# Report on an announced inspection of

# **HMP Shepton Mallet**

14–18 June 2010by HM Chief Inspector of Prisons

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## Introduction

Shepton Mallet is a small prison dedicated to holding life- and other indeterminate-sentenced prisoners. This very positive report, of a full announced inspection, is testament to the benefits that can flow from having a small-scale niche prison with a settled population. Despite its ageing physical environment, the prison was a very safe place, with positive staff-prisoner relationships, a reasonable amount of activities, and a strong focus on addressing the serious risks posed by the population.

Shepton Mallet remained a remarkably safe place. There was little self-harm, little bullying or violence and almost no drug use. As a result, staff had minimal need to resort to formal disciplinary charges, use of force or segregation.

Relationships between staff and prisoners continued to be very positive, supported by a reasonable personal officer scheme. Accommodation was old and tired, but adequate for the current numbers of prisoners. However, we were concerned to learn of plans to increase the population significantly. Neither the fabric, nor the relatively older and atypical population, were likely to be able to cope with such a dramatic change. Diversity issues were generally well managed. Health services were good, but a more in-depth needs analysis was required to ensure they were appropriate.

Time out of cell was good and there were sufficient activity places to keep men occupied. Education provision was satisfactory, but required a greater breadth and depth to meet the needs of a long-term population. The amount of work available was adequate but much of it was basic. There was good library and PE provision, although PE facilities were inherently limited by the restrictions of the site.

Resettlement work was properly focused on the needs of a long-term indeterminate population but would benefit from a more comprehensive strategic approach, informed by a comprehensive needs analysis. There was a good range of programmes to address the serious risks posed by this particular population. Few prisoners were released from Shepton Mallet so there was little call on reintegration services, but there was satisfactory support to prisoners to maintain family ties, and suitable drug and alcohol services. There was also some innovative work to prepare prisoners for life in an open prison.

Although Shepton Mallet is one of the oldest prisons in the country and has a restricted environment, its small size and dedicated function encouraged a safe and settled atmosphere, with positive staff-prisoner relationships. It also benefited from a satisfactory range of purposeful activities and an appropriate focus on programmes to address the risk of reoffending. However, we shared the concern of staff that recent proposals to increase the population by nearly 40%, despite the lack of suitable accommodation and services to enable such a major change, would put much of what had been achieved at risk.

Nigel Newcomen HM Deputy Chief Inspector of Prisons August 2010

# Fact page

#### Task of the establishment

Shepton Mallet is a second-stage lifer establishment

#### Area organisation

South-West area office

#### Number held

189 (one in outside hospital)

#### Certified normal accommodation

165

#### Operational capacity

189

### Last inspection

July 2005

#### **Brief history**

There was a prison on this site from 1610 to 1930. It was closed from 1930 to 1939 before becoming a military prison (English/American) from 1939 until 1966. It re-roled to become the first category C lifer centre in the service on 1 August 2001.

#### Description of residential units

A wing 37 spaces (eight reasonably sized shared cells)
B wing 94 spaces and a Listeners' suite (14 shared cells)

C wing 43 spaces on three landings, with older and infirm prisoners on the ground floor

D wing 15 spaces (one shared cell)

# Healthy prison summary

## Introduction

HP1 All inspection reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this inspectorate's thematic review Suicide is everyone's concern, published in 1999. The criteria are:

Safety prisoners, even 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

**Resettlement** prisoners are prepared for their release into the community

and helped to reduce the likelihood of reoffending.

HP2 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the National Offender Management Service.

- outcomes for prisoners are good against this healthy prison test. There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.
- outcomes for prisoners are reasonably good against this healthy prison test.
   There is evidence of adverse outcomes for prisoners in only a small number of areas.
   For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.
- outcomes for prisoners are not sufficiently good against this healthy prison test.

There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.

- outcomes for prisoners are poor against this healthy prison test.

There is evidence that the outcomes for prisoners are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.

## Safety

HP3 Reception and first night arrangements met the needs of the population. There was very little bullying and no violence. Levels of self-harm were low, but good support

was provided when necessary. Prisoners were rarely segregated and there was almost no use of force. The prison was almost drug free. Outcomes for prisoners were good against this healthy prison test.

- HP4 Prisoners transferred to Shepton Mallet as part of planned moves, so knew where they were going. Some received written information about the prison in advance. A number of men had rather circuitous journeys.
- The reception was clean, well organised and welcoming. Prisoners in our survey and those we spoke to were very positive about their treatment there. Cell-sharing risk assessments were completed and other vulnerabilities identified in reception, but otherwise prisoners did not stay there long. A reception orderly who was a trained Listener and Insider worked in reception and helped welcome and support new arrivals.
- HP6 New arrivals got the help and information they needed on their first night and most were able to shower and make telephone calls as well as signing appropriate compacts. Almost all men had to share cells when they arrived, many for the first time for some years, but 87% in our survey said they had felt safe on their first night. The induction programme mainly comprised a scheduled series of interviews that prisoners were responsible for completing, helped if necessary by a mentor. Although this could take some time, the process was an effective introduction to the prison and was overseen and checked by a residential manager. Prisoners in our survey were very positive that induction covered all they needed to know.
- HP7 Although a relatively high proportion in our survey, almost a third of prisoners, said they had been victimised by another prisoner, this largely seemed to relate to insulting remarks associated with offences rather than overt threatening behaviour. Only 10% of men said they actually felt unsafe at the time of the survey, which was positive in an integrated high-risk population with no separation because of offence type. There were appropriate structures and procedures to deal with potential incidents of bullying or violence, with effective links between security and safer custody, but very little evidence of actual incidents.
- There had been no self-inflicted death since 2003 and levels of self-harm were very low. Few documents for people considered at risk of suicide and self-harm were opened and formal monitoring procedures were very good, with good quality initial assessments, multidisciplinary reviews and good support from staff. Listener support was available, but few men made formal requests for Listener contact.
- HP9 The segregation unit was only a part-time facility and very little used, but adequate for its purpose. There were very few adjudications and records indicated they were fairly conducted. Punishments were moderate and consistent. There had been no use of force for 18 months.
- HP10 The prison was almost drug-free and relatively few men in our survey said it was easy to get illegal drugs. The positive mandatory drug test rate for 2009/10 was 1.3%, representing only three positive tests. Since April 2010, no one had tested positive. The integrated drug treatment system (IDTS) had just been introduced, but demand was likely to be extremely low with this population group and it was difficult to see how the investment was justified.

### Respect

- HP11 Relationships between staff and prisoners were positive. Personal officer work was reasonably good, but had the potential to be developed further. Living conditions were generally decent, but men found it difficult to share cells on arrival. We were concerned that proposals to increase the population by up to 70 were inappropriate within the cramped environment of Shepton Mallet. A temporary kitchen provided reasonable quality meals. Almost all men were on the enhanced level of the incentives and earned privileges scheme. Diversity work was developing well, with some appropriate support for older men and those with disabilities. Race relations were positive. Health services were good. Outcomes for prisoners were good against this healthy prison test.
- HP12 Relationships between staff and prisoners were positive and relaxed. In our survey, 90% of prisoners, substantially higher than the comparator, said most staff treated them with respect. We observed easy interactions and staff were friendly, positive and helpful. Prisoner consultation arrangements were good.
- HP13 The survey results were very positive about personal officers. All men had personal officers and most said they were helpful. There was a comprehensive personal officer policy. Personal officers made regular monthly entries in records, although these had become briefer and less regular since the introduction of the electronic P-NOMIS system. Many personal officer entries made general references to sentence planning issues, but were often repetitive and did not effectively build up a picture of progress over time.
- HP14 The prison was very clean and generally well maintained, although there were problems with the heating system. A pleasant garden area had been developed in the facilities yard and had improved a previously stark outlook. Prisoners had good access to cleaning materials, clean kit and showers, although few showers provided full privacy. Men could not do their own washing, but the central laundry arrangements worked well. The prison had been asked to make plans to take up to 70 additional prisoners, but men currently waited up to a year after arrival to obtain a single cell and their age and circumstances made it inappropriate that many more should be asked to share. The general restricted environment of the prison made it unsuitable to take many more prisoners.
- HP15 Almost all prisoners were on the enhanced level of the incentives and earned privileges (IEP) scheme, which seemed to serve little purpose in an all lifer prison where there were much greater motivators than the IEP scheme was able to provide.
- HP16 Prisoners were relatively positive in our survey about the quality of food and 40% said it was good or very good. A temporary kitchen provided some airline style meals once a day while the permanent kitchen was being refurbished. There were some very basic cooking facilities on wings. Prisoners were generally satisfied about the range of goods sold in the prison shop, but there was relatively little consultation about the products stocked. Men could shop from catalogues, but delivery charges were high.
- HP17 There was no single overarching diversity strategy or action plan. The diversity committee had started to cover the different strands, but work in some areas, such as sexual orientation, was just beginning. Diversity issues were discussed at prisoner consultation meetings and all prisoners had a session of diversity training as part of

their induction. Some good work was being developed with older prisoners, although retirement pay was inadequate. All prisoners were asked about disabilities on arrival and those with disabilities had their needs assessed by the disability coordinator, who worked closely with health care, and some good adaptations were made. Individual care plans set out what was needed for each man, although some assessments and reviews were overdue.

- HP18 Only about 12% of the population were black and minority ethnic prisoners and our survey showed very little difference in perceptions between them and other prisoners. Race matters were covered at a well attended diversity committee. There were few racist incident reports. Reported incidents were thoroughly investigated, with some external scrutiny from Somerset Race Equality Council, who also attended the diversity meetings. Ethnic monitoring data were considered at the meetings and did not suggest any areas of concern. Race and cultural equality was promoted through a range of programmed events organised by a monthly cultural awareness planning meeting that involved trained prisoner representatives.
- HP19 There were only nine foreign national men and needs were satisfactorily met on an individual basis rather than through a dedicated foreign nationals committee. Only one of the foreign national men had any difficulties with language, but he spoke and understood everyday English. Telephone interpretation had been used only once for a sentence planning meeting.
- HP20 The chapel was a good facility and chaplains catered for most faiths. Most prisoners had good access to the facilities, but it was difficult for those with mobility problems to get to the chapel. Muslim prayers took place in a suitable prayer room on Fridays, although the Muslim chaplain could only attend on Tuesdays when he ran a study group. A world faith room was available for other non-Christian faiths. The chaplaincy team was well integrated into prison life and provided good support for prisoners facing bereavement or life-limiting illness.
- Prisoners were generally positive about the handling of applications and complaints except higher than the comparator said they had been asked to withdraw complaints. Complaints were not logged before they were withdrawn so there was no formal record that the prisoner had agreed. Replies to complaints were on time and usually answered the issue raised. There were good systems for monitoring written applications, but prisoners said they were normally able to resolve issues informally.
- HP22 Health services were good, with appropriate access to most health professionals, including external services, but there was a need for a more thorough assessment of need. Our survey was positive about most aspects of health care, but some prisoners complained that nurses were dismissive. This appeared to be related to problems with pharmacy services when repeat medicines were not returned on time. Dental services were generally good and no one waited long for an appointment. Primary mental health support was good and the small team had good links with the rest of the prison. Secondary services were limited and there was a lack of psychiatric support.

### Purposeful activity

- HP23 Time out of cell was good. There was a slight shortage of activity places for the population. The quality of education provision was good, but there were too few progression opportunities. Although much of the work was basic, men welcomed the opportunity to earn higher wages in some workshops. Not all skills men acquired at work were fully recognised. There were good library facilities. PE facilities were restricted, but satisfactory. Outcomes for prisoners were reasonably good against this healthy prison test.
- HP24 Time out of cell was generally good and men could spend up to 9.5 hours out of their cell on Mondays to Thursdays and over seven hours at weekends. There was good free movement around the prison and all men could spend at least an hour in the open air each day. Evening association was only occasionally cancelled when there were staff shortages and on a rota basis for each wing.
- HP25 Key improvements in the management of learning and skills included increased evening education and activities, a small increase in the vocational provision, extra library provision and the embedding of literacy and numeracy. Operational management of the education and vocational training provision had also recently improved, but there was insufficient planning and coordination of learning. Prisoners were often moved out of education to attend programmes or other reasons without proper sequencing of activities and classroom efficiency was poor. Sentence planning was thorough and prisoners involved in education and training received a comprehensive induction. All prisoners received a satisfactory information, advice and guidance service.
- HP26 The education curriculum did not fully meet the needs of the whole population. Education was mostly at a low level and, although there was good support for prisoners involved in distance and Open University learning at a higher level, there was little for the majority of men in the middle. There were a potential 50 full-time education places, but only 39 were allocated so the full capacity was not used. We observed poor attendance and punctuality. Low pay rates were a disincentive to some men to participate in education. The education accommodation was reasonably good, but access was difficult for those with mobility difficulties. The quality of teaching was good and effective individual support was provided, with some good outreach work. The quality of work and achievements were very high, although relatively few prisoners were involved.
- There were almost enough jobs, but a lot of the work was mundane and many wing-based jobs did not keep men fully occupied. The range of accredited vocational courses was narrow, but pass rates were high for the few prisoners who took them. Skills development in painting and decorating, woodwork and tapestry were good, supported by effective teaching. Some opportunities to embed learning in jobs, such as in the manufacturing workshops, were missed and few took advantage of the limited accreditation available. There was a long waiting list for the manufacturing workshop, which offered high levels of pay. There was little use of part-time work to provide more equitable access and combine work there with education.

- HP28 Access to the library was reasonably good, but getting to the library was difficult for those with mobility problems. While there was a good lending service, reading groups to promote literacy had recently stopped. The range of books stocked was reasonably good and met most needs. Books in other languages could be ordered, but the service was not well promoted. There was good access to legal materials and up-to-date Prison Service Orders.
- HP29 There was insufficient cover for PE staff absences and sessions were often cancelled. Indoor provision was adequate, but the outdoor space was small. A range of PE courses was run and pass rates were high. Lower than the comparator in our survey said they went to the gym at least twice a week, which was likely to reflect the higher than average age profile of men at the prison. Some remedial gym sessions were run for less fit prisoners.

#### Resettlement

- HP30 The resettlement strategy appropriately reflected prisoners' needs, but targets lacked clear focus. Sentence planning was well managed. Prisoners had access to appropriate programmes without any undue delays and were able to make progress in their sentences. Visits arrangements were satisfactory and there were suitable drug and alcohol services for the population. Outcomes for prisoners were good against this healthy prison test.
- HP31 The reducing re-offending strategy satisfactorily described the role of the prison, but needed updating to include a current action plan with clear measurable targets.

  Although individual needs were well assessed and most men came to do specific programmes, these needs were not aggregated to ensure appropriate services were run and to help identify whether there were any major gaps in provision. The reducing re-offending committee met regularly and oversaw the offender management work and the development of appropriate resettlement pathway work.
- HP32 Offender management was well organised and all lifers were managed under offender management principles. All men were appropriately involved in multidisciplinary sentence planning boards and had up-to-date good quality sentence plans, including preliminary plans set shortly after arrival. Although there was some backlog in updating offender assessment system (OASys) assessments, this had significantly reduced in recent months. Prison input into parole dossiers was usually completed on time, but some were delayed because of external probation officers/offender managers. Some prisoners had parole hearings delayed because of backlogs in the Parole Board system. Public protection arrangements were sound.
- HP33 It had been some years since anyone had been released from Shepton Mallet and appropriate targeted provision was made to match the needs of the population with reintegration services. Suitable prisoners were able to progress to open prisons or other category C prisons. Some good events were run to deal with issues specific to the life-sentence system and keep men up to date with developments. A very useful Life in the Future programme provided a forum for prisoners to discuss various aspects of their progress and included practical matters such as explanation of licence conditions and their implications before transfer to open prisons.

- HP34 Many visitors travelled long distances and reported being treated well but no one identified and engaged with new visitors. There was a comfortable waiting room inside the prison, but no outside shelter. The visits room was a relaxed environment and regular family and children's days were run. A previous service from a Barnardo's worker to help prisoners maintain or rebuild relationships no longer operated and the children and families pathway was underdeveloped.
- HP35 Programmes run included the cognitive skills booster, a range of sex offender treatment programmes and the recently introduced thinking skills programme. Most men came to the prison to do these courses and few waited long. There were waiting lists for prisoners to attend the healthy relationship programme in other prisons. Some staff had helpfully become trained as assessors for the healthy relationship programme, which avoided men transferring and then being found unsuitable.
- HP36 The drug strategy included alcohol services, but the policy was not up to date. Fewer prisoners than the comparator in our survey reported drug or alcohol problems and there were suitable counselling, assessment, referral, advice and throughcare (CARAT) services to meet the needs of those with identified substance use problems, including alcohol issues. The active CARAT caseload was 26 and structured one-to-one work was provided, supplemented by work books. There were good links between the service and the offender management unit.

#### Main recommendations

- HP37 The total population of Shepton Mallet in its current configuration should be capped at 200.
- HP38 A full health needs analysis should be completed quickly to ensure the commissioning of appropriate physical and mental health services, including the need for counselling and day care services.
- HP39 A wider range of education, training and work activities should be provided to allow prisoners to keep purposefully active and develop their personal and social skills.
- HP40 The reducing reoffending policy should be based on a needs analysis, which identifies gaps in services and provision and should include an action plan with clear targets for all relevant resettlement pathways.

# Section 1: Arrival in custody

## Courts, escorts and transfers

#### **Expected outcomes:**

Prisoners travel in safe, decent conditions to and from court and between prisons. During movement the individual needs of prisoners are recognised and given proper attention.

- 1.1 New arrivals were usually on planned transfers and had been given advance notice of the move. Many had experienced long journeys, some involving a number of overnight or longer stays at prisons on the way. Most reported good treatment by escorting staff, but few said they had been given toilet breaks.
- 1.2 There were about five new arrivals each month. Most came from other closed prisons as part of a planned progressive move and had been given advance notice of their transfer. A few were returned from open conditions. Prisoners accepted by Shepton Mallet were sent a leaflet giving information about the prison, including that they would have to share cells. Prisoners who had arrived in recent months confirmed they had been given this information in advance.
- 1.3 The prison operated as a national resource for men serving life and indeterminate sentences for public protection (IPPs) and many prisoners were transferred from establishments some distance away. In our survey, significantly more prisoners than the comparator said they had spent longer than four hours in the escort van. Prisoners in groups said they had been well treated by escort staff, but few said they had been given toilet breaks. A number of prisoners complained of long journeys involving two or more stays at other prisons en route, which was unsettling.
- 1.4 Escort staff generally contacted reception in advance to give an estimated time of arrival and invariably arrived during the core day. Reception was closed at lunchtime and anyone arriving over lunch was offered a meal and held in a holding cell until staff returned.

#### Recommendation

1.5 Prisoners should be given toilet breaks at least every 2.5 hours.

## First days in custody

#### **Expected outcomes:**

Prisoners feel safe on their reception into prison and for the first few days. Their individual needs, both during and after custody, are identified and plans developed to provide help. During a prisoner's induction into the prison he/she is made aware of prison routines, how to access available services and how to cope with imprisonment.

1.6 There was no published reception and first night strategy, but procedures were suitable, relaxed and efficient and most prisoners felt safe on their first night. Prisoners were

appropriately given responsibility for completing their own induction based on a comprehensive programme of presentations, interviews and meetings. A prisoner mentor was available to support them.

## Reception

- 1.7 Reception was bright, clean and well organised. Staff were polite and relaxed, introduced themselves to prisoners and welcomed them to Shepton Mallet. The prisoner orderly based in reception was a trained Insider and Listener and offered information and support. Reception procedures were efficient and prisoners were quickly processed and taken to their residential wing. In our survey, significantly more prisoners than the comparator said they had been well treated in reception, including being searched respectfully.
- 1.8 After being booked in, prisoners were interviewed to establish any immediate needs or concerns and to complete a cell-sharing risk assessment (CSRA). Interviews took place at the front desk and any other prisoners in the area at the time were asked to remain in the waiting room to allow privacy. New arrivals were given a comprehensive induction booklet. Additional information booklets and leaflets about the prison were displayed in the main reception area and waiting room. Most prisoners arrived with all their property, which was searched and logged while they were in reception. A health care screening interview took place in the health care department.

### First night

- 1.9 There was no published reception and first night strategy or policy, but first night procedures were well understood and delivered by staff. Although some prisoners said they had felt anxious about sharing a cell for the first time in some years, 87% in our survey said they had felt safe on their first night.
- 1.10 There were no designated first night cells and new arrivals were located wherever there were spaces. Prisoners were interviewed on their residential wing by a member of wing staff who checked their CSRA, gave information about the prison, including support mechanisms such as Listeners, explained the rules and routines and asked prisoners to sign various compacts. A checklist was used to ensure that staff covered all the information required. Prisoners were offered a free three-minute telephone call to let family or friends know of their arrival. They were also given a reception letter and visiting order, together with information about visits arrangements. Any staff concerns about a prisoner were passed to night staff.

#### Induction

- 1.11 Prisoners were given responsibility for completing their own induction, which comprised a series of scheduled presentations, individual interviews and meetings. Details were set out in the induction booklet, which staff in the various areas signed when prisoners completed a section. The process was explained on the first day, after which prisoners were expected to attend scheduled sessions and make appointments with the staff indicated. A mentor was available to help prisoners through the process. Progress was monitored by staff, who offered additional help and support if required.
- 1.12 The process took one to two weeks to complete. Prisoners then attended an induction board with the residential manager, who checked they had completed each section. In our survey,

significantly more prisoners than the comparator said induction had covered everything they needed to know.

# Section 2: Environment and relationships

## Residential units

#### **Expected outcomes:**

Prisoners live in a safe, clean and decent environment within which they are encouraged to take personal responsibility for themselves and their possessions.

- 2.1 Prisoners and staff were concerned about proposals to increase the population by almost 40% in a prison with a restricted environment. The physical environment was clean and limited facilities were well used. The central yard had been significantly improved.
- 2.2 The prison had been asked to take an additional 70 prisoners and submit proposals for how this would be done. Many prisoners were unsettled by the proposed change, which would require many more cells to be shared and increase the pressure on residential facilities. Given the age and circumstances of many of the life-sentenced prisoners, it was inappropriate to require many more to share and the overall restricted environment of the prison made it unsuitable to hold the additional numbers suggested.
- 2.3 New arrivals who had previously had a single cell for many years were expected to share at Shepton Mallet for about a year, which was too long. The prison tried to use only larger cells for two prisoners, but some cells identified for sharing were too small. Proposals to designate a further four cells for sharing on B wing would create very cramped conditions on that wing particularly.
- 2.4 Cells and communal areas were light, but there were acknowledged problems with the heating system and prisoners said cells could get too hot or too cold. Cell temperatures were monitored when there were complaints and the problem was well managed. Prisoners had privacy keys for their cells, most of which were clean and had been personalised with photographs, bedding and curtains. Most contained enough furniture, but shared cells were not always large enough to allow separate chairs for each prisoner. They were adequately decorated and notice boards complied with the offensive displays policy. Views from cell windows were restricted to the outer perimeter wall.
- 2.5 Each cell had a television and prisoners sharing a cell had one each, which they watched using headphones. The electrical system could not support kettles in each cell. Flasks were not provided and prisoners had to buy their own. Hot water boilers were on the ground floor so prisoners without flasks risked spilling hot water.
- 2.6 The layout of the prison limited access for prisoners with mobility problems. There were no suitable facilities for prisoners in wheelchairs and anyone with poor mobility was located on the ground floor. (See also section on diversity.)
- 2.7 Most wings had a few tables and chairs, but not enough for all prisoners to eat meals together. A classroom and meeting room on D wing was sometimes used as a dining room. Some prisoners chose to eat in the garden area in good weather. Cooking facilities comprised toasters, microwaves, sandwich makers, slow cookers and fridges.

2.8 Notices on wing boards were clearly displayed and up to date, and printed on yellow paper to assist prisoners with dyslexia. All wings had a range of board and table games and communal sitting areas. There were enough telephones and these were in booths. Three wings flanked an enclosed central yard used for exercise, association and PE. This had been considerably improved to include a pond and garden area.

## Hygiene, clothing and possessions

- 2.9 Internal and external areas were kept very clean and there were enough supplies of mops, brushes and cleaning materials. In our survey, many more prisoners than the comparator said they could get cleaning materials each week.
- 2.10 Single cells had modesty boards to screen toilets, while toilets in shared cells were screened by a full-length curtain. Prisoners had good access to showers, but only those on D wing were fully enclosed in cubicles. Toiletries were available from wing offices on request.
- 2.11 There was no prison barber, but the prison was trying to secure the services of a hairdresser from the community.
- 2.12 All prisoners could wear their own clothes and there was a good supply of clean prison-issue clothing if required. Some prisoners chose to wear prison-issue clothes at work. There were no wing laundry facilities, but a central laundry arrangement worked well. Prisoners were issued with separate laundry bags for private and prison clothes. Prison clothes and bedding could be exchanged weekly and were washed at HMP Leyhill. Personal clothes and bedding were washed on the premises. Irons and ironing boards were provided on each wing. Mattresses were date marked on issue and replaced when required.
- 2.13 The facilities list was appropriate and frequently discussed at the prisoners' representatives meetings. Property levels were overseen by officers and rules were applied fairly, taking into account the particular needs of life-sentenced prisoners. Prisoners had easy access to stored property.

#### Recommendations

- 2.14 Prisoners should not be required to share cells designed for one.
- 2.15 More prisoners should have the opportunity to eat communally.
- 2.16 Prisoners should be able to use all showers in private.

## Housekeeping point

**2.17** Prisoners without flasks should be given one.

## Staff-prisoner relationships

#### **Expected outcomes:**

Prisoners are treated respectfully by staff, throughout the duration of their custodial sentence, and are encouraged to take responsibility for their own actions and decisions. Healthy prisons should demonstrate a well-ordered environment in which the requirements of security, control and justice are balanced and in which all members of the prison community are safe and treated with fairness.

- **2.18** Relationships between staff and prisoners were positive. Prisoner consultation arrangements were good.
- 2.19 Relationships between staff and prisoners were very good. Staff were responsive to prisoners' requests for assistance and clearly sought to help them whenever possible. In our survey, 90% of prisoners, significantly better than the comparator of 74%, said staff treated them with respect.
- 2.20 A monthly wing representatives meeting was chaired by a residential manager. It was well structured, with a very good standing agenda that focused on safer custody and diversity, with residential facilities, the shop and catering issues also discussed. Issues raised were followed up at subsequent meetings until completed and demonstrated to prisoners that their views were listened to and taken into account.

## Personal officers

#### **Expected outcomes:**

Prisoners' relationships with their personal officers are based on mutual respect, high expectations and support.

- 2.21 The personal officer policy covered all key areas. Most prisoners said they had a personal officer and found them helpful. Wing files entries were regular, but those relating to sentence planning were often very general.
- 2.22 In our survey, 97% of prisoners, significantly better than the comparator of 74% and than the 52% in 2005, said they had a personal officer. Many more than the comparator also said they found them helpful.
- 2.23 The personal officer policy outlined all key tasks for personal officers, with an emphasis on helping prisoners achieve sentence planning targets and reducing their risk of reoffending. To a certain extent, this was reflected in the regular entries found in most wing files, although entries relating to sentence planning often amounted to little more than 'complying with sentence planning targets'. Records therefore did not provide a clear indication of progress over time. Most also contained entries about important areas such as contact with family and friends, activities and interactions with staff and other prisoners, but these were also often too generic and there had been a noticeable decrease in regularity and quality since paper records had been replaced by the new electronic P-NOMIS system.

## Recommendation

2.24 Wing file entries by personal officers should detail progress in relevant areas, including against sentence planning targets.

# Section 3: Duty of care

## Bullying and violence reduction

#### **Expected outcomes:**

Everyone feels safe from bullying and victimisation (which includes verbal and racial abuse, theft, threats of violence and assault). Active and fair systems to prevent and respond to violence and intimidation are known to staff, prisoners and visitors, and inform all aspects of the regime.

- 3.1 The small size of the prison, the settled population and good relationships contributed to making Shepton Mallet a generally safe prison. There was little evidence of violence or bullying, but there were appropriate structures and procedures to respond when incidents occurred.
- 3.2 Shepton Mallet was one of the safest category C prisons we have inspected as most of the largely settled population had a clear investment in what the prison had to offer in helping them progress through their sentence in a relaxed environment. There was very little evidence of overt bullying or violence, which was commendable given the integrated population that included a high number of sex offenders and older prisoners. Although reports of violent incidents were rare, there were appropriate structures and procedures to report and respond to potential incidents, with effective links between security and safer custody. Three security information reports in the previous six months had included an element of violence, but all of a very minor nature.
- 3.3 An up-to-date violence reduction policy, reviewed in October 2009, outlined a two-stage strategy, but formal anti-bullying procedures had last been required in June 2009. Anti-bullying observation booklets had been introduced and could be opened for both suspected bullies and victims. In the absence of recorded incidents of violence or bullying, a violence reduction action plan usefully focused on ways to promote safety.
- 3.4 A senior officer acted as the violence reduction coordinator. He saw all new arrivals as part of their induction. A violence reduction meeting met monthly, chaired by the deputy governor and attended by representatives from relevant departments and a Listener. The coordinator had attended only a few meetings due to shift patterns and instead provided a monthly report, but there were few actual incidents or indicators of violence to discuss.
- 3.5 In our survey, 30% of prisoners, similar to the comparator, said they had felt unsafe at some time, but only 10% said they felt unsafe at the time of the survey. Thirty-two per cent, a relatively high proportion, said they had been victimised by another prisoner, but this appeared to relate to insulting remarks and issues about offences, which was not unusual in an integrated environment. The small size of the prison supported safety. Staff were aware of prisoners' individual circumstances and our survey indicated that significantly more than the comparator were prepared to report to staff any victimisation they experienced.
- 3.6 The prison had conducted a short survey of prisoners' perceptions of bullying and violence in September 2009. Of the 38 prisoners who responded, only three said they felt unsafe, but boredom was one of the main factors identified as an underlying issue associated with trouble. Prisoners were asked about safer custody at the monthly wing representatives meeting and

- locally produced safer custody posters were being designed in cooperation with the education department.
- 3.7 There was no formal training in anti-bullying or violence reduction, although there were plans to develop guidance following focus groups with staff.

## Self-harm and suicide

#### **Expected outcomes:**

Prisons work to reduce the risks of self-harm and suicide through a whole-prison approach. Prisoners at risk of self-harm or suicide are identified at an early stage, and a care and support plan is drawn up, implemented and monitored. Prisoners who have been identified as vulnerable are encouraged to participate in all purposeful activity. All staff are aware of and alert to vulnerability issues, are appropriately trained and have access to proper equipment and support.

- 3.8 There were low levels of self-harm and good procedures to care for the relatively few prisoners assessed as at risk. In our survey, nearly all prisoners said they had a member of staff they could turn to if they had a problem.
- 3.9 There had been no self-inflicted death since 2003. Levels of self-harm were very low, with just two incidents involving two prisoners in the previous 12 months. A small number of prisoners were put on open assessment, care in custody and teamwork (ACCT) documents, some on several occasions and mostly for short periods. In the previous 12 months, 15 ACCTs had been opened on eight prisoners. No ACCTs were open at the time of the inspection. A senior officer nominally allocated eight hours a week for this role acted as the safer custody coordinator and in practice fitted in this work around her other tasks.
- 3.10 Procedures were very good, with some good quality assessments. ACCT assessors were drawn from officers and non-uniform staff. Most ACCTs included regular management checks and reviews were mostly multidisciplinary, often involving offender supervisors, chaplaincy and mental health workers. Post-closure reviews were routinely completed. There was generally good support from staff, with some counselling provided through health care or the chaplaincy. Staff were aware of prisoners' individual circumstances and 92% of prisoners in our survey, against a comparator of 73%, said they had member of staff they could turn to for help if they had a problem.
- 3.11 A gated cell in the segregation unit was used should a prisoner at risk need constant supervision. While not an ideal location, the cell was very rarely used, the last time being 18 months previously. Shepton Mallet did not have 24-hour health care cover, so any prisoner identified as at high risk of self-harm was transferred to a prison with appropriate resources.
- 3.12 The safer custody team met quarterly, chaired by the deputy governor and attended by representatives from relevant departments. The meeting covered a range of issues and the safer custody coordinator presented a report and commented on the quality of ACCTs. Listeners attended the safer custody meeting but, to preserve the confidentiality of prisoners discussed, not the anti-bullying meeting which usually followed immediately afterwards. Samaritans reported on the Listener scheme. Good attention was given to levels of training in ACCT procedures. Progress on a continuous improvement plan, which incorporated many of the Inspectorate's expectations, was monitored.

- 3.13 Four trained Listeners met fortnightly with local Samaritans. Listeners recorded all contact with prisoners. The few formal requests for Listeners were often related to prisoners' frustration about their lack of progress in their sentence. The Listeners' report indicated that staff allowed prisoners to see Listeners at night and that the well-equipped Listener suite had been used occasionally. Prisoners could call Samaritans free of charge from the landing telephones and portable telephones with a direct line to them were available, but rarely used.
- 3.14 Some staff had been trained specifically to respond to incidents of self-harm. All officers carried ligature knives and both permanent night senior officers had been trained in emergency aid in the workplace, although the two permanent support grades had not. Cell bells were checked daily and more than the comparator said they were usually answered within five minutes. A recent notice to staff had been issued outlining procedures for opening cells at night when there was immediate danger to life.

## Applications and complaints

#### **Expected outcomes:**

Effective application and complaint procedures are in place, are easy to access, easy to use and provide timely responses. Prisoners feel safe from repercussions when using these procedures and are aware of an appeal procedure.

- 3.15 Prisoners in our survey were positive about applications. Responses to complaints were mostly good, but complaints were not logged on receipt and it was not possible to determine how many were subsequently withdrawn.
- 3.16 There was a good system to track application forms. All applications were logged, with a brief description, and the answer was also recorded along with any further action taken. Most prisoners said issues were usually resolved informally. Wing staff followed up any applications that had not been returned by the relevant department within seven days. In our survey, significantly more prisoners than the comparator said applications were dealt with fairly and promptly.
- 3.17 There were few complaints, with an average of 16 a month in 2010. There were no particular trends, apart from an increase in complaints about prisoner monies in March 2009, which coincided with the introduction of P-NOMIS. Responses were mostly good and dealt with the issue raised. Prisoners in groups and individually said they felt pressured not to complain as this would be regarded negatively by prison management. In our survey, 36%, significantly more than the comparator of 24%, said they had been made or encouraged to withdraw a complaint. Complaints were not routinely logged on receipt and managers instead discussed with prisoners any they believed need not be submitted. Some prisoners perceived this as being asked to withdraw their complaint. As they were not logged on receipt, it was not possible to determine how many complaints had been withdrawn and whether the reasons for doing so were legitimate.

#### Recommendation

3.18 All complaints should be logged immediately on receipt. The reason why a complaint is subsequently withdrawn should be clearly recorded, with the signed agreement of the prisoner.

## Legal rights

#### **Expected outcomes:**

Prisoners are told about their legal rights during induction, and can freely exercise these rights while in prison.

- 3.19 All prisoners met a legal services officer as part of their induction, but there were few requests for legal services.
- 3.20 Two trained legal services officers saw all new arrivals during induction, but most had already resolved any outstanding legal issues. There was little demand for legal services and most requests were for help to find a solicitor to deal with parole issues or routine civil matters. Legal visits took place on Tuesdays and Thursdays and there were adequate facilities.

## Faith and religious activity

#### **Expected outcomes:**

All prisoners are able to practise their religion fully and in safety. The chaplaincy plays a full part in prison life and contributes to prisoners' overall, care, support and resettlement.

- 3.21 The chapel area provided good facilities, but its location limited access for prisoners with mobility difficulties. The chaplaincy team catered for all main faiths and provided a good range of faith-based and secular activities.
- 3.22 Chaplains saw all prisoners during induction and information about the chaplaincy and religious services and activities were included in the induction booklet. A separate chaplaincy booklet was also issued to new arrivals. The chaplaincy team was well integrated into prison life. The team organised and facilitated a number of faith-based and secular activities as well as attending meetings and assessment, care in custody and teamwork reviews, visiting prisoners in segregation and organising the prison visitors scheme. They were also involved in supporting prisoners and their families experiencing bereavement or life-limiting illness.
- 3.23 The chapel area comprised a bright and spacious Christian chapel, a Muslim prayer room, a world faith area, a social area and the chaplains' office. It was open throughout the core day and prisoners could visit any time to speak to chaplains, pray or contemplate or relax in the social area. It was on the second floor in the upper part of the prison and had no lift, so prisoners with mobility difficulties found it difficult and sometimes impossible to get to. In our survey, only 50% of prisoners with a disability, compared to 70% of other prisoners, said they could speak to a religious leader of their faith in private if they wanted to.
- 3.24 The chaplaincy team included the full-time coordinating Anglican chaplain and part time sessional chaplains for most faiths. There was a comprehensive programme of services for all main faiths and prisoners could attend services without applying in advance. A Christian service was held every Sunday and a Roman Catholic service every Saturday, with a Mass three times a month. The Muslim chaplain was unable to lead Friday prayers due to other commitments, but Muslim prisoners could hold a Friday prayer meeting and the Muslim chaplain ran a study group every Tuesday. There were also weekly meetings for Quakers and two meetings a month for Buddhists. Chaplains from other faiths visited as required.

#### Recommendation

3.25 Prisoners with disabilities should have appropriate access to faith facilities.

## Substance use

#### **Expected outcomes:**

Prisoners with substance-related needs, including alcohol, are identified at reception and receive effective treatment and support throughout their stay in custody. All prisoners are safe from exposure to and the effects of substance use while in prison.

3.26 Shepton Mallet was implementing the integrated drug treatment system, but demand for clinical substance misuse services was likely to be extremely low. Mandatory drug testing figures and finds indicated an almost drug-free prison.

## Clinical management

- 3.27 Shepton Mallet only accepted prisoners at the end of a detoxification regime. Under the integrated drug treatment system (IDTS), comprehensive clinical management protocols had been developed, but there would be little demand for opiate substitute treatment unless the population changed. Exceptions might be those returning from open conditions and prisoners who had relapsed while in custody, but it was difficult to see how the investment was justified.
- 3.28 Additional funding had allowed for the appointment of a registered mental health nurse and a health care assistant, as well as an extra two days of input from the counselling, assessment, referral, advice and throughcare (CARAT) service. An existing band 6 nurse and a GP were completing part 2 of the Royal College of General Practitioners training. Health services already stocked controlled drugs and an additional gate was being installed to create a separate drug administration area.
- 3.29 The CARAT worker was due to relocate to the health services department. He liaised with mental health nurses about dual diagnosis clients and attended multi-agency meetings to plan and coordinate the care of prisoners with complex needs. Secondary mental health services were limited and there was no counselling service for those who had experienced previous sexual abuse (see section on health services).

## Drug testing

- 3.30 There was little evidence of illicit drug use, with no positive tests in April and May 2010. The 2009/10 random mandatory drug test (MDT) rate averaged 1.3% against a target of 2%, representing only three positive tests. In the same period, six suspicion tests had been conducted with one positive result. Risk assessment tests had all been negative.
- 3.31 The one drug find in the previous six months was for cannabis. In our survey, 20% of prisoners, against a comparator of 35%, said it was easy to get illegal drugs and this seemed to relate to the occasional diversion of prescribed medication. Prisoners said they had 'too much to lose' at this stage of their sentence.

- 3.32 The MDT programme was staffed part time by wing officers and all targets were met. Testing facilities were satisfactory. A detailed supply reduction action plan had been developed. The head of custody attended drug strategy meetings and there was good information sharing between departments.
- 3.33 Prisoners were expected to be drug free and were asked to sign compliance testing compacts that were linked to their incentives and earned privileges status. They received a substance testing passport and any positive results were shared with the CARAT worker and the offender management unit. Testing was undertaken by reception officers using a dedicated testing suite, but mobile testing took place for prisoners with disabilities. Appropriate procedures were followed. Prisoners were tested once a month, with a frequent testing scheme for those who had tested positive on return from open conditions. The last positive result had been recorded six months previously.

# Section 4: Diversity

#### **Expected outcomes:**

All establishments should be aware of and meet the specific needs of minority groups and implement distinct policies or action plans, which aim to represent their views, meet their needs and offer peer support to ensure all prisoners have equal access to all facilities. Multiple diversity needs should be recognised and met.

- 4.1 There was no diversity policy or action plan. The diversity committee covered most areas of diversity but the meeting focused on race equality issues and discussions on other strands were limited.
- 4.2 There was no overarching diversity policy or action plan. There were policies on race equality, foreign nationals and disability and an action plan for race equality and older prisoners, but not for religion, sexuality or transgender.
- 4.3 A diversity meeting was held bi-monthly, chaired by the governor and well attended by managers from different areas of the prison, prisoner representatives and a representative from Somerset Race Equality Council. The terms of reference included race equality, equal opportunities and disabilities, but did not mention other diversity strands. The meeting covered race equality issues and the promotion of cultural diversity in some detail, but discussion about other diversity issues were often limited to identifying the number of prisoners falling into different groups.

#### Recommendation

4.4 Each strand of diversity should be covered by an up-to-date policy and action plan overseen by the diversity committee which would monitor quality of outcomes.

## Race equality

- 4.5 Only about 12% of prisoners were from black and minority ethnic backgrounds and their perceptions of prison were similar to those of white prisoners. Race equality and ethnic monitoring data did not reveal any areas of concern. There had been few racist incident reports. Investigations were thorough, timely and independently quality checked. Prisoners with a history of racist offending or behaviour were identified. A programme of cultural events promoted the racial, religious and cultural diversity of the population.
- 4.6 Only 22 prisoners, about 12%, were from black and minority ethnic backgrounds. In our survey, their responses were similar to those of white prisoners across most areas. Prisoners we spoke to did not consider racial discrimination a significant issue.
- 4.7 Race equality was managed by the diversity committee, whose members, including prisoner representatives, had been given race equality action team (REAT) training. The names and photographs of diversity committee members were displayed around the prison. The race equality officer (REO), a representative from Somerset Race Equality Council, the Independent Monitoring Board and all prisoner diversity representatives were members of a race equality sub-committee, which met quarterly. The diversity committee covered promotion of cultural

- diversity, reviewing racist incident report form (RIRF) investigations, monitoring progress against the race equality action plan and scrutinising ethnic monitoring data. The indicators monitored rarely showed any discrepancies, but any highlighted were investigated. The ethnic monitoring data for the previous six months indicated no areas of concern.
- 4.8 The residential manager acted as the REO. He was supported by two deputies. Most staff had been trained in diversity and 69% had received the updated training package 'Challenge it, Change it'.

#### Managing racist incidents

- 4.9 RIRFs were freely available on residential units and in other areas of the prison. All investigations were conducted by the REO. There had been eight incidents to date in 2010 and five of the eight related to one prisoner on one day after he had been challenged about playing music loudly. All investigations were thorough and most were completed within the specified timescales. The governor checked and signed all investigations and a representative from Somerset Race Equality Council quality checked them all for quality.
- 4.10 All new arrivals met the REO and completed a diversity course during induction. The REO was concerned about the racist attitude of one prisoner, who was effectively monitored and challenged. There were no formal interventions for prisoners who expressed racist views. A course had been developed nationally to challenge low-level racist behaviour and the prison planned to identify a member of staff to deliver it.

#### Race equality duty

- 4.11 The prison had completed a number of race equality impact assessments in 2008. These were satisfactory, but had not been reviewed. No further assessments had been completed as the Prison Service now required equality impact assessments covering all aspects of diversity. The prison had not completed any of these assessments, but had set a timetable for completion of one on disabilities and another on older prisoners in 2010.
- 4.12 Prisoners convicted of a previous or current racially aggravated offence or with a history of racist behaviour were identified. Details were available to all staff on the intranet and noted on cell-sharing risk assessments and risk minimisation plans.
- 4.13 Racial, religious and cultural diversity were promoted through a range of programmed events. These were planned and organised by a monthly cultural awareness planning meeting that included prisoner representatives. Recent events included a Burns night celebration, Holocaust Memorial Day and a Gypsy, Roma and Travellers month. A musical celebration had also been held as part of a celebration of British culture in June 2010 and copies of a 'Faces of Britain booklet promoting cultural diversity were available in a number of areas of the prison.

### Religion

- 4.14 The chaplaincy department routinely monitored prisoners' religious needs, but the prison did not monitor equality of treatment by religion.
- 4.15 There was no policy or action plan describing how the religious needs of prisoners would be met, but the chaplain had produced an action plan for 2010/11 setting out current services and

including some targets. The chaplaincy regularly reviewed the population by religion to ensure that services provided were appropriate, but there was no monitoring of equality of treatment by religion.

## Foreign nationals

- 4.16 There was no formal foreign national policy, but the needs of the few foreign national prisoners were met individually by their offender supervisors.
- 4.17 There were nine foreign national prisoners. All could speak English, although three did not have English as their first language. There was no formal foreign national policy and needs were adequately managed individually by offender supervisors. The last needs analysis had been conducted 18 months previously, but no additional foreign national prisoners had arrived at Shepton Mallet since then. There was no foreign national coordinator, although one was due to be identified to ensure compliance with Prison Service quality assurance baselines. Foreign national issues were a standing agenda item at the diversity and race equality meeting.
- 4.18 Foreign national prisoners said their needs were met and they were supported by staff. One prisoner whose first language was Punjabi and whose command of English was reasonable said he did not always fully understand more complex conversations, such as at sentence planning boards. Telephone interpreting services had been used only once to support him earlier in 2010.

#### Recommendation

4.19 Professional interpreting services should routinely be offered to prisoners whose first language is not English when sentence planning, parole and other more complex issues are discussed.

## Disability and older prisoners

- 4.20 There was a comprehensive policy document and excellent systems to identify and support prisoners with disabilities. The disability liaison officer (DLO) kept a register of all prisoners with disabilities and carried out individual assessments of their needs and some good adaptations and aids had been provided. There was a short older prisoners' policy and action plan. The prison was working with voluntary organisations to provide appropriate services and activities. Retired prisoners were unlocked during the day, but retirement pay was inadequate.
- 4.21 A detailed policy document set out a policy statement, detailed how the needs of prisoners with disabilities would be indentified and met and provided a useful list of sources of help and support. There was no accompanying action plan and discussion of disability at the diversity committee was mostly restricted to identifying the number of prisoners on the register.
- 4.22 New arrivals were asked to complete a form in reception to indicate if they considered themselves to have a disability, were asked again about any disability during the health care screening interview and met the disability liaison officer (DLO) during induction. Prisoners could also self-refer to the DLO at any time and, with a prisoner's permission, health care staff informed the DLO of any emerging disability issues. The DLO kept a register of prisoners with disabilities, which was available to all staff on the intranet. In our survey, 28% of prisoners said

- they had a disability, while the prison register indicated 23.5%. The DLO was committed and well organised, but had to no profiled time to carry out the role.
- 4.23 The DLO assessed the individual needs of every prisoner with an identified disability, identified any support or adaptations required and met fortnightly with health care staff to discuss individual prisoners. Health care staff and occupational health professionals contributed to the assessment process where appropriate. Assessments were regularly reviewed, although some were overdue. The prison had made adjustments and provided aids when required including providing a hearing loop for use at parole boards and other meetings, grab bars in cells and folding chairs on the stair landings where prisoners could stop and rest.
- 4.24 All prisoners with disabilities who might need help in an emergency had a readily accessible personal emergency evacuation plan. Older prisoners and those with disabilities or medical conditions could also have alarms to summon help in an emergency. These were linked to pagers held on each wing and in the control room, which indicated the name and location of the prisoner activating his alarm. We tested the system and received a very prompt response.
- 4.25 There were plans to introduce an accredited NVQ course to train prisoners to act as carers while in prison, although it was recognised that they were unlikely to be able to use such skills to gain employment after release. Prisoners who could not work due to their disability or were retired were unlocked during the day. There was no formal consultation with prisoners with disabilities or monitoring of equality of treatment.
- 4.26 The older prisoners' policy was short and written primarily from a health care perspective. It referred just to prisoners over 60 and did not clearly set out how the needs of prisoners over 50 years of age would be identified and met. The related action plan contained more detail about the services available.
- 4.27 A volunteer, healthy living coordinator and two healthy living workers from Age Concern for Older Offenders in Prison (ACOOP) worked in the prison three days a week. They worked closely with prison staff and other volunteer groups to provide a reasonable and improving range of activities for older prisoners. These included a discussion group, a chair-based exercise class and craft activities. ACOOP held regular older prisoner meetings with prison staff, but prisoner representatives did not attend and consultation arrangements with prisoners were at an early stage. ACOOP had recently started an older prisoners' consultative group and one meeting had taken place involving three prisoners.
- 4.28 Prisoners of retirement age were not required to work. Many older prisoners chose to work to keep active and increase their income. Retirement pay was £3.50 a week, out of which between 50 pence and £1 was deducted for the television. This did not leave enough to enable prisoners to keep in touch with their family and friends and buy basics.
- 4.29 A list of older prisoners was available to all staff. Seventy-two prisoners were over 50 years of age. The DLO had a good relationship with ACOOP and identified older prisoners who might require support and assistance. During cold weather, older prisoners had been offered thermal underwear and additional clothing and bedding. Any prisoners with age-related impairments were treated as having a disability and assessed by the DLO.
- **4.30** Some staff had received mental health awareness training, but this did not specifically cover issues often associated with old age, such as dementia. ACOOP was developing a training package on mental health awareness for older prisoners.

4.31 There was no monitoring of equality by age, but in our survey, prisoners aged 50 and over reported similarly to or more positively than other prisoners in most areas.

#### Recommendations

- 4.32 There should be a forum where prisoners with disabilities can discuss issues and concerns and to help ensure equality of treatment.
- 4.33 Retired prisoners should not be charged for their television and should receive sufficient retirement pay to meet the needs of those without another source of income.

### Good practice

4.34 Prisoners who might have difficulties reaching their cell bell or raising the alarm in an emergency were issued with pendant alarms.

#### Sexual orientation

- 4.35 There was no strategy for preventing and dealing with discrimination on the basis of sexual orientation and no policy or action plan for supporting and meeting the needs of homosexual and bisexual prisoners.
- 4.36 In our survey, 6% of prisoners identified themselves as homosexual/gay or bisexual. Beyond the publication of an equal opportunities policy, there was no strategy for preventing discrimination on the grounds of sexual orientation or for dealing with it when it occurred. However, only 1% of prisoners said they had been victimised by other prisoners as a result of their sexuality and 2% said they had been victimised by staff. Gay prisoners we spoke to said they rarely experienced discrimination and that Shepton Mallet was a significantly more tolerant place than other prisons.
- 4.37 There was no policy or action plan for this area and no formal or informal support networks within or outside the prison. The diversity manager recognised this as an unmet need and had started informally consulting gay prisoners to identify what support they would like.

# Section 5: Health services

### **Expected outcomes:**

Prisoners should be cared for by a health service that assesses and meets their health needs while in prison and which promotes continuity of health and social care on release. The standard of health service provided is equivalent to that which prisoners could expect to receive in the community.

There was good access to health services and prisoners were satisfied with the care they received. Access to all clinics was good and a wide range of visiting health professionals supported in-house services. Mental health services were limited to nurses and the GPs as there was no psychiatrist input. Staff were well trained and highly motivated and there was a high level of mutual respect between staff and patients. Pharmacy services were supply-only and there were delays in prisoners receiving medication, which caused some frustrations. Dental services were very good and the waiting list was short.

### General

- 5.2 Health services were commissioned by Dorset Primary Care Trust (PCT) and provided by Somerset PCT which was about to take over the commissioning. The health care manager had completed a modified health needs analysis within the previous year and this had been followed by a PCT corporate business and action plan for 2010/11. Commissioning arrangements were due to change imminently with a new provider taking over. The Dorset and Somerset prison health partnership board met quarterly and was attended by the governor. The health care manager did not meet formally with the governor and was not a member of the prison senior management team. All communication between health care and the governor was through a third party, which risked unintentional misrepresentation.
- 5.3 A good range of Department of Health quality and regulatory frameworks and publications was accessible to staff. For most prisoners, access to health services was equivalent to that found in the community, but there was no current focus for older prisoners as the appointed nurse had recently left.

### Environment

- The health care department was a reasonable size, bright and clean, with a wide range of easily accessible health promotion material. Treatment, office and clinical areas were very clean and generally tidy. The compact dental surgery contained sterilization equipment and the dental unit. There were no treatment rooms on residential units. One of the nurses was responsible for infection control and liaised with the PCT infection control lead. An audit had been completed in April 2010.
- Relations between prisoners and health care staff were generally good and there was a high level of mutual respect. Interpreting services were rarely required, but were available. Responses to questions about health services in our survey were mostly very positive, including that significantly more prisoners than the comparator said the care provided by the doctors was good or very good. Although equal to the comparator, responses about the quality of health care from the nurses were not as high as for other health professionals. Some prisoners said individual nurses had an 'attitude problem'. Much of the frustration centred on

delays in receiving medication and prisoners said they felt nurses were dismissive rather than trying to resolve their concerns. (See also section on pharmacy.)

### Clinical governance

- 5.6 Clinical governance arrangements included the management and accountability of staff. Staffing levels were low, with nurse and administrative vacancies covered by PCT bank and agency staff. Nursing staff had a good range of qualifications. Health care assistants were about to be employed. There was little administrative support and nurses therefore undertook many administrative tasks. GPs from a local community practice held three sessions a week on Monday, Wednesday and Friday. The out-of-hours service was provided through the same GP practice and there were no reported concerns with this. Staff professional, PCT and Prison Service mandatory training and clinical supervision were fully supported and staff had good access to professional development courses. Team meetings were held guarterly.
- 5.7 Appropriate emergency equipment was held in a locked bag in health care, but there was no evidence that it was regularly checked and some bandages were out of date. Not all staff knew the combination of the lock.
- 5.8 Additional medical equipment was available through local NHS services. NHS publications and guidelines were readily available for reference to all health staff. There were good links with the local Health Protection Agency and appropriate management of communicable diseases.
- Clinical records were maintained on SystmOne, an electronic medical information system, and contained up-to-date comprehensive assessment and care plans. Entries were professional and appropriate. All clinical records were safely stored in accordance with Data Protection Act and Caldicott principles. Old paper clinical records were held in a separate room and could be accessed only by health care staff. Prisoners were asked to sign their agreement that, where appropriate, health staff could share information with relevant partners.
- 5.10 A quarterly patient forum was led by the health care manager and meetings were minuted. Complaints were well managed. All were logged in health care, dealt with by the health care manager and escalated to the PCT complaints manager when necessary. A new Patient Advice and Liaison Service was about to be introduced.

# Primary care

- 5.11 All new arrivals were given a comprehensive initial health screening and secondary screening carried out when indicated. Prisoners were told how to access health clinics and encouraged to participate in regular health promotion activities. Prisoners on medication were seen by the GP to review and, where appropriate, change any medication.
- 5.12 Health care was open from 7.30am to 5.30pm on weekdays and from 7.30am to noon at weekends. Prisoners wanting treatment went to health care at 8am and were triaged by a nurse and, when necessary, given an appointment to see the appropriate health professional. Each nurse used a different triage system, which meant patients could receive inconsistent advice.
- 5.13 Chronic disease management was good and a register was held on SystmOne. There were no formally trained chronic disease nurses, but lead nurses had been identified for prisoners with hypertension, diabetes and asthma. Some had attended short courses in a particular condition and were supported by community specialist nurses.

5.14 Other visiting health professionals included a physiotherapist and optician, who held regular clinics. Access to podiatry services was demand-led. The department worked well with gym staff. The non-attendance rate for all clinics was very low and there were no lengthy waits for any clinic appointments. Condoms were available from the health care waiting room and health protection information was always offered with them.

### Pharmacy

- 5.15 Prisoners on long-term medication were unhappy with the pharmacy service. Prescription items were ordered daily, but returned only twice a week and there were often delays in prisoners receiving their medication, particularly with repeat prescriptions. Medicines were ordered and recorded through SystmOne, which took longer to record medicine management than the paper-based system. There could be up to 25 prisoners attending for medication and reporting sick each morning, but no discipline staff supervised to help ensure medication was not diverted. The pharmacist visited every six months and the technician every two months. Neither saw prisoners and we were told there had been little attempt to use this facility when it had been encouraged previously.
- 5.16 Medicines were provided for up to four weeks in possession. Prescriptions were faxed to the pharmacy, but there was no evidence that the pharmacist reconciled faxed prescriptions with the original document. Most prisoners had their medicines in possession. Those having supervised medicines up to four times a day received it at either 5pm on weekdays or 9.45am at weekends, which meant they had to have it in possession to take later. Prescriptions for patient group directions or special sick medicine were not always faxed to the pharmacy, but the pharmacist did have access to all clinical records through SystmOne.
- 5.17 The small pharmacy room was at the entrance to health care. All medicine cabinets were lockable and medicines were stored neatly and appropriately. Thermolabile products were not stored correctly and although maximum and minimum refrigerator temperatures were recorded daily, staff did not know what action to take when the temperature fell outside the accepted range. Some pharmacy reference books were out of date. Medicines were administered through a hatch to the main health care waiting room and privacy was generally good.
- 5.18 Out-of-hours medicines were available to health care staff under authority of the out-of-hours medicine policy, but the pharmacist did not regularly audit removed items. Stock levels were reviewed and items replaced by nursing staff, but there was no evidence that this was audited by the pharmacist.
- 5.19 Special sick medicines included paracetamol and ibuprofen. Supplies were recorded on SystmOne. Patient group directions were in place, but not always relevant, with some medicines relating only to women.
- 5.20 The drugs and therapeutics committee met every four months, attended by the pharmacist. Pharmacy policies included in possession, special sick and out of hours.
- 5.21 The management of controlled drugs was good, but the controlled drug register did not fully comply with current regulations.

# Dentistry

5.22 The dentist held one session a week, assisted by a registered dental nurse, and normally saw up to 12 patients a session. Applications to see the dentist were managed by health care staff,

who prioritised the list from a triage system. There were only three names on the waiting list, with a waiting time was just five days. Initial appointments were made by the administrator and ongoing treatment was managed by the dentist. The non-attendance rate was only 3%, supported by a system where the administrator sent out reminders of appointments. Dental checks and treatment were equal to that found in the NHS and oral health information was offered individually by the dentist. The PCT infection control report was not available to us, but we were told some of its recommendations related to dentistry. There was out-of-hours provision for dental emergencies and annual leave.

### Secondary care

5.23 NHS outpatient appointments were well managed and few were cancelled due to lack of escort staff. The administrator had established good relationships with local NHS facilities and the only cancellations recently had been due to the prisoner refusing to attend. Prisoners with existing NHS appointments and selected for transfer to another prison were given the option of remaining at Shepton Mallet to attend the appointment.

### Mental health

- 5.24 Mental health needs were assessed during the first night reception screen. Two registered mental health nurses (RMN) managed a case load of 43 men. Support was offered to prisoners with a number of disorders, including anxiety, depression and panic attacks. Sixteen prisoners were identified as having dual diagnoses. There were good working relationships with CARATs. Where consent has been gained, care plans were shared with officers. The RMNs attended safer custody and violence reduction meetings. Staff assessment, care in custody and teamwork training covered some mental health issues and there was an identified focus on providing mental health awareness training.
- 5.25 There were operational policies and protocols for the mental health in-reach team. A community psychiatric nurse was available every two weeks to support prisoners with severe and enduring mental illness. Men who became actively psychotic were transferred to HMP Dorchester for 24-hour care. The regular consultant psychiatrist had left in June 2009 and the temporary replacement psychiatrist in March 2010. There had been no psychiatrist input since then. The GPs supported the RMNs, but did not have a special interest in mental health and there was no identified point of contact where GPs could get advice. This was a cause of concern for health care staff and the GPs and this gap in service needed to be addressed.
- 5.26 Counselling was very limited and there was no general or specialist counselling, a gap that needed to be addressed through an up-to-date needs analysis. The CARAT worker offered some counselling. Cognitive behavioural therapy-based work was undertaken by the RMNs, usually through workbooks and individual support. Time was used to build on previous learning where prisoners had undertaken enhanced thinking skills courses or the sex offender treatment programme elsewhere.
- Day care was not provided, although men could go to art and cookery in education if required. One of the nurses offered acupuncture and had been trained to use essential oils.

### Recommendations

- 5.28 A skill mix review should be undertaken to ensure sufficient qualified nursing and administrative staff are available to provide a comprehensive health service to prisoners.
- 5.29 Emergency equipment should be checked and recorded at least weekly and all health care staff, including the dental team, should know how to access it.
- 5.30 A documented consistent nurse triage system should be introduced.
- 5.31 The pharmacy service level agreement should include provision to ensure that prisoners receive medication on time and have regular access to pharmacy professionals.
- 5.32 Discipline staff should supervise prisoners during the administration of medicines.
- 5.33 The pharmacist should undertake regular audits of medication, including out-of-hours stock, and check faxed prescriptions regularly against the original prescriptions.
- 5.34 Consultant psychiatrist cover should be provided.

### Housekeeping points

- 5.35 The health care manager should have regular meetings with the governor through the senior management team or other appropriate venue.
- **5.36** There should be a designated lead nurse for older prisoners.
- 5.37 Out-of-date items in the emergency bag should be replaced.
- 5.38 Maximum and minimum temperatures should be recorded daily for all drug refrigerators and corrective action taken where necessary.
- **5.39** Out-of-date pharmacy reference books should be discarded.
- 5.40 Patient group directions should be reviewed to ensure they are relevant to the population.
- 5.41 The controlled drug register should comply with regulations.

# Section 6: Activities

# Learning and skills and work activities

#### **Expected outcomes:**

Learning and skills provision meets the requirements of the specialist education inspectorate's Common Inspection Framework (separately inspected by specialist education inspectors). Prisoners are encouraged and enabled to learn both during and after sentence, as part of sentence planning; and have access to good library facilities. Sufficient purposeful activity is available for the total prisoner population.

6.1 The provision of learning and skills had increased, but planning of learning and classroom efficiency were poor. Although the quality of what was provided was good, education was mostly at a low level and pay rates were also low. There were almost enough jobs, but a lot of the work was mundane. The range of accredited vocational courses was narrow, but actual pass rates were good. The library service was mostly good.

### Leadership and management

- 6.2 Leadership and management of the learning and skills provision were satisfactory and operational management was good. There had been some clear benefits from recent changes in the delivery model. The learning and skills provision was now delivered by a sole provider, which had resulted in improved communication with the prison's senior management, increased sharing of best practice and better monitoring of learners' attendance.
- A number of initiatives had been implemented to improve the provision. Literacy and numeracy were now well embedded through the individual support provided by a very experienced and motivated tutor, although there were further opportunities to engage the hardest to reach prisoners. Internet resources had been provided in the library, evening and weekend activities had increased and two vocational workshops had been established, although there was still a need for more. However, the planning and coordination of learning was insufficient in some aspects. Learners were often absent from classrooms if they needed to attend behavioural programmes or other activities and classroom efficiency was poor.
- The prison's learning and skills activities self-assessment process was under-developed and needed to be informed more accurately by the learning provider's own self-assessment report. Many of the points highlighted were insufficiently critical and the development plan did not address all the identified areas for improvement.
- 6.5 The promotion of equality of opportunity was satisfactory. The prison had worked effectively with the learning and skills provider to ensure the equitable participation of all prisoner groups in learning and skills activities. Prisoners from a minority ethnic background participated particularly well. However, the prison did not analyse data sufficiently to identify any differences in progress and achievement across groups of prisoners, particularly minority ethnic and older prisoners. Prisoners with limited mobility found it difficult to get to many activities, including the library and some PE facilities, both of which were reached by a series of steep stairs.

### Induction

Induction for prisoners who specified a preference for education activities was satisfactory and provided information on the work and courses available. All prisoners attending the education department completed an initial assessment. Prisoners' prior achievement and education background were taken into account and any training requirements and needs identified during sentence planning used to develop a detailed learning plan before prisoners were enrolled on education programmes.

### Work

- 6.7 The prison provided almost enough places for prisoners available to work. A total of 169 prisoners were employed and nine were unemployed. Prisoners were allocated to work and other activities at a weekly labour allocation meeting attended by the head of regimes and the acting regimes manager. The meeting was informed by initial assessment results, security information and information, advice and guidance interview records. Allocation was based on appropriate systems of risk assessment and sentence plans were clearly linked to individual needs. There was a wide disparity in pay, with prisoners doing contract work able to earn between £20 and £30 a week compared to only £11 for those on education and vocational training courses and relatively little use of the part-time work to provide more equitable access to the high paying jobs that were popular with prisoners. In most areas, prisoners were actively engaged in work activities, but punctuality was poor.
- 6.8 Work was available in a contract workshop packing small hardware items for an outside contractor, and the kitchen, laundry and works department, as well as wing cleaning and orderly jobs. Twenty-one prisoners were employed as wing cleaners and 39 were engaged in the contract workshop where work was mundane and repetitive. Most prisoners with jobs in the kitchen had been out of work for several months due to refurbishment. A member of the education staff provided good contextualised literacy and numeracy support in most work areas for prisoners who required it.

# Vocational training

- There were 27 prisoners on vocationally-related courses and only 78 qualifications had been gained in the previous 12 months. The range of vocational training was poor and did not offer sufficient opportunities for progression. Most courses were available only at level 1 and many prisoners had already obtained these qualifications elsewhere. Vocational qualifications were available in woodwork, painting and decorating, performing manufacturing operations, employability skills and food safety. Prisoners working in the kitchen, laundry or as wing cleaners were not able to complete a relevant vocational qualification. Some prisoners had waited a long time to get on the few courses available.
- 6.10 Much of the training and coaching was good and most prisoners who started and stayed on a course achieved their qualification. Pass rates were high at around 90% for the small number of prisoners who accessed courses. Three level 1 courses were available in woodwork, joinery and cabinet-making skills. These courses were very well structured and learners progressed well. Resources were good and prisoners demonstrated particularly good carpentry skills. Those on the level 1 painting and decorating course developed very good skills and techniques. N-Ergy, an external training company, provided an assessment service for prisoners in the workshop who followed a performing manufacturing operations qualification at level 2. However, numbers on this course were low, with only two prisoners enrolled, one of

whom had just started. Not enough use was made of the expertise of workshop staff as witnesses for evidence towards their qualification..

### Education

- 6.11 Opportunities in education were provided by A4E. Fifty-nine prisoners (31%) were enrolled on a range of education courses, but mostly at a low level. Twenty-four were following higher education distance learning programmes. The provision of literacy and numeracy in work-related areas and cells was well managed and attracted non-traditional learners. Achievement rates were high, with prisoners completing within their planned end date. All who completed their course or programme successfully gained a qualification. The retention rate varied from 50% to 100%.
- 6.12 There were 50 places at each session in the education department. Many prisoners did not arrive in good time and the numbers attending were low. A number of prisoners were withdrawn from education, some for legal visits and others for offending behaviour programmes. This lack of planning meant prisoners missed timetabled morning sessions.
- 6.13 The quality of teaching and learning was good. Prisoners generally worked at their own pace and made good progress. Coaching by tutors provided good opportunities for prisoners to discuss their progress and identify actions to bring about further learning. In the better sessions, tutors established a good working environment and developed relationships with individual prisoners that were productive and supported learning well. Resources were satisfactory and well used by prisoners, who demonstrated a clear knowledge of their use to support their learning needs.
- 6.14 In group sessions, prisoners were encouraged to participate, responded confidently through discussion and clearly enjoyed their contribution to the group activities. Tutors used a satisfactory range of teaching activities. Prisoners generally received good individual support during teaching sessions. Tutors discussed the progress prisoners had made and provided good advice and guidance for the next stage of the learning process. However, a small minority of prisoners who had difficulties making progress did not receive timely and appropriate help and guidance.

# Library

- 6.15 The library provided by Somerset County Council had recently been refurbished and now provided an ample space for books and a conducive environment for reading and information seeking. It was managed by two part-time qualified librarians supported by two orderlies. Although the library was not open in the evenings or at weekends, access by most prisoners was satisfactory over three days a week. In our survey, 70% of prisoners, against a comparator of 46%, said they went to the library at least once a week. Prisoners visited the library as part of their induction and membership had remained consistently high over the previous four years.
- 6.16 The library was adequately stocked and loss rates were low, with a good system to manage overdue books. Many prisoners studying Open University courses had benefited from interlibrary loans and there was an adequate selection of books linked to the development of work skills and industries. Stock included a limited collection of easy read and large print books and a larger range of audio books and graphic novels. Prisoners could also borrow from a comprehensive selection of music CDs and DVDs. Books in languages other than English could be ordered, but the service was not prominently advertised in the library. English

newspapers and magazines were available, as were a few newspapers in other languages or relating to different cultures. There was a good range of legal books, including Prison Service Orders and Instructions. A computerised legal reference system was available through two computers in the library.

6.17 There was an adequate range of materials to support literacy and numeracy. Reading groups had been used to promote the further development of literacy, but had recently stopped. A few literary events had also been held in the past.

### Recommendations

- 6.18 Access to activities, including the library and PE facilities, should be improved for prisoners with mobility difficulties.
- 6.19 More part-time work in the contract workshops should be offered to improve access to higher paid work.
- 6.20 A wider range of vocational training courses, particularly at level 2 and above, should be provided to encourage greater participation.
- 6.21 The prison should increase participation in education by providing courses at an appropriate level to the meet the needs of most prisoners.
- 6.22 Staff should ensure that prisoners on education programmes attend on time.
- 6.23 Offending behaviour accreditation programmes should be better sequenced to avoid disruption to education sessions.
- 6.24 The use of the library for enhanced reading activities should be consistently promoted.

# Housekeeping points

- 6.25 The performing manufacturing operations course should be better promoted and better use made of witness testimonies as evidence towards the qualification.
- 6.26 The order service for book in languages other than English should be clearly promoted in the library.

# Physical education and health promotion

### **Expected outcomes:**

Physical education and PE facilities meet the requirements of the specialist education inspectorate's Common Inspection Framework (separately inspected by specialist education inspectors). Prisoners are also encouraged and enabled to take part in recreational PE, in safe and decent surroundings.

6.27 Indoor PE provision was adequate, but the outdoor space was very small. Pass rates on PE courses were high. Sessions were often cancelled when staff were absent. Some remedial qym sessions were run.

- 6.28 Day-to-day management of the PE provision was good, with records of participation, risk assessments, safe working practices and data monitoring all appropriately maintained. The two PE officers were well qualified and worked hard to ensure that good use was made of the provision. There was insufficient cover during staff absences so PE courses and recreational programmes were often cancelled when staff were away.
- 6.29 Facilities were reasonable and included a well equipped weights room and cardiovascular exercise areas, a well maintained sports hall and a small but restricted outside sports area. Showers were clean and tidy and the PE equipment was of a high standard and well maintained. Prisoners were given PE clothing or towels if required, although most used their own.
- 6.30 A satisfactory range of vocationally accredited PE programmes was offered. Only a few courses were run, but pass rates were high at around 95%, with some courses at 100%. Five prisoners were enrolled on a level 2 fitness instructors' course and two of the three prison orderlies were on a level 2 NVQ PE leadership course. Other courses offered included level 1 and level 3 awards in health and fitness as well as courses in first aid at work, Heartstart, diet and nutrition and sports development.
- An adequate range of PE activities included specialised provision for those over the age of 45. Prisoners could have PE at least twice a week, with evening and weekend programmes provided. Timetables and course information were clearly displayed throughout the prison and wing representatives had been identified, but there was not enough active promotion of the provision. Participation was low, with around 46% of prisoners regularly accessing recreational PE, possibly reflecting the older age profile of the population. In our survey, fewer than the comparator said they went to the gym at least twice a week.
- 6.32 Programmes were provided for prisoners on rehabilitation and those with health care-related problems. PE officers had established good working relationships with health care and drug rehabilitation staff. The low numbers of accidents, injuries and assaults were monitored and recorded thoroughly.

### Recommendations

- 6.33 Adequate provision should be made to ensure consistent PE activities are run.
- 6.34 The prison should more actively promote the benefits of recreational PE to improve participation rates.

# Time out of cell

### Expected outcomes:

All prisoners are actively encouraged to engage in out of cell activities, and the prison offers a timetable of regular and varied extra-mural activities.

6.35 Time spent out of cell was good and the published regime was largely adhered to, with few cancellations of activities. The range of evening activities had been extended.

- 6.36 Time out of cell was generally good. The core day from Monday to Thursday allowed 9.5 hours a day, with nearly eight hours on Friday and just over seven hours a day at weekends. The recorded year to date figure was 9.5 hours during the week, which was only slightly optimistic. The regime was occasionally shut down or curtailed to facilitate training and prisoners were informed of the reasons in notices. The nine unemployed prisoners were usually locked up during activity periods.
- 6.37 Published unlock and lock-up times were mostly adhered to, although some prisoners complained of late morning unlocks and delays getting off the wing to attend health care or the gym. There was good free movement around the prison, with access to the improved yard. All men could spend at least an hour in the open air each day. Association was cancelled only occasionally when there were staff shortages. This was done fairly by rotation and there were two or three cancellations a month across the whole prison. Even when association was cancelled, prisoners involved in arranged activities were allowed to attend. The range of activities had been extended and included table games, chaplaincy activities, ICT classes, tapestry, choir and a prisoner-led art group. Age Concern Older Offenders Project (ACOOP) was also developing activities for older prisoners and there were visits by a range of guest speakers.

# Section 7: Good order

# Security and rules

### **Expected outcomes:**

Security and good order are maintained through positive staff-prisoner relationships based on mutual respect as well as attention to physical and procedural matters. Rules and routines are well-publicised, proportionate, fair and encourage responsible behaviour.

- 7.1 Security arrangements were sound, with dynamic security particularly good.
- 7.2 Security was managed by an operational manager and staffed by a senior officer and an intelligence analyst. Physical security arrangements were sound and appropriate. Dynamic security was good, due to positive staff-prisoner relationships. There had been 199 security information reports (SIRs) submitted in the first five months of 2010 and those we looked at were good quality. Required outcomes from SIRs were monitored by the security department, with all necessary drug tests and cell searches carried out within appropriate timescales. There had been no closed visits in the previous 12months.

### Rules

7.3 A comprehensive range of compacts signed by prisoners on arrival ensured they were aware of all relevant rules. Prisoners in groups and individually reported consistent and proportionate application of rules by staff.

# Discipline

#### **Expected outcomes:**

Disciplinary procedures are applied fairly and for good reason. Prisoners understand why they are being disciplined and can appeal against any sanctions imposed on them.

7.4 There was little use of adjudications or segregation and any use was appropriate. Use of force was very rare.

# Disciplinary procedures

7.5 There had been just 11 adjudications raised in the first six month of 2010, eight of which had been proven. Records indicated they had been conducted fairly and prisoners had been able to give their version of events in addition to any necessary mitigation. Punishments were consistent and proportionate. There was a quarterly adjudication and segregation committee meeting and the governor quality assured all adjudications.

### Use of force

7.6 There had been no use of force for 18 months. Special accommodation was not used.

### Segregation unit

7.7 The segregation unit, a two-cell facility adjacent to B wing, was rarely used. Four prisoners had been located there since September 2009. One had needed to be isolated for medical reasons and the other three had received cellular confinement punishments following adjudications. The cells were clean and in good repair and there was an appropriate published regime.

# Incentives and earned privileges

#### **Expected outcomes:**

Incentives and earned privilege schemes are well-publicised, designed to improve behaviour and are applied fairly, transparently and consistently within and between establishments, with regular reviews.

- 7.8 Almost all prisoners were on the enhanced level of the incentives and earned privileges scheme. It was not clear that such a scheme was necessary for this population of prisoners, who were well motivated to progress in their sentences.
- 7.9 Ninety-seven per cent of prisoners were on the enhanced level of the incentives and earned privileges (IEP) scheme. Most arrived on this level and anyone arriving on standard could apply for enhanced after three months. In our survey, significantly more prisoners than the comparator said they had been treated fairly in relation to the scheme.
- 7.10 Prisoners who broke the rules were given a behaviour warning, which remained on their record for three months. Review boards were triggered if anyone received three warnings within this period. Staff said this had happened to few prisoners, but records were not routinely kept so it was not possible to determine an accurate figure. In the records we were shown, decisions to downgrade or maintain regime levels appeared appropriate.
- 7.11 Staff could remember at least one prisoner who had been placed on basic in the previous 12 months and remained on that level for seven days before returning to standard. The basic regime was not overly punitive and included association on all but two evenings, with the opportunity for a shower and a telephone call. Prisoners on basic could continue to take part in the daytime regime.
- 7.12 As previously, we questioned whether the IEP scheme served the purpose of improving prisoners' behaviour when there were much greater motivators available. This was reinforced by our survey findings, where 34% of prisoners, significantly fewer than the comparator of 50%, said the different levels of the scheme encouraged them to change their behaviour.

# Housekeeping point

**7.13** Records on the number of review boards held each month should be kept and include details of board decisions.

# Section 8: Services

# Catering

### **Expected outcomes:**

Prisoners are offered varied meals to meet their individual requirements and food is prepared and served according to religious, cultural and prevailing food safety and hygiene regulations.

- Prisoners were relatively positive about the food, but less so than at the previous inspection.

  The main reason for this appeared to be the temporary arrangements during refurbishment of the main kitchen.
- 8.2 The main kitchen was being refurbished and a very small but very clean temporary kitchen was being used. The number of prisoners employed in catering had temporarily reduced to 10 working part-time, increasing to 20 working six days a week once the new kitchen opened. All prisoners were screened by health care before starting work in the kitchen and all attended an accredited induction programme. Qualifications were not available due to funding issues although two catering staff were qualified NVQ assessors.
- 8.3 Breakfast packs were handed out at lunchtime for the following morning. Lunch during the refurbishment comprised a pre-packed microwave/steam meal that, while reasonable quality, was not ideal as a daily meal. The evening meal cooked by the kitchen was of a good quality. Only limited self-catering facilities were provided (see section on residential units). Servery areas were clean and well maintained. In our survey, 40% of prisoners, significantly better than the comparator of 30% but fewer than the 65% at the previous inspection, thought the food was good. Prisoners indicated that the fall in satisfaction since 2005 was mainly due to the lunchtime microwave meals. Bi-annual surveys were carried out, but few participated. The catering manager attended the diversity and race equality action team committee and catering was a standing agenda item at the prisoner consultative committee, but catering was not often raised by prisoners at these forums.

#### Recommendation

8.4 Prisoners should be able to gain qualifications while employed in the kitchen.

# Prison shop

#### **Expected outcomes:**

Prisoners can purchase a suitable range of goods at reasonable prices to meet their diverse needs, and can do so safely, from an effectively managed shop.

8.5 The shop service operated smoothly and there was good access to catalogue shopping, but delivery charges were high. There was no regular survey of prisoners' views of the prison shop.

- A new national contract had been introduced and the prison, which had been a packing base for the former contractor, had lost around 17 jobs. Prisoners could use the shop each week and new arrivals were offered a reception pack to last until their first order. Orders were delivered on time and staff were available to rectify mistakes or arrange refunds.
- 8.7 The shop list contained few fresh products and some items, such as glass jars, were being removed from the list nationally due to security concerns. This was inappropriate for a prison like Shepton Mallet, where there was little risk of violence. Prices were set nationally. Prisoners could order daily newspapers and magazines. Prisoners could also shop from a range of catalogues, but orders were not collated to reduce delivery charges and the national contract, which imposed a standard £1 delivery charge for catalogue orders, was not yet being used. Where appropriate, orders were checked against property allowance and entitlement to items under the facilities list.
- 8.8 The shop provision was raised regularly at prisoner representative meetings and the local manager based at HMP Leyhill had attended a meeting to answer queries and listen to suggestions. There were four opportunities a year to change the product list. In our survey, similar numbers to the comparator said the shop sold a wide enough range of goods. There had been no prison-wide survey about shop provision and prisoner representatives were relied on to canvass opinions and propose changes to the list.

### Recommendations

- 8.9 The range of shop goods available to prisons should be based on individual risk assessments for each prison.
- 8.10 Catalogue orders should be processed through the national contract to reduce delivery charges.

# Housekeeping point

**8.11** There should be a periodic survey of all prisoners' views of the shop provision.

# Section 9: Resettlement

# Strategic management of resettlement

### **Expected outcomes:**

Resettlement underpins the work of the whole establishment, supported by strategic partnerships in the community and informed by assessment of prisoner risk and need.

- 9.1 The reducing reoffending policy described the work of the prison, but did not include an up-todate action plan with measurable targets. There was no need analysis to inform policy or identify gaps in provision. Available programmes appeared to be appropriate for most prisoners and some useful community links were in place.
- 9.2 The reducing reoffending policy for 2009-10 was dated June 2009. It outlined the prison's work with men serving life and indeterminate sentences for public protection (IPPs), but did not include an action plan for 2010-11 with clear, measurable targets. A database of needs collated the sentence planning targets of individual prisoners, but did not include wider resettlement, particularly needs such as family contact. Although there was no comprehensive needs analysis to inform the policy or identify gaps in provision, most prisoners' offending behaviour needs were met as they came to the prison to do specific programmes. Many targets were set in the 'strategic action priorities for 2009-10', but these did not include named leads or dates for completion and no targets were set for 2010-11. There was relatively little about wider resettlement pathways.
- 9.3 The reducing reoffending committee met regularly, chaired by the governor and attended by a cross-section of staff. The committee oversaw offender management work and the development of appropriate resettlement pathways. Prisoners served at least 2.5 years at the prison, with the aim of progressing to open conditions. Most had committed serious sexual or violent offences and came to Shepton Mallet primarily to take part in offending behaviour programmes. The programmes appeared to be appropriate for most prisoners. Some useful community links to support work across resettlement pathways had been established.

# Offender management and planning

#### **Expected outcomes:**

All prisoners have a sentence or custody plan based upon an individual assessment of risk and need, which is regularly reviewed and implemented throughout and after their time in custody. Prisoners, together with all relevant staff, are involved with drawing up and reviewing plans.

9.4 Offender management was well organised and all prisoners were managed under offender management principles. Sentence plans were up to date and of good quality. The overall quality of offender assessments was good, but not all were up to date. Prisoners were helped to progress to open prisons. Public protection work was well managed. Work to manage risk was satisfactory, but detailed risk of serious harm analysis was lacking and risk management plans were weak. Some parole hearings were delayed.

### Sentence planning and offender management

- 9.5 All prisoners were serving indeterminate sentences, most with life sentences and 14 serving IPPs. Only the 14 IPP prisoners were formally in-scope for offender management arrangements, but all prisoners were managed as in-scope and all were allocated an offender supervisor.
- 9.6 The offender management, resettlement and lifer management functions were all integrated in the offender management unit (OMU), staffed by Prison Service and seconded probation staff who were clear that their purpose was to promote the reduction of reoffending and public protection. The OMU was well established and worked closely with the offending behaviour unit and the public protection officer, helped by the fact that all had the same manager. The unit was well integrated in the prison.
- 9.7 Two prison officers and two seconded probation officers worked as offender supervisors, each supported by a case administrator. Skills and experiences were shared well across the four teams of two and administrative processes were efficient. The offender supervisors had undertaken a range of relevant courses.
- 9.8 The unit was adequately resourced, but the proposed intake of an additional 70 prisoners would potentially increase the workload by 37%. A bid for additional resources to cater for this had been made to the director of offender management. Current workloads were evenly distributed in terms of number and complexity by the head of the unit and offender supervisors each had a caseload of about 48. There had been recent efforts to clear a significant backlog of offender assessment system (OASys) assessments and all prisoners now had one, although 20 were out of date. The overall quality was high. Assessments were completed by six trained residentially-based prison officers deployed to the unit to complete this work. Hours were sometimes lost due to their redeployment and 324 hours had been lost since August 2009.
- 9.9 Offender supervisors took on a role similar to that of the offender manager (offender manager/probation officer) in the community for out-of-scope cases. They coordinated the work with the prisoner and oversaw the completion of OASys assessments, which they countersigned. Quality assurance was provided by the deputy head of the unit. While there were no minimum expectations regarding the level of contact between offender supervisors and prisoners, offender supervisors responded promptly to enquiries and requests for assistance from prisoners and from offender managers in the community.
- 9.10 We read case files for 18 prisoners, half of whom were formally in-scope. All cases had been allocated to an offender supervisor within two days of arrival and some before arrival. All had a nominated offender manager (for ease of reference, external probation officers are referred to in this section as offender managers). Most case files were well organised, containing relevant reports such as post-programme reviews and parole decisions. However, a third did not contain all relevant documents and copies of all sentence planning board reports.
- 9.11 The offender supervisor met the allocated prisoner within three days of arrival and agreed an 'interim sentence plan', which clarified the reason for his transfer and set initial targets. A date was set for a formal full sentence plan within the next 12 months. Files included a useful summary of the prisoner's risk factors, which was shared with relevant staff around the prison. OASys was not always used as an ongoing dynamic assessment tool, such as when there had been a significant change in a prisoner's circumstances or behaviour.

- 9.12 Contact between offender supervisors and prisoners was recorded in the case notes of P-NOMIS, as were interactions between prisoners and their personal officers. Personal officers could access OASys and were invited to sentence planning boards, but did not always attend. However, sentence planning boards were reasonably well attended, including sometimes by psychologists, programme tutors, wing representatives and prisoners, and in some cases offender managers.
- 9.13 In our survey, significantly more prisoners than the comparator said they had a sentence plan, although fewer than in 2005 said they had been involved in its development. In the offender management survey, 92% of prisoners said they had a sentence plan, 67% said they had been involved in its development and 82% said it took account of their individual needs. Of the 83% who said they had had a sentence planning meeting, 90% said their offender supervisor had attended and 70%, significantly more than the comparator, said staff from other departments had attended.
- 9.14 All except two cases contained an OASys likelihood of reoffending assessment and 11 of these had been completed on time. Offender managers had all been notified promptly by the OMU of the prisoner's transfer to Shepton Mallet. Telephone conferencing was sometimes used with offender managers for sentence planning purposes and offender managers visited and occasionally chaired boards.
- 9.15 Most sentence plans included objectives to address risk of harm and likelihood of reoffending, but in only 35% were activities appropriately sequenced. All in-scope and half the out-of-scope plans contained outcome-focused objectives, but only one described the planned levels of contact. Only one case contained evidence of a structured assessment of potential diversity issues such as learning needs, learning styles or discriminatory and disadvantaging factors and other individual needs. Prisoner vulnerability was assessed in 14 of the 18 cases and information about anyone found to be vulnerable was communicated to others, with measures put in place to support the prisoner.
- 9.16 Case files gave little indication that prisoners' educational needs were assessed, although some were clearly participating in education. Written contributions from education staff had not been received for the sentence planning boards we observed and individual learning plans were not held in the OMU file. Minutes of OMU meetings in May and June 2010 recorded the lack of contribution from learning and skills in sentence planning.
- 9.17 In nearly three-quarters of in-scope cases and just under half of out-of-scope cases, the offender manager demonstrated a commitment to their work by motivating and supporting the prisoner or reinforcing positive behaviour. Offender supervisors had developed positive and productive working relationships with prisoners in nearly all the cases we looked at.
- 9.18 The vast majority of all cases involved interventions delivered in line with the sentence plan and objectives had been partly achieved in all cases. An accredited programme was planned in all cases and already delivered in 14. Prisoners were generally well prepared for programmes and new learning was reinforced in three-quarters of cases. Plans centred on programme achievement rather than wider, more holistic issues such as family contact. Victim awareness work had been undertaken in nine in-scope and seven out-of-scope cases, but there was evidence of increased victim awareness in only half the cases. In our general and offender management surveys, significantly more prisoners than the comparator said a member of staff at Shepton Mallet had helped them to address their offending behaviour.
- **9.19** Eligible prisoners within 12 months of a Parole Board review could apply for an escorted absence accompanied by their personal officer for a familiarisation visit to an open prison or a

town visit or to make resettlement arrangements. Thirty-five prisoners had applied for an escorted absence in the year to date and 30 had been granted. Some had been cancelled because the accompanying officer was detailed to work elsewhere. In one recent six-week period, 18 prisoners had been reviewed once and some twice because they had not been able to go out on the original date planned.

### Categorisation

9.20 Suitable prisoners could progress to open prisons. Of the eight waiting to do this, none had been waiting longer than three months. Twenty-four men had moved to open conditions in 2009 and 17 to date in 2010. Twenty-four men were waiting to transfer into the prison.

### Public protection

- 9.21 All potential public protection cases were identified on arrival. The public protection officer saw prisoners individually to explain any restrictions and prisoners signed to confirm they had received and understood the information. Details of prisoners subject to public protection procedures were available to wing staff on the intranet.
- 9.22 The public protection policy was dated June 2010, but did not include the revisions to the national public protection manual introduced in 2009. Strategic oversight of public protection work was managed by quarterly public protection committee meetings chaired by the head of the OMU. Published terms of reference set out the membership and meetings were reasonably well attended, although there had been no representation from the chaplaincy or residential manager at the previous two meetings.
- 9.23 An inter-departmental risk management team meeting met monthly chaired by the public protection officer. The team included an appropriate cross-section of staff and determined which prisoners required monitoring and at what level, as well as reviewing individual cases. Ongoing risk factors were communicated to outside agencies as necessary. Prisoners posing a risk of harm to others were clearly identified in OASys. The most common offences were murder or very serious violence, including sexual violence. Fifteen of the cases seen were recorded as high risk of serious harm to others and the remaining three were medium risk. Many posed risks to children and/or were required to register under the Sex Offenders Act. Good liaison with security enabled the public protection officer to monitor cases closely and sensible and reasonable decisions were made over the monitoring of mail, visits and telephones. Little use was made of ViSOR (violent and sexual offenders register) by staff working in public protection or the OMU.
- 9.24 A risk of harm screening had been completed in all but one case, and most of these completed in an appropriate timescale. One in-scope and five out-of-scope screenings were inaccurate. A full analysis of the risk of harm to others was completed in all cases where required except one. Three in-scope and seven out-of-scope analyses were of insufficient quality and around half of all cases failed to draw on all available sources of information or to take into account relevant previous behaviour. The level of risk of harm posed to various groups of people such as children and members of the public was not always correct.
- 9.25 Risk management plans were generally weak. Two in-scope and two out-of-scope cases requiring a risk management plan failed to incorporate one, and over half were completed late. Of the 14 risk management plans inspected, 10 were insufficiently comprehensive and only two described how the objectives in the sentence plan would address risk of harm issues. However, over 80% of all sentence plans included objectives to manage risk of harm to others,

- where relevant, and in all except one case all reasonable action had been taken to keep to a minimum the prisoner's risk of harm.
- 9.26 In most cases inspected, there was evidence of the multi-agency public protection arrangement (MAPPA) referral/notification and MAPPA minutes were found on file when other work was required, such as where town visits were considered. Child safeguarding procedures were required in 10 cases, of which eight involved an effective contribution by offender managers and offender supervisors.

### Indeterminate-sentenced prisoners

- 9.27 There were 105 prisoners serving mandatory life sentences (convicted of murder), 55 serving discretionary life sentences (convicted of serious offence such as manslaughter, attempted murder or rape), 13 with automatic life sentences (convicted of second serious violent or sexual offence) and 14 were IPPs. Sixty-five per cent of the prison population were past their tariff date, some by many years. The tariff dates of seven prisoners were between 1988 and 1991. Most parole dossiers were completed on time, but some hearings were delayed because of external offender managers or backlogs in the Parole Board system.
- 9.28 Some good special days were organised to focus on issues of interest to life-sentenced prisoners, including occasional surgeries with Parole Board members. An OMU information day held in November 2009 had been attended by representatives of numerous voluntary agencies, probation hostels and other prison establishments, as well as including health promotion information.
- 9.29 A helpful support group had been established for men who had previously been involved in therapeutic communities. A 'Life in the Future' programme provided a good, useful and relevant forum for prisoners to discuss various aspects of their progress, and included practical matters such as explanation and discussion of licence conditions and their implications before transfer to open prisons.

### Recommendations

- 9.30 All prisoners should have an up-to-date OASys.
- 9.31 Changes in prisoners' circumstances and/or behaviour should be reflected in reviews of OASys assessments.
- 9.32 Prisoners' individual diversity needs should be fully considered and recorded in sentence plans.
- 9.33 The information flow between the offender management unit and education and work should be improved and all case files should contain copies of other relevant assessments, including those relating to education, training and employment.
- 9.34 Planned escorted absences should not be cancelled.
- 9.35 A comprehensive risk management plan, supported by detailed risk analysis, should be completed for all prisoners and reviewed when significant changes occur.

### Housekeeping points

- **9.36** All case files should contain copies of sentence planning board reports.
- **9.37** The public protection policy should be updated.
- **9.38** More use should be made of ViSOR.

### Good practice

9.39 The prompt production of an 'interim sentence plan' to agree initial work to be done with the prisoner helped clarify the reasons for his transfer and set targets in advance of a formal sentence plan board.

# Resettlement pathways

#### **Expected outcomes:**

Prisoners' resettlement needs are met under the seven pathways outlined in the Reducing Reoffending National Action Plan. An effective multi-agency response is used to meet the specific needs of each individual offender in order to maximise the likelihood of successful reintegration into the community.

### Reintegration planning

9.40 Accommodation services were not required. A useful programme supported prisoners to prepare for eventual transfer to open prisons. Prisoners could attend personal finance courses and were helped to open bank accounts. There was an appropriate palliative care policy.

### Accommodation

9.41 Any prisoner released from Shepton Mallet would be on licence with accommodation arranged. In practice, no one had been released from the prison for some years. Consequently, no accommodation services were necessary.

#### **Education, training and employment**

For further details, see Learning and skills and work activities in Section 6

- 9.42 The prison provided some good support for prisoners to help prepare them for transfer to open prisons. The well managed and accredited Life in the Future programme provided a range of relevant information to increase prisoners' knowledge and understanding of the conditions of their eventual transfer and release (see section on indeterminate-sentenced prisoners). The programme included expectations and the move to category D conditions, working, motor vehicles, bank accounts, mobile telephones, victims, recall, supervision and approved premises. (See also section on sentence planning and offender management.)
- 9.43 Preparations before transfer from Shepton Mallet were good. After risk assessment, all prisoners were entitled to three daily trips out accompanied by a prison officer. Visits were

organised to banks and job centres. Visits were also made to a category D prison where prisoners were introduced to the regime. Further visits took place to approved premises.

### Mental and physical health

9.44 There were appropriate contingency arrangements for health care to ensure that the health needs of a prisoner being discharged were met, but these had not been required for some years. There was a comprehensive palliative care policy, with access to a palliative care nurse consultant through the primary care trust.

### Finance, benefit and debt

9.45 Prisoners could see a debt advice worker through a service level agreement with a local debt advice agency. All new arrivals were asked if they had any debt or financial issues, although in practice some debts were often eventually waived for prisoners serving long sentences. Prisoners could attend a personal finance courses in education covering general money management and budgeting skills and were helped to open a bank account.

### Drugs and alcohol

- 9.46 There was good joint work between service providers, but no needs analysis had been conducted to inform the strategy. Most prisoners with drug or alcohol issues had addressed these before arrival at Shepton Mallet.
- Quarterly drug strategy meetings were chaired by the head of regimes in her role as drug coordinator and attended by representatives from relevant departments. There was a good level of joint work between service providers. The policy document had been issued in June 2008 and had not been updated. It included alcohol services and contained detailed supply and demand reduction action plans, but these were out of date. There had been no needs analysis to inform the strategy.
- 9.48 Counselling, assessment, referral, advice and throughcare (CARAT) services were provided by an experienced worker from Avon and Wiltshire Partnership trust (AWP) for three days a week. From June, the post had become full time. Appropriate management and supervision arrangements were in place. The worker saw all new arrivals within three days and carried an active caseload of 26 clients. Another 32 files had been suspended. A prison officer had undertaken CARAT training, but was not currently freed up to provide CARAT services. Her input would be required only if demand increased or if the AWP worker was absent for a lengthy period.
- 9.49 Most prisoners with drug/alcohol problems had addressed these at previous establishments where many had participated in intensive programmes. The CARAT worker completed some comprehensive substance misuse assessments, but his work consisted mainly of care plan reviews, which were detailed and of good quality. Interventions took place individually. Work books focusing on alcohol information, motivation to change and relapse prevention were used to structure the work. His remit included prisoners with primary alcohol problems. Alcoholics Anonymous groups met weekly to offer additional support, but uptake was low.

9.50 The CARAT worker linked in closely with health services and the OMU, copied clients' care plans and contributed to transfer plans. His increased hours allowed him to attend more multiagency meetings.

### Recommendation

9.51 The drug and alcohol strategy document should be updated and based on an analysis of need.

### Children and families of offenders

- 9.52 There was no shelter or any other facilities for visitors outside the prison. The visits environment was relaxed, but refreshments were poor. There were some extended visits days, but little emphasis on family contact and the pathway was underdeveloped.
- 9.53 The reducing reoffending policy included little information about existing or developing services under the children and families pathway and focused primarily on a Barnardo's service that had not run since 2009. There was no strategy to develop the pathway effectively and no needs analysis on which to base services. It was not known how many prisoners had children, how far prisoners were from home or what difficulties they experienced in receiving visits or maintaining contact with family members.
- 9.54 Prisoners in Shepton Mallet were from all over the country. In our survey, significantly fewer prisoners than the comparator said they had received a visit in their first week or been given information about visits on their arrival. Visits were run on Wednesdays and at weekends from 2pm to 4pm. Most prisoners were on the enhanced level of the incentives and earned privileges scheme and could have two visiting orders and two privilege visiting orders a month. The privilege visiting orders could be used on any day. Those on standard could have two and one respectively.
- 9.55 The visiting order contained only limited information for visitors, including no details about motorway access, public transport or local taxis. The telephone number of the prisoners' families helpline was included, but no prison contact name or number and nothing about the assisted prison visits scheme (APVS).
- 9.56 All visits could be easily booked by telephone. Visitors could enter the prison only from 1.30pm and there was no visitors' centre, shelter, seating or toilet for those waiting outside. Many visitors were older people. Two disabled parking spaces were available directly outside the main gate.
- 9.57 Visitors had to provide photographic identification, although the visits policy stated that other forms of identification were acceptable. They were given a number and waited in a small but clean waiting room with suitable toilet facilities. Some information was displayed about local and national information groups, including about the APVS. A small selection of children's toys and books was provided. The waiting room was unstaffed so visitors had no opportunity to ask questions or get information and support from staff. In our survey, significantly more prisoners than the comparator said their visitors were well treated by staff, but there had been no recent visitors' survey. Visitors were called in numerical order and appropriately searched before going into the visits room. During the inspection, the last visitors did not arrive in the visits room until nearly 15 minutes after the start of visits, despite arriving at the prison in good time.

- 9.58 The visits room was relaxed and seating was comfortable. Prisoners had to wear sashes and remain seated during their visit. The three closed visits facilities were rarely used. The small play area was poorly equipped, unsupervised and mostly out of sight. Some of the toys were a choking hazard to young children. The choice of refreshments remained limited and unsuitable for some prisoners and visitors. Officers were aware of prisoners subject to child protection proceedings.
- 9.59 In our survey, 41% of prisoners said they had been helped to maintain contact with their family and friends. There was little evidence that prisoners with family a long distance away were helped and encouraged to maintain contact, such as being able to exchange unused visiting orders for telephone credit.
- 9.60 About four extended visits days were run annually, including children and family days, although the 10am start possibly prevented some visitors from attending due to the distances involved. Minutes of weekly prisoner consultative meetings in March and May 2010 recorded complaints about the 'regime being too rigid' and 'insufficient' activities on these days, but with no apparent resolution. A Story Book Dad scheme had not been used during the year.
- 9.61 Some family members had attended post-programme reviews and sentence planning meetings. Prisoners had no opportunity to undertake general relationship counselling or attend parenting or relationship skills programmes. Prisoners could not receive incoming calls from young children or to deal with arrangments for them. A Barnardo's family link worker had stopped work at the prison in September 2009 because funding had ended and there had since been no qualified family support worker. The worker had provided a comprehensive report with many recommendations, but there had been no formal response or action plan arising from it. In our survey, 20% of prisoners said they had children under the age of 18. Many staff and managers said there were few child visitors. Comment in wing files showed only limited evidence of officers' knowledge of prisoners' family ties.

### Recommendations

- 9.62 Improved services should be developed under the children and families pathway and an assessment of need to help prisoners build and maintain relationships.
- 9.63 In the absence of a visitors' centre or shelter outside the prison, visitors should be able to use the visits waiting room one hour before visits.
- 9.64 Visits should start on time for all visitors.
- 9.65 The play area should be refurbished to an acceptable standard and contain suitable toys.
- 9.66 Prisoners should be able to exchange unused visiting orders for telephone credits.

### Housekeeping points

- 9.67 Visitors should receive information about how to get to Shepton Mallet by car and public transport and about the assisted prison visits scheme.
- **9.68** Visitors should not have to provide photographic identification.
- **9.69** A wider range of refreshments should be provided during visits.

### Attitudes, thinking and behaviour

- 9.70 A relevant range of programmes was run and waiting lists were short.
- 9.71 Prisoners transferred to the prison specifically to undertake offending behaviour programmes (OBPs). They received written information about the role of the psychology department, the offending behaviour unit and the available OBPs. In our survey, 96% of prisoners said they were involved in an OBP and 56% said this would help them on release. All prisoners in our offender management survey said they had done something or something had happened to them in custody to make them less likely to offend in future.
- 9.72 The prison was focused on accredited programmes and offered the cognitive skills booster (four courses a year for 40 men) and a range of sex offender treatment programme (SOTP) courses, including the better lives booster and the core and extended SOTP programmes (four courses a year for 36 men). The thinking skills programme had just been introduced. The number of prisoners completing programmes exceeded the key performance target and the prison had received good audit scores. Existing OBPs appeared to meet the needs of most prisoners, but provision was not based on a need analysis to identify whether there was unmet need that the prison could provide. (See section on strategic management of resettlement.)
- 9.73 The timing of prisoners' transfers in was carefully coordinated by the head of the offender management unit to avoid long waits and prisoners were prioritised for programmes according to parole board and tariff dates. Prisoners had long waits to complete the healthy relationships programme (HRP) at other establishments, usually HMP Erlestoke for which there was an 18 month waiting list. Some staff had been trained as assessors for HRP, which avoided men transferring and then found unsuitable.
- 9.74 Programmes were delivered by uniformed officers and psychology staff. Post-programme reviews were well attended by offender supervisors and in many cases prisoners' personal officers and sometimes family members.
- 9.75 Offender management and programmes staff estimated that around 30% of prisoners were not doing any work towards reducing their risk, either denying their offence or simply choosing not to engage with OBPs. Many of these men were thought to be institutionalised and simply did not want to move to open conditions and eventual release.

# Good practice

9.76 The training of some staff as assessors for the healthy relationships programme prevented the need for men to be transferred to be assessed and then being found unsuitable.

# Section 10: Recommendations, housekeeping points and good practice

The following is a listing of recommendations and examples of good practice included in this report. The reference numbers at the end of each refer to the paragraph location in the main report.

### Main recommendation

To NOMS

10.1 The total population of Shepton Mallet in its current configuration should be capped at 200. (HP37)

### Main recommendations

To the governor

- 10.2 A full health needs analysis should be completed quickly to ensure the commissioning of appropriate physical and mental health services, including the need for counselling and day care services. (HP38)
- 10.3 A wider range of education, training and work activities should be provided to allow prisoners to keep purposefully active and develop their personal and social skills. (HP39)
- 10.4 The reducing reoffending policy should be based on a needs analysis, which identifies gaps in services and provision and should include an action plan with clear targets for all relevant resettlement pathways. (HP40)

### Recommendation

To NOMS

### **Prison shop**

The range of shop goods available to prisons should be based on individual risk assessments for each prison. (8.9, see paragraph 8.7)

### Recommendation

To Prisoner Escorts Management

#### Courts, escorts and transfers

10.6 Prisoners should be given toilet breaks at least every 2.5 hours. (1.5, see paragraph 1.3)

### Recommendations

To the governor

### **Residential units**

- 10.7 Prisoners should not be required to share cells designed for one. (2.14, see paragraph 2.3)
- 10.8 More prisoners should have the opportunity to eat communally. (2.15, see paragraph 2.7)

10.9 Prisoners should be able to use all showers in private. (2.16, see paragraph 2.10)

#### **Personal officers**

10.10 Wing file entries by personal officers should detail progress in relevant areas, including against sentence planning targets. (2.24, see paragraph 2.23)

### **Applications and complaints**

10.11 All complaints should be logged immediately on receipt. The reason why a complaint is subsequently withdrawn should be clearly recorded, with the signed agreement of the prisoner. (3.18, see paragraph 3.17)

### Faith and religious activity

10.12 Prisoners with disabilities should have appropriate access to faith facilities. (3.25, see paragraph 3.23)

### **Diversity**

10.13 Each strand of diversity should be covered by an up-to-date policy and action plan overseen by the diversity committee which would monitor quality of outcomes. (4.4, see paragraph 4.2)

### Foreign nationals

10.14 Professional interpreting services should routinely be offered to prisoners whose first language is not English when sentence planning, parole and other more complex issues are discussed. (4.19, see paragraph 4.18)

#### Disability and older prisoners

- 10.15 There should be a forum where prisoners with disabilities can discuss issues and concerns and to help ensure equality of treatment. (4.32, see paragraph 4.25)
- 10.16 Retired prisoners should not be charged for their television and should receive sufficient retirement pay to meet the needs of those without another source of income. (4.33, see paragraph 4.28)

### **Health services**

- 10.17 A skill mix review should be undertaken to ensure sufficient qualified nursing and administrative staff are available to provide a comprehensive health service to prisoners. (5.28, see paragraph 5.6)
- 10.18 Emergency equipment should be checked and recorded at least weekly and all health care staff, including the dental team, should know how to access it. (5.29, see paragraph 5.7)
- **10.19** A documented consistent nurse triage system should be introduced. (5.30, see paragraph 5.12)

- 10.20 The pharmacy service level agreement should include provision to ensure that prisoners receive medication on time and have regular access to pharmacy professionals. (5.31, see paragraph 5.15)
- **10.21** Discipline staff should supervise prisoners during the administration of medicines. (5.32, see paragraph 5.15)
- 10.22 The pharmacist should undertake regular audits of medication, including out-of-hours stock, and check faxed prescriptions regularly against the original prescriptions. (5.33, see paragraph 5.16)
- 10.23 Consultant psychiatrist cover should be provided. (5.34, see paragraph 5.25)

### Learning and skills and work activities

- 10.24 Access to activities, including the library and PE facilities, should be improved for prisoners with mobility difficulties. (6.18, see paragraph 6.5)
- 10.25 More part-time work in the contract workshops should be offered to improve access to higher paid work. (6.19, see paragraph 6.8)
- 10.26 A wider range of vocational training courses, particularly at level 2 and above, should be provided to encourage greater participation. (6.20, see paragraph 6.9)
- 10.27 The prison should increase participation in education by providing courses at an appropriate level to the meet the needs of most prisoners. (6.21, see paragraph 6.11)
- **10.28** Staff should ensure that prisoners on education programmes attend on time. (6.22, see paragraph 6.12)
- 10.29 Offending behaviour accreditation programmes should be better sequenced to avoid disruption to education sessions. (6.23, see paragraph 6.12)
- 10.30 The use of the library for enhanced reading activities should be consistently promoted. (6.24, see paragraph 6.17)

#### Physical education and health promotion

- 10.31 Adequate provision should be made to ensure consistent PE activities are run. (6.33, see paragraph 6.28)
- 10.32 The prison should more actively promote the benefits of recreational PE to improve participation rates. (6.34, see paragraph 6.31)

#### Catering

10.33 Prisoners should be able to gain qualifications while employed in the kitchen. (8.4, see paragraph 8.2)

### **Prison shop**

10.34 Catalogue orders should be processed through the national contract to reduce delivery charges. (8.10, see paragraph 8.7)

### Offender management and planning

- 10.35 All prisoners should have an up-to-date OASys. (9.30, see paragraph 9.8)
- 10.36 Changes in prisoners' circumstances and/or behaviour should be reflected in reviews of OASys assessments. (9.31, see paragraph 9.11)
- 10.37 Prisoners' individual diversity needs should be fully considered and recorded in sentence plans. (9.32, see paragraph 9.15)
- 10.38 The information flow between the offender management unit and education and work should be improved and all case files should contain copies of other relevant assessments, including those relating to education, training and employment. (9.33, see paragraph 9.16)
- **10.39** Planned escorted absences should not be cancelled. (9.34, see paragraph 9.19)
- 10.40 A comprehensive risk management plan, supported by detailed risk analysis, should be completed for all prisoners and reviewed when significant changes occur. (9.35, see paragraph 9.25)

### Resettlement pathways

- 10.41 The drug and alcohol strategy document should be updated and based on an analysis of need. (9.51, see paragraph 9.47)
- 10.42 Improved services should be developed under the children and families pathway and an assessment of need to help prisoners build and maintain relationships. (9.62, see paragraph 9.53)
- 10.43 In the absence of a visitors' centre or shelter outside the prison, visitors should be able to use the visits waiting room one hour before visits. (9.63, see paragraph 9.56)
- 10.44 Visits should start on time for all visitors. (9.64, see paragraph 9.57)
- 10.45 The play area should be refurbished to an acceptable standard and contain suitable toys. (9.65, see paragraph 9.58)
- 10.46 Prisoners should be able to exchange unused visiting orders for telephone credits. (9.66, see paragraph 9.59)

### Housekeeping points

#### **Residential units**

10.47 Prisoners without flasks should be given one. (2.17, see paragraph 2.5)

### **Health services**

- 10.48 The health care manager should have regular meetings with the governor through the senior management team or other appropriate venue. (5.35, see paragraph 5.2)
- 10.49 There should be a designated lead nurse for older prisoners. (5.36, see paragraph 5.3)
- 10.50 Out-of-date items in the emergency bag should be replaced. (5.37, see paragraph 5.7)
- 10.51 Maximum and minimum temperatures should be recorded daily for all drug refrigerators and corrective action taken where necessary. (5.38, see paragraph 5.17)
- 10.52 Out-of-date pharmacy reference books should be discarded. (5.39, see paragraph 5.17)
- 10.53 Patient group directions should be reviewed to ensure they are relevant to the population. (5.40, see paragraph 5.19)
- 10.54 The controlled drug register should comply with regulations. (5.41, see paragraph 5.21)

### Learning and skills and work activities

- 10.55 The performing manufacturing operations course should be better promoted and better use made of witness testimonies as evidence towards the qualification. (6.25, see paragraph 6.10)
- 10.56 The order service for book in languages other than English should be clearly promoted in the library. (6.26, see paragraph 6.16)

#### **Incentives and earned privileges**

10.57 Records on the number of review boards held each month should be kept and include details of board decisions. (7.13, see paragraph 7.10)

#### **Prison shop**

10.58 There should be a periodic survey of all prisoners' views of the shop provision. (8.11, see paragraph 8.8)

### Offender management and planning

- 10.59 All case files should contain copies of sentence planning board reports. (9.36, see paragraph 9.10)
- 10.60 The public protection policy should be updated. (9.37, see paragraph 9.22)
- 10.61 More use should be made of ViSOR. (9.38, see paragraph 9.23)

### Resettlement pathways

- 10.62 Visitors should receive information about how to get to Shepton Mallet by car and public transport and about the assisted prison visits scheme. (9.67, see paragraph 9.55)
- 10.63 Visitors should not have to provide photographic identification. (9.68, see paragraph 9.57)
- 10.64 A wider range of refreshments should be provided during visits. (9.69, see paragraph 9.58)

### Good practice

### Disability and older prisoners

10.65 Prisoners who might have difficulties reaching their cell bell or raising the alarm in an emergency were issued with pendant alarms. (4.34, see paragraph 4.24)

### Offender management and planning

10.66 The prompt production of an 'interim sentence plan' to agree initial work to be done with the prisoner helped clarify the reasons for his transfer and set targets in advance of a formal sentence plan board. (9.39, see paragraph 9.11)

### Resettlement pathways

10.67 The training of some staff as assessors for the healthy relationships programme prevented the need for men to be transferred to be assessed and then being found unsuitable. (9.76, see paragraph 9.73)

# Appendix I: Inspection team

Nigel Newcomen Deputy Chief Inspector

Michael Loughlin Team leader
Joss Crosbie Inspector
Paul Fenning Inspector
Lucy Young Inspector
Martin Owens Inspector

Bridget McEvilly
Helen Carter
Health care inspector
Health care inspector
Sigrid Engelen
Substance use inspector
Peter Gibbs
Pharmacy inspector
Martin Wall
Dental services inspector

Maria Navarro Ofsted lead inspector

Neil Edwards Ofsted Sue Metcalfe Ofsted

Helen Rinaldi HMI Probation Iolo Madoc-Jones HMI Probation

Louise Falshaw Researcher Amy Pearson Researcher

# Appendix II: Prison population profile<sup>1</sup>

### Population breakdown by:

Status	18-20 yr olds	21 and over	%
Sentenced		188	99.5%
Recall			
Convicted unsentenced			
Remand			
Civil prisoners			
Detainees			
Total		188	99.5%

Sentence	18-20 yr olds	21 and over	%
Unsentenced			
Less than 6 months			
6 months to less than 12 months			
12 months to less than 2 years			
2 years to less than 4 years			
4 years to less than 10 years			
10 years and over (not life)			
ISPP		14	7.4%
Life		174	92%
Total		188	99.4%

Age	Number of prisoners	%	
Under 21 years			
21 years to 29 years	11	5.8%	
30 years to 39 years	45	23.8%	
40 years to 49 years	60	31.7%	
50 years to 59 years	42	22.2%	
60 years to 69 years	26	13.7%	
70 plus years	4	2.1%	
Total	188	99.3%	

Nationality	18-20 yr olds	21 and over	%
British		180	95.2%
Foreign nationals		8	4.2%
Total		188	99.4%

Security category	18-20 yr olds	21 and over	%
Uncategorised unsentenced			
Uncategorised sentenced			
Cat A			

<sup>&</sup>lt;sup>1</sup> Please note: the following figures were supplied by the establishment and any errors are the establishment's own.

Cat B		
Cat C	179	95%
Cat D	9	4.76%
Other		
Total	188	99.8

Ethnicity	18–20 yr olds	21 and over	%
White			
British		152	80.4%
Irish		1	0.6%
Other white		13	6.9%
Mixed			
White and black Caribbean		2	1.06%
White and black African			
White and Asian			
Other mixed			
Asian or Asian British			
Indian		2	1.06%
Pakistani		1	0.6%
Bangladeshi		1	0.6%
Other Asian			
Black or black British			
Caribbean		5	2.6%
African		5	2.6%
Other black		5	2.6%
Chinese or other ethnic group			
Chinese			
Other ethnic group		1	0.6%
Not stated			
Total		188	99.6%

Religion	18-20 yr olds	21 and over	%
Baptist			
Church of England		65	34.4%
Roman Catholic		24	12.7%
Other Christian denominations		19	10%
Muslim		8	4.2%
Sikh		1	0.6%
Hindu		1	0.6%
Buddhist		17	9%
Jewish			
Other		8	4.2%
No religion		45	23.8%
Total		188	99.5%

# Sentenced prisoners only

Length of stay	18-20 yr olds		21 and	over
	Number	%	Number	%
Less than 1 month				
1 month to 3 months			13	6.9%
3 months to 6 months			10	5.3%
6 months to 1 year			16	8.5%
1 year to 2 years			52	27.5%
2 years to 4 years			39	20.6%
4 years or more			58	30.7%
Total			188	99.5%

# Unsentenced prisoners only

Length of stay	18–20 yr olds		21 and	over
	Number	%	Number	%
Less than 1 month				
1 month to 3 months				
3 months to 6 months				
6 months to 1 year				
1 year to 2 years				
2 years to 4 years				
4 years or more				
Total				

Main offence	18-20 yr olds	21 and over	%
Violence against the person		108	57%
Sexual offences		74	39%
Burglary			
Robbery			
Theft and handling			
Fraud and forgery			
Drugs offences			
Other offences		6	3.2%
Civil offences			
Offence not recorded/holding			
warrant			
Total		188	99.2%

# Appendix III: Summary of prisoner questionnaires and interviews

## Prisoner survey methodology

A voluntary, confidential and anonymous survey of a representative proportion of the prisoner population was carried out for this inspection. The results of this survey formed part of the evidence-base for the inspection.

#### Choosing the sample size

The baseline for the sample size was calculated using a robust statistical formula provided by a government department statistician. Essentially, the formula indicates the sample size that is required and the extent to which the findings from a sample of that size reflect the experiences of the whole population.

At the time of the survey on 18 May 2010, the prisoner population at HMP Shepton Mallet was 187. The sample size was 173. Overall, this represented 93% of the prisoner population.

## **Selecting the sample**

Respondents were randomly selected from a LIDS prisoner population printout using a stratified systematic sampling method. This basically means every second person is selected from a LIDS list, which is printed in location order, if 50% of the population is to be sampled.

Completion of the questionnaire was voluntary. Refusals were noted and no attempts were made to replace them. Thirteen respondents refused to complete a questionnaire.

#### Methodology

Every attempt was made to distribute the questionnaires to each respondent on an individual basis. This gave researchers an opportunity to explain the independence of the Inspectorate and the purpose of the questionnaire, as well as to answer questions.

All completed questionnaires were confidential – only members of the Inspectorate saw them. In order to ensure confidentiality, respondents were asked to do one of the following:

- have their questionnaire ready to hand back to a member of the research team at a specified time
- seal the questionnaire in the envelope provided and hand it to a member of staff, if they
  were agreeable
- seal the questionnaire in the envelope provided and leave it in their room for collection.

Respondents were not asked to put their names on their questionnaire.

#### **Response rates**

In total, 147 respondents completed and returned their questionnaires. This represented 79% of the prison population. The response rate was 85%. In addition to the 13 respondents who refused to complete a questionnaire, three questionnaires were not returned and 10 were returned blank.

# **Comparisons**

The following details the results from the survey. Data from each establishment have been weighted, in order to mimic a consistent percentage sampled in each establishment.

Some questions have been filtered according to the response to a previous question. Filtered questions are clearly indented and preceded by an explanation as to which respondents are included in the filtered questions. Otherwise, percentages provided refer to the entire sample. All missing responses are excluded from the analysis.

The following analyses have been conducted:

- The current survey responses in 2010 against comparator figures for all prisoners surveyed in trainer prisons. This comparator is based on all responses from prisoner surveys carried out in 36 trainer prisons since October 2004.
- The current survey responses in 2010 against the responses of prisoners surveyed at HMP Shepton Mallet in 2005.
- A comparison within the 2010 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2010 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2010 survey between the responses of prisoners aged 50 and over and those aged under 50.

In addition to the main prisoner survey, an offender management survey was distributed to a small sample of prisoners, randomly selected from the total population of prisoners who fall in scope under offender management. The following analyses have been conducted:

- The current survey responses against comparator figures for all (in scope) prisoners surveyed in men's category C trainer prisons.
- The current survey responses against comparator figures for all (in scope) prisoners surveyed across all prisons. This comparator is based on all responses from surveys carried out in 38 prisons of varying functional type.

In all the above documents, statistical significance is used to indicate whether there is a real difference between the figures, i.e. the difference is not due to chance alone. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading and where there is no significant difference, there is no shading. Orange shading has been used to show a significant difference in prisoners' background details.

It should be noted that, in order for statistical comparisons to be made between the most recent survey data and that of the previous survey, both sets of data have been coded in the

same way. This may result in changes to percentages from previously published surveys. However, all percentages are true of the populations they were taken from and the statistical significance is correct.

## **Summary**

In addition, a summary of the survey results is attached. This shows a breakdown of responses for each question. Percentages have been rounded and therefore may not add up to 100%.

No questions have been filtered within the summary so all percentages refer to responses from the entire sample. The percentages to certain responses within the summary, for example 'Not sentenced' options across questions, may differ slightly. This is due to different response rates across questions, meaning that the percentages have been calculated out of different totals (all missing data are excluded). The actual numbers will match up as the data are cleaned to be consistent.

Percentages shown in the summary may differ by 1% or 2% from that shown in the comparison data as the comparator data have been weighted for comparison purposes.

# Summary of survey results

Yes       137 (94%)         Yes - on recall       9 (6%)         No - awaiting trial       0 (0%)         No - awaiting sentence       0 (0%)         No - awaiting deportation       0 (0%)		Section 1: About you	
Under 21	O1 2	How old are you?	
21 - 29	Q1.Z		0 (0%)
30 - 39			` ,
40 - 49			` '
Solidaria   Soli			•
Color			, ,
Q1.3   Are you sentenced?   Yes			, ,
Q1.3   Are you sentenced?   Yes			• • • • • • • • • • • • • • • • • • • •
Yes		70 and over	4 (3%)
Yes - on recall   9 (6%)   No - awalting Irial   0 (0%)   No - awalting sentence   0 (0%)   No - awaiting sentence   0 (0%)   No - awaiting deportation   0 (0%)   O (0%)	Q1.3		407 (040()
No - awailing trial			• • • • • • • • • • • • • • • • • • • •
No - awailing sentence			1 1
No - awaiting deportation		<b>O</b>	• • •
Q1.4       How long is your sentence?       0 (0%)         Less than 6 months.       0 (0%)         6 months to less than 1 year.       0 (0%)         1 year to less than 2 years.       0 (0%)         2 years to less than 4 years.       0 (0%)         4 years to less than 10 years.       0 (0%)         10 years or more.       5 (3%)         IPP (Indeterminate Sentence for Public Protection).       2 (1%)         Life.       137 (95%)         Q1.5       Approximately, how long do you have left to serve (if you are serving life or IPP, please use the date of your next board)?         Not sentenced.       0 (0%)         6 months or less.       23 (20%)         More than 6 months.       94 (80%)         Q1.6       How long have you been in this prison?         Less than 1 month.       1 (1%)         1 to less than 3 months.       4 (3%)         3 to less than 12 months       4 (3%)         6 to less than 12 months       6 (4%)         12 months to less than 2 years.       28 (19%)         2 to less than 4 years.       32 (22%)         4 years or more.       71 (49%)         Q1.7       Are you a foreign national (i.e. do not hold UK citizenship)?         Yes.       11 (8%)         No. <td></td> <td>· · · · · · · · · · · · · · · · · · ·</td> <td></td>		· · · · · · · · · · · · · · · · · · ·	
Not sentenced		No - awaiting deportation	0 (0%)
Less than 6 months	Q1.4	How long is your sentence?	
6 months to less than 1 year		Not sentenced	0 (0%)
1 year to less than 2 years   0 (0%)   2 years to less than 4 years   0 (0%)   4 years to less than 10 years   0 (0%)   10 years or more   5 (3%)   IPP (Indeterminate Sentence for Public Protection)   2 (1%)   Life   137 (95%)   138 (95%)   138		Less than 6 months	0 (0%)
2 years to less than 4 years   0 (0%)   4 years to less than 10 years   0 (0%)   10 years or more   5 (3%)   IPP (Indeterminate Sentence for Public Protection)   2 (1%)   Life   137 (95%)		6 months to less than 1 year	0 (0%)
4 years to less than 10 years       0 (0%)         10 years or more       5 (3%)         IPP (Indeterminate Sentence for Public Protection)       2 (1%)         Life       137 (95%)         Q1.5       Approximately, how long do you have left to serve (if you are serving life or IPP, please use the date of your next board)?       0 (0%)         Not sentenced       0 (0%)         6 months or less       23 (20%)         More than 6 months       94 (80%)         Q1.6       How long have you been in this prison?         Less than 1 month       1 (1%)         1 to less than 3 months       4 (3%)         3 to less than 6 months       3 (2%)         6 to less than 12 months       6 (4%)         12 months to less than 2 years       28 (19%)         2 to less than 4 years       32 (22%)         4 years or more       71 (49%)         Q1.7       Are you a foreign national (i.e. do not hold UK citizenship)?         Yes       11 (8%)         No       135 (92%)         Q1.8       Is English your first language?         Yes       140 (96%)		1 year to less than 2 years	0 (0%)
10 years or more		2 years to less than 4 years	0 (0%)
10 years or more			
IPP (Indeterminate Sentence for Public Protection)			
Life       137 (95%)         O1.5       Approximately, how long do you have left to serve (if you are serving life or IPP, please use the date of your next board)?			
next board)?       0 (0%)         6 months or less		· · · · · · · · · · · · · · · · · · ·	• • •
next board)?       0 (0%)         6 months or less	Q1.5	Approximately, how long do you have left to serve (if you are serving life)	or IPP, please use the date of your
Not sentenced       0 (0%)         6 months or less       23 (20%)         More than 6 months       94 (80%)         Q1.6       How long have you been in this prison?         Less than 1 month       1 (1%)         1 to less than 3 months       4 (3%)         3 to less than 6 months       3 (2%)         6 to less than 12 months       6 (4%)         12 months to less than 2 years       28 (19%)         2 to less than 4 years       32 (22%)         4 years or more       71 (49%)         Q1.7       Are you a foreign national (i.e. do not hold UK citizenship)?         Yes       11 (8%)         No       135 (92%)         Q1.8       Is English your first language?         Yes       140 (96%)			э н н , риской ком ком ком от уст
6 months or less       23 (20%)         More than 6 months       94 (80%)         Q1.6       How long have you been in this prison?         Less than 1 month       1 (1%)         1 to less than 3 months       4 (3%)         3 to less than 6 months       3 (2%)         6 to less than 12 months       6 (4%)         12 months to less than 2 years       28 (19%)         2 to less than 4 years       32 (22%)         4 years or more       71 (49%)         Q1.7       Are you a foreign national (i.e. do not hold UK citizenship)?         Yes       11 (8%)         No       135 (92%)         Q1.8       Is English your first language?         Yes       140 (96%)		,	0 (0%)
More than 6 months       94 (80%)         Q1.6       How long have you been in this prison?         Less than 1 month       1 (1%)         1 to less than 3 months       4 (3%)         3 to less than 6 months       3 (2%)         6 to less than 12 months       6 (4%)         12 months to less than 2 years       28 (19%)         2 to less than 4 years       32 (22%)         4 years or more       71 (49%)         Q1.7       Are you a foreign national (i.e. do not hold UK citizenship)?         Yes       11 (8%)         No       135 (92%)         Q1.8       Is English your first language?         Yes       140 (96%)			` ,
Less than 1 month       1 (1%)         1 to less than 3 months       4 (3%)         3 to less than 6 months       3 (2%)         6 to less than 12 months       6 (4%)         12 months to less than 2 years       28 (19%)         2 to less than 4 years       32 (22%)         4 years or more       71 (49%)     Only  Only  Is English your first language?  Yes  140 (96%)			, ,
Less than 1 month       1 (1%)         1 to less than 3 months       4 (3%)         3 to less than 6 months       3 (2%)         6 to less than 12 months       6 (4%)         12 months to less than 2 years       28 (19%)         2 to less than 4 years       32 (22%)         4 years or more       71 (49%)     Only  Only  Is English your first language?  Yes  140 (96%)	01 (		, ,
1 to less than 3 months       4 (3%)         3 to less than 6 months       3 (2%)         6 to less than 12 months       6 (4%)         12 months to less than 2 years       28 (19%)         2 to less than 4 years       32 (22%)         4 years or more       71 (49%)         Q1.7       Are you a foreign national (i.e. do not hold UK citizenship)?         Yes       11 (8%)         No       135 (92%)         Q1.8       Is English your first language?         Yes       140 (96%)	Q1.6		1 (1%)
3 to less than 6 months			• • •
6 to less than 12 months			` ,
12 months to less than 2 years   28 (19%)   2 to less than 4 years   32 (22%)   4 years or more   71 (49%)       Q1.7   Are you a foreign national (i.e. do not hold UK citizenship)?			` ,
2 to less than 4 years       32 (22%)         4 years or more       71 (49%)         Q1.7       Are you a foreign national (i.e. do not hold UK citizenship)?         Yes       11 (8%)         No       135 (92%)         Q1.8       Is English your first language?         Yes       140 (96%)			• • •
4 years or more       71 (49%)         Q1.7       Are you a foreign national (i.e. do not hold UK citizenship)?       11 (8%)         No.       135 (92%)         Q1.8       Is English your first language?         Yes       140 (96%)		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
Yes			` ,
Yes	∩1.7	Are you a foreign national (i.e. do not hold LIK citizenship)?	
No	Q1.7		11 (0%)
<i>Yes</i>			` '
<i>Yes</i>	01.0		, ,
· ·	U1.8		140 (96%)
			• • •

Q1.9	What is your ethnic origin?	110 /0	000/\ <i>Acia</i>	on or Acion	Dritich D	Panaladachi		1 (10/)
	White - British White - Irish					angiadesni ther		
	White - other	•	,			iriei nd black Cai		` '
	Black or black British - Caribbean					nd black Gar nd black Afri		
	Black or black British - African	•	•	0		nd Asian		. ,
	Black or black British - other	,	,					
	Asian or Asian British - Indian							
	Asian or Asian British - Pakistani	•	•					. ,
				Ü	,			
Q1.10	Do you consider yourself to be Gypsy/Ro						E (40/)	
	Yes No						•	
	70						137 (7	0 70)
Q1.11	What is your religion?							
	None							
	Church of England						•	,
	Catholic	, ,					•	,
	Protestant						•	•
	Other Christian denomination	, ,		er			9 (6)	<b>%</b> )
	Buddhist	14 (10%)						
Q1.12	How would you describe your sexual orion							
	Heterosexual/straight							. ,
	Homosexual/gay						•	•
	Bisexual						•	
	Other						0 (0	)%)
Q1.13	Do you consider yourself to have a disab	oility?						
	Yes						40 (28	%)
	<i>No</i>						105 (7	2%)
04.44								
Q1.14	How many times have you been in prisor $\theta$	n before? 1		2 to 5		1	Nore than s	5
		, (21%)		42 (29%		71	13 (9%)	)
	50 (4170)	(2170)		72 (27)	0)		13 (770)	
Q1.15	Including this prison, how many prisons			ring this se	entence/re			
	1		? to 5				than 5	
	0 (0%)	59	9 (41%)			86 (	59%)	
Q1.16	Do you have any children under the age	of 182						
Q1.10	Yes						29 (20	%)
	No						`	• .
							•	,
	Section 2: 0	Courts, transf	ers and	escorts				
Q2.1	We want to know about the most recent j	journey you l	have mad	de either to	o or from	court or be	etween pri	sons.
	How was:							
		Very .	Good	Neither	Bad	Very bad	Don't	N/A
		good		c =			remember	
	The cleanliness of the van?	18	59	25	26	8 (6%)	6 (4%)	3 (2%)
	Vour percend cofety during the lours and	(12%)	(41%)	(17%)	(18%)	E (40/)	4 (20/)	4 (20/)
	Your personal safety during the journey?	23 (17%)	64 (46%)	27 (20%)	11 (8%)	5 (4%)	4 (3%)	4 (3%)
		(17/0)	(46%)	(20%)				

	The comfort of the var	1?	7 (5%)	19	18	48	45	2 (1%)	3 (2%)
	The attention paid to y	our health needs?	8 (6%)	(13%) 41 (30%)	(13%) 37 (27%)	(34%) 19 (14%)	(32%) 19	5 (4%)	8 (6%)
	The frequency of toile	t breaks?		11 (8%)	15 (11%)	(14%) 39 (28%)	(14%) 45 (33%)	2 (1%)	22 (16%)
Q2.2	How long did you sp Less than 1 hour			nours to 4 ours	4 Mor	e than 4 ho	ours	Don't rem	ember
	4 (3%)	39 (27%)	69 (	(48%)		28 (19%)		4 (39	%)
Q2.3	How did you feel you Very well 24 (17%)	were treated by the Well 63 (44%)	e escort staff? Neither 41 (28%)		<i>Badly</i> (6%)	,	<i>badly</i> (2%)		member 3%)
Q2.4	Please answer the fo	ollowing questions a	bout when you	ı first arı	rived here	: Yes	ı	No	Don't
	Did you know where y from another prison?	ou were going when	you left court or	when tra	ansferred	128 (88	3%) 15	(10%)	emember 2 (1%)
	Before you arrived her would happen to you?		written informa	ation abo	ut what	40 (28	%) 98	(70%)	3 (2%)
	When you first arrived		ty arrive at the s	same time	e as you?	124 (88	3%) 16	(11%)	1 (1%)
		Section 3: Rec	eption, first ni	ght and	induction				
Q3.1	Loss of property Housing probler Contacting emp Contacting famil Ensuring depen	did staff ask you if y ut any of these ms loyers lydants were being look	53 (38%) 18 (13%) 2 (1%) 1 (1%) 36 (26%) ked 3 (2%)	Mone Feelii Healt Need Acces	ey worries. ng depress th problem. ling protect ssing phor	sed or suich stion from o ne numbers	idalther priso	ease tick a 	8%) 30%) 48%) 8%) 20%)
Q3.2	Loss of property Housing probler Contacting emp Contacting fami Ensuring depen	y problems msloyers lydants were looked aft	64 (48%) 22 (16%) 2 (1%) 1 (1%) 20 (15%) ter 3 (2%)	Mone Feelii Healt Need Acces Othei	ey worries . ng depress th problem ling protect ssing phor	sed or suic stion from o ne numbers	idalther priso.	t apply to 	%) 11%) 22%) %) 19%)
Q3.3	Were you seen by a m When you were searc way?	nember of health serv	ices?		<i>Yes</i> 103 (71%) 123 (90%)		No 5 (24%) 9 (7%)	8	emember (5%) (4%)
Q3.4	Overall, how well did Very well 57 (39%)	l you feel you were t <i>Well</i> 66 (45%)	reated in recep <i>Neither</i> 19 (13%)	В	<i>Badly</i> : (1%)	,	<i>badly</i> (1%)		<i>member</i> 1%)

Q3.5	On your day of arrival, were you of	fered informa	tion on the fo	ollowing? (P	lease tick a	II that appl	ly to you.)
	Information about what was goil						
	Information about what support						
	Information about how to make						
	Information about your entitlem						
	Information about health service						, ,
	Information about the chaplaino	,					
	Not offered anything						51 (37%)
Q3.6	On your day of arrival, were you of						
	A smokers/non-smokers pack						, ,
	The opportunity to have a show						
	The opportunity to make a free						
	Something to eat						
	Did not receive anything						19 (13%)
Q3.7	Did you meet any of the following pall that apply to you.)	eople within	the first 24 h	ours of your	arrival at tl	nis prison	? (Please tick
	Chaplain or religious leader						
	Someone from health services.						, ,
	A Listener/Samaritans						
	Did not meet any of these peo	ople					25 (17%)
Q3.8	Did you have access to the prison yes						
	No						` '
	710						100 (7070)
Q3.9	Did you feel safe on your first night						10/ (0/0/)
	Yes						, ,
	No						
	Don't remember						5 (3%)
Q3.10	How soon after your arrival did you	ı go on an ind	luction cours	se?			
	Have not been on an induction						, ,
	Within the first week						` '
	More than a week						` '
	Don't remember						5 (3%)
Q3.11	Did the induction course cover eve	rvthina vou n	eeded to kno	ow about the	prison?		
	Have not been on an inductio						17 (12%)
	<i>Yes</i>						102 (71%)
	<i>No</i>						15 (10%)
	Don't remember						9 (6%)
	Section 4	: Legal rights	and respect	ful custody			
Q4.1	How easy is it to:						
~		Very easy	Easy	Neither	Difficult	Very diffic	cult N/A
	Communicate with your solicitor or	51 (36%)	70 (49%)	6 (4%)	12 (8%)	2 (1%	
	legal representative?	(-3.5)	- ( / - /	- ( /	- (3.0)	= (.70	, – ()
	Attend legal visits?	50 (35%)	75 (53%)	6 (4%)	6 (4%)	0 (0%	5 (4%)
	Obtain bail information?	1 (1%)	7 (7%)	8 (8%)	2 (2%)	2 (2%	
		` '	` '	` '	` /	•	

Q4.2	Have staff here ever opened letters from your solicitor or your legal representative when you were them?								
	Not had any letters						5 (3	3%)	
	Yes						•	•	
	No								
Q4.3	Please answer the following	guestions abou	t the wing/uni	it vou are curr	ently livina	on:			
21.0	Please answer the following questions about the wing/unit you are curre					No	Don't know	N/A	
	Are you normally offered enou	ıgh clean, suitable	e clothes for the	e week?	102 (71%)	20 (14%)	3 (2%)	18 (13%)	
	Are you normally able to have	-			141 (99%)	1 (1%)	0 (0%)	1 (1%)	
	Do you normally receive clear	sheets every we	ek?		125 (86%)	7 (5%)	0 (0%)	13 (9%)	
	Do you normally get cell clean	· ·			122 (87%)	17 (12%)	1 (1%)	1 (1%)	
	Is your cell call bell normally a				83 (59%)	13 (9%)	37 (26%)	8 (6%)	
	Is it normally quiet enough for night time?	you to be able to	relax or sleep	in your cell at	120 (86%)	19 (14%)	0 (0%)	1 (1%)	
	Can you normally get your sto	red property if you	u need to?		109 (78%)	12 (9%)	16 (11%)	3 (2%)	
Q4.4	What is the food like here?								
Q4.4		Very good         Good         Neither           7 (5%)         51 (35%)         39 (27%)					Very L	had	
						Bad I 32 (22%)			
Q4.5	Does the shop/canteen sell Have not bought anyth						2 (1	%)	
	Yes	0 )					•	•	
	No								
Q4.6	Is it easy or difficult to get:	Mary agay	Facu	Maithar	Difficult	Voru diff	ioult D	on't know	
	A complaint form	<i>very easy</i> 76 (52%)		Neither		0 (0%		3 (2%)	
	A complaint form An application form	78 (52%) 78 (57%)	55 (40%)	6 (4%) 4 (3%)	2 (1%) 0 (0%)	0 (0%	,	0 (0%)	
Q4.7	Have you made an application						1./	O (05%)	
	No							, ,	
Q4.8	Please answer the following (If you have not made an appl								
					Not mad one	<b>le</b> Ye	95	No	
	Do you feel <i>applications</i> are d Do you feel <i>applications</i> are d		(within seven	days)?	7 (5%) 7 (5%)			27 (19%) 34 (25%)	
Q4.9	Have you made a complaint						71	(400/)	
	Yes No							` '	

Q4.10	Please answer the f						
					Not made	Yes	No
	Do you feel <i>complain</i>	ts are dealt with fair	·lv?		<i>one</i> 75 (52%)	30 (21%)	40 (28%)
	Do you feel <i>complain</i>			n days)?	75 (52%)	38 (26%)	31 (22%)
	Were you given infor				52 (40%)	35 (27%)	43 (33%)
Q4.11	Have you ever been						
		mplaint					• •
							• •
Q4.12	How easy or difficul	t is it for you to se	e the Independen	t Monitoring Boar	d (IMB)?		
	Don't know who they are	Very easy	Easy	Neither	Difficult	Vei	ry difficult
	9 (6%)	44 (30%)	67 (46%)	21 (14%)	5 (3%)		1 (1%)
Q4.13	What level of the IE						
		hat the IEP scheme				•	•
							` '
						•	•
						•	•
Q4.14	Do you feel you hav	e been treated fair	rly in your experie	nce of the IEP sch	neme?	0.4	201)
	Don't know what the IEP scheme is					•	•
							, ,
Q4.15	Do the different leve						(00/)
	Don't know what the IEP scheme isYes						• •
Q4.16	Please answer the f	ollowing question	s about this priso	n:			
	In the last six months	havo any mombors	s of staff physically	rostrained you	<i>Yes</i> 0 (0%)	1/	<i>No</i> 15 (100%)
	(C&R)?	nave any members	s of stall priysically	restrained you	0 (070)	14	10070)
	In the last six months separation unit?	have you spent a r	night in the segrega	tion/care and	5 (3%)	1	40 (97%)
Q4.17	Please answer the f						
					Yes	No	Don' t know/N/A
	Do you feel your relig Are you able to speal			clusto if you want	86 (59%)	23 (16%)	38 (26%)
	to?	r to a religious lead	ei oi youi iailii iii pi	ivale ii you walil	92 (64%)	16 (11%)	35 (24%)
Q4.18	Can you speak to a	•	•				
	Yes		N			Don't know	
	104 (7	2%)	2 (*	1%)		39 (27%)	

# Q4.19 Please answer the following questions about staff in this prison:

	<i>Yes</i>	IVO
Is there a member of staff you can turn to for help if you have a problem?	133 (92%)	12 (8%)
Do most staff treat you with respect?	130 (90%)	14 (10%)

	\$	Section 5: Safet	у	
Q5.1	Have you ever felt unsafe in this prison?			
	Yes	43 (30%)		
	No	102 (70%)		
Q5.2	Do you feel unsafe in this prison at the m			
	Yes	, ,		
	No	130 (90%)		
Q5.3	In which areas of this prison do you/have	you ever felt u	nsafe? (Please tick all that apply to you.	)
			At mealtimes	
	Everywhere	5 (4%)	At health services	5 (4%)
	Segregation unit	4 (3%)	Visit's area	2 (1%)
	Association areas	9 (6%)	In wing showers	9 (6%)
	Reception area	2 (1%)	In gym showers	1 (1%)
	At the gym	11 (8%)	In corridors/stairwells	
	In an exercise yard		On your landing/wing	7 (5%)
	At work		In your cell	
	During movement	, ,	At religious services	
	At education		J	, ,
Q5.4	Have you been victimised by another pris	soner or aroup (	of prisoners here?	
	Yes		- P. 1991.919	
	No	• •	If No, go to question 5.6	
Q5.5	If yes, what did the incident(s) involve/wh	nat was it about	2 (Dloggo tick all that apply to you)	
Q3.5				1 (10/)
	Insulting remarks (about you or your family or friends)	25 (17%) 	Because of your sexuality	1 (170)
	Physical abuse (being hit, kicked or	5 (3%)	Because you have a disability	7 (5%)
	assaulted)			
	Sexual abuse	2 (1%)	Because of your religion/religious beliefs	7 (5%)
	Because of your race or ethnic origin	7 (5%)	Because of your age	
	Because of drugs		Being from a different part of the country than others	
	Having your canteen/property taken	0 (0%)	Because of your offence/crime	24 (17%)
	Because you were new here		Because of gang related issues	
	,			- (
Q5.6	Have you been victimised by a member o Yes		of staff here?	
	No		If No, go to question 5.8	
OF 7	If you what did the incident(s) involve/wh	at was it about	2 (Diago tiek all that apply to you)	
Q5.7	If yes, what did the incident(s) involve/wh			0 (00/)
	Insulting remarks (about you or your	13 (9%)	Because you have a disability	0 (0%)
	family or friends)			2 (20()
	Physical abuse (being hit, kicked or assaulted)	3 (2%)	Because of your religion/religious beliefs	3 (2%)
	Sexual abuse	0 (0%)	Because if your age	1 (1%)
	Because of your race or ethnic origin		Being from a different part of the country	
	=	- (-/-)	than others	

		rugs were new here			our offence/c gang related is		
		our sexuality			<i>y</i> • <i>y</i> • • • • • • • • • • • • • • • • • • •		. ( ,
Q5.8	Not been vict Yes	ictimised by prisoner					28 (20%)
Q5.9	Yes	threatened or intimid					36 (25%) 108 (75%)
Q5.10	Yes	threatened or intimid					23 (16%) 119 (84%)
Q5.11	Very easy	It to get illegal drugs Easy 19 (13%)	in this prison? Neither 6 (4%)	<i>Difficult</i> 10 (7%)		difficult (4%)	<i>Don't know</i> 91 (65%)
		Sec	tion 6: Health s	ervices			
Q6.1	How easy or difficu	ult is it to see the follo Don't know	owing people?  Very easy	Easy	Neither	Difficult	Very difficult
	The doctor The nurse The dentist The optician	4 (3%) 3 (2%) 10 (7%) 15 (11%)	26 (18%) 41 (29%) 17 (12%) 12 (9%)	78 (54%) 79 (56%) 58 (42%) 40 (29%)	21 (14%) 11 (8%) 17 (12%) 22 (16%)	16 (11%) 6 (4%) 33 (24%) 35 (25%)	0 (0%) 0 (0%) 4 (3%) 14 (10%)
Q6.2		e a pharmacist?					, ,
Q6.3	What do you think	of the quality of the h	nealth service fi Very good	rom the followin	ng people? <i>Neither</i>	Bad	Very bad
	The doctor The nurse The dentist The optician	5 (3%) 4 (3%) 13 (9%) 21 (15%)	48 (33%) 30 (21%) 44 (32%) 30 (22%)	62 (43%) 60 (43%) 59 (42%) 54 (39%)	18 (12%) 17 (12%) 12 (9%) 14 (10%)	8 (6%) 23 (16%) 7 (5%) 14 (10%)	4 (3%) 6 (4%) 4 (3%) 5 (4%)
Q6.4	What do you think <i>Not been</i> 1 (1%)	of the overall quality Very good 25 (17%)	of the health se Good 67 (47%)	ervices here? Neither 18 (13%)		<i>ad</i> (14%)	<i>Very bad</i> 13 (9%)
Q6.5		aking medication?					• • •
Q6.6	Not taking m Yes	edication, are you all edication					59 (42%) 80 (56%)

Q6.7	Do you feel you have any emotional well-being/mental health issues?  Yes	36 (25%)
	No	, ,
Q6.8	Are your emotional well-being/mental health issues being addressed by any of the following? that apply to you.)	
	Do not have any issues/not receiving any help  Doctor  Nurse	6 (4%)
	Psychiatrist Mental health in-reach team	6 (4%)
	CounsellorOther	6 (4%)
Q6.9	Did you have a problem with either of the following when you came into this prison?  Yes	No
	Drugs 17 (12%) Alcohol 21 (15%)	124 (88%) 117 (85%)
Q6.10	Have you developed a problem with drugs since you have been in this prison?  Yes	5 (3%)
	No	139 (97%)
Q6.11	Do you know who to contact in this prison to get help with your drug or alcohol problem?  Yes	30 (21%) 2 (1%)
	Did not/do not have a drug or alcohol problem	
Q6.12	Have you received any intervention or help (including, CARATs, Health Services etc.) for your problem, while in this prison?  Yes	_
	No  Did not / do not have a drug or alcohol problem	5 (3%)
Q6.13	Was the intervention or help you received, while in this prison, helpful?	
	No  Did not have a problem/have not received help	5 (3%) 114 (80%)
Q6.14	Do you think you will have a problem with either of the following when you leave this prison?  Yes No	Don't know
	Drugs 2 (1%) 133 (94) Alcohol 3 (2%) 131 (95)	4%) 7 (5%)
Q6.15	Do you know who in this prison can help you contact external drug or alcohol agencies on rel	ease? 15 (11%)
	No	2 (1%)
	Section 7: Purposeful activity	
Q7.1	Are you currently involved in any of the following activities? (Please tick all that apply to you.)	
	Prison job	26 (18%)

	9	, ,					
Q7.2	If you have been i	nvolved in any o	of the following	Not been	orison, do you <i>Yes</i>	ı think it will help <i>No</i>	you on release <sup>c</sup> Don't know
	Prison job Vocational or skills Education (includir Offending behavior	ıg basic skills)		involved 6 (5%) 7 (7%) 2 (2%) 5 (4%)	43 (37%) 66 (67%) 77 (70%) 65 (56%)	22 (22%) 29 (26%)	
Q7.3	Never Less than on About once a More than or	o goa weeka weeka					13 (9%) 24 (17%) 46 (32%) 56 (39%)
Q7.4	On average how r	many times do y	ou go to the gy 1	m each week?	3 to 5	More than 5	Don't know
	<i>go</i> 45 (31%)	30 (21%)	2 (1%)	15 (10%)	35 (24%)	16 (11%)	1 (1%)
Q7.5	On average how r <i>Don't want to go</i> 9 (6%)		1 to 2	? 3	th week? to 5 (20%)	<i>More than 5</i> 65 (45%)	<i>Don't know</i> 4 (3%)
Q7.6	2 to less that 4 to less that 6 to less that 8 to less that 10 hours or t	k etc.) hours n 4 hours n 6 hours n 8 hours n 10 hours more				Please include ho	6 (4%) 12 (8%) 21 (15%) 28 (19%) 40 (28%) 31 (22%)
Q7.7	On average, how Don't want to go 2 (1%)		ou have assoc 1 to 2 1 (1%	? 3	e <b>k?</b> <i>to 5</i> (16%)	<i>More than 5</i> 116 (81%)	Don't know 2 (1%)
Q7.8	Never Rarely Some of the Most of the t	n association time					12 (8%) 38 (26%) 47 (33%) 25 (17%)

# Section 8: Resettlement

Q8.1	When did you first meet your personal office Still have not met him/her In the first week More than a week Don't remember.			93 (64%) 30 (21%)
Q8.2	How helpful do you think your personal office  Do not have a Very helpful Helpful Helpful Still have not met  him/ her	er is? <i>Plpful Neithe</i>	er Not very helpful	Not at all helpful
		(36%) 16 (11	%) 13 (9%)	9 (6%)
Q8.3	Do you have a sentence plan/OASys?  Not sentenced  Yes  No			133 (92%)
Q8.4	How involved were you in the development of Do not have a sentence plan/OASys  Very involved			34 (23%) 52 (36%) 9 (6%) 28 (19%)
Q8.5	Can you achieve all or some of your sentence  Do not have a sentence plan/OASys  Yes  No			94 (67%)
Q8.6	Are there plans for you to achieve all/some o  Do not have a sentence plan/OASys  Yes No			11 (8%) 57 (40%)
Q8.7	Do you feel that any member of staff has help prison?  Not sentenced			0 (0%) 82 (57%)
Q8.8	Do you feel that any member of staff has help Yes			, ,
Q8.9	Have you had any problems with sending or Yes No Don't know			108 (74%)

Q8.10	Have you had any problems				
					, ,
	DUITE KHOW	•••••			5 (3%)
Q8.11	Did you have a visit in the fi				1 (10/)
		•			
					, ,
	Don't remember				+ (370)
Q8.12	How many visits did you red	ceive in the last v	week?		
	Not been in a week	0	1 to	o 2 3 to 4	5 or more
	1 (1%)	110 (79%)	28 (2	20%) 0 (0%)	0 (0%)
Q8.13	,				, ,
	,				, ,
					, ,
	3 3				• •
					, ,
Q8.14			•	mily/friends while in this prison?	
					` ,
	<i>No</i>				82 (59%)
Q8.15	you.)			ing within this prison? (Please tick all	
	Don't know who to col	ntact	50 (41%)	Help with your finances in preparation for release	
	Maintaining good relation	nships	42 (34%)	Claiming benefits on release	40 (33%)
	Avoiding bad relationsh	ips	37 (30%)	Arranging a place at college/continuil	ng 39 (32%)
				education on release	
	Finding a job on release	)	51 (42%)	Continuity of health services on relea	se 38 (31%)
	Finding accommodation	on release	47 (39%)	Opening a bank account	52 (43%)
Q8.16	3	ı problem with aı	ny of the fol	llowing on release from prison? (Plea	se tick all that
	apply to you.)  No problems		66 (50%)	Help with your finances in preparation	7 17 (13%)
	No problems		00 (3070)	for release	
	Maintaining good relation	nshins	12 (9%)	Claiming benefits on release	
	Avoiding bad relationsh	•		Arranging a place at college/continuir	• •
	Two daining bad Telations III	ρ3	7 (370)	education on release	
	Finding a job on release	)	54 (41%)	Continuity of health services on relea	
	Finding accommodation			Opening a bank account	, ,
Q8.17	Have you done anything, or offend in the future?	has anything ha	ppened to y	you here that you think will make you	less likely to
	Not sentenced				0 (0%)
					, ,
	<i>No</i>				52 (37%)



# Prisoner survey responses HMP Shepton Mallet 2010

Prisoner survey responses (missing data has been excluded for each question). Please note: Where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

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	Any percent highlighted in green is significantly better	<u>et</u>	ng or
	Any percent highlighted in blue is significantly worse	on Mal	y C training comparator
	Any percent highlighted in orange shows a significant difference in prisoners' background details	HMP Shepton Mallet 2010	ory C 1s con
	Percentages which are not highlighted show there is no significant difference	HMP 8	Category prisons c
Nun	nber of completed questionnaires returned	147	4032
SEC	TION 1: General information		
2	Are you under 21 years of age?	0%	1%
3a	Are you sentenced?	100%	100%
3b	Are you on recall?	6%	9%
4a	Is your sentence less than 12 months?	0%	5%
4b	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	2%	4%
5	Do you have six months or less to serve?	20%	37%
6	Have you been in this prison less than a month?	1%	7%
7	Are you a foreign national?	8%	13%
8	Is English your first language?	96%	89%
9	Are you from a minority ethnic group (including all those who did not tick White British, White Irish or White other categories)?	13%	27%
10	Do you consider yourself to be Gypsy/Romany/Traveller?	3%	5%
11	Are you Muslim?	4%	11%
12	Are you homosexual/gay or bisexual?	6%	4%
13	Do you consider yourself to have a disability?	28%	14%
14	Is this your first time in prison?	41%	33%
15	Have you been in more than five prisons this time?	59%	13%
16	Do you have any children under the age of 18?	20%	55%
SEC	TION 2: Transfers and escorts		
For t	the most recent journey you have made either to or from court or between prisons:		
1a	Was the cleanliness of the van good/very good?	53%	53%
1b	Was your personal safety during the journey good/very good?	63%	62%
1c	Was the comfort of the van good/very good?	18%	19%
1d	Was the attention paid to your health needs good/very good?	36%	32%
1e	Was the frequency of toilet breaks good/very good?	11%	13%
2	Did you spend more than four hours in the van?	20%	9%
3	Were you treated well/very well by the escort staff?	60%	67%
4a	Did you know where you were going when you left court or when transferred from another prison?	88%	82%
4b	Before you arrived here did you receive any written information about what would happen to you?	29%	18%
4c	When you first arrived here did your property arrive at the same time as you?	88%	88%

HMP Shepton Mallet 2010	HMP Shepton Mallet 2005
147	81
0%	0%
100%	100%
6%	
0%	0%
2%	
20%	24%
1%	
8%	7%
96%	95%
13%	11%
3%	
4%	
6%	
28%	
41%	30%
59%	
20%	31%
53%	53%
63%	68%
18%	20%
36%	39%
11%	13%
20%	35%
60%	69%
88%	95%
29%	19%
88%	88%

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	Any percent highlighted in blue is significantly worse	on Ma	trainin
	Any percent highlighted in orange shows a significant difference in prisoners' background details	Shepto	ory C is con
	Percentages which are not highlighted show there is no significant difference	HMP Shepton Mallet 2010	Category C training prisons comparator
SEC	TION 3: Reception, first night and induction		
1	In the first 24 hours, did staff ask you if you needed help/support with the following:		
1b	Problems with loss of property?	13%	15%
1c	Housing problems?	2%	21%
1d	Problems contacting employers?	1%	11%
1e	Problems contacting family?	26%	46%
1f	Problems ensuring dependants were looked after?	2%	12%
1g	Money problems?	8%	16%
1h	Problems of feeling depressed/suicidal?	30%	48%
1i	Health problems?	48%	61%
1j	Problems in needing protection from other prisoners?	8%	18%
1k	Problems accessing phone numbers?	20%	38%
2	When you first arrived:		
2a	Did you have any problems?	52%	60%
2b	Did you have any problems with loss of property?	17%	15%
2c	Did you have any housing problems?	2%	16%
2d	Did you have any problems contacting employers?	1%	4%
2e	Did you have any problems contacting family?	15%	20%
2f	Did you have any problems ensuring dependants were being looked after?	2%	5%
2g	Did you have any money worries?	6%	16%
2h	Did you have any problems with feeling depressed or suicidal?	11%	14%
2i	Did you have any health problems?	22%	19%
2j	Did you have any problems with needing protection from other prisoners?	2%	5%
2k	Did you have problems accessing phone numbers?	19%	20%
3a	Were you seen by a member of health services in reception?	70%	89%
3b	When you were searched in reception, was this carried out in a respectful way?	90%	76%
4	Were you treated well/very well in reception?	84%	71%
5	On your day of arrival, were you offered any of the following information:		
5a	Information about what was going to happen to you?	48%	52%
5b	Information about what support was available for people feeling depressed or suicidal?	43%	46%
5с	Information about how to make routine requests?	38%	41%
5d	Information about your entitlement to visits?	38%	46%
5е	Information about health services?	50%	62%
5f	Information about the chaplaincy?	35%	54%
	·		

HMP Shepton Mallet 2010	HMP Shepton Mallet 2005
420/	
13%	
2%	
1%	
26%	
2%	
8%	
30%	
48%	
8%	
20%	
52%	43%
17%	17%
2%	11%
1%	4%
15%	24%
2%	5%
6%	8%
11%	19%
22%	13%
2%	7%
19%	
70%	89%
90%	76%
84%	80%
48%	44%
43%	36%
38%	35%
38%	30%
50%	
35%	

	Any percent highlighted in green is significantly better		
	Any percent highlighted in blue is significantly worse	Malle	ining arator
	Any percent highlighted in orange shows a significant difference in prisoners' background details	epton	y C tra comp
	Percentages which are not highlighted show there is no significant difference	HMP Shepton Mallet 2010	Category C training prisons comparator
SEC	TION 3: Reception, first night and induction continued	£ 8	С.
6	On your day of arrival, were you offered any of the following:		
	A smokers/non-smokers pack?	64%	81%
-	The opportunity to have a shower?	49%	41%
6c	The opportunity to make a free telephone call?	35%	50%
6d	Something to eat?	60%	78%
7	Within the first 24 hours did you meet any of the following people:	0070	1070
7a	The chaplain or a religious leader?	40%	48%
	Someone from health services?	78%	75%
7c	A Listener/Samaritans?	22%	29%
8	Did you have access to the prison shop/canteen within the first 24 hours?	5%	23%
9	Did you feel safe on your first night here?	87%	83%
10	Have you been on an induction course?	88%	92%
For t	hose who have been on an induction course:		
11	Did the course cover everything you needed to know about the prison?	81%	65%
SEC	TION 4: Legal rights and respectful custody		
1	In terms of your legal rights, is it easy/very easy to:		
1a	Communicate with your solicitor or legal representative?	85%	50%
1b	Attend legal visits?	88%	55%
1c	Obtain bail information?	8%	19%
2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	48%	41%
3	For the wing/unit you are currently on:		
3а	Are you normally offered enough clean, suitable clothes for the week?	71%	60%
3b	Are you normally able to have a shower every day?	98%	94%
3с	Do you normally receive clean sheets every week?	86%	81%
3d	Do you normally get cell cleaning materials every week?	87%	75%
3е	Is your cell call bell normally answered within five minutes?	59%	41%
3f	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	86%	70%
3g	Can you normally get your stored property, if you need to?	78%	30%
4	Is the food in this prison good/very good?	40%	30%
5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	41%	46%
6a	Is it easy/very easy to get a complaints form?	92%	86%
6b	Is it easy/very easy to get an application form?	97%	90%
7	Have you made an application?	95%	87%

HMP Shepton Mallet 2010	HMP Shepton Mallet 2005
64%	64%
49%	51%
35%	26%
60%	63%
40%	58%
78%	90%
22%	23%
5%	27%
87%	80%
88%	82%
81%	70%
85%	
88%	
8%	
48%	42%
71%	83%
98%	96%
86%	96%
87%	71%
59%	66%
86%	82%
78%	75%
40%	65%
41%	41%
92%	81%
97%	96%
95%	89%
	1

Key	to tables		
	Any percent highlighted in green is significantly better	et	g
	Any percent highlighted in blue is significantly worse	n Mall	ainin
	Any percent highlighted in orange shows a significant difference in prisoners' background details	Shepton Mallet	Category C training prisons comparator
	Percentages which are not highlighted show there is no significant difference	HMP SI 2010	Catego
SEC	TION 4: Legal rights and respectful custody continued	1 6	<u> </u>
For t	hose who have made an application:		
8a	Do you feel applications are dealt with fairly?	80%	59%
8b	Do you feel applications are dealt with promptly (within seven days)?	74%	52%
9	Have you made a complaint?	49%	55%
For t	hose who have made a complaint:		
10a	Do you feel complaints are dealt with fairly?	43%	34%
10b	Do you feel complaints are dealt with promptly (within seven days)?	55%	40%
11	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	36%	24%
10c	Were you given information about how to make an appeal?	27%	31%
1,2	Is it easy/very easy to see the Independent Monitoring Board?	75%	38%
13	Are you on the enhanced (top) level of the IEP scheme?	98%	59%
14	Do you feel you have been treated fairly in your experience if the IEP scheme?	80%	58%
15	Do the different levels of the IEP scheme encourage you to change your behaviour?	34%	50%
16a	In the last six months have any members of staff physically restrained you (C&R)?	0%	5%
16b	In the last six months have you spent a night in the segregation/care and separation unit?	3%	11%
13a	Do you feel your religious beliefs are respected?	59%	55%
13b	Are you able to speak to a religious leader of your faith in private if you want to?	64%	59%
14	Are you able to speak to a Listener at any time, if you want to?	72%	63%
15a	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	92%	73%
15b	Do most staff, in this prison, treat you with respect?	90%	74%
SEC	TION 5: Safety		
1	Have you ever felt unsafe in this prison?	30%	31%
2	Do you feel unsafe in this prison at the moment?	10%	14%
4	Have you been victimised by another prisoner?	32%	20%
5	Since you have been here, has another prisoner:		
5a	Made insulting remarks about you, your family or friends?	17%	10%
5b	Hit, kicked or assaulted you?	3%	6%
5с	Sexually abused you?	2%	1%
5d	Victimised you because of your race or ethnic origin?	5%	4%
5е	Victimised you because of drugs?	2%	3%
5f	Taken your canteen/property?	0%	4%
5g	Victimised you because you were new here?	4%	4%
5h	Victimised you because of your sexuality?	1%	1%
5i	Victimised you because you have a disability?	5%	2%
5j	Victimised you because of your religion/religious beliefs?	5%	3%
5k	Victimised you because of your age?	3%	1%
51	Victimised you because you were from a different part of the country?	3%	5%
5m	Victimised you because of your offence/crime?	16%	3%
5n	Victimised you because of gang related issues?	2%	4%

HMP Shepton Mallet 2010	HMP Shepton Mallet 2005
80%	79%
74%	71%
49%	47%
43%	36%
55%	27%
36%	43%
27%	35%
75%	73%
98%	
80%	
34%	
0%	
3%	
59%	64%
64%	78%
72%	82%
92%	88%
90%	89%
30%	23%
10%	
32%	28%
17%	15%
3%	4%
2%	6%
5%	10%
2%	1%
0%	4%
4%	4%
1%	
5%	
5%	
3%	
3%	4%
16%	
2%	

Any percent highlighted in blue is significantly worse         Percentages which are not highlighted show there is no significant difference         Percentages which are not highlighted show there is no significant difference         Percentages which are not highlighted show there is no significant difference         Percentages which are not highlighted show there is no significant difference         Percentages which are not highlighted show there is no significant difference         Percentages which are not highlighted show there is no significant difference         Percentages which are not highlighted show there is no significant difference         Percentages which are not highlighted show there is no significant difference         Percentages which are not highlighted show there is no significant difference         Percentages which are not highlighted show there is no significant difference         Percentages which are not highlighted show there is no significant difference         Percentages which are not highlighted show there is no significant difference         Percentages which are not highlighted show there is no significant difference         Percentages which are not highlighted show there is no significant difference         Percentages which are not highlighted show there is no significant difference         Percentages which are not significant difference         <		Any percent highlighted in green is significantly better	_	
SECTION 5: Safety continued         Image: Continued of Staff?         Image: Continued of Staff? <t< td=""><td></td><td>Any percent highlighted in blue is significantly worse</td><td>Malle</td><td>ining arator</td></t<>		Any percent highlighted in blue is significantly worse	Malle	ining arator
SECTION 5: Safety continued         Image: Continued of Staff?         Image: Continued of Staff? <t< td=""><td></td><td></td><td>pton</td><td>, C tra</td></t<>			pton	, C tra
SECTION 5: Safety continued         Image: Continued of Staff?         Image: Continued of Staff? <t< td=""><td></td><td></td><td>IP Sho</td><td>tegory</td></t<>			IP Sho	tegory
6         Have you been victimised by a member of staff?         23%         22%           7         Since you have been here, has a member of staff?         Image: Control of the properties of the properti	SEC.			Ca
7 Since you have been here, has a member of staff:         Image: Company of the properties of the proper				
7a         Made insulting remarks about you, your family or friends?         9%         10%           7b         Hit, kicked or assaulted you?         2%         3%           7c         Sexually abused you?         0%         1%           7d         Victimised you because of your race or ethnic origin?         3%         5%           7e         Victimised you because of drugs?         3%         3%           7f         Victimised you because you were new here?         0%         2%           7g         Victimised you because of your sexuality?         0%         2%           7i         Victimised you because of your adjoin/religious beliefs?         2%         3%           7i         Victimised you because of your age?         1%         1%           7i         Victimised you because of your age?         1%         1%           7i         Victimised you because of your age?         1%         1%           7i         Victimised you because of your offence/crime?         7%         4%           7i         Victimised you because of your offence/crime?         7%         4%           7i         Victimised you because of your offence/crime?         7%         4%           7i         Victimised you because of your offence/crime?         2%			23%	22%
Hit, kicked or assaulted you?   2%   3%   76   Sexually abused you?   0%   1%   1%   1%   1%   1%   1%   1%		-	00/	400/
7c         Sexually abused you?         0%         1%           7d         Victimised you because of your race or ethnic origin?         3%         5%           7e         Victimised you because of drugs?         3%         3%           7f         Victimised you because you were new here?         0%         5%           7g         Victimised you because of your sexuality?         0%         2%           7h         Victimised you because you have a disability?         0%         2%           7i         Victimised you because of your religion/religious beliefs?         2%         3%           7j         Victimised you because of your age?         1%         1%           7k         Victimised you because of your offence/crime?         7%         4%           7m         Victimised you because of your offence/crime?         7%         4%           7m         Victimised you because of gang related issues?         0%         2%           8 Did you report any victimisation that you have experienced?         55%         38%           9 Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?         25%         22%           10 Have you ever felt threatened or intimidated by a member of staff in here?         16%         18%           11 Is it easy/very easy to				
Victimised you because of your race or ethnic origin?  7e Victimised you because of drugs?  7f Victimised you because you were new here?  7f Victimised you because you were new here?  7f Victimised you because of your sexuality?  7f Victimised you because of your sexuality?  7f Victimised you because of your sexuality?  7f Victimised you because of your religion/religious beliefs?  7f Victimised you because of your age?  7f Victimised you because of your age?  7f Victimised you because of your age?  7f Victimised you because of your offence/crime?  7f Victimised you because of your offence	7b	Hit, kicked or assaulted you?	2%	3%
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7f Victimised you because you were new here? 7g Victimised you because of your sexuality? 7h Victimised you because of your sexuality? 7i Victimised you because of your religion/religious beliefs? 7i Victimised you because of your age? 7i Victimised you because of your offence/crime? 7i Victimised you because of your offence/crime? 7i Victimised you because of your offence/crime? 7i Victimised you because of gang related issues? 7i Victimised you because of your offence/crime? 7i Victimised you because o	7d	Victimised you because of your race or ethnic origin?	3%	5%
7g Victimised you because of your sexuality? 7h Victimised you because you have a disability? 7i Victimised you because of your religion/religious beliefs? 7i Victimised you because of your age? 7j Victimised you because of your age? 7k Victimised you because of your age? 7l Victimised you because of your offence/crime? 7r Victimised you because of gang related issues? 7r Victimised you because of your offence/crime?	7e	Victimised you because of drugs?	3%	3%
The Victimised you because you have a disability?  7i Victimised you because of your religion/religious beliefs?  7j Victimised you because of your age?  1m Victimised you because of your age?  7l Victimised you because of your offence/crime?  7l Victimised you because of your offence/crime?  7l Victimised you because of your offence/crime?  7l Victimised you because of gang related issues?  7l Victimised you because of gang related issues?  8 Did you report any victimisation that you have experienced?  9 Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?  10 Have you ever felt threatened or intimidated by a member of staff in here?  11 Is it easy/very easy to get illegal drugs in this prison?  55ct 10 Is it easy/very easy to see the doctor?  12 Is it easy/very easy to see the doctor?  13 Is it easy/very easy to see the dentist?  14 Is it easy/very easy to see the dentist?  15 Is it easy/very easy to see the optician?  2 Are you able to see a pharmacist?  For those who have been to the following services, do you think the quality of the health service from the following is good/very good:  3 The doctor?  7 py 53%  3 The nurse?  3 c The dentist?  3 the optician?  4 the optician?  5 the o	7f	Victimised you because you were new here?	0%	5%
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7j Victimised you because of your age?  7k Victimised you because you were from a different part of the country?  7k Victimised you because of your offence/crime?  8k Out It is it easylver of part in the following services, do you think the quality of the health service from the following is good/very good:  7k Victimised you because of your offence/crime?  7k Victimised you because of your after prisoners  7k Victimised you because of your after prisoners  8k Out Park  9k Victimised you because of your after prisoners  9k Victimi	7h	Victimised you because you have a disability?	0%	2%
7k Victimised you because you were from a different part of the country?  7k Victimised you because of your offence/crime?  7k Victimised you because of gang related issues?  8k Did you report any victimisation that you have experienced?  8k Did you report any victimisation that you have experienced?  9k Jave you ever felt threatened or intimidated by another prisoner/group of prisoners in here?  1c Is it easy/very easy to get illegal drugs in this prison?  1c Is it easy/very easy to see the doctor?  1c Is it easy/very easy to see the doctor?  1d Is it easy/very easy to see the dentist?  1d Is it easy/very easy to see the dentist?  1d Is it easy/very easy to see the dentist?  1d Is it easy/very easy to see the optician?  1d Is it easy/very easy to see th	7i	Victimised you because of your religion/religious beliefs?	2%	3%
71 Victimised you because of your offence/crime? 7 Victimised you because of gang related issues? 8 Did you report any victimisation that you have experienced? 9 Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here? 10 Have you ever felt threatened or intimidated by a member of staff in here? 11 Is it easy/very easy to get illegal drugs in this prison? 20% 35%  SECTION 6: Healthcare 1a Is it easy/very easy to see the doctor? 72% 40% 1b Is it easy/very easy to see the dortor? 86% 66% 1c Is it easy/very easy to see the dentist? 1d Is it easy/very easy to see the optician? 2 Are you able to see a pharmacist? 5 Are you able to see a ph	7j	Victimised you because of your age?	1%	1%
7m Victimised you because of gang related issues? For those who have been victimised by staff or other prisoners:  8 Did you report any victimisation that you have experienced? 55% 38% 9 Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here? 25% 22% 10 Have you ever felt threatened or intimidated by a member of staff in here? 16% 18% 11 Is it easy/very easy to get illegal drugs in this prison? 20% 35% SECTION 6: Healthcare 1a Is it easy/very easy to see the doctor? 72% 40% 1b Is it easy/very easy to see the nurse? 86% 66% 1c Is it easy/very easy to see the dentist? 54% 15% 1d Is it easy/very easy to see the optician? 38% 18% 2 Are you able to see a pharmacist? 54% 52% For those who have been to the following services, do you think the quality of the health service from the following is good/very good: 3a The doctor? 79% 53% 3b The nurse? 66% 66% 3c The dentist? 3d 47%	7k	Victimised you because you were from a different part of the country?	3%	4%
For those who have been victimised by staff or other prisoners:  8 Did you report any victimisation that you have experienced?  9 Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?  16% 18%  10 Have you ever felt threatened or intimidated by a member of staff in here?  16% 18%  11 Is it easy/very easy to get illegal drugs in this prison?  20% 35%  SECTION 6: Healthcare  1a Is it easy/very easy to see the doctor?  72% 40%  1b Is it easy/very easy to see the nurse?  86% 66%  1c Is it easy/very easy to see the dentist?  1d Is it easy/very easy to see the optician?  2 Are you able to see a pharmacist?  For those who have been to the following services, do you think the quality of the health service from the following is good/very good:  3a The doctor?  79% 53%  3b The nurse?  66% 66%  3c The dentist?  3d 47%	71	Victimised you because of your offence/crime?	7%	4%
B Did you report any victimisation that you have experienced?  14 Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?  15 14 Have you ever felt threatened or intimidated by a member of staff in here?  16 18 18 11 Is it easy/very easy to get illegal drugs in this prison?  20 35%  SECTION 6: Healthcare  1a Is it easy/very easy to see the doctor?  1b Is it easy/very easy to see the nurse?  1c Is it easy/very easy to see the dentist?  1d Is it easy/very easy to see the optician?  2 Are you able to see a pharmacist?  For those who have been to the following services, do you think the quality of the health service from the following is good/very good:  3a The doctor?  79 53%  3b The nurse?  66% 66%  3c The dentist?  37 47%  47%	7m	Victimised you because of gang related issues?	0%	2%
9 Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here? 25% 22% 10 Have you ever felt threatened or intimidated by a member of staff in here? 16% 18% 11 is it easy/very easy to get illegal drugs in this prison? 20% 35% SECTION 6: Healthcare 72% 40% 15 is it easy/very easy to see the doctor? 72% 40% 15 is it easy/very easy to see the nurse? 86% 66% 15% 15% 15% 15% 15% 15% 15% 15% 15% 15	For t	hose who have been victimised by staff or other prisoners:		
Have you ever felt threatened or intimidated by a member of staff in here?  16% 18%  11 Is it easy/very easy to get illegal drugs in this prison?  20% 35%  SECTION 6: Healthcare  1a Is it easy/very easy to see the doctor?  72% 40%  1b Is it easy/very easy to see the nurse?  86% 66%  1c Is it easy/very easy to see the dentist?  54% 15%  1d Is it easy/very easy to see the optician?  38% 18%  2 Are you able to see a pharmacist?  For those who have been to the following services, do you think the quality of the health service from the following is good/very good:  3a The doctor?  79% 53%  3b The nurse?  66% 66%  3c The dentist?  3the optician?  72% 47%	8	Did you report any victimisation that you have experienced?	55%	38%
11 Is it easy/very easy to get illegal drugs in this prison?  SECTION 6: Healthcare  1a Is it easy/very easy to see the doctor?  1b Is it easy/very easy to see the nurse?  1c Is it easy/very easy to see the dentist?  1d Is it easy/very easy to see the optician?  2 Are you able to see a pharmacist?  For those who have been to the following services, do you think the quality of the health service from the following is good/very good:  3a The doctor?  3b The nurse?  66%  66%  3c The dentist?  3c The dentist?  3c The optician?  7c 47%	9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	25%	22%
SECTION 6: Healthcare  1a Is it easy/very easy to see the doctor?  1b Is it easy/very easy to see the nurse?  1c Is it easy/very easy to see the dentist?  1d Is it easy/very easy to see the optician?  2 Are you able to see a pharmacist?  41% 52%  For those who have been to the following services, do you think the quality of the health service from the following is good/very good:  3a The doctor?  3b The nurse?  66% 66%  3c The dentist?  3c The dentist?  3d The optician?	10	Have you ever felt threatened or intimidated by a member of staff in here?	16%	18%
1a Is it easy/very easy to see the doctor?72%40%1b Is it easy/very easy to see the nurse?86%66%1c Is it easy/very easy to see the dentist?54%15%1d Is it easy/very easy to see the optician?38%18%2 Are you able to see a pharmacist?41%52%For those who have been to the following services, do you think the quality of the health service from the following is good/very good:	11	Is it easy/very easy to get illegal drugs in this prison?	20%	35%
1bIs it easy/very easy to see the nurse?86%66%1cIs it easy/very easy to see the dentist?54%15%1dIs it easy/very easy to see the optician?38%18%2Are you able to see a pharmacist?41%52%For those who have been to the following services, do you think the quality of the health service from the following is good/very good:79%53%3aThe doctor?79%53%3bThe nurse?66%66%3cThe dentist?82%46%3dThe optician?72%47%	SEC	TION 6: Healthcare		
1c Is it easy/very easy to see the dentist?  1d Is it easy/very easy to see the optician?  2 Are you able to see a pharmacist?  41% 52%  For those who have been to the following services, do you think the quality of the health service from the following is good/very good:  3a The doctor?  3b The nurse?  66% 66%  3c The dentist?  3d The optician?	1a	Is it easy/very easy to see the doctor?	72%	40%
1dIs it easy/very easy to see the optician?38%18%2Are you able to see a pharmacist?41%52%For those who have been to the following services, do you think the quality of the health service from the following is good/very good:79%53%3aThe doctor?79%53%3bThe nurse?66%66%3cThe dentist?82%46%3dThe optician?72%47%	1b	Is it easy/very easy to see the nurse?	86%	66%
2 Are you able to see a pharmacist?  41% 52%  For those who have been to the following services, do you think the quality of the health service from the following is good/very good:  3a The doctor?  3b The nurse?  66% 66%  3c The dentist?  3d The optician?	1c	Is it easy/very easy to see the dentist?	54%	15%
For those who have been to the following services, do you think the quality of the health service from the following is good/very good:  3a The doctor?  79% 53%  3b The nurse?  66% 66%  3c The dentist?  3d The optician?  72% 47%	1d	Is it easy/very easy to see the optician?	38%	18%
the following is good/very good:       79%       53%         3a       The doctor?       79%       53%         3b       The nurse?       66%       66%         3c       The dentist?       82%       46%         3d       The optician?       72%       47%	2	Are you able to see a pharmacist?	41%	52%
3b The nurse? 66% 66% 3c The dentist? 82% 46% 3d The optician? 72% 47%				
3c       The dentist?       82%       46%         3d       The optician?       72%       47%	За	The doctor?	79%	53%
3d The optician? 72% 47%	3b	The nurse?	66%	66%
	3с	The dentist?	82%	46%
4 The overall quality of health services? 64% 47%	3d	The optician?	72%	47%
	4	The overall quality of health services?	64%	47%

HMP Shepton Mallet 2010	HMP Shepton Mallet 2005
23%	19%
9%	14%
2%	1%
0%	0%
3%	4%
3%	0%
0%	0%
2%	
0%	
2%	
1%	
3%	4%
7%	
0%	
55%	47%
25%	
16%	
20%	17%
72%	
86%	
54%	
38%	
41%	
79%	82%
66%	83%
82%	87%
72%	92%
64%	78%

	Any percent highlighted in green is significantly better	et	B 20
	Any percent highlighted in blue is significantly worse	n Mall	C training omparator
	Any percent highlighted in orange shows a significant difference in prisoners' background details	HMP Shepton Mallet 2010	Category C training orisons comparator
	Percentages which are not highlighted show there is no significant difference	HMP 2010	Category prisons c
Hea	thcare continued		
5	Are you currently taking medication?	59%	42%
For t	hose currently taking medication:		
6	Are you allowed to keep possession of your medication in your own cell?	96%	88%
7	Do you feel you have any emotional well-being/mental health issues?	25%	25%
	hose with emotional well-being/mental health issues, are these being addressed by any of the wing:		
8a	Not receiving any help?	34%	34%
8b	A doctor?	20%	32%
8c	A nurse?	28%	18%
8d	A psychiatrist?	20%	18%
8e	The mental health in-reach team?	46%	30%
8f	A counsellor?	20%	12%
9a	Did you have a drug problem when you came into this prison?	12%	19%
9b	Did you have an alcohol problem when you came into this prison?	15%	12%
10a	Have you developed a drug problem since you have been in this prison?	3%	11%
For t	hose with drug or alcohol problems:		
11	Do you know who to contact in this prison for help?	93%	88%
12	Have you received any help or intervention while in this prison?	85%	76%
For t	hose who have received help or intervention with their drug or alcohol problem:		
13	Was this intervention or help useful?	83%	74%
14a	Do you think you will have a problem with drugs when you leave this prison? (Yes/don't know)	6%	22%
14b	Do you think you will have a problem with alcohol when you leave this prison? (Yes/don't know)	7%	16%
For t	hose who may have a drug or alcohol problem on release, do you know who in this prison:		
15	Can help you contact external drug or alcohol agencies on release?	86%	59%

MP Shepton Mallet 010	IMP Shepton Mallet 005
H 2	ĎĪ
59%	
96%	
25%	
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28%	
20%	
46%	
20%	
12%	8%
15%	5%
3%	
93%	
85%	
83%	
6%	11%
7%	8%
86%	78%

A A A P SECT 1 A A 1b V 1c E	Any percent highlighted in green is significantly better Any percent highlighted in blue is significantly worse Any percent highlighted in orange shows a significant difference in prisoners' background details Percentages which are not highlighted show there is no significant difference  TION 7: Purposeful activity  Are you currently involved in any of the following activities:	HMP Shepton Mallet 2010	Category C training prisons comparator
A P SECT  1 A 1a A 1b V 1c E	Any percent highlighted in orange shows a significant difference in prisoners' background details Percentages which are not highlighted show there is no significant difference  TION 7: Purposeful activity  Are you currently involved in any of the following activities:	HMP Shepton Mall 2010	Category C trainin prisons comparate
SECT  1 A  1a A  1b V  1c E	Percentages which are not highlighted show there is no significant difference  TION 7: Purposeful activity  Are you currently involved in any of the following activities:	HMP Sheptor 2010	Category C tr prisons comp
SECT  1 A  1a A  1b V  1c E	Percentages which are not highlighted show there is no significant difference  TION 7: Purposeful activity  Are you currently involved in any of the following activities:	HMP Sh 2010	Categor
1 A 1a A 1b V 1c E	TION 7: Purposeful activity  Are you currently involved in any of the following activities:	HIN 20	Ca
1 A 1a A 1b V 1c E	Are you currently involved in any of the following activities:		
1a A 1b V			
1b ∨		2404	
1c E	A prison job?	64%	63%
	/ocational or skills training?	18%	19%
<b>1d</b> C	Education (including basic skills)?	38%	31%
	Offending behaviour programmes?	17%	18%
2ai ⊢	Have you had a job while in this prison?	95%	85%
For the	ose who have had a prison job while in this prison:		
2aii	Do you feel the job will help you on release?	40%	52%
2bi ⊢	Have you been involved in vocational or skills training while in this prison?	93%	73%
For the	ose who have had vocational or skills training while in this prison:		
2bii	Do you feel the vocational or skills training will help you on release?	72%	72%
2ci ⊢	Have you been involved in education while in this prison?	98%	79%
For the	ose who have been involved in education while in this prison:		
2cii	Do you feel the education will help you on release?	72%	73%
2di ⊢	Have you been involved in offending behaviour programmes while in this prison?	96%	71%
For the	ose who have been involved in offending behaviour programmes while in this prison:		
2dii	Do you feel the offending behaviour programme(s) will help you on release?	58%	66%
3	Do you go to the library at least once a week?	70%	46%
<b>4</b> C	On average, do you go to the gym at least twice a week?	46%	54%
<b>5</b> C	On average, do you go outside for exercise three or more times a week?	65%	52%
<b>6</b> C	On average, do you spend ten or more hours out of your cell on a weekday?	21%	16%
7 0	On average, do you go on association more than five times each week?	80%	76%
8 0	Oo staff normally speak to you most of the time/all of the time during association?	30%	19%
SECT	TON 8: Resettlement		
1 0	Do you have a personal officer?	97%	74%
For the	ose with a personal officer:		
2	Do you think your personal officer is helpful/very helpful?	73%	63%
For the	ose who are sentenced:		
3	Do you have a sentence plan?	92%	65%
For the	ose with a sentence plan?		
4	Were you involved/very involved in the development of your plan?	64%	60%
5	Can you achieve some/all of your sentence plan targets in this prison?	73%	69%
6	Are there plans for you to achieve some/all your targets in another prison?	44%	37%
For the	lose who are sentenced:		
7	Do you feel that any member of staff has helped you address your offending behaviour while at this prison?	58%	32%
8 0	Do you feel that any member of staff has helped you to prepare for release?	36%	18%
9 ⊢	Have you had any problems with sending or receiving mail?	23%	37%
<b>10</b> H	Have you had any problems getting access to the telephones?	6%	19%
<b>11</b> D	Did you have a visit in the first week that you were here?	10%	23%
<b>12</b> D	Did you receive one or more visits in the last week?	20%	31%

HMP Shepton Mallet 2010	HMP Shepton Mallet 2005
0.40/	
64%	
18%	
38%	
17%	
95%	
40%	
93%	
72%	
98%	
72%	
96%	
58%	
70%	48%
46%	47%
65%	64%
21%	13%
80%	68%
30%	39%
97%	94%
73%	710/
13%	71%
92%	87%
64%	76%
73%	
4470	
58%	
36%	
23%	25%
6%	8%
10%	8%
20%	

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	Any percent highlighted in green is significantly better	et	g
	Any percent highlighted in blue is significantly worse	Shepton Mallet	Category C training prisons comparator
	Any percent highlighted in orange shows a significant difference in prisoners' background details	shepto	ory C (
	Percentages which are not highlighted show there is no significant difference	HMP S 2010	Catego
Rese	ettlement continued		
For t	hose who have had visits:		
13	How are you and your family/ friends usually treated by visits staff? (Very well/well)	85%	55%
14	Have you been helped to maintain contact with family/friends while in this prison?	41%	39%
15	Do you know who to contact within this prison to get help with the following:		
15b	Maintaining good relationships?	34%	17%
15c	Avoiding bad relationships?	30%	12%
15d	Finding a job on release?	42%	43%
15e	Finding accommodation on release?	39%	44%
15f	With money/finances on release?	36%	31%
15g	Claiming benefits on release?	33%	44%
15h	Arranging a place at college/continuing education on release?	32%	31%
15i	Accessing health services on release?	31%	33%
15j	Opening a bank account on release?	43%	28%
16	Do you think you will have a problem with any of the following on release from prison?		
16b	Maintaining good relationships?	9%	13%
16c	Avoiding bad relationships?	5%	14%
16d	Finding a job?	41%	45%
16e	Finding accommodation?	28%	39%
16f	Money/finances?	13%	37%
16g	Claiming benefits?	21%	29%
16h	Arranging a place at college/continuing education?	12%	23%
16i	Accessing health services?	14%	19%
16j	Opening a bank account?	20%	33%
For t	hose who are sentenced:		
17	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	63%	57%

HMP Shepton Mallet 2010	HMP Shepton Mallet 2005
85%	
41%	
34%	
30%	
42%	65%
39%	67%
36%	49%
33%	60%
32%	56%
31%	54%
43%	
9%	
5%	
41%	
28%	
13%	
21% 12%	
14%	
20%	
63%	77%



# **Prisoner OM survey responses HMP Shepton Mallet 2010**

**Prisoner survey responses** (missing data has been excluded for each question). Please note: Where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

	Any percent highlighted in green is significantly better		
	Any percent highlighted in blue is significantly worse	lallet	
		ton N	l type or
	Any percent highlighted in orange shows a significant difference in prisoners' background details	HMP Shepton Mallet	Functional comparator
	Percentages which are not highlighted show there is no significant difference	HMP	Func
Num	nber of completed questionnaires returned	13	171
SEC	TION 1: General information		
1	Are you under 21 years of age?	0%	1%
2	Are you a foreign national?	8%	8%
3	Are you from a minority ethnic group (including all those who did not tick White British, White Irish o White other categories)?	r <b>0</b> %	29%
4	Do you consider yourself to have a disability?	17%	16%
5	Is this prison in your home probation area?	8%	15%
6	Are you on recall?	0%	13%
7	Were you sentenced to less than two years?	0%	9%
8	Do you have six months or less to serve?	23%	30%
SEC	TION 2: Reception and induction		
9	Did you have any of the following problems when you first arrived here:		
9a	Housing problems?	0%	29%
9b	Problems contacting employers?	0%	7%
9с	Problems contacting family?	8%	16%
9d	Problems of feeling depressed/suicidal?	23%	18%
9е	None of the above problems?	69%	57%
For t	those who have been on an induction course:		
10	Did you go on an induction within the first week?	92%	81%
11	If you have been on an induction, did it cover everything you needed to know about the prison?	85%	64%
For t	those who have received a basic skills assessment:		
12	Did you receive a 'basic skills' assessment within the first week?	60%	58%
13	After arrival into this prison did you have an interview with staff to ask if you needed help (e.g. for housing problems, contacting family, feeling depressed or suicidal)?	77%	60%

HMP Shepton Mallet	Overall comparator
13	720
0%	12%
8%	9%
0%	26%
17%	17%
8%	23%
0%	18%
0%	11%
23%	29%
0%	24%
0%	8%
8%	16%
23%	19%
69%	58%
92%	77%
85%	65%
60%	44%
77%	56%

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	Any percent highlighted in blue is significantly worse	ו Malle	, be
	Any percent highlighted in orange shows a significant difference in prisoners' background details	HMP Shepton Mallet	Functional type comparator
	Percentages which are not highlighted show there is no significant difference	HMP S	Functional
SEC	TION 3: Sentence planning		
14	Do you have a sentence plan?	92%	81%
For t	hose who have a sentence plan:		
15	Were you involved in the development of your sentence plan?	67%	68%
16	Has your sentence plan taken into account your individual needs?	82%	62%
17	Can you achieve all or some of your sentence plan targets in this prison?	92%	72%
18	Are there plans for you to achieve some/all your targets in another prison?	38%	35%
19	Are there plans for you to achieve some/all your targets while on licence in the community?	25%	48%
20	Have you had any meetings to discuss your sentence plan while in custody?	83%	79%
21	If you have had sentence planning meetings did any of the following attend:		
21a	Offender supervisor?	90%	78%
21b	Prison staff from other departments?	70%	33%
21c	Offender manager?	70%	63%
21d	Anyone from other agencies?	10%	13%
22	Were these meetings useful to you?	70%	66%
SEC	TION 4: Offender manager		
23	Do you have a named offender manager in the probation service?	100%	91%
For t	hose who have an offender manager:		
24	Has your offender manager been in contact with you since you have been in custody?	92%	84%
25	If you have had contact from your offender manager, what type of contact was it:		
25a	Contact by letter?	55%	57%
25b	Contact by phone?	36%	34%
25c	A visit to the prison?	91%	69%
26	Has your offender manager changed since you have been in custody?	54%	40%
For t	hose who have a sentence plan:		
27	Has your offender manager discussed your sentence plan with you?	67%	72%
28	Do you think you have been supported by your offender manager while in prison?	39%	37%

HMP Shepton Mallet	Overall comparator
92%	71%
92 /0	7 1 /0
67%	75%
82%	63%
92%	71%
38%	34%
25%	45%
83%	83%
90%	62%
70%	31%
70%	54%
10%	19%
70%	68%
100%	89%
92%	80%
55%	48%
36%	27%
91%	69%
54%	43%
67%	74%
39%	43%
33/0	

Key	to tables		
	Any percent highlighted in green is significantly better	ət	
	Any percent highlighted in blue is significantly worse	Malle	type
	Any percent highlighted in orange shows a significant difference in prisoners' background details	heptor	onal ty rator
	Percentages which are not highlighted show there is no significant difference	HMP Shepton Mallet	Functional comparator
SEC	TION 5: Offender supervisor		
29	Do you have an offender supervisor within this prison?	100%	77%
For	hose who have an offender supervisor:		
30	Do you meet with your offender supervisor every month?	82%	79%
31	Do you think you have been supported by your offender supervisor while in prison?	58%	51%
SEC	TION 6: Your time in custody		
32	Have any of the following made it more difficult to take full part in the activities in custody:		
32a	No issues?	82%	59%
32b	Difficulties with religion?	18%	11%
32b	Difficulties with race?	0%	9%
32c	Difficulties with a disability?	9%	11%
32d	Difficulties with language?	0%	7%
32e	Difficulties with reading/writing skills?	0%	18%
32f	Difficulties with other issues?	9%	13%
33	Whist in custody have you been helped with any of the following?:		
33a	Housing?	0%	11%
33b	Eductaion/training /employment?	77%	55%
33c	Money and debt?	23%	10%
33d	Relationships (e.g. family/partner)?	23%	12%
33e	Lifestyle (e.g. friendships)?	23%	13%
33f	Drug use?	8%	44%
33g	Alcohol use?	15%	34%
33h	Emotional well-being?	46%	18%
33i	Thinking skills?	77%	41%
33j	Attitude to offending?	77%	32%
33k	Health?	62%	36%
331	Not had any help?	8%	10%
34	Has anyone done any work with you on basic skills?	100%	64%
35	Has anyone done any work with you on victim awareness?	69%	39%
36	Has any member of staff helped you to address your offending behaviour while in custody?	100%	40%
SEC	TION 7: Resettlement		
37	Has any member of staff helped to prepare for your release while in custody?	31%	13%
38	Do you think you will have a problem with the following on release from custody:		
38a	Problems maintaining/avoiding good relationships?	15%	21%
38b	Problems finding a job?	69%	62%

HMP Shepton Mallet	Overall comparator
100%	72%
82%	76%
58%	54%
82%	69%
18%	7%
0%	5%
9%	9%
0%	3%
0%	10%
9%	10%
0%	11%
77%	56%
23%	8%
23%	14%
23%	14%
8%	38%
15%	27%
46%	22%
77%	39%
77%	32%
62%	35%
8%	15%
100%	53%
69%	34%
100%	38%
31%	16%
15%	19%
69%	63%

	Any percent highlighted in green is significantly better  Any percent highlighted in blue is significantly worse  Any percent highlighted in orange shows a significant difference in prisoners' background details	Shepton Mallet	Functional type comparator
	Percentages which are not highlighted show there is no significant difference	нмР	Func
38c	Finding accommodation?	54%	55%
38d	Problems with money/finances?	39%	38%
38e	Problems claiming benefits?	31%	40%
38f	Problems arranging a place at college/continuing education?	8%	24%
38g	Problems contacting external drug or alcohol agencies?	0%	12%
38h	Problems accessing healthcare services?	0%	20%
38i	Problems opening a bank account?	15%	24%
38j	None of the above problems?	23%	21%
39	Have you done anything, or has anything happened to you during custody that you think will make y less likely to offend in future?	<sup>/QU</sup> 100%	69%

HMP Shepton Mallet	Overall comparator
54%	46%
39%	38%
31%	33%
8%	24%
0%	10%
0%	15%
15%	28%
23%	20%
100%	66%



# Diversity Analysis - Age Key question responses age over 50 HMP Shepton Mallet 2010

**Prisoner survey responses** (missing data has been excluded for each question). Please note: Wher there are apparently large differences, which are not indicated as statistically significant, this is likely be due to chance.

	Any percent highlighted in green is significantly better	over	je of 50
	Any percent highlighted in blue is significantly worse	50 and	r the aç
	Any percent highlighted in orange shows a significant difference in prisoners' background details	rs aged	rs unde
	Percentages which are not highlighted show there is no significant difference	Prisoners aged 50 and over	Prisoners under the age of
Numb	er of completed questionnaires returned	63	83
1.3	Are you sentenced?	100%	100%
1.7	Are you a foreign national?	8%	8%
1.8	Is English your first language?	96%	95%
1.9	Are you from a minority ethnic group (including all those who did not tick White British, White Irish or White other categories)?	8%	18%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	4%	4%
1.11	Are you Muslim?	4%	5%
1.13	Do you consider yourself to have a disability?	31%	23%
1.14	Is this your first time in prison?	38%	45%
2.1d	Was the attention paid to your health needs good/very good?	33%	38%
2.3	Were you treated well/very well by the escort staff?	53%	67%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	90%	88%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	18%	31%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	22%	36%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	40%	54%
3.2a	Did you have any problems when you first arrived?	53%	51%
3.3a	Were you seen by a member of healthcare staff in reception?	71%	70%
3.3b	When you were searched in reception, was this carried out in a respectful way?	93%	89%
3.3b		93%	899

			0
	Any percent highlighted in green is significantly better	l over	ge of 50
	Any percent highlighted in blue is significantly worse	50 and	r the a
	Any percent highlighted in orange shows a significant difference in prisoners' background details	Prisoners aged 50 and over	Prisoners under the age
	Percentages which are not highlighted show there is no significant difference	Prisone	Prisone
3.4	Were you treated well/very well in reception?	89%	81%
3.7b	Did you have access to someone from healthcare within the first 24 hours?	86%	73%
3.9	Did you feel safe on your first night here?	89%	84%
3.10	Have you been on an induction course?	86%	92%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	92%	79%
4.3a	Are you normally offered enough clean, suitable clothes for the week?	78%	65%
4.3b	Are you normally able to have a shower every day?	100%	97%
4.3e	Is your cell call bell normally answered within five minutes?	62%	56%
4.4	Is the food in this prison good/very good?	54%	30%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs	s? <b>33%</b>	47%
4.6a	Is it easy/very easy to get a complaints form?	95%	92%
4.6b	Is it easy/very easy to get an application form?	100%	96%
4.9	Have you made a complaint?	48%	49%
4.13	Are you on the enhanced (top) level of the IEP scheme?	99%	97%
4.14	Do you feel you have been treated fairly in your experience if the IEP scheme	? 76%	83%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	36%	32%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	0%	0%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	4%	4%
4.17a	Do you feel your religious beliefs are respected?	64%	55%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to	? <b>74%</b>	59%
_			

	Any percent highlighted in green is significantly better	over	je of 50
	Any percent highlighted in blue is significantly worse	50 and	r the ag
	Any percent highlighted in orange shows a significant difference in prisoners' background details	Prisoners aged 50 and over	Prisoners under the age
	Percentages which are not highlighted show there is no significant difference	Prisone	Prisone
4.18	Are you able to speak to a Listener at any time, if you want to?	72%	71%
4.15a	Is there a member of staff you can turn to for help if you have a problem in this prison?	95%	91%
4.15b	Do <b>most</b> staff, in this prison, treat you with respect?	96%	86%
5.1	Have you ever felt unsafe in this prison?	28%	31%
5.2	Do you feel unsafe in this prison at the moment?	5%	13%
5.4	Have you been victimised by another prisoner?	29%	33%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	€ 4%	5%
5.5i	Victimised you because you have a disability?	4%	5%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	1%	6%
5.5k	Have you been victimised because of your age? (By prisoners)	6%	0%
5.6	Have you been victimised by a member of staff?	17%	26%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	<sup>9</sup> 1%	5%
5.7h	Victimised you because you have a disability?	0%	0%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	4%	1%
5.7j	Have you been victimised because of your age? (By staff)	1%	0%
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	28%	23%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	10%	20%
5.11	Is it easy/very easy to get illegal drugs in this prison?	13%	24%
6.1a	Is it easy/very easy to see the doctor?	76%	69%
6.1b	Is it easy/ very easy to see the nurse?	87%	86%
6.2	Are you able to see a pharmacist?	36%	46%

	Any percent highlighted in green is significantly better	over	e of 50
	Any percent highlighted in blue is significantly worse	50 and	r the ag
	Any percent highlighted in orange shows a significant difference in prisoners' background details	Prisoners aged 50 and over	Prisoners under the age of
	Percentages which are not highlighted show there is no significant difference	Prisone	Prisone
6.5	Are you currently taking medication?	63%	57%
6.7	Do you feel you have any emotional well-being/mental health issues?	29%	22%
7.1a	Are you currently working in the prison?	60%	67%
7.1b	Are you currently undertaking vocational or skills training?	11%	23%
7.1c	Are you currently in education (including basic skills)?	30%	45%
7.1d	Are you currently taking part in an offending behaviour programme?	21%	14%
7.3	Do you go to the library at least once a week?	70%	72%
7.4	On average, do you go to the gym at least twice a week?	31%	57%
7.5	On average, do you go outside for exercise three or more times a week?	65%	64%
7.6	On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	13%	28%
7.7	On average, do you go on association more than five times each week?	83%	78%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	36%	25%
8.1	Do you have a personal officer?	96%	96%
8.9	Have you had any problems sending or receiving mail?	23%	23%
8.10	Have you had any problems getting access to the telephones?	4%	9%



#### Key questions (disability analysis) HMP Shepton Mallet 2010

Prisoner survey responses (missing data has been excluded for each question). Please note: Where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

ney ic	Admies		
	Any percent highlighted in green is significantly better	have	elves
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	Any percent highlighted in orange shows a significant difference in prisoners' background details	Consider themselves to have a disability	o not consider themselves have a disability
	Percentages which are not highlighted show there is no significant difference	Consider tl a disability	Do not to have
Numb	er of completed questionnaires returned	40	105
1.3	Are you sentenced?	100%	100%
1.7	Are you a foreign national?	10%	7%
1.8	Is English your first language?	92%	97%
1.9	Are you from a minority ethnic group (including all those who did not tick White British, White Irish or Whother categories)?	10%	14%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	6%	3%
1.11	Are you Muslim?	10%	2%
1.13	Do you consider yourself to have a disability?		
1.14	Is this your first time in prison?	34%	43%
2.1d	Was the attention paid to your health needs good/very good?	32%	37%
2.3	Were you treated well/very well by the escort staff?	53%	62%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	88%	89%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	13%	30%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	23%	32%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	40%	50%
3.2a	Did you have any problems when you first arrived?	66%	47%
3.3a	Were you seen by a member of healthcare staff in reception?	73%	71%
3.3b	When you were searched in reception, was this carried out in a respectful way?	80%	94%
3.4	Were you treated well/very well in reception?	78%	87%
3.7b	Did you have access to someone from healthcare within the first 24 hours?	75%	79%
3.9	Did you feel safe on your first night here?	75%	90%
3.10	Have you been on an induction course?	82%	92%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	80%	87%

Key to	tables		
	Any percent highlighted in green is significantly better	o have	elves
	Any percent highlighted in blue is significantly worse	elves to	· thems
	Any percent highlighted in orange shows a significant difference in prisoners' background details	er thems lity	not consider themselves have a disability
	Percentages which are not highlighted show there is no significant difference	Consider themselves to have a disability	Do not c
4.3a	Are you normally offered enough clean, suitable clothes for the week?	60%	77%
4.3b	Are you normally able to have a shower every day?	94%	100%
4.3e	Is your cell call bell normally answered within five minutes?	55%	60%
4.4	Is the food in this prison good/very good?	41%	40%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	37%	41%
4.6a	Is it easy/very easy to get a complaints form?	88%	96%
4.6b	Is it easy/very easy to get an application form?	91%	99%
4.9	Have you made a complaint?	71%	40%
4.13	Are you on the enhanced (top) level of the IEP scheme?	100%	97%
4.14	Do you feel you have been treated fairly in your experience if the IEP scheme?	78%	81%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	31%	35%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	0%	0%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	6%	3%
4.17a	Do you feel your religious beliefs are respected?	50%	62%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	50%	70%
4.18	Are you able to speak to a Listener at any time, if you want to?	74%	71%
4.19a	Is there a member of staff you can turn to for help if you have a problem in this prison?	92%	92%
4.19b	Do <b>most</b> staff, in this prison, treat you with respect?	80%	95%
5.1	Have you ever felt unsafe in this prison?	44%	24%
5.2	Do you feel unsafe in this prison at the moment?	16%	8%
5.4	Have you been victimised by another prisoner?	44%	28%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	6%	5%
5.5i	Victimised you because you have a disability?	18%	0%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	12%	2%
5.6	Have you been victimised by a member of staff?	31%	19%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	2%	3%
5.7h	Victimised you because you have a disability?	0%	0%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	6%	1%
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tables		
Any percent highlighted in green is significantly better	to have	selves
Any percent highlighted in blue is significantly worse	selves	Do not consider themselves to have a disability
Any percent highlighted in orange shows a significant difference in prisoners' background details	der them oility	Do not consider the to have a disability
Percentages which are not highlighted show there is no significant difference	Consic a disab	Do not to have
Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	34%	22%
Have you ever felt threatened or intimidated by a member of staff in here?	31%	10%
Is it easy/very easy to get illegal drugs in this prison?	16%	22%
Is it easy/very easy to see the doctor?	73%	73%
Is it easy/ very easy to see the nurse?	83%	86%
Are you able to see a pharmacist?	39%	43%
Are you currently taking medication?	84%	50%
Do you feel you have any emotional well being/mental health issues?	44%	18%
Are you currently working in the prison?	57%	65%
Are you currently undertaking vocational or skills training?	12%	21%
Are you currently in education (including basic skills)?	28%	43%
Are you currently taking part in an offending behaviour programme?	18%	17%
Do you go to the library at least once a week?	53%	77%
On average, do you go to the gym at least twice a week?	18%	56%
On average, do you go outside for exercise three or more times a week?	57%	69%
On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	31%	18%
On average, do you go on association more than five times each week?	75%	83%
Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	22%	33%
Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	94%	97%
Have you had any problems sending or receiving mail?	33%	19%
Have you had any problems getting access to the telephones?	8%	6%
	Any percent highlighted in green is significantly better  Any percent highlighted in blue is significantly worse  Any percent highlighted in orange shows a significant difference in prisoners' background details  Percentages which are not highlighted show there is no significant difference  Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?  Have you ever felt threatened or intimidated by a member of staff in here?  Is it easy/very easy to get illegal drugs in this prison?  Is it easy/very easy to see the doctor?  Is it easy/very easy to see the doctor?  Is it easy/very easy to see the doctor?  Are you able to see a pharmacist?  Are you able to see a pharmacist?  Are you currently taking medication?  Do you feel you have any emotional well being/mental health issues?  Are you currently undertaking vocational or skills training?  Are you currently undertaking vocational or skills training?  Are you currently in education (including basic skills)?  Are you currently taking part in an offending behaviour programme?  Do you go to the library at least once a week?  On average, do you go to the gym at least twice a week?  On average, do you go end ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)  On average, do you go an association more than five times each week?  Do staff normally speak to you at least most of the time during association time? (Most/all of the time)  Bo staff normally speak to you at least most of the time during association time? (Most/all of the time)	Any percent highlighted in blue is significantly worse  Any percent highlighted in orange shows a significant difference in prisoners' background details  Percentages which are not highlighted show there is no significant difference  Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?  34%  Have you ever felt threatened or intimidated by a member of staff in here?  15 it easy/very easy to get illegal drugs in this prison?  16%  15 it easy/very easy to see the doctor?  15 it easy/very easy to see the doctor?  15 it easy/very easy to see the nurse?  Are you able to see a pharmacist?  Are you currently taking medication?  26 Are you currently working in the prison?  27 Are you currently working in the prison?  28 Are you currently undertaking vocational or skills training?  39%  Are you currently in education (including basic skills)?  Are you currently taking part in an offending behaviour programme?  18%  Do you go to the library at least once a week?  59%  On average, do you go outside for exercise three or more times a week?  On average, do you go outside for exercise three or more times a week?  On average, do you go on association more than five times each week?  To staff normally speak to you at least most of the time during association time? (Most/all of the time)  22%  Do staff normally speak to you at least most of the time during association time? (Most/all of the time)  94%  Have you had any problems sending or receiving mail?



# Key question responses (ethnicity) HMP Shepton Mallet 2010

**Prisoner survey responses** (missing data has been excluded for each question). Please note: Where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

,	, tables		
	Any percent highlighted in green is significantly better		
	Any percent highlighted in blue is significantly worse		
	Any percent highlighted in orange shows a significant difference in prisoners' background details	prisoners	White Prisoners
	Percentages which are not highlighted show there is no significant difference	BME pr	White P
Numb	er of completed questionnaires returned	20	127
1.3	Are you sentenced?	100%	100%
1.7	Are you a foreign national?	24%	5%
1.8	Is English your first language?	85%	98%
1.9	Are you from a minority ethnic group (including all those who did not tick White British, White Irish or White other categories)?		
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	13%	3%
1.11	Are you Muslim?	17%	3%
1.12	Do you consider yourself to have a disability?	21%	29%
1.13	Is this your first time in prison?	40%	42%
2.1d	Was the attention paid to your health needs good/very good on your journey here?	26%	37%
2.3	Were you treated well/very well by the escort staff?	63%	60%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	89%	88%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	31%	25%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	35%	29%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	56%	46%
3.2a	Did you have any problems when you first arrived?	77%	49%
3.3a	Were you seen by a member of healthcare staff in reception?	80%	69%
3.3b	When you were searched in reception, was this carried out in a respectful way?	96%	89%
3.4	Were you treated well/very well in reception?	89%	83%
3.7b	Did you have access to someone from healthcare within the first 24 hours?	85%	77%
3.9	Did you feel safe on your first night here?	85%	86%
3.10	Have you been on an induction course?	89%	88%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	96%	83%

Key to	tables		
	Any percent highlighted in green is significantly better		
	Any percent highlighted in blue is significantly worse		
	Any percent highlighted in orange shows a significant difference in prisoners' background details	ME prisoners	White Prisoners
	Percentages which are not highlighted show there is no significant difference	BME pr	White F
4.3a	Are you normally offered enough clean, suitable clothes for the week?	75%	71%
4.3b	Are you normally able to have a shower every day?	100%	98%
4.3e	Is your cell call bell normally answered within five minutes?	75%	57%
4.4	Is the food in this prison good/very good?	24%	42%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	40%	41%
4.6a	Is it easy/very easy to get a complaints form?	96%	92%
4.6b	Is it easy/very easy to get an application form?	100%	97%
4.9	Have you made a complaint?	56%	48%
4.13	Are you on the enhanced (top) level of the IEP scheme?	100%	98%
4.14	Do you feel you have been treated fairly in your experience if the IEP scheme?	69%	81%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	25%	35%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	0%	0%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	4%	3%
4.17a	Do you feel your religious beliefs are respected?	60%	58%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	56%	66%
4.18	Are you able to speak to a Listener at any time, if you want to?	75%	71%
4.19a	Is there a member of staff you can turn to for help if you have a problem in this prison?	96%	91%
4.19b	Do most staff, in this prison, treat you with respect?	89%	90%
5.1	Have you ever felt unsafe in this prison?	25%	30%
5.2	Do you feel unsafe in this prison at the moment?	4%	11%
5.4	Have you been victimised by another prisoner?	25%	33%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	21%	3%
5.5i	Have you been victimised because you have a disability? (By prisoners)	0%	6%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	6%
5.6	Have you been victimised by a member of staff?	32%	21%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	17%	2%
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Key to	tables		
	Any percent highlighted in green is significantly better		
	Any percent highlighted in blue is significantly worse		
	Any percent highlighted in orange shows a significant difference in prisoners' background details	isoners	White Prisoners
	Percentages which are not highlighted show there is no significant difference	BME prisoners	White P
5.7h	Have you been victimised because you have a disability? (By staff)	0%	0%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	12%	1%
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	12%	27%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	17%	16%
5.11	Is it easy/very easy to get illegal drugs in this prison?	4%	22%
6.1a	Is it easy/very easy to see the doctor?	58%	74%
6.1b	Is it easy/ very easy to see the nurse?	86%	85%
6.2	Are you able to see a pharmacist?	30%	43%
6.5	Are you currently taking medication?	79%	56%
6.7	Do you feel you have any emotional well-being/mental health issues?	13%	27%
7.1a	Are you currently working in the prison?	58%	65%
7.1b	Are you currently undertaking vocational or skills training?	21%	17%
7.1c	Are you currently in education (including basic skills)?	58%	35%
7.1d	Are you currently taking part in an offending behaviour programme?	12%	18%
7.3	Do you go to the library at least once a week?	88%	68%
7.4	On average, do you go to the gym at least twice a week?	83%	40%
7.5	On average, do you go outside for exercise three or more times a week?	79%	63%
7.6	On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	44%	18%
7.7	On average, do you go on association more than five times each week?	96%	79%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	26%	30%
8.1	Do you have a personal officer?	100%	96%
8.9	Have you had any problems sending or receiving mail?	21%	24%
8.10	Have you had any problems getting access to the telephones?	0%	7%
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