the health services here is very / quite good?	39%	47%	39%	48%
OTHER SUPPORT NEEDS					
12.1	Do you consider yourself to have a disability?			60%	15%
	For those who have a disability:				
12.2	Are you getting the support you need?	30%		27%	44%
12.3	Have you been on an ACCT in this prison?	34%	11%	34%	6%
	For those who have been on an ACCT:				
12.4	Did you feel cared for by staff?	43%	55%	45%	60%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	45%	41%	44%	42%
ALCOHOL AND DRUGS					
13.1	Did you have an alcohol problem when you came into this prison?	26%	13%	27%	9%
	For those who had / have an alcohol problem:				
13.2	Have you been helped with your alcohol problem in this prison?	50%	60%	53%	60%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	39%	20%	42%	14%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	22%	10%	23%	6%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	16%	6%	16%	4%

		Have a disability	Do not have a disability	Mental health problems	No mental health problems
	For those who had / have a drug problem:				
13.6	Have you been helped with your drug problem in this prison?	48%	55%	49%	57%
13.7	Is it very / quite easy to get illicit drugs in this prison?	56%	39%	58%	34%
13.8	Is it very / quite easy to get alcohol in this prison?	34%	23%	35%	20%
SAFETY					
14.1	Have you ever felt unsafe here?	63%	39%	62%	35%
14.2	Do you feel unsafe now?	34%	16%	32%	14%
14.3	Have you experienced any of the following from other prisoners here:				
	- Verbal abuse?	47%	27%	47%	22%
	- Threats or intimidation?	42%	25%	43%	20%
	- Physical assault?	25%	14%	27%	10%
	- Sexual assault?	5%	2%	5%	2%
	- Theft of canteen or property?	34%	19%	35%	15%
	- Other bullying / victimisation?	28%	13%	28%	11%
	- Not experienced any of these from prisoners here	39%	62%	39%	67%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	39%	34%	35%	38%
14.5	Have you experienced any of the following from staff here:				
	- Verbal abuse?	41%	25%	41%	23%
	- Threats or intimidation?	31%	20%	31%	19%
	- Physical assault?	15%	8%	15%	6%
	- Sexual assault?	3%	1%	2%	1%
	- Theft of canteen or property?	14%	7%	13%	7%
	- Other bullying / victimisation?	26%	16%	25%	14%
	- Not experienced any of these from staff here	44%	63%	46%	66%
14.6	If you were being bullied / victimised by staff here, would you report it?	50%	49%	46%	53%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	39%	46%	39%	47%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	35%	44%	36%	45%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	17%	10%	16%	9%
	For those who have been restrained in the last 6 months:				
15.4	Did anyone come and talk to you about it afterwards?	21%	28%	21%	29%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	13%	8%	13%	7%
	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?	56%	57%	56%	56%
	Could you shower every day?	59%	57%	60%	54%

		Have a disability	Do not have a disability	Mental health problems	No mental health problems
	Could you go outside for exercise every day?	71%	79%	73%	79%
	Could you use the phone every day (if you had credit)?	61%	53%	61%	51%
EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	55%	65%	56%	66%
	- Vocational or skills training?	32%	39%	34%	39%
	- Prison job?	43%	52%	44%	53%
	- Voluntary work outside of the prison?	5%	8%	5%	9%
	- Paid work outside of the prison?	4%	6%	4%	6%
16.2	In this prison, have you done the following activities:				
	- Education?	76%	80%	77%	80%
	- Vocational or skills training?	62%	66%	64%	65%
	- Prison job?	79%	83%	81%	82%
	- Voluntary work outside of the prison?	35%	34%	35%	34%
	- Paid work outside of the prison?	34%	34%	34%	33%
	For those who have done the following activities, do you think they will help you on release:				
	- Education?	59%	64%	58%	66%
	- Vocational or skills training?	59%	68%	61%	68%
	- Prison job?	45%	43%	44%	43%
	- Voluntary work outside of the prison?	48%	56%	49%	58%
	- Paid work outside of the prison?	53%	63%	54%	65%
16.3	Do staff encourage you to attend education, training or work?	51%	60%	52%	61%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	45%	54%	45%	56%
	For those who have a custody plan:				
17.2	Do you understand what you need to do to achieve your objectives or targets?	80%	87%	82%	87%
17.3	Are staff helping you to achieve your objectives or targets?	49%	56%	49%	57%
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	50%	48%	51%	47%
	- Other programmes?	50%	43%	48%	43%
	- One-to-one work?	50%	39%	48%	38%
	- Been on a specialist unit?	25%	18%	25%	17%
	- ROTL - day or overnight release?	18%	21%	16%	23%
	For those who have done the following, did they help you to achieve your objectives or targets:				
	- Offending behaviour programmes?	71%	77%	72%	77%
	- Other programmes?	69%	73%	68%	75%
	- One-to-one work?	73%	71%	73%	71%

		Have a disability	Do not have a disability	Mental health problems	No mental health problems
	- Being on a specialist unit?	48%	50%	52%	47%
	- ROTL - day or overnight release?	50%	74%	52%	75%
PREPARATION FOR RELEASE					
18.1	Do you expect to be released in the next 3 months?	27%	23%	27%	22%
	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?	51%	49%	52%	47%
18.3	Is anybody helping you to prepare for your release?	54%	57%	55%	58%
18.4	Do you need help to sort out the following for when you are released:				
	- Finding accommodation?	77%	57%	77%	51%
	- Getting employment?	69%	61%	72%	55%
	- Setting up education or training?	58%	44%	58%	39%
	- Arranging benefits?	83%	63%	82%	58%
	- Sorting out finances?	69%	53%	70%	48%
	- Support for drug or alcohol problems?	60%	34%	62%	24%
	- Health / mental health support?	83%	35%	85%	19%
	- Social care support?	60%	29%	58%	22%
	- Getting back in touch with family or friends?	50%	34%	50%	30%
18.4	Are you getting help to sort out the following for when you are released, if you need it:				
	- Finding accommodation?	33%	38%	30%	44%
	- Getting employment?	18%	27%	18%	30%
	- Setting up education or training?	15%	23%	15%	29%
	- Arranging benefits?	31%	34%	29%	38%
	- Sorting out finances?	18%	22%	17%	25%
	- Support for drug or alcohol problems?	43%	43%	42%	48%
	- Health / mental health support?	26%	24%	24%	33%
	- Social care support?	19%	22%	17%	31%
	- Getting back in touch with family or friends?	28%	32%	26%	38%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	47%	55%	47%	57%

Over 50/under 50

In this table the following analyses are presented:

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

Please note that these analyses are based on responses from prisoners in male establishments only.

		50 and over	Under 50	25 and under	Over 25
NUMBER OF COMPLETED QUESTIONNAIRES RETURNED		1,080	5,148	1,305	4,923
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?		9%	35%	
	Are you 25 years of age or younger?		25%		
	Are you 50 years of age or older?				22%
	Are you 70 years of age or older?	13%			3%
1.3	Are you from a minority ethnic group?	15%	32%	46%	25%
1.4	Have you been in this prison for less than 6 months?	27%	44%	49%	39%
1.5	Are you currently serving a sentence?	94%	87%	84%	89%
	Are you on recall?	7%	11%	8%	11%
1.6	Is your sentence less than 12 months?	6%	13%	14%	11%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	5%	4%	0%	5%
7.1	Are you Muslim?	3%	19%	28%	13%
11.3	Do you have any mental health problems?	38%	49%	42%	48%
12.1	Do you consider yourself to have a disability?	46%	33%	28%	38%
19.1	Do you have any children under the age of 18?	25%	53%	29%	53%
19.2	Are you a foreign national?	4%	9%	10%	7%
19.3	Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?	3%	6%	7%	5%
19.4	Have you ever been in the armed services?	15%	5%	3%	8%
19.5	Is your gender female or non-binary?	1%	1%	1%	1%
19.6	Are you homosexual, bisexual or other sexual orientation?	7%	4%	4%	5%
19.7	Do you identify as transgender or transsexual?	2%	1%	2%	2%
ARRIVAL AND RECEPTION					
2.1	Were you given up-to-date information about this prison before you came here?	20%	19%	18%	19%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	53%	46%	44%	48%
2.3	When you were searched in reception, was this done in a respectful way?	86%	80%	74%	83%
2.4	Overall, were you treated very / quite well in reception?	91%	82%	76%	85%
2.5	When you first arrived, did you have any problems?	68%	76%	76%	74%
2.5	Did you have problems with:				
	- Getting phone numbers?	25%	33%	33%	32%
	- Contacting family?	21%	32%	35%	29%

		50 and over	Under 50	25 and under	Over 25
	- Arranging care for children or other dependents?	2%	3%	2%	3%
	- Contacting employers?	2%	4%	3%	4%
	- Money worries?	15%	22%	19%	22%
	- Housing worries?	14%	17%	14%	17%
	- Feeling depressed?	29%	37%	32%	36%
	- Feeling suicidal?	9%	13%	11%	13%
	- Other mental health problems?	17%	25%	20%	25%
	- Physical health problems?	26%	14%	9%	18%
	- Drugs or alcohol (e.g. withdrawal)?	10%	17%	9%	17%
	- Getting medication?	23%	23%	17%	25%
	- Needing protection from other prisoners?	4%	8%	9%	7%
	- Lost or delayed property?	16%	23%	26%	21%
	For those who had any problems when they first arrived:				
2.6	Did staff help you to deal with these problems?	44%	33%	24%	37%
FIRST NIGHT AND INDUCTION					
3.1	Before you were locked up on your first night, were you offered:				
	- Tobacco or nicotine replacement?	49%	66%	57%	64%
	- Toiletries / other basic items?	55%	52%	46%	54%
	- A shower?	40%	39%	31%	41%
	- A free phone call?	38%	48%	49%	45%
	- Something to eat?	73%	75%	71%	75%
	- The chance to see someone from health care?	56%	61%	55%	62%
	- The chance to talk to a Listener or Samaritans?	26%	27%	19%	29%
	- Support from another prisoner (e.g. Insider or buddy)?	27%	25%	19%	27%
	- None of these?	7%	8%	11%	7%
3.2	On your first night in this prison, was your cell very / quite clean?	60%	41%	33%	47%
3.3	Did you feel safe on your first night here?	77%	72%	69%	74%
3.4	In your first few days here, did you get:				
	- Access to the prison shop / canteen?	49%	41%	39%	43%
	- Free PIN phone credit?	45%	52%	49%	52%
	- Numbers put on your PIN phone?	51%	45%	40%	48%
3.5	Have you had an induction at this prison?	89%	89%	88%	89%
	For those who have had an induction:				
3.5	Did your induction cover everything you needed to know about this prison?	66%	56%	51%	59%
ON THE WING					
4.1	Are you in a cell on your own?	67%	56%	50%	60%
4.2	Is your cell call bell normally answered within 5 minutes?	39%	25%	20%	29%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	83%	66%	63%	71%
	- Can you shower every day?	92%	88%	85%	90%

		50 and over	Under 50	25 and under	Over 25
	- Do you have clean sheets every week?	83%	68%	63%	73%
	- Do you get cell cleaning materials every week?	68%	56%	47%	61%
	- Is it normally quiet enough for you to relax or sleep at night?	67%	62%	61%	63%
	- Can you get your stored property if you need it?	38%	29%	26%	32%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	75%	56%	49%	62%
FOOD AND CANTEEN					
5.1	Is the quality of the food in this prison very / quite good?	60%	41%	35%	46%
5.2	Do you get enough to eat at mealtimes always / most of the time?	59%	34%	33%	40%
5.3	Does the shop / canteen sell the things that you need?	68%	62%	60%	64%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	87%	68%	57%	75%
6.2	Are there any staff here you could turn to if you had a problem?	82%	70%	61%	75%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	47%	38%	32%	41%
6.4	Do you have a personal officer?	86%	82%	80%	83%
	For those who have a personal officer:				
6.4	Is your personal or named officer very / quite helpful?	70%	55%	50%	60%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	17%	14%	9%	15%
6.6	Do you feel that you are treated as an individual in this prison?	52%	43%	37%	46%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	58%	51%	52%	53%
	If so, do things sometimes change?	48%	35%	26%	40%
FAITH					
7.1	Do you have a religion?	75%	67%	67%	68%
	For those who have a religion:				
7.2	Are your religious beliefs respected here?	75%	68%	69%	70%
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	71%	67%	65%	68%
7.4	Are you able to attend religious services, if you want to?	91%	85%	82%	87%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	43%	33%	30%	36%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	41%	53%	59%	49%
8.3	Are you able to use a phone every day (if you have credit)?	97%	89%	82%	92%
8.4	Is it very / quite easy for your family and friends to get here?	38%	40%	40%	40%
8.5	Do you get visits from family/friends once a week or more?	14%	20%	24%	18%
	For those who get visits:				
8.6	Do visits usually start and finish on time?	69%	51%	46%	56%
8.7	Are your visitors usually treated respectfully by staff?	89%	74%	70%	79%

		50 and over	Under 50	25 and under	Over 25
TIME OUT OF CELL					
9.1	Do you know what the unlock and lock-up times are supposed to be here?	91%	89%	87%	91%
	For those who know what the unlock and lock-up times are supposed to be:				
9.1	Are these times usually kept to?	71%	57%	47%	63%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	12%	21%	29%	17%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	19%	12%	6%	15%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	21%	29%	44%	23%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	10%	6%	3%	7%
9.4	Do you have time to do domestics more than 5 days in a typical week?	65%	55%	43%	60%
9.5	Do you get association more than 5 days in a typical week, if you want it?	70%	58%	48%	64%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	68%	64%	60%	66%
9.7	Do you typically go to the gym twice a week or more?	32%	50%	46%	47%
9.8	Do you typically go to the library once a week or more?	47%	45%	37%	47%
	For those who use the library:				
9.9	Does the library have a wide enough range of materials to meet your needs?	63%	56%	54%	58%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	80%	72%	67%	75%
	For those who have made an application:				
10.2	Are applications usually dealt with fairly?	66%	51%	45%	55%
	Are applications usually dealt with within 7 days?	51%	36%	26%	42%
10.3	Is it easy for you to make a complaint?	68%	62%	55%	65%
	For those who have made a complaint:				
10.4	Are complaints usually dealt with fairly?	47%	31%	24%	36%
	Are complaints usually dealt with within 7 days?	34%	26%	20%	29%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	18%	31%	37%	27%
	For those who need it, is it easy to:				
10.6	Communicate with your solicitor or legal representative?	53%	43%	29%	49%
	Attend legal visits?	55%	55%	50%	56%
	Get bail information?	19%	18%	13%	20%
	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?	44%	57%	56%	54%

		50 and over	Under 50	25 and under	Over 25
HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	41%	31%	29%	34%
	- Nurse?	63%	51%	43%	56%
	- Dentist?	27%	17%	15%	20%
	- Mental health workers?	24%	25%	25%	25%
11.2	Do you think the quality of the health service is very / quite good from:				
	- Doctor?	64%	47%	44%	51%
	- Nurse?	74%	56%	50%	61%
	- Dentist?	43%	34%	30%	37%
	- Mental health workers?	26%	30%	30%	30%
11.3	Do you have any mental health problems?	38%	49%	42%	48%
	For those who have mental health problems:				
11.4	Have you been helped with your mental health problems in this prison?	48%	39%	36%	41%
11.5	Do you think the overall quality of the health services here is very / quite good?	56%	42%	37%	46%
OTHER SUPPORT NEEDS					
12.1	Do you consider yourself to have a disability?	46%	33%	28%	38%
	For those who have a disability:				
12.2	Are you getting the support you need?	43%	27%	27%	31%
12.3	Have you been on an ACCT in this prison?	12%	20%	21%	18%
	For those who have been on an ACCT:				
12.4	Did you feel cared for by staff?	60%	46%	43%	49%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	52%	41%	29%	46%
ALCOHOL AND DRUGS					
13.1	Did you have an alcohol problem when you came into this prison?	14%	18%	12%	19%
	For those who had / have an alcohol problem:				
13.2	Have you been helped with your alcohol problem in this prison?	68%	53%	43%	57%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	13%	30%	22%	28%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	6%	16%	12%	15%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	4%	11%	9%	10%
	For those who had / have a drug problem:				
13.6	Have you been helped with your drug problem in this prison?	59%	51%	37%	54%
13.7	Is it very / quite easy to get illicit drugs in this prison?	42%	46%	31%	49%
13.8	Is it very / quite easy to get alcohol in this prison?	22%	28%	19%	29%

		50 and over	Under 50	25 and under	Over 25
SAFETY					
14.1	Have you ever felt unsafe here?	42%	49%	48%	48%
14.2	Do you feel unsafe now?	18%	23%	22%	22%
14.3	Have you experienced any of the following from other prisoners here:				
	- Verbal abuse?	34%	34%	26%	36%
	- Threats or intimidation?	26%	32%	25%	32%
	- Physical assault?	11%	19%	18%	18%
	- Sexual assault?	2%	3%	3%	3%
	- Theft of canteen or property?	19%	26%	21%	25%
	- Other bullying / victimisation?	16%	19%	13%	20%
	- Not experienced any of these from prisoners here	54%	54%	61%	52%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	59%	32%	23%	40%
14.5	Have you experienced any of the following from staff here:				
	- Verbal abuse?	20%	33%	37%	29%
	- Threats or intimidation?	14%	26%	31%	23%
	- Physical assault?	5%	12%	15%	9%
	- Sexual assault?	1%	2%	2%	1%
	- Theft of canteen or property?	6%	10%	12%	9%
	- Other bullying / victimisation?	13%	21%	18%	20%
	- Not experienced any of these from staff here	70%	54%	50%	58%
14.6	If you were being bullied / victimised by staff here, would you report it?	67%	46%	41%	52%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	53%	41%	35%	45%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	53%	38%	27%	44%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	3%	15%	27%	9%
	For those who have been restrained in the last 6 months:				
15.4	Did anyone come and talk to you about it afterwards?	25%	24%	27%	22%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	2%	12%	19%	8%
	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?	65%	55%	52%	58%
	Could you shower every day?	57%	57%	53%	60%
	Could you go outside for exercise every day?	64%	75%	77%	74%
	Could you use the phone every day (if you had credit)?	57%	57%	48%	63%

		50 and over	Under 50	25 and under	Over 25
EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	66%	61%	57%	63%
	- Vocational or skills training?	39%	36%	30%	38%
	- Prison job?	58%	47%	34%	53%
	- Voluntary work outside of the prison?	7%	7%	6%	8%
	- Paid work outside of the prison?	4%	5%	5%	5%
16.2	In this prison, have you done the following activities:				
	- Education?	77%	79%	79%	79%
	- Vocational or skills training?	60%	65%	61%	66%
	- Prison job?	82%	81%	76%	83%
	- Voluntary work outside of the prison?	27%	36%	36%	34%
	- Paid work outside of the prison?	27%	35%	36%	33%
	For those who have done the following activities, do you think they will help you on release:				
	- Education?	58%	63%	65%	62%
	- Vocational or skills training?	58%	66%	66%	65%
	- Prison job?	45%	43%	44%	43%
	- Voluntary work outside of the prison?	46%	54%	53%	53%
	- Paid work outside of the prison?	52%	61%	59%	60%
16.3	Do staff encourage you to attend education, training or work?	62%	56%	51%	58%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	53%	50%	48%	52%
	For those who have a custody plan:				
17.2	Do you understand what you need to do to achieve your objectives or targets?	85%	85%	80%	86%
17.3	Are staff helping you to achieve your objectives or targets?	65%	51%	39%	57%
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	44%	50%	43%	50%
	- Other programmes?	40%	47%	43%	46%
	- One-to-one work?	33%	44%	43%	42%
	- Been on a specialist unit?	14%	22%	20%	21%
	- ROTL - day or overnight release?	16%	21%	16%	21%
	For those who have done the following, did they help you to achieve your objectives or targets:				
	- Offending behaviour programmes?	81%	74%	67%	77%
	- Other programmes?	79%	71%	64%	74%
	- One-to-one work?	80%	71%	67%	73%
	- Being on a specialist unit?	64%	48%	36%	53%
	- ROTL - day or overnight release?	80%	66%	45%	72%

		50 and over	Under 50	25 and under	Over 25
PREPARATION FOR RELEASE					
18.1	Do you expect to be released in the next 3 months?	18%	26%	28%	23%
	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?	49%	50%	40%	53%
18.3	Is anybody helping you to prepare for your release?	62%	55%	51%	58%
18.4	Do you need help to sort out the following for when you are released:				
	- Finding accommodation?	65%	65%	61%	66%
	- Getting employment?	55%	65%	69%	62%
	- Setting up education or training?	33%	51%	56%	48%
	- Arranging benefits?	76%	71%	64%	73%
	- Sorting out finances?	57%	60%	59%	59%
	- Support for drug or alcohol problems?	37%	45%	32%	48%
	- Health / mental health support?	48%	55%	47%	57%
	- Social care support?	47%	40%	36%	43%
	- Getting back in touch with family or friends?	40%	40%	35%	42%
18.4	Are you getting help to sort out the following for when you are released, if you need it:				
	- Finding accommodation?	42%	34%	38%	35%
	- Getting employment?	31%	23%	28%	22%
	- Setting up education or training?	27%	20%	25%	19%
	- Arranging benefits?	36%	32%	28%	34%
	- Sorting out finances?	24%	20%	23%	20%
	- Support for drug or alcohol problems?	60%	42%	33%	46%
	- Health / mental health support?	32%	25%	26%	25%
	- Social care support?	24%	21%	27%	20%
	- Getting back in touch with family or friends?	36%	30%	40%	28%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	59%	51%	46%	54%

Sexuality

In this table the following analyses is presented:

– responses of non-heterosexual prisoners compared with those of heterosexual prisoners.

Please note that these analyses are based on responses from prisoners in male establishments only.

		Gay/bisexual/other	Heterosexual
NUMBER OF COMPLETED QUESTIONNAIRES RETURNED		278	5,587
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	5%	7%
	Are you 25 years of age or younger?	16%	21%
	Are you 50 years of age or older?	24%	17%
	Are you 70 years of age or older?	4%	2%
1.3	Are you from a minority ethnic group?	19%	29%
1.4	Have you been in this prison for less than 6 months?	30%	41%
1.5	Are you currently serving a sentence?	92%	88%
	Are you on recall?	11%	10%
1.6	Is your sentence less than 12 months?	7%	12%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	7%	4%
7.1	Are you Muslim?	9%	16%
11.3	Do you have any mental health problems?	59%	46%
12.1	Do you consider yourself to have a disability?	50%	35%
19.1	Do you have any children under the age of 18?	25%	49%
19.2	Are you a foreign national?	12%	7%
19.3	Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?	8%	5%
19.4	Have you ever been in the armed services?	11%	7%
19.5	Is your gender female or non-binary?	13%	0%
19.6	Are you homosexual, bisexual or other sexual orientation?		
19.7	Do you identify as transgender or transsexual?	10%	1%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	20%	19%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	45%	48%
2.3	When you were searched in reception, was this done in a respectful way?	80%	82%
2.4	Overall, were you treated very / quite well in reception?	82%	84%
2.5	When you first arrived, did you have any problems?	77%	75%
2.5	Did you have problems with:		
	- Getting phone numbers?	32%	31%
	- Contacting family?	31%	30%
	- Arranging care for children or other dependents?	3%	2%
	- Contacting employers?	5%	4%
	- Money worries?	26%	21%
	- Housing worries?	18%	16%

		Gay/bisexual/other	Heterosexual
	- Feeling depressed?	43%	35%
	- Feeling suicidal?	26%	11%
	- Other mental health problems?	30%	24%
	- Physical health problems?	21%	16%
	- Drugs or alcohol (e.g. withdrawal)?	13%	15%
	- Getting medication?	27%	23%
	- Needing protection from other prisoners?	12%	7%
	- Lost or delayed property?	22%	22%
	For those who had any problems when they first arrived:		
2.6	Did staff help you to deal with these problems?	42%	34%
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	50%	64%
	- Toiletries / other basic items?	57%	53%
	- A shower?	42%	39%
	- A free phone call?	37%	47%
	- Something to eat?	71%	75%
	- The chance to see someone from health care?	60%	61%
	- The chance to talk to a Listener or Samaritans?	30%	26%
	- Support from another prisoner (e.g. Insider or buddy)?	28%	25%
	- None of these?	10%	7%
3.2	On your first night in this prison, was your cell very / quite clean?	57%	44%
3.3	Did you feel safe on your first night here?	65%	74%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	45%	42%
	- Free PIN phone credit?	36%	52%
	- Numbers put on your PIN phone?	41%	46%
3.5	Have you had an induction at this prison?	88%	89%
	For those who have had an induction:		
3.5	Did your induction cover everything you needed to know about this prison?	61%	57%
ON THE WING			
4.1	Are you in a cell on your own?	64%	58%
4.2	Is your cell call bell normally answered within 5 minutes?	38%	27%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	72%	70%
	- Can you shower every day?	88%	89%
	- Do you have clean sheets every week?	78%	71%
	- Do you get cell cleaning materials every week?	64%	58%
	- Is it normally quiet enough for you to relax or sleep at night?	59%	63%
	- Can you get your stored property if you need it?	36%	30%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	63%	59%

		Gay/bisexual/other	Heterosexual
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	56%	44%
5.2	Do you get enough to eat at mealtimes always / most of the time?	47%	38%
5.3	Does the shop / canteen sell the things that you need?	58%	64%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	80%	71%
6.2	Are there any staff here you could turn to if you had a problem?	77%	72%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	47%	39%
6.4	Do you have a personal officer?	87%	82%
	For those who have a personal officer:		
6.4	Is your personal or named officer very / quite helpful?	63%	58%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	19%	14%
6.6	Do you feel that you are treated as an individual in this prison?	45%	44%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	60%	52%
	If so, do things sometimes change?	43%	37%
FAITH			
7.1	Do you have a religion?	68%	68%
	For those who have a religion:		
7.2	Are your religious beliefs respected here?	67%	70%
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	67%	68%
7.4	Are you able to attend religious services, if you want to?	82%	87%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	46%	34%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	55%	51%
8.3	Are you able to use a phone every day (if you have credit)?	89%	90%
8.4	Is it very / quite easy for your family and friends to get here?	30%	41%
8.5	Do you get visits from family/friends once a week or more?	15%	19%
	For those who get visits:		
8.6	Do visits usually start and finish on time?	55%	53%
8.7	Are your visitors usually treated respectfully by staff?	82%	76%
TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	88%	90%
	For those who know what the unlock and lock-up times are supposed to be:		
9.1	Are these times usually kept to?	56%	59%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	14%	19%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	15%	14%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	18%	28%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	6%	6%

		Gay/bisexual/other	Heterosexual
9.4	Do you have time to do domestics more than 5 days in a typical week?	62%	57%
9.5	Do you get association more than 5 days in a typical week, if you want it?	65%	61%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	61%	65%
9.7	Do you typically go to the gym twice a week or more?	31%	48%
9.8	Do you typically go to the library once a week or more?	44%	45%
	For those who use the library:		
9.9	Does the library have a wide enough range of materials to meet your needs?	55%	58%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	76%	74%
	For those who have made an application:		
10.2	Are applications usually dealt with fairly?	63%	53%
	Are applications usually dealt with within 7 days?	43%	39%
10.3	Is it easy for you to make a complaint?	67%	63%
	For those who have made a complaint:		
10.4	Are complaints usually dealt with fairly?	37%	33%
	Are complaints usually dealt with within 7 days?	27%	27%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	29%	28%
	For those who need it, is it easy to:		
10.6	Communicate with your solicitor or legal representative?	42%	45%
	Attend legal visits?	47%	56%
	Get bail information?	14%	19%
	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?	58%	55%
HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	43%	32%
	- Nurse?	58%	53%
	- Dentist?	22%	18%
	- Mental health workers?	30%	25%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	57%	49%
	- Nurse?	66%	58%
	- Dentist?	40%	35%
	- Mental health workers?	35%	29%
11.3	Do you have any mental health problems?	59%	46%
	For those who have mental health problems:		
11.4	Have you been helped with your mental health problems in this prison?	52%	40%
11.5	Do you think the overall quality of the health services here is very / quite good?	53%	44%

		Gay/bisexual/other	Heterosexual
OTHER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	50%	35%
	For those who have a disability:		
12.2	Are you getting the support you need?	33%	30%
12.3	Have you been on an ACCT in this prison?	35%	18%
	For those who have been on an ACCT:		
12.4	Did you feel cared for by staff?	53%	47%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	48%	42%
ALCOHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	17%	17%
	For those who had / have an alcohol problem:		
13.2	Have you been helped with your alcohol problem in this prison?	63%	55%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	19%	27%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	13%	14%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	10%	9%
	For those who had / have a drug problem:		
13.6	Have you been helped with your drug problem in this prison?	54%	51%
13.7	Is it very / quite easy to get illicit drugs in this prison?	44%	45%
13.8	Is it very / quite easy to get alcohol in this prison?	30%	27%
SAFETY			
14.1	Have you ever felt unsafe here?	64%	47%
14.2	Do you feel unsafe now?	32%	22%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	58%	33%
	- Threats or intimidation?	46%	30%
	- Physical assault?	19%	18%
	- Sexual assault?	14%	3%
	- Theft of canteen or property?	33%	24%
	- Other bullying / victimisation?	39%	18%
	- Not experienced any of these from prisoners here	32%	54%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	53%	35%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	31%	31%
	- Threats or intimidation?	22%	24%
	- Physical assault?	9%	11%
	- Sexual assault?	5%	1%
	- Theft of canteen or property?	9%	10%
	- Other bullying / victimisation?	25%	19%
	- Not experienced any of these from staff here	55%	57%
14.6	If you were being bullied / victimised by staff here, would you report it?	59%	49%

		Gay/bisexual/other	Heterosexual
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	46%	44%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	43%	41%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	10%	13%
	For those who have been restrained in the last 6 months:		
15.4	Did anyone come and talk to you about it afterwards?	13%	25%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	7%	10%
	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?	50%	56%
	Could you shower every day?	40%	59%
	Could you go outside for exercise every day?	47%	77%
	Could you use the phone every day (if you had credit)?	57%	58%
EDUCATION, SKILLS AND WORK			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	58%	62%
	- Vocational or skills training?	33%	37%
	- Prison job?	49%	49%
	- Voluntary work outside of the prison?	4%	7%
	- Paid work outside of the prison?	3%	5%
16.2	In this prison, have you done the following activities:		
	- Education?	82%	79%
	- Vocational or skills training?	65%	65%
	- Prison job?	85%	81%
	- Voluntary work outside of the prison?	31%	35%
	- Paid work outside of the prison?	31%	34%
	For those who have done the following activities, do you think they will help you on release:		
	- Education?	62%	62%
	- Vocational or skills training?	63%	65%
	- Prison job?	51%	43%
	- Voluntary work outside of the prison?	48%	54%
	- Paid work outside of the prison?	51%	60%
16.3	Do staff encourage you to attend education, training or work?	60%	57%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	55%	51%
	For those who have a custody plan:		
17.2	Do you understand what you need to do to achieve your objectives or targets?	80%	85%
17.3	Are staff helping you to achieve your objectives or targets?	60%	53%

		Gay/bisexual/other	Heterosexual
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	46%	49%
	- Other programmes?	41%	46%
	- One-to-one work?	47%	42%
	- Been on a specialist unit?	31%	19%
	- ROTL - day or overnight release?	16%	20%
	For those who have done the following, did they help you to achieve your objectives or targets:		
	- Offending behaviour programmes?	71%	75%
	- Other programmes?	67%	72%
	- One-to-one work?	65%	72%
	- Being on a specialist unit?	60%	49%
	- ROTL - day or overnight release?	35%	69%
PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	13%	24%
	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?	43%	50%
18.3	Is anybody helping you to prepare for your release?	66%	56%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	74%	65%
	- Getting employment?	59%	65%
	- Setting up education or training?	59%	49%
	- Arranging benefits?	77%	71%
	- Sorting out finances?	59%	60%
	- Support for drug or alcohol problems?	47%	45%
	- Health / mental health support?	64%	54%
	- Social care support?	42%	41%
	- Getting back in touch with family or friends?	36%	41%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	58%	34%
	- Getting employment?	30%	23%
	- Setting up education or training?	45%	19%
	- Arranging benefits?	50%	31%
	- Sorting out finances?	26%	20%
	- Support for drug or alcohol problems?	64%	42%
	- Health / mental health support?	52%	24%
	- Social care support?	23%	20%
	- Getting back in touch with family or friends?	42%	30%
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%	52%

Appendix six

Prisoner survey responses: men and women

In this table summary statistics from all adult prisoners surveyed in the annual report year 1 April 2019 – 31 March 2020 are presented.

The comparator compares the responses of prisoners in male and female local, training, high security, open and young adult establishments.

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

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

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

		Men's prisons	Women's prisons
NUMBER OF COMPLETED QUESTIONNAIRES RETURNED		6,308	694
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	7%	3%
	Are you 25 years of age or younger?	21%	13%
	Are you 50 years of age or older?	17%	13%
	Are you 70 years of age or older?	2%	1%
1.3	Are you from a minority ethnic group?	29%	16%
1.4	Have you been in this prison for less than 6 months?	41%	53%
1.5	Are you currently serving a sentence?	88%	83%
	Are you on recall?	11%	10%
1.6	Is your sentence less than 12 months?	12%	27%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	4%	3%
7.1	Are you Muslim?	16%	5%
11.3	Do you have any mental health problems?	47%	71%
12.1	Do you consider yourself to have a disability?	36%	48%
19.1	Do you have any children under the age of 18?	48%	58%
19.2	Are you a foreign national?	8%	6%
19.3	Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?	5%	7%
19.4	Have you ever been in the armed services?	7%	2%
19.5	Is your gender female or non-binary?		
19.6	Are you homosexual, bisexual or other sexual orientation?	5%	22%
19.7	Do you identify as transgender or transsexual?	2%	2%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	19%	24%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	47%	51%
2.3	When you were searched in reception, was this done in a respectful way?	81%	86%
2.4	Overall, were you treated very / quite well in reception?	83%	86%

		Men's prisons	Women's prisons
2.5	When you first arrived, did you have any problems?	75%	86%
2.5	Did you have problems with:		
	- Getting phone numbers?	32%	34%
	- Contacting family?	30%	32%
	- Arranging care for children or other dependents?	3%	5%
	- Contacting employers?	4%	4%
	- Money worries?	21%	35%
	- Housing worries?	16%	31%
	- Feeling depressed?	36%	56%
	- Feeling suicidal?	12%	28%
	- Other mental health problems?	24%	41%
	- Physical health problems?	16%	25%
	- Drugs or alcohol (e.g. withdrawal)?	15%	38%
	- Getting medication?	23%	36%
	- Needing protection from other prisoners?	7%	8%
	- Lost or delayed property?	22%	14%
	For those who had any problems when they first arrived:		
2.6	Did staff help you to deal with these problems?	34%	45%
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	63%	75%
	- Toiletries / other basic items?	52%	66%
	- A shower?	39%	50%
	- A free phone call?	46%	71%
	- Something to eat?	74%	82%
	- The chance to see someone from health care?	60%	70%
	- The chance to talk to a Listener or Samaritans?	27%	38%
	- Support from another prisoner (e.g. Insider or buddy)?	25%	38%
	- None of these?	8%	4%
3.2	On your first night in this prison, was your cell very / quite clean?	44%	58%
3.3	Did you feel safe on your first night here?	73%	70%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	42%	46%
	- Free PIN phone credit?	51%	56%
	- Numbers put on your PIN phone?	46%	48%
3.5	Have you had an induction at this prison?	89%	87%
	For those who have had an induction:		
3.5	Did your induction cover everything you needed to know about this prison?	57%	54%
ON THE WING			
4.1	Are you in a cell on your own?	58%	64%
4.2	Is your cell call bell normally answered within 5 minutes?	27%	38%

		Men's prisons	Women's prisons
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	69%	75%
	- Can you shower every day?	89%	89%
	- Do you have clean sheets every week?	71%	83%
	- Do you get cell cleaning materials every week?	58%	77%
	- Is it normally quiet enough for you to relax or sleep at night?	63%	69%
	- Can you get your stored property if you need it?	30%	34%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	59%	70%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	44%	46%
5.2	Do you get enough to eat at mealtimes always / most of the time?	38%	43%
5.3	Does the shop / canteen sell the things that you need?	63%	63%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	71%	79%
6.2	Are there any staff here you could turn to if you had a problem?	72%	84%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	39%	41%
6.4	Do you have a personal officer?	82%	76%
	For those who have a personal officer:		
6.4	Is your personal or named officer very / quite helpful?	58%	55%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	14%	17%
6.6	Do you feel that you are treated as an individual in this prison?	45%	52%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	52%	60%
	If so, do things sometimes change?	37%	41%
FAITH			
7.1	Do you have a religion?	68%	68%
	For those who have a religion:		
7.2	Are your religious beliefs respected here?	70%	77%
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	68%	76%
7.4	Are you able to attend religious services, if you want to?	86%	90%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	35%	41%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	51%	43%
8.3	Are you able to use a phone every day (if you have credit)?	90%	90%
8.4	Is it very / quite easy for your family and friends to get here?	40%	34%
8.5	Do you get visits from family/friends once a week or more?	19%	20%
	For those who get visits:		
8.6	Do visits usually start and finish on time?	54%	63%
8.7	Are your visitors usually treated respectfully by staff?	77%	82%

		Men's prisons	Women's prisons
TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	90%	92%
	For those who know what the unlock and lock-up times are supposed to be:		
9.1	Are these times usually kept to?	59%	60%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	19%	11%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	13%	16%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	28%	15%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	6%	9%
9.4	Do you have time to do domestics more than 5 days in a typical week?	57%	56%
9.5	Do you get association more than 5 days in a typical week, if you want it?	60%	57%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	64%	51%
9.7	Do you typically go to the gym twice a week or more?	47%	27%
9.8	Do you typically go to the library once a week or more?	45%	57%
	For those who use the library:		
9.9	Does the library have a wide enough range of materials to meet your needs?	57%	65%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	73%	76%
	For those who have made an application:		
10.2	Are applications usually dealt with fairly?	53%	64%
	Are applications usually dealt with within 7 days?	39%	48%
10.3	Is it easy for you to make a complaint?	63%	67%
	For those who have made a complaint:		
10.4	Are complaints usually dealt with fairly?	33%	42%
	Are complaints usually dealt with within 7 days?	27%	34%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	29%	27%
	For those who need it, is it easy to:		
10.6	Communicate with your solicitor or legal representative?	45%	47%
	Attend legal visits?	55%	56%
	Get bail information?	18%	19%
	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%	42%
HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	33%	32%
	- Nurse?	53%	57%
	- Dentist?	19%	17%
	- Mental health workers?	25%	28%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	49%	56%
	- Nurse?	59%	65%
	- Dentist?	36%	39%
	- Mental health workers?	29%	39%

		Men's prisons	Women's prisons
11.3	Do you have any mental health problems?	47%	71%
	For those who have mental health problems:		
11.4	Have you been helped with your mental health problems in this prison?	40%	51%
11.5	Do you think the overall quality of the health services here is very / quite good?	44%	46%
OTHER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	36%	48%
	For those who have a disability:		
12.2	Are you getting the support you need?	30%	36%
12.3	Have you been on an ACCT in this prison?	19%	39%
	For those who have been on an ACCT:		
12.4	Did you feel cared for by staff?	47%	53%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	43%	43%
ALCOHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	17%	28%
	For those who had / have an alcohol problem:		
13.2	Have you been helped with your alcohol problem in this prison?	55%	76%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	27%	46%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	14%	12%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	9%	14%
	For those who had / have a drug problem:		
13.6	Have you been helped with your drug problem in this prison?	51%	75%
13.7	Is it very / quite easy to get illicit drugs in this prison?	45%	40%
13.8	Is it very / quite easy to get alcohol in this prison?	27%	8%
SAFETY			
14.1	Have you ever felt unsafe here?	48%	49%
14.2	Do you feel unsafe now?	22%	16%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	34%	43%
	- Threats or intimidation?	31%	38%
	- Physical assault?	18%	16%
	- Sexual assault?	3%	2%
	- Theft of canteen or property?	25%	29%
	- Other bullying / victimisation?	19%	24%
	- Not experienced any of these from prisoners here	53%	42%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	36%	58%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	31%	24%
	- Threats or intimidation?	24%	16%
	- Physical assault?	11%	5%
	- Sexual assault?	2%	1%
	- Theft of canteen or property?	10%	5%
	- Other bullying / victimisation?	19%	17%
	- Not experienced any of these from staff here	57%	63%
14.6	If you were being bullied / victimised by staff here, would you report it?	50%	65%

		Men's prisons	Women's prisons
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	43%	53%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	41%	48%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	13%	7%
	For those who have been restrained in the last 6 months:		
15.4	Did anyone come and talk to you about it afterwards?	24%	32%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	10%	8%
	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?	56%	60%
	Could you shower every day?	57%	59%
	Could you go outside for exercise every day?	75%	62%
	Could you use the phone every day (if you had credit)?	57%	63%
EDUCATION, SKILLS AND WORK			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	61%	59%
	- Vocational or skills training?	36%	38%
	- Prison job?	49%	59%
	- Voluntary work outside of the prison?	7%	13%
	- Paid work outside of the prison?	5%	10%
16.2	In this prison, have you done the following activities:		
	- Education?	79%	83%
	- Vocational or skills training?	65%	59%
	- Prison job?	82%	80%
	- Voluntary work outside of the prison?	35%	35%
	- Paid work outside of the prison?	34%	32%
	For those who have done the following activities, do you think they will help you on release:		
	- Education?	62%	75%
	- Vocational or skills training?	65%	72%
	- Prison job?	43%	61%
	- Voluntary work outside of the prison?	53%	65%
	- Paid work outside of the prison?	60%	63%
16.3	Do staff encourage you to attend education, training or work?	57%	69%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	51%	45%
	For those who have a custody plan:		
17.2	Do you understand what you need to do to achieve your objectives or targets?	85%	84%
17.3	Are staff helping you to achieve your objectives or targets?	54%	64%

		Men's prisons	Women's prisons
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	49%	46%
	- Other programmes?	45%	52%
	- One-to-one work?	42%	48%
	- Been on a specialist unit?	20%	20%
	- ROTL - day or overnight release?	20%	31%
	For those who have done the following, did they help you to achieve your objectives or targets:		
	- Offending behaviour programmes?	75%	88%
	- Other programmes?	72%	89%
	- One-to-one work?	72%	85%
	- Being on a specialist unit?	50%	63%
	- ROTL - day or overnight release?	67%	83%
PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	24%	35%
	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?	50%	34%
18.3	Is anybody helping you to prepare for your release?	56%	70%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	65%	66%
	- Getting employment?	64%	61%
	- Setting up education or training?	49%	52%
	- Arranging benefits?	71%	86%
	- Sorting out finances?	59%	67%
	- Support for drug or alcohol problems?	44%	63%
	- Health / mental health support?	54%	71%
	- Social care support?	41%	46%
	- Getting back in touch with family or friends?	41%	46%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	35%	40%
	- Getting employment?	24%	25%
	- Setting up education or training?	20%	21%
	- Arranging benefits?	33%	40%
	- Sorting out finances?	21%	31%
	- Support for drug or alcohol problems?	43%	59%
	- Health / mental health support?	26%	30%
	- Social care support?	21%	32%
	- Getting back in touch with family or friends?	31%	42%
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?	52%	63%

Appendix seven

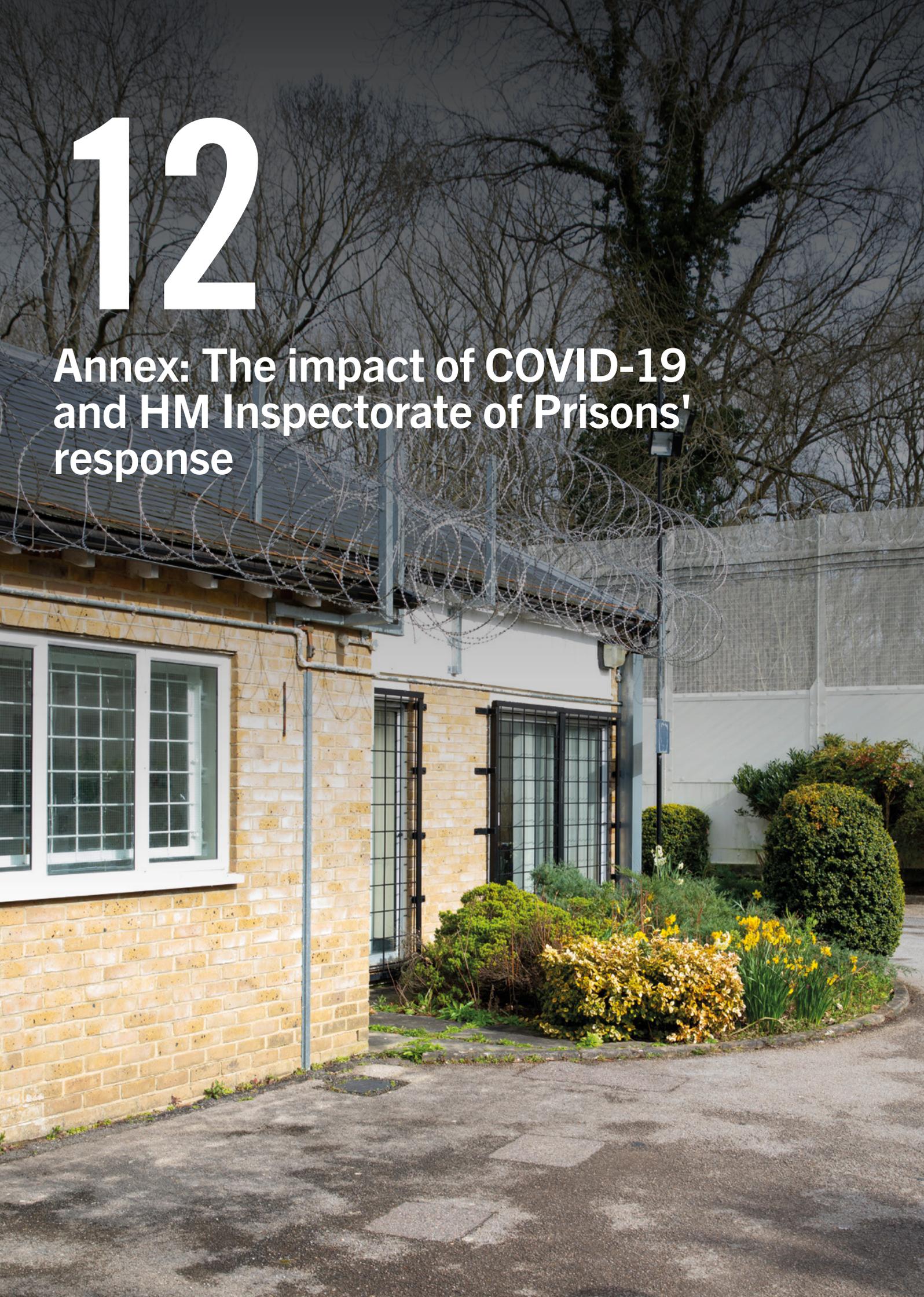
IRP assessments

	DATE OF IRP	NUMBER OF RECOMMENDATIONS REVIEWED AT IRP	JUDGEMENTS (HMI PRISONS RECOMMENDATIONS)							
			No meaningful progress		Insufficient progress		Reasonable progress		Good progress	
				%		%		%		%
Exeter	8 April 2019	13	3	23%	4	31%	3	23%	3	23%
Chelmsford	15 April 2019	9	0	0%	5	56%	3	33%	1	11%
The Mount	23 April 2019	13	0	0%	6	46%	2	15%	5	38%
Birmingham	7 May 2019	9	1	11%	3	33%	5	56%	0	0%
Manchester	3 June 2019	12	5	42%	3	25%	4	33%	0	0%
High Down	17 June 2019	9	0	0%	3	33%	4	44%	2	22%
Durham	1 July 2019	10	0	0%	4	40%	3	30%	3	30%
Channings Wood	1 July 2019	13	0	0%	2	15%	5	38%	6	46%
Swinfen Hall	8 July 2019	14	3	21%	4	29%	4	29%	3	21%
Bedford	5 August 2019	13	2	15%	6	46%	2	15%	3	23%
Swaleside	30 September 2019	12	4	33%	4	33%	2	17%	2	17%
Guys Marsh	14 October 2019	10	2	20%	4	40%	2	20%	2	20%
Onley	11 November 2019	10	2	20%	3	30%	3	30%	2	20%
Lewes	2 December 2019	12	0	0%	3	25%	6	50%	3	25%
Isle of Wight	7 January 2020	11	5	45%	1	9%	2	18%	3	27%
Pentonville	3 February 2020	15	6	40%	5	33%	3	20%	1	7%
TOTAL		185	33	18%	60	32%	53	29%	39	21%

	DATE OF IRP	NUMBER OF OFSTED THEMES REVIEWED AT IRP	JUDGEMENTS (OFSTED THEMES)					
			Insufficient progress		Reasonable progress		Significant progress	
				%		%		%
Exeter	8 April 2019	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Chelmsford	15 April 2019	n/a	n/a	n/a	n/a	n/a	n/a	n/a
The Mount	23 April 2019	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Birmingham	7 May 2019	3	2	67%	1	33%	0	0%
Manchester	3 June 2019	3	2	67%	1	33%	0	0%
High Down	17 June 2019	3	2	67%	1	33%	0	0%
Durham	1 July 2019	3	1	33%	2	67%	0	0%
Channings Wood	1 July 2019	3	0	0%	3	100%	0	0%
Swinfen Hall	8 July 2019	3	1	33%	2	67%	0	0%
Bedford	5 August 2019	3	1	33%	2	67%	0	0%
Swaleside	30 September 2019	3	3	100%	0	0%	0	0%
Guys Marsh	14 October 2019	3	3	100%	0	0%	0	0%
Onley	11 November 2019	3	2	67%	1	33%	0	0%
Lewes	2 December 2019	3	2	67%	1	33%	0	0%
Isle of Wight	7 January 2020	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Pentonville	3 February 2020	3	2	67%	1	33%	0	0%
TOTAL		36	21	58%	15	42%	0	0%

12

Annex: The impact of COVID-19 and HM Inspectorate of Prisons' response



The worldwide spread of the COVID-19 disease emerged towards the end of HM Inspectorate of Prisons' 2019–20 inspection year. On 11 March 2020, the World Health Organisation (WHO) announced that the new coronavirus disease was a pandemic. On 16 March, the United Kingdom government announced social distancing measures, and on 23 March, strict new rules to contain the spread of the virus.

HM Prison and Probation Service responded by introducing emergency measures to protect staff and prisoners. This involved restricting regimes to implement social distancing, limiting movement of prisoners between prisons, and implementing 'cohort' arrangements to isolate symptomatic prisoners, shield the vulnerable, and quarantine new entrants.

HMI Prisons' COVID-19 methodology

HM Chief Inspector of Prisons Peter Clarke announced on 17 March 2020 that all inspections scheduled to the end of May 2020 would be suspended. The Inspectorate would pursue a new approach to visiting prisons and other places of detention, to meet its duty to report publicly on the treatment of and conditions for prisoners and detainees during the COVID-19 crisis. We considered such scrutiny essential at a time when people in detention were even more isolated. Most prisoners were locked in their cells for over 23 hours a day. Face-to-face support through education, training and employment sessions had stopped for most prisoners, as had key worker time and attendance at any offending behaviour programmes. Prisoners were no longer allowed to have visits from family and friends, and those in open prisons were, at least initially, no longer able to leave the prison on release on temporary licence (ROTL).

The result was a methodology developed together with health and safety guidance and in line with the principle of 'do no harm'. Our approach quickly gained support from Ministers and HMPPS, and despite opposition from staff associations, we were able to commence visits before the end of April, with full publication of reports following shortly afterwards.

The methodology focused only on the *Expectations* essential to the safety, care and basic rights of those detained in the current circumstances. It took a three-pronged approach: analysis of laws, policies and practices introduced in response to COVID-19 and their impact; collection and analysis of information about treatment and conditions for detainees, including potential or developing risks or problems; and using this analysis and intelligence-gathering to inform one-day short scrutiny visits (SSVs) by small inspection teams to selected establishments of a specific type. In contrast to inspections, we did not make judgements on outcomes for detainees in our four healthy establishment tests.

The SSV reports published until the end of June 2020 covered the following establishments.

- Local prisons – Altcourse, Elmley, Wandsworth
- Category C training prisons – Coldingley, Portland, Ranby
- Long-term high security prisons – Belmarsh, Manchester, Woodhill
- Prisons holding sex offenders – Littlehey, Rye Hill, Stafford
- Open prisons – Ford, Sudbury, Thorn Cross
- Women's prisons – Bronzefield, Eastwood Park, Foston Hall
- Young offender institutions (YOIs) holding children – Cookham Wood, Parc, Wetherby
- Immigration removal centres (IRCs) – Brook House, Harmondsworth, Morton Hall, Yarl's Wood

We decided not to make any recommendations in these reports but to comment on any concerns that we had. We also identified examples of notable positive practice in individual establishments.

As restrictions in the community eased it was important for HMI Prisons to judge the speed and effectiveness of the steps being taken to recover from the restrictive regime and reinstate positive outcomes for detainees. To this end we developed our methodology to move to longer scrutiny visits, focusing on individual establishments. The aim was to provide transparency about the recovery from COVID-19 in places of detention, and ensure that lessons could be learned quickly. The findings from these scrutiny visits will be reported on in our 2020–21 annual report.

This Annex sets out our findings from the SSV reports published till the end of June 2020. A fuller summary report on the complete SSV programme is available on the HMI Prisons website.

Adult men's prisons

Promoting safety

Prisons had adopted swift measures to keep prisoners safe from COVID-19, including restricting prisoner contact with others and further action to limit the spread of the infection.

Although tragically there were some deaths of prisoners and staff who had tested positive for the virus, the swift infection control measures helped to contain the outbreak and fatalities. The deaths in the prisons we visited included one prisoner and a member of staff at Manchester, three prisoners at Littlehey, and one prisoner each at Belmarsh and Sudbury.

Prisoners had been kept informed of the new arrangements and were mostly supportive of them. However, especially by the time of our later visits, there was growing frustration with the restricted regime and its impact on prisoners' daily lives.

In all establishments, new arrivals were held in quarantine for 14 days in a designated unit. However, the sharing of cells in some

local prisons increased the risk of virus transmission, as did the cross-deployment of staff between units and other wings in some establishments.

Most prisons had accommodation to isolate prisoners with symptoms or confirmed as having COVID-19, although some spent unacceptably long periods without access to a shower or exercise. Prisons also set up units for prisoners who needed to be shielded, but most eligible prisoners had declined to move into them, often because they would receive less time out of cell.

Attempts to enforce social distancing were made difficult by the narrow corridors and cramped conditions in many prisons, and we identified some poor practice by both prisoners and staff. We saw many staff crowded together in small offices.

Support for those at risk of self-harm and suicide

Recorded levels of self-harm in many men's prisons we visited had remained the same or slightly reduced under the new restrictions. Prisoners who were vulnerable because of their mental health continued to be well-supported at many prisons. The number of self-inflicted deaths remained similar to previous years.

Although there had been increased demand, provision of services for those with mental health needs had reduced. Some prisons were attempting to support those most in need, with examples of good practice in some high security, sex offender and open prisons – for example, at Woodhill, mental health staff were on the wings every day providing support and undertaking weekly welfare checks.

Health care and hygiene

There was effective health and infection-control management in all establishments, with prisoners still able to access nurses and GPs when needed. Some prisons were using prisoners' in-cell telephones for 'virtual' clinics and hospital consultations. Personal protective equipment (PPE) was available in most prisons.

While communal areas were generally kept clean and hygienic, sanitation was a particular problem at Coldingley training prison, where around two-thirds of prisoners had no toilet or sink in their cell, and the lengthy periods of lock up had placed additional pressure on the ‘on request’ sanitation system.

Time locked up and activities

Almost all prisoners were locked up for over 23 hours a day, with those in the local and high security prisons mostly allowed only 30 minutes out of their cell to shower and exercise. Prisoners in the training prisons and those holding sex offenders were more likely to be unlocked for an hour a day. One open prison locked prisoners into their units for much of the day, except for exercise periods.

There was no face-to-face education in any establishment. Some prisons distributed in-cell activities and other distractions to address the lack of activity.

A small number of prisoners continued to be employed as cleaners and catering staff, and there was some limited off-wing work. However, prisoners in the open prisons who were depending on release on temporary licence (ROTL) to prepare them to resettle back into the community were frustrated that the scheme had mostly been suspended.

Contact with family and friends

The loss of visits was a major concern for prisoners. The delays in the promised national roll-out of video-calling had added to their frustrations and anxieties. However, all prisoners had been given additional telephone credit, and many benefited from having in-cell telephones.

Family engagement workers in some prisons had helped to support prisoners to maintain contact with their families.

Support and risk management for those being released

The number of prisoners released under the ‘End of custody temporary release scheme’ had been negligible at the time of our visits. Only one prisoner in the three local prisons had been released under this scheme, and

very few in training prisons had benefited from it – in one prison, only five out of 64 initially assessed as eligible were released under the scheme.

There was limited resettlement work for prisoners being released, with few face-to-face interviews with community rehabilitation company (CRC) staff or offender managers.

Prisons had maintained critical public protection measures and support for parole hearings, but offending behaviour programmes had ceased.

Few prisoners were released homeless from the local or high security prisons, but many of those released from Wandsworth had no accommodation to go to. Too many prisoners were released from the open prisons into very temporary hostel and bed and breakfast accommodation.

Prisons holding women

As with the men’s prisons, the prisons holding women acted promptly to control and manage the potential spread of COVID-19. New arrivals, vulnerable prisoners and those with symptoms were kept isolated. But at one prison, symptomatic prisoners were kept in their cell for up to seven days with no time outside. Prisoners were also reluctant to move into shielding units.

Social distancing worked reasonably well, although it was made difficult by narrow corridors and small offices.

In contrast to prisons holding men, the incidence of self-harm in prisons holding women remained consistently high. Despite enhanced welfare checks and access to Listeners and peer support, the sudden withdrawal of significant structured support had had an impact on the most vulnerable prisoners.

Following some initial health care staffing shortfalls, all prisoners could access a nurse or GP as necessary. Mental health support was mainly by telephone. There was continuing midwifery provision, and good support for mothers and babies in the specialist units at Bronzefield and Eastwood Park.

The restricted regime meant that most prisoners spent 23 hours a day in their cell. Time out of cell varied from only 30 minutes a day at Foston Hall up to two hours for some prisoners at Eastwood Park. However, prisoners in key jobs – around 15–30% across the sites – had more time out of their cells.

Face-to-face education had been suspended, but in Bronzefield there was some limited one-to-one teaching support at cell doors. The prisons had provided extra in-cell activities, such as DVD players. The absence of any organised PE was a significant gap.

All prisoners had in-cell telephones and had been given additional phone credit. However, the suspension of visits and the delays in providing video-calling had had an acute impact on the high proportion of women who were previously primary carers for children, whom they had not seen for months.

The early release schemes had been largely ineffective, with only six prisoners released at the time of our visits. Release planning had continued, but too many prisoners were released homeless – 40% of those released at Bronzefield and Eastwood Park and 20% at Foston Hall.

Establishments holding children

The YOIs had prevented the spread of COVID-19 effectively. As with the adult prisons, all new arrivals were held in quarantine for 14 days and could mix with the group they arrived with, but those who arrived by themselves could spend all of that time alone. Children were allocated to ‘family groups’ of two to five to whom they had access, while social distancing from others.

The recorded level of self-harm had reduced in two of the YOIs and was stable in the third. Case management for children at risk of self-harm or suicide continued. There had been a significant reduction in bullying and violence at all three YOIs.

Children could see a health care professional swiftly and access a GP. The YOIs had introduced enhanced measures to monitor deterioration in children’s mental health, including regular welfare checks. However, some support services had withdrawn

from the YOIs, including some specialist secondary mental health services for those who needed them. This was a concern because of the potential negative impact of the restricted regime on children’s well-being.

For four months the restrictions in place for the children’s estate simply mirrored those for adults, taking no account of the specific needs of children. The primary example of this was the curtailment of all face-to-face education at the public sector sites. The impact of this decision was that children in the two public sector YOIs were locked up for more than 22 hours every day for more than 15 weeks. For those at Cookham Wood, time out of cell was as little as 40 minutes a day for over a month. This was both disproportionate and avoidable. At Parc, education was closed for just one week as managers put in place health and safety measures.

Staff were aware of the potential effects of children spending so much time in their cells, and interacted with them ‘in a caring, patient and professional way’; children reported that there was a member of staff they could turn to if they had a problem.

Gym staff continued to offer exercise classes to children, who also had games consoles, puzzle packs and in-cell workouts.

Many children were frustrated that they could not see their friends and families. They had been given extra telephone credit, although the amount varied between establishments. At the time of our visits, video-calling was due to be introduced at Parc and used for social visits as well as mental health consultations – this was introduced in April, significantly before the public sector sites, which only introduced it in June. Staff at Wetherby checked on children who had not made any phone calls to help mitigate their social isolation.

Because of the difficulties in moving children to the adult estate during this period, an increasing number of 18-year-olds were held in the children’s estate. In addition, delays in the court system led to a significant increase in the proportion of the population who were on remand.

Immigration removal centres

All the IRCs visited had dramatically reduced their populations, partly because where there is no reasonable prospect of removal, immigration detention ceases to be lawful.

However, some of those still detained had been held for extended periods – 12 for over a year and more than a fifth for over six months. Their removal abroad seemed unlikely due to the travel bans imposed during the pandemic.

Nearly 40% of those detained were identified as adults at risk, often because they were shielding. There were processes to support and review vulnerable detainees. The number of self-harm incidents requiring medical treatment was generally low.

The centres had good management planning for the crisis, including effective infection control, with few confirmed cases of COVID-19; this was supported by the low numbers of detainees held in sufficient space. New arrivals were usually kept apart for their first 14 days. There was sufficient PPE, proportionate restrictions, and good standards of cleanliness and hygiene. However, at Harmondsworth, social distancing by both staff and detainees was inconsistent.

Unlike the prisons visited, IRC detainees generally had freedom of movement and reasonable access to activities and work, although there were inconsistencies between the centres. Harmondsworth and Yarl's Wood continued to run education classes and keep their libraries open, but Brook House and Morton Hall did not. All detainees had access to telephones, internet and video-calling.

While most detainees were released to suitable accommodation, nine had left Harmondsworth with no fixed address between March and our visit in mid-May. Meanwhile, detainees who had been granted conditional bail were still held because of the lack of suitable accommodation.

