

Report on an unannounced inspection of

# **HMP Blantyre House**

by HM Chief Inspector of Prisons

**9–20 September 2013**

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# Introduction

Blantyre House is small, semi-open resettlement prison in Kent, holding category C and D prisoners who are coming to the end of indeterminate sentences or fixed term sentences of four years or more, and are being prepared for release back into the community. Our last inspection in 2010 found that outcomes for prisoners were good in all areas and I described it as ‘one of the jewels in the Prison Service crown’.

Outcomes in this inspection were less good – although the prison still compared well with similar establishments. In 2010 the prison had been able to select the prisoners it held and was able to tailor its services to meet a significant but narrow range of needs. At the time of this inspection, a central unit made the allocations and Blantyre House could no longer select the men it held. As a consequence, the prison was holding men who presented a wider range of needs and risks than before – including a big increase in those serving indeterminate sentences – but its work and resources had not been sufficiently adjusted to meet these new requirements.

The primary purpose of the prison was resettlement, but the prison had not assessed how the needs of its new population had changed from those it held before. Contact between offender supervisors and prisoners was good, but was not sufficiently structured or focused on reducing reoffending. Public protection work was insufficiently robust, although the number of prisoners subject to such arrangements had increased. Nevertheless, most practical resettlement arrangements were effective.

The release of prisoners on temporary licence (ROTL) was a critical part of the rehabilitation process. ROTL allowed men to adjust to a world that had sometimes changed very much since they had begun their sentence, make contact with friends and family and make other arrangements for their release. For men at Blantyre House, ROTL should also have provided the opportunity to take part in unpaid and paid work in the community.

ROTL was well used for most purposes and overall the risks involved were properly assessed. However, there was insufficient multi-agency engagement in managing the risks of those released. Some prisoners who would have benefited from ROTL did not do so because they did not have the funds to meet the travel and other costs involved.

We were particularly concerned that men who were assessed as suitable for ROTL and would have benefited from the opportunity to gain unpaid or paid work in the community were unable to do so. There were too few places available and efforts to assist prisoners in finding something suitable by information, advice and guidance (IAG) were lacklustre. This was compounded by insufficient training and employment opportunities inside the prison. At a time when men should have been acquiring the skills, habits and experience they needed to get a job on release, too many were hanging about in the prison, bored and with nothing meaningful to do.

Few prisoners felt unsafe. There was very little use of formal disciplinary processes or force but prisoners whose behaviour gave cause for concern were quickly and properly sent back to closed conditions. There was also very little self-harm but a self-inflicted death shortly before the inspection, the first in the establishment, underlined that there was no room for complacency. The number of violent incidents had increased since the last inspection and there had been two recent serious assaults. Although the level was still low, more prisoners reported victimisation than at the last inspection and at similar establishments. This appeared, at least in part, to be due to the availability of ‘Spice’ – a synthetic cannabinoid – and associated debt and bullying. Current testing methods did not detect Spice, so the very low positive drug testing rate did not give an accurate picture of the availability of drugs in the prison. The prison’s response to the issue was inadequate.

Despite the shortcomings we identified, most prisoners still had a safe, respectful and productive experience at Blantyre House. This was largely due to the excellent staff-prisoner relationships that

underpinned much of the work of the prison and made good its procedural deficiencies. Staff knew prisoners well and most problems could be sorted out without recourse to formal procedures. The environment was decent and prisoners had very good time out of their rooms. Very good health care was provided by impressive staff. Most outcomes for minority groups were reasonable and black and minority ethnic prisoners reported more positively than we usually see. However, some processes were too casual.

Blantyre House still retains many of the strengths we have identified in the past. In particular, its small size means there is an opportunity for its experienced staff to get to know prisoners well and address their needs and behaviour in a personalised way that is simply not possible in larger establishments. Those strengths should be advantages in dealing with the wider and more complex range of needs among the prisoners Blantyre House now holds – but neither the prison nor the wider Prison Service have yet got fully to grips with the changes that are required to meet these needs or the resources necessary to make them.

**Nick Hardwick**  
HM Chief Inspector of Prisons

December 2013

# Fact page

**Task of the establishment**

HMP Blantyre House is a semi-open resettlement prison, holding category C and D prisoners serving sentences of six years and over and a large population of indeterminate-sentenced prisoners.

The characteristics of the population had changed since the previous inspection, when Blantyre House selected prisoners based on their suitability for the regime. An increase in the number of prisoners serving indeterminate sentences for public protection (IPPs) and the allocation of IPPs by a central placement unit had resulted in a significant rise in the number of IPPs at Blantyre House. In 2010 there were only nine IPPs (7.4% of the population), but this had increased to 39 (32% of the population) by 2013.

**Prison status (public or private, with name of contractor if private)**

Public

**Region/Department**

South-East

**Number held**

121

**Certified normal accommodation**

122

**Operational capacity**

122

**Date of last full inspection**

5–9 July 2010

**Brief history**

Originally a country house but then operating as a training farm for Fegan's Boys Home, HMP Blantyre House was taken over by the Prison Commission in 1954 and used as a detention centre for young offenders before becoming a resettlement prison in 1987.

**Short description of residential units**

There is one residential unit, known as 'the house', which is built around a quadrangle. There are four spurs, North, South, East and West, which provide three double rooms and 116 single rooms.

**Name of governor/director**

Jim Bourke

**Escort contractor**

GeoAmey

**Health service provider**

Commissioner: NHS England (Kent and Medway Area Team)

Provider: Oxleas NHS Foundation Trust

**Learning and skills providers**

The Manchester College

**Independent Monitoring Board chair**

Jane Day



# About this inspection and report

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

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

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

<b>Safety</b>	prisoners, particularly the most vulnerable, are held safely
<b>Respect</b>	prisoners are treated with respect for their human dignity
<b>Purposeful activity</b>	prisoners are able, and expected, to engage in activity that is likely to benefit them
<b>Resettlement</b>	prisoners are prepared for their release into the community and effectively helped to reduce the likelihood of reoffending.

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

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

- A5 Our assessments might result in one of the following:
- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
  - **housekeeping points:** achievable within a matter of days, or at most weeks, through the issue of instructions or changing routines
  - **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for prisoners.
- A6 Five key sources of evidence are used by inspectors: observation; prisoner surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.
- A7 Since April 2013, all our inspections have been unannounced, other than in exceptional circumstances. This replaces the previous system of announced and unannounced full main inspections with full or short follow-ups to review progress. All our inspections now follow up recommendations from the last full inspection, unless these have already been reviewed by a short follow-up inspection.

## This report

- A8 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of prisoners and conditions in prisons*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.
- A9 Details of the inspection team and the prison population profile can be found in Appendices I and III respectively.
- A10 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix IV of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.<sup>1</sup>

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<sup>1</sup> The significance level is set at 0.05, which means that there is only a 5% chance that the difference in results is due to chance.

# Summary

## Safety

S1 *Reception processes were welcoming and prisoners were given a good introduction to the prison. Few prisoners felt unsafe but levels of victimisation had increased. The number of violent incidents had also increased but was still lower than in similar prisons. There had been one recent death in custody but other levels of self-harm were very low. After a delay, management oversight of safety was improving. Security was responsive to risks but poorly resourced and insufficiently strategic, especially in regard to the threat of drugs. Adjudications and use of force had increased but remained low. Substance misuse provision was limited. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S2 *At the last inspection in 2010 we found that outcomes for prisoners in Blantyre House were good against this healthy prison test. We made 10 recommendations in the area of safety. At this follow-up inspection we found that eight of the recommendations had been achieved and two partially achieved.*

S3 Most prisoners arrived from local or adjoining areas following short journeys and were positive about their treatment and conditions of transfer.

S4 Prisoners were positive about their reception experience and were made to feel welcome. Good use was made of peer insiders to guide prisoners through the reception and induction processes. Personal interviews were conducted in sufficient privacy to encourage prisoners to divulge any sensitive information. Prisoners reported feeling safe on their first night but rooms for new prisoners were ill-equipped and contained broken furniture and no lockable cabinets. The 'self-led' induction processes were adequate and gave prisoners sufficient information.

S5 Few prisoners felt unsafe but more reported victimisation than at similar establishments and than at the time of the previous inspection. Much of this related to insulting remarks and victimisation of new prisoners and, anecdotally, to the issue of the drug 'Spice'. Very few prisoners were subject to formal bullying monitoring procedures but there were good informal processes for more minor incidents.

S6 The characteristics of the population had changed since the previous inspection and the prison viewed the new population as more difficult to manage. The number of violent incidents had increased, with two serious assaults in the previous 12 months, both related to the use of Spice (see below), but there were still fewer incidents than at comparator establishments. The safer custody meeting had been re-established after a long break and oversight of safety was being developed, but patterns and trends had not yet been identified. Safer custody representatives had been appointed and played a valuable role in advising prisoners and supporting safer custody staff.

S7 The self-harm and suicide prevention policy had improved and provided clear guidance for staff. There had been some internal investigation of the circumstances surrounding a recent self-inflicted death and general advice published to staff and prisoners, but no initial lessons learned from the specific incident had been communicated to staff. There had been no other recent self-harm incidents and only one prisoner had been subject to assessment, care in custody and teamwork (ACCT) case management procedures for prisoners at risk of suicide or self-harm in the previous six months. This had been well managed but too few staff had

up-to-date awareness or assessor training. There was still no Listener scheme (whereby prisoners trained by the Samaritans provide confidential emotional support to fellow prisoners). The Samaritans telephone was not working, the facility was not well known and it had not been used by prisoners.

- S8 Dynamic security was good and was underpinned by effective staff–prisoner relationships. Security arrangements were generally proportionate and reactive, although insufficiently resourced to respond strategically to the new threats presented by the changed population. Immediate responses to poor behaviour were proportionate and were underpinned by risk review boards, resulting in around 25 prisoners per year being returned to closed conditions, which was higher than at the time of the previous inspection. There were few failures to return from temporary release.
- S9 According to our survey, illegal drug availability was similar to that at other open prisons but had increased since the previous inspection. The random mandatory drug testing positive rate was 0%, but a considerable body of anecdotal evidence from staff and prisoners indicated that synthetic cannabinoids (which cannot be identified by current testing methods) were widely available and used, causing a number of problems, including debt, bullying and intoxication. Some work was being done to address the issue but there was no coordinated approach or plan to address supply reduction activities.
- S10 The number of adjudications had increased but was still very low. They were suitably managed. There was minimal use of force, with none in 2013 to date, and there was no segregation unit.
- S11 There were no prisoners requiring clinical treatment for substance use. A large number accessed psychosocial services but this was limited to one-to-one relapse prevention support. There were no group programmes and the development of a peer-support scheme had been slow.

## Respect

S12 *Prisoners' rooms were generally clean and comfortable. Access to showers, laundry and clean clothes was good. Relationships between staff and prisoners were excellent. The experience of minority groups was reasonable but strategic management of diversity was weak. Faith provision was adequate. Few complaints were made. Health provision was very good. The food provided was generally good. **Outcomes for prisoners were good against this healthy prison test.***

S13 *At the last inspection in 2010 we found that outcomes for prisoners in Blantyre House were good against this healthy prison test. We made 34 recommendations in the area of respect.<sup>2</sup> At this follow-up inspection we found that 13 of the recommendations had been achieved, eight had been partially achieved, 12 had not been achieved and one was no longer relevant.*

S14 External areas were clean and well maintained, although some communal areas were grubby. Prisoners' rooms were generally clean, comfortable and adequately furnished. Shower areas were clean and in good order. Access to laundry facilities and replacement clothing and bedding was good. The applications system worked well.

<sup>2</sup> This included recommendations about the incentives and earned privileges scheme which, in our updated Expectations (Version 4, 2012), now appear under the healthy prison area of safety.

- S15 Relationships between staff and prisoners were excellent. Staff, including personal officers, made regular entries in prisoners' files which demonstrated meaningful contact and knowledge of them. Prisoner consultation meetings were held regularly but attendance was limited to prisoner representatives. Attendees we spoke to expressed frustration about slow progress with issues they had raised.
- S16 The diversity strategy was generally sound, and an action plan had recently been prepared, but neither was sufficiently based on an analysis of the needs of the prison population. Strategic management was generally weak, although most outcomes for minority groups were reasonable. No discrimination incident report forms had been submitted in the previous six months, but we identified several incidents and complaints which should have generated them. Ethnic monitoring was not used effectively. There were no forums for specific protected groups to identify needs.
- S17 In our survey, black and minority ethnic prisoners reported similarly to or more positively than the main population, which was an improvement from the situation at the time of the previous inspection.
- S18 The needs of prisoners with disabilities were generally well met. Unpaid prisoner carers provided practical support to those with disabilities, but there was no joint care planning with health services staff. There were no services aimed specifically at older men.
- S19 Prisoners reported comparatively positively about faith provision. The good facilities were easily accessible but the continuing lack of a coordinating chaplain had impacted on the development of resettlement support.
- S20 Prisoners made relatively few complaints. In our survey, levels of satisfaction with the complaints process were similar to those at comparator establishments and to those at the time of the previous inspection. Most responses were timely but many were not sufficiently respectful.
- S21 There was no current health needs assessment or health care delivery plan to ensure that the services provided met prisoners' needs. However, health services remained good, prisoners were positive about their care and health services staff had an impressive knowledge of their patients.
- S22 Waiting times for all health services were short. Facilities were generally good, but the dental suite needed refurbishment. Pharmacy services were generally sound but the lack of in-possession risk assessments was a serious concern. Mental health provision had increased and was good.
- S23 The food provided was reasonably good. Arrangements for ordering packed lunches and evening meals were not reliable, and these meals were noticeably less appetising than those available from the servery. There was no provision for prisoners to self-cater.

## Purposeful activity

S24 *Prisoners had free movement around the prison and spent a large amount of time out of their rooms. Too few prisoners worked out of the prison and those inside had too little activity to keep them occupied. The range of education and vocational training was suitable. The quality of teaching, learning and assessment was good. Work was not sufficiently purposeful and attendance was poorly managed. Achievements were good in education but too low in some vocational training areas. Library provision was good. Access to PE was limited. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S25 *At the last inspection in 2010 we found that outcomes for prisoners in Blantyre House were good against this healthy prison test. We made 13 recommendations in the area of purposeful activity. At this follow-up inspection we found that four of the recommendations had been achieved, two had been partially achieved and seven had not been achieved.*

S26 Prisoners had free movement around the prison for most of the day and were allowed out of their rooms for 15 hours a day. We found too many prisoners on the residential unit during the day with nothing to do, and bored.

S27 The prison progressed prisoners into work in the community following a period working in the prison. However, too few prisoners (who were assessed as suitable) accessed working-out opportunities. The process for finding work was too slow and too few placements were available. This placed pressure on internal provision, which was unable to provide sufficient levels of activity for the population. Education provision was managed well but the overall management of learning and skills and work was inadequate. There was no effective needs analysis and there were too few vocational training opportunities. Attendance was poorly managed; too often, prisoners were not at their place of work, without good reason.

S28 The range of education and vocational training was appropriate. All prisoners were allocated a job but too many were underemployed in unskilled internal work. The quality of teaching, learning and assessment was good. Sessions were well planned, interesting and promoted effective learning. In education and vocational training, prisoners developed effective critical thinking skills and good employability skills.

S29 Achievement of accredited qualifications was good in education classes and construction skills. However, very few prisoners achieved vocational qualifications in the kitchens or in horticulture.

S30 The library was well maintained and welcoming. Access and resources were good and over two-thirds of the population regularly used it. An appropriate range of activities promoted prisoners' literacy and encouraged non-users to use the facilities.

S31 PE facilities were adequate, although inadequate staffing levels limited the access and the range and variety of available activities. Gym staff worked well with health services staff to address mental health needs and promote health living.

## Resettlement

- S32 *Resettlement provision was not supported by a needs analysis. Release on temporary licence was appropriately used. Prisoners had good contact with offender supervisors but it was often not sufficiently structured. Prisoners felt well supported to meet their targets. Public protection arrangements were not sufficiently robust. Pathway work was generally good. The inmate activity group was poor and too few eligible prisoners were supported into community or paid work during their sentence. A relatively high number of prisoners were released with work or training.*  
**Outcomes for prisoners were reasonably good against this healthy prison test.**
- S33 *At the last inspection in 2010 we found that outcomes for prisoners in Blantyre House were good against this healthy prison test. We made seven recommendations in the area of resettlement. At this follow-up inspection we found that one of the recommendations had been achieved, one had been partially achieved and five had not been achieved.*
- S34 In spite of significant changes to the population, including a huge increase in the number of indeterminate-sentenced prisoners (ISPs), a needs analysis had not been undertaken. The resettlement strategy covered the seven pathways but was not supported by an action plan to set priorities and assess progress. Release on temporary licence (ROTL) was used to support activity and family ties but many prisoners told us that low wages inhibited their ability to take advantage of these opportunities as they often had to pay for travel and food.
- S35 All prisoners had an offender manager and offender supervisor, and more than at comparator prisons felt that they were being helped to achieve targets and prepare for release. Contact between offender supervisors and prisoners was good but was often unstructured, with an inadequate focus on the risk of harm or likelihood of reoffending.
- S36 The strategic management of public protection had declined, even though the number of prisoners subject to such arrangements had increased. Children's services were not always told about the arrival or departure of those presenting a risk of harm to children, and the purpose of the inter-departmental risk management board was unclear. The risk management board's processes for deciding whether to release prisoners on ROTL were appropriate. However, plans to manage the risk of those temporarily released had insufficient multi-agency input.
- S37 The pathways programme was effective in ensuring that prisoners took responsibility for identifying their resettlement needs. Prisoners generally knew where to go to for help with resettlement services but were frustrated by information, advice and guidance (IAG), which provided a poor and uncoordinated service.
- S38 The demand on finding accommodation was relatively low as many prisoners went to approved premises and no one in the previous year had been released without an address to go to.
- S39 The number of prisoners temporarily released into voluntary or paid work during their sentence was lower than at the time of the previous inspection. The IAG had insufficient links with organisations that could provide voluntary work experience, and arrangements to support prisoners to find paid employment were ineffective. As a result, only 17 prisoners were in voluntary placements, many for only a few days per week. Only 16 prisoners, half of those eligible, had a paid job while at the prison. Opportunities to study outside of the prison were good and the prison provided good support for prisoners to find funding and apply for courses. Prisoners eligible for ROTL were able to go to the local Jobcentre Plus to seek advice and help with job search. There was little other structured support and no access to

the internet or virtual campus (internet access for prisoners to community education, training and employment opportunities) on site. At the end of their sentence, three-quarters of prisoners were released into employment, training or education. This was much lower than at the time of the previous inspection but still a reasonably good achievement.

- S40 Health pre-release arrangements were effective and included appropriate liaison with community services.
- S41 Resettlement provision for drug and alcohol recovery was good through the Rehabilitation of Addicted Prisoners Trust (RAPt) gate pick-up scheme and network of links to local and national community support agencies.
- S42 Prisoners could open bank accounts and access money-management training through the education department. They had access to a telephone debt advice line and they could attend agencies on ROTL.
- S43 For eligible prisoners, ROTL was well used to enhance family contact through home leave and town visits. For those who remained in the establishment, the visits experience and environment were good and visitors reported being made welcome by helpful gate staff. Regular themed family days were run throughout the year and appropriately targeted at those not eligible for ROTL.
- S44 The lack of a recent needs analysis made it impossible to determine the level and type of offending behaviour work required. A small number of prisoners benefited from structured one-to-one offending behaviour work, but this was reliant on one member of staff.

## Main concerns and recommendations

- S45 Concern: Since the last inspection, the population at Blantyre House had changed from an exclusive concentration of men nearing the end of long determinate sentences to a more significant number of indeterminate sentence prisoners. As a consequence, the prison now held a population with a much wider range of needs than before and resources to meet them were stretched. We have made similar findings at other recent inspections of open prisons.

**Recommendation: The National Offender Management Service should reassess the resources required by Blantyre House and other open prisons to ensure they are adequate to manage the complex rehabilitation needs of greater numbers of indeterminate sentence prisoners progressing towards release from sentences for serious offences.**

- S46 Concern: Prisoners told us that illegal drugs were becoming more easily available and much anecdotal evidence indicated that synthetic cannabinoids were the cause of debt and violent incidents. Despite this, the prison did not have a coordinated approach to tackling substance misuse.

**Recommendation: The prison should have a multidisciplinary approach to tackling substance misuse and an effective supply reduction policy and action plan to coordinate supply reduction activities.**

- S47 Concern: Many prisoners were bored, with too little to do. There was too little internal learning and skills and work activity to meet the needs of the population and many prisoners worked as part-time cleaners.



**Recommendation: The quantity of high-quality internal learning and skills and work activity should be increased so that all prisoners are purposefully occupied during the working day.**

S48 Concern: Too few prisoners were released on temporary licence into voluntary or paid work, despite being eligible.

**Recommendation: Prisoners should be supported to progress and find voluntary and paid work in the community. There should be sufficient voluntary and work placements to meet the needs of all eligible prisoners.**

S49 Concern: Despite an increase in the number of prisoners subject to public protection measures, arrangements were not sufficiently robust.

**Recommendation: Public protection arrangements should be improved and include multi-agency planning to manage the risk posed by prisoners released on temporary licence.**



# Section 1. Safety

## Courts, escorts and transfers

### Expected outcomes:

**Prisoners transferring to and from the prison are treated safely, decently and efficiently.**

**I.1** *No escorts arrived or departed during the inspection. Prisoners generally reported positively about their experience under escort.*

**I.2** There were no transfers in or out of the prison during the inspection. Most prisoners arrived from local or adjoining areas following short journeys. Our survey results about transfers were generally positive compared with those at similar prisons and in some cases were better than at the time of the previous inspection.

**I.3** Incoming escorting staff routinely telephoned ahead to the prison to confirm their arrival time, which enabled the prison to prepare for new arrivals.

## Early days in custody

### Expected outcomes:

**Prisoners are treated with respect and feel safe on their arrival into prison and for the first few days in custody. Prisoners' individual needs are identified and addressed, and they feel supported on their first night. During a prisoner's induction he/she is made aware of the prison routines, how to access available services and how to cope with imprisonment.**

**I.4** *Our survey results about prisoners' treatment in reception were positive. Reception processes were welcoming and expedient. Immediate contact with peer supporters was invaluable and the induction process was effective.*

**I.5** Our survey results about prisoners' treatment in reception were better than at comparator prisons and than at the time of the previous inspection. Although no new prisoners arrived during the inspection, we observed many daily release on temporary licence (ROTL) discharges and receptions, and these were well managed, courteous and efficient. Searching procedures were proportionate to the risks posed (see also section on security).

**I.6** Most new prisoners arrived during the core day and were processed quickly. Peer supporters took newly arrived prisoners on a tour of the establishment as soon as was practicable, which assisted greatly in putting prisoners at their ease. Prisoners had almost immediate access to PIN telephones and, for those arriving with no private funds, access to an office-based telephone call was provided. Smokers' and grocery packs were available on arrival and subsequent packs could be issued to prisoners until they received their first shop order (see also section on purchases).

**I.7** Newly arrived prisoners were usually housed in one of three double rooms, which, although clean, contained some poor and damaged furniture. There was no provision to lock away

possessions securely, which could have posed a problem for prisoners with medication in-possession.

- I.8** An initial safety screen was conducted by the reception officer, followed by a private interview with the orderly officer. No specific first-night enhanced observations were made by night staff but this was mitigated to some extent by the free access to night staff provided by the 'open' regime at the prison.
- I.9** Induction started on arrival and a useful pack was issued to all new arrivals. This included a check sheet which prisoners took to a wide range of departments, to be signed off as the component parts of the induction were delivered. We observed some of these sessions and spoke to prisoners who had been at the prison for several weeks, and we were satisfied that these sessions were delivered regularly. Prisoners were responsible for carrying out this process, and the length of time it took to complete induction varied widely. There was no monitoring or quality assurance to ensure completion.

## Recommendation

- I.10 Lockable cabinets should be provided for prisoners in shared accommodation.**

## Housekeeping points

- I.11** Night staff should routinely introduce themselves to newly arrived prisoners.
- I.12** Completion of induction should be monitored.

## Bullying and violence reduction

### Expected outcomes:

**Everyone feels and is safe from bullying and victimisation (which includes verbal and racial abuse, theft, threats of violence and assault). Prisoners at risk/subject to victimisation are protected through active and fair systems known to staff, prisoners and visitors, and which inform all aspects of the regime.**

- I.13** *Few prisoners felt unsafe and the level of assaults was low but had increased since the previous inspection. The management of safer custody had improved but formal anti-bullying procedures were rarely required. Prisoner safer custody representatives provided a valuable service.*

- I.14** Since the previous inspection, the characteristics of the population had changed (see section on strategic management of resettlement) and the prison viewed the new population as being more difficult to manage. Although there had been more assaults, two very serious, which had been related to the use of synthetic cannabinoids (see section on security and main recommendation S46), the level was still below that of other resettlement and open prisons.
- I.15** The management of safer custody had improved considerably in the previous six months, after the most recent serious assault. New safer custody managers had been appointed in April 2013 and the safer custody committee had resumed meeting after a long break. Incidents of bullying and violence were investigated and reported to the committee every month and there was an action plan which tried to identify indicators of trends and patterns;

however, this was proving difficult with such a low level of incidents. The provision of security information to the safer custody team had also improved. Safer custody representatives worked with the safer custody team, attended the safer custody committee and provided valuable informal support to other prisoners.

- I.16** The formal arrangements for monitoring bullying behaviour had been used only once in the previous six months. They were basic but well implemented, and we saw records of constructive engagement with both the perpetrator and victim of the bullying incident, leading to a satisfactory resolution. Many low-level incidents were well managed through informal interventions by residential staff, who knew their prisoners well and had good relationships with them (see section on staff–prisoner relationships).
- I.17** In our survey, only 5% of prisoners reported feeling unsafe currently, which was similar to the comparator. However, considerably more than at the time of the previous inspection said that they had been victimised by other prisoners (22% versus 7%). More prisoners than at comparator prisons said that they had been subjected to insulting remarks, intimidated or assaulted.
- I.18** Prisoners told us that a small gang was involved in the use of Spice and intimidated some of the more vulnerable prisoners and new arrivals (see main recommendation S46). They said that since the prison had not been able to select their intake, a small number of prisoners had been received who were not committed to improving their behaviour and were hostile to those who were more compliant. There was also some evidence of intimidation of prisoners known to be gay (see section on protected characteristics).

## Self-harm and suicide

### Expected outcomes:

**The prison provides a safe and secure environment which reduces the risk of self-harm and suicide. Prisoners are identified at an early stage and given the necessary support. All staff are aware of and alert to vulnerability issues, are appropriately trained and have access to proper equipment and support.**

**I.19** *The self-harm and suicide prevention policy had improved. There were relatively few incidents of self-harm. There had been some learning from the recent death in custody but it had not been well communicated. There was little use of the assessment, care in custody and teamwork (ACCT) case management process but it was well managed, although too few staff were trained in its use. There was no formal provision of Listener services.*

- I.20** The self-harm and suicide prevention policy had improved and provided a useful guide for staff in all aspects of their jobs.
- I.21** There had been a self-inflicted death shortly before the inspection but no other recent self-harm incidents. The formal Prisons and Probation Ombudsman investigation had not yet reported but the prison had held a special safer custody meeting and met with prisoners to identify early learning points. Some remedial action had been taken but no lessons learnt had been formally published to staff.
- I.22** Only one assessment, care in custody and teamwork (ACCT) case management document for prisoners at risk of suicide or self-harm had been opened in the previous six months. This had been well managed and the prisoner concerned felt well supported. However, too

few staff had up-to-date ACCT case management training, and a training programme was due to start.

- I.23** Although there were many trained Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) in the prison, they could not provide the service formally because there was no local Samaritans branch which was willing to provide support. There was a room with a dedicated Samaritans telephone but few prisoners we spoke to knew of the service, the room was locked and we found that the telephone was not working. Unsurprisingly, the log of its use showed that no prisoners had used it in the previous two years.

## Recommendations

- I.24 All staff should be trained in at least basic assessment, care in custody and teamwork (ACCT) procedures.** (Repeated recommendation 3.11)
- I.25 Discussions with the Samaritans should be pursued so that an appropriate service can be provided in the prison and prisoners have access to a formal Listener service.**

## Housekeeping point

- I.26** Initial learning points from the death in custody should be formally recorded and communicated to staff.

## Safeguarding (protection of adults at risk)

### Expected outcomes:

**The prison promotes the welfare of prisoners, particularly adults at risk, and protects them from all kinds of harm and neglect.<sup>3</sup>**

- I.27** *There was no adult safeguarding policy and staff had not been trained in safeguarding procedures. Links with the local authority had not been initiated.*

- I.28** There was no adult safeguarding policy. Staff had not been trained in adult safeguarding procedures and were not aware of their responsibilities.

- I.29** There were no links to promote safeguarding procedures with the relevant local authority.

## Recommendation

- I.30 The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes.**

<sup>3</sup> We define an adult at risk as a vulnerable person aged 18 years or over, 'who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'. 'No secrets' definition (Department of Health 2000).

## Security

### Expected outcomes:

**Security and good order are maintained through an attention to physical and procedural matters, including effective security intelligence as well as positive staff-prisoner relationships. Prisoners are safe from exposure to substance misuse while in prison.**

- I.31** *Physical security was proportionate for the population of the prison. The number of security information reports submitted had increased and was monitored at the intelligence meeting. There was a lack of a strategic approach to the risks posed from substance misuse.*
- I.32** Physical security was proportionate for the population of the prison. The site was surrounded by a single fence, within which prisoners had relatively free access. Searching procedures were risk related and prisoners were not routinely strip-searched on entry to the prison. Dynamic security was very good and was underpinned by excellent staff–prisoner relationships (see section on staff–prisoner relationships).
- I.33** There had been an increase in the number of security information reports (SIRs) submitted since the beginning of 2013, which reflected the reported increase in the use of Spice (see below and main recommendation S46). SIRs were analysed at the monthly intelligence meeting and the results were reported to the full security meeting. The security department was poorly resourced and relied on the very small residential staffing group to carry out any required actions. There was no central recording of searches, so we were unable to clarify the effectiveness of responses to SIRs when searches had been requested. Activity was limited to reacting to perceived threats and there was a general lack of a strategic approach (see below).
- I.34** Immediate responses to poor behaviour were proportionate and were underpinned by risk review boards. The number of prisoners returned to closed conditions had increased from four per year in 2010 to 25 in 2012, and the projected figure for 2013 was similar. This was deemed to reflect the change of population to mainly indeterminate-sentenced prisoners. All of the records we observed showed the returns to be a reasonable response to significant events and we were satisfied that prisoners were given every opportunity to remain at the establishment.
- I.35** There had been only six ROTL failures in the previous 18 months, out of almost 15,000 releases. All prisoners were breath tested for alcohol on return from home leave and town visits. Three prisoners had failed to return to the prison during the previous 12 months, and all three had been quickly recaptured without further incident.
- I.36** In our survey, 36% of respondents said that it was easy to get illegal drugs at the prison, which was similar to the comparator but much higher than at the time of the previous inspection (20%). The random mandatory drug testing (MDT) positive rate was 0% for the six months to August 2013. Suspicion testing had yielded five positive results from 16 tests in the six months to August 2013, giving a 31% positive rate. Weekend testing levels were appropriate and were spread across both Saturdays and Sundays.
- I.37** A considerable body of anecdotal evidence from staff and prisoners told us that synthetic cannabinoids were easily available and causing a number of problems, including debt, bullying and intoxication (see main recommendation S46). The inability of current testing methods to detect Spice meant that evidence was limited to actual finds, of which there had been three in the six months to August 2013.

- I.38** Some work was being done to address drugs issues, including Spice, but there was no coordinated approach or plan to address supply reduction activities. The drug and alcohol strategy was dated 2013–2015 but its contents did not reflect the current situation at the prison. There was no drug and alcohol strategy committee, there had been no recent needs analysis and there was no drug and alcohol action plan (see main recommendation S46).
- I.39** Plans to start compact-based drug testing (to include Spice) were advanced and the requirement to comply had been included in the prison’s behavioural compact for all newly arriving prisoners.
- I.40** Fewer than at comparator prisons said that it was easy to obtain alcohol at the prison (7% versus 22%).

## Recommendation

- I.41** **The drug and alcohol strategy should be informed by a comprehensive needs analysis and contain performance measures and an annual action plan.** (Repeated recommendation 9.48)

## Housekeeping point

- I.42** Searches should be centrally recorded to evidence their effectiveness.

## Incentives and earned privileges<sup>4</sup>

### Expected outcomes:

**Prisoners understand the purpose of the incentives and earned privileges (IEP) scheme and how to progress through it. The IEP scheme provides prisoners with incentives and rewards for effort and behaviour. The scheme is applied fairly, transparently and consistently.**

- I.43** *There was no incentives and earned privileges process but alternative arrangements were effective.*

- I.44** There was no incentives and earned privileges process. All prisoners at the establishment were considered to be on the enhanced regime. Behaviour management was monitored and managed via P-Nomis (electronic case notes) entries from personal officers and offender supervisors, and for more serious matters by formal adjudication.
- I.45** Where necessary, following serious occurrences or repeated poor behaviour, prisoners were referred to a risk management board to assess the appropriateness of their location at the establishment.

<sup>4</sup> In the previous report, incentives and earned privileges were covered under the healthy prison area of respect. In our updated Expectations (Version 4, 2012) they now appear under the healthy prison area of safety.



## 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.**

**I.46** *There were very few adjudications. Paperwork was appropriately completed and regular monitoring was undertaken. There had been no use of force in 2013, and there was no facility to segregate prisoners.*

### Disciplinary procedures

**I.47** There had been 19 adjudications in 2013, which was more than at the time of the previous inspection but was still very low. There were no adjudications during the inspection but the paperwork for previous adjudications that we examined had been completed appropriately and showed a good level of investigation by the adjudicator.

**I.48** The small number of offences adjudicated in the year to date was varied and included possession of unauthorised articles, disobeying lawful orders and failures of drug tests.

### The use of force

**I.49** There had been no use of force in 2013 and only one use of control and restraint techniques since the previous inspection.

### Segregation

**I.50** There was no facility to segregate prisoners

## Substance misuse

### Expected outcomes:

**Prisoners with drug and/or alcohol problems are identified at reception and receive effective treatment and support throughout their stay in custody.**

**I.51** *Rehabilitation of Addicted Prisoners Trust (RAPt) services delivered one-to-one support but there was no group work and no peer support scheme.*

**I.52** The Rehabilitation of Addicted Prisoners Trust (RAPt) provided all substance use services at the establishment. Clinical treatment was sub-contracted to Central North-West London (NWL) Healthcare, although no prisoners had required opiate substitution to date.

**I.53** The RAPt team provided drug and alcohol psychosocial services to a large number of prisoners, focusing mainly on one-to-one support for relapse prevention. In our survey, 93% of prisoners who had received help or support with a drug or alcohol problem said that it had been helpful, which was similar to the comparator and considerably better than at the

time of the previous inspection (53%). However, there had been no group work since RAPt had started service delivery, although a relapse prevention module from the RAPt Stepping Stones programme was planned.

- I.54** RAPt workers told us that they felt disconnected from the rest of the prison, with no forum in which to share information or formulate strategic approaches to tackling drugs (see section on security and main recommendation S46).
- I.55** At the time of the inspection, one substance use peer supporter had been in place for four weeks, delivering inductions. However, there was no involvement of peer support in substance use group co-facilitation or mentoring, no peer supporters had been trained and the supervision of the existing peer supporter was sporadic.
- I.56** Prisoners could access voluntary compact-based testing; RAPt workers conducted the mouth-swab tests on 16 prisoners, with an average of 10% tested per month.

### Recommendation

- I.57** **Group-work sessions should be provided as part of the Rehabilitation of Addicted Prisoners Trust (RAPt) services.**

### Housekeeping point

- I.58** The peer supporter scheme should be expanded to include support for those with substance use issues, and include a formalised programme of training and supervision.

## Section 2. Respect

### 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. Prisoners are aware of the rules and routines of the prison which encourage responsible behaviour.**

- 2.1** *External areas and prisoners' rooms were well maintained and generally clean. Some communal areas were grubby. Access to showers, clothing and cleaning materials was good. The applications system operated well.*
- 2.2** External areas were clean and well maintained, creating a relaxed atmosphere. The rooms that we looked at were generally clean, adequately furnished and in good order, and the offensive display policy was mostly adhered to. Some communal areas were not sufficiently clean, despite the allocation of a large number of prisoners to cleaning duties; the telephone rooms and stairwells were particularly dirty and dusty. Showers were appropriately screened and were cleaned and maintained to a good standard. Prisoners in our survey and in our groups were generally very positive about residential issues.
- 2.3** Most prisoners arrived at the prison with their own clothes. Additional clothing could be posted in by relatives, and prisoners without external support could apply for an amenities grant to buy clothes to wear on release on temporary licence (ROTL). Access to showers, prison clothing and bedding was good, with easy access to laundry facilities, cleaning materials and a weekly issue of washing detergent.
- 2.4** The application process was well understood by prisoners, although most issues were dealt with informally by residential staff. Submitted applications were tracked, and in our survey more prisoners than at comparator prisons were positive about the ease and effectiveness of the applications process.
- 2.5** Rules were clearly explained on arrival and reinforced in the induction booklet and by signage around the accommodation building. Noticeboards provided a wide range of information.
- 2.6** Telephones were switched on all day until 11pm. Prisoners were allowed mobile telephones for use on ROTL, and left them in lockers in reception on their return to the prison. Mail was handed out on the day of receipt and outgoing mail was processed quickly.

### Staff-prisoner relationships

#### Expected outcomes:

**Prisoners are treated with respect by staff throughout the duration of their time in custody, and are encouraged to take responsibility for their own actions and decisions.**

**2.7** *Staff–prisoner relationships were excellent and this was reflected in case notes. Personal officer support was mostly good. There were regular consultation meetings with prisoner representatives.*

**2.8** Staff–prisoner relationships were excellent. We saw helpful and friendly interactions, and in our survey more prisoners than at comparator establishments said that they were treated with respect by most staff, and that staff checked personally with them about how they were getting on and spoke to them during association.

**2.9** In case files, we found helpful and informative entries by residential, offender management, education and work supervision staff, commenting on prisoners' behaviour and progress.

**2.10** Each prisoner had a personal officer and we found regular constructive comments entered by them in case files, demonstrating good knowledge and meaningful contact. However, in too many cases there had been a delay between the prisoner's arrival and his first meeting with his personal officer. Personal officers recorded their views on prisoners' progress, and often commented on progress towards sentence plan targets, but did not routinely attend sentence planning and other relevant meetings.

**2.11** Prisoner consultation took place monthly and the notes of the meetings were posted on a dedicated noticeboard. Attendance was limited to prisoner representatives who canvassed other prisoners about their concerns. It was clear from the minutes of these meetings that some practical improvements to the regime had been agreed but delegates we spoke to were frustrated with the slow pace of resolution of some issues that were important to them.

## Recommendation

**2.12** **Personal officers should attend sentence planning boards and other relevant meetings to discuss the progress of the prisoners in their care.** (Repeated recommendation 2.22)

## Housekeeping point

**2.13** Personal officers should introduce themselves to prisoners within one week of arrival.

## Equality and diversity

### Expected outcomes:

**The prison demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no prisoner is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The distinct needs of each protected characteristic<sup>5</sup> are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.**

<sup>5</sup> The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

**2.14** *Most equality outcomes were reasonable, but the overall strategic approach was weak, lacking a basis in assessed prisoner need. There were regular equality and diversity meetings, but discrimination incident report form and ethnic monitoring systems were not used effectively to identify and resolve potential inequality. We identified a need for dedicated consultation.*

## Strategic management

- 2.15** There was an up-to-date diversity and equality strategy, which explained the legal and statutory responsibilities for each protected group but was not based on information about the specific needs of prisoners at the establishment. The newly prepared associated action plan reflected some external influences, such as audit scores and previous HMIP recommendations, but did not include any locally identified objectives. As a result, the overall strategic approach was weak.
- 2.16** There was a monthly diversity and equality action team (DEAT) meeting, conducted by video link with HMP East Sutton Park. The governor or the deputy governor had attended only two of the last four meetings, which were chaired by a functional head. Prisoner representatives attended routinely but there was no external community representation. Ethnic monitoring data suggesting a possible disadvantage for black and minority ethnic prisoners in the ROTL process had persisted for eight months, without investigation.
- 2.17** Prisoner diversity representatives were well known to prisoners and staff. Diversity issues were discussed at the monthly prisoner consultative committees, but there were few events or displays to celebrate diversity, and no forums for specific protected groups to provide support or a collective voice.
- 2.18** No discrimination incident report forms (DIRFs) had been submitted in the previous six months. Not all staff had a clear understanding of who could use the DIRF system and when it should be used. We identified at least two events which should have been recorded on a DIRF. In both cases, the investigation and actions that had taken place were inadequate and there had been insufficient management scrutiny. We also identified some complaints submitted by prisoners who felt that discrimination was taking place; these also should have been investigated using the DIRF process.
- 2.19** During induction, prisoners had the opportunity to complete a disability, age and sexual orientation questionnaire, in confidence, with a member of staff. We noted some possible duplication in this process between reception, health services and diversity staff, but it was particularly useful for identifying men with disabilities.

## Recommendations

- 2.20** **The local equality and diversity strategy and action plan should be based on an assessment of the needs of the population at Blantyre House, and should include active use of discrimination incident report forms and ethnic monitoring processes.**
- 2.21** **Forums for specific protected groups should be established.**

## Protected characteristics

- 2.22** In our survey, black and minority ethnic prisoners reported similarly to or more positively than the main population across a number of indicators, which was an improvement from the situation at the time of the previous inspection. The prison was not aware of any Gypsy/Romany/Traveller men, but had recently included this group in the DEAT meetings, and the library held a few books likely to be of interest.
- 2.23** There had been very few foreign nationals at the prison, and during the inspection there were only three. They could apply for additional telephone credit and free five-minute calls, and were not automatically refused these if they received visits. There was no independent immigration advice.
- 2.24** The Muslim chaplain had undertaken some work to inform staff about the Islamic faith and traditions, and we did not identify the tensions that were evident at the time of the previous inspection. Muslim prisoners appreciated the way in which Ramadan had been managed.
- 2.25** The needs of prisoners with disabilities were fairly well met. Several reasonable adjustments had been made for individual men, but there were still no adapted rooms or fully adapted showers, which meant that some men would be unable to be allocated to Blantyre House. Personal emergency evacuation plans had been prepared when required. There was an unpaid scheme for named prisoners to provide practical support to those with disabilities, but no evidence of joint care planning with health services staff or referral to adult safeguarding teams (see section on safeguarding).
- 2.26** There were no openly gay prisoners but during the inspection we heard about several incidents which suggested that there had been some ‘grooming’ activity and some intimidation of prisoners believed to be gay. Senior managers were aware of this, and some appropriate actions had been taken to manage the situation, but no DIRF on this subject had been submitted and there had been no discussion about it at the DEAT.
- 2.27** Around 25% of the prison population was over 50. Apart from a weekly PE class, there were no services aimed specifically at older men. Although a few men were over 65, none was retired. The retirement wage of £4 a week was very low, particularly for prisoners who had no other income. There was no dedicated consultation process for older prisoners to identify their needs (see recommendation 2.21).

## Recommendation

- 2.28 Fully adapted rooms, toilets and shower facilities should be available.**
- 2.29 Retirement pay should be sufficient for those who do not have another source of income.**

## Housekeeping points

- 2.30** Foreign national prisoners should be able to access independent immigration advice easily.
- 2.31** Mentors should be paid for their support to others with disabilities.

## 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.**

**2.32** *Despite the absence of a coordinating chaplain, faith provision was generally good, although not sufficiently integrated with the wider prison. Prisoners reported positively about the support they received and the facilities and services they could access.*

**2.33** There had been no coordinating chaplain for over three months. However, the remaining part-time and voluntary team members were well known to prisoners and worked hard to maintain provision. In our survey, prisoners reported positively about their access to religious leaders and services. The large multi-faith room and dedicated mosque area were open 12 hours a day. There were regular services, which were well advertised, and some religious classes, although demand for the latter was not high.

**2.34** The religious affiliation of the population was regularly monitored and there was evidence of some bespoke provision for minority faiths, although not for pagans.

**2.35** The staffing shortages meant that the chaplaincy currently made little contribution to wider prison processes, such as diversity meetings and ROTL risk boards. However, the team was still offering emotional support to bereaved or distressed prisoners.

### Housekeeping point

**2.36** The chaplaincy should be involved in all key prison committees and support resettlement planning (repeated recommendation 3.34)

## Complaints

### Expected outcomes:

**Effective complaints procedures are in place for prisoners, which 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.**

**2.37** *Few complaints were made, and those submitted were mostly about low-level issues. Prisoners said that they were reluctant to complain. Most responses were prompt, but too many were disrespectful.*

**2.38** In our survey, levels of satisfaction with the complaints process were similar to those at comparator establishments and to those at the time of the previous inspection. Complaint forms were readily available and could easily be submitted confidentially. Prisoners made comparatively few formal complaints, and most were about low-level issues. However, many said that they were reluctant to complain for fear of repercussions such as loss of privileges or transfer to closed conditions. We saw no evidence of this being the case.

- 2.39** Most responses to complaints were prompt and comprehensive but, despite a random quality check by a senior manager, many were not sufficiently respectful, and a few were rude. Some prisoners had claimed a discriminatory element in their complaints, but these cases had not automatically been investigated by the diversity manager as diversity incidents (see paragraph 2.18).

## Recommendation

- 2.40** **All complaints should be answered respectfully, and any alleging discrimination should be processed as diversity incidents.**

## Legal rights

### Expected outcomes:

**Prisoners are fully aware of, and understand their sentence or remand, both on arrival and release. Prisoners are supported by the prison staff to freely exercise their legal rights.**

- 2.41** *Access to legal representatives was good.*

- 2.42** In our survey, prisoners reported comparatively positively about their ability to contact their legal representatives. Legal visitors told us that it was easy to book visits and that processes were efficient. Legal visitors had exclusive use of the visits room, which ensured adequate privacy, despite the absence of dedicated legal visits facilities.

## Health services

### Expected outcomes:

**Prisoners are 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 elsewhere in the community.**

- 2.43** *Health services were good and prisoners were very positive about them. Clinical governance was satisfactory but the health needs assessment was out of date. Waiting times for all clinics were good. Pharmacy services were generally good but there were no in-possession risk assessments. NHS-equivalent dental treatment was provided. Mental health support was good.*

## Governance arrangements

- 2.44** Health services were commissioned by the Kent and Medway Area Team of NHS England and provided by Oxleas NHS Foundation Trust (Oxleas). Joint quarterly clinical governance meetings were held with HMPs Maidstone and East Sutton Park. Although no partnership board meetings had occurred in 2013, there was a positive working relationship with the commissioners and new partnership arrangements were in advanced development. The health needs assessment and delivery plan were out of date.



- 2.45** Health services were discussed at the general prisoner consultation groups but health services staff did not always attend. A recent in-house patient satisfaction survey had provided positive results.
- 2.46** Prisoners received written information on arrival and had easy access to the health centre. Qualified nurses were present from 8.30am to 4pm on weekdays, and a GP attended twice weekly. Facilities were generally very good and clean, but the dental suite needed refurbishment (see section on dentistry) and some rooms were in a poor state of decoration.
- 2.47** Health services staff were clearly identifiable and the interactions we observed were very good. Nurses had good access to appropriate training and appraisal. Staffing shortages had restricted access to formal clinical supervision, although nurses reported good informal mechanisms.
- 2.48** The electronic clinical records on SystmOne were good but care planning was underdeveloped and reviews were not recorded (see housekeeping point 2.64). Archived records were stored in boxes in the counselling room, which was not sufficiently secure. Nurses used the full range of electronic Oxleas policies, including for communicable diseases and safeguarding; however, the Oxleas intranet was not accessible during the inspection. The policies we saw did not reflect the prison environment.
- 2.49** Nurses maintained a range of health promotion literature and prison displays, but there was no prison health promotion strategy or action group. Barrier protection was advertised and available from health services staff on request. There was no older prisoner strategy, and older prisoners could not access all age-appropriate national screening because of difficulties in accessing their NHS numbers. There was good access to occupational therapy services, mobility/health aids, smoking cessation, immunisation and blood-borne virus testing.
- 2.50** The emergency equipment in the health care department was appropriate and in date, but checks were not recorded and some emergency medication was locked in another room, which could have slowed nurse response times. There were no agreed health emergency response codes in use for requesting nurse attendance at an emergency, which could have further delayed responses. There was an automatic defibrillator at the gate and in the residential unit to allow access at all times; however, they were not checked regularly and the pads on one had expired in 2011. Too few operational staff were trained in emergency first aid.
- 2.51** The Oxleas complaints process was well advertised but advised that a complaint could be submitted by a letter to health services staff, a health application or through the prison complaint system, which was confusing. No health care complaints had been received in 2013; we were told that potential complaints were resolved directly with the prisoner.

## Recommendations

- 2.52** **There should be a current health delivery plan, informed by an up-to-date health needs assessment, and health services staff should have access to a full range of policies that accurately reflect the prison environment.**
- 2.53** **There should be systematic health promotion throughout the prison, overseen by a prison health promotion action group and which includes prisoner representation.**

- 2.54** The governor should ensure that there are agreed health emergency response codes in use and that prisoners requiring emergency first aid out of hours have prompt access to appropriately trained staff and well-maintained equipment which is regular checked and documented.

### Housekeeping points

- 2.55** There should be regular dedicated health care service user consultation.
- 2.56** Nurses should have access to regular recorded formal clinical supervision.
- 2.57** Paper clinical records should be securely stored in line with Caldicott principles.
- 2.58** A senior nurse should have strategic responsibility for older prisoners, including access to national screening programmes and a senior nurse lead member of staff.
- 2.59** The system for complaints about health services should be clear and ensure that medical confidentiality is maintained.

### Delivery of care (physical health)

- 2.60** Nurses saw all prisoners in the health care unit for an initial assessment soon after arrival and appropriate follow-up referrals were made. Comprehensive follow-up assessments were completed on the next working day and consent to liaise with community services was obtained.
- 2.61** In our survey, more prisoners than at comparator establishments were satisfied with the overall quality of health services (79% versus 66%) and prisoners we spoke to were also very positive about them. Prisoners could request services by application, telephone or drop-in. Waiting times for GP appointments were short and there was daily access to effective nurse assessment clinics.
- 2.62** Clinic waiting times were good and the failure-to-attend rate was low. Nurses had an impressive knowledge of the health needs of individual prisoners and arranged for appropriate reviews for lifelong conditions as needed. However, there was no lifelong conditions register and no clear recorded systems to ensure that review occurred, so some prisoners could have been missed.
- 2.63** Prison officers knew how to access out-of-hours medical support. Communication between health services and wing staff was good and included issuing those prisoners with complex needs with an up-to-date medical letter to ensure effective continuity of care if an ambulance was required. There was excellent access to external hospital appointments and waiting times were equivalent to those in the community.

### Housekeeping point

- 2.64** There should be an accurate life-long conditions register and all prisoners on it should receive regular reviews which generate an evidence-based care plan.

## Pharmacy

- 2.65** HMP Rochester provided pharmacy services, including telephone support and monthly visits to assess and report on medicines management issues. There were effective standard operating procedures (SOPs) for controlled drugs. However, although medicines management was good, including effective stock rotation and appropriate audit trails for the supply and issue of stock medicines, there were no supporting SOPs. Drugs alerts were managed effectively. Refrigerator temperatures were recorded daily and were in range. The controlled drugs register was compliant with the regulations, but the balance checks were not frequent enough. There were out-of-date reference books in some clinical rooms.
- 2.66** Prisoners reordered their in-possession medication by submitting an application into the health centre postbox or in person. There were secure and effective processes to ensure that prisoners who worked outside the prison received their medication. Nurses reviewed medication requests to ensure that they were appropriate.
- 2.67** Nurses used a wide range of patient group directions (enabling nurses to supply and administer prescription-only medicine) to resolve minor problems, and contacted GPs if additional input was needed. As part of the health care reception process, prisoners were issued a token for the paracetamol vending machine, to enable them to access out-of-hours pain relief. Systems to record and monitor the issue of additional tokens were effective.
- 2.68** Medicines administration was private. All medicines were given in-possession; most were weekly or monthly but a few prisoners received daily supplies. There were no formal risk assessments explaining how these decisions were made, which created the potential for inappropriate and/or inconsistent decision making.
- 2.69** A Kent prisons medicines management group, comprising all key stakeholders, met regularly and discussed all pertinent issues, including prescribing data.

## Recommendation

- 2.70** **Risk assessments should be completed for every prisoner and filed so that the prescriber can see them.** (Repeated recommendation 5.47)

## Housekeeping points

- 2.71** There should be standard operating procedures covering all aspects of medicines management.
- 2.72** Old reference books should be discarded, and only the most recent copy should be kept.
- 2.73** There should be weekly recorded checks of the controlled drug balances.

## Dentistry

- 2.74** Oxleas NHS Foundation Trust provided one dental session a week. In our survey, more prisoners than at comparator prisons said that it was easy to see the dentist (60% versus 27%) and that the quality of dental services was good or very good (84% versus 54%). Waiting times were good, appointments were appropriately allocated based on need, and urgent cases were seen within seven days. Prisoners accessed the community emergency dental service as needed. NHS-equivalent dental treatment was available.

- 2.75** We were unable to observe any dental consultations during the inspection.
- 2.76** Prisoners were given verbal advice on oral health. Appropriate entries were made in clinical records. The dental surgery did not meet the basic standards within the dental guidelines HTMI-05. All dental equipment was appropriately maintained and dental waste underwent professional disposal.

## Recommendation

- 2.77** **The dental surgery should be refurbished, to comply with dental regulation HTMI-05.**

## Delivery of care (mental health)

- 2.78** In our survey, a similar number to the comparator (16%) said that they had emotional well-being or mental health problems but more of those with a problem said that they were being helped (79% versus 52%).
- 2.79** The mental health provision had increased since the previous inspection, from one to two clinics weekly, and a counsellor had recently started seeing two clients a week. A psychiatrist attended as required.
- 2.80** A registered mental health nurse (RMN) provided an integrated mental health service. One or two referrals were received monthly through the open referral system and prisoners were seen quickly. At the time of the inspection, the RMN had a caseload of seven prisoners, of whom one had severe mental illness and was receiving community-equivalent care. Prisoners could be treated outside the prison, which ensured equitable access for those who were working out.
- 2.81** There was good joint working between mental health and prison staff, including probation and the offender management staff, although few prison officers had attended mental health awareness training.
- 2.82** No prisoner had required transfer to NHS mental health facilities since the previous inspection.

## Recommendation

- 2.83** **Discipline staff should have mental health awareness training to recognise and take appropriate action when a prisoner has mental health problems.**

## 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.**

**2.84** *Catering provision was generally good but there were difficulties in providing hot evening meals for prisoners returning late after work. Provision for religious and other dietary needs was mostly effective. Consultation arrangements were adequate. There were no self-catering facilities.*

**2.85** The kitchen was old, but clean and well maintained. The four-week menu cycle was appropriate, much of the food was prepared on site, and sufficient fruit and vegetables were provided. In our survey, 42% of men said that the food was good or very good, which was similar to the comparator and to the number at the time of the previous inspection. We rated the meals as good overall. There was unlimited fresh milk at breakfast, and homemade soup (made with prison produce in season) supplemented the lunchtime salad or sandwich. Prisoners were less enthusiastic about the cold evening meal at weekends.

**2.86** Most men ate together in the dining room. Hot meals could be kept for those returning from work in the early evening but later arrivals had a cold meal, which meant that they might not have received a hot meal that day. The cold meals were much less attractive than the meals available in the dining room, and the process for ordering and collecting packed lunches and evening meals was unreliable and poorly understood.

**2.87** There was no self-catering facility for men, most of whom were coming to the end of very long sentences, to practise cooking for themselves.

**2.88** Prisoners' comments on the catering were discussed at regular consultative meetings. Some prisoners reported concerns about the preparation of halal meals, but the Muslim chaplain was generally content with the arrangements. However, although the main halal meal was identifiable, the suitability of some additional options, such as soup, was not always clear. Various other dietary needs were generally met.

## Recommendation

**2.89** **Prisoners should be able to self-cater.**

## Housekeeping points

**2.90** All prisoners should have access to a hot meal every day.

**2.91** Prisoners should be able easily to identify which foods are halal.

## Purchases

### Expected outcomes:

**Prisoners can purchase a suitable range of goods at reasonable prices to meet their diverse needs, and can do so safely.**

**2.92** *Shop processes were appropriately managed. Prisoners could purchase items while released on temporary licence.*

**2.93** In our survey, more prisoners than at comparator prisons were positive about the prison shop provision. Newly arrived prisoners could receive a smokers' or grocery pack and £10

PIN telephone credit while waiting for their first shop order, which could take up to nine days. Prisoners could make purchases from a range of catalogues but were charged an administration fee on each order. Prisoners with money of their own could also purchase goods (subject to the facilities list) while out on ROTL. There was no facility for an advance of earnings.

- 2.94** Consultation arrangements took place as part of the prisoner consultation committee and residential staff could access account information for prisoners on P-Nomis (electronic case notes).

### Housekeeping point

- 2.95** Prisoners should not be charged an administration fee on catalogue orders.

## Section 3. Purposeful activity

### Time out of cell

#### Expected outcomes:

**All prisoners are actively encouraged to engage in activities available during unlock and the prison offers a timetable of regular and varied activities.<sup>6</sup>**

- 3.1** *Prisoners were not locked in their rooms and had good access to all areas of the prison. Association facilities were variable. Too many prisoners were not fully occupied during the working day.*
- 3.2** Prisoners had keys to their own rooms. In our survey, more prisoners than at comparable establishments said that they spent more than 10 hours a day out of their rooms. They had free access to the whole residential unit from 7.45am until 11pm, after which they were expected to remain in their own room. They had free access to outside areas until 8pm.
- 3.3** During association periods, prisons could use well-equipped association areas and the library, which provided access to computers. There was a small room with cardiovascular equipment but this was not available on weekdays until after the 8pm roll check (see section on physical education and healthy living).
- 3.4** During the inspection, 60–70% of prisoners were in the prison during the working day. Some were legitimately unoccupied because they worked shifts or were on a rest day. All prisoners who did not work outside the prison were allocated a job but many we spoke to on the residential unit during the day were underemployed in jobs which provided as little as one hour of work a day, and were bored (see section on purposeful activity and main recommendation S47).

### Learning and skills and work activities

#### Expected outcomes:

**All prisoners can engage in activities that are purposeful, benefit them and increase their employability. Prisoners are encouraged and enabled to learn both during and after their sentence. The learning and skills and work provision is of a good standard and is effective in meeting the needs of all prisoners.**

- 3.5** *Too few prisoners worked out of the prison and those inside had too little activity to keep them occupied. There were too few vocational training opportunities but the range of education and vocational training was suitable. The quality of teaching, learning and assessment was good. Work was not sufficiently purposeful and attendance was poorly managed. Achievements were good in education classes but too low in some vocational training areas. Library provision was good.*

<sup>6</sup> Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities to take showers or make telephone calls.

**3.6** *Ofsted<sup>7</sup> made the following assessments about the learning and skills and work provision:*

<i>Achievements of prisoners engaged in learning and skills and work:</i>	<i>good</i>
<i>Quality of learning and skills and work provision:</i>	<i>good</i>
<i>Leadership and management of learning and skills and work:</i>	<i>requires improvement</i>

**Management of learning and skills and work**

- 3.7** The management of learning and skills was inadequate. A needs analysis to inform the provision had not been undertaken and there were fewer opportunities for prisoners to gain qualifications than at the time of the previous inspection. Prisoners progressed into work in the community following a period working in the prison. However, too few prisoners (who were assessed as suitable) accessed working-out opportunities. The process for finding work was too slow and too few placements were available. This placed pressure on internal provision (see section on reintegration planning and main recommendation S48). The proportion of prisoners entering employment on discharge and the number working out were also lower than at the time of the previous inspection. The recently appointed learning and skills manager had begun to redress these failings and plans to provide qualifications in industrial cleaning and peer mentoring were well advanced.
- 3.8** The prison's self-assessment report provided an honest and fair account of the quality of provision, recognising that overall provision had declined since the previous inspection. The quality of education remained good. However, outside the education department very few prisoners achieved vocational qualifications.
- 3.9** Education provision was managed well, resulting in good teaching and high achievement of qualifications for prisoners. Education staff were well managed and data used well to monitor standards and promote improvement. Arrangements for performance management were good. College managers ensured that teaching and learning were at least good but did not sufficiently challenge all staff to achieve even higher standards.
- 3.10** The management of work was inadequate. Although all prisoners were allocated a work role, there was little monitoring of attendance and insufficient supervision; too often, prisoners were not at their place of work and not purposefully occupied. Pay was low but did not provide a disincentive to take part in training or education.

**Recommendations**

- 3.11 A comprehensive needs analysis should be undertaken to inform the planning of education, vocational training and work opportunities.**
- 3.12 Prisoners should attend their allocated place of work on time and remain sufficiently occupied throughout the working day.**

<sup>7</sup> Ofsted is the Office for Standards in Education, Children's Services and Skills. It reports directly to the UK Parliament and is independent and impartial. It (inter alia) inspects and regulates services that provide education and skills for all ages, including those in custody. For information on Ofsted's inspection framework, please visit: <http://www.ofsted.gov.uk>.



## Provision of activities

- 3.13** There was insufficient purposeful activity for the prison population. Although every prisoner was allocated a role within a few days of arrival, in reality there was too little quality work in the prison, and too much internal work was unskilled, not purposeful and did not fully occupy prisoners for the whole day. Many prisoners who worked out only did so part-time and had little to do on the days they were back in the prison.
- 3.14** Prisoners received an appropriate induction to activities, which included an assessment of need. Before attending the sentence planning board, all prisoners participated in a two-day accredited programme using the National Offender Management Service (NOMS) seven pathways to identify resettlement priorities. Prisoners usually received appropriate information, advice and guidance but, owing to National Careers Service staff absences, this intervention was not always timely (see section on reintegration planning).
- 3.15** The range and level of education courses were suitable and included functional skills in literacy and numeracy, information and communications technology, art, food safety, health and safety, budgeting, construction skills and money management. With the exception of the multi-skills construction course, education courses were offered part-time. Opportunities to combine education and training with work were effective owing to the flexible and responsive approach adopted by the education department.
- 3.16** Outside of the education department, very few prisoners gained qualifications. Work in the kitchens reflected commercial standards and supported well the acquisition of accredited qualifications up to level 2. However, the number of prisoners participating in vocational accredited training in the kitchen, horticulture and other work areas was low. There was no opportunity to gain accredited qualifications in industrial cleaning or peer working.
- 3.17** Opportunities to study and train outside the prison were good (see section on reintegration planning).

## Recommendations

- 3.18 All prisoners should receive appropriately timely information, advice and guidance.**
- 3.19 The number of prisoners participating in vocationally accredited training should be significantly increased.**
- 3.20 Prisoners should be able to gain accredited qualifications in industrial cleaning and peer working.**

## Quality of provision

- 3.21** The quality of teaching and learning was good. Lessons were planned well and included a wide range of activities that motivated and engaged prisoners. Tutors effectively used challenging learning materials and well-focused questions and answers. The quality of individual coaching was good.
- 3.22** Tutors supported prisoners well in the acquisition of new practical skills, critical thinking skills and knowledge. The 'pathways' programme was particularly effective in ensuring that prisoners reflected on their personal strengths and weaknesses and took responsibility for identifying their resettlement needs.

- 3.23** Tutors appropriately tracked prisoners' progress. However, in a minority of cases the planning of prisoners' individual learning was not consistently effective. Target setting was generally effective, although targets were not always sufficiently ambitious, only addressed qualification or unit achievement, or did not include detailed personal development objectives to support resettlement.
- 3.24** All teaching and training took place in suitably resourced accommodation, with particularly good facilities in the multi-skills construction workshops. An intranet was available in the education department which primarily offered resources to support induction to the prison and resettlement.

## Recommendation

- 3.25** **The planning of individualised learning, and target setting should be improved.**

## Education and vocational achievements

- 3.26** In general, the achievement of qualifications was high. In the previous three years, the overall success rate had been at or above 86%. The education provider had been successful in improving the success rate for functional skills qualifications, from a low of 56% in 2011/12 to the current high rate of 88%. There were no significant differences in achievement by prisoners from different backgrounds.
- 3.27** Although too few prisoners took vocational qualifications, those doing so made good progress and produced high standards of work. The quality of work produced in art classes was particularly good and had been included in external exhibitions as well as receiving many prestigious national awards. The quality of finished tiling and plastering in the multi-skills workshop was high and often exceeded that required by the qualification. Most learners made good progress and developed their social skills well. They were respectful to each other and their tutors. Inappropriate behaviour was rare, and effectively challenged.
- 3.28** Learners developed useful employability skills through participation in education classes and work in the kitchens and vocational workshops. However, unplanned absences by prisoners meant that too few of those working in the gardens could develop an adequate understanding of working to commercial deadlines. Too many prisoners allocated to work in the residential unit did not develop an appropriate work ethic, as they were underemployed (see recommendation 3.12). Overall, attendance rates in lessons were good and prisoners were punctual.

## Library

- 3.29** The prison library, provided by Kent County Council, was well maintained and welcoming. All prisoners received a suitable induction to the library and had good access to the facilities from 8am to 8pm every day. Over two-thirds of the prison population regularly used the library at least once a week.
- 3.30** The range and variety of stock were good and included fiction and non-fiction, textbooks to support vocational training, graphic novels, quick reads to support emergent readers, talking books, daily newspapers and foreign language books. Other items such as music CDs were available on request through inter-library loans.

- 3.31** The library managed an appropriate range of activities to promote literacy and encourage non-users to access the facilities, including Storybook Dads (in which prisoners record stories for their children), a book club and the distribution of free books. An annual survey of prisoners and education tutors was undertaken and used to assess whether the library service met needs and to support improvements.

## Physical education and healthy living

### Expected outcomes:

**All prisoners understand the importance of healthy living, and are encouraged and enabled to participate in physical education in safe and decent surroundings.**

**3.32** *The prison had adequate PE facilities but access was limited by staffing levels. Only around a third of prisoners used the gym regularly and there was little provision for specific groups such as older prisoners. Some equipment was in a poor state of repair. The gym induction was thorough and there were good links with the health care department.*

- 3.33** PE facilities were adequate, although staffing levels limited the range, variety and availability of activities. The main hall was used mainly for circuit training and racket sports such as badminton and softball, with basketball, volleyball and five-a-side football offered on demand. A cardiovascular suite in the residential unit was available for prisoners' use every evening but was locked during the day. The free weights area included a satisfactory range of equipment, although some, including a cross-trainer and weight machine, was in a poor state of repair. When fully utilised, ventilation of the facility was unsatisfactory. A grass pitch was used for outdoor activities, including a sports day for prisoners' families, but it was generally underutilised. PE changing room and shower facilities were satisfactory.
- 3.34** Only around a third of the prison population used the gym regularly and prisoners complained that sessions were often cancelled or not available at the right times (evenings and weekends) as PE staff were not available. Recreational PE could be accessed through sessions run once daily for four days during the week and once at the weekend. At other times, prisoner access to the gym was limited. With the exception of a weekly PE class, there was little provision for the over-50 age group.
- 3.35** The gym induction process was sound and included prisoner self-declaration and health care assessments to identify individuals with specific needs. PE staff worked well with health services staff to address the mental health, anxiety, weight loss and the pre- and postoperative needs of prisoners. Although achievement rates were high, the prison offered a very limited range of accredited courses, for which recruitment was low.

### Recommendation

- 3.36** **The shortfalls in facility use and staffing levels should be addressed to increase the proportion of prisoners using the gym and gaining accredited qualifications.**

### Housekeeping point

- 3.37** The cardiovascular exercise equipment should be repaired and properly maintained, and the room should be better ventilated and available during the day.



# Section 4. Resettlement

## Strategic management of resettlement

### Expected outcomes:

**Planning for a prisoner's release or transfer starts on their arrival at the prison.**

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

**Good planning ensures a seamless transition into the community.**

**4.1** *Despite the large increase in the number of indeterminate-sentenced prisoners, no recent needs analysis had been undertaken and there was no action plan to support delivery of the resettlement strategy. Release on temporary licence was widely used. Not all the training needs of offender supervisors had been addressed and management oversight through supervision was weak. Some good links to community-based agencies supported resettlement but links between the offender management unit and information, advice and guidance were less well developed.*

**4.2** The population had changed dramatically since the previous inspection, and the establishment now mainly held indeterminate-sentenced prisoners (ISPs). However, there had been no recent needs analysis, so it was difficult to assess whether the resettlement provision was appropriate. The resettlement strategy, which covered the seven pathways, was not supported by an action plan to set priorities or assess progress. Monthly resettlement meetings provided an opportunity to update colleagues across the pathways.

**4.3** Release on temporary licence (ROTL) was used to support activity and family ties but many prisoners told us that low wages inhibited their ability to take advantage of these opportunities as they had to pay for travel and food for day release.

**4.4** There was a small team of offender supervisors but not all of their training and developmental needs had been met. There was no formal staff supervision and development plan specifically for the offender management unit (OMU). Management oversight of the offender supervisors was ad hoc.

**4.5** There were some effective links with community-based agencies to support prisoners' resettlement. Formal links between the OMU and the information, advice and guidance (IAG) centre were underdeveloped. For example, IAG staff did not routinely attend the ROTL risk board or sentence planning meetings. However, informal links appeared good.

### Recommendations

**4.6** **The resettlement strategy should be based on a comprehensive needs analysis and include the role of the offender management unit. The strategy should be supported by an action plan which is regularly reviewed and updated.**

**4.7** **There should be a staff supervision policy and an associated training and development plan specifically for offender management unit staff. (Repeated recommendation 9.8)**

## Housekeeping point

- 4.8 Formal links between information, advice and guidance (IAG) and offender management unit staff should be improved.

## Offender management and planning

### Expected outcomes:

**All prisoners have a sentence plan based on 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 in drawing up and reviewing plans.**

4.9 *All prisoners had an offender manager and offender supervisor. Staff in the offender management unit (OMU) were very accessible. Offender assessment system (OASys) assessments and plans needed further and very specific improvements. Sentence planning was adequate but too few plans contained outcome-focused objectives and staff from all other relevant departments were rarely involved. Prisoners generally felt well supported and prepared for release. Contact between offender supervisors and prisoners were not sufficiently focused on risk. Contributions to multi-agency public protection arrangements (MAPPA) for final release were good but levels were not routinely reviewed before release on temporary licence, and OMU staff were not told about this.*

- 4.10 All prisoners were serving sentences of over 12 months and were managed under the offender management model. As the size of the prison population was small, staff in the OMU were very accessible. However, in over half of the cases we looked at in our analysis, initial contact between offender supervisors and prisoners had not taken place quickly enough following reception.
- 4.11 Of the 20 in-scope cases we looked at (where assessments and plans were completed by an offender manager), the assessment of the likelihood of reoffending was adequate in 14; of the six that were inadequate, two had been completed beyond the timescale required and four did not contain enough evidence or clearly identify offending-related factors.
- 4.12 In our survey, many more prisoners than at other open prisons said that they had a sentence plan (94% versus 73%), and considerably more than at comparator prisons and than at the time of the previous inspection said that they had been involved in its development (85% versus 71% and 70%, respectively). Both the pathways programme and the risk board gave prisoners a good opportunity to develop targets for themselves and assess their own progress. Offender managers had been sufficiently involved in developing the sentence plan in two-thirds of the 20 cases we inspected. However, too few plans contained outcome-focused objectives and too few other departments had been involved in the planning process or reviews. Only 16 of the cases had undergone an adequate risk of harm analysis.
- 4.13 We also reviewed a small number of offender assessment system (OASys) assessments and plans completed by offender supervisors. Sentence plans were of variable quality, with a couple missing some relevant objectives and few assessing what the prisoner would achieve from ROTL. We found the risk of serious harm level to be correct in all cases but there was too little analysis of the factors leading to offending. Two of the risk management plans were out of date and none of them addressed risk during ROTL.
- 4.14 In our survey, a quarter of prisoners did not feel that they were being helped to achieve their sentence plan targets. The remainder said that a range of staff, including personal

officers, were helping them to achieve their targets, and considerably more than at other open prisons said that they had been helped to prepare for release.

- 4.15 OMU caseloads were manageable, with each offender supervisor handling about 40 cases. However, contact between offender supervisors and the prisoners in their care was not always structured or regular enough to maintain a focus on risk and need, or assess the progress being made.
- 4.16 Contributions to multi-agency public protection arrangements (MAPPA) level 2 meetings by offender supervisors before prisoners' release were good, and they attended when possible. The OMU contacted offender managers before the start of ROTL to ascertain the MAPPA level for prisoners. However, this information was not always provided (see section on public protection).

## Recommendations

- 4.17 **Offender supervisors should have regular and structured contact with prisoners which is focused on the risk of harm and reducing reoffending.**
- 4.18 **The quality of offender assessment system (OASys) assessments and plans should be further improved and a risk management plan for release on temporary licence should be included.**

## Housekeeping point

- 4.19 Offender supervisors should make initial contact within 10 days of the prisoner's arrival.

## Public protection

- 4.20 The strategic management of public protection had declined over the previous year, with many changes in staffing and management (see main recommendation S49). A new lead person had recently been identified to drive forward this work.
- 4.21 Children's services were not always told about the arrival or departure of those presenting a risk of harm to children. There was an inter-departmental risk management board but its purpose was unclear and attendance by functions outside the OMU was very poor. Outcomes of these meetings were limited and did not contribute to public protection. There were plans to review their purpose and establish a more effective board process.
- 4.22 Progression to each stage of ROTL was overseen by the risk board. This set sentence plan targets with the prisoner, judged organisational risks in allowing ROTL and also considered when a prisoner might not be suitable to stay at the establishment. The board was chaired effectively by the head of the OMU, who actively engaged prisoners in the process and gave them a clear rationale for decisions made.
- 4.23 Most prisoners (99 out of 120) fell within the remit of MAPPA owing to the nature of their offences. These arrangements aimed to support the development of multi-agency risk management plans six months before release; however, they were not convened specifically to consider and plan for the risk of harm during ROTL. This was a concern, given the potential risk of harm during unsupervised day or overnight release (see main recommendation S49).

- 4.24** Many of the prisoners held at the establishment had been allocated to MAPPA level I (ordinary management arrangements) because they were in custody. This level of management was not routinely reviewed before the start of ROTL. Offender managers in the community were not always fully involved in the decision-making process about ROTL.

### Categorisation

- 4.25** Most prisoners held at the establishment were category D, many of whom had been awarded this category by the parole board. A few prisoners (nine at the time of the inspection) were category C; these prisoners had their category reviewed before ROTL. A decision to award category D status to these determinate-sentenced prisoners was defensible but the quality of the completed paperwork was sometimes poor.

### Housekeeping point

- 4.26** The quality of completed recategorisation paperwork should be improved.

### Indeterminate sentence prisoners

- 4.27** Most prisoners held at the establishment were in the last stages of an indeterminate sentence. Of the 82 ISPs, 39 were serving an indeterminate sentence for public protection (IPP), of whom 30 were considerably over tariff.
- 4.28** Not all offender supervisors had received training in the management of ISPs (see recommendation 4.7). There was no support forum for ISPs and little specific training to develop their independent living skills, although they could attend a money management course through the education department and access other resettlement services in the community.
- 4.29** The preparation of parole reports was up to date and involvement in hearings by OMU staff was good. However, not all offender supervisors felt confident in attending and contributing to these hearings.

### Recommendation

- 4.30** **Offender supervisors should receive training to improve their confidence in attending and contributing to parole hearings.**



## Reintegration planning

### Expected outcomes:

**Prisoners' resettlement needs are addressed prior to release. An effective multi-agency response is used to meet the specific needs of each individual prisoner in order to maximise the likelihood of successful reintegration into the community.**

**4.31** *Reintegration planning was thorough and most prisoners knew whom to contact for help with resettlement. Prisoners' experience of support with resettlement issues from the information, advice and guidance centre was very poor. The role of peer workers in giving advice and support, including housing, was limited and there was significant room for improvement in education, training and employment support. However, pre-release provision for health care and substance misuse was good and access to help with finance, benefit and debts adequate. Visits provision was good, with regular family days throughout the year. Unmet offending behaviour needs had not been analysed recently.*

**4.32** New prisoners were supported by an induction programme and a pathways programme, and had an initial interview with their offender supervisor leading to the development of their sentence plan. The pathways programme was effective in ensuring that prisoners took responsibility for identifying their resettlement needs and setting targets for themselves. Our survey showed that more prisoners than at other open prisons knew where to go for help with resettlement services. Prisoners granted ROTL could access a wide range of services in the community to receive additional resettlement help.

**4.33** The role of the IAG centre was to help prisoners with accessing resettlement services, including voluntary community placements and paid work. Many prisoners were frustrated by the lack of access to services provided by the IAG, and the quality of the support they received. Staff changes and shortages had led to a poor and uncoordinated service. Workloads were overwhelming for the small number of IAG staff, and many prisoners gave examples of requests not being dealt with or long delays in getting things done. For example, there were a number of prisoners who were assessed as suitable for working out who had been waiting a long time for suitable placements to be found. We saw many prisoners approaching the OMU case administrators for information and help instead of attending the IAG centre (see below). The case administrators adopted a proactive role and were helpful to prisoners.

**4.34** One peer worker acted as a receptionist in the IAG centre but his role was unclear and not yet fully developed. There was no cover for when he was absent and he was not fully supported by access to computer equipment such as a printer.

### Recommendation

**4.35** **Managers should consult prisoners on the reasons for a perceived decline in access to resettlement help within the prison, and act on any findings.** (Repeated recommendation 9.9)

**4.36** **Prisoners should be encouraged and supported in resettlement peer worker roles and their role in the IAG centre should be clarified and expanded, with appropriate access to relevant computer equipment to enable them to do their job.**

## Accommodation

- 4.37** The demand on finding accommodation was relatively low as many prisoners went to approved premises on release. No prisoners in the previous year had been released without an address to go to.
- 4.38** One officer in the IAG centre focused on housing issues but did not have any formal accredited qualification for this work. The role of two peer workers was new and had not yet been fully established, but they had recently completed the Shelter training to enable them to give basic housing advice.

## Recommendation

- 4.39** **The accommodation worker should receive formal accredited training for the role.** (Repeated recommendation 9.36)

## Housekeeping point

- 4.40** Housing advice peer workers should be fully trained and supported in their role and their posts should be fully established.

## Education, training and employment

- 4.41** The prison had a few good arrangements for supporting prisoners to train with providers outside of the prison, including the Timpson Academy, but overall the IAG resettlement team had insufficient links with organisations that could provide voluntary work experience or paid work, and as a result only 17 prisoners (about two-thirds of those eligible) had voluntary work placements. Many placements were for just one or two days a week, providing limited experience. Only 16 prisoners, half of those eligible, had paid work outside the prison and 19 worked on a very part-time basis on supervised projects outside the prison (see main recommendation S47). Opportunities to study outside the prison were good and the prison provided good support for prisoners to find funding and apply for courses.
- 4.42** Prisoners eligible for ROTL were able to go to the local Jobcentre Plus to seek advice and help with searching for a post-release job. There was little other structured support and no access to the internet or virtual campus (internet access for prisoners to community education, training and employment opportunities) on site. At the end of their sentence, three-quarters of prisoners were released into employment, training or education. This was much lower than at the time of the previous inspection but still a reasonably good achievement.
- 4.43** The National Careers Service was promoted well and provided an appropriate level of advice and support. Its work to help prisoners find funding for external training was effective. However, there was no cover for planned absence. Prisoners were able to develop CV writing and interview skills and were helped with disclosure and applications through a pre-employment course. However, the quality of many prisoners' CV was very poor. Overall, the National Careers Service provision required improvement.

## Recommendation

- 4.44** Effective and structured job search should be provided for prisoners who are eligible for paid work.

## Housekeeping points

- 4.45** Cover should be available for planned absence of National Career Service staff.
- 4.46** All prisoners should have a current, high-quality CV that meets employer expectations.

## Health care

- 4.47** Health care arrangements before release were effective and included appropriate liaison with community services. Prisoners received a pre-release health assessment and were given a discharge letter to give to their GP. All prisoners on medication were discharged with at least seven days' supply.

## Drugs and alcohol

- 4.48** Prisoners' access to ROTL to attend community-based 12-step fellowships had been suspended because of prisoners abusing the ROTL process and not attending meetings. However, Alcoholics Anonymous meetings were available in the prison, led by external facilitators.
- 4.49** Links with Kent and London drug intervention programmes were good, with regular meetings between prison and community service managers contributing to improvements in service planning and provision for prisoners on release.
- 4.50** The Rehabilitation of Addicted Prisoners Trust (RAPt) provided a nationally coordinated 'meet and greet' service, transporting newly released prisoners to safe locations and agencies.

## Finance, benefit and debt

- 4.51** The previous Citizens Advice contract had ended but prisoners could open bank accounts and access money-management training through the education department. They also had access to a telephone debt advice line and could attend agencies on ROTL, including Unlock (the national charity for people with convictions) to access more advice.

## Children, families and contact with the outside world

- 4.52** There was no visitors centre but a small waiting room was available in the gate building, and the prison ran an on-request bus service from the local railway station for visitors using public transport. Details of support agencies were freely available in the waiting room and in the main visits room.
- 4.53** Visits were available at weekends and on Wednesday afternoons. The visits hall was clean and comfortable. Staff interaction with prisoners and their families was informal and respectful. Visitors told us about helpful gate and visits staff who made them feel welcome.

There was a small tea bar, run by a prisoner orderly, where visitors could buy hot and cold drinks and a range of confectionary. A small (unsupervised) play area was available. An outside area with picnic tables was available for use in good weather and was very popular with visitors.

- 4.54** There was no need for a visits booking line as visits were booked by the prisoner, who then informed visitors of the date and time of the visit and gave them a reference number to present at the gate. Most prisoners chose to take their visits in the community, which meant that there was no restriction on the number of visits that those not entitled to ROTL could have.
- 4.55** For eligible prisoners, ROTL was well used to enhance family contact through home leave and town visits. Regular themed family days were run throughout the year, with priority given to prisoners not yet entitled to town visits. The library ran the Storybook Dads project (in which prisoners record stories for their children) but, despite being well advertised, use was limited. The previously run parenting course was no longer offered by the education provider.

### Attitudes, thinking and behaviour

- 4.56** Although many prisoners had completed accredited programmes before their arrival at the establishment, the most recent needs analysis, dated 2011, showed that 42% had remaining needs in relation to offending behaviour. The lack of a recent needs analysis made it impossible to determine the current level of unmet need.
- 4.57** The seconded probation officer was skilled in working with high risk of harm prisoners and had worked with about 18 prisoners over the previous year. This work was appropriately tailored to needs, including victim empathy, relationships and thinking skills. However, it was not part of a formal strategy and was over-reliant on the good will of one member of staff.
- 4.58** There were no accredited offending behaviour programmes available at the prison but we were told that prisoners could access the thinking skills programme and a violent offender programme through the local probation trust. Access to other, more specialist programmes was more difficult, requiring prisoners to do these in their home area or on release.

### Recommendation

- 4.59** **A current needs analysis should evidence the type and range of offending behaviour work required and a formal strategy should be developed to address this.**

## Section 5. Summary of recommendations and housekeeping points

The following is a listing of repeated and new recommendations, housekeeping points 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, and in the previous report where recommendations have been repeated.

### Main recommendations

To the governor

- 5.1 The National Offender Management Service should reassess the resources required by Blantyre House and other open prisons to ensure they are adequate to manage the complex rehabilitation needs of greater numbers of indeterminate sentence prisoners progressing towards release from sentences for serious offences. (S45)
- 5.2 The prison should have a multidisciplinary approach to tackling substance misuse and an effective supply reduction policy and action plan to coordinate supply reduction activities. (S46)
- 5.3 The quantity of high-quality internal learning and skills and work activity should be increased so that all prisoners are purposefully occupied during the working day. (S47)
- 5.4 Prisoners should be supported to progress and find voluntary and paid work in the community. There should be sufficient voluntary and work placements to meet the needs of all eligible prisoners. (S48)
- 5.5 Public protection arrangements should be improved and include multi-agency planning to manage the risk posed by prisoners released on temporary licence. (S49)

### Recommendations

To the governor

#### Early days in custody

- 5.6 Lockable cabinets should be provided for prisoners in shared accommodation. (1.10)

#### Self-harm and suicide

- 5.7 All staff should be trained in at least basic assessment, care in custody and teamwork (ACCT) procedures. (1.24, repeated recommendation 3.11)
- 5.8 Discussions with the Samaritans should be pursued so that an appropriate service can be provided in the prison and prisoners have access to a formal Listener service. (1.25)

#### Safeguarding

- 5.9 The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (1.30)

## Security

- 5.10** The drug and alcohol strategy should be informed by a comprehensive needs analysis and contain performance measures and an annual action plan. (1.41, repeated recommendation 9.48)

## Substance misuse

- 5.11** Group-work sessions should be provided as part of the Rehabilitation of Addicted Prisoners Trust (RAPt) services. (1.57)

## Staff-prisoner relationships

- 5.12** Personal officers should attend sentence planning boards and other relevant meetings to discuss the progress of the prisoners in their care. (2.12, repeated recommendation 2.22)

## Equality and diversity

- 5.13** The local equality and diversity strategy and action plan should be based on an assessment of the needs of the population at Blantyre House, and should include active use of discrimination incident report forms and ethnic monitoring processes. (2.20)
- 5.14** Forums for specific protected groups should be established. (2.21)
- 5.15** Fully adapted rooms, toilets and shower facilities should be available. (2.28)
- 5.16** Retirement pay should be sufficient for those who do not have another source of income. (2.29)

## Complaints

- 5.17** All complaints should be answered respectfully, and any alleging discrimination should be processed as diversity incidents. (2.40)

## Health services

- 5.18** There should be a current health delivery plan, informed by an up-to-date health needs assessment, and health services staff should have access to a full range of policies that accurately reflect the prison environment. (2.52)
- 5.19** There should be systematic health promotion throughout the prison, overseen by a prison health promotion action group and which includes prisoner representation. (2.53)
- 5.20** The governor should ensure that there are agreed health emergency response codes in use and that prisoners requiring emergency first aid out of hours have prompt access to appropriately trained staff and well-maintained equipment which is regular checked and documented. (2.54)
- 5.21** Risk assessments should be completed for every prisoner and filed so that the prescriber can see them. (2.70, repeated recommendation 5.47)
- 5.22** The dental surgery should be refurbished, to comply with dental regulation HTMI-05. (2.77)

- 5.23** Discipline staff should have mental health awareness training to recognise and take appropriate action when a prisoner has mental health problems. (2.83)

### Catering

- 5.24** Prisoners should be able to self-cater. (2.88)

### Purchases

- 5.25** All prisoners, including those arriving from privately run prisons, should be offered an advance of up to one week's pay, to use in the prison shop, with repayment staged over a period of time. (2.95, repeated recommendation 8.22)

### Learning and skills and work activities

- 5.26** A comprehensive needs analysis should be undertaken to inform the planning of education, vocational training and work opportunities. (3.11)
- 5.27** Prisoners should attend their allocated place of work on time and remain sufficiently occupied throughout the working day. (3.12)
- 5.28** All prisoners should receive appropriately timely information, advice and guidance. (3.18)
- 5.29** The number of prisoners participating in vocationally accredited training should be significantly increased. (3.19)
- 5.30** Prisoners should be able to gain accredited qualifications in industrial cleaning and peer working. (3.20)
- 5.31** The planning of individualised learning, and target setting should be improved. (3.25)

### Physical education and healthy living

- 5.32** The shortfalls in facility use and staffing levels should be addressed to increase the proportion of prisoners using the gym and gaining accredited qualifications. (3.36)

### Strategic management of resettlement

- 5.33** The resettlement strategy should be based on a comprehensive needs analysis and include the role of the offender management unit. The strategy should be supported by an action plan which is regularly reviewed and updated. (4.6)
- 5.34** There should be a staff supervision policy and an associated training and development plan specifically for offender management unit staff. (4.7, repeated recommendation 9.8)

### Offender management and planning

- 5.35** Offender supervisors should have regular and structured contact with prisoners which is focused on the risk of harm and reducing reoffending. (4.17)
- 5.36** The quality of offender assessment system (OASys) assessments and plans should be further improved and a risk management plan for release on temporary licence should be included. (4.18)

- 5.37** Offender supervisors should receive training to improve their confidence in attending and contributing to parole hearings. (4.30)

### Reintegration planning

- 5.38** Managers should consult prisoners on the reasons for a perceived decline in access to resettlement help within the prison, and act on any findings. (4.35, repeated recommendation 9.9)
- 5.39** Prisoners should be encouraged and supported in resettlement peer worker roles and their role in the IAG centre should be clarified and expanded, with appropriate access to relevant computer equipment to enable them to do their job. (4.36)
- 5.40** The accommodation worker should receive formal accredited training for the role. (4.39, repeated recommendation 9.36)
- 5.41** Effective and structured job search should be provided for prisoners who are eligible for paid work. (4.44)
- 5.42** A current needs analysis should evidence the type and range of offending behaviour work required and a formal strategy should be developed to address this. (4.59)

## Housekeeping points

### Early days in custody

- 5.43** Night staff should routinely introduce themselves to newly arrived prisoners. (1.11)
- 5.44** Completion of induction should be monitored. (1.12)

### Self-harm and suicide

- 5.45** Initial learning points from the death in custody should be formally recorded and communicated to staff. (1.26)

### Security

- 5.46** Searches should be centrally recorded to evidence their effectiveness. (1.42)

### Substance misuse

- 5.47** The peer supporter scheme should be expanded to include support for those with substance use issues, and include a formalised programme of training and supervision. (1.58)

### Staff-prisoner relationships

- 5.48** Personal officers should introduce themselves to prisoners within one week of arrival. (2.13)



## Equality and diversity

- 5.49** Foreign national prisoners should be able to access independent immigration advice easily. (2.30)
- 5.50** Mentors should be paid for their support to others with disabilities. (2.31)

## Faith and religious activity

- 5.51** The chaplaincy should be involved in all key prison committees and support resettlement planning (2.36, repeated recommendation 3.34)

## Health services

- 5.52** There should be regular dedicated health care service user consultation. (2.54)
- 5.53** Nurses should have access to regular recorded formal clinical supervision. (2.55)
- 5.54** Paper clinical records should be securely stored in line with Caldicott principles. (2.56)
- 5.55** A senior nurse should have strategic responsibility for older prisoners, including access to national screening programmes and a senior nurse lead member of staff. (2.57)
- 5.56** The system for complaints about health services should be clear and ensure that medical confidentiality is maintained. (2.58)
- 5.57** There should be an accurate life-long conditions register and all prisoners on it should receive regular reviews which generate an evidence-based care plan. (2.64)
- 5.58** There should be standard operating procedures covering all aspects of medicines management. (2.71)
- 5.59** Old reference books should be discarded, and only the most recent copy should be kept. (2.72)
- 5.60** There should be weekly recorded checks of the controlled drug balances. (2.73)

## Catering

- 5.61** All prisoners should have access to a hot meal every day. (2.89)
- 5.62** Prisoners should be able easily to identify which foods are halal. (2.90)

## Purchases

- 5.63** Prisoners should not be charged an administration fee on catalogue orders. (2.94)

## Physical education and healthy living

- 5.64** The cardiovascular exercise equipment should be repaired and properly maintained, and the room should be better ventilated and available during the day. (3.37)

### **Strategic management of resettlement**

- 5.65** Formal links between information, advice and guidance (IAG) and offender management unit staff should be improved. (4.8)

### **Offender management and planning**

- 5.66** Offender supervisors should make initial contact within 10 days of the prisoner's arrival. (4.19)
- 5.67** The quality of completed recategorisation paperwork should be improved. (4.26)

### **Reintegration planning**

- 5.68** Housing advice peer workers should be fully trained and supported in their role and their posts should be fully established. (4.40)
- 5.69** Cover should be available for planned absence of National Career Service staff. (4.45)
- 5.70** All prisoners should have a current, high-quality CV that meets employer expectations. (4.46)

## Section 6. Appendices

### Appendix I: Inspection team

Nick Hardwick	Chief inspector
Alison Perry	Team leader
Sandra Fieldhouse	Inspector
Paul Rowlands	Inspector
Andrew Rooke	Inspector
Jeanette Hall	Inspector
Gemma Quayle	Researcher
Joe Simmonds	Researcher

#### **Specialist inspectors**

Paul Roberts	Substance misuse inspector
Majella Pearce	Health services inspector
Helen Jackson	Pharmacist
Liz Wands-Murray	CQC inspector
Phil Romain	Ofsted inspector
Nigel Bragg	Ofsted inspector
Jon Nason	Offender management inspector
Ian Simpkins	Offender management inspector
Lisa Clarke	Offender management inspector



## Appendix II: Progress on recommendations from the last report

The following is a summary of the main findings from the last report and a list of all the recommendations made, organised under the four tests of a healthy prison. The reference numbers at the end of each recommendation refer to the paragraph location in the previous report. If a recommendation has been repeated in the main report, its new paragraph number is also provided.

### Safety

#### **Prisoners, particularly the most vulnerable, are held safely.**

*At the last inspection, in 2010, the reception process was efficient, but all arriving prisoners were routinely strip searched. Induction was thorough and effective, and linked to an overall resettlement approach. There was little evidence of bullying and prisoners said that they felt safe. Not all staff had been trained in assessment, care in custody and teamwork (ACCT) procedures. Security was generally proportionate and prisoners were only returned to closed conditions for legitimate reasons. There had been no recent use of force. There was little evidence of illicit substance use. Outcomes for prisoners against this healthy prison test were good.*

#### **Main recommendations**

Managers should draw up and implement protocols for the management of risk in relation to visits by female prisoners. (HP39)

**Achieved**

#### **Recommendations**

Prisoners should receive comfort breaks every 2.5 hours during escort journeys. (1.4)

**Achieved**

Prisoners being transferred to the establishment should not be handcuffed unless indicated by documented risk assessment. (1.5)

**Achieved**

Prisoners should not be routinely strip-searched on reception to the establishment. (1.13)

**Achieved**

The self-harm and suicide policy should be reviewed, to reduce duplication and produce a more succinct and useable document. (3.10)

**Achieved**

All staff should be trained in at least basic assessment, care in custody and teamwork (ACCT) procedures. (3.11)

**Partially achieved** (recommendation repeated, 1.24)

Night staff should be kept up to date with defibrillator training. (3.12)

**Partially achieved**

## Respect

### **Prisoners are treated with respect for their human dignity.**

*At the last inspection, in 2010, the floors in some of the communal residential areas were in poor condition but rooms were well kept. Staff–prisoner relationships were good and personal officers helpful. Prisoners were generally content with the quality of food, and the shop provided a reasonable service. Diversity was well managed, although Muslim prisoners had poorer perceptions, especially in relation to staff engagement. Prisoners with disabilities were identified and well cared for. Faith provision was good, although the chaplaincy was under-staffed. Replies to complaints were prompt and polite. Health services were good. Outcomes for prisoners against this healthy prison test were good.*

### **Recommendations**

Floors in the residential units should be deep cleaned, repaired or refurbished as necessary. (2.10)

**Achieved**

The residential areas should be redecorated. (2.11)

**Achieved**

History sheet entries should be regular and reflect discussion with prisoners. (2.17)

**Achieved**

Personal officers should see prisoners promptly after reception and at least every two weeks thereafter, recording their discussions. (2.21)

**Partially achieved**

Personal officers should attend sentence planning boards and other relevant meetings to discuss the progress of the prisoners in their care. (2.22)

**Not achieved** (recommendation repeated, 2.12)

Prisoners should not be threatened with discipline charges for making a complaint. The complaints policy should omit references to discipline. (3.21)

**Achieved**

Prisoners should be able to consult their legal representatives in private. (3.29)

**Achieved**

The chaplaincy should be involved in all key prison committees and support resettlement planning, when its new staff have been recruited. (3.34)

**Partially achieved** (recommendation repeated as a housekeeping point, 2.36)

The diversity meeting should be chaired by the governing governor or deputy governor, and a wide range of departments should consistently be represented at it. (4.7)

**Partially achieved**

Prisoner representatives should be able to attend all meetings at which diversity issues affecting their own prison will be discussed. (4.8)

**Achieved**

All staff should receive training in all aspects of diversity. (4.9)

**Achieved**

Active links should be established with diversity-related organisations in the community, including visits to the establishment by them. (4.10)

**Not achieved.**

Managers should investigate the reasons behind the more negative perceptions of black and minority ethnic prisoners evident from our survey, and take remedial action if necessary. (4.19)

**Partially achieved**

Categories within release on temporary licence (ROTL), including paid work, should be subject to ethnic monitoring. (4.20)

**Not achieved**

All racist incident investigations should be checked by a representative of an appropriate external organisation. (4.21)

**Not achieved**

Secure boxes for racist incident report forms should be provided in the residential area, with a supply of forms next to them. (4.22)

**Achieved**

The diversity team should work with prisoners to promote a regular programme of cultural events celebrating diversity. (4.23)

**Partially achieved**

Monitoring by religion, and specific consultation with Muslim prisoners, should be undertaken in order to resolve issues raised by the negative perceptions revealed in the survey. (4.27)

**Partially achieved**

All prisoners who need them should have a care plan. (4.40)

**Not achieved**

The shower room and toilet on the south wing should be fully functional and accessible for those using a wheelchair and those with mobility problems. (4.41)

**Not achieved**

Dedicated rooms adapted for use by prisoners with disabilities should be available. These rooms should be accessible to wheelchairs. (4.42)

**Not achieved**

There should be a functioning carer/mentor scheme for prisoners with a disability. (4.43)

**Partially achieved**

Personal emergency and evacuation plans should be held in the house office and be kept up to date. (4.44)

**Not achieved**

Older prisoners should be consulted on their specific needs and remedial action taken as necessary. (4.45)

**Not achieved**

There should be a formal secondary health assessment. (5.33)

**Achieved**

There should be routine monitoring of equity of access for prisoners. (5.34)

**No longer relevant**

Risk assessments should be completed for every prisoner and filed so that the prescriber can see them. (5.47)

**Not achieved** (recommendation repeated, 2.70)

There should be oral health promotion available for all prisoners. (5.60)

**Achieved**

The dentist should make and record appropriate soft tissue and periodontal checks. (5.61)

**Achieved**

The dentist should be fully informed of the location and use of the resuscitation equipment, including training as appropriate. (5.62)

**Achieved**

Prisoners should have access to an appropriate range of primary mental health interventions, including counselling. (5.70)

**Achieved**

The open drains in the kitchen should be removed. (8.11)

**Not achieved**

Grab bags for outworkers should contain food which is fresh, nutritious and flavoursome. (8.12)

**Partially achieved**

Managers should ensure that all prisoners can easily access drinking water at night. (8.13)

**Achieved**

A broader range of goods should be made available in the shop after consultation with prisoners. (8.21)

**Achieved**

All prisoners, including those arriving from privately run prisons, should be offered an advance of up to one week's pay, to use in the prison shop, with repayment staged over a period of time. (8.22)

**Not achieved** (recommendation repeated, 2.95)

## Purposeful activity

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

*At the last inspection, in 2010, there was sufficient good quality purposeful activity for most prisoners. There were effective links with employers. Vocational training was of high quality and success rates for prisoners were high. The library provided a good service. PE provision was good, but there were inadequate staff cover arrangements. Indoor association facilities were limited. Outcomes for prisoners against this healthy prison test were good.*

## Main recommendations

Education provision should include cooking for resettlement, to support prisoners' independent living and family integration skills. (HP40)

**Not achieved**



Accredited training should be extended to all prison work areas, and non-accredited skills should be recognised and recorded. (HP41)

**Not achieved**

### **Recommendations**

Managers should further increase the training for and use of peer mentors across learning and skills activities. (6.27)

**Partially achieved**

Managers should address delays in the police checking process for prisoners with relevant police services. (6.28)

**Achieved**

Individual risk assessment should determine the use of appropriate paid work opportunities. (6.29)

**Achieved**

Security relating to prisoner access to the orchard should be reviewed and work opportunities introduced on the site, to encourage self-sufficiency skills and promote sustainability. (6.30)

**Partially achieved**

The location and use of the main gym should be reviewed, to offer efficient use of facilities. (6.41)

**Not achieved**

The ageing equipment in the main gym should be replaced as soon as possible; in the meantime, it should be monitored carefully and its use should be limited. (6.42)

**Not achieved**

Managers should ensure that there are sufficient PE instructors to cover for notified staff absence. (6.43)

**Not achieved**

Sports and games training should be provided for prisoners and prison staff. (6.44)

**Not achieved**

The management of PE should be improved to ensure that quality improvements are implemented. (6.45)

**Not achieved**

PE courses relating to health promotion should be introduced. (6.46)

**Achieved**

Association facilities in the house should be sufficient to meet the needs of all prisoners. (6.53)

**Achieved**

## Resettlement

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

*At the last inspection, in 2010, there was good strategic management of resettlement, and a whole-prison approach. There was good use of temporary release to support resettlement objectives. Offender management was comprehensive and planning was good. Public protection arrangements were sound. There was some useful provision in the resettlement pathways, but insufficient use of peer advice work. Support for those with substance use problems was effective. Visits arrangements were good and there was effective work to promote family links. Outcomes for prisoners against this healthy prison test were good.*

### Recommendations

There should be a staff supervision policy and an associated training and development plan for offender management unit staff. (9.8)

**Not achieved** (recommendation repeated, 4.7)

Managers should consult prisoners on the reasons for a perceived decline in access to resettlement help within the prison, and act on any findings. (9.9)

**Not achieved** (recommendation repeated, 4.35)

Risk management plans should be sufficiently comprehensive in all cases and should be communicated to relevant staff. (9.28)

**Not achieved**

The accommodation worker should receive formal accredited training for the role. (9.36)

**Not achieved** (recommendation repeated, 4.39)

Managers should establish a system for training and using prisoners as peer mentors on housing issues. (9.37)

**Partially achieved**

The drug strategy team should develop its links with local community agencies and planning bodies. (9.47)

**Achieved**

Drug and alcohol strategy policies should be informed by a comprehensive needs analysis and contain performance measures and an annual action plan. (9.48,)

**Not achieved** (recommendation repeated, 1.41)

The remit of the CARAT service should include work with prisoners whose primary problem is alcohol. (9.49)

**Achieved**

## Appendix III: Prison population profile

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

Status	18–20-year-olds	21 and over	%
Sentenced		122	100
Recall			
Convicted unsentenced			
Remand			
Civil prisoners			
Detainees			
<b>Total</b>		<b>122</b>	<b>100</b>

Sentence	18–20-year-olds	21 and over	%
Unsentenced			
Less than six months			
six 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		18	14.8
10 years and over (not life)		20	16.4
ISPP (indeterminate sentence for public protection)		39	32
Life		45	37
<b>Total</b>		<b>122</b>	<b>100</b>

Age	Number of prisoners	%
Please state minimum age here:		
Under 21 years		
21 years to 29 years	24	19.7
30 years to 39 years	30	24.6
40 years to 49 years	36	29.5
50 years to 59 years	24	19.7
60 years to 69 years	7	5.7
70 plus years	1	0.8
Please state maximum age here:	72	
<b>Total</b>	<b>122</b>	<b>100</b>

Nationality	18–20-year-olds	21 and over	%
British		119	97.5
Foreign nationals		3	2.5
<b>Total</b>		<b>122</b>	<b>100</b>

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced		0	0
Uncategorised sentenced		0	0
Category A		0	0
Category B		0	0
Category C		11	9

Category D		111	91
Other			
<b>Total</b>		<b>122</b>	<b>100</b>

<b>Ethnicity</b>	<b>18–20-year-olds</b>	<b>21 and over</b>	<b>%</b>
White			
British		78	63.9
Irish		4	3.3
Gypsy/Irish Traveller		0	0
Other white		6	4.9
<b>Total</b>		<b>88</b>	<b>72.1</b>
Mixed			
White and black Caribbean		1	0.8
White and black African		0	0
White and Asian		0	0
Other mixed		2	1.6
<b>Total</b>		<b>3</b>	<b>2.5</b>
Asian or Asian British			
Indian		2	1.6
Pakistani		3	2.5
Bangladeshi			
Chinese			
Other Asian		2	1.6
<b>Total</b>		<b>7</b>	<b>5.7</b>
Black or black British			
Caribbean		18	14.8
African			
Other black		4	3.3
<b>Total</b>		<b>22</b>	<b>18</b>
Other ethnic group		0	0
Arab		0	0
Other ethnic group		0	0
Not stated		2	1.6
<b>Total</b>		<b>122</b>	<b>100</b>

<b>Religion</b>	<b>18–20-year-olds</b>	<b>21 and over</b>	<b>%</b>
Baptist			
Church of England		40	32.8
Roman Catholic		23	18.9
Other Christian denominations		7	5.7
Muslim		14	11.5
Sikh		2	1.6
Hindu		1	0.8
Buddhist		6	4.9
Jewish		0	0
Other		2	1.6
No religion		27	22.1
<b>Total</b>		<b>122</b>	<b>100</b>

<b>Other demographics</b>	<b>18–20-year-olds</b>	<b>21 and over</b>	<b>%</b>
Veteran (ex-armed services)			Not supplied
<b>Total</b>			

**Sentenced prisoners only**

<b>Length of stay</b>	<b>18–20-year-olds</b>		<b>21 and over</b>	
	<b>Number</b>	<b>%</b>	<b>Number</b>	<b>%</b>
Less than 1 month			9	7.4
1 month to 3 months			21	17.2
3 months to six months			25	20.5
6 months to 1 year			32	26.2
1 year to 2 years			31	25.4
2 years to 4 years			4	3.3
4 years or more				
<b>Total</b>			<b>122</b>	<b>100</b>

**Sentenced prisoners only**

	<b>18–20-year-olds</b>	<b>21 and over</b>	<b>%</b>
Foreign nationals detained post sentence expiry	0	0	0
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions).	0	41	33.6
<b>Total</b>		<b>41</b>	<b>33.6</b>

**Unsentenced prisoners only**

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

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



## Appendix IV: Summary of prisoner questionnaires and interviews

### Prisoner survey methodology

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

### Sampling

The prisoner survey was conducted on a representative sample of the prison population. Using a robust statistical formula provided by a government department statistician we calculated the sample size required to ensure that our survey findings reflected the experiences of the entire population of the establishment. Respondents were then randomly selected from a P-Nomis prisoner population printout using a stratified systematic sampling method. We also ensured that the proportion of black and minority ethnic prisoners in the sample reflected the proportion in the prison as a whole.

### Distributing and collecting questionnaires

Every attempt was made to distribute the questionnaires to respondents individually. This gave researchers an opportunity to explain the purpose of the survey and to answer respondents' questions. We also stressed the voluntary nature of the survey and provided assurances about confidentiality and the independence of the Inspectorate. This information is also provided in writing on the front cover of the questionnaire.

Our questionnaire is available in a number of different languages and via a telephone translation service for respondents who do not read English. Respondents with literacy difficulties were offered the option of an interview.

Respondents were not asked to put their names on their questionnaire. In order to ensure confidentiality, respondents were asked to seal their completed questionnaire in the envelope provided and either hand it back to a member of the research team at a specified time or leave it in their room for collection.

Refusals were noted and no attempts were made to replace them.

### Survey response

At the time of the survey on 9 September 2013, the prisoner population at HMP Blantyre House was 118. Questionnaires were distributed to all 118 prisoners.

We received a total of 85 completed questionnaires, a response rate of 72%. No questionnaires were completed via interview. Six respondents refused to complete a questionnaire, 16 questionnaires were not returned and 11 were returned blank.

<b>Wing/unit</b>	<b>Number of completed survey returns</b>
North	4
South	17
East	29
West	35

## Presentation of survey results and analyses

Over the following pages we present the survey results for HMP Blantyre House.

First a full breakdown of responses is provided for each question. In this full breakdown all percentages, including those for filtered questions, refer to the full sample. Percentages have been rounded and therefore may not add up to 100%.

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant differences are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in prisoners' background details.

Filtered questions are clearly indented and preceded by an explanation of how the filter has been applied. Percentages for filtered questions refer to the number of respondents filtered to that question. For all other questions, percentages refer to the entire sample. All missing responses have been excluded from analyses.

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

The following comparative analyses are presented:

- The current survey responses from HMP Blantyre House in 2013 compared with responses from prisoners surveyed in all other open prisons. This comparator is based on all responses from prisoner surveys carried out in 15 open prisons since April 2008.
- The current survey responses from HMP Blantyre House in 2013 compared with the responses of prisoners surveyed at HMP Blantyre House in 2010.
- A comparison within the 2013 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2013 survey between those who are aged 50 and over and those under 50.



## Survey summary

### Section I: About You

<b>Q1.2</b>	<b>How old are you?</b>		
	<i>Under 21</i>		0 (0%)
	<i>21 - 29</i>		18 (22%)
	<i>30 - 39</i>		14 (17%)
	<i>40 - 49</i>		22 (27%)
	<i>50 - 59</i>		22 (27%)
	<i>60 - 69</i>		5 (6%)
	<i>70 and over</i>		1 (1%)
<b>Q1.3</b>	<b>Are you on recall?</b>		
	Yes		2 (3%)
	No		78 (98%)
<b>Q1.4</b>	<b>How long is your sentence?</b>		
	<i>Less than 6 months</i>		1 (1%)
	<i>6 months to less than 1 year</i>		0 (0%)
	<i>1 year to less than 2 years</i>		0 (0%)
	<i>2 years to less than 4 years</i>		1 (1%)
	<i>4 years to less than 10 years</i>		11 (14%)
	<i>10 years or more</i>		12 (15%)
	<i>IPP (indeterminate sentence for public protection)</i>		18 (23%)
	<i>Life</i>		35 (45%)
<b>Q1.5</b>	<b>Are you a foreign national? (i.e. do not have UK citizenship)</b>		
	Yes		1 (1%)
	No		82 (99%)
<b>Q1.6</b>	<b>Do you understand spoken English?</b>		
	Yes		83 (100%)
	No		0 (0%)
<b>Q1.7</b>	<b>Do you understand written English?</b>		
	Yes		84 (100%)
	No		0 (0%)
<b>Q1.8</b>	<b>What is your ethnic origin?</b>		
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	63 (77%)	<i>Asian or Asian British - Chinese</i> 0 (0%)
	<i>White - Irish</i>	1 (1%)	<i>Asian or Asian British - other</i> 1 (1%)
	<i>White - other</i>	1 (1%)	<i>Mixed race - white and black Caribbean</i> 3 (4%)
	<i>Black or black British - Caribbean</i>	7 (9%)	<i>Mixed race - white and black African</i> 0 (0%)
	<i>Black or black British - African</i>	1 (1%)	<i>Mixed race - white and Asian</i> 0 (0%)
	<i>Black or black British - other</i>	1 (1%)	<i>Mixed race - other</i> 1 (1%)
	<i>Asian or Asian British - Indian</i>	0 (0%)	<i>Arab</i> 0 (0%)
	<i>Asian or Asian British - Pakistani</i>	1 (1%)	<i>Other ethnic group</i> 1 (1%)
	<i>Asian or Asian British - Bangladeshi</i>	1 (1%)	

<b>Q1.9</b>	<b>Do you consider yourself to be Gypsy/ Romany/ Traveller?</b>		
	Yes		3 (4%)
	No		78 (96%)
<b>Q1.10</b>	<b>What is your religion?</b>		
	None	21 (26%)	Hindu 1 (1%)
	Church of England	25 (31%)	Jewish 0 (0%)
	Catholic	17 (21%)	Muslim 7 (9%)
	Protestant	1 (1%)	Sikh 1 (1%)
	Other Christian denomination	2 (3%)	Other 1 (1%)
	Buddhist	4 (5%)	
<b>Q1.11</b>	<b>How would you describe your sexual orientation?</b>		
	Heterosexual/ Straight		79 (98%)
	Homosexual/Gay		0 (0%)
	Bisexual		2 (2%)
<b>Q1.12</b>	<b>Do you consider yourself to have a disability? (i.e. do you need help with any long term physical, mental or learning needs)</b>		
	Yes		9 (11%)
	No		74 (89%)
<b>Q1.13</b>	<b>Are you a veteran (ex- armed services)?</b>		
	Yes		3 (4%)
	No		78 (96%)
<b>Q1.14</b>	<b>Is this your first time in prison?</b>		
	Yes		36 (43%)
	No		48 (57%)
<b>Q1.15</b>	<b>Do you have children under the age of 18?</b>		
	Yes		25 (30%)
	No		59 (70%)

## Section 2: Courts, transfers and escorts

<b>Q2.1</b>	<b>On your most recent journey here, how long did you spend in the van?</b>		
	Less than 2 hours		33 (40%)
	2 hours or longer		43 (52%)
	Don't remember		7 (8%)
<b>Q2.2</b>	<b>On your most recent journey here, were you offered anything to eat or drink?</b>		
	My journey was less than two hours		33 (41%)
	Yes		45 (56%)
	No		1 (1%)
	Don't remember		2 (2%)
<b>Q2.3</b>	<b>On your most recent journey here, were you offered a toilet break?</b>		
	My journey was less than two hours		33 (40%)
	Yes		9 (11%)
	No		37 (45%)
	Don't remember		3 (4%)

<b>Q2.4</b>	<b>On your most recent journey here, was the van clean?</b>		
	Yes		63 (77%)
	No		13 (16%)
	Don't remember		6 (7%)
<b>Q2.5</b>	<b>On your most recent journey here, did you feel safe?</b>		
	Yes		72 (87%)
	No		11 (13%)
	Don't remember		0 (0%)
<b>Q2.6</b>	<b>On your most recent journey here, how were you treated by the escort staff?</b>		
	Very well		41 (50%)
	Well		26 (32%)
	Neither		12 (15%)
	Badly		3 (4%)
	Very badly		0 (0%)
	Don't remember		0 (0%)
<b>Q2.7</b>	<b>Before you arrived, were you given anything or told that you were coming here? (please tick all that apply to you.)</b>		
	Yes, someone told me		70 (83%)
	Yes, I received written information		13 (15%)
	No, I was not told anything		5 (6%)
	Don't remember		0 (0%)
<b>Q2.8</b>	<b>When you first arrived here did your property arrive at the same time as you?</b>		
	Yes		80 (95%)
	No		4 (5%)
	Don't remember		0 (0%)

### Section 3: Reception, first night and induction

<b>Q3.1</b>	<b>How long were you in reception?</b>			
	Less than 2 hours		79 (95%)	
	2 hours or longer		2 (2%)	
	Don't remember		2 (2%)	
<b>Q3.2</b>	<b>When you were searched, was this carried out in a respectful way?</b>			
	Yes		75 (91%)	
	No		4 (5%)	
	Don't remember		3 (4%)	
<b>Q3.3</b>	<b>Overall, how were you treated in reception?</b>			
	Very well		46 (55%)	
	Well		32 (39%)	
	Neither		4 (5%)	
	Badly		1 (1%)	
	Very badly		0 (0%)	
	Don't remember		0 (0%)	
<b>Q3.4</b>	<b>Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)</b>			
	Loss of property	7 (10%)	Physical health	8 (12%)
	Housing problems	7 (10%)	Mental health	3 (4%)
	Contacting employers	3 (4%)	Needing protection from other prisoners	3 (4%)

Contacting family	5 (7%)	Getting phone numbers	6 (9%)
Childcare	0 (0%)	Other	3 (4%)
Money worries	10 (14%)	<b>Did not have any problems</b>	35 (51%)
Feeling depressed or suicidal	3 (4%)		

<b>Q3.5</b>	<b>Did you receive any help/support from staff in dealing with these problems when you first arrived here?</b>		
	Yes		21 (31%)
	No		11 (16%)
	Did not have any problems		35 (52%)
<b>Q3.6</b>	<b>When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)</b>		
	Tobacco		42 (52%)
	A shower		31 (38%)
	A free telephone call		33 (41%)
	Something to eat		44 (54%)
	PIN phone credit		30 (37%)
	Toiletries/ basic items		27 (33%)
	Did not receive anything		12 (15%)
<b>Q3.7</b>	<b>When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)</b>		
	Chaplain		48 (60%)
	Someone from health services		64 (80%)
	A Listener/Samaritans		15 (19%)
	Prison shop/ canteen		22 (28%)
	Did not have access to any of these		9 (11%)
<b>Q3.8</b>	<b>When you first arrived here, were you offered information on the following? (Please tick all that apply)</b>		
	What was going to happen to you		50 (64%)
	What support was available for people feeling depressed or suicidal		28 (36%)
	How to make routine requests (applications)		42 (54%)
	Your entitlement to visits		42 (54%)
	Health services		55 (71%)
	Chaplaincy		47 (60%)
	Not offered any information		13 (17%)
<b>Q3.9</b>	<b>Did you feel safe on your first night here?</b>		
	Yes		78 (93%)
	No		5 (6%)
	Don't remember		1 (1%)
<b>Q3.10</b>	<b>How soon after you arrived here did you go on an induction course?</b>		
	Have not been on an induction course		7 (8%)
	Within the first week		46 (55%)
	More than a week		25 (30%)
	Don't remember		6 (7%)
<b>Q3.11</b>	<b>Did the induction course cover everything you needed to know about the prison?</b>		
	Have not been on an induction course		7 (8%)
	Yes		53 (63%)
	No		18 (21%)
	Don't remember		6 (7%)

<b>Q3.12</b>	<b>How soon after you arrived here did you receive an education ('skills for life') assessment?</b>	
	<i>Did not receive an assessment</i>	11 (15%)
	<i>Within the first week</i>	16 (22%)
	<i>More than a week</i>	32 (43%)
	<i>Don't remember</i>	15 (20%)

#### Section 4: Legal rights and respectful custody

<b>Q4.1</b>	<b>How easy is it to.....</b>					
		<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult N/A</i>
	<i>Communicate with your solicitor or legal representative?</i>	33 (47%)	23 (33%)	3 (4%)	3 (4%)	1 (1%) 7 (10%)
	<i>Attend legal visits?</i>	21 (33%)	17 (27%)	5 (8%)	5 (8%)	0 (0%) 15 (24%)
<b>Q4.2</b>	<b>Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?</b>					
	<i>Not had any letters</i>					17 (24%)
	<i>Yes</i>					13 (18%)
	<i>No</i>					41 (58%)
<b>Q4.3</b>	<b>Can you get legal books in the library?</b>					
	<i>Yes</i>					40 (54%)
	<i>No</i>					1 (1%)
	<i>Don't know</i>					33 (45%)
<b>Q4.4</b>	<b>Please answer the following questions about the wing/unit you are currently living on:</b>					
		<i>Yes</i>	<i>No</i>	<i>Don't know</i>		
	<i>Are you normally able to have a shower every day?</i>	74 (100%)	0 (0%)	0 (0%)		
	<i>Do you normally receive clean sheets every week?</i>	30 (46%)	24 (37%)	11 (17%)		
	<i>Do you normally get cell cleaning materials every week?</i>	66 (92%)	5 (7%)	1 (1%)		
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	62 (85%)	11 (15%)	0 (0%)		
	<i>If you need to, can you normally get your stored property?</i>	36 (52%)	10 (14%)	23 (33%)		
<b>Q4.5</b>	<b>What is the food like here?</b>					
	<i>Very good</i>					7 (9%)
	<i>Good</i>					25 (33%)
	<i>Neither</i>					12 (16%)
	<i>Bad</i>					17 (23%)
	<i>Very bad</i>					14 (19%)
<b>Q4.6</b>	<b>Does the shop/canteen sell a wide enough range of goods to meet your needs?</b>					
	<i>Have not bought anything yet/ don't know</i>					7 (9%)
	<i>Yes</i>					46 (56%)
	<i>No</i>					29 (35%)
<b>Q4.7</b>	<b>Can you speak to a Listener at any time, if you want to?</b>					
	<i>Yes</i>					33 (39%)
	<i>No</i>					19 (23%)
	<i>Don't know</i>					32 (38%)
<b>Q4.8</b>	<b>Are your religious beliefs respected?</b>					
	<i>Yes</i>					45 (54%)
	<i>No</i>					6 (7%)
	<i>Don't know/ N/A</i>					33 (39%)

<b>Q4.9</b>	<b>Are you able to speak to a Chaplain of your faith in private if you want to?</b>	
	Yes	64 (77%)
	No	4 (5%)
	Don't know/ N/A	15 (18%)
<b>Q4.10</b>	<b>How easy or difficult is it for you to attend religious services?</b>	
	<i>I don't want to attend</i>	19 (23%)
	Very easy	41 (50%)
	Easy	11 (13%)
	Neither	1 (1%)
	Difficult	0 (0%)
	Very difficult	1 (1%)
	Don't know	9 (11%)

### Section 5: Applications and complaints

<b>Q5.1</b>	<b>Is it easy to make an application?</b>	
	Yes	81 (96%)
	No	1 (1%)
	Don't know	2 (2%)
<b>Q5.2</b>	<b>Please answer the following questions about applications (If you have not made an application please tick the 'not made one' option)</b>	
		Not made one    Yes    No
	Are applications dealt with fairly?	5 (6%)    64 (79%)    12 (15%)
	Are applications dealt with quickly (within seven days)?	5 (6%)    69 (88%)    4 (5%)
<b>Q5.3</b>	<b>Is it easy to make a complaint?</b>	
	Yes	46 (56%)
	No	6 (7%)
	Don't know	30 (37%)
<b>Q5.4</b>	<b>Please answer the following questions about complaints (If you have not made a complaint please tick the 'not made one' option)</b>	
		Not made one    Yes    No
	Are complaints dealt with fairly?	58 (70%)    10 (12%)    15 (18%)
	Are complaints dealt with quickly (within seven days)?	58 (73%)    13 (16%)    8 (10%)
<b>Q5.5</b>	<b>Have you ever been prevented from making a complaint when you wanted to?</b>	
	Yes	11 (15%)
	No	64 (85%)
<b>Q5.6</b>	<b>How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?</b>	
	<i>Don't know who they are</i>	14 (18%)
	Very easy	26 (33%)
	Easy	18 (23%)
	Neither	19 (24%)
	Difficult	2 (3%)
	Very difficult	1 (1%)

### Section 6: Relationships with staff

<b>Q6.1</b>	<b>Do most staff treat you with respect?</b>	
	Yes	70 (85%)
	No	12 (15%)

<b>Q6.2</b>	<b>Is there a member of staff you can turn to for help if you have a problem?</b>	
	Yes	70 (84%)
	No	13 (16%)
<b>Q6.3</b>	<b>Has a member of staff checked on you personally in the last week to see how you are getting on?</b>	
	Yes	39 (47%)
	No	44 (53%)
<b>Q6.4</b>	<b>How often do staff normally speak to you during association?</b>	
	<i>Do not go on association</i>	4 (5%)
	<i>Never</i>	13 (16%)
	<i>Rarely</i>	20 (25%)
	<i>Some of the time</i>	17 (21%)
	<i>Most of the time</i>	15 (19%)
	<i>All of the time</i>	12 (15%)
<b>Q6.5</b>	<b>When did you first meet your personal (named) officer?</b>	
	<i>I have not met him/her</i>	4 (5%)
	<i>In the first week</i>	61 (72%)
	<i>More than a week</i>	15 (18%)
	<i>Don't remember</i>	5 (6%)
<b>Q6.6</b>	<b>How helpful is your personal (named) officer?</b>	
	<i>Do not have a personal officer/ I have not met him/ her</i>	4 (5%)
	<i>Very helpful</i>	40 (47%)
	<i>Helpful</i>	20 (24%)
	<i>Neither</i>	10 (12%)
	<i>Not very helpful</i>	8 (9%)
	<i>Not at all helpful</i>	3 (4%)

## Section 7: Safety

<b>Q7.1</b>	<b>Have you ever felt unsafe here?</b>			
	Yes	19 (23%)		
	No	65 (77%)		
<b>Q7.2</b>	<b>Do you feel unsafe now?</b>			
	Yes	4 (5%)		
	No	79 (95%)		
<b>Q7.3</b>	<b>In which areas have you felt unsafe? (Please tick all that apply to you.)</b>			
	<i>Never felt unsafe</i>	65 (78%)	<i>At meal times</i>	5 (6%)
	<i>Everywhere</i>	2 (2%)	<i>At health services</i>	1 (1%)
	<i>Association areas</i>	3 (4%)	<i>Visits area</i>	1 (1%)
	<i>Reception area</i>	2 (2%)	<i>In wing showers</i>	2 (2%)
	<i>At the gym</i>	5 (6%)	<i>In gym showers</i>	1 (1%)
	<i>In an exercise yard</i>	2 (2%)	<i>In corridors/stairwells</i>	7 (8%)
	<i>At work</i>	3 (4%)	<i>On your landing/wing</i>	4 (5%)
	<i>During movement</i>	1 (1%)	<i>In your cell</i>	3 (4%)
	<i>At education</i>	1 (1%)	<i>At religious services</i>	0 (0%)
<b>Q7.4</b>	<b>Have you been victimised by other prisoners here?</b>			
	Yes	18 (22%)		
	No	65 (78%)		

<b>Q7.5</b>	<b>If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)</b>	
	<i>Insulting remarks (about you or your family or friends)</i>	9 (11%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	3 (4%)
	<i>Sexual abuse</i>	1 (1%)
	<i>Feeling threatened or intimidated</i>	12 (14%)
	<i>Having your canteen/property taken</i>	0 (0%)
	<i>Medication</i>	1 (1%)
	<i>Debt</i>	0 (0%)
	<i>Drugs</i>	1 (1%)
	<i>Your race or ethnic origin</i>	1 (1%)
	<i>Your religion/religious beliefs</i>	1 (1%)
	<i>Your nationality</i>	1 (1%)
	<i>Your from a different part of the country than others</i>	1 (1%)
	<i>You are from a traveller community</i>	0 (0%)
	<i>Your sexual orientation</i>	0 (0%)
	<i>Your age</i>	1 (1%)
	<i>You have a disability</i>	0 (0%)
	<i>You were new here</i>	4 (5%)
	<i>Your offence/ crime</i>	3 (4%)
	<i>Gang related issues</i>	1 (1%)
<b>Q7.6</b>	<b>Have you been victimised by staff here?</b>	
	Yes	18 (23%)
	No	61 (77%)
<b>Q7.7</b>	<b>If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)</b>	
	<i>Insulting remarks (about you or your family or friends)</i>	5 (6%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	0 (0%)
	<i>Sexual abuse</i>	0 (0%)
	<i>Feeling threatened or intimidated</i>	7 (9%)
	<i>Medication</i>	1 (1%)
	<i>Debt</i>	0 (0%)
	<i>Drugs</i>	0 (0%)
	<i>Your race or ethnic origin</i>	3 (4%)
	<i>Your religion/religious beliefs</i>	1 (1%)
	<i>Your nationality</i>	1 (1%)
	<i>Your from a different part of the country than others</i>	1 (1%)
	<i>You are from a traveller community</i>	0 (0%)
	<i>Your sexual orientation</i>	0 (0%)
	<i>Your age</i>	0 (0%)
	<i>You have a disability</i>	1 (1%)
	<i>You were new here</i>	1 (1%)
	<i>Your offence/ crime</i>	3 (4%)
	<i>Gang related issues</i>	1 (1%)
<b>Q7.8</b>	<b>If you have been victimised by prisoners or staff, did you report it?</b>	
	Not been victimised	54 (70%)
	Yes	8 (10%)
	No	15 (19%)

### Section 8: Health services

<b>Q8.1</b>	<b>How easy or difficult is it to see the following people?:</b>						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	The doctor	6 (7%)	27 (32%)	37 (44%)	6 (7%)	5 (6%)	3 (4%)
	The nurse	3 (4%)	42 (50%)	35 (42%)	3 (4%)	1 (1%)	0 (0%)



The dentist	9 (11%)	20 (24%)	30 (36%)	15 (18%)	6 (7%)	4 (5%)
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**Q8.2 What do you think of the quality of the health service from the following people?:**

	<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
The doctor	6 (7%)	29 (35%)	28 (34%)	6 (7%)	10 (12%)	3 (4%)
The nurse	1 (1%)	45 (56%)	23 (29%)	5 (6%)	3 (4%)	3 (4%)
The dentist	13 (16%)	32 (40%)	24 (30%)	9 (11%)	0 (0%)	2 (3%)

**Q8.3 What do you think of the overall quality of the health services here?**

<i>Not been</i>	1 (1%)
<i>Very good</i>	38 (47%)
<i>Good</i>	25 (31%)
<i>Neither</i>	8 (10%)
<i>Bad</i>	7 (9%)
<i>Very bad</i>	2 (2%)

**Q8.4 Are you currently taking medication?**

Yes	33 (40%)
No	49 (60%)

**Q8.5 If you are taking medication, are you allowed to keep some/ all of it in your own cell?**

<i>Not taking medication</i>	49 (60%)
<i>Yes, all my meds</i>	28 (34%)
<i>Yes, some of my meds</i>	3 (4%)
<i>No</i>	2 (2%)

**Q8.6 Do you have any emotional or mental health problems?**

Yes	13 (16%)
No	67 (84%)

**Q8.7 Are you being helped/ supported by anyone in this prison? (e.g psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff)**

<i>Do not have any emotional or mental health problems</i>	67 (83%)
Yes	11 (14%)
No	3 (4%)

### Section 9: Drugs and alcohol

**Q9.1 Did you have a problem with drugs when you came into this prison?**

Yes	5 (6%)
No	77 (94%)

**Q9.2 Did you have a problem with alcohol when you came into this prison?**

Yes	11 (13%)
No	71 (87%)

**Q9.3 Is it easy or difficult to get illegal drugs in this prison?**

<i>Very easy</i>	18 (22%)
<i>Easy</i>	12 (14%)
<i>Neither</i>	4 (5%)
<i>Difficult</i>	0 (0%)
<i>Very difficult</i>	3 (4%)
<i>Don't know</i>	46 (55%)

<b>Q9.4</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	Very easy	2 (2%)
	Easy	4 (5%)
	Neither	6 (7%)
	Difficult	6 (7%)
	Very difficult	7 (8%)
	Don't know	58 (70%)
<b>Q9.5</b>	<b>Have you developed a problem with illegal drugs since you have been in this prison?</b>	
	Yes	1 (1%)
	No	81 (99%)
<b>Q9.6</b>	<b>Have you developed a problem with diverted medication since you have been in this prison?</b>	
	Yes	0 (0%)
	No	82 (100%)
<b>Q9.7</b>	<b>Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?</b>	
	Did not / do not have a drug problem	76 (93%)
	Yes	5 (6%)
	No	1 (1%)
<b>Q9.8</b>	<b>Have you received any support or help (for example substance misuse teams for your alcohol problem, whilst in this prison?</b>	
	Did not / do not have an alcohol problem	71 (89%)
	Yes	8 (10%)
	No	1 (1%)
<b>Q9.9</b>	<b>Was the support or help you received, whilst in this prison, helpful?</b>	
	Did not have a problem/ did not receive help	70 (86%)
	Yes	10 (12%)
	No	1 (1%)

### Section 10: Activities

<b>Q10.1</b>	<b>How easy or difficult is it to get into the following activities, in this prison?</b>						
		<i>Don't know</i>	<i>Very Easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	Prison job	3 (4%)	40 (49%)	31 (38%)	4 (5%)	2 (2%)	2 (2%)
	Vocational or skills training	11 (14%)	24 (31%)	26 (34%)	7 (9%)	5 (6%)	4 (5%)
	Education (including basic skills)	8 (10%)	26 (33%)	39 (50%)	3 (4%)	2 (3%)	0 (0%)
	Offending behaviour programmes	23 (30%)	15 (20%)	20 (26%)	10 (13%)	4 (5%)	4 (5%)
<b>Q10.2</b>	<b>Are you currently involved in the following? (Please tick all that apply to you.)</b>						
	Not involved in any of these					11 (14%)	
	Prison job					62 (82%)	
	Vocational or skills training					23 (30%)	
	Education (including basic skills)					22 (29%)	
	Offending behaviour programmes					3 (4%)	
<b>Q10.3</b>	<b>If you have been involved in any of the following, while in this prison, do you think they will help you on release?</b>						
		<i>Not been involved</i>	<i>Yes</i>	<i>No</i>	<i>Don't know</i>		
	Prison job	2 (3%)	25 (36%)	36 (51%)	7 (10%)		
	Vocational or skills training	5 (8%)	38 (62%)	9 (15%)	9 (15%)		
	Education (including basic skills)	5 (8%)	36 (61%)	13 (22%)	5 (8%)		
	Offending behaviour programmes	12 (21%)	23 (40%)	15 (26%)	7 (12%)		

<b>Q10.4</b>	<b>How often do you usually go to the library?</b>	
	<i>Don't want to go</i>	2 (2%)
	<i>Never</i>	7 (9%)
	<i>Less than once a week</i>	16 (20%)
	<i>About once a week</i>	15 (18%)
	<i>More than once a week</i>	42 (51%)
<b>Q10.5</b>	<b>Does the library have a wide enough range of materials to meet your needs?</b>	
	<i>Don't use it</i>	6 (7%)
	<i>Yes</i>	62 (76%)
	<i>No</i>	14 (17%)
<b>Q10.6</b>	<b>How many times do you usually go to the gym each week?</b>	
	<i>Don't want to go</i>	16 (20%)
	<i>0</i>	20 (25%)
	<i>1 to 2</i>	19 (24%)
	<i>3 to 5</i>	21 (27%)
	<i>More than 5</i>	3 (4%)
<b>Q10.7</b>	<b>How many times do you usually go outside for exercise each week?</b>	
	<i>Don't want to go</i>	3 (4%)
	<i>0</i>	4 (5%)
	<i>1 to 2</i>	9 (11%)
	<i>3 to 5</i>	13 (16%)
	<i>More than 5</i>	52 (64%)
<b>Q10.8</b>	<b>How many times do you usually have association each week?</b>	
	<i>Don't want to go</i>	4 (5%)
	<i>0</i>	3 (4%)
	<i>1 to 2</i>	1 (1%)
	<i>3 to 5</i>	3 (4%)
	<i>More than 5</i>	65 (86%)
<b>Q10.9</b>	<b>How many hours do you usually spend out of your cell on a weekday? (Please include hours at education, at work etc)</b>	
	<i>Less than 2 hours</i>	1 (1%)
	<i>2 to less than 4 hours</i>	4 (5%)
	<i>4 to less than 6 hours</i>	2 (3%)
	<i>6 to less than 8 hours</i>	5 (6%)
	<i>8 to less than 10 hours</i>	6 (8%)
	<i>10 hours or more</i>	54 (68%)
	<i>Don't know</i>	7 (9%)

### Section 11: Contact with family and friends

<b>Q11.1</b>	<b>Have staff supported you and helped you to maintain contact with your family/friends while in this prison?</b>	
	<i>Yes</i>	48 (60%)
	<i>No</i>	32 (40%)
<b>Q11.2</b>	<b>Have you had any problems with sending or receiving mail (letters or parcels)?</b>	
	<i>Yes</i>	7 (9%)
	<i>No</i>	74 (91%)

<b>Q11.3</b>	<b>Have you had any problems getting access to the telephones?</b>	
	Yes	4 (5%)
	No	77 (95%)
<b>Q11.4</b>	<b>How easy or difficult is it for your family and friends to get here?</b>	
	<i>I don't get visits</i>	13 (16%)
	Very easy	12 (15%)
	Easy	22 (28%)
	Neither	4 (5%)
	Difficult	13 (16%)
	Very difficult	11 (14%)
	Don't know	5 (6%)

### Section 12: Preparation for release

<b>Q12.1</b>	<b>Do you have a named offender manager (home probation officer) in the probation service?</b>	
	Yes	79 (99%)
	No	1 (1%)
<b>Q12.2</b>	<b>What type of contact have you had with your offender manager since being in prison? (please tick all that apply to you.)</b>	
	<i>Do not have an offender manager/ NA</i>	1 (1%)
	No contact	9 (12%)
	Letter	31 (41%)
	Phone	47 (62%)
	Visit	41 (54%)
<b>Q12.3</b>	<b>Do you have a named offender supervisor in this prison?</b>	
	Yes	78 (98%)
	No	2 (3%)
<b>Q12.4</b>	<b>Do you have a sentence plan?</b>	
	Yes	72 (94%)
	No	5 (6%)
<b>Q12.5</b>	<b>How involved were you in the development of your sentence plan?</b>	
	<i>Do not have a sentence plan</i>	5 (6%)
	Very involved	37 (47%)
	Involved	25 (32%)
	Neither	3 (4%)
	Not very involved	6 (8%)
	Not at all involved	2 (3%)
<b>Q12.6</b>	<b>Who is working with you to achieve your sentence plan targets? (please tick all that apply to you.)</b>	
	<i>Do not have a sentence plan</i>	5 (6%)
	Nobody	17 (22%)
	Offender supervisor	46 (59%)
	Offender manager	40 (51%)
	Named/ personal officer	35 (45%)
	Staff from other departments	26 (33%)

<b>Q12.7</b>	<b>Can you achieve any of your sentence plan targets in this prison?</b>			
	<i>Do not have a sentence plan</i>			5 (6%)
	Yes			65 (81%)
	No			6 (8%)
	<i>Don't know</i>			4 (5%)
<b>Q12.8</b>	<b>Are there plans for you to achieve any of your sentence plan targets in another prison?</b>			
	<i>Do not have a sentence plan</i>			5 (6%)
	Yes			7 (9%)
	No			63 (79%)
	<i>Don't know</i>			5 (6%)
<b>Q12.9</b>	<b>Are there plans for you to achieve any of your sentence plan targets in the community?</b>			
	<i>Do not have a sentence plan</i>			5 (6%)
	Yes			51 (65%)
	No			11 (14%)
	<i>Don't know</i>			12 (15%)
<b>Q12.10</b>	<b>Do you have a needs based custody plan?</b>			
	Yes			11 (14%)
	No			36 (47%)
	<i>Don't know</i>			30 (39%)
<b>Q12.11</b>	<b>Do you feel that any member of staff has helped you to prepare for your release?</b>			
	Yes			40 (50%)
	No			40 (50%)
<b>Q12.12</b>	<b>Do you know of anyone in this prison who can help you with the following on release?: (please tick all that apply to you.)</b>			
		<i>Do not need help</i>	Yes	No
	Employment	15 (19%)	35 (44%)	29 (37%)
	Accommodation	17 (22%)	28 (37%)	31 (41%)
	Benefits	17 (24%)	21 (29%)	34 (47%)
	Finances	19 (26%)	24 (33%)	30 (41%)
	Education	17 (23%)	36 (49%)	20 (27%)
	Drugs and alcohol	20 (28%)	36 (51%)	15 (21%)
<b>Q12.13</b>	<b>Have you been provided with information on the following: (please tick all that apply to you.)</b>			
			Yes	No
	Resettlement day release		62 (79%)	16 (21%)
	Resettlement overnight release		58 (75%)	19 (25%)
<b>Q12.14</b>	<b>Have you had access to the following: (please tick all that apply to you.)</b>			
			Yes	No
	Resettlement day release		56 (71%)	23 (29%)
	Resettlement overnight release		41 (54%)	35 (46%)
	Special purpose leave		24 (37%)	41 (63%)
<b>Q12.15</b>	<b>Please answer the following questions on your preparation for release:</b>			
			Yes	No
	Were you given up to date information about this prison before you came here		39 (48%)	42 (52%)
	Were you helped to prepare for open conditions before you came here (increased responsibility, freedom etc.)		32 (41%)	47 (59%)

Do you feel you have been given a greater responsibility here than when you were in closed conditions	65 (83%)	13 (17%)
Have you been on a preparation for release course	31 (40%)	46 (60%)
Is this prison near your home area or intended release address	47 (61%)	30 (39%)
Have you done anything, or has anything happened to you here that will make you less likely to offend in the future	55 (73%)	20 (27%)

## Main comparator and comparator to last time



### Prisoner survey responses HMP Blantyre House 2013

Prisoner survey responses (missing data have 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.

#### Key to tables

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	Percentages which are not highlighted show there is no significant difference				
<b>Number of completed questionnaires returned</b>		<b>85</b>	<b>1747</b>	<b>85</b>	<b>87</b>
<b>SECTION 1: General information</b>					
1.2	Are you under 21 years of age?	0%	1%	0%	0%
1.3	Are you on recall?	3%	3%	3%	8%
1.4	Is your sentence less than 12 months?	1%	7%	1%	0%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	23%	7%	23%	7%
1.5	Are you a foreign national?	1%	4%	1%	3%
1.6	Do you understand spoken English?	100%	100%	100%	
1.7	Do you understand written English?	100%	99%	100%	
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	21%	25%	21%	36%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	4%	3%	4%	3%
1.1	Are you Muslim?	9%	11%	9%	17%
1.11	Are you homosexual/gay or bisexual?	3%	2%	3%	0%
1.12	Do you consider yourself to have a disability?	11%	11%	11%	9%
1.13	Are you a veteran (ex-armed services)?	4%	7%	4%	
1.14	Is this your first time in prison?	43%	52%	43%	42%
1.15	Do you have any children under the age of 18?	30%	54%	30%	56%
<b>SECTION 2: Transfers and escorts</b>					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	52%	44%	52%	66%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	94%	79%	94%	
2.3	Were you offered a toilet break?	19%	12%	19%	
2.4	Was the van clean?	77%	70%	77%	
2.5	Did you feel safe?	87%	83%	87%	
2.6	Were you treated well/very well by the escort staff?	82%	73%	82%	59%
2.7	Before you arrived here were you told that you were coming here?	84%	77%	84%	
2.7	Before you arrived here did you receive any written information about coming here?	15%	16%	15%	
2.8	When you first arrived here did your property arrive at the same time as you?	95%	94%	95%	84%
<b>SECTION 3: Reception, first night and induction</b>					
3.1	Were you in reception for less than 2 hours?	95%	68%	95%	
3.2	When you were searched in reception, was this carried out in a respectful way?	91%	87%	91%	91%
3.3	Were you treated well/very well in reception?	94%	78%	94%	83%

## Main comparator and comparator to last time

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	When you first arrived:				
3.4	Did you have any problems?	49%	41%	49%	46%
3.4	Did you have any problems with loss of property?	10%	8%	10%	13%
3.4	Did you have any housing problems?	10%	10%	10%	17%
3.4	Did you have any problems contacting employers?	4%	3%	4%	8%
3.4	Did you have any problems contacting family?	7%	12%	7%	10%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	2%	0%	1%
3.4	Did you have any money worries?	15%	11%	15%	15%
3.4	Did you have any problems with feeling depressed or suicidal?	4%	6%	4%	5%
3.4	Did you have any physical health problems?	12%	8%	12%	
3.4	Did you have any mental health problems?	4%	5%	4%	
3.4	Did you have any problems with needing protection from other prisoners?	4%	2%	4%	0%
3.4	Did you have problems accessing phone numbers?	8%	8%	8%	20%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	66%	42%	66%	
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	52%	71%	52%	58%
3.6	A shower?	38%	50%	38%	78%
3.6	A free telephone call?	41%	45%	41%	64%
3.6	Something to eat?	55%	64%	55%	79%
3.6	PIN phone credit?	37%	58%	37%	
3.6	Toiletries/ basic items?	34%	44%	34%	
<b>SECTION 3: Reception, first night and induction continued</b>					
	When you first arrived here did you have access to the following people:				
3.7	The chaplain or a religious leader?	60%	54%	60%	
3.7	Someone from health services?	80%	75%	80%	
3.7	A Listener/Samaritans?	19%	35%	19%	
3.7	Prison shop/ canteen?	28%	21%	28%	14%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	64%	62%	64%	72%
3.8	Support was available for people feeling depressed or suicidal?	36%	45%	36%	60%
3.8	How to make routine requests?	54%	54%	54%	59%
3.8	Your entitlement to visits?	54%	58%	54%	72%
3.8	Health services?	70%	65%	70%	73%
3.8	The chaplaincy?	60%	54%	60%	65%
3.9	Did you feel safe on your first night here?	93%	91%	93%	93%
3.10	Have you been on an induction course?	92%	95%	92%	96%



## Main comparator and comparator to last time

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	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	69%	73%	69%	75%
3.12	Did you receive an education (skills for life) assessment?	85%	83%	85%	
<b>SECTION 4: Legal rights and respectful custody</b>					
	In terms of your legal rights, is it easy/very easy to:				
4.1	Communicate with your solicitor or legal representative?	80%	64%	80%	79%
4.1	Attend legal visits?	60%	54%	60%	63%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	18%	26%	18%	22%
4.3	Can you get legal books in the library?	54%	45%	54%	
	For the wing/unit you are currently on:				
4.4	Are you normally able to have a shower every day?	100%	98%	100%	100%
4.4	Do you normally receive clean sheets every week?	46%	85%	46%	49%
4.4	Do you normally get cell cleaning materials every week?	92%	73%	92%	77%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	85%	79%	85%	84%
4.4	Can you normally get your stored property, if you need to?	52%	52%	52%	75%
4.5	Is the food in this prison good/very good?	42%	38%	42%	47%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	56%	46%	56%	41%
4.7	Are you able to speak to a Listener at any time, if you want to?	39%	58%	39%	31%
4.8	Are your religious beliefs are respected?	54%	56%	54%	51%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	77%	64%	77%	67%
4.10	Is it easy/very easy to attend religious services?	63%	49%	63%	
<b>SECTION 5: Applications and complaints</b>					
5.1	Is it easy to make an application?	97%	89%	97%	
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	84%	78%	84%	67%
5.2	Do you feel applications are dealt with quickly (within seven days)?	94%	70%	94%	74%
5.3	Is it easy to make a complaint?	56%	55%	56%	
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	40%	45%	40%	37%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	62%	49%	62%	50%
5.5	Have you ever been prevented from making a complaint when you wanted to?	14%	14%	14%	
5.6	Is it easy/very easy to see the Independent Monitoring Board?	55%	38%	55%	67%
<b>SECTION 6: Relationships with staff</b>					
6.1	Do most staff, in this prison, treat you with respect?	85%	76%	85%	91%
6.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	84%	77%	84%	87%
6.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	47%	27%	47%	
6.4	Do staff normally speak to you most of the time/all of the time during association?	34%	17%	34%	28%
6.5	Do you have a personal officer?	95%	69%	95%	94%
	For those with a personal officer:				

## Main comparator and comparator to last time

### Key to tables

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	Percentages which are not highlighted show there is no significant difference				
6.6	Do you think your personal officer is helpful/very helpful?	74%	73%	74%	80%
<b>SECTION 7: Safety</b>					
7.1	Have you ever felt unsafe here?	22%	16%	22%	18%
7.2	Do you feel unsafe now?	5%	5%	5%	11%
7.3	Have you been victimised by other prisoners here?	22%	10%	22%	7%
	Since you have been here, have other prisoners:				
7.5	Made insulting remarks about you, your family or friends?	11%	4%	11%	1%
7.5	Hit, kicked or assaulted you?	4%	1%	4%	0%
7.5	Sexually abused you?	1%	1%	1%	1%
7.5	Threatened or intimidated you?	15%	8%	15%	
7.5	Taken your canteen/property?	0%	1%	0%	1%
7.5	Victimised you because of medication?	1%	1%	1%	
7.5	Victimised you because of debt?	0%	1%	0%	
7.5	Victimised you because of drugs?	1%	1%	1%	0%
7.5	Victimised you because of your race or ethnic origin?	1%	1%	1%	3%
7.5	Victimised you because of your religion/religious beliefs?	1%	1%	1%	4%
7.5	Victimised you because of your nationality?	1%	1%	1%	
7.5	Victimised you because you were from a different part of the country?	1%	2%	1%	0%
7.5	Victimised you because you are from a traveller community?	0%	0%	0%	
7.5	Victimised you because of your sexual orientation?	0%	1%	0%	1%
7.5	Victimised you because of your age?	1%	1%	1%	0%
7.5	Victimised you because you have a disability?	0%	1%	0%	0%
7.5	Victimised you because you were new here?	5%	2%	5%	1%
7.5	Victimised you because of your offence/crime?	4%	2%	4%	1%
7.5	Victimised you because of gang related issues?	1%	1%	1%	1%
<b>SECTION 7: Safety continued</b>					
7.6	Have you been victimised by staff here?	23%	17%	23%	15%
	Since you have been here, have staff:				
7.7	Made insulting remarks about you, your family or friends?	6%	6%	6%	4%
7.7	Hit, kicked or assaulted you?	0%	1%	0%	3%
7.7	Sexually abused you?	0%	1%	0%	1%
7.7	Threatened or intimidated you?	9%	9%	9%	
7.7	Victimised you because of medication?	1%	1%	1%	
7.7	Victimised you because of debt?	0%	0%	0%	
7.7	Victimised you because of drugs?	0%	1%	0%	0%
7.7	Victimised you because of your race or ethnic origin?	4%	3%	4%	6%
7.7	Victimised you because of your religion/religious beliefs?	1%	2%	1%	3%

## Main comparator and comparator to last time

### Key to tables

		HMP Blantyre House 2013	Open prisons comparator	HMP Blantyre House 2013	HMP Blantyre House 2010
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
7.7	Victimised you because of your nationality?	1%	1%	1%	
7.7	Victimised you because you were from a different part of the country?	1%	2%	1%	1%
7.7	Victimised you because you are from a traveller community?	0%	1%	0%	
7.7	Victimised you because of your sexual orientation?	0%	0%	0%	1%
7.7	Victimised you because of your age?	0%	1%	0%	0%
7.7	Victimised you because you have a disability?	1%	1%	1%	0%
7.7	Victimised you because you were new here?	1%	4%	1%	4%
7.7	Victimised you because of your offence/crime?	4%	2%	4%	1%
7.7	Victimised you because of gang related issues?	1%	1%	1%	1%
	For those who have been victimised by staff or other prisoners:				
7.8	Did you report any victimisation that you have experienced?	34%	27%	34%	37%
<b>SECTION 8: Health services</b>					
8.1	Is it easy/very easy to see the doctor?	76%	55%	76%	72%
8.1	Is it easy/very easy to see the nurse?	92%	75%	92%	95%
8.1	Is it easy/very easy to see the dentist?	60%	27%	60%	72%
	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:				
8.2	The doctor?	75%	71%	75%	58%
8.2	The nurse?	86%	76%	86%	73%
8.2	The dentist?	84%	54%	84%	78%
8.3	The overall quality of health services?	79%	66%	79%	70%
8.4	Are you currently taking medication?	40%	43%	40%	38%
	For those currently taking medication:				
8.5	Are you allowed to keep possession of some or all of your medication in your own cell?	94%	98%	94%	
8.6	Do you have any emotional well being or mental health problems?	16%	12%	16%	11%
	For those who have problems:				
8.7	Are you being helped or supported by anyone in this prison?	79%	52%	79%	
<b>SECTION 9: Drugs and alcohol</b>					
9.1	Did you have a problem with drugs when you came into this prison?	6%	10%	6%	5%
9.2	Did you have a problem with alcohol when you came into this prison?	13%	9%	13%	6%
9.3	Is it easy/very easy to get illegal drugs in this prison?	36%	32%	36%	20%
9.4	Is it easy/very easy to get alcohol in this prison?	7%	22%	7%	
9.5	Have you developed a problem with drugs since you have been in this prison?	1%	3%	1%	4%
9.6	Have you developed a problem with diverted medication since you have been in this prison?	0%	2%	0%	
	For those with drug or alcohol problems:				
9.7	Have you received any support or help with your drug problem while in this prison?	88%	73%	88%	
9.8	Have you received any support or help with your alcohol problem while in this prison?	92%	78%	92%	
	For those who have received help or support with their drug or alcohol problem:				

## Main comparator and comparator to last time

### Key to tables

		HMP Blantyre House 2013	Open prisons comparator	HMP Blantyre House 2013	HMP Blantyre House 2010
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
9.9	Was the support helpful?	93%	87%	93%	56%
<b>SECTION 10: Activities</b>					
	Is it very easy/ easy to get into the following activities:				
10.1	A prison job?	87%	75%	87%	
10.1	Vocational or skills training?	65%	53%	65%	
10.1	Education (including basic skills)?	83%	68%	83%	
10.1	Offending Behaviour Programmes?	46%	30%	46%	
	Are you currently involved in any of the following activities:				
10.2	A prison job?	82%	73%	82%	71%
10.2	Vocational or skills training?	30%	21%	30%	36%
10.2	Education (including basic skills)?	29%	27%	29%	43%
10.2	Offending Behaviour Programmes?	4%	7%	4%	20%
10.3	Have you had a job while in this prison?	97%	92%	97%	99%
	For those who have had a prison job while in this prison:				
10.3	Do you feel the job will help you on release?	37%	45%	37%	44%
10.3	Have you been involved in vocational or skills training while in this prison?	92%	79%	92%	97%
	For those who have had vocational or skills training while in this prison:				
10.3	Do you feel the vocational or skills training will help you on release?	68%	65%	68%	87%
10.3	Have you been involved in education while in this prison?	92%	84%	92%	99%
	For those who have been involved in education while in this prison:				
10.3	Do you feel the education will help you on release?	67%	65%	67%	81%
11.3	Have you been involved in offending behaviour programmes while in this prison?	79%	68%	79%	95%
	For those who have been involved in offending behaviour programmes while in this prison:				
11.3	Do you feel the offending behaviour programme(s) will help you on release?	51%	47%	51%	75%
10.4	Do you go to the library at least once a week?	69%	55%	69%	78%
10.5	Does the library have a wide enough range of materials to meet your needs?	75%	58%	75%	
10.6	Do you go to the gym three or more times a week?	30%	55%	30%	70%
10.7	Do you go outside for exercise three or more times a week?	80%	76%	80%	78%
10.8	Do you go on association more than five times each week?	86%	83%	86%	85%
10.9	Do you spend ten or more hours out of your cell on a weekday?	68%	50%	68%	65%
<b>SECTION 11: Friends and family</b>					
11.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	60%	54%	60%	69%
11.2	Have you had any problems with sending or receiving mail?	9%	23%	9%	9%
11.3	Have you had any problems getting access to the telephones?	5%	13%	5%	4%
11.4	Is it easy/ very easy for your friends and family to get here?	42%	39%	42%	
<b>SECTION 12: Preparation for release</b>					
12.1	Do you have a named offender manager (home probation officer) in the probation service?	99%	90%	99%	
	For those who have an offender manager what type of contact have you had:				
12.2	No contact?	12%	16%	12%	

## Main comparator and comparator to last time

### Key to tables

Any percentage highlighted in green is significantly better		HMP Blantyre House 2013	Open prisons comparator	HMP Blantyre House 2013	HMP Blantyre House 2010
Any percentage highlighted in blue is significantly worse					
Any percentage highlighted in orange shows a significant difference in prisoners' background details					
Percentages which are not highlighted show there is no significant difference					
12.2	Contact by letter?	41%	43%	41%	
12.2	Contact by phone?	63%	58%	63%	
12.2	Contact by visit?	55%	37%	55%	
12.3	Do you have a named offender supervisor in this prison?	97%	68%	97%	
12.4	Do you have a sentence plan?	94%	73%	94%	93%
	For those with a sentence plan:				
12.5	Were you involved/very involved in the development of your plan?	85%	71%	85%	70%
	Who is working with you to achieve your sentence plan targets:				
12.6	nobody?	24%	35%	24%	
12.6	Offender supervisor?	63%	46%	63%	
12.6	Offender manager?	55%	36%	55%	
12.6	Named/ personal officer?	48%	19%	48%	
12.6	Staff from other departments?	36%	20%	36%	
	For those with a sentence plan:				
12.7	Can you achieve any of your sentence plan targets in this prison?	87%	79%	87%	86%
12.8	Are there plans for you to achieve any of your targets in another prison?	10%	11%	10%	
12.9	Are there plans for you to achieve any of your targets in the community?	69%	47%	69%	
12.10	Do you have a needs based custody plan?	14%	6%	14%	
12.11	Do you feel that any member of staff has helped you to prepare for release?	50%	31%	50%	54%
	For those that need help do you know of anyone in this prison who can help you on release with the following:				
12.12	Employment?	55%	48%	55%	
12.12	Accommodation?	48%	47%	48%	
12.12	Benefits?	38%	47%	38%	
12.12	Finances?	44%	39%	44%	
12.12	Education?	64%	49%	64%	
12.12	Drugs and alcohol?	70%	54%	70%	
	Have you been provided with information on the following:				
12.13	Resettlement day release?	80%	74%	80%	
12.13	Resettlement overnight release?	76%	72%	76%	
	Have you had access to the following:				
12.14	Resettlement day release?	71%	64%	71%	
12.14	Resettlement overnight release?	54%	57%	54%	
12.14	Special purpose leave?	37%	33%	37%	
	Please answer the following about your preparation for release:				
12.15	Were you given up to date information about this prison before you came here?	48%	22%	48%	51%
12.15	Were you helped to prepare for open conditions before you came here (increased responsibility etc)?	40%	27%	40%	38%
12.15	Do you feel you have been given greater responsibility here than when you were in closed conditions?	83%	82%	83%	91%
12.15	Have you been on a preparation for release course?	40%	18%	40%	30%
12.15	Is this prison near your home area or your intended release address?	61%	43%	61%	59%
12.15	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	73%	59%	73%	74%

## Diversity analysis



### Key Question Responses (over 50) HMP Blantyre House 2013

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

#### Key to tables

	Any percentage highlighted in green is significantly better	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>Number of completed questionnaires returned</b>		<b>28</b>	<b>54</b>
1.5	Are you a foreign national?	0%	1%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	100%	100%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	16%	24%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	6%
1.1	Are you Muslim?	8%	10%
1.12	Do you consider yourself to have a disability?	15%	9%
1.13	Are you a veteran (ex-armed services)?	8%	1%
1.14	Is this your first time in prison?	44%	43%
2.6	Were you treated well/very well by the escort staff?	84%	80%
2.7	Before you arrived here were you told that you were coming here?	82%	83%
3.2	When you were searched in reception, was this carried out in a respectful way?	100%	87%
3.3	Were you treated well/very well in reception?	100%	91%
3.4	Did you have any problems when you first arrived?	57%	44%
3.7	Did you have access to someone from health care when you first arrived here?	80%	80%
3.9	Did you feel safe on your first night here?	100%	89%

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
3.10	Have you been on an induction course?	92%	91%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	76%	80%
4.4	Are you normally able to have a shower every day?	100%	100%
4.5	Is the food in this prison good/very good?	71%	31%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	60%	58%
4.7	Are you able to speak to a Listener at any time, if you want to?	39%	41%
4.8	Do you feel your religious beliefs are respected?	62%	50%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	90%	74%
5.1	Is it easy to make an application?	100%	95%
5.3	Is it easy to make a complaint?	60%	55%
6.1	Do <b>most</b> staff, in this prison, treat you with respect?	97%	80%
6.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	90%	86%
6.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	41%	31%
6.4	Do you have a personal officer?	100%	92%
7.1	Have you ever felt unsafe here?	28%	19%
7.2	Do you feel unsafe now?	8%	1%
7.3	Have you been victimised by other prisoners?	26%	19%
7.5	Have you ever felt threatened or intimidated by other prisoners here?	18%	11%
7.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	1%
7.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	1%

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
7.5	Have you been victimised because of your nationality? (By prisoners)	0%	1%
7.5	Have you been victimised because of your age? (By prisoners)	3%	0%
7.5	Have you been victimised because you have a disability? (By prisoners)	0%	0%
7.6	Have you been victimised by a member of staff?	21%	25%
7.7	Have you ever felt threatened or intimidated by staff here?	15%	6%
7.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	6%
7.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	2%
7.7	Have you been victimised because of your nationality? (By staff)	0%	2%
7.7	Have you been victimised because of your age? (By staff)	0%	0%
7.7	Have you been victimised because you have a disability? (By staff)	3%	0%
8.1	Is it easy/very easy to see the doctor?	84%	75%
8.1	Is it easy/ very easy to see the nurse?	100%	87%
9.4	Are you currently taking medication?	66%	24%
8.6	Do you feel you have any emotional well being/mental health issues?	15%	18%
9.3	Is it easy/very easy to get illegal drugs in this prison?	36%	33%
10.2	Are you currently working in the prison?	80%	83%
10.2	Are you currently undertaking vocational or skills training?	33%	28%
10.2	Are you currently in education (including basic skills)?	46%	17%
10.2	Are you currently taking part in an offending behaviour programme?	8%	2%



## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	<b>Prisoners aged 50 and over</b>	<b>Prisoners under the age of 50</b>
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
10.4	Do you go to the library at least once a week?	<b>72%</b>	<b>71%</b>
10.6	Do you go to the gym three or more times a week?	<b>10%</b>	<b>41%</b>
10.7	Do you go outside for exercise three or more times a week?	<b>78%</b>	<b>81%</b>
10.8	On average, do you go on association more than five times each week?	<b>88%</b>	<b>84%</b>
10.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	<b>66%</b>	<b>68%</b>
11.2	Have you had any problems sending or receiving mail?	<b>8%</b>	<b>10%</b>
11.3	Have you had any problems getting access to the telephones?	<b>8%</b>	<b>4%</b>
Have you been provided with information on the following:			
12.12	Resettlement day release?	<b>78%</b>	<b>81%</b>
12.12	Resettlement overnight release?	<b>81%</b>	<b>74%</b>
Have you had access to the following:			
12.13	Resettlement day release?	<b>63%</b>	<b>76%</b>
12.13	Resettlement overnight release?	<b>58%</b>	<b>54%</b>
12.13	Special purpose leave?	<b>55%</b>	<b>30%</b>
Please answer the following about your preparation for release:			
12.14	Were you given up to date information about this prison before you came here?	<b>51%</b>	<b>49%</b>
12.14	Were you helped to prepare for open conditions before you came here (increased responsibility etc)?	<b>42%</b>	<b>42%</b>
12.14	Do you feel you have been given greater responsibility here than when you were in closed conditions?	<b>83%</b>	<b>84%</b>
12.14	Have you been on a preparation for release course?	<b>31%</b>	<b>45%</b>
12.14	Is this prison near your home area or your intended release address?	<b>61%</b>	<b>62%</b>



**Diversity analysis**  
**Key Question Responses (ethnicity) HMP Blantyre House 2013**

**Prisoner survey responses** (missing data have 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.

**Key to tables**

		Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>Number of completed questionnaires returned</b>		<b>17</b>	<b>65</b>
1.5	Are you a foreign national?	4%	0%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	100%	100%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	4%
1.1	Are you Muslim?	35%	1%
1.12	Do you consider yourself to have a disability?	0%	15%
1.13	Are you a veteran (ex-armed services)?	0%	5%
1.14	Is this your first time in prison?	46%	43%
2.6	Were you treated well/very well by the escort staff?	83%	83%
2.7	Before you arrived here were you told that you were coming here?	88%	81%
3.2	When you were searched in reception, was this carried out in a respectful way?	86%	92%
3.3	Were you treated well/very well in reception?	86%	96%
3.4	Did you have any problems when you first arrived?	21%	55%
3.7	Did you have access to someone from health care when you first arrived here?	82%	81%
3.9	Did you feel safe on your first night here?	88%	93%
3.10	Have you been on an induction course?	83%	93%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	94%	77%
4.4	Are you normally able to have a shower every day?	100%	100%
4.5	Is the food in this prison good/very good?	32%	47%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	50%	59%
4.7	Are you able to speak to a Listener at any time, if you want to?	42%	40%

## Key to tables

## Diversity analysis

		Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.8	Do you feel your religious beliefs are respected?	65%	52%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	75%	76%
5.1	Is it easy to make an application?	96%	97%
5.3	Is it easy to make a complaint?	71%	54%
6.1	Do <b>most</b> staff, in this prison, treat you with respect?	83%	87%
6.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	86%	85%
6.3	Do staff normally speak to you at least most of the time during association time (most/all of the time)	21%	37%
6.4	Do you have a personal officer?	88%	97%
7.1	Have you ever felt unsafe here?	4%	26%
7.2	Do you feel unsafe now?	0%	7%
7.3	Have you been victimised by other prisoners?	5%	24%
7.5	Have you ever felt threatened or intimidated by other prisoners here?	0%	19%
7.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	1%
7.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	1%
7.5	Have you been victimised because of your nationality? (By prisoners)	0%	1%
7.5	Have you been victimised because you have a disability? (By prisoners)	0%	0%
7.6	Have you been victimised by a member of staff?	19%	24%
7.7	Have you ever felt threatened or intimidated by staff here?	5%	9%
7.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	14%	1%
7.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	1%
7.7	Have you been victimised because of your nationality? (By staff)	0%	1%
7.7	Have you been victimised because you have a disability? (By staff)	0%	1%
8.1	Is it easy/very easy to see the doctor?	71%	81%
8.1	Is it easy/ very easy to see the nurse?	88%	92%
9.4	Are you currently taking medication?	36%	40%

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.6	Do you feel you have any emotional well being/mental health issues?	14%	17%
9.3	Is it easy/very easy to get illegal drugs in this prison?	5%	40%
10.2	Are you currently working in the prison?	83%	80%
10.2	Are you currently undertaking vocational or skills training?	39%	28%
10.2	Are you currently in education (including basic skills)?	39%	26%
10.2	Are you currently taking part in an offending behaviour programme?	6%	4%
10.4	Do you go to the library at least once a week?	68%	71%
10.6	Do you go to the gym three or more times a week?	62%	24%
10.7	Do you go outside for exercise three or more times a week?	86%	80%
10.8	On average, do you go on association more than five times each week?	86%	84%
10.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	57%	72%
11.2	Have you had any problems sending or receiving mail?	0%	9%
11.3	Have you had any problems getting access to the telephones?	0%	5%
	Have you been provided with information on the following:		
12.12	Resettlement day release?	71%	82%
12.12	Resettlement overnight release?	67%	77%
	Have you had access to the following:		
12.13	Resettlement day release?	64%	74%
12.13	Resettlement overnight release?	67%	51%
12.13	Special purpose leave?	38%	39%
	Please answer the following about your preparation for release:		
12.14	Were you given up to date information about this prison before you came here?	57%	49%
12.14	Were you helped to prepare for open conditions before you came here (increased responsibility etc)?	52%	39%
12.14	Do you feel you have been given greater responsibility here than when you were in closed conditions?	79%	85%
12.14	Have you been on a preparation for release course?	48%	40%
12.14	Is this prison near your home area or your intended release address?	62%	63%