

Report on an unannounced full follow-up
inspection of

HMYOI Lancaster Farms

1–10 June 2011

by HM Chief Inspector of Prisons

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Introduction

Lancaster Farms is the only dedicated young offender institution in the north west. At the time of the inspection, it had a local prison function: holding both remanded and sentenced young adults. It was due to re-role to become a training establishment. On our last visit, we were highly critical, including noting a lack of staff engagement and pervasive poor relationships. On our return for this unannounced inspection we found a much improved establishment which was generally well equipped for its proposed new role.

There had been some improvements in safety, but levels of violence among this volatile age group remained high and required further preventive work. Similarly, there was a need to reduce further the heavy reliance on adjudications and use of force, although governance of the latter had improved. Early days were generally well managed, but some first night risk assessments were inappropriately deferred to the next day. Suicide and self-harm prevention work was impressive. The segregation unit was a decent facility. Security was proportionate and there was little substance abuse.

The physical environment at Lancaster Farms remained impressive and this was enhanced by good levels of cleanliness. There was now better access to basic facilities such as showers and phones, although petty restrictions on wearing own clothes remained. Staff appeared more engaged with prisoners and the personal officer scheme was effective. The expectation that prisoners would dine communally had a civilising effect. Diversity was well promoted and there was a well respected chaplaincy.

Health care was very good. However, during the inspection an announcement was made about the implications of the re-role which, because there was expected to be a more stable and less needy training population, involved major reductions in the health care budget. In particular, the inpatient facility was to close and it was not clear where some young men with very significant mental health issues would end up. It will be essential to revise the establishment's health needs assessment as the nature of the new population becomes clear, adjust provision accordingly and ensure that no damaged young men fall through the cracks of this change.

Time out of cell remained limited and we would certainly expect it to improve once Lancaster Farms becomes a training facility. By the same token, it was both timely and commendable that there had been very significant improvements in the quality of learning and skills provision. This would provide an important underpinning for the establishment's new role. Both the library and PE had also improved.

Less progress was visible in resettlement. Although the management of resettlement was generally sound, there was a lack of strategic direction. There was still insufficient custody planning and offender management remained variable. Public protection and work with indeterminate sentenced prisoners was good. Most resettlement pathway provision was adequate.

Lancaster Farms has made significant progress since our last visit. It is now a safer place, although the continuing levels of violence mean that there is no scope for complacency. It is now also a decent place, with a more engaged staff and some improved relationships. These are important changes which, together with a step change improvement in the quality of learning and skills, mean that the establishment is in a sound position to re-role to a training function. There will be major challenges ahead, not least ensuring adequate health care and

resettlement services to meet future needs but, overall, Lancaster Farms is to be congratulated on how far it has already come.

Nick Hardwick
HM Chief Inspector of Prisons

September 2011

Fact page

Task of the establishment

Male young offender institution, with local function.

Prison status

Public

Region

North West

Number held

515

Certified normal accommodation

480

Operational capacity

530

Date of last full inspection

8-12 September 2008

Brief history

Opened in March 1993 as a remand centre/young offender institution, the establishment's capacity was increased when a new residential unit was opened in June 1996. In May 2001, Buttermere and Windermere units were re-roled to dedicated juvenile units (under-18s). The establishment was re-roled during 2008/09 and is now the sole dedicated young offender institution for the North West.

Short description of residential units

Four main residential units, each split into two wings. Each wing has two landings and contains mainly single cells with some doubles. There is also a dedicated health care unit staffed 24 hours by North Lancashire Primary Care Trust.

Escort contractor

G4S

Health service commissioner and provider

North Lancashire Primary Care Trust

Lancashire Care Foundation Trust

Learning and skills provider

The Manchester College

Healthy prison summary

Introduction

- HP1 All inspection reports include a summary of an establishment's performance against the model of a healthy prison. The four criteria of a healthy prison are:
- | | |
|----------------------------|---|
| Safety | prisoners, even the most vulnerable, are held safely |
| Respect | prisoners are treated with respect for their human dignity |
| Purposeful activity | prisoners are able, and expected, to engage in activity that is likely to benefit them |
| Resettlement | prisoners are prepared for their release into the community and helped to reduce the likelihood of reoffending. |
- HP2 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the National Offender Management Service.
- **outcomes for prisoners are good against this healthy prison test.**
There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.
 - **outcomes for prisoners are reasonably good against this healthy prison test.**
There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.
 - **outcomes for prisoners are not sufficiently good against this healthy prison test.**
There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.
 - **outcomes for prisoners are poor against this healthy prison test.**
There is evidence that the outcomes for prisoners are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.
- HP3 The Inspectorate conducts unannounced follow-up inspections to assess progress against recommendations made in the previous full inspection. Follow-up inspections are proportionate to risk. In full follow-up inspections sufficient inspector time is allocated to enable an assessment of progress and also to allow in-depth analysis of areas of serious concern identified in the previous inspection, particularly on safety and respect, or matters of concern subsequently drawn to the attention of the Chief Inspector. Inspectors use the findings of prisoner surveys (where available), prisoner

focus groups, research analysis of prison data and observation.¹ This enables a reassessment of previous healthy prison assessments held by the Inspectorate on all establishments, and published in reports from 2004 onwards.

- HP4 In 2008 we found that Lancaster Farms was not performing sufficiently well against the healthy prison test of safety. We made 30 recommendations, of which 22 had been achieved, seven partially achieved and one not achieved. We have made 16 further recommendations.
- HP5 In 2008 we found that Lancaster Farms was not performing sufficiently well against the healthy prison test of respect. We made 81 recommendations, of which 56 had been achieved, nine partially achieved, 15 were not achieved and one was no longer relevant. We have made 17 further recommendations.
- HP6 In 2008 we found that Lancaster Farms was not performing sufficiently well against the healthy prison test of purposeful activity. We made 17 recommendations, of which 15 had been achieved, one partially achieved and one was not achieved. We have made 11 further recommendations.
- HP7 In 2008 we found that Lancaster Farms was not performing sufficiently well against the healthy prison test of resettlement. We made 35 recommendations, of which 16 had been achieved, 13 partially achieved and six were not achieved. We have made 13 further recommendations.

Safety

- HP8 Arrangements for first days in custody were mostly satisfactory although we were not assured that all new arrivals received a first night interview. The number of violent incidents remained high and strategies to address this were too reactive and lacked sophistication. Measures to prevent suicide and self-harm were very effective with the quality of case management particularly impressive. The prison processed a significant amount of security intelligence and applied security interventions proportionately. The segregation unit had a reasonable regime and decent standards of care. The number of adjudications was very high. Recorded use of force was similarly high but governance had improved. The abuse of illicit drugs was low. On

¹ **Inspection methodology:** There are five key sources of evidence for inspection: 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, applying both qualitative and quantitative methodologies. All findings and judgements are triangulated, which increases the validity of the data gathered. Survey results show the collective response (in percentages) from prisoners in the establishment being inspected compared with the collective response (in percentages) from respondents in all establishments of that type (the comparator figure). Where references to comparisons between these two sets of figures are made in the report, these relate to statistically significant differences only. Statistical significance is a way of estimating the likelihood that a difference between two samples indicates a real difference between the populations from which the samples are taken, rather than being due to chance. If a result is very unlikely to have arisen by chance, we say it is 'statistically significant'. 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. (Adapted from Towel et al (eds), *Dictionary of Forensic Psychology*.)

the basis of this full follow-up inspection, we considered that outcomes for prisoners had improved and were now reasonably good against this healthy prison test.

- HP9 Journey times to the prison were relatively short although prisoners reported uncomfortable journeys in often dirty vans. Many prisoners spent too long in court cells following the completion of hearings and many arrived at the prison after 7pm. New arrivals disembarked from the vans quickly but were always handcuffed, despite being in a secure area.
- HP10 Reception was welcoming but there was graffiti in the holding rooms and toilets were dirty. Reception staff treated prisoners respectfully and searched them sensitively. Health care staff saw new arrivals in a private room. Reception procedures were carried out expeditiously. In our survey, prisoners had positive views of their reception experience.
- HP11 All new arrivals, except those requiring drug and alcohol detoxification, were located initially on Coniston one. Cells were stark and unwelcoming but generally clean, although bedding was stained. Initial risk assessments did not always take place on the first night, which was dangerous, and some prisoners reported that interviews were not always confidential. The first night assessment document was perfunctory and we were not assured that action on identified issues was always followed up. However, the quality of informal care was better. All new arrivals were given basic items and a telephone call but most only received a shower the following day. There was scope for greater involvement of prisoner peer support during the first night and induction.
- HP12 Induction lasted for a day and a half. Although a considerable amount of information was presented intensively, prisoners were more positive about the usefulness of the induction programme than at our last inspection. Sessions concerning safer custody were not always completed. Prisoners were given a comprehensive induction booklet and had useful individual interviews with various departments, although these took place on a noisy public landing. Induction included education and PE assessments.
- HP13 The number of violent incidents was high with over 200 fights and assaults recorded in the first five months of 2011. The violence reduction policy document was reasonably coherent but some protocols and practices had not been fully implemented. Interventions were mostly sanctions and punishment with little to deal with persistent bullying or its effect on other prisoners. Links between violence reduction and security were better developed than at the last inspection but the quality of investigation into alleged incidents was often poor and we are not assured that all information about suspected incidents was investigated or acted on. Residential officers were not fully engaged in monitoring and addressing all aspects of violence and bullying, and the tackling antisocial behaviour strategy was not fully understood or rigorously applied. As a consequence, the number of prisoners on formal anti-bullying measures was low for the volume of intelligence received or the number of fights and assaults.
- HP14 Suicide and self-harm prevention arrangements had improved. The suicide prevention policy has been reviewed and was better promoted and understood. A Listener scheme had been introduced and, although there were some restrictions in access at night, it was generally well supported. There had also been improvements in the analysis of data to detect patterns and trends of self-harming, and management checks had raised the quality of entries in assessment, care in custody and teamwork

(ACCT) self-harm monitoring documents. The number of ACCT documents was reasonably high but initial screening arrangements were good and there was no evidence of risk averse practices. Case management through the safer custody team, residential managers and the mental health in-reach team was very good and the quality of individual care plans was better than we normally see.

HP15 The flow of information into the security department was good and the large number of security information reports received were processed efficiently and promptly. Security committee meetings were representative, well attended and given a high profile. Information was used well to inform intelligence-based risk management systems and, on the whole, security procedures were proportionate and did not unduly interfere with prisoner access to a full regime.

HP16 The number of formal adjudications and minor reports had reduced significantly but were still too high, at over 700 proven adjudications in 2011 so far. Many charges remained petty. Hearings were well managed and the governance of adjudications was good. Punishment tariffs were used consistently, although some were severe.

HP17 Governance of the use of force had greatly improved and there was good use of information to identify trends and patterns. However, the number of incidents remained high at 171 in 2011 so far. Although written accounts from staff usually gave assurance that force was used as a last resort, de-escalation was not always used to best effect. The special accommodation was used only rarely and was properly authorised. Mechanical restraints had been used on a prisoner engaged in extreme self-harming behaviour, and we were assured that this intervention was justified.

HP18 The segregation unit was clean and well maintained. It had a reasonable regime, including use of a small gym and input from education. Relationships between staff and prisoners were very good, and staff entries in personal files suggested good levels of engagement and care. There was planning to return longer stay occupants to normal location, and reviews for good order cases took place on time and were well attended by staff who knew the prisoner.

HP19 Few prisoners required clinical management for substance misuse, although appropriate integrated drug treatment system (IDTS) protocols, facilities and contingencies were in place. The positive random mandatory drug testing rate was 5.6% against a target of 8%. There had been 80 suspicion tests in the six months to April 2011 with a reasonable positive rate of 43.3% Random and suspicion test results suggested that cannabis was the main illicit drug.

Respect

HP20 The quality of the prison's environment was good and there had been significant improvements in prisoner access to basic amenities, although there were needless restrictions on the wearing of own clothes. Staff-prisoner relationships were improving and, although mixed, there was some good personal officer work. The quality of food was adequate, although not popular, and dining in association was a positive feature of the establishment. There was effective work to promote diversity. The handling of applications and complaints had improved. There was an engaged chaplaincy. The quality of health care was very good. On the basis of this full follow-up inspection, we

considered that outcomes for prisoners in this establishment were reasonably good against this healthy prison test.

- HP21 The quality of the internal and external environment was good. Units were clean and generally well equipped and cell standards were reasonably good, although toilet screening required improvement. Showers were more accessible to prisoners but screening was poor as was cleanliness. There were sufficient telephones on the units and mail was now issued to prisoners the day it arrived. Rules on the wearing of prisoners' own clothes were petty and restrictive, and access to kit, particularly clothing, remained problematic.
- HP22 The incentives and earned privileges (IEP) scheme operated consistently across the prison and governance had improved since the last inspection. There were reasonable differentials between regime levels, and the regime for the few prisoners on basic included some association and access to telephones in the evening. Prisoners were usually promoted or demoted on the basis of patterns of behaviour and reviews were conducted fairly.
- HP23 In our survey, 75% of respondents said that staff treated them with respect, an increase on the 63% finding when we last visited. Prisoners reported that there were staff they could talk to if they had a problem, but many expressed some ambivalence about their reliability and helpfulness. Our own observations were reasonably positive. Although we saw some dismissive attitudes by staff, and their aspirations for young people were still too low, there was generally a more constructive approach than we observed when we last visited. There was evidence of some good staff knowledge about prisoners and levels of engagement and, importantly, care seemed reasonable.
- HP24 Although in our survey only two-thirds of respondents, compared with the comparator of three-quarters, confirmed that they had a personal officer, in discussions most could identify their personal officer and seemed reasonably content with the help they received. Personal officers were allocated sensibly to individual prisoners rather than particular cells. A number of records that we sampled showed reasonably rounded engagement by personal officers, and some entries were meaningful. Management checks and quality assurance were perfunctory.
- HP25 Meals were at appropriate times and eaten communally on each wing, which was an important and positive routine. The kitchen was clean and prisoners now worked there. Despite some positive findings, prisoners were negative about the quality and size of meals but we considered that the range and standard of food were reasonable. There was a reasonable range of goods available through the prison shop and prisoners said it sold a wide enough range for their needs. The shop was on the agenda of prisoner consultative committee meetings and there was appropriate action on issues raised.
- HP26 Governance of diversity was good with meaningful action plans for each strand. About 70% of staff had received diversity training, and there had been several events and initiatives to promote diversity.
- HP27 Unusually in our survey, the perceptions of black and minority ethnic respondents were consistent with those of white prisoners, and 96% said that they felt respected by staff. The profile of the race equality team was good. Ethnic monitoring had shown that some areas were out of range but analysis and follow up of this were effective.

The number of racist incidents had decreased, the quality of investigations was thorough and feedback to complainants meaningful.

- HP28 There were 13 foreign national prisoners, some of whom cited feelings of isolation. The prison facilitated a well-attended foreign national prisoner support forum. The UK Border Agency offered a monthly service to prisoners but there was no access to independent immigration advice. Interpreting services were used but some information was in English only.
- HP29 Identification of prisoners with disabilities was impressive and there was a disability action group attended by relevant departments, but there were no adapted cells. There had been ongoing faith awareness training for staff. Support groups had been facilitated for gay and bisexual prisoners, and there was support for one prisoner contemplating gender reassignment.
- HP30 A new triplicate form allowed staff to monitor the timeliness and outcomes of applications. The quality of responses to complaints had improved and replies were generally respectful and addressed the issues. There were regular quality checks and a monthly analysis of the types of complaint. A trained legal services officer interviewed all new arrivals and the provision thereafter was satisfactory.
- HP31 Facilities in the chapel were welcoming and there were good arrangements for prisoners to attend services. The multi-faith facility was now bigger and better equipped. There was good prisoner access to the chaplaincy, who offered a range of support and faith-based activities, were well integrated into the establishment and provided useful support to some very vulnerable individuals.
- HP32 The overall coordination of all health services was excellent. Governance was good with effective joint working between health care and the prison. Initial health screening was effective, and prisoners could see a GP within two days for non-urgent issues. There were designated specialist clinics and active health promotion work. There was good access to dental services. Medication administration was inefficient and increased the risk of prisoners not getting medication at the right time. The inpatient unit was used for prisoners with complex mental health problems and general vulnerabilities. During our visit the prison was given formal notice of closure of the unit based on the re-role of the prison. There was no designated primary mental health service, which was a significant gap. The mental health in-reach team provided a very good service to the few young men with serious and enduring mental health problems. Some prisoners had waited too long for a secure mental health placement.

Purposeful activity

- HP33 Access to time out of cell was limited but could exceed seven hours a day for prisoners fully engaged with the regime. Access to evening association had improved but remained brief for many. There were sufficient activity places and attendance at activity was good but nearly a quarter of prisoners were locked up during the working part of the day. Management of learning and skills was good and based on 12 vocational pathways. Education and training staff worked well together. Standards in learning and skills had improved and the range and quality of education and training were good. Learner achievements were good and there was opportunity for learning

progression. Attendance at the library had improved. The PE department provided a good service. On the basis of this full follow-up inspection, we considered that outcomes for prisoners in this establishment were reasonably good against this healthy prison test.

- HP34 The prison reported a time unlocked figure of just over 7.5 hours a day. The core day indicated that just under eight hours was possible for prisoners fully engaged with the regime during the working part of the week. For many, however, time out of cell was considerably less, and some regime slippage was also evident. During the working part of the week we found about a quarter of the population locked in cell. Access to evening association was brief with only 45-minute sessions for most during the week, although some achieved more at the discretion of staff. Association was rarely cancelled but delays to routines eroded the already brief sessions. Exercise was accessible during evening association but yards were bleak and lacked equipment.
- HP35 There were sufficient work and activity places to meet the needs of the population, with of at least 517 full-time-equivalent spaces. There were approximately 172 work places, including wing cleaning and farms and gardens jobs. Attendance averaged at 91% of allocated places. Rates of pay were equitable and not a disincentive to attending education. All purposeful activity, even low-skill work, had at least some related training, including manual handling, health and safety, and food hygiene.
- HP36 Standards in education and training had been improved and the range and quality of provision had been extended. Learning and skills provision was well managed. An innovative and effective model of delivery based on 12 vocational pathways provided and linked functional and personal, social and employability skills well in a vocational learning environment. Quality improvement processes were effective and a wide range of performance data were used effectively to improve participation and attendance. Induction in learning and skills was satisfactory and allocation to activities was very efficient.
- HP37 There were approximately 180 full-time-equivalent vocational training places and attendance at sessions was approximately 82%. The wide range of vocational training opportunities included construction skills, industrial cleaning, horticulture, catering, renewable energy, mechanical engineering and the ICT academy. The achievement of qualifications was good. Prisoners made good progress and could demonstrate the development of good practical skills in their vocational pathway.
- HP38 There were approximately 166 education places with an average attendance of 84%. A wide range of courses, from pre-entry to level 3 and higher education opportunities, provided prisoners with good progression routes. Classroom management was good and activities to engage the hard-to-reach were effective. Teaching and learning were good, and peripatetic support tutors gave good individual support in and out of class time.
- HP39 The library staff had successfully improved attendance and the library was now open for 40 hours a week, including four evenings and Saturday mornings. The book stock had increased but the range of materials to support vocational training and the supply of magazines were limited.
- HP40 There was a good PE service, including the delivery of a range of accredited qualifications. Prisoners had sufficient opportunities to use PE facilities at least twice a week, and access to the outdoor facilities had improved. Recreational PE was

available four evenings a week to prisoners who worked full time. Prisoners in the health care and segregation units had access to exercise equipment there.

Resettlement

- HP41 There was no up-to-date reducing reoffending policy but the strategic approach to resettlement was generally appropriate. There had been a needs analysis but it had significant gaps. Custody planning for remand prisoners was weak and of little value but work with sentenced prisoners was better. Supervisory contact with sentenced prisoners varied in frequency and quality, and further case management supervision and better quality assurance were required. Work with indeterminate-sentenced prisoners was generally good, as was public protection. Pathway work was broadly appropriate but pre-release assessments required further development. On the basis of this full follow-up inspection, we considered that outcomes for prisoners in this establishment were not sufficiently good against this healthy prison test.
- HP42 There was no up-to-date reducing reoffending or resettlement policy. However, there was a strategy document outlining objectives and targets for each resettlement pathway, but some were very broad and there were significant omissions. There were no objectives identified for offender management or public protection. There was a separate, comprehensive public protection policy. The reducing reoffending forum was well attended by key departments, including pathway leads. Reports produced for the meeting were comprehensive and the strategy document was updated accordingly. There had been a comprehensive needs analysis in November 2010, but some recommendations had yet to be incorporated into the strategy.
- HP43 All prisoners had some form of custody planning, but for those on remand or unsentenced, custody plans were tokenistic and assessments unused. Referrals to pathway interventions were not consistent, and there were no quality assurance arrangements. All sentenced prisoners were subject to offender assessment system (OASys) assessments and sentence planning, but there were considerable variations in the frequency and quality of supervisory work. There was little effective professional supervision of officer offender supervisors, and this affected the quality and effectiveness of work. There was quality assurance for OASys assessments, but, despite this, there was a backlog in completion. In our survey, only 38% of prisoners understood that they had a sentence plan. A pre-release course was a good initiative but there were no pre-release boards to coordinate pathway interventions with individuals.
- HP44 There were well-organised public protection arrangements with appropriate systems to identify and manage those highlighted. There were 102 prisoners subject to or likely to be managed under multi-agency public protection arrangements (MAPPA), and interdepartmental risk management meetings were well attended and information sharing was good. The role of offender supervisors in the process was limited, although many did attend community MAPPA meetings.
- HP45 The prison held 21 indeterminate-sentenced prisoners, all of whom were allocated to an offender supervisor. Arrangements for sentence planning were generally appropriate. Multi-agency risk assessment meetings and action plans were up to date and well organised. Information for newly sentenced indeterminate-sentenced prisoners was good, although they had no specific support forums or interventions.

- HP46 The family links team saw all new arrivals about support needed with families, accommodation and finance, benefit and debt, and there was reasonable support for sentenced prisoners wanting help. The primary focus of accommodation work was on those likely to be released with no fixed accommodation, with whom the team worked around six months in advance of release. No fixed accommodation rates were relatively low at around 2%.
- HP47 There was good partnership work with external and voluntary agencies to extend and further improve education, training and employment opportunities for prisoners. There was a compulsory two-week resettlement programme for all prisoners nearing the end of their sentence. Links with industry were underdeveloped. Careers information and advice support workers provided through-the-gate support and links with education providers and some local employers.
- HP48 There were excellent arrangements to ensure prisoners were linked with a GP on release. They were all offered a pre-discharge appointment with a nurse, which informed a typed summary for their GP. Prisoners on the mental health in-reach caseload were linked to the appropriate community mental health team before discharge.
- HP49 Work on finance, benefit and debt remained underdeveloped. The number of prisoners identified with debt problems appeared too low. In our survey, only 17% of respondents said they knew who to speak to at the prison about money and finance problems on release.
- HP50 The drug and alcohol strategy was up to date with an ongoing action plan, reviewed at the drug strategy meeting. The CARAT team had an active caseload of 170 and prisoners told us that CARATs and the other substance use services were very helpful. The CARAT team additionally delivered a quarterly drugs and healthy living course. A full-time alcohol worker and IDTS staff ran a regular alcohol awareness resettlement group. Prisoners welcomed the service user focus group and a separate CARAT clients' forum, and told us that they felt involved in the development of services. Links to local drug intervention programmes were good.
- HP51 The family links team had a high profile and offered a good range of support, including individual support to a significant number of prisoners, usually between 40 and 60. Support meetings were regularly arranged for new fathers, and there were four to six family days a year. The parenting programme was now accredited and facilitated by the local Sure Start team. Many visitors and prisoners complained about problems in accessing the visits booking line, and many visitors said that there could be long delays in visits starting. The requirement for prisoners to wear bibs in visits was disproportionate.
- HP52 There was a reasonable range of accredited and validated offending behaviour programmes, including the short duration drug programme, thinking skills programme and controlling anger and learning to manage it (CALM), which broadly met the needs of the population. However, problems with staffing had meant that some validated courses had not been delivered recently. Allocation to programmes was well managed and prisoners were prioritised appropriately.

Main concerns and recommendations

HP53 **Concern:** We were not assured that first night safety interviews were always carried out on the day prisoners arrived, or that they were carried out in private. Similarly, we were not assured that identified issues of concern were always followed up.

Recommendation: Initial risk assessments should always be carried out with new arrivals in private and on the day they arrive, and there should be a record of follow-up actions where issues are identified.

HP54 **Concern:** Staff, particularly those working on the residential units, were not fully engaged in the formal violence reduction strategy.

Recommendation: All staff should be actively involved in monitoring and addressing violence and bullying, and the tackling antisocial behaviour (TAB) strategy should be vigorously applied.

HP55 **Concern:** The prison reported that prisoners could access about 7.5 hours out of cell each day but our findings suggested that this was likely to be between four and five hours on average. The core day allowed limited domestic and association time.

Recommendation: Time out of cell should be significantly increased, and the core day should provide more domestic and association time and for a longer duration.

HP56 **Concern:** The application of custody planning was limited and there were inconsistencies in sentence planning.

Recommendation: All prisoners should receive effective custody or sentence planning.

HP57 **Concern:** The frequency and quality of supervisory work amongst prisoners subject to offender management and sentence planning varied greatly

Recommendation: The frequency of offender supervisors' contact with prisoners on their caseload should be agreed, and there should be casework supervision for all offender supervisors to support their work with prisoners.

Progress on main recommendations since the previous report

(The paragraph numbers at the end of each main recommendation refer to its location in the previous inspection report)

Main recommendations

MR1 The prison should introduce a Listeners scheme. (HP45)

Partially achieved. A Listeners scheme had been put into place. At the time of this inspection, 13 trained Listeners operated in most areas in the prison but prisoner access to them was limited to during the day. Prisoners could not see Listeners during the night when they were locked in their cells. Listener representatives attended the suicide prevention committee and gave a short report of their work, including times and wings where the service had been provided. Listeners had been called out on 98 occasions in 2010. There was a free direct line telephone number for prisoners to contact the Samaritans during the day and a dedicated telephone for use at night. The service was well advertised on notices around the prison, and Listeners told us that they were well supported and their work was valued.
See further recommendation 3.30.

MR2 Personal officers should support and engage with prisoners, and in particular engage proactively in anti-bullying and self-harm monitoring arrangements. (HP46)

Partially achieved. There had been improved use of personal officers in managing prisoners in crisis. For example, there was evidence in assessment, care in custody and teamwork (ACCT) self-harm monitoring documents that some personal officers took an active part in supporting prisoners at risk of self-harm, victims of bullying or those who felt vulnerable. There were also, however, examples where we were not assured that personal officers were charged with specific responsibility for some prisoners in crisis.
See main recommendation HP54.

MR3 Prisoners should have daily access to showers. (HP47)

Achieved. Each house unit had two shower rooms but most showers lacked adequate privacy screening. Prisoners usually put their name down each day to shower and some records were retained in wing occurrence books. Improvements in daily access to evening association had improved general access to showers and most prisoners told us that they could shower daily. There was also evidence on some wings that the few prisoners denied access to regime for disciplinary or operational reasons were permitted to shower during the day. In our survey, 82% of respondents said they could shower daily, against the comparator of 68%, and the 23% finding when we last visited. Standards of cleanliness and the decorative state of most shower rooms required improvement.
See housekeeping point 2.11.

MR4 Staff should be specifically trained and supported in working with young people, to develop their confidence in doing so. (HP48)

Achieved. The prison had sought to address this issue to improve relationships between staff and prisoners and influence a culture change among staff. A framework and working group had been established and there had been work to review and assimilate a variety of data and

reports about the prison. These included measuring the quality of prison life (MQPL) surveys, Independent Monitoring Board (IMB) reports and specific research reports. Staff views had also been sought through an 'organisational climate assessment', although staff engagement had proved limited. A report was produced and a number of initiatives taken. These included a staff newsletter, the piloting of motivational interviewing skills for staff and consideration of some pro-social modelling training. However, specific outcomes were difficult to identify and it appeared that the momentum in this work had been lost.

MR5 Prisoners should be able to dine in association at all times and not have to eat in cells alongside unscreened toilets. (HP49)

Achieved. Prisoners on all wings were able to dine out and in association for both the lunch and evening meal, which was commendable. Half an hour was allocated for each meal, although prisoners said that regime slippage and the controlled unlocking of prisoners reduced this.

MR6 Prisoners should have an hour's association every day. (HP50)

Achieved. The core day included two 30-minute periods for prisoners to dine in association (see above), and evening association was scheduled between 6pm and 7.45pm Monday to Thursday with additional sessions on Friday afternoons and weekends. During evening association, only 45 prisoners per wing were unlocked at a time, which meant that association was split into two 45-minute sessions, at best. On some wings, and at the discretion of staff, additional prisoners and potentially the whole wing were unlocked for the full duration of association. However, regime slippage meant that prisoners on some wings did not always achieve even the allocated 45 minutes. In our survey, 72% of respondents said that they were able to associate more than five times a week, against the 52% comparator and the finding of only 5% when we last visited. Association was rarely cancelled either during the evening or at weekends.

MR7 The provision of vocational training should be increased. (HP51)

Achieved. Prisoners had access to a good range of well-organised vocational training from entry level 3 to level 2 in a range of construction skills, industrial cleaning, horticulture, catering, renewable energy, mechanical engineering and the information and communications technology (ICT) academy.

MR8 The prison should provide more accredited qualifications for work activities. (HP52)

Achieved. Most activities had accredited training. Prisoners working in activities outside the prison's learning and skills provision, such as the farms and gardens and on the residential wings, received related training, including manual handling, health and safety, and food hygiene.

MR9 The prison should improve participation and attendance in education, training and work. (HP53)

Achieved. Participation in education had increased significantly from 40% to over 80% since the last inspection. Activity staff liaised well with prison staff to maximise attendance in sessions.

MR10 All prisoners should receive some form of custody or sentence planning. (HP54)

Partially achieved. Sentenced prisoners were subject to formal assessment under offender assessment system (OASys) and sentence planning arrangements. The prison had introduced basic custody planning for the 73 prisoners (7%) who were on remand or unsentenced. Offender supervisors, referred to as custody planning officers when undertaking this task, interviewed all remanded prisoners and assessed their resettlement needs. Where specific needs were identified, referrals were made to the relevant resettlement pathway services. Although a reasonable initiative, the application of the model was limited. Assessments were not copied to personal officers or to the prisoner himself, there was no mechanism to ensure referrals to pathways were followed up, and there was no quality assurance system to ensure consistency of delivery. Although offender supervisors were expected to review these plans bimonthly, this was rare and in most cases there was no subsequent follow up.
See main recommendation HP56.

MR11 There should be sufficient services to assist prisoners to tackle alcohol misuse. (HP55)

Achieved. Alcohol detoxification was offered to new arrivals identified as alcohol dependent. A full-time alcohol worker provided individual brief interventions, harm reduction advice and relapse prevention. Counselling, assessment, referral, advice and throughcare (CARAT) services worked with poly-drug users and alcohol-only clients. An alcohol module was included in the integrated drug treatment system (IDTS) psychosocial programme. An additional alcohol awareness resettlement group was provided weekly for up to 12 prisoners in preparation for their release, facilitated by the alcohol worker and an IDTS nurse.

MR12 Management and monitoring of the use of force should be strengthened. (HP56)

Achieved. Rigorous monitoring and management arrangements had been put in place, with strong links to violence reduction, the security committee and the senior management team. Incidents were discussed at the monthly security committee and violence reduction committee meetings. There were also weekly meetings between the head of residence and the recently appointed violence reduction coordinator to review all incidents and identify and deal with any emerging patterns and trends.

Progress on recommendations since the last report

Section 1: Arrival in custody

Courts, escorts and transfers

Expected outcomes:

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

No recommendations were made under this heading at the last inspection.

Additional information

- 1.1 The main escort contractor for courts and transfers was G4S, and journey times were relatively short, usually under two hours. The escort staff we observed were courteous and respectful to prisoners at all times. In our survey, only 5% of respondents said that the comfort of the escort van was good, against the comparator of 11%. The vans we saw were dirty and had graffiti.
- 1.2 All the prisoners we observed disembarking from escorts vans were handcuffed between the vehicle and reception which, given the short distance, was disproportionate.
- 1.3 Some prisoner records showed that prisoners had been dealt with in court during the morning but were not taken to the prison till the early evening. The prisoner escort records that we examined indicated that this happened regularly. We also observed many escort vans that arrived at the prison after 7pm.
- 1.4 Reception was closed during lunchtime so that staff could undertake other duties. Although we found no evidence that prisoners had recently arrived during this period, reception staff told us that if they did, they would not be processed until 1.30pm.

Further recommendations

- 1.5 Prisoners should only be handcuffed from the escort vehicle to reception if required by specific risks.
- 1.6 Prisoners should be escorted to the prison as soon as they have been dealt with by the courts, and escort vans should arrive at the prison before 7pm.
- 1.7 There should be arrangements to process prisoners arriving during the lunch period.

Housekeeping point

- 1.8 Escort vans should be kept clean at all times and free from graffiti.

First days in custody

Expected outcomes:

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

Reception

- 1.9 Listeners and peer support workers should be employed in reception and the first night centre. (1.22)

Achieved. Two prisoner orderlies worked in reception, one of whom was a trained peer adviser and the other was due to attend the training. No Listener worked in reception but one resided on the first night centre and occupied a Listener crisis suite.

- 1.10 There should be a range of information notices displayed in reception. (1.23)

Achieved. Notices informing prisoners of relevant policies and procedures were displayed throughout the reception area, including in the holding rooms.

- 1.11 New arrivals should be given written information about what they can expect from their first few days in custody. (1.24)

Achieved. New arrivals were given a basic information sheet on what to expect at Lancaster Farms and this was supplemented by a comprehensive induction booklet that was available in English and 10 other languages.

- 1.12 Televisions and reading material should be available in reception holding rooms. (1.25)

Partially achieved. The main large holding room in reception contained a television. There were two further smaller holding rooms, neither of which had a television, but they were used for short periods. None of the holding rooms had any reading material.

Housekeeping point

- 1.13 Reading materials should be available in all the reception holding rooms.

- 1.14 Private rooms should be available to interview new arrivals. (1.26)

Not achieved. Although there was a private room in reception, all the new arrivals we observed were interviewed at the front desk. This interview included personal details of the prisoner as well as sensitive information for the completion of the cell sharing risk assessment. None of the new arrivals we spoke to had been interviewed by reception staff in the dedicated room.

We repeat the recommendation.

Additional information

- 1.15 Approximately 150 new arrivals a month passed through reception. The area was well laid out. However, the holding rooms had graffiti engraved into the woodwork and the large holding room toilet and sink were dirty and required de-scaling and a deep clean. Showers were available but rarely used; when we tested them they were cold.
- 1.16 The searching area at the front of reception was adequately screened and private. In our survey, 85% of respondents said they were searched in reception in a respectful way, against the comparator of 78%. The searching we observed confirmed this.
- 1.17 Reception staff aimed to get new arrivals on to the wings as quickly as possible. We observed that new arrivals spent an average of one hour there. In our survey, 76% of respondents, against the comparator of 60%, said that staff treated them well in reception, and we observed a respectful team of staff.
- 1.18 Since the last inspection, two holding rooms had been converted into dining rooms, although only one was used. It contained a television and tables and chairs. New arrivals could collect a hot meal from an adequately equipped kitchen if they arrived during meal times or had missed a meal. The kitchen and the dining room were dirty.
- 1.19 Health care staff attended reception and interviewed new arrivals in a dedicated private room that enabled confidentiality. In our survey, 95% of respondents said they were seen by a member of health services in reception, against the comparator of 90%.

Housekeeping points

- 1.20 The toilet and sink in the reception holding room should be cleaned and maintained to a hygienic standard.
- 1.21 The dining room and kitchen area in reception should be cleaned and maintained to a decent standard.

First night

No recommendations were made under this heading at the last inspection.

Additional information

- 1.22 All new arrivals, except those requiring detoxification, were located on to Coniston one, the dedicated first night wing. The cells we observed were clean and ready for occupancy but they were bare with graffiti on notice boards and the duvets were dirty and stained.
- 1.23 In our survey, 84% of respondents said they were offered a reception pack, against the comparator of 92%. However, all prisoners we spoke to and those we observed were offered them.
- 1.24 All new arrivals received a flask and tea pack and were offered a free telephone call. In our survey, 74% of respondents said they were offered a telephone call on the day they arrived, against the comparator of 68%.

- 1.25 Most prisoners we spoke to said that the first opportunity they had to shower was on the afternoon of the day after they arrived. In our survey, only 13% of respondents said that they were offered a shower on the day they arrived, against the comparator of 42%.
- 1.26 All information on new arrivals was formulated into a single custody and care plan assessment, which included an initial risk assessment of needs. This risk assessment did not always take place on the day of arrival. In the documents we sampled, one-third of new arrivals were not interviewed until their second day in custody; this was unsafe (see main recommendation HP53). Although a private interview room was available for this initial risk assessment, many prisoners told us that they were interviewed in the open on the wing, in the presence of other prisoners.
- 1.27 The first night assessment was perfunctory with little exploration of significant issues. In the documents we sampled, issues for immediate action had been identified but no such action had been documented, and we were not assured the actions were always followed up. The quality of informal care we observed was better and indicated a caring approach from the first night staff.
- 1.28 All new arrivals had an identifying tag placed on their cell door handle at night, and night staff we spoke to knew who the new arrivals were.

Further recommendation

- 1.29 New arrivals should have the opportunity for a shower on the day they arrive.

Housekeeping point

- 1.30 Cells for new arrivals should be properly prepared and duvets should be clean.

Induction

- 1.31 Prisoners undergoing induction should not be locked in their cells during the core day. (1.27)

Achieved. Once new arrivals had completed their induction, they were allocated temporary work until the labour allocation board allocated them a job. All the inductees we observed during the inspection were out at work awaiting allocation. The only time they spent in cell was on Tuesday and Thursday as they awaited their education assessments, which took place on Monday, Wednesday and Friday.

Additional information

- 1.32 In our survey, 91% of respondents, compared with 80% at our last visit, said they had been on an induction course and, of these, 65%, compared with 55%, said it covered everything they needed to know about the prison.
- 1.33 Induction started the day after prisoners arrived and usually lasted one and half days. A PowerPoint presentation provided prisoners with considerable information at a rapid pace. Listener and peer support involvement was sporadic and sessions covering safer custody were not always completed, with some staff confusion about who should present this information in the absence of a Listener.

- 1.34 There was an induction carousel with relevant departments interviewing prisoners individually. This allowed all new arrivals to be seen within 24 hours and was a useful intervention. However, the session we observed took place on the open landing where the communal television was on full volume and prisoner cleaners were working.
- 1.35 Inductees were shown a programme about bullying during the first afternoon and were allowed to visit the library. As well as education assessments, there was a PE induction during the first week.

Further recommendation

- 1.36 The induction carousel should be held in a suitable environment that affords privacy.

Housekeeping points

- 1.37 Safer custody induction sessions should always take place.
- 1.38 There should be better support from peer advisers and Listeners during the induction process.

Section 2: Environment and relationships

Residential units

Expected outcomes:

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

Accommodation and facilities

2.1 Cells should be graffiti free and maintained to a reasonable standard. (2.16)

Achieved. Cells had only minor examples of graffiti.

2.2 Toilets in double cells should have privacy screening. (2.17)

Not achieved. With the exception of Windermere, where all cells were single, there were approximately 10 double cells on most wings. In all those we saw, shower curtains were used to screen toilets, which was inadequate. In single cells there was no toilet screening at all, although toilet areas were visible from door hatches.

We repeat the recommendation.

2.3 The decorative standard of cells should be consistent. (2.18)

Achieved. Some cells were stark and lacked furnishings, such as notice boards, but cell standards were generally reasonable. Nearly all were properly painted and most were reasonably well equipped. However, none had privacy locks or contained lockable cabinets.

Further recommendation

2.4 All cells should all be provided with lockable cabinets.

2.5 There should be more effective management of young people shouting out of their cells. (2.19)

Achieved. The prison's action plan sought to address this issue by confronting prisoners who engaged in such behaviour and consulting prisoners through regular forums. There was little obvious evidence of these initiatives but prisoners could now access some association each day and shouting out of windows appeared less prevalent. Some prisoners did refer to the behaviour and at least one indicated it was used to intimidate others. In our survey, 55% of respondents said that it was normally quiet enough to relax and sleep in their cell at night, compared with 46% when we last visited.

2.6 All cell bells should be answered within five minutes. (2.20)

Not achieved. The prison still had no means of electronically logging cell bells or the time it took to answer them. We were told that managers sometimes checked bell response times although evidence of this was not immediately available. Prisoners told us that staff always took too long to answer bells and believed that using the bell could often lead to warnings. In

our survey, however, 39% of respondents said their cell bell would be answered within five minutes, compared with 31% when we last visited.

2.7 The offensive display policy should be implemented. (2.21)

Not achieved. Although the prison had a clear offensive display policy, we saw many examples where it was breached, principally through the open display of soft pornography in cells. There was clear evidence that the policy was not enforced consistently.
We repeat the recommendation.

2.8 There should be sufficient staff to ensure that post is delivered to units the day it arrives. (2.22)

Achieved. Mail was delivered to the prison each morning after 9am. Prisoner mail was sorted in the mail room and subject to routine checks, including public protection measures and the censoring of 5%. Wing staff collected the mail during the early afternoon and distributed it to prisoners during the afternoon. Outgoing mail was taken to the mail room each evening but was not dispatched until about 5pm the following day. In our survey, 37% of respondents said that they had experienced problems sending or receiving mail, compared with the 46% comparator and the 47% finding when we last visited.

Additional information

2.9 The general standard of accommodation was good. The wings were open, light and spacious. Standards of cleanliness on the units and in the surrounding grounds were generally good, apart from the shower rooms (see paragraph MR3). Recreational equipment such as a large television, pool tables and table tennis were provided, as well as comfortable chairs in the wing atriums. There were four telephones on each wing, sufficient for the needs of the population.

2.10 A monthly prisoner forum was held. Minutes indicated that the forums were held consistently, reasonably well attended and covered a range of issues.

Housekeeping point

2.11 Shower rooms should be kept clean and in a good decorative state.

Clothing and possessions

2.12 Prisoners should be able to wear their own clothes. (2.23)

Not achieved. Rules concerning prisoners wearing of their own clothes were petty and restrictive. Enhanced-status prisoners could wear their own clothes but only in cell or during association. There were also inconsistencies in application. For example, some staff told us that own clothes could not be worn during communal dining. All prisoners could still retain and wear their underwear and socks.
We repeat the recommendation.

2.13 There should be sufficient prison-issue clothing, which should be of a reasonable quality. (2.24)

Not achieved. Both prisoners and staff appeared to have different interpretations of what was

permissible for prison-issue clothing, but it seemed clear that at least two sets of tracksuits as well as T-shirts were issued to all prisoners. Formal kit exchange still took place on Fridays but, as at the previous inspection, some prisoners claimed to be able to change their kit daily if they were connected to the wing cleaners, and others used the wing laundries to retain good kit once they had found it. Laundry rules were meant to restrict use to personal items and underwear, although some staff suggested they were flexible about this. Many prisoners expressed frustration at the quality of kit, in particular towels, and some staff said that kit went missing when it was sent to another prison to be laundered. In our survey, 49% of respondents said they were offered enough clean and suitable clothes for the week, against the comparator of 55% but better than the 32% finding when we last visited. Most prison-issue clothing we saw fitted prisoners, but the requirement for all to them to wear maroon tracksuits was regimented and arguably disrespectful of individuals.

Further recommendation

2.14 Access to wing laundries should be flexible and the provision of prison kit should be improved.

Staff-prisoner relationships

Expected outcomes:

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

2.15 An action plan should be developed to address the findings of the MQPL survey on staff-prisoner relationships. (2.30)

Partially achieved. An action plan had been produced and referred to an 'organisational climate assessment' survey (see paragraph MR4). However, it was mainly concerned with practical matters and outcomes rather than the underlying attitudes raised by the MQPL survey. Similarly, although it had been referred to at the prisoner consultative committee, the recorded discussions were limited.

2.16 Staff should address prisoners by their titles or preferred names. (2.31)

Not achieved. This element of respect was not well embedded. We saw preferred names often used in written communications and first names were sometimes used in one-to-one interactions but most staff still appeared to lack the confidence to address prisoners properly. **We repeat the recommendation.**

2.17 Information notices for prisoners should be easy to read and constructive. (2.32)

Achieved. Most notices to prisoners were now written with reasonable standards of courtesy and respect.

Additional information

- 2.18 Staff-prisoner relationships in general had improved. In our survey, 75% of respondents said that staff treated them with respect, against the 67% comparator and the 63% finding when we last visited. Similarly, 78% said there was a member of staff they could turn to if they had a problem, which was significantly better than the comparator. These views were consistent with observations by prisoners during our qualitative research during the inspection. Prisoners found staff reasonably supportive and that the treatment they received was reasonable. Views about the quality of interaction were more mixed although there was no evidence that prisoners felt threatened or intimidated by staff.
- 2.19 Our own discussions with prisoners suggested some ambivalence by prisoners toward staff and there was some evidence that prisoners found staff unreliable. Many, however, argued that one-to-one relationships with individual staff were good.
- 2.20 Our own observations were generally positive. We observed some staff behave in a dismissive or disrespectful way, although this was the exception and no longer as pervasive as at the last inspection. However, staff remained negative about what could be achieved with young people. Their interactions with young people seemed to be influenced by the need for control and the avoidance of risk, and aspirations for what could be achieved were still limited. The general approach of staff was improving, however. We saw much more constructive engagement during this inspection, and both prisoners and staff seemed more relaxed in each other's company. Staff knowledge of individuals was often impressive.

Personal officers

Expected outcomes:

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

- 2.21 **There should be a clear distinction between the roles of personal officer and offender supervisor. (2.38)**

Achieved. The distinction between the roles of personal officer and offender supervisors was clearer and was stated formally in role briefs recorded in the personal officer policy. However, the contribution of personal officers to sentence planning varied greatly, although their involvement was a requirement of the policy. Their involvement was mostly due to the initiative of the offender supervisor approaching them for their views rather than as a consequence of systematic and active case management by personal officers.

- 2.22 **Management checks of prisoners' unit files should focus on the quality of entries rather than the process. (2.39)**

Not achieved. The personal officer policy provided clear guidance to senior officers on their responsibilities, including the requirement to ensure meaningful quality assurance. The P-Nomis files we sampled indicated that management checks took place, although their frequency was limited, as were the comments provided. Despite this, and in the context of a local prison, entries by personal officers were often better than we usually see. There was variation in the quality of entries and the requirement to make entries at least fortnightly was not always achieved. In many examples, however, notes suggested a reasonably rounded

knowledge of individuals and interest in their circumstances. There was evidence of communication and engagement, and achievements were noted as well as warnings and concerns.

Additional information

- 2.23 The comprehensive personal officer policy clearly identified the responsibilities of personal officers. Personal officers were usually assigned to individual prisoners on the basis of their availability when a prisoner arrived on a wing, rather than by a particular cell. This encouraged the continuity of engagement, although personal officers were also assigned to small teams within groups to ensure cover during staff absence. Some case notes showed that personal officers had organised and communicated cover arrangements for specific prisoners when they knew they were going to be away.
- 2.24 Personal officers were identified on cell cards and the scheme was reasonably well promoted on the wings. Each wing office had a simple card or visible board that identified officers and prisoners, as well as cover arrangements.
- 2.25 Most prisoners could identify their personal officer and most seemed content with the help they received, although views were mixed. In our survey, only 66% of respondents said they had a personal officer, against the 75% comparator, and responses on the usefulness of personal officers were consistent with the comparator and findings when we last visited. In research during the inspection, all prisoners questioned said they had a personal officer and few said they had not spoken with their personal officer, but each had another member of staff they went to if they had any problem. The majority said their personal officers understood their situation and needs and helped them to get the advice or support they needed. Comments portrayed these individual staff as receptive and willing to help.

Section 3: Duty of care

Bullying and violence reduction

Expected outcomes:

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

- 3.1 The violence reduction committee should identify, manage and monitor annual objectives against an agreed timescale. (3.10)

Achieved. While the violence reduction policy document set out the broader strategy (see additional information below), an action plan had been drawn up to deal with identified problems as they occurred. For example, following identification of the route to prisoner activities as a hot spot for fights and assaults, supervision of the area had been increased. In such instances, individuals responsible for implementing required action had been identified and timescales for completion set.

- 3.2 Information collated by the violence reduction committee should include use of force and unexplained injuries. (3.11)

Achieved. There had been improvements in this area. The recently appointed violence reduction coordinator gave the violence committee a regular report on the level and nature of all incidents involving the use of force (see also paragraph 7.24), and the safer custody administration officer submitted an analysis of the number of unexplained injuries (see additional information below).

- 3.3 Violence-related data should be compared for patterns and trends over time, and submitted for analysis to the violence reduction committee. (3.12)

Partially achieved. The safer custody administration officer had created a database of violent incidents, including their nature, location and names of perpetrators, mainly based on information from adjudication data, some unexplained injuries and the number of fights and assaults reported through the security incident reporting system. Information from wing observation books, prisoners' formal complaints and security information reports was not consistently presented to the violence reduction committee for analysis.

Housekeeping point

- 3.4 A wider range of violence-related data should be collated and submitted to the violence reduction committee for analysis.

- 3.5 Tackling antisocial behaviour (TAB) procedures should be quality assured, and this should be evaluated through the violence reduction committee. (3.13)

Partially achieved. Although the violence reduction coordinator and residential senior officers sometimes checked the quality of TAB procedures, there was no evidence that this had had an

affect on improving the system. In practice, the quality of entries in TAB documents was poor and did not show that officers were focused on relevant issues. There was no evidence that the violence reduction committee was quality assuring documents.

Further recommendation

- 3.6 The quality of entries in tackling antisocial behaviour (TAB) documents should be improved and the violence reduction committee should quality assure them.

Additional information

- 3.7 The violence reduction policy document had been reviewed and published. Although it explained in detail the principles, procedures and management arrangements that supported an overarching violence reduction strategy, it was not based on a detailed analysis of the specific patterns of violence in the prison. Many staff we spoke to were unaware of its content in terms of their responsibilities and the application of some protocols, particularly measures to address intimidation and other forms of bullying.
- 3.8 A safer custody staff team consisting of a full-time suicide prevention coordinator, a part-time violence reduction coordinator and an administration support worker had been appointed to monitor, review and supervise the implementation of violence reduction, including suicide prevention, on a day-to-day basis. The team was directly accountable to the safer custody manager (the head of residence) who led both the violence reduction and suicide prevention committees.
- 3.9 A separate violence reduction/anti-bullying committee met monthly to monitor the implementation of the policy and update the overall strategy as required. Attendance at meetings was reasonable and included representation from residential units, the psychology department, security and the violence reduction coordinator.
- 3.10 The number of violent incidents was high at over 200 in the previous six months. Although most were minor fights that did not result in serious injuries, a significant number were serious and some involved the use of weapons. For example, during the week of inspection there were two assaults involving weapons and another where a prisoner required hospital treatment.
- 3.11 The role of the violence reduction coordinator was to supervise the implementation of the violence reduction strategy on a day-to-day basis and support staff in the implementation of tackling antisocial behaviour. In practice, we found that protocols for the application of violence reduction initiatives were not followed consistently and there was no effective supervision of processes. Residential officers and managers relied too much on the coordinator to ensure that all elements of policy and strategy were carried out properly. When he was absent, many of these duties were not carried out (see main recommendation HP54). The quality of investigations into alleged violence was often poor and in many cases was cursory and did not fully address the important issues. Many allegations or suspicions of bullying, particularly those identified through wing occurrence books and security information reports, were not investigated at all.
- 3.12 Tackling antisocial behaviour (TAB) protocols had been reviewed since the last inspection. The aim of TAB as explained in the violence reduction policy document was to address all elements of antisocial behaviour, not only bullying, and to support victims. There were two

separate TAB documents – one to deal with antisocial behaviour (TAB action) and one to support victims (TAB support).

- 3.13 There was a three-stage system to deal with perpetrators through monitoring of those suspected of bullying (TAB action stage one), tackle immediate antisocial behaviour (TAB action stage two) and deal with persistent anti-bullying behaviour (TAB action stage three). Prisoners on stage one were monitored for a minimum of seven days and then formally reviewed. The TAB procedures also allowed for prisoners to be placed on the basic regime for a minimum of 28 days with reviews every week. Behaviour targets were set and monitored by residential officers. If poor behaviour continued, the prisoner was usually transferred to the segregation unit and managed there or transferred to another prison.
- 3.14 We found that TAB action documents were used nearly exclusively for a small number of suspected bullying incidents with little to deal with the central issues. The quality of officer entries in documentation was poor and there was little evidence that staff were actively engaged in the day-to-day management of alleged bullies. Behaviour improvement targets, when set, were crude, predominately centred on compliance to the wing regime and mirrored those set for all other prisoners on the basic regime level. The number of prisoners on formal anti-bullying measures was disproportionately low compared with the number of reported violent incident. For example, only four prisoners were on open TAB action documents at the time of inspection
- 3.15 Support for victims was also underdeveloped. Only seven TAB support documents had been opened in the previous five months. The quality of these was generally poor. Entries from staff did not give assurance that they knew about the important issues and, apart from extra observation, little structured support was offered.

Further recommendations

- 3.16 The prison should take specific steps to reduce the number of fights and assaults.
- 3.17 The quality of investigation into all violent incidents should be improved.
- 3.18 Support for the victims of violence should be better developed.

Self-harm and suicide

Expected outcomes:

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

- 3.19 Assessment, care in custody and teamwork (ACCT) assessors should be identified and publicised in advance, and the prison should ensure that there is always a main assessor and back up. (3.25)

Achieved. A rota of duty ACCT assessors was published each week and included a main assessor and back up.

3.20 The suicide and self-harm committee should analyse the monthly data to increase understanding and the management of risks. (3.26)

Achieved. The suicide prevention committee used information, provided by the suicide prevention coordinator, to identify trends and patterns of behaviour in terms of type, timing and peripheral circumstances of individual incidents. This was used to identify particular areas of risk and develop the strategy.

3.21 There should be effective quality control of ACCTs to improve the effectiveness of the process. (3.27)

Achieved. The suicide prevention coordinator made regular management checks of the quality of entries in documents. The quality of entries we saw was generally very good. Most demonstrated an appropriate depth of understanding of the individual circumstances and feelings of prisoners, and there was regular involvement from the mental health in-reach team in dealing with more complicated cases.

3.22 ACCT case reviews should be scheduled well in advance, should ensure continuity of case managers and should be multidisciplinary. (3.28)

Achieved. Case reviews were scheduled, advertised in advance and happened on time.

3.23 Prisoners on ACCTs should have individualised care maps to meet their needs. (3.29)

Achieved. Detailed support plans, prepared through consultation with the prisoner, identified specific needs and apportioned responsibilities to a nominated key worker. The quality of plans was generally better than we usually see. Case management through a multidisciplinary team of mental health workers and prison staff of all grades was effective, and the levels of care we observed were of a very high standard. The progress of plans was reviewed at scheduled times in agreement with the prisoner

3.24 Near-death incidents should be fully investigated and learning points incorporated into subsequent action plans. (3.30)

Achieved. All incidents of self-harm were reviewed by the safer custody team and reported to the suicide prevention committee. Information from these reviews was used to update the overall strategy.

Additional information

3.25 A comprehensive suicide prevention strategy specific to the needs of young prisoners had been published and given a high profile. We found copies on all residential units, in reception and in the education department.

3.26 The separate suicide and self-harm prevention committee monitored the implementation of the strategy at monthly meetings. Minutes showed that individual cases were appropriately discussed and the specific needs of prisoners were met consistently.

3.27 The competent suicide prevention/violence reduction coordinator managed protocols with solid support from the head of safer prisons and residential unit managers. In addition to his

responsibilities for ensuring that procedures to manage prisoners at risk from self-harm were properly implemented, he was also a centre point for advice and guidance for staff and prisoners. The role was given a high profile and was understood throughout the prison.

- 3.28 There had been 144 ACCT documents opened between January and the end of May 2011. This was high, at about 28 a month, and an increase of about 50% compared with the same period in 2010. Most (about 54%) were opened on the induction unit on Coniston one or in the health care centre and during the prisoner's first week in custody. They were usually open for about two weeks, although one case in the health care centre had remained opened for more than two months.
- 3.29 The number of self-harm incidents was relatively low at about 35 in the previous six months, over a third of which were attributed to two prisoners.

Further recommendation

- 3.30 Prisoners should have 24-hour access to Listeners.

Applications and complaints

Expected outcomes:

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

- 3.31 **All applications should be logged and prisoners given a receipt as proof of submission. (3.74)**

Achieved. A recently introduced three-part application form allowed staff to monitor the progress of applications by timeliness and outcomes, and give the prisoner a receipt as proof of submission. The prisoner retained one part, one was kept by residential staff and one was sent to the relevant area to be dealt with. This allowed staff and prisoners to track the time it took for the application to be processed.

- 3.32 **There should be a timescale for responses to applications. (3.75)**

Achieved. We were told that a three-day timescale had been introduced to ensure that applications were dealt with quickly. Although we could find no evidence that this was the case, most applications we examined had been completed within a week. Prisoners were generally positive about the promptness of the system. In our survey, 58% of respondents said that their applications were dealt with promptly, against the comparator of 46% and the finding of 47% at the last inspection.

- 3.33 **Quality assurance of applications should be introduced. (3.76)**

Achieved. Residential managers checked that applications were dealt with fairly and promptly. The head of residence also conducted less regular checks. The quality of replies to applications that we examined was generally good and dealt reasonably quickly with simple issues.

3.34 Interim replies to complaints should include timescales for responses. (3.77)

Achieved. Prisoners were given interim replies for more complicated cases and a target conclusion date. Most (about 90%) were responded to within three working days of receipt.

3.35 All complaints that indicate a racial or bullying aspect should be forwarded to the appropriate department for investigation. (3.78)

Achieved. There was evidence that all complaints with a racial dimension were delivered to the race equality officer for investigation.

Additional information

3.36 Application forms were freely available on all the residential units. Information about how to make formal applications was included in the induction programme and reinforced through published notices. Nominated officers on residential units collected completed forms twice a day.

3.37 Complaint forms were also readily available. Prisoners could deposit completed forms in secure boxes located away from staff offices on their residential units. Forms were collected every evening, but by prison officer grades rather than the nominated complaints clerk.

3.38 The recording, managing and investigation of complaints had improved. A complaints clerk logged all complaints and ensured that they were dispatched expeditiously to relevant managers to deal with. Confidential complaints about staff treatment were logged separately and dealt with directly by the governor or other designated senior managers.

3.39 The complaints forms we examined showed that managers took allegations by prisoners seriously, and there was evidence that they were fully investigated. The overall quality of responses was generally very good and showed a marked improvement since the last inspection. On the whole, they were respectful and addressed the issues raised. The complaints manager and senior residential governor made regular quality assurance checks, and challenged poor responses by staff.

Housekeeping point

3.40 The nominated complaints clerk should collect complaint forms from locked boxes on wings.

Legal rights

Expected outcomes:

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

3.41 There should be cover arrangements to provide bail information in the absence of the bail information officer. (3.83)

Achieved. This work was covered by a probation officer from the establishment for short periods of absence and by a probation officer from HMP Preston for longer periods.

3.42 A trained legal services officer should see new arrivals within 24 hours. (3.84)

Achieved. A legal services officer carried out a one-to-one interview with new arrivals on the morning after their arrival. Case history notes were updated after this interview with any significant issues highlighted.

3.43 Prisoners attending legal visits should not have to wear boiler suits. (3.85)

Partially achieved. Prisoners were no longer required to wear boiler suits during visits but they had to wear bibs (see further recommendation 9.63).

Additional information

3.44 Two fully trained officers and five who had received shadow training were available to carry out legal services work five days a week. This included advice and referral as well as assisting prisoners with understanding and replying to legal documentation. Up-to-date legal reference materials were available in the library.

3.45 In our survey, 66% of respondents said it was easy to attend legal visits, against the comparator of 51%, and 41% said it was easy to communicate with their legal representative, compared with 32% at our last inspection.

3.46 Legal visits could be booked for every weekday morning and five sessions each afternoon from Monday to Thursday. Booths gave privacy for visits.

Faith and religious activity

Expected outcomes:

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

3.47 There should be a larger multi-faith room to accommodate the expanding Muslim population. (5.37)

Achieved. There was a new multi-faith room on the upper level of the chaplaincy that was of an adequate size and suitable for purpose. A concertina door allowed the capacity of the room to be doubled if required.

3.48 Chaplains should attend ACCT self-harm monitoring reviews for prisoners with whom they have been involved. (5.38)

Achieved. The coordinating chaplain and the ecumenical chaplain were both ACCT assessors, and a chaplain attended case reviews for all prisoners on an ACCT who were involved with the chaplaincy. The chaplaincy also saw every prisoner who was on an ACCT at least once a week, and attended case reviews for prisoners not involved with the chaplaincy when that was deemed appropriate as part of their individual care plan.

Additional information

- 3.49 The chaplaincy team consisted of a full-time coordinating Catholic chaplain, a full-time ecumenical chaplain, a part-time Church of England chaplain and a sessional Muslim chaplain. A regional Buddhist chaplain provided two hours every two weeks. The chaplaincy team was cohesive and worked well together.
- 3.50 There was corporate worship for Catholic, Anglican and Muslim prisoners. Attendance at services varied between 15 and 30 prisoners. Prisoners were required to make an application to attend a service the day before, and the list was sent to the security department.
- 3.51 Facilities in the chapel were good. A large and bright Christian chapel could facilitate up to 50 worshippers. The multi-faith room was appropriate, and a separate group room was well laid out with soft furnishings.
- 3.52 There were weekly group sessions for Catholic, Anglican and Muslim prisoners as well as a faith group for prisoners finding it hard to cope in prison. On an average week, the chaplaincy team recorded 170 prisoner contact hours.

Housekeeping point

- 3.53 Prisoners should be able to attend faith services on the day without making an application 24 hours in advance.

Substance use

Expected outcomes:

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

Clinical management

- 3.54 The prison should develop a detoxification strategy, and the prison and the primary care trust should develop appropriate protocols, procedures and staff expertise to ensure the clinical management of drug-dependent prisoners at all times. (3.91)

Achieved. All appropriate clinical protocols were in place. There were appropriately qualified integrated drug treatment system (IDTS) nurses overseen by the provider health care clinical lead.

Additional information

- 3.55 IDTS had gone live in November 2010. The number of prisoners who required clinical management for substance misuse problems was low, at six drug and 16 alcohol patients since November 2010. The IDTS team was developing a hepatitis clinic and engaged with prisoners to give harm reduction advice.

- 3.56 IDTS staff carried out second assessments of new arrivals on their second day to ensure that all drug- and alcohol-related issues were addressed.
- 3.57 We had a slight concern that, in the absence of a heavy caseload, the IDTS team's psychosocially-based work might have led to an unnecessary overlap with that of the CARAT team, which could cause confusion among prisoners about the roles of the two departments.

Drug testing

- 3.58 **All mandatory drug test (MDT) holding rooms should be adequately ventilated, and should display information on drugs, blood-borne viruses and all related services. (3.92)**

Partially achieved. Individual holding cells for MDT had no forced or through-flow ventilation and, although there were large gaps under the doors, this was inadequate. There was a well-stocked notice board in the waiting room.

Housekeeping point

- 3.59 All mandatory drug test (MDT) holding rooms should be adequately ventilated.

- 3.60 **MDT (including suspicion and reception testing) should be adequately staffed to ensure that all testing is carried out appropriately, within identified timescales and without gaps in provision. (3.93)**

Achieved. Tests were completed on time and to target.

Additional information

- 3.61 The positive random mandatory drug testing rate for October to April 2010 was 5.6% against a target of 8%. In the six months to April 2011, 80 suspicion tests were completed with a positive rate of 43.3%. Random and suspicion test results showed that cannabis was the main illicit drug. The MDT suite was clean and appropriately equipped.

Section 4: Diversity

Expected outcomes:

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

Diversity

4.1 The diversity policy should be published. (3.36)

Not achieved. There was no copy of what was an up to date diversity policy in the library or on the residential wings, and staff and prisoners we spoke to were unaware of it.

We repeat the recommendation.

4.2 The diversity committee should focus on issues relating to prisoners. (3.37)

Achieved. The prison had just moved to a diversity and equality action team (DEAT) that replaced the race equality action team. The diversity policy and subsequent work before and after the transition focused on outcomes for prisoners for the different strands of diversity.

4.3 There should be an action plan to address issues of disability and sexuality. (3.39)

Partially achieved. There were comprehensive action plans for both disability and sexuality. Actions in the disability plan were specific, measurable, achievable, realistic and time bound. The sexual orientation action plan was perfunctory and required further development.

Further recommendation

4.4 The sexual orientation action plan should be further developed.

Additional information

4.5 In the week before the inspection, the prison had moved from a race equality action team (REAT) to a diversity equality action team (DEAT). The REAT had met every two months; at the time of the inspection, the first DEAT was still to take place. The prison had also moved to the new discrimination incident reporting form in line with Prison Service policy (see paragraph 4.17).

4.6 There was an up-to-date diversity policy that was prisoner oriented. A full-time diversity manager was supported by two full-time staff who undertook the roles of race equality and foreign nationals officers. Photographs of the team were published throughout the prison.

4.7 Prisoner diversity representatives had been identified and trained; 20 were employed at the time of the inspection. Those we spoke to had an understanding of their role and felt supported by the prison. Staff diversity and equality representatives were identified in some key areas, such as residential, education and segregation.

- 4.8 Some staff had undertaken 'challenge it change' diversity training and 70% had completed it so far. Religious and cultural events were advertised across the prison and celebrated throughout the year with the participation of staff and prisoners. Events during 2010 had included holocaust memorial day, black history month and Gypsy, Traveller, Roma history month. Gypsy and Traveller prisoners were supported through the chaplaincy department.
- 4.9 The prison had completed several single equality impact assessments during 2010/11, all of which had been prioritised by the REAT, and there was a programme for 2011/12. The quality of assessments was good and included consultation with prisoners through focus groups and external partners. The findings were balanced and proportionate, and they were further supported by time-bound action plans.

Race equality

- 4.10 **There should be analysis of the negative views expressed by prisoners from a black and minority ethnic background. (3.50)**

Achieved. Prisoner race diversity representatives, who ranged between a minimum of eight and a maximum of 20 at a time, gathered the views of black and minority ethnic prisoners and met as a group every two months for a formal prisoner race equality forum. A member of the diversity team chaired the meetings and the minutes indicated that they were a useful means of analysing all aspects of the care and conditions for black and minority ethnic prisoners. Prisoner representatives also attended the wider diversity/race equality action team meeting.

- 4.11 **The trend analysis conducted for the race equality action team meeting should be supplemented by survey work on areas of concern. (3.51)**

Achieved. There was evidence of good quality analysis of areas identified through SMART (systematic monitoring and analysing of race equality treatment) monitoring as being out of range for black and minority ethnic prisoners. In one example, when offending behaviour programmes were identified as out of range, there was a detailed look at the needs of those available to undertake the work. This showed that participation had been based on the need of individual prisoners and not on discrimination.

- 4.12 **Prisoners from a black and minority ethnic background should be consulted about the racist incident complaints system and their confidence in it. (3.52)**

Achieved. Prisoner diversity representatives had attended REAT meetings and their own race equality forum (see paragraph 4.10), which had both discussed racist incidents, with the names of those involved redacted to ensure confidentiality.

- 4.13 **Prisoners from a black and minority ethnic background should have the opportunity to use an appropriate hairdresser. (3.53)**

Achieved. The hairdresser that the prison used was qualified appropriately.

Additional information

- 4.14 The black and minority ethnic population was 15%. In our survey, responses from black and minority ethnic prisoners were broadly the same as white respondents, except that 96%, compared with 71% of white respondents, said that they felt respected by staff. In our prisoner groups, black and minority ethnic prisoners said that they generally felt treated well by staff.

- 4.15 There was a comprehensive race equality policy that had recently been reviewed. The deputy governor had overall responsibility for race, but the governor was focused on the issues and published notices concerning race and other diversity strands.
- 4.16 The REAT had been well attended by representatives from all areas of the prison, including prisoner diversity representatives, and had been supported by a meaningful race equality action plan.
- 4.17 In the week before the inspection, the prison had moved from racist incident report forms (RIRFs) to discrimination incident report forms (DIRF). DIRFs were freely available on all the wings and in visits, and during the inspection two had been submitted by prisoners. There was a feedback form for the originator of the form to respond once the form was closed.
- 4.18 In the previous six months, 34 RIRFs had been submitted, which was a projected decrease on the 95 submitted in 2010. Two-thirds of those submitted in 2011 were prisoner-on-prisoner complaints. Most RIRFs indicated low-level racist incidents, such as racist words in letters, name-calling etc.
- 4.19 Quality assurance of RIRFs was robust with each form analysed by the deputy governor. There was also independent external scrutiny through Lancaster Police. We evaluated 30 RIRFs submitted in the last 12 months. Their quality was generally good and investigations were appropriate and thorough.
- 4.20 A log was maintained, and shared with security staff, of any prisoner demonstrating racist views or who had been convicted of a racially motivated offence. The race equality officer interviewed those identified.

Religion

No recommendations were made under this heading at the last inspection.

Additional information

- 4.21 One of the chaplains attended the monthly REAT meeting and monitoring figures indicated that there was sufficient access to religious support for all religious denominations. There was an action plan to ensure equity for prisoners from all religions. There were 34 prisoners registered as Muslim (6.6% of the population). The Muslim chaplain spoke positively of the outcomes for Muslim prisoners. The coordinating chaplain and Muslim chaplain facilitated monthly faith awareness training for staff, which 88 directly employed staff had received.

Foreign nationals

- 4.22 **All the requirements set out in the foreign national policy should all be implemented. (3.62)**

Achieved. There was a comprehensive and succinct foreign national prisoner policy that had recently been reviewed. All the requirements set out in the policy, such as translation, communication and information, were implemented and adhered to.

- 4.23 **The foreign national coordinator should receive specialist training. (3.63)**

Achieved. The foreign national coordinator and foreign national clerk had received training

from the United Kingdom Border Agency (UKBA) and shadow training at two other establishments that held a large number of foreign national prisoners.

4.24 All foreign national prisoners should be interviewed within 24 hours of their arrival. (3.64)

Achieved. The foreign national coordinator saw and interviewed all foreign national prisoners who arrived on a weekday, and saw those who arrived at the weekend on the Monday.

4.25 There should be stronger links with appropriate community organisations that can offer a range of relevant support to foreign nationals. (3.65)

Not achieved. The prison had limited links with community organisations that could offer independent support to foreign national prisoners.
We repeat the recommendation.

4.26 Foreign national prisoners should be able to meet in a group setting to share information and provide support. (3.66)

Partially achieved. The prison facilitated a foreign national prisoners forum and six had been held during the previous 12 months. The meeting combined immigration and custodial matters and the minutes reflected a purposeful meeting. Some foreign national prisoners we spoke to however expressed concerns at feeling isolated and this had not been explored within the forum.

4.27 Foreign national prisoners whose sentence has expired should be offered specialist advice and guidance to ensure these cases are expedited efficiently. (3.67)

Achieved. There was only one prisoner held past his sentence expiry during the inspection. The prison had developed good links to provide specialist legal advice, as well as UKBA which prioritised post-sentence expiry prisoners during their visits to Lancaster Farms.

Additional information

4.28 Lancaster Farms was a 'spoke' prison, designated to hold foreign national prisoners with regular visits from UKBA staff. At the time of the inspection, it held only 13 foreign national prisoners, who were dispersed throughout the establishment. UKBA usually visited every month. There was no formal multidisciplinary committee but it was envisaged that foreign national matters would form part of the newly integrated DEAT.

4.29 In our groups, foreign national prisoners said they felt isolated, that information was generally available in English only and, despite a well-attended forum, some cited the lack of independent advice as a cause for concern.

4.30 The prison had a list of multilingual prisoners and staff who could offer informal interpreting. Professional telephone interpreting services were also used regularly.

Further recommendations

4.31 There should be more analysis and better understanding of the negative views expressed by foreign national prisoners.

4.32 Information should be available for prisoners in a range of languages.

Disability

4.33 The prison should adapt cells to accommodate prisoners with disabilities. (3.38)

Not achieved. No cells had been adapted for prisoners with disabilities or mobility problems. The prison had attempted to secure funding for this work but had been unsuccessful.
We repeat the recommendation.

Additional information

4.34 In our survey, 13% of respondents indicated that they had a disability, which suggested that over 65 prisoners regarded themselves as disabled. The prison had an impressive identification process for prisoners declaring a disability that included a health care interview on the first night, a family link interview on induction and a quarterly disability survey. The prison recorded 110 prisoners as having a disability.

4.35 A disability action group met quarterly. It consisted of staff from a wide range of departments and the minutes indicated a good quality meeting. The prison had recently commissioned an independent site survey in line with the Disability Discrimination Act.

4.36 The prison had made reasonable adjustments for prisoners with disabilities. We observed a prisoner with hearing difficulties who had been issued with a hearing loop to assist him. During the inspection, no prisoners required a personal emergency and evacuation plan (PEEP) but previous PEEPs indicated that the document was meaningful and identified staff assistance in an emergency.

Gender and sexual orientation

Additional information

4.37 In our survey, no respondents declared that they were gay or bisexual. In 2010, the prison had facilitated a support group for a few gay and bisexual prisoners held at the time. Two meetings were held and staff from the diversity team attended along with prisoners. Condoms, dental dams and water-based lubricants were available on request. The prison had links with Stonewall, whose posters were displayed throughout the prison.

4.38 One prisoner was contemplating gender reassignment and the prison had put in place a support mechanism through a local support group.

Section 5: Health services

Expected outcomes:

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

General

- 5.1 The clinical services coordinator should be a member of the prison partnership board. (4.60)

Achieved The clinical services coordinator was a member of the prison partnership board and the prison senior management team

- 5.2 The inpatient beds should be removed from the prison's certified normal accommodation. (4.61)

Achieved. The 11 inpatient beds had been removed from the prison's certified normal accommodation but the primary care trust (PCT) had announced a funding reduction that would result in closure of the inpatient unit.

- 5.3 Contract cleaning that meets NHS standards should be extended to all health care areas. (4.62)

Not achieved The PCT had recently agreed to fund some additional cleaning to meet NHS standards for clinical areas. This had not yet started but was already at risk following the announcement of funding reductions.

We repeat the recommendation.

- 5.4 Hand washing facilities in all health care areas should meet infection control requirements. (4.63)

Partially achieved. The treatment/consulting rooms in the main health care centre and the wing clinical treatment rooms had appropriate hand washing facilities, but the wing health care rooms had no hand washing facilities, which was a risk.

We repeat the recommendation as a housekeeping point.

- 5.5 Health rooms should be identified on residential units, which include interviewing facilities for in-reach staff. (4.69)

Achieved. There were clinical rooms on the wings where in-reach staff could see prisoners privately.

Additional information

- 5.6 Health services were commissioned by NHS North Lancashire PCT, which also provided prison nursing services and coordinated sub-contracts with GP, dental, optician, podiatry and outreach sexual health services. During our visit, the PCT formally notified the prison of a

significant budget reduction, which would result in closure of the inpatient unit and other major changes. A health needs assessment was being undertaken as a joint assessment spanning the five prisons in the cluster.

- 5.7 Health care was largely delivered in the primary care centre with supervised medications and sick reporting provided on the residential wings. We noted good communication between health professionals and prisoners.
- 5.8 The primary care centre included two multi-purpose consulting rooms, a dispensary/main treatment room, several offices, a waiting area with adjacent enclosed nurses station, toilets and a dental suite. All were clean and in good decorative order with appropriate arrangements for privacy. There were treatment rooms on the second floor of the residential wings and consulting rooms on the ground floor. The treatment room on Coniston one (induction wing) was used for secondary assessments.
- 5.9 A current health promotion action plan was suitably focused and enabled monitoring against progress. Age- and gender-appropriate health promotion literature was available in the primary care waiting area and inpatient unit.
- 5.10 There was a quarterly prison partnership meeting covering HMYOI Lancaster Farms and HMP Kirkham.

Clinical governance

- 5.11 **Clinical supervision should be formally adopted and documented. (4.64)**

Achieved. There was a robust policy and all the nurses we spoke to were familiar with how to access clinical supervision and who their supervisor was. There was a blend of group work and individual sessions, which were recorded.
- 5.12 **Regular health care providers, such as the dentist and the GP, should attend health care team meetings. (4.65)**

Achieved. All health care providers were invited to the monthly health operational group meeting. This meeting, which also included representatives from learning and skills, diversity and resettlement, provided a useful forum for the exchange of issues and agreed actions.
- 5.13 **There should be a regular health care forum for prisoners, led by a senior nurse. (4.67)**

Achieved. Although there was no dedicated forum, there was a designated health care slot in the general prisoner forum and appropriate health care representation.
- 5.14 **Clinical record keeping should be either paper or electronic to avoid duplication. (4.73)**

Achieved. The SystemOne health IT system had been introduced approximately four months previously but was well embedded and used effectively. All health professionals used SystemOne, including the dentist and the mental health in-reach team, and recording was accurate and complete. The administrative staff were able to request and generate useful performance data. One nurse led on identifying the need for and design of templates, which provided efficient and consistent documentation.

- 5.15 Incident and error reports should be copied to relevant health professionals to enable proper reviews of incidents and action on any learning points to prevent similar errors in the future. Feedback should be sought from the risk management team at the PCT. (4.81)

Achieved. Serious untoward incidents were well managed with effective reporting and review mechanisms through twice monthly staff meetings, monthly health operational group meetings and provider and commissioner governance mechanisms. The 'root-cause analysis' tool was used to identify failures and vital learning from serious incidents.

Good practice

- 5.16 *Serious health care incidents were analysed effectively to identify failings and enable staff to learn from errors.*

Additional information

- 5.17 Health services were well managed and coordinated by a band 8a clinical services coordinator. The nursing skill mix included registered general, registered mental health and registered learning disability nurses. Health services had an effective relationship with the prison, led by the clinical services coordinator and governing governor working in partnership on key issues. Health care staff regularly attended safer custody, prisoner forum, resettlement and drug strategy meetings. Primary and in-reach nursing staff attended ACCT reviews for individual prisoners as appropriate.
- 5.18 Training for staff was well managed and training needs were identified, prioritised and monitored. There was a wide range of applicable and up-to-date policies on the PCT's intranet.
- 5.19 Resuscitation equipment was sited in the primary care centre and the inpatient unit. There were weekly and post-use checks of all the equipment, which were logged. All nursing staff had completed basic life support and defibrillator training in the last year. Only about a quarter of all discipline staff had completed first aid training in the last year.
- 5.20 Complaints were managed through the prison system and accounted for approximately 5% of all prison complaints. Responses were from senior nurses and were clear and respectful, with apologies where appropriate.

Further recommendation

- 5.21 All discipline staff should have annual first aid and basic life support skills training.

Primary care

- 5.22 **Barrier protection should be available to prisoners in prison and on their release. (4.68)**

Achieved. Prisoners could obtain condoms, dental dams and lubricant from health care staff during their stay and on release. They signed a condom compact agreeing to refrain from trading or misusing condoms.

5.23 The waiting list for the optician should be reduced and be subject to nurse triage by appropriately training staff. (4.76)

Achieved. There was one session a month. At the time of our visit, there was a waiting list of 21, the longest for six weeks. We met one prisoner who had waited three weeks to see the optician and then received his new spectacles within a week, which was broadly equivalent to the service in the community.

Additional information

- 5.24** Health care staff saw all new arrivals for a reception screening in the health care room, which was suitably private, with referrals made as required. Prisoners were asked if they had a disability and, if this was indicated, they had a further more detailed assessment. A secondary assessment was completed within 24 hours and there was timely follow-through and referrals to the GP, CARATs and other departments as appropriate – for example, one new arrival's food allergy was referred to the kitchen.
- 5.25** Prisoners applied for a health care appointment through a form or by asking the nurses at medication times. The form was clear, with picture icons for the different health professionals, and was available on the wings. There were specific health care application boxes on the wings and a health care support worker collected the forms every day.
- 5.26** Prisoners were not told of their health care appointment until they were called in the morning, and did not know why they were attending until they arrived at health care. Prisoners we spoke to found this frustrating, and it led some to miss appointments. We observed one young man taken for a dental appointment who did not know why he was attending health care and then refused to see the dentist for his appointment.
- 5.27** There was a daily GP clinic. Prisoners waited two days on average for routine appointments but could see a GP the same day for urgent issues. Consultations were sensitively conducted and clinically appropriate. Where possible, prisoners saw the same GP to ensure continuity. We observed the GP listening to one young man with low-level anxiety and depression and acting to ensure his safety and welfare. The local GP out-of-hours service provided emergency cover.
- 5.28** There were nurse-led clinics for hepatitis immunisation, asthma, diabetes and chlamydia screening. Sexual health services were provided weekly by the PCT but the service was compromised by difficulties in ensuring that young men attended appointments and were suitably prepared.
- 5.29** Prisoners told us that health care staff were respectful and helpful and that they had received appropriate care. In our survey, 69% of respondents (compared with 59% in 2008) said that the quality of the GP service was good, 48% (against 33%) said that the quality of dental service was good and 47% (against 33%) said that the quality of optician services was good.
- 5.30** There was no dedicated primary mental health service. Several of the primary care and inpatient nurses were mental health registered nurses but there was no dedicated time for mental health assessment or clinical sessions. This was a significant gap in an otherwise good primary care service.

Further recommendations

- 5.31 Prisoners should be informed of the time and nature of internal health care appointments before the day of the appointment.
- 5.32 There should be a dedicated primary mental health service closely linked to or integrated with the secondary mental health service.

Pharmacy

- 5.33 **The medicines and therapeutics committee (MTC) should be re-established as soon as possible, meet at least four times a year and be attended by all stakeholders. (4.77)**

Achieved. There was a committee covering local prisons. The committee met six times last year and twice so far this year. Representation from the prison had been in place.

- 5.34 **The MTC should formally review and adopt all procedures and policies, and all relevant staff should read and sign the agreed procedures. (4.78)**

Partially achieved. The MTC's terms of reference included a requirement to ensure systems and policies were in place, and there was some evidence from the minutes that policy changes had been considered.

- 5.35 **The MTC should regularly monitor the special sick policy to ensure that all appropriate medicines can be supplied. (4.79)**

Achieved. The committee had reviewed the simple remedies policy and had added three medicines to the list. Nursing staff confirmed that the current list covered prisoner needs.

- 5.36 **There should be patient group directions to allow nurses to supply more potent medicines, where appropriate. (4.80)**

Achieved. There were patient group directions for immunisations and vaccinations as well as the emergency medicines in the resuscitation kit.

- 5.37 **Dual-labelled pre-packs should be supplied from the pharmacy. One of the labels should be removed and attached to the prescription, which should be sent to the pharmacy. (4.82)**

No longer relevant. The pharmacy provider was unable to supply dual-labelled pre-packs due to licensing difficulties. The use of pre-packs had been discontinued and all prescribed medicines were dispensed by the pharmacy for named patients. Nurses obtained stock medicines through a requisition sheet faxed to the pharmacy; this sheet was not signed and there was no audit of medicines against use.

Further recommendation

- 5.38 There should be regular audit of medicines against usage.

- 5.39 The pharmacy service level agreement should allow sufficient time for the pharmacist to take a more active role in health initiatives at the prison, including direct contact with patients. Clinical audit and prescribing review should also be encouraged. (4.83)

Not achieved. There was now a supply-only service. The provider was represented at MTC meetings but the pharmacist had no other input to the service. Although nurses managed the service well, there was no opportunity for prisoners to obtain advice from a pharmacist. There was no pharmacy-led prescribing review or clinical audit.

We repeat the recommendation.

- 5.40 Controlled drug key security should ensure there is an audit trail to indicate who has accessed controlled drugs, for example, through the use of numbered seals. (4.84)

Achieved. The controlled drug keys were stored in a key safe and were only accessible to the nurse in charge. A running balance check was documented each time key possession changed.

- 5.41 There should be a new format controlled drug register to comply with recent legislative changes. (4.85)

Achieved. At the time of the inspection, no patients were being treated with Schedule 2 (Medicines Act) medicines. A ward register was still used in health care but future controlled drugs were to be supplied on a named-patient basis, which removed the need for a new format register. The IDTS team used a new-style compliant register on the induction wing.

Additional information

- 5.42 Nurses administered medicines on the wings in the morning and evening. Two nurses attended each treatment room, administering to up to 70 prisoners. Sleeping tablets, although prescribed very rarely, were usually administered at 5pm. The wing treatment rooms had no gate or hatch. One nurse administered in the room, while the second nurse acted as witness and managed those waiting. There was no discipline officer support. There had been one recent instance of a young man hoarding his anti-psychotic medication and subsequently taking an overdose.

- 5.43 Prescriptions were made electronically, printed off and signed by the prescriber, and then faxed to the pharmacy for supply and delivery the same day. The original prescriptions were retained at the prison. The pharmacy made no cross check against the faxed version.

- 5.44 There was an in-possession policy but only about a fifth of prisoners had their medication in possession, which did not facilitate them to take responsibility for their own health.

- 5.45 We found a number of loose blister strips and part-blister strips of ibuprofen and paracetamol in a cupboard for supply as special sick.

Further recommendations

- 5.46 Discipline officers should provide active support during administration of medications on the wings.
- 5.47 Prisoners should be able to have their medication in possession, subject to individual risk assessment.

Housekeeping points

- 5.48 The pharmacist should regularly cross check faxed prescriptions with the originals.
- 5.49 Rooms used for administration of medications should be gated or have a hatch.
- 5.50 Medications should be stored in their original packaging and not separated from the information leaflets.

Dentistry

- 5.51 **The dental surgery should be refurbished and include a new dental unit and an amalgam separator. (4.70)**

Achieved. The dental surgery had been fully refurbished with a new dental chair and an amalgam separator with foil tray. The surgery was clean, bright and clinically appropriate.

- 5.52 **There should be a dedicated decontamination area for the dental surgery, incorporating a new autoclave with printer and a washer/disinfector, and new guidelines on cross-infection control should be implemented. (4.71)**

Achieved. There was an integral decontamination and clean area, separated by a vacuum hatch. The autoclave was new and had a printer, and there was a washer/disinfector.

- 5.53 **Dental triage should be introduced in accordance with a dental protocol. (4.72)**

Achieved. Nurses used a triage sheet to enable the dental nurse to prioritise patients. Prisoners also used the general health applications form, which went directly to the dental nurse, which meant there were some direct referrals with little information on which to prioritise clinical urgency. There was no formal clinical protocol but prioritisation seemed effective and waiting times had improved significantly since our last visit.

- 5.54 **Dental records should be consistently entered on to the patient clinical record. (4.74)**

Achieved. All consultations and treatments were now recorded on the NHS provider dental record with an outline of treatment entered on to SystmOne. Dental cards and FP10 forms were still used to satisfy PCT funding requirements. X-rays were not digital.

- 5.55 **There should be more dental sessions to reduce the waiting list. (4.75)**

Achieved. There were four dental sessions a week. The waiting time for a first routine dental appointment was approximately four weeks at the time of our visit. There was careful attention to ensuring that prisoners were able to complete the course of their treatment. The dental waiting list had 79 names, but was managed well and did not reflect the much improved waiting times.

Additional information

- 5.56 Dental services were provided through a service level agreement with salaried NHS dentists based in Morecambe. Two dentists visited regularly, which provided continuity. A dental nurse supported the dentist. Prisoners serving more than six months could access the full range of

NHS dental services; those serving less than six months could access urgent and emergency treatment. The local NHS emergency access service was available outside normal hours.

- 5.57 There had been approximately 317 'failed to attend' appointments in the last year. When this happened, the dentist tried to call the next person on the waiting list, so it was difficult to ascertain if this compromised the waiting times and efficient use of clinical time.
- 5.58 There was a limited stock of emergency drugs in the dental surgery, including oxygen. The dentists and nurses had received resuscitation training in the last year and knew the location of the resuscitation kit in the health centre.
- 5.59 A dental protocol set out how the surgery and consultations should work and the expected outcomes. There had been a recent dental surgery inspection by the PCT.

Good practice

- 5.60 *A dental service protocol identified clearly the processes and expected outcomes that supported a consistent and safe dental service.*

Inpatient care

- 5.61 **There should be a discipline officer post in the inpatient unit. (4.66)**

Achieved. A PCT-funded discipline officer was deployed to cover inpatients and primary care. This worked reasonably well, although it did not provide adequate cover for inpatients with challenging behaviour. With the planned closure of the unit, this recommendation was no longer relevant.

Additional information

- 5.62 During our visit, there were between four and six residents in the 11-bed inpatient unit for reasons due to their vulnerability, drug abuse treatment or mental health care. The unit provided a supportive therapeutic environment, with daily education group sessions where feasible and some individual input. Inpatients were out of their cells for a maximum of 8.5 hours per weekday and approximately 5.5 hours at weekends. The health care discipline officer regularly accompanied them to the gym, and also took inpatients, in a group or singly depending on risk assessment, outside for fresh air in the segregation exercise area. Inpatients dined out at least once a day. Staff dealt very well with some very troubled and challenging individuals and provided thoughtful and respectful care.
- 5.63 One young man admitted in May 2011 due to his significant mental health needs had made several very serious attempts to self-harm. Before our visit, and following proper assessment by prison and health care staff, he had been placed in a body belt for approximately 16 hours to prevent him self-harming. He was again placed in the body belt the night before our departure, due to a second very serious attempt to self-harm. Ongoing efforts to obtain an assessment and placement under the Mental Health Act culminated in him finally being placed on a section 47 on the day of our departure, and he transferred to a local medium secure unit the following week. Although this young man had a history of life-threatening self-harm in other establishments, there had been scant transfer information on his arrival from a transferring prison via court proceedings. We recognised the particular and extreme circumstances

surrounding this situation but were concerned about the seeming inability to affect another more appropriate intervention or resolution before mechanical restraint became necessary.

Further recommendation

- 5.64 The prison and the PCT should ensure that in cases where the risk and actual occurrence of self-harm is deemed very significant, there is an early and planned approach which expedites mental health assessment and transfer to an appropriate therapeutic placement and the potential use of mechanical restraints is avoided.

Secondary care

No recommendations were made under this heading at the last inspection.

Additional information

- 5.65 There were two escorts a day for external appointments. There had been one cancellation in the last six months and health care staff told us that generally they were able to accommodate all planned appointments. There were effective working relationships between the health care administrator, prison escort staff and the local hospitals, which resulted in young men getting their required appointments.

Mental health

- 5.66 **All officers, including newly trained officers, should receive regular mental health awareness training. (4.86)**

Not achieved. Only 30 of the 266 discipline staff (12%) were recorded as having received mental health training. We were told that there were likely to be more staff who had been trained but records were not available during our inspection. A further seven mental health training days were scheduled for 2011.

We repeat the recommendation.

Additional information

- 5.67 Mental health services were provided by Lancashire Care Foundation Trust. The team included a band 8a team leader, one band 7 occupational therapist, one band 7 nurse who also had responsibilities in the local criminal justice system, and three band 6 community psychiatric nurses plus administrative support. A psychiatrist visited three times a week.
- 5.68 Referrals came into the team from health professionals, prison staff and self-referrals. A weekly multidisciplinary allocation meeting assessed referrals and, where appropriate, allocated caseloads. There were 65 young men on the team caseload. The average wait was two to 10 days although urgent referrals could be seen on the same day.
- 5.69 We observed very good staff rapport with young men with mental health problems and prisoners told us that the care they had received had helped them with some difficult issues.
- 5.70 Effective recording of mental health care on the electronic care programme approach system and SystemOne enabled all health care staff to access a complete health record for all patients.

Mental health staff regularly contributed to wider prison mechanisms, particularly ACCT reviews.

- 5.71 There had been seven transfers under the Mental Health Act to secure units since December 2010. At least five prisoners had waited longer than two weeks for transfer, with the longest wait more than 20 weeks.

Further recommendation

- 5.72 Prisoners awaiting transfer under the Mental Health Act should be transferred expeditiously to ensure their well-being.

Section 6: Activities

Time out of cell

Expected outcomes:

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

6.1 Prisoners should be unlocked for at least 10 hours per day. (5.44)

Not achieved. Management information suggested that prisoners were typically unlocked for just over 7.5 hours a day. The core day indicated that during the main part of the week a fully engaged prisoner could be out of cell for just under eight hours, a prisoner in part-time activity for less than five hours and the unemployed for about two hours. Our research during the inspection confirmed these findings broadly, although time out of cell for partly employed prisoners was potentially worse than we thought at between one and just over two hours a day. The research suggested that the average experience for a prisoner was between four and five hours a day out of cell (see main recommendation HP55).

6.2 Prisoners should be allowed out of their cell daily to attend to domestic activity, such as showers. (5.45)

Partially achieved. Prisoner access to domestic amenities, such as showers, had improved, partly due to slightly better unlock arrangements (see also paragraph MR3). Most prisoners we spoke to confirmed that they showered daily. The core day, however, still did not include a general unlock in the morning or less restrictive arrangements around meal times that could have facilitated domestic activity. Some time described as domestic time was accessible on Friday afternoons.

We repeat the recommendation.

6.3 All prisoners should have daily access to exercise. (5.46)

Achieved. Individual wing exercise yards were sensibly left open during evening association, allowing free access during the short time that most prisoners were unlocked. Exercise in the open was also offered on Friday afternoons and at weekends. In our survey, 64% of respondents said that they exercised more than three times a week, against the 41% comparator and the 23% finding when we last visited. Exercise yard were, however, small, bleak and devoid of any equipment.

Further recommendation

6.4 The environment in exercise yards should be improved and they should be better equipped.

Learning and skills and work activities

Expected outcomes:

Learning and skills provision meets the requirements of the specialist education inspectorate's Common Inspection Framework (separately inspected by specialist education inspectors).

Prisoners are encouraged and enabled to learn both during and after sentence, as part of sentence planning; and have access to good library facilities. Sufficient purposeful activity is available for the total prisoner population.

Leadership and management

- 6.5 There should be quality assurance arrangements for all areas of learning and skills. (5.17)

Achieved. Quality assurance arrangements had been extended to all areas and were effective in improving the provision.

- 6.6 Attendance at activities should be monitored and improved. (5.18)

Achieved. A wide range of performance data was used effectively to improve participation and attendance. Monitoring of data was frequent. Managers from different departments met weekly to review performance and effect improvements.

Additional information

- 6.7 There were sufficient activity places to meet the needs of the population, with approximately 517 full-time-equivalent places. Some courses, such as family man and peer mentoring, were also repeated throughout the year. Few remand or mainstream prisoners refused to work. Allocated places averaged at between 79% and 92% of full capacity. The overall attendance rate was good at approximately 86%.

- 6.8 The learning and skills provision had been well managed through the re-role of the prison during 2008/09, the change of education provider and new government funding arrangements, and managers were solution-focused with strong support from the governor. During this period of change, the standards in education and training had been improved and the range and quality of provision extended.

- 6.9 The reduced and redefined education staffing since the re-role was deployed effectively to meet learner need. Provision was innovative and based on 12 vocational pathways that provided functional and personal, social and employability skills well in a vocational environment.

- 6.10 Issues identified through self-assessment and at the previous prison inspection had been addressed. The observation of teaching and learning and peer observation processes were developing and improving teaching and learning. We observed much good teaching and learning. The quality improvement group met quarterly, regularly reviewed performance against targets and set improvement objectives.

- 6.11 Communication between learning and skills staff was particularly good. Education staff were very well informed on operational issues at daily briefings. Regular curriculum and whole team meetings involved staff in curriculum and operational planning well. Staff felt informed, well able to inform decisions and that their opinions and expertise were valued. They were very motivated and operated effectively as a team.

- 6.12 Learner forums were used well in education to enable prisoners to influence and inform improvements in the provision.

- 6.13 The promotion of equality and diversity through inclusion was a key priority for learning and skills. Diversity was promoted well, staff celebrated a range of festivals and worked closely with the race equality officer. Data on the performance of different groups were reviewed regularly and improvements actioned through development planning.
- 6.14 In education, teachers and trainers had a good approach to implementing and meeting the prison requirements to safeguard staff and prisoners, and contributed to a safe environment. Staff were very effective in identifying vulnerable prisoners and communicated concerns efficiently and effectively to prison staff. However, The Manchester College as the education contractor placed insufficient priority on ensuring that all staff had a thorough understanding of safeguarding through training and development.
- 6.15 The allocation to learning and skills process was very efficient. An opportunities board met daily and involved representation from different departments. Most courses had no waiting lists, apart from the very popular sports academy and catering courses, which had a waiting time of only approximately four weeks. A 'no tools' vocational pathway ensured that prisoners with security restrictions could participate in some vocational training. The allocation of wing cleaning and orderly work roles was not managed by the opportunities board and the process was not sufficiently open and transparent.
- 6.16 Prisoners who attended education and skills activities were not disadvantaged by the pay scheme. Some jobs attracted higher rates of pay but they were linked to increased hours or levels of responsibility. The prison made effective use of the incentives and earned privileges scheme to encourage prisoners' engagement in learning

Further recommendations

- 6.17 The prison should work with The Manchester College to ensure that all education staff are well informed and trained in safeguarding.
- 6.18 The allocation board should manage the allocation of wing cleaning and orderly roles to ensure fair and equitable deployment of prisoners.

Induction

No recommendations were made under this heading at the last inspection.

- 6.19 New arrivals participated in a four and a half day education induction. This introduced them to learning and skills activities through a variety of short sessions to maintain their interest. All prisoners undertook accredited training in health and safety and food hygiene as part of the programme. There was a fast-track induction programme for those who had been at the prison in recent months. However, some prisoners were still required to repeat the basic skills assessments too frequently and so did not give the assessment their full attention. This made the results potentially inaccurate.
- 6.20 The careers, information advice service (CIAS) was provided by Working Links for prisoners aged 19 and over and by Connexions provider CXL (funded by Lancashire County Council and the prison) for those under 19. All prisoners had an individual interview during induction that satisfactorily identified their training and development needs. CIAS staff also contributed to group sessions, explaining their role and usefully focusing prisoners on their future goals and training and development needs in preparation for release.

Housekeeping point

- 6.21 Fast-track prisoners should not have to repeat basic skills assessments unnecessarily.

Work

Additional information

- 6.22 There were sufficient activity places and prisoners could participate fully in the regime activities. There were approximately 172 work places in farms and gardens, wing cleaning and food serveries. Approximately 158 places were allocated regularly and attendance was good, averaging 91%.
- 6.23 Prisoners in work and the vocational training workshops had a good understanding of health and safety and were equipped with appropriate personal protective equipment.

Vocational training

Additional information

- 6.24 There were 180 full-time-equivalent vocational training places and attendance at sessions was good at approximately 82%. Vocational pathways included training in media, information technology, horticulture, joinery, painting and decorating, brickwork, catering, industrial cleaning, motor vehicles and renewable energy.
- 6.25 Achievement rates in vocational training were very good. Prisoners made good progress and developed good practical skills in their chosen vocational pathway. Literacy and numeracy and personal and social development were effectively integrated into each vocational route. This had given many prisoners an opportunity to re-engage effectively in learning and make significant progress. One learner, who had been excluded from school at 14, was producing an excellent standard of work, had successfully completed his learning programme and achieved level 1 in literacy and numeracy and he was keen to progress further. Learners on the brickwork course developed a wide range of numerical skills that would help them with their practical bricklaying course and in other jobs on release.
- 6.26 Teaching and learning in vocational skills were good overall. Teachers' management of learning was good. They skilfully maintained learners' interest during training, reducing disruptive behaviour and helping prisoners concentrate on their work. Staff effectively challenged prisoners who used inappropriate language. In a few sessions, learning was insufficiently planned and did not take enough account of the wide range of abilities.
- 6.27 Prisoners were proud of the practical skills they developed. Their workbooks were generally neat and tidy and showed well what they had learned. Teachers provided helpful feedback but there was inconsistent use of individual learning plans to support learning and ensure prisoners were fully aware of their progress and what more they needed to do to achieve. Targets in these plans focused too much on the end goal with insufficient attention to the short steps prisoners needed to achieve their qualification aim. Vocational workshops provided good training environments and the catering workshop facilities were excellent. Group work areas were generally well equipped and learning resources met prisoners' needs satisfactorily.

Further recommendation

- 6.28 Individual learning plans should include short-term goals to ensure learners effectively engage in plans to support their progress and achievement.

Education

- 6.29 **The quality of teaching and learning should be improved. (5.15)**

Achieved. The quality of teaching and learning had improved significantly. A wide range of training and development had effectively improved teachers' skills. A peer support initiative had successfully contributed to improvements.

- 6.30 **There should be improved success rates in personal development and literacy and numeracy level 1 programmes. (5.16)**

Achieved. Success rates had improved and were now good, ranging from 88% to 100% in 2009/10.

Additional information

- 6.31 The Manchester College provided 166 full-time-equivalent places and 75% of prisoners were involved in education activities. Success and retention rates were good and had improved significantly since the previous inspection. Attendance was good overall at 84%. Education sessions ran from 8.15am to 11.45am from Monday to Friday and from 1.45pm to 4.45pm Monday to Thursday. A pre-entry literacy class took place in one accommodation block, and there was a range of education activities in the segregation unit and inpatient unit.

- 6.32 There was a wide range of courses from pre-entry to level 3, and open and distance learning. The 12 vocational pathway programmes successfully combined vocational teaching with personal and social development and literacy and numeracy to provide a varied and fully integrated curriculum. Other courses included art, business studies and digital imaging. Variety was incorporated well into the curriculum with a change of course halfway through the morning or afternoon session. There were several initiatives to reach learners. On one accommodation block, the YMCA ran a Stepping Stones course which included topics such as healthy living. The writer in residence helped prisoners to write articles for the prison radio and a magazine.

- 6.33 Teaching and learning were good. Classes were well managed and planned using a variety of activities to interest prisoners. In the best classes, the pace was lively and prisoners were motivated and participated well with class activities. Poor behaviour was managed effectively in a non-confrontational way. In a few classes there was an over-reliance on worksheets and insufficient use of games and everyday materials. Most classrooms were well equipped, but some whiteboards had been out of use for some time. Peripatetic support teachers gave good individual support both within and outside class time.

- 6.34 Learners developed good skills and confidence to prepare them for release. Prisoners on English for speakers of other languages (ESOL) courses gained basic speaking and reading skills to enable them to communicate with other prisoners and follow basic instructions. Progression was good and many prisoners progressed to higher level courses within the prison and on release.

- 6.35 Initial assessment procedures were satisfactory. An electronic individual learning plan had been developed and some teachers used the document well to record prisoner assessments, targets and reviews. Learner progress was recorded on a graph, which gave them a good visual overview of their progress to completing their qualification. Some areas of the prison, such as horticulture, were not able to access the technology effectively and used a paper system.

Further recommendations

- 6.36 The variety of learning resources should be extended to reduce the over-reliance on worksheets.
- 6.37 The use of electronic individual learning plans should be widened to enable all prisoners to access their targets easily and be aware of their progress.

Library

- 6.38 **There should be more library staff. (5.19)**

Achieved. The number of staff had risen to four and their hours of work had been increased to extend library opening times.

- 6.39 **Prisoners should have better access to the library, including evening opening. (5.20)**

Achieved. Library staff had successfully improved attendance and access to the library. The library was open for 40 hours a week, including four evenings and Saturday mornings.

- 6.40 **The book stock should be increased, and the monitoring of shelf stock and book loss improved. (5.21)**

Achieved. The book stock had increased considerably from 1,600 to over 5,000 books. There were regular stock checks and staff had taken very effective action to reduce the loss of books by 75% since the previous inspection.

- 6.41 **The library should be included in the prison induction. (5.22)**

Achieved. All new arrivals had a tour of the library and its facilities during their induction and were encouraged to borrow books and take responsibility for them.

Additional information

- 6.42 The library was managed by Lancashire County Council and staffed by a full- and a part-time qualified librarian, two support staff and two orderlies. Access was good. Library staff liaised closely with prison officers to accompany prisoners to the library and regular promotion of the library had successfully increased attendance. The library provided a book service to the segregation and inpatient units and also offered books to prisoners in holding cells.

- 6.43 The range of books included fiction, books available in nine foreign languages and a wide range of easy readers. The stock of vocational materials to support vocational training programmes was limited. The range of newspapers was adequate but there were insufficient magazines. Two computers that prisoners could use to practise the driving test theory were

particularly well used for those soon to be released. Additional activities to encourage attendance included chess championships and Storybook Dads.

Housekeeping point

6.44 The stock of vocational training books and magazines in the library should be increased.

Physical education and health promotion

Expected outcomes:

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

6.45 The range of and access to accredited physical education training programmes should be increased. (5.29)

Achieved. Prisoners had access to a good range of accredited courses at entry level 3 to level 2 offered through the prison's sports academy. Prisoners attended the academy during the core day. Since August 2010, 160 prisoners had attended at least one of the 10 courses provided.

6.46 Showers in the PE department should be screened. (5.30)

Achieved. All showers had decency screens that provided sufficient privacy.

Additional information

6.47 The PE department was staffed by one senior officer and 11 instructors who were supported by three orderlies. Staff were well qualified and enthusiastic. Facilities were good and included two fitness suites, two large sports halls, an all-weather outdoor football pitch, a rugby pitch and a trim trail – accessible for appropriately risk assessed prisoners. Access to the outdoor facilities had improved since the last inspection. Prisoners were given clean gym kit on each visit.

6.48 There were three PE induction programmes a week to ensure new arrivals could access the facilities as quickly as possible. Staff placed a strong emphasis on promoting recreational PE. Health care staff assessed all prisoners during induction for their suitability to undertake physical exercise. Prisoners were further assessed by completing a physical activity readiness questionnaire. Where a need was identified, prisoners were referred to back to health care for further assessments. Prisoners were given an exercise programme for use during recreational PE if they requested it or when a need had been identified.

6.49 Prisoners could use PE facilities at least twice a week. Recreational PE was available four evenings a week to prisoners who worked full time. In addition to weekend recreational sessions for each wing, there were also classes on Friday and Saturday for prisoners with specific needs, such as sports injuries, weight loss or those who were less confident. There were several sports related clubs each Saturday. Prisoners in the inpatient and segregation units had access to some exercise equipment. There was limited use of displays and

promotions on accommodation wings to encourage all prisoners to engage in physical exercise.

- 6.50 In our survey, participation rates were above the comparator, but participation rates of prisoners with disabilities were low. There was regular monitoring of attendance by different groups. However, data were not provided in a way that helped the PE team to develop effective responses to under-representation by specific groups. PE staff used questionnaires regularly to check that prisoners felt safe and knew what to do if they had any concerns.
- 6.51 In the sports academy, teaching and learning were good. Teachers used a range of activities well to reinforce learning. Instructors regularly reported on prisoners' development of work-related social skills, including an assessment and feedback of skills such as work rate, showing respect, listening, and communication. However, the good progress prisoners made was not shared well outside the PE department. Success rates were very high.
- 6.52 Quality assurance arrangements were good. Course files were well organised and contained a useful analysis of course performance. Staff made good use of regular learner feedback to inform improvements. In the previous 12 months, the PE department had introduced an internal lesson observation scheme based on peer observation. Actions for improvement were helpful in improving staff performance. Arrangements to assure quality improvements and share good practice were underdeveloped.
- 6.53 Appropriate records of accidents were kept and recorded in the daily diary. Copies of the records were sent to the health and safety team for analysis and risk assessments were reviewed.

Further recommendation

- 6.54 Data on participation in PE by different groups should be improved to enable PE staff to identify and respond to any under-representation effectively.

Housekeeping points

- 6.55 The PE department should extend its quality improvement process by working with other departments to identify and share good practice.
- 6.56 The benefits of exercise and healthy lifestyles should be better promoted on accommodation wings.
- 6.57 PE staff assessment reports on individual prisoners' approach to work rate, showing respect, listening and communication should be shared outside the department.

Section 7: Good order

Security and rules

Expected outcomes:

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

Security and rules

No recommendations were made under this heading at the last inspection.

Additional information

- 7.1 The physical security of the prison was good and we found no obvious weaknesses or anomalies in the physical and procedural security. There were daily checks and routine searches of perimeter fences and walls, along with routine searches of communal areas and activities buildings. Residential officers on wings conducted routine cell searches. The establishment was reaching its targets for searching all cells every quarter and all areas monthly. A list of cells for searching was sent out to residential managers, and progress against targets monitored by the security department and reported to the security committee.
- 7.2 Important elements of dynamic security were in place. Relationships between staff and prisoners were generally positive and supervision arrangements on residential units had greatly improved since the last inspection. Officers were engaged with prisoners during association, and entries in personal files indicated that they were aware of their individual circumstances.
- 7.3 There had been little change to security structures since the last inspection. The security committee was properly constructed and meetings were well attended by representatives from relevant areas. The monthly meetings were chaired by a senior manager, usually the head of security. The standing agenda was comprehensive and included an analysis of security information reports (SIRs). Monthly security objectives were agreed through the appropriate consideration of intelligence. Reports from other areas of the prison, such as residential areas, and the use of force coordinator were also discussed.
- 7.4 The security department received an average of about 250 SIRs a month. They were processed and categorised by full-time security collators, and intelligence was effectively communicated to other areas of the prison, particularly the safer custody group and the residential areas, to allow them to make informed decisions about prisoners or take necessary action. We were not, however, assured that this information was always acted upon expeditiously (see also paragraph 3.11).
- 7.5 Risk assessment and management systems were effective and included the use of information about the prisoner's recent custodial behaviour, as well as historic data, to inform assessments. There was a register to identify all risks associated with education areas and workshops, the type of prisoner who could safely attend and the measures needed to manage identified risks. We saw no evidence that the prison was risk averse in allocating activity

spaces to prisoners and, overall, security procedures did not hinder prisoner access to a full regime.

- 7.6 There was a modified free flow system to allow supervised prisoner movement during the beginning and end of planned regime activities. Officers were placed at strategic points along the route to work and education classes and effectively controlled prisoner movement. Supervision was evident but unobtrusive and allowed prisoners to walk freely within well-defined areas.
- 7.7 The rules of the establishment were incorporated into the induction process and incentives and earned privileges (IEP) compacts. Prison Service rules were published and displayed on notice boards in all house blocks.

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.

Disciplinary procedures

- 7.8 Punishments given under the minor reports system should be fair, and there should be full and properly conducted investigations into allegations. (6.34)

Achieved. The number of minor reports was not excessive, at about 100 in the first six months of 2011, which was nearly half the figure for the same period before our previous inspection. Hearings were generally conducted fairly with a full investigation of charges, and governance through the adjudication standardisation meetings was good.

- 7.9 The incentives and earned privileges system should be better used to deal with minor infringements of prison rules. (6.35)

Partially achieved. The IEP scheme was better used to deal with minor infringements of prison rules and had helped to reduce the number of minor reports. However, the number of formal adjudications remained very high (see below) and some charges were due to minor infringements of prison rules or childish behaviour and could have been dealt with less formally.

Further recommendation

- 7.10 Minor infringements of prison rules and childish behaviour should be dealt with using less formal procedures than adjudications.

Additional information

- 7.11 The number of formal adjudications was high at about 215 charges a month. This was about 50% higher than at our previous inspection.

- 7.12 The adjudication room was in the segregation unit. It was a good size, had adequate natural light and a desk for the adjudicating governor and comfortable chairs for staff and the prisoner. The hearings we observed were well conducted by trained senior officers; young people were put at ease and referred to by their first name. The adjudicator also took time to ensure that the prisoner understood the process at each stage, and all were offered the opportunity to seek legal advice.
- 7.13 Records of hearings gave assurance that procedures were consistent and allowed the prisoner to question evidence and put forward his case. Investigations into allegations were carried out properly.
- 7.14 A high proportion of proven offences resulted in loss of association as punishment. In the previous six months, about 200 young people had received loss of association following adjudication. Many of these were due to proven charges of minor fights or using bad language. The relatively small number of more serious cases were referred to an independent adjudicator or to the police.
- 7.15 Monthly statistics on the number and nature of adjudications were presented to the senior management team. Results of proven offences were noted, categorised and communicated to adjudicators to identify trends and deal with particular problem areas as they arose.
- 7.16 Adjudication standardisation meetings took place quarterly, were chaired by the governor and well attended by adjudicating governors. The minutes showed good standards of discussion. Punishment tariffs had been published and were used consistently at formal hearings.

Further recommendation

- 7.17 The widespread use of loss of association as punishment for minor offences should be reduced.

The use of force

- 7.18 **There should be a programme of staff training in de-escalation techniques. (6.36)**
- Achieved.** Training in de-escalation had been included in standard control and restraint refresher training for all prison officers.
- 7.19 **Force should be used as a last resort and only when attempts at meaningful de-escalation have failed. (6.37)**
- Partially achieved.** Records on the spontaneous use of force were mixed but much better than at the last inspection. Most interventions were well organised, documentation was completed correctly, proper authority was recorded and all incidents were appropriately supervised by senior staff. However, we read examples of spontaneous incidents where accounts from officers did not show that de-escalation was used as a first response, particularly when prisoners had failed to comply with staff orders.
We repeat the recommendation.
- 7.20 **Use of force should be properly authorised and justified in all cases. (6.38)**
- Partially achieved.** Use of force documentation showed that force was generally properly

authorised and usually justified, although we were not assured that it was used as the last resort in all incidents (see above).

7.21 Senior managers should carry out quality checks of use of force forms. (6.39)

Achieved. The violence reduction coordinator or head of residence carried out weekly checks of all use of force forms.

7.22 Links should be developed between use of force and the safeguarding committee. (6.40)

Achieved. Links between the use of force and violence reduction committees were good. The use of force coordinator attended all violence reduction committee meetings (see also paragraph 3.2).

7.23 Analysis of the use of force should inform changes to the violence reduction strategy. (6.41)

Achieved. Information, including the nature of the incident, its location, the ethnicity and age of the prisoners, was collated each month and presented at the violence reduction and security committee meetings for analysis. The high rate of incidents had been noted, particularly those concerning fights, assaults and non-compliance. There was some evidence that this information had begun to be used to inform the overarching violence reduction strategy.

Additional information

7.24 The number of incidents necessitating the use of force remained high. There had been 171 occasions where force was used in the first five months of 2011, although this was a slight reduction compared with the same period in 2010 and an overall reduction of about 10% compared with the last inspection. About half of all incidents did not involve the use of full control and restraint techniques. Although the ratio of incidents involving full control and restraint was high, there had been a significant increase (25%) in the reported incidents that did not involve full restraint since the last inspection.

7.25 Special accommodation was used only rarely and was properly authorised. It had been used five times in 2010 and once in 2011 so far, all for short periods to deal with extreme behaviour. The average time that prisoners had spent there was about 45 minutes.

7.26 Mechanical restraints had been used twice so far in 2011 for one prisoner because of extreme self-harming behaviour (see paragraph 5.63). We were assured that this extreme intervention was justified in these exceptional circumstances.

Segregation unit

7.27 All cells in the segregation unit should be clean and adequately furnished. (6.42)

Achieved. All cells were properly furnished, clean and reasonably well maintained.

7.28 There should be formal planning to return prisoners held in the segregation unit under good order or discipline to normal prison location. (6.43)

Achieved. Planning to return longer stay prisoners to normal prison location was being developed. Individual prisoner management plans had been drawn up for longer stay

prisoners, and behaviour improvement targets had been set. Segregation reviews took place on time and attendance was generally very good and included key prison staff who clearly knew and cared about the prisoner.

Additional information

- 7.29 The segregation unit (Ullswater) was in a purpose-built building and consisted of 12 ordinary cells, five of which were safer cells, two special cells that were rarely used (see paragraph 7.25) and a holding room. It also had a prisoner shower, a staff office, hotplate, adjudication room, small gym and a classroom. It was adequately decorated and communal areas were clean and well maintained, with up-to-date information displayed. Cells were generally clean, well ventilated and most were very well equipped. Most had in-cell power and televisions. The gated exercise yards were clean and equipped with outdoor cardiovascular exercise equipment.
- 7.30 The number of prisoners segregated was about 28 a month, about half of whom were segregated for good order or discipline and half as punishment following a formal adjudication. This was a reduction of about five prisoners a month compared with the same period in 2010. The average length of stay was about eight days.
- 7.31 A published policy set out the rules, purpose and managerial arrangements of the unit alongside the general principles and protocols for segregation. There were copies in the unit office. Staff we spoke to were clearly aware of its content.
- 7.32 The governance and management of segregation were reasonable. The unit was administered on a day-to-day basis by one of two nominated senior officers supported by trained officers, who all reported to a residential senior manager.
- 7.33 Staff interviewed all newly arriving prisoners in private to identify any immediate needs. Prisoners were searched thoroughly and respectfully and only strip searched following an assessment of risk, authorised by the senior officer in charge. On admission to the unit, they were given documents explaining the procedures, protocols and rules involved in segregation, including removal from unit as punishment, segregation for good order or discipline, and segregation awaiting adjudication.
- 7.34 A published regime included daily showers, exercise and access to telephones. Prisoners could continue to attend communal education activities following assessment of risk. Staff from the education department visited every day to occupy prisoners on the unit with some education work. Most prisoners could access the small gym on request.

Incentives and earned privileges

Expected outcomes:

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

- 7.35 Residential staff should acknowledge positive behaviour by recording G (good) marks in prisoner files. (6.52)

Achieved. IEP files and P-Nomis files showed that staff, particularly officers, acknowledged good behaviour as well as bad.

7.36 Prisoners should be consulted about the incentives available on enhanced status. (6.53)

Achieved. The minutes of the monthly prisoner consultation meetings showed that staff took prisoners' views about available incentives into consideration. In our survey, 60% of respondents said that the different levels in the IEP scheme encouraged them to change their behaviour.

Additional information

7.37 The incentives and earned privileges (IEP) policy had been reviewed and a document published early in 2011. The over-complicated system we found at the last inspection had been replaced by a straightforward scheme that was easily understood by staff and prisoners. Its policy document described in simple language how the system worked, how prisoners could progress through the levels, and the standards of expected behaviour. Copies of the document were available to prisoners during their induction and on all house blocks. The document described the usual three incentive levels (basic, standard and enhanced). The scheme offered the usual differentiations in access to private cash, visits and time out of cell.

7.38 All prisoners had signed compacts. New arrivals were placed on standard level unless they had earned enhanced status at a previous establishment. New arrivals on standard level were assessed within 28 days of applying for progression to enhanced level. At the time of our inspection, 68% of prisoners were on the standard regime, 27% on enhanced and 5% on basic. Written documentation showed that the scheme was implemented consistently across the residential units, and prisoners were given warning notices when appropriate.

7.39 There was evidence that staff used the scheme as a motivational tool, and encouraged standard level prisoners to apply for enhanced when the required thresholds had been met. Review boards were held and there were agreed action plans for young people to demonstrate changes in behaviour to achieve enhanced status or return to the standard level from basic regime. Prisoners were given notices on how to appeal if they disagreed with decisions, and generally knew how the system worked.

Section 8: Services

Catering

Expected outcomes:

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

8.1 The quality of food should be improved. (7.10)

Achieved. A four-week rolling menu offered a good variety of healthy options. Menu choices included five portions of fruit and vegetables a day. The quality of food we tasted was reasonable and of the correct temperature. Despite this, prisoners continued to be negative about the food. In our survey, only 17% of respondents said the food was good.

Further recommendation

8.2 Steps should be taken to address prisoners' poor perceptions of the quality of food.

8.3 All staff employed in the preparation and serving of food should be appropriately trained and receive regular updated training to meet their needs. (7.11)

Achieved. All staff and prisoners employed in the preparation and serving of food had received basic hygiene and food handling training.

8.4 Prisoners should be employed in the kitchen. (7.12)

Achieved. At the time of inspection there were 10 prisoners working in the prison kitchen and there were plans to employ a further six by the end of 2011.

8.5 Prison managers should quality check the food regularly, and catering staff should regularly attend serveries at meal times. (7.13)

Achieved. The duty governor sampled the food every day and a member of the senior management team visited the hotplate during meal times at least once a week. The catering manager or a member of her team also carried out weekly checks of serveries during meal times. These visits were recorded.

8.6 The catering department should ensure that it caters adequately for the needs of Muslim prisoners and other religious groups, and that halal food is stored and served separately from non-halal food. (7.14)

Achieved. The menus generally met the needs of different diets, including vegetarian, vegan, halal, kosher and gluten-free. Halal food was stored and served separately from other foods using designated utensils.

8.7 The pre-select menus should correctly describe the menu choices for those requiring a meat- or dairy-free diet. (7.15)

Achieved. The inaccurate descriptions of vegetarian and vegan choices we found at the last inspection had been dealt with. Descriptions of meals correctly described them.

- 8.8 **Changes to the pre-select menu should take place as infrequently as possible, and be communicated to the residential units before the food is delivered. (7.16)**

Achieved. Changes to the pre-select menu were rare and there were procedures to alert the duty governor when this might happen and update wing notice boards before changes. There had been no changes to the advertised menu in the previous six months.

- 8.9 **The breakfast packs should only include items that prisoners can use as part of their breakfast. (7.17)**

Achieved. Bread rolls were now provided alongside the jam portions for breakfast.

- 8.10 **Prisoners should be provided with flasks for in-cell use. (7.18)**

Achieved. All prisoners had been issued with in-cell kettles.

Additional information

- 8.11 The purpose-built kitchen was clean, properly maintained and generally well equipped. The catering manager worked with a team of qualified chefs and 10 prisoners.

- 8.12 Although breakfast was meant to be served on the day it was to be eaten, we saw examples where staff on residential units had issued it to prisoners the evening before. Meals were generally served on the residential units at 12 noon and 5pm. Staff supervision of wing serveries was good, and temperatures of food were taken on arrival there. Hotplates were generally clean but some were grubby and food had been left out after prisoners had finished their meals.

- 8.13 There was a regular meeting with servery workers, a twice-yearly food survey and prisoner representatives met the catering manager at formal consultation meetings. There were readily accessible food comments books on all residential units.

Further recommendation

- 8.14 Breakfast should be issued to prisoners on the morning it is to be eaten.

Housekeeping point

- 8.15 All hot plates should be kept clean.

Prison shop

Expected outcomes:

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

No recommendations were made under this heading at the last inspection.

Additional information

- 8.16 The prison shop was part of the national contract with DHL. Prisoners completed their orders on Wednesday and goods were delivered on Friday afternoon. Although new arrivals could have a reception pack, there could be some delays in making their first shop order – in our survey, only 7% of respondents said they had access to the shop in their first 24 hours. The range of goods was reasonable. In our survey, 49% of respondents, against the comparator of 42%, said that the shop sold a sufficiently wide range of goods to meet their needs.
- 8.17 The shop was a standing item on the prisoner consultative committee and minutes indicated a reasonable level of discussion on such matters. Prisoners could order newspapers through the library and goods from some catalogues on the wings.

Further recommendation

- 8.18 New arrivals should be able to submit orders for the shop within their first 24 hours at the prison.

Section 9: Resettlement

Strategic management of resettlement

Expected outcomes:

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

9.1 Residential units should always be represented at the reducing reoffending forum. (8.4)

Achieved. Wing representation was expected at the reducing reoffending forum, which met every other month and was well attended with reports from each pathway lead or representative outlining key issues. The head of residence attended some meetings but not all. Copies of minutes from meetings were sent to each wing.

9.2 Voluntary and community sector groups should be invited to be represented at the reducing reoffending forum. (8.5)

Partially achieved. There was no community or voluntary sector representative at the bimonthly reducing reoffending forum but there had been some recent work to set up a voluntary sector consortium specifically to develop resource bids. This group had met three times so far (see paragraph 9.40).

We repeat the recommendation.

9.3 The membership and work of the reducing reoffending forum should reflect the prison's approach to diversity and inclusion. (8.6)

Partially achieved. The head of diversity attended most but not all reducing reoffending forums. Each meeting included a report with ethnic monitoring data for the learning and skills pathway, covering access to offending behaviour programmes, gym, library, education and employment, but there was no such analysis for other pathways. For example, there was no information or analysis about black and minority ethnic prisoner representation in access to family visits, support for accommodation or the number released without accommodation. At the December 2010 forum it had been suggested that all areas incorporate such analysis, but this had not been taken forward and was not included in the 2011/12 strategic objectives.

We repeat the recommendation.

Additional information

9.4 There was no up-to-date reducing reoffending or resettlement policy. The most recent document was three years old and not in use. There was a reducing reoffending strategy for 2011/12 that listed objectives under each pathway, but many of these were extremely broad or were merely to continue work already in place. No objectives were identified for offender management or public protection. Although some objectives were updated after each reducing reoffending forum, not all were and no timescales or milestones were identified.

9.5 There had been a comprehensive needs analysis in November/December 2010 that was based on a 73% return rate of 451 questionnaires to prisoners. While a useful analysis, some of the main recommendations had not been included in the objectives for the forthcoming year, including the improvement in perceptions of offender management and raising awareness of

the potential to involve families in sentence planning and offending behaviour programme post-course reviews.

Further recommendations

- 9.6 There should be an up-to-date reducing reoffending policy.
- 9.7 The reducing reoffending strategy should include development objectives, identified through the annual resettlement needs analysis, for all resettlement pathways, offender management and public protection work.

Offender management and planning

Expected outcomes:

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

Sentence planning and offender management

9.8 Offender supervisors should not be redeployed to operational duties. (8.19)

Partially achieved. The offender management unit (OMU) consisted of 18 officers who, along with their role as offender supervisors, were also detailed to a range of other functions, including legal services and staffing of the video link. While the number of staff allowed for these duties to be spread across the department and thus meet the offender management function, staff were frequently redeployed for other operational requirements. In total 202 hours a month were allocated to offender assessment system (OASys) assessment work and 562 hours to offender supervision work. Although the loss of hours varied greatly from month to month – with as much as 30% lost on OASys work in February 2011 and over 20% on offender supervision in May 2011 – over the six months to the end of May the actual loss had averaged out at 6% for offender supervision time and 8% on OASys. Two probation officers and one probation service officer had recently started to undertake the offender supervisor function and, while their caseloads were still low at the time of the inspection, it was hoped that their involvement would reduce the impact of lost officer offender supervisor time.

9.9 Offender supervisors should receive further training to undertake their roles effectively. (8.20)

Partially achieved. All offender supervisors had undertaken OASys training, and foundation training had been introduced recently. In most cases, offender supervisors learned their role by observing others already in post. Some staff had attended a course in motivational interviewing but there was no ongoing casework supervision to evaluate its effectiveness, and the two senior officer line managers had not undertaken this training. The quality of offender supervision varied considerably overall. Although informal support was available from the probation staff, including the senior probation officer who had recently become head of offender management, there was no casework supervision for officer offender supervisors (see main recommendation HP57). Probation offender supervisors received regular supervision and casework reviews with the senior probation officer.

9.10 There should be quality assurance processes for the offender assessment system (OASys). (8.21)

Achieved. All OASys assessments were appropriately countersigned by one of the two senior officers or two probation officers in the OMU, and there was a monthly random sample check by the head of offender management.

9.11 Families should have the opportunity to attend sentence planning boards. (8.22)

Partially achieved. Offender supervisors were expected to check with prisoners, during their first contact, whether they wanted or were willing for their parent or guardian to attend sentence planning boards. Very few forms had been logged and we were told that their completion was inconsistent. It was also very rare for families to attend such meetings, although attendance at offending behaviour post-programme review meetings was more common. The prison's needs analysis in November/December 2010 had recommended that prisoners should be made aware that family members could attend these meetings, but this had not been included in the action plan for the year and there had been no specific work to increase awareness.

Further recommendation

9.12 The prison should ensure that prisoners are aware that family members can attend sentence planning meetings and reviews, and they should be encouraged to invite them.

9.13 Prisoners should not be transferred to other establishments while home detention curfew assessments are under way. (8.23)

Not achieved. Between November 2010 and April 2011, 366 prisoners had applied for home detention curfew. Although only 23 (6.28%) were granted, 163 prisoners (44.5%) were transferred during the process.

We repeat the recommendation.

9.14 Prisoners should have access to release on temporary licence wherever possible to support resettlement plans. (8.24)

Not achieved. No prisoners had been released on temporary licence in the last 12 months.

We repeat the recommendation.

9.15 Offender management unit staff should be invited to contribute to self-harm monitoring and anti-bullying processes. (8.25)

Partially achieved. One offender supervisor was an ACCT assessor and attended ACCT reviews for the prisoners she was involved with. As a probation service officer (PSO) there were few restrictions on her time and her attendance was relatively easy. For other officer offender supervisors, attendance was more difficult and determined by their availability, and not helped by the fact that times of meetings were not agreed until the day itself. Offender supervisors were not directly involved in reviews of anti-bullying cases.

Further recommendation

- 9.16 Offender supervisors should be included in ACCT self-harm monitoring or anti-bullying reviews of prisoners for whom they are responsible.

Housekeeping point

- 9.17 The time of ACCT reviews should be set in advance to increase the potential for offender supervisors to attend.

- 9.18 **There should be discharge processes for prisoners being released into the community. (8.26)**

Partially achieved. The prison had introduced a two-week, multi-agency pre-release programme incorporating a range of modules oriented to resettlement needs, including work and employment, drugs and alcohol misuse and relationships management. Although generally a good programme, there was no pre-release review or assessment of individual needs at the end.

Further recommendation

- 9.19 The prison should introduce pre-release meetings that draw on pathway and offender management work, along with that in the pre-release course, to review progress and plan responses to post-release needs.

- 9.20 **Exit surveys should be introduced. (8.27)**

Partially achieved. Exit interviews were undertaken after completion of the pre-release course. Up until recently they had focused on the content of the course but had been revamped to include assessments against pathway work undertaken.

Additional information

- 9.21 At the time of the inspection there were 126 prisoners in scope for offender management under phase two and 17 under phase three. A further 172 were out of scope but, due to the age of the population, all 315 were subject to OASys assessment and allocated to an offender supervisor. The majority of prisoners whose OASys was the responsibility of the prison (out-of-scope prisoners) were not yet due an assessment, and a further 20 had been allocated and were in the process of completion. Forty had not been completed and were out of date.
- 9.22 The frequency of offender supervisor contact with prisoners varied. There was no agreement about the frequency that offender supervisors would see prisoners, either those in scope or out of scope (see main recommendation HP57).
- 9.23 Although offender managers were always invited to sentence plan meetings we were told that many did not attend, even though video conferencing facilities were available. In our survey, only 38% of respondents said that they had a sentence plan, against the 63% comparator, and of these only 52%, against 63%, said they were involved in its development. In the prison's most recent needs analysis, only 32% of respondents said they had a sentence plan and only 55% said they knew who their offender supervisor was.

- 9.24 When offender managers did not attend sentence plan meetings, offender supervisors usually reviewed the assessment and set recommendations informally and then shared these with prisoners. Under these circumstances, prisoners were less likely to be aware of the sentence plan and its content. There was no formal involvement by other staff and departments in sentence planning, and although some offender supervisors asked personal officers for their views of prisoners this was not consistently applied.

Further recommendation

- 9.25 All sentence planning meetings should be formally managed with contributions invited for all departments involved with the prisoner.

Categorisation

- 9.26 Prisoners identified as requiring a transfer should be moved as soon as possible. (6.12)

Achieved. The prison reported little difficulty in moving prisoners on to other establishments and generally systems worked well. The prison still maintained an informal holds policy for prisoners attending accredited programmes or undergoing medical treatment. There was no evidence that prisoner transfers were unduly delayed.

Public protection

- 9.27 The police liaison officer should attend the monthly public protection meetings. (8.28)

Achieved. The police liaison officer was a standing member of the interdepartmental risk management team (IDRMT) public protection group, which met monthly. In the previous six months he had attended five of the meetings.

- 9.28 Public protection meetings should be notified to offender managers in the community. (8.29)

Achieved. Following each monthly public protection meeting, information on prisoners discussed at the meetings was emailed to offender managers in the community. Offender managers were also invited to attend meetings, although they rarely did so.

Additional information

- 9.29 Public protection arrangements were generally comprehensive. The public protection clerk screened all new arrivals, and at the time of the inspection 38 were subject to monitoring for child protection or harassment. Three prisoners were identified as multi-agency public protection arrangements (MAPPA) level three and a further 37 as level one or two. A further 62 prisoners were MAPPA nominals (likely to be subject to arrangements but not yet formally identified). The monthly IDRMT meetings were well attended, and prisoners within their last six months of custody were reviewed regularly. The public protection clerk compiled update reports in liaison with offender supervisors. Offender supervisors did not usually attend IDRMT meetings although they often attended community MAPPA meetings.

Further recommendation

- 9.30 Offender supervisors should be actively involved with public protection meetings concerning the prisoners for whom they are responsible.

Indeterminate-sentenced prisoners

- 9.31 There should be regular lifer forums. (8.30)

Not achieved. There were still no forums for indeterminate-sentenced prisoners.

- 9.32 There should be regular lifer family days. (8.31)

Achieved. The family links team held between four and six family days a year, one of which was identified specifically for indeterminate-sentenced prisoners. Indeterminate-sentenced prisoners could also access general family visits if there were spaces.

- 9.33 Multi-agency lifer risk assessment panels should be convened as soon as possible after sentence. (8.32)

Achieved. At the time of the inspection there were four prisoners serving life sentences and 18 on indeterminate sentences for public protection (IPP). All multi-agency lifer risk assessment panels were up to date or scheduled for the forthcoming two months.

- 9.34 Mandatory lifers and those sentenced to indeterminate sentences for public protection (IPP) should be given written information about their sentence. (8.33)

Achieved. All indeterminate-sentenced prisoners were given a booklet outlining the Parole Board process as well as prison-specific leaflets outlining the function of IPP and life sentences.

Resettlement pathways

Expected outcomes:

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

Reintegration planning

Accommodation

- 9.35 Accommodation providers should report on the outcome of interventions with prisoners. (8.44)

Achieved. Monthly data were collated on accommodation provision, including the number of assessments, those released to settled accommodation and those released with no fixed

accommodation (NFA). The average NFA rate for the previous six months had been 2% (10 prisoners out of 483 releases).

9.36 There should be greater promotion of the accommodation services to ensure that prisoners are aware of their availability. (8.45)

Partially achieved. There was information about the accommodation support service on all wings, but many prisoners continued to be unaware of its availability. In our survey, only 28% of respondents, against a comparator of 34%, said that they knew who to speak to for help with finding accommodation on release. This was similar to the findings of the prison's resettlement survey at the end of 2010.

We repeat the recommendation.

Additional information

9.37 Since the last inspection, the prison had ended its contract with the YMCA and taken the provision of accommodation services in house, and it had been run by the family links team for approximately 12 months. All new arrivals were seen as part of the induction carousel (see paragraph 1.34), and were offered help and advice on the maintenance of a current tenancy or support in applying for new accommodation.

9.38 The team had good links with a range of community providers. It undertook work oriented to re-establishing links between prisoners and their families and carers to facilitate post-release support and accommodation. It prioritised prisoners likely to have no accommodation on release. They were picked up approximately six months before release and in most cases some form of accommodation was found.

9.39 The prison also had a full-time bail accommodation and support service (BASS) officer to offer support and accommodation to those on bail. On average approximately 30 reports a month were submitted to court with around eight to 10 getting bail to return home and a further four to five entering bail support accommodation through Stonham Housing.

Education, training and employment

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

No recommendations were made under this heading at the last inspection.

Additional information

9.40 There was good partnership working with a wide range of external and voluntary agencies to extend and further improve resettlement opportunities for prisoners. The partnership group met regularly and was informing improvements to the resettlement course. It was also active in identifying external funding sources to extend resettlement initiatives.

9.41 A two-week resettlement programme was compulsory for all prisoners nearing the end of their sentence. There was good use of external partners who, together with the prison and education, offered a wide range information and training on planning for the future, family relationships, attitudes to crime, recognising one's skills and abilities, budget and debt, housing, careers and CV building, dealing with disclosure, mock interviews and how to keep a job. However, the prison recognised that not all prisoners needed every aspect of the course. As a result, there were plans to further develop the resettlement programme with external partners to make it relevant for individual needs and avoid unnecessary duplication of content.

- 9.42 The prison's links with industry were underdeveloped. An employer event in 2010 had been successful but more promotion was needed. CIAS workers provided through-the-gate support and had established links with education providers and some local employers.

Further recommendation

- 9.43 Links with employers should be further developed to establish employment opportunities for prisoners on release.

Mental and physical health

- 9.44 There should be formal pre-release clinics to cater for the health needs of prisoners due for discharge. (8.47)

Achieved. Prisoners were offered an appointment at a discharge clinic between one and four weeks before their release/transfer. The clinic included weight and body mass index checks, a summary letter and care plan for their GP and a prescription for five to seven days supply of any prescribed medication. Nurses asked for their consent to share information with outside agencies. A short feedback questionnaire was used to gather prisoners' views on their health care and the discharge process and to inform improvements in health care. Prisoners with severe and enduring mental health problems were linked with their local community mental health team and, where feasible, community teams visited before discharge.

Good practice

- 9.45 *A discharge feedback questionnaire was used to gather prisoners' views on health care and the discharge process and to inform improvements in health care.*

Finance, benefit and debt

- 9.46 There should be further interventions to assist prisoners with debt management problems. (8.46)

Not achieved. There was currently little or no provision to assist prisoners with debt management. The family links team had taken over responsibility for this work approximately eight weeks previously and, although two of the team had undertaken a Nacro debt advice course, provision remained basic. Only three prisoners were actively engaged in this work at the time of the inspection, which was disproportionately low. In our survey, only 17% of respondents said they knew who to contact in the prison for such help, and yet 32% said they expected to have problems with money and finance on release. The Sova charity provided a single morning session on budgeting, debt and finance as part of the two-week pre-release course, but this was of little value for prisoners already with debt problems – in our survey 17% of respondents said they had money worries on arrival in the prison, compared with 11% in 2008.

We repeat the recommendation.

Additional information

- 9.47 The family links team had started negotiations to introduce bank accounts for prisoners before release but this had yet to be established, and in our survey only 16% of respondents said they knew who to speak to at the prison regarding this.

Drugs and alcohol

- 9.48 **The substance misuse policy document should be updated and contain detailed strategic action plans and performance measures. (8.55)**

Achieved. The main drug and alcohol strategy documents were up to date. There was a separate drug and alcohol action plan, which was reviewed at the bimonthly drug strategy team meetings.

- 9.49 **There should be dedicated facilities for voluntary drug testing on all residential units. (8.56)**

Achieved. There were 240 drug testing compact and testing facilities on each residential unit, although they were of variable quality. The suites on two wings were easily accessible by prisoners from the shower area, as they were separated only by an unlocked half stable-type door. These doors had been damaged and the suites were untidy and dirty.

Housekeeping point

- 9.50 Compact based drug testing suites should remain locked and inaccessible to prisoners when not in use, and should be kept clean and tidy as a suitably forensic testing environment.

- 9.51 **Psychometric test results taken pre- and post-short duration programme courses should be annotated to individual prisoners as a measure of progress. (8.57)**

Not achieved. No action had been taken by the resettlement services group.
We repeat the recommendation.

Additional information

- 9.52 The counselling, assessment, referral, advice and throughcare (CARAT) team had an active caseload of 170. Prisoners told us that CARATs and the other drug services were very helpful and easy to approach. The CARAT team additionally delivered a quarterly drugs and healthy living course. This was popular with prisoners who said that it was up to date and relevant to their needs. The short duration drug programme (SDP) was also in place with 14 completions since April 2011.
- 9.53 A full-time alcohol worker and a regular alcohol awareness resettlement group, co-facilitated by IDTS staff, had made a positive addition to the prison's substance use treatment approach.
- 9.54 Prisoners welcomed a service user focus group and a separate CARAT clients' forum and told us that they felt positively involved in the development of services.

- 9.55 Links to local drug intervention programmes (DIPs) were good, although many prisoners were from Cumbria, which involved long distances and limited DIP attendance at the prison. However, there was regular telephone contact with DIP teams in Cumbria to facilitate resettlement arrangements.

Children and families of offenders

- 9.56 There should be an analysis to establish if there is sufficient capacity to meet the demand for visits, and any deficits identified should be remedied. (8.68)

Achieved. The capacity of the visits hall had been increased to 40 to meet demand.

- 9.57 Visits booking arrangements should be improved. (8.69)

Not achieved. We received many complaints from both prisoners and visitors about their difficulties in booking visits. Visits could only be booked by telephone as there was no email option. The two bookings clerks had been reduced to just one some months before the inspection.

We repeat the recommendation.

- 9.58 The environment in visits should be improved, including better facilities for visitors' children and better catering. (8.70)

Partially achieved. Facilities for catering had improved but only recently. During the week of the inspection a small facility had been opened offering sandwiches and snacks to prisoners and their visitors. Visitors and prisoners told us that this facility had been available only infrequently before the inspection, but staff said that it would now be available permanently. There were also vending machines selling hot and cold drinks and sweets. There was a small children's play area but this was not staffed and had very few facilities. Children could not use the area unsupervised, although books could be taken to tables during the visit.

Further recommendation

- 9.59 Facilities for children in visits should be improved, including the staffing of the children's play area.

- 9.60 Visitors should be encouraged to make contributions to the comments book. (8.71)

Partially achieved. Although the visitors' comments book had been located in the visits area outside the main visits hall it remained little used. Some comments had been responded to but they were not followed up or responded to systematically, and some visitors said there was little point in making comments as nothing would happen.

Further recommendation

- 9.61 The prison should respond to complaints by visitors systematically and make the responses known to them.

- 9.62 Prisoners going to visits should not be required to wear boiler suits or plastic tags on their shoes. (8.72)

Partially achieved. Prisoners were no longer required to wear boiler suits or plastic tags on their trainers during visits. However, they were required to wear red bibs, which remained disproportionate.

Further recommendation

9.63 Prisoners should not have to wear bibs during visits.

9.64 **Young adults should be given the opportunity to participate in family days and parenting courses. (8.73)**

Achieved. The family links team organised four to six family visits days a year, with support from the local Sure Start. These visits were available for up to 10 prisoners at a time and ran during school holidays. A parenting course had been running for approximately two years but had only recently achieved level 2 accreditation. The programme, scheduled to be delivered four to five times a year, ran on one day a week for 10 weeks and was facilitated by two workers from the local Sure Start.

Additional information

9.65 The family links team was well established in the prison and well known by prisoners. The team consisted of a team leader and two full-time workers. At the time of the inspection, the team was delivering resettlement pathway work on accommodation, finance, benefit and debt and children and families. Along with its core work, the team also offered support to prisoners with family-related issues and worked with between 40 and 60 young adults at a time. For new fathers, the team organised and facilitated special visits with the baby and mother. Similar visits could be arranged with other family members following bereavements etc.

9.66 Many visitors told us of problems in accessing visits. The visits centre opened at noon each day and visits started at 1.45pm. Although the prison was informed of the arrival of visitors at 1.45pm or as soon as they arrived thereafter, there continued to be delays and it was not unusual, we were told, for a visit not to start until 2.30pm because of delays in getting prisoners to the visits hall. Despite this, in our survey 45% of respondents said that they had a visit in their first week at Lancaster Farms, against the comparator of 30%, and 46%, against 40%, said they had had a visit in the previous week.

Further recommendation

9.67 There should not be delays in getting prisoners to visits.

Attitudes, thinking and behaviour

9.68 **Prisoners serving IPP sentences should have access to the interventions identified in their sentence plan or should be transferred to establishments where they can be provided in a timely manner. (8.34)**

Achieved. The prison delivered three accredited programmes – thinking skills, controlling anger and learning to manage it (CALM) and the short duration drugs programme (see paragraph 9.52). Thinking skills (TSP) was scheduled to be delivered seven times and CALM

four times in 2011/12. Although indeterminate-sentenced prisoners were not prioritised for access to programmes, there were sufficient courses to meet demand without undue waiting times. The P-ASRO (prison addressing substance related offending) programme had been identified as a sentence planning target for one IPP prisoner and, as that was not available at Lancaster Farms, he had been sent to HMYOI Stoke Heath to complete it and was due to return the week after the inspection.

Additional information

- 9.69 Since the last inspection, the prison had regularly struggled with low staffing levels that had sometimes affected its ability to deliver all identified programmes. In the forthcoming year, the target had been reduced to 11 courses rather than the initially scheduled 12 (four CALM and eight TSP).
- 9.70 As well as the main accredited programmes, the prison had delivered a few non-accredited programmes that had been endorsed by area office. As the main accredited programmes were, appropriately, prioritised, the restorative justice, anger management and A-Z motivational programmes had not been run for the previous nine months. The impact on prisoners' access to programmes had been minimal so far, and the validated programmes were hoped to be reintroduced.

Further recommendation

- 9.71 There should be sufficient offending behaviour programmes to meet the needs of the prisoner population.

Section 10: Summary of recommendations, housekeeping points and good practice

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

Main recommendations

To the governor

-
- 10.1 Initial risk assessments should always be carried out with new arrivals in private and on the day they arrive, and there should be a record of follow-up actions where issues are identified. (HP53)
 - 10.2 All staff should be actively involved in monitoring and addressing violence and bullying, and the tackling antisocial behaviour (TAB) strategy should be vigorously applied. (HP54)
 - 10.3 Time out of cell should be significantly increased, and the core day should provide more domestic and association time and for a longer duration. (HP55)
 - 10.4 All prisoners should receive effective custody or sentence planning. (HP56)
 - 10.5 The frequency of offender supervisors' contact with prisoners on their caseload should be agreed, and there should be casework supervision for all offender supervisors to support their work with prisoners. (HP57)

Recommendation

To NOMS

-
- 10.6 Psychometric test results taken pre- and post-short duration programme courses should be annotated to individual prisoners as a measure of progress. (9.51)

Recommendations

To Prison Escort and Custody Services

-
- 10.7 Prisoners should only be handcuffed from the escort vehicle to reception if required by specific risks. (1.5)
 - 10.8 Prisoners should be escorted to the prison as soon as they have been dealt with by the courts, and escort vans should arrive at the prison before 7pm. (1.6)

Recommendations

To the governor

Courts, escorts and transfers

-
- 10.9 There should be arrangements to process prisoners arriving during the lunch period. (1.7)

First days in custody: reception

- 10.10 Private rooms should be available to interview new arrivals. (1.14)

First days in custody: first night

- 10.11 New arrivals should have the opportunity for a shower on the day they arrive. (1.29)

First days in custody: induction

- 10.12 The induction carousel should be held in a suitable environment that affords privacy. (1.36)

Residential units: accommodation and facilities

- 10.13 Toilets in double cells should have privacy screening. (2.2)
- 10.14 All cells should all be provided with lockable cabinets. (2.4)
- 10.15 The offensive display policy should be implemented. (2.7)

Residential units: clothing and possessions

- 10.16 Prisoners should be able to wear their own clothes. (2.12)
- 10.17 Access to wing laundries should be flexible and the provision of prison kit should be improved. (2.14)

Staff-prisoner relationships

- 10.18 Staff should address prisoners by their titles or preferred names. (2.16)

Bullying and violence reduction

- 10.19 The quality of entries in tackling antisocial behaviour (TAB) documents should be improved and the violence reduction committee should quality assure them. (3.6)
- 10.20 The prison should take specific steps to reduce the number of fights and assaults. (3.16)
- 10.21 The quality of investigation into all violent incidents should be improved. (3.17)
- 10.22 Support for the victims of violence should be better developed. (3.18)

Self-harm and suicide

- 10.23 Prisoners should have 24-hour access to Listeners. (3.30)

Diversity

- 10.24 The diversity policy should be published. (4.1)
- 10.25 The sexual orientation action plan should be further developed. (4.4)

Diversity: foreign nationals

- 10.26 There should be stronger links with appropriate community organisations that can offer a range of relevant support to foreign nationals. (4.25)
- 10.27 There should be more analysis and better understanding of the negative views expressed by foreign national prisoners. (4.31)
- 10.28 Information should be available for prisoners in a range of languages. (4.32)

Diversity: disability

- 10.29 The prison should adapt cells to accommodate prisoners with disabilities. (4.33)

Health services: general

- 10.30 Contract cleaning that meets NHS standards should be extended to all health care areas. (5.3)

Health services: clinical governance

- 10.31 All discipline staff should have annual first aid and basic life support skills training. (5.21)

Health services: primary care

- 10.32 Prisoners should be informed of the time and nature of internal health care appointments before the day of the appointment. (5.31)
- 10.33 There should be a dedicated primary mental health service closely linked to or integrated with the secondary mental health service. (5.32)

Health services: pharmacy

- 10.34 There should be regular audit of medicines against usage. (5.38)
- 10.35 The pharmacy service level agreement should allow sufficient time for the pharmacist to take a more active role in health initiatives at the prison, including direct contact with patients. Clinical audit and prescribing review should also be encouraged. (5.39)
- 10.36 Discipline officers should provide active support during administration of medications on the wings. (5.46)
- 10.37 Prisoners should be able to have their medication in possession, subject to individual risk assessment. (5.47)

Health services: inpatient care

- 10.38 The prison and the PCT should ensure that in cases where the risk and actual occurrence of self-harm is deemed very significant, there is an early and planned approach which expedites mental health assessment and transfer to an appropriate therapeutic placement and the potential use of mechanical restraints is avoided. (5.64)

Health services: mental health

- 10.39 All officers, including newly trained officers, should receive regular mental health awareness training. (5.66)
- 10.40 Prisoners awaiting transfer under the Mental Health Act should be transferred expeditiously to ensure their well-being. (5.72)

Time out of cell

- 10.41 Prisoners should be allowed out of their cell daily to attend to domestic activity, such as showers. (6.2)
- 10.42 The environment in exercise yards should be improved and they should be better equipped. (6.4)

Learning and skills and work activities: leadership and management

- 10.43 The prison should work with The Manchester College to ensure that all education staff are well informed and trained in safeguarding. (6.17)
- 10.44 The allocation board should manage the allocation of wing cleaning and orderly roles to ensure fair and equitable deployment of prisoners. (6.18)

Learning and skills and work activities: vocational training

- 10.45 Individual learning plans should include short-term goals to ensure learners effectively engage in plans to support their progress and achievement. (6.28)

Learning and skills and work activities: education

- 10.46 The variety of learning resources should be extended to reduce the over-reliance on worksheets. (6.36)
- 10.47 The use of electronic individual learning plans should be widened to enable all prisoners to access their targets easily and be aware of their progress. (6.37)

Physical education and health promotion

- 10.48 Data on participation in PE by different groups should be improved to enable PE staff to identify and respond to any under-representation effectively. (6.54)

Discipline: disciplinary procedures

- 10.49 Minor infringements of prison rules and childish behaviour should be dealt with using less formal procedures than adjudications. (7.10)
- 10.50 The widespread use of loss of association as punishment for minor offences should be reduced. (7.17)

Discipline: the use of force

- 10.51 Force should be used as a last resort and only when attempts at meaningful de-escalation have failed. (7.19)

Catering

- 10.52 Steps should be taken to address prisoners' poor perceptions of the quality of food. (8.2)
- 10.53 Breakfast should be issued to prisoners on the morning it is to be eaten. (8.14)

Prison shop

- 10.54 New arrivals should be able to submit orders for the shop within their first 24 hours at the prison. (8.18)

Strategic management of resettlement

- 10.55 Voluntary and community sector groups should be invited to be represented at the reducing reoffending forum. (9.2)
- 10.56 The membership and work of the reducing reoffending forum should reflect the prison's approach to diversity and inclusion. (9.3)
- 10.57 There should be an up-to-date reducing reoffending policy. (9.6)
- 10.58 The reducing reoffending strategy should include development objectives, identified through the annual resettlement needs analysis, for all resettlement pathways, offender management and public protection work. (9.7)

Offender management and planning: sentence planning and offender management

- 10.59 The prison should ensure that prisoners are aware that family members can attend sentence planning meetings and reviews, and they should be encouraged to invite them. (9.12)
- 10.60 Prisoners should not be transferred to other establishments while home detention curfew assessments are under way. (9.13)

- 10.61 Prisoners should have access to release on temporary licence wherever possible to support resettlement plans. (9.14)
- 10.62 Offender supervisors should be included in ACCT self-harm monitoring or anti-bullying reviews of prisoners for whom they are responsible. (9.16)
- 10.63 The prison should introduce pre-release meetings that draw on pathway and offender management work, along with that in the pre-release course, to review progress and plan responses to post-release needs. (9.19)
- 10.64 All sentence planning meetings should be formally managed with contributions invited for all departments involved with the prisoner. (9.25)

Offender management and planning: public protection

- 10.65 Offender supervisors should be actively involved with public protection meetings concerning the prisoners for whom they are responsible. (9.30)

Resettlement pathways: accommodation

- 10.66 There should be greater promotion of the accommodation services to ensure that prisoners are aware of their availability. (9.36)

Resettlement pathways: education, training and employment

- 10.67 Links with employers should be further developed to establish employment opportunities for prisoners on release. (9.43)

Resettlement pathways: finance, benefit and debt

- 10.68 There should be further interventions to assist prisoners with debt management problems. (9.46)

Resettlement pathways: children and families of offenders

- 10.69 Visits booking arrangements should be improved. (9.57)
- 10.70 Facilities for children in visits should be improved, including the staffing of the children's play area. (9.59)
- 10.71 The prison should respond to complaints by visitors systematically and make the responses known to them. (9.61)
- 10.72 Prisoners should not have to wear bibs during visits. (9.63)
- 10.73 There should not be delays in getting prisoners to visits. (9.67)

Resettlement pathways: attitudes, thinking and behaviour

- 10.74 There should be sufficient offending behaviour programmes to meet the needs of the prisoner population. (9.71)

Housekeeping points

Courts, escorts and transfers (To Prison Escort and Custody Services)

- 10.75 Escort vans should be kept clean at all times and free from graffiti. (1.8)

First days in custody: reception

- 10.76 Reading materials should be available in all the reception holding rooms. (1.13)
- 10.77 The toilet and sink in the reception holding room should be cleaned and maintained to a hygienic standard. (1.20)
- 10.78 The dining room and kitchen area in reception should be cleaned and maintained to a decent standard. (1.21)

First days in custody: first night

- 10.79 Cells for new arrivals should be properly prepared and duvets should be clean. (1.30)

First days in custody: induction

- 10.80 Safer custody induction sessions should always take place. (1.37)
- 10.81 There should be better support from peer advisers and Listeners during the induction process. (1.38)

Residential units: accommodation and facilities

- 10.82 Shower rooms should be kept clean and in a good decorative state. (2.11)

Bullying and violence reduction

- 10.83 A wider range of violence-related data should be collated and submitted to the violence reduction committee for analysis. (3.4)

Applications and complaints

- 10.84 The nominated complaints clerk should collect complaint forms from locked boxes on wings. (3.40)

Faith and religious activity

- 10.85 Prisoners should be able to attend faith services on the day without making an application 24 hours in advance. (3.53)

Substance use: drug testing

- 10.86 All mandatory drug test (MDT) holding rooms should be adequately ventilated. (3.59)

Health services: general

- 10.87 Hand washing facilities in all health care areas should meet infection control requirements. (5.4)

Health services: pharmacy

- 10.88 The pharmacist should regularly cross check faxed prescriptions with the originals. (5.48)
- 10.89 Rooms used for administration of medications should be gated or have a hatch. (5.49)
- 10.90 Medications should be stored in their original packaging and not separated from the information leaflets. (5.50)

Learning and skills and work activities: induction

- 10.91 Fast-track prisoners should not have to repeat basic skills assessments unnecessarily. (6.21)

Learning and skills and work activities: library

- 10.92 The stock of vocational training books and magazines in the library should be increased. (6.44)

Physical education and health promotion

- 10.93 The PE department should extend its quality improvement process by working with other departments to identify and share good practice. (6.55)
- 10.94 The benefits of exercise and healthy lifestyles should be better promoted on accommodation wings. (6.56)
- 10.95 PE staff assessment reports on individual prisoners' approach to work rate, showing respect, listening and communication should be shared outside the department. (6.57)

Catering

- 10.96 All hot plates should be kept clean. (8.15)

Offender management and planning: sentence planning and offender management

- 10.97 The time of ACCT reviews should be set in advance to increase the potential for offender supervisors to attend. (9.17)

Resettlement pathways: drugs and alcohol

- 10.98 Compact based drug testing suites should remain locked and inaccessible to prisoners when not in use, and should be kept clean and tidy as a suitably forensic testing environment. (9.50)

Examples of good practice

- 10.99 Serious health care incidents were analysed effectively to identify failings and enable staff to learn from errors. (5.16)
- 10.100 A dental service protocol identified clearly the processes and expected outcomes that supported a consistent and safe dental service. (5.60)
- 10.101 A discharge feedback questionnaire was used to gather prisoners' views on health care and the discharge process and to inform improvements in health care. (9.45)

Appendix I: Inspection team

Nigel Newcomen	Deputy Chief Inspector
Martin Lomas	Team leader
Keith McInnis	Inspector
Kevin Parkinson	Inspector
Gordon Riach	Inspector
Adam Altoft	Researcher
Hayley Cripps	Researcher
Joseph Simmonds	Research trainee
Michael Skidmore	Researcher

Specialist inspectors

Paul Roberts	Substance use inspector
Nicola Rabjohns	Health services inspector
Steve Gascoigne	Pharmacist
Sheila Willis	Ofsted inspector
Jenny Blackberry	Ofsted inspector
Simon Cutting	Ofsted inspector

Appendix II: Prison population profile

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

Status	18-20 yr olds	21 and over	%
Sentenced	362	16	73.8
Recall	37	0	7.2
Convicted unsentenced	38	2	7.8
Remand	52	3	10.7
Other	2	0	0.4
Total	491	21	100

Sentence	18-20 yr olds	21 and over	%
Unsentenced	99	5	20.3
Less than 6 months	51	2	10.4
6 months to less than 12 months	30	4	6.6
12 months to less than 2 years	86	1	17
2 years to less than 4 years	71	1	14.1
4 years to less than 10 years	40	4	8.6
10 years and over (not life)	88	2	17.6
ISPP	6	0	1.2
Life	20	2	4.3
Total	491	21	100

Age	Number of prisoners	%
Under 21 years	491	95.9
21 years to 29 years	21	4.1
Total	512	100

Nationality	18-20 yr olds	21 and over	%
British	459	18	93.2
Foreign nationals	13	2	2.8
Not stated	19	1	3.9
Total	491	21	100

Security category	18-20 yr olds	21 and over	%
Uncategorised unsentenced	13	0	2.5
Uncategorised sentenced	65	3	13.3
Cat D	1	0	0.2
Other (YOI Closed)	412	18	84
Total	491	21	100

Ethnicity	18-20 yr olds	21 and over	%
<i>White:</i>			
British	419	17	85.2
Irish	2	0	0.4
Other white	2	0	0.4
<i>Mixed:</i>			
White and black Caribbean	10	2	2.3
White and black African	4	0	0.8
White and Asian	1	0	0.2
Other mixed	6	0	1.2
<i>Asian or Asian British:</i>			
Indian	1	0	0.2
Pakistani	14	0	2.7

Bangladeshi	5	0	1
Other Asian	2	0	0.4
<i>Black or black British:</i>			
Caribbean	6	0	1.2
African	0	1	0.2
Other black	2	0	0.4
Not stated	17	1	3.5
Total	491	21	100

Religion	18-20 yr olds	21 and over	%
Church of England	52	6	11.3
Roman Catholic	122	5	24.8
Other Christian denominations	16	1	3.3
Muslim	34	0	6.6
Buddhist	4	0	0
Other	0	1	0.2
No religion	257	8	51.8
Not stated	6	0	1.2
Total	491	21	100

Sentenced prisoners only

Length of stay	18-20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	116	22.7	2	0.4
1 month to 3 months	111	21.7	6	1.2
3 months to 6 months	77	15	3	0.6
6 months to 1 year	55	10.7	0	0
1 year to 2 years	33	6.4	4	0.8
2 years to 4 years	0	0	1	0.2
Total	392	76.6	16	3.1

Unsentenced prisoners only

Length of stay	18-20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	34	6.6	0	0
1 month to 3 months	38	7.4	1	0.2
3 months to 6 months	22	4.3	4	0.8
6 months to 1 year	5	1	0	0
Total	99	19.3	5	1

Main offence	18-20 yr olds	21 and over	%
Violence against the person	95	3	19.1
Sexual offences	4	1	1.0
Burglary	102	4	20.7
Robbery	100	2	19.9
Theft and handling	19	1	3.9
Drugs offences	32	1	6.5
Other offences	55	2	11.1
Offence not recorded/holding warrant	84	7	17.8
Total	491	21	100

Appendix III: Summary of prisoner questionnaires and interviews

Prisoner survey methodology

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

Choosing the sample size

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

At the time of the survey on 1 June 2011, the young adult population at HMYOI Lancaster Farms was 517. The sample size was 188. Overall, this represented 36% of the young adult population.

Selecting the sample

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

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

Interviews were carried out with any respondents with literacy difficulties. Two respondents were interviewed.

Methodology

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

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

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

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

Response rates

In total, 177 respondents completed and returned their questionnaires. This represented 34% of the young adult population. The response rate was 94%. In addition to the three respondents who refused to complete a questionnaire, three questionnaires were not returned and five were returned blank.

Comparisons

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

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

The following analyses have been conducted:

- The current survey responses in 2011 against comparator figures for all young adults surveyed in young offender institutions. This comparator is based on all responses from young adult surveys carried out in 13 young offender institutions since 2005.
- The current survey responses in 2011 against the responses of young adults surveyed at HMYOI Lancaster Farms in 2008.
- A comparison within the 2011 survey between the responses of white young adults and those from a black and minority ethnic group.
- A comparison within the 2011 survey between the responses of young adults who considered themselves to have a disability and those who did not.

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

It should be noted that, in order for statistical comparisons to be made between the most recent survey data and those of the previous survey, both sets of data have been coded in the same way. This may result in changes to percentages from previously published surveys. However, all percentages are true of the populations they were taken from, and the statistical significance is correct.

Summary

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

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

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

Survey results

Section 1: About you

Q1.2 How old are you?

<i>Under 21</i>	172 (97%)
<i>21 - 29</i>	5 (3%)
<i>30 - 39</i>	0 (0%)
<i>40 - 49</i>	0 (0%)
<i>50 - 59</i>	0 (0%)
<i>60 - 69</i>	0 (0%)
<i>70 and over</i>	0 (0%)

Q1.3 Are you sentenced?

<i>Yes</i>	130 (73%)
<i>Yes - on recall</i>	16 (9%)
<i>No - awaiting trial</i>	16 (9%)
<i>No - awaiting sentence</i>	15 (8%)
<i>No - awaiting deportation</i>	0 (0%)

Q1.4 How long is your sentence?

<i>Not sentenced</i>	31 (18%)
<i>Less than 6 months</i>	24 (14%)
<i>6 months to less than 1 year</i>	14 (8%)
<i>1 year to less than 2 years</i>	31 (18%)
<i>2 years to less than 4 years</i>	30 (17%)
<i>4 years to less than 10 years</i>	34 (20%)
<i>10 years or more</i>	3 (2%)
<i>IPP (indeterminate sentence for public protection)</i>	5 (3%)
<i>Life</i>	2 (1%)

Q1.5 Approximately, how long do you have left to serve (if you are serving life or IPP, please use the date of your next board)?

<i>Not sentenced</i>	31 (20%)
<i>6 months or less</i>	49 (32%)
<i>More than 6 months</i>	72 (47%)

Q1.6 How long have you been in this prison?

<i>Less than 1 month</i>	37 (22%)
<i>1 to less than 3 months</i>	33 (20%)
<i>3 to less than 6 months</i>	29 (17%)
<i>6 to less than 12 months</i>	25 (15%)
<i>12 months to less than 2 years</i>	23 (14%)
<i>2 to less than 4 years</i>	12 (7%)
<i>4 years or more</i>	8 (5%)

Q1.7 Are you a foreign national? (i.e. do not hold UK citizenship)

<i>Yes</i>	13 (8%)
<i>No</i>	149 (92%)

Q1.8 Is English your first language?
 Yes 156 (96%)
 No 7 (4%)

Q1.9 What is your ethnic origin?

<i>White - British</i>	140 (83%)	<i>Asian or Asian British - Bangladeshi</i>	2 (1%)
<i>White - Irish</i>	4 (2%)	<i>Asian or Asian British - other</i>	1 (1%)
<i>White - other</i>	1 (1%)	<i>Mixed race - white and black Caribbean</i>	4 (2%)
<i>Black or black British - Caribbean</i>	1 (1%)	<i>Mixed race - white and black African</i>	3 (2%)
<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>	0 (0%)
<i>Asian or Asian British - Indian</i> ...	0 (0%)	<i>Chinese</i>	0 (0%)
<i>Asian or Asian British - Pakistani</i>	11 (7%)	<i>Other ethnic group</i>	0 (0%)

Q1.10 Do you consider yourself to be Gypsy/Romany/Traveller?
 Yes 7 (4%)
 No 159 (96%)

Q1.11 What is your religion?

<i>None</i>	66 (39%)	<i>Hindu</i>	0 (0%)
<i>Church of England</i>	38 (23%)	<i>Jewish</i>	0 (0%)
<i>Catholic</i>	40 (24%)	<i>Muslim</i>	15 (9%)
<i>Protestant</i>	1 (1%)	<i>Sikh</i>	0 (0%)
<i>Other Christian denomination</i>	3 (2%)	<i>Other</i>	3 (2%)
<i>Buddhist</i>	2 (1%)		

Q1.12 How would you describe your sexual orientation?

<i>Heterosexual/straight</i>	172 (100%)
<i>Homosexual/gay</i>	0 (0%)
<i>Bisexual</i>	0 (0%)
<i>Other</i>	0 (0%)

Q1.13 Do you consider yourself to have a disability?
 Yes 22 (13%)
 No 154 (88%)

Q1.14 How many times have you been in prison before?

<i>0</i>	<i>1</i>	<i>2 to 5</i>	<i>More than 5</i>
58 (33%)	21 (12%)	67 (38%)	30 (17%)

Q1.15 Including this prison, how many prisons have you been in during this sentence/remand time?

<i>1</i>	<i>2 to 5</i>	<i>More than 5</i>
66 (40%)	89 (54%)	11 (7%)

Q1.16	Do you have any children under the age of 18?	
	Yes	34 (19%)
	No	141 (81%)

Section 2: Courts, transfers and escorts

Q2.1 We want to know about the most recent journey you have made either to or from court or between prisons. How was:

	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>	<i>Don't remember</i>	<i>N/A</i>
The cleanliness of the van?	3 (2%)	61 (35%)	33 (19%)	34 (20%)	33 (19%)	8 (5%)	1 (1%)
Your personal safety during the journey?	17 (10%)	80 (48%)	33 (20%)	17 (10%)	12 (7%)	6 (4%)	0 (0%)
The comfort of the van?	3 (2%)	6 (4%)	13 (8%)	47 (27%)	99 (58%)	2 (1%)	1 (1%)
The attention paid to your health needs?	9 (5%)	49 (30%)	45 (27%)	25 (15%)	21 (13%)	11 (7%)	5 (3%)
The frequency of toilet breaks?	4 (2%)	32 (19%)	22 (13%)	33 (19%)	55 (32%)	8 (5%)	18 (10%)

Q2.2 How long did you spend in the van?

<i>Less than 1 hour</i>	<i>Over 1 hour to 2 hours</i>	<i>Over 2 hours to 4 hours</i>	<i>More than 4 hours</i>	<i>Don't remember</i>
28 (16%)	99 (57%)	35 (20%)	8 (5%)	5 (3%)

Q2.3 How did you feel you were treated by the escort staff?

<i>Very well</i>	<i>Well</i>	<i>Neither</i>	<i>Badly</i>	<i>Very badly</i>	<i>Don't remember</i>
17 (10%)	94 (53%)	43 (24%)	9 (5%)	5 (3%)	8 (5%)

Q2.4 Please answer the following questions about when you first arrived here:

	<i>Yes</i>	<i>No</i>	<i>Don't remember</i>
Did you know where you were going when you left court or when transferred from another prison?	148 (84%)	26 (15%)	2 (1%)
Before you arrived here did you receive any written information about what would happen to you?	35 (20%)	129 (75%)	9 (5%)
When you first arrived here did your property arrive at the same time as you?	142 (82%)	25 (14%)	6 (3%)

Section 3: Reception, first night and induction

Q3.1 In the first 24 hours, did staff ask you if you needed help or support with the following? (Please tick all that apply to you.)

<i>Didn't ask about any of these.....</i>	33 (20%)	<i>Money worries.....</i>	25 (16%)
<i>Loss of property.....</i>	24 (15%)	<i>Feeling depressed or suicidal</i>	85 (53%)
<i>Housing problems.....</i>	60 (37%)	<i>Health problems.....</i>	102 (63%)

Contacting employers	23 (14%)	Needing protection from other prisoners.....	39 (24%)
Contacting family.....	103 (64%)	Accessing phone numbers...	80 (50%)
Ensuring dependants were being looked after	21 (13%)	Other.....	4 (2%)

Q3.2 Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)

Didn't have any problems	66 (44%)	Money worries.....	26 (17%)
Loss of property.....	20 (13%)	Feeling depressed or suicidal.	17 (11%)
Housing problems.....	30 (20%)	Health problems.....	17 (11%)
Contacting employers	13 (9%)	Needing protection from other prisoners	14 (9%)
Contacting family.....	35 (23%)	Accessing phone numbers.....	19 (13%)
Ensuring dependants were looked after	4 (3%)	Other.....	9 (6%)

Q3.3 Please answer the following questions about reception:

	Yes	No	Don't remember
Were you seen by a member of health services?	166 (95%)	7 (4%)	2 (1%)
When you were searched, was this carried out in a respectful way?	146 (85%)	20 (12%)	6 (3%)

Q3.4 Overall, how well did you feel you were treated in reception?

Very well	Well	Neither	Badly	Very badly	Don't remember
27 (15%)	106 (60%)	31 (18%)	4 (2%)	5 (3%)	3 (2%)

Q3.5 On your day of arrival, were you offered information on the following? (Please tick all that apply to you.)

Information about what was going to happen to you	87 (52%)
Information about what support was available for people feeling depressed or suicidal	84 (51%)
Information about how to make routine requests	79 (48%)
Information about your entitlement to visits.....	87 (52%)
Information about health services	98 (59%)
Information about the chaplaincy	87 (52%)
Not offered anything	41 (25%)

Q3.6 On your day of arrival, were you offered any of the following? (Please tick all that apply to you.)

A smokers/non-smokers pack.....	144 (84%)
The opportunity to have a shower.....	23 (13%)
The opportunity to make a free telephone call.....	126 (74%)
Something to eat.....	134 (78%)
Did not receive anything	6 (4%)

Q3.7 Did you meet any of the following people within the first 24 hours of your arrival at this prison? (Please tick all that apply to you.)

Chaplain or religious leader	77 (47%)
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Someone from health services	124 (75%)
A Listener/Samaritans.....	29 (18%)
Did not meet any of these people.....	33 (20%)

Q3.8 Did you have access to the prison shop/canteen within the first 24 hours of your arrival at this prison?

Yes	11 (6%)
No.....	159 (94%)

Q3.9 Did you feel safe on your first night here?

Yes.....	131 (77%)
No.....	22 (13%)
Don't remember.....	17 (10%)

Q3.10 How soon after your arrival did you go on an induction course?

Have not been on an induction course.....	15 (9%)
Within the first week	105 (63%)
More than a week	37 (22%)
Don't remember.....	11 (7%)

Q3.11 Did the induction course cover everything you needed to know about the prison?

Have not been on an induction course.....	15 (9%)
Yes	99 (59%)
No.....	37 (22%)
Don't remember.....	16 (10%)

Section 4: Legal rights and respectful custody

Q4.1 How easy is it to:

	Very easy	Easy	Neither	Difficult	Very difficult	N/A
Communicate with your solicitor or legal representative?	16 (10%)	52 (31%)	35 (21%)	37 (22%)	14 (8%)	12 (7%)
Attend legal visits?	31 (18%)	79 (47%)	27 (16%)	7 (4%)	7 (4%)	17 (10%)
Obtain bail information?	12 (8%)	34 (21%)	34 (21%)	27 (17%)	18 (11%)	34 (21%)

Q4.2 Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?

Not had any letters	20 (12%)
Yes.....	68 (40%)
No.....	81 (48%)

Q4.3 Please answer the following questions about the wing/unit you are currently living on:

	Yes	No	Don't know	N/A
Are you normally offered enough clean, suitable clothes for the week?	85 (49%)	82 (47%)	4 (2%)	2 (1%)

Are you normally able to have a shower every day?	140 (81%)	31 (18%)	0 (0%)	1 (1%)
Do you normally receive clean sheets every week?	141 (82%)	25 (14%)	5 (3%)	2 (1%)
Do you normally get cell cleaning materials every week?	149 (89%)	15 (9%)	3 (2%)	1 (1%)
Is your cell call bell normally answered within five minutes?	67 (39%)	87 (51%)	11 (6%)	5 (3%)
Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	93 (55%)	71 (42%)	5 (3%)	1 (1%)
Can you normally get your stored property if you need to?	73 (43%)	55 (32%)	35 (20%)	8 (5%)

Q4.4 What is the food like here?

<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
0 (0%)	29 (17%)	30 (18%)	69 (41%)	41 (24%)

Q4.5 Does the shop/canteen sell a wide enough range of goods to meet your needs?

<i>Have not bought anything yet</i>	9 (5%)
Yes	84 (49%)
No.....	79 (46%)

Q4.6 Is it easy or difficult to get:

	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>	<i>Don't know</i>
A complaint form?	78 (45%)	68 (39%)	7 (4%)	3 (2%)	3 (2%)	14 (8%)
An application form?	82 (49%)	68 (41%)	6 (4%)	1 (1%)	2 (1%)	8 (5%)

Q4.7 Have you made an application?

Yes	120 (69%)
No.....	54 (31%)

Q4.8 Please answer the following questions concerning applications:

(If you have not made an application please tick the 'not made one' option.)

	Not made one	Yes	No
Do you feel <i>applications</i> are dealt with fairly?	54 (32%)	73 (44%)	40 (24%)
Do you feel <i>applications</i> are dealt with promptly? (Within seven days)	54 (32%)	67 (40%)	48 (28%)

Q4.9 Have you made a complaint?

Yes	61 (37%)
No.....	106 (63%)

Q4.10 Please answer the following questions concerning complaints:

(If you have not made a complaint please tick the 'not made one' option.)

	Not made one	Yes	No
Do you feel <i>complaints</i> are dealt with fairly?	106 (63%)	21 (13%)	40 (24%)
Do you feel <i>complaints</i> are dealt with promptly? (within seven days)	106 (63%)	25 (15%)	38 (22%)
Were you given information about how to make an appeal?	70 (44%)	38 (24%)	51 (32%)

Q4.11 Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?

Not made a complaint	106 (62%)
Yes.....	21 (12%)
No.....	43 (25%)

Q4.12 How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?

<i>Don't know who they are</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
59 (35%)	9 (5%)	33 (20%)	38 (23%)	22 (13%)	6 (4%)

Q4.13 What level of the IEP scheme are you on now?

Don't know what the IEP scheme is	6 (4%)
<i>Enhanced</i>	48 (28%)
<i>Standard</i>	107 (63%)
<i>Basic</i>	6 (4%)
<i>Don't know</i>	4 (2%)

Q4.14 Do you feel you have been treated fairly in your experience of the IEP scheme?

Don't know what the IEP scheme is	6 (4%)
Yes	79 (48%)
No	63 (38%)
<i>Don't know</i>	17 (10%)

Q4.15 Do the different levels of the IEP scheme encourage you to change your behaviour?

Don't know what the IEP scheme is	6 (4%)
Yes.....	96 (60%)
No.....	49 (30%)
<i>Don't know</i>	10 (6%)

Q4.16 Please answer the following questions about this prison?

	Yes	No
In the last six months have any members of staff physically restrained you (C&R)?	33 (19%)	137 (81%)
In the last six months have you spent a night in the segregation/care and separation unit?	30 (18%)	140 (82%)

Q4.17 Please answer the following questions about your religious beliefs

	Yes	No	Don't know/ N/A
Do you feel your religious beliefs are respected?	84 (49%)	17 (10%)	69 (41%)
Are you able to speak to a religious leader of your faith in private if you want to?	93 (56%)	11 (7%)	63 (38%)

Q4.18 Can you speak to a Listener at any time if you want to?

Yes	No	Don't know
77 (45%)	25 (15%)	68 (40%)

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

	Yes	No
Is there a member of staff you can turn to for help if you have a problem?	132 (78%)	38 (22%)
Do most staff treat you with respect?	126 (75%)	42 (25%)

Section 5: Safety

Q5.1 Have you ever felt unsafe in this prison?

Yes	63 (37%)
No	108 (63%)

Q5.2 Do you feel unsafe in this prison at the moment?

Yes	26 (15%)
No	144 (85%)

Q5.3 In which areas of this prison do you/have you ever felt unsafe? (Please tick all that apply to you.)

Never felt unsafe	108 (65%)	<i>At mealtimes</i>	17 (10%)
<i>Everywhere</i>	12 (7%)	<i>At health services</i>	2 (1%)
<i>Segregation unit</i>	3 (2%)	<i>Visits area</i>	7 (4%)
<i>Association areas</i>	22 (13%)	<i>In wing showers</i>	31 (19%)
<i>Reception area</i>	2 (1%)	<i>In gym showers</i>	17 (10%)
<i>At the gym</i>	18 (11%)	<i>In corridors/stairwells</i>	13 (8%)
<i>In an exercise yard</i>	11 (7%)	<i>On your landing/wing</i>	17 (10%)
<i>At work</i>	23 (14%)	<i>In your cell</i>	8 (5%)
<i>During movement</i>	28 (17%)	<i>At religious services</i>	6 (4%)
<i>At education</i>	29 (17%)		

Q5.4 Have you been victimised by another prisoner or group of prisoners here?

Yes	39 (23%)	If No, go to question 5.6
No	133 (77%)	

Q5.5 If yes, what did the incident(s) involve/what was it about? (Please tick all that apply to you.)

<i>Insulting remarks (about you or your family or friends)</i>	25 (15%)	<i>Because of your sexuality</i>	3 (2%)
<i>Physical abuse (being hit, kicked or assaulted)</i>	17 (10%)	<i>Because you have a disability</i>	3 (2%)

<i>Sexual abuse</i>	7 (4%)	<i>Because of your religion/religious beliefs</i>	2 (1%)
<i>Because of your race or ethnic origin</i>	7 (4%)	<i>Because of your age</i>	4 (2%)
<i>Because of drugs</i>	4 (2%)	<i>Being from a different part of the country than others</i>	15 (9%)
<i>Having your canteen/property taken</i>	14 (8%)	<i>Because of your offence/crime</i>	7 (4%)
<i>Because you were new here..</i>	16 (9%)	<i>Because of gang related issues</i>	7 (4%)

Q5.6 Have you been victimised by a member of staff or group of staff here?

Yes.....	32 (19%)	If No, go to question 5.8
No.....	139 (81%)	

Q5.7 If yes, what did the incident(s) involve/what was it about? (Please tick all that apply to you.)

<i>Insulting remarks (about you or your family or friends)</i>	17 (10%)	<i>Because you have a disability</i>	5 (3%)
<i>Physical abuse (being hit, kicked or assaulted)</i>	12 (7%)	<i>Because of your religion/religious beliefs</i>	1 (1%)
<i>Sexual abuse</i>	2 (1%)	<i>Because of your age</i>	3 (2%)
<i>Because of your race or ethnic origin</i>	3 (2%)	<i>Being from a different part of the country than others</i>	7 (4%)
<i>Because of drugs</i>	4 (2%)	<i>Because of your offence/crime</i>	2 (1%)
<i>Because you were new here..</i>	8 (5%)	<i>Because of gang related issues</i>	3 (2%)
<i>Because of your sexuality</i>	1 (1%)		

Q5.8 If you have been victimised by prisoners or staff, did you report it?

Not been victimised	116 (71%)
Yes.....	13 (8%)
No.....	35 (21%)

Q5.9 Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?

Yes.....	49 (29%)
No.....	121 (71%)

Q5.10 Have you ever felt threatened or intimidated by a member of staff/group of staff in here?

Yes.....	26 (15%)
No.....	145 (85%)

Q5.11 Is it easy or difficult to get illegal drugs in this prison?

<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>	<i>Don't know</i>
16 (9%)	13 (8%)	12 (7%)	6 (4%)	27 (16%)	95 (56%)

Section 6: Health services

Q6.1 How easy or difficult is it to see the following people?

	<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
The doctor	33 (20%)	23 (14%)	48 (29%)	15 (9%)	38 (23%)	9 (5%)
The nurse	22 (13%)	32 (19%)	76 (46%)	15 (9%)	17 (10%)	4 (2%)
The dentist	30 (18%)	11 (7%)	26 (16%)	14 (9%)	50 (30%)	33 (20%)
The optician	55 (34%)	13 (8%)	18 (11%)	20 (12%)	35 (22%)	21 (13%)

Q6.2 Are you able to see a pharmacist?

Yes	54 (39%)
No	85 (61%)

Q6.3 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	61 (36%)	24 (14%)	50 (30%)	17 (10%)	10 (6%)	7 (4%)
The nurse	34 (20%)	30 (18%)	60 (36%)	14 (8%)	16 (10%)	13 (8%)
The dentist	68 (41%)	14 (9%)	32 (20%)	20 (12%)	17 (10%)	13 (8%)
The optician	92 (57%)	10 (6%)	22 (14%)	24 (15%)	7 (4%)	5 (3%)

Q6.4 What do you think of the overall quality of the health services here?

<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
25 (15%)	18 (11%)	60 (36%)	31 (19%)	22 (13%)	11 (7%)

Q6.5 Are you currently taking medication?

Yes	35 (21%)
No	134 (79%)

Q6.6 If you are taking medication, are you allowed to keep possession of your medication in your own cell?

<i>Not taking medication</i>	134 (79%)
Yes	27 (16%)
No	8 (5%)

Q6.7 Do you feel you have any emotional well-being/mental health issues?

Yes	41 (24%)
No	128 (76%)

Q6.8 Are your emotional well-being/mental health issues being addressed by any of the following? (Please tick all that apply to you.)

<i>Do not have any issues/not receiving any help</i>	148 (89%)
<i>Doctor</i>	12 (7%)
<i>Nurse</i>	5 (3%)
<i>Psychiatrist</i>	5 (3%)
<i>Mental health in-reach team</i>	10 (6%)
<i>Counsellor</i>	2 (1%)
<i>Other</i>	3 (2%)

Q6.9	Did you have a problem with either of the following when you came into this prison?			
		Yes	No	
	Drugs	59 (35%)	109 (65%)	
	Alcohol	39 (25%)	120 (75%)	
Q6.10	Have you developed a problem with drugs since you have been in this prison?			
	Yes		8 (5%)	
	No		163 (95%)	
Q6.11	Do you know who to contact in this prison to get help with your drug or alcohol problem?			
	Yes		60 (35%)	
	No		13 (8%)	
	<i>Did not / do not have a drug or alcohol problem</i>		98 (57%)	
Q6.12	Have you received any intervention or help (including, CARATs, health services etc.) for your drug/alcohol problem, while in this prison?			
	Yes		50 (30%)	
	No		21 (12%)	
	<i>Did not /do not have a drug or alcohol problem</i>		98 (58%)	
Q6.13	Was the intervention or help you received, while in this prison, helpful?			
	Yes		42 (25%)	
	No		8 (5%)	
	<i>Did not have a problem/have not received help</i>		119 (70%)	
Q6.14	Do you think you will have a problem with either of the following when you leave this prison?			
		Yes	No	<i>Don't know</i>
	Drugs	14 (8%)	115 (69%)	37 (22%)
	Alcohol	11 (7%)	117 (73%)	33 (20%)
Q6.15	Do you know who in this prison can help you contact external drug or alcohol agencies on release?			
	Yes		29 (18%)	
	No		26 (16%)	
	N/A		105 (66%)	

Section 7: Purposeful activity

Q7.1	Are you currently involved in any of the following activities? (Please tick all that apply to you.)		
	Prison job		54 (32%)
	Vocational or skills training		51 (30%)
	Education (including basic skills)		52 (31%)
	Offending behaviour programmes		9 (5%)
	<i>Not involved in any of these</i>		28 (17%)

Q7.2 If you have been involved in any of the following, while in this prison, do you think it will help you on release?

	Not been involved	Yes	No	Don't know
Prison job	38 (28%)	53 (40%)	31 (23%)	12 (9%)
Vocational or skills training	24 (19%)	67 (52%)	24 (19%)	13 (10%)
Education (including basic skills)	18 (13%)	78 (58%)	27 (20%)	12 (9%)
Offending behaviour programmes	36 (33%)	39 (35%)	23 (21%)	12 (11%)

Q7.3 How often do you go to the library?

Don't want to go	16 (10%)
<i>Never</i>	36 (22%)
<i>Less than once a week</i>	35 (21%)
<i>About once a week</i>	50 (30%)
<i>More than once a week</i>	18 (11%)
<i>Don't know</i>	11 (7%)

Q7.4 On average how many times do you go to the gym each week?

Don't want to go	0	1	2	3 to 5	More than 5	Don't know
24 (14%)	15 (9%)	15 (9%)	46 (28%)	36 (22%)	18 (11%)	13 (8%)

Q7.5 On average how many times do you go outside for exercise each week?

Don't want to go	0	1 to 2	3 to 5	More than 5	Don't know
11 (7%)	6 (4%)	35 (21%)	60 (36%)	48 (28%)	9 (5%)

Q7.6 On average how many hours do you spend out of your cell on a weekday? (Please include hours at education, at work etc.)

<i>Less than 2 hours</i>	23 (14%)
<i>2 to less than 4 hours</i>	13 (8%)
<i>4 to less than 6 hours</i>	37 (22%)
<i>6 to less than 8 hours</i>	48 (29%)
<i>8 to less than 10 hours</i>	22 (13%)
<i>10 hours or more</i>	8 (5%)
<i>Don't know</i>	15 (9%)

Q7.7 On average, how many times do you have association each week?

Don't want to go	0	1 to 2	3 to 5	More than 5	Don't know
2 (1%)	3 (2%)	5 (3%)	22 (13%)	119 (72%)	14 (8%)

Q7.8 How often do staff normally speak to you during association time?

Do not go on association	5 (3%)
<i>Never</i>	20 (12%)
<i>Rarely</i>	44 (27%)
<i>Some of the time</i>	67 (41%)
<i>Most of the time</i>	21 (13%)
<i>All of the time</i>	8 (5%)

Section 8: Resettlement

Q8.1	When did you first meet your personal officer?					
	<i>Still have not met him/her</i>	56	(34%)			
	<i>In the first week</i>	64	(39%)			
	<i>More than a week</i>	25	(15%)			
	<i>Don't remember</i>	21	(13%)			
Q8.2	How helpful do you think your personal officer is?					
	<i>Do not have a personal officer/ still have not met him/her</i>	<i>Very helpful</i>	<i>Helpful</i>	<i>Neither</i>	<i>Not very helpful</i>	<i>Not at all helpful</i>
	56 (34%)	27 (16%)	43 (26%)	18 (11%)	6 (4%)	15 (9%)
Q8.3	Do you have a sentence plan/OASys?					
	<i>Not sentenced</i>					31 (19%)
	<i>Yes</i>					51 (31%)
	<i>No</i>					83 (50%)
Q8.4	How involved were you in the development of your sentence plan?					
	<i>Do not have a sentence plan/OASys</i>					114 (70%)
	<i>Very involved</i>					13 (8%)
	<i>Involved</i>					12 (7%)
	<i>Neither</i>					8 (5%)
	<i>Not very involved</i>					5 (3%)
	<i>Not at all involved</i>					10 (6%)
Q8.5	Can you achieve all or some of your sentence plan targets in this prison?					
	<i>Do not have a sentence plan/OASys</i>					114 (71%)
	<i>Yes</i>					42 (26%)
	<i>No</i>					5 (3%)
Q8.6	Are there plans for you to achieve all/some of your sentence plan targets in another prison?					
	<i>Do not have a sentence plan/OASys</i>					114 (70%)
	<i>Yes</i>					26 (16%)
	<i>No</i>					23 (14%)
Q8.7	Do you feel that any member of staff has helped you to address your offending behaviour while at this prison?					
	<i>Not sentenced</i>					31 (19%)
	<i>Yes</i>					57 (35%)
	<i>No</i>					77 (47%)
Q8.8	Do you feel that any member of staff has helped you to prepare for your release?					
	<i>Yes</i>					36 (22%)
	<i>No</i>					129 (78%)
Q8.9	Have you had any problems with sending or receiving mail?					
	<i>Yes</i>					62 (37%)

No..... 84 (50%)
 Don't know..... 21 (13%)

Q8.10 Have you had any problems getting access to the telephones?

Yes 46 (28%)
 No..... 116 (69%)
 Don't know..... 5 (3%)

Q8.11 Did you have a visit in the first week that you were here?

Not been here a week yet 6 (4%)
 Yes 73 (45%)
 No..... 76 (46%)
 Don't remember..... 9 (5%)

Q8.12 How many visits did you receive in the last week?

<i>Not been in a week</i>	0	1 to 2	3 to 4	5 or more
6 (4%)	80 (50%)	67 (42%)	4 (3%)	2 (1%)

Q8.13 How are you and your family/friends usually treated by visits staff?

Not had any visits 34 (21%)
 Very well..... 22 (13%)
 Well 45 (27%)
 Neither 20 (12%)
 Badly 9 (5%)
 Very badly 3 (2%)
 Don't know..... 32 (19%)

Q8.14 Have you been helped to maintain contact with your family/friends while in this prison?

Yes 78 (47%)
 No..... 89 (53%)

Q8.15 Do you know who to contact to get help with the following within this prison? (Please tick all that apply to you.)

<i>Don't know who to contact</i> .	86 (55%)	<i>Help with your finances in preparation for release</i>	27 (17%)
<i>Maintaining good relationships</i>	31 (20%)	<i>Claiming benefits on release</i> ..	50 (32%)
<i>Avoiding bad relationships</i>	23 (15%)	<i>Arranging a place at college/continuing education on release</i>	37 (24%)
<i>Finding a job on release</i>	49 (32%)	<i>Continuity of health services on release</i>	29 (19%)
<i>Finding accommodation on release</i>	43 (28%)	<i>Opening a bank account</i>	24 (15%)

Q8.16 Do you think you will have a problem with any of the following on release from prison? (Please tick all that apply to you.)

<i>No problems</i>	68 (43%)	<i>Help with your finances in preparation for release</i>	50 (31%)
<i>Maintaining good relationships</i>	24 (15%)	<i>Claiming benefits on release</i> ..	38 (24%)
<i>Avoiding bad relationships</i>	25 (16%)	<i>Arranging a place at college/continuing education on release</i>	41 (26%)
<i>Finding a job on release</i>	79 (50%)	<i>Continuity of health services on release</i>	23 (14%)
<i>Finding accommodation on release</i>	49 (31%)	<i>Opening a bank account</i>	37 (23%)

Q8.17 Have you done anything, or has anything happened to you here that you think will make you less likely to offend in the future?

<i>Not sentenced</i>	31 (19%)
<i>Yes</i>	72 (45%)
<i>No</i>	57 (36%)

Thank you for completing this survey

Main comparator and comparator to last time



Prisoner survey responses HMYOI Lancaster Farms 2011

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

		HMYOI Lancaster Farms 2011	Young adults comparator	HMYOI Lancaster Farms 2011	HMYOI Lancaster Farms 2008
	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				
Number of completed questionnaires returned		177	1650	177	98
SECTION 1: General information					
2	Are you under 21 years of age?	97%	87%	97%	93%
3a	Are you sentenced?	82%	86%	82%	64%
3b	Are you on recall?	9%	7%	9%	8%
4a	Is your sentence less than 12 months?	22%	14%	22%	23%
4b	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	3%	7%	3%	8%
5	Do you have six months or less to serve?	32%	38%	32%	32%
6	Have you been in this prison less than a month?	22%	13%	22%	30%
7	Are you a foreign national?	8%	12%	8%	7%
8	Is English your first language?	96%	91%	96%	94%
9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	14%	34%	14%	13%
10	Do you consider yourself to be Gypsy/Romany/Traveller?	4%	5%	4%	
11	Are you Muslim?	9%	16%	9%	5%
12	Are you homosexual/gay or bisexual?	0%	2%	0%	3%
13	Do you consider yourself to have a disability?	13%	11%	13%	17%
14	Is this your first time in prison?	33%	43%	33%	33%
15	Have you been in more than five prisons this time?	7%	4%	7%	6%
16	Do you have any children under the age of 18?	19%	23%	19%	25%
SECTION 2: Transfers and escorts					
For the most recent journey you have made either to or from court or between prisons:					
1a	Was the cleanliness of the van good/very good?	37%	41%	37%	35%
1b	Was your personal safety during the journey good/very good?	59%	62%	59%	59%
1c	Was the comfort of the van good/very good?	5%	11%	5%	10%
1d	Was the attention paid to your health needs good/very good?	35%	34%	35%	34%
1e	Was the frequency of toilet breaks good/very good?	21%	13%	21%	18%
2	Did you spend more than four hours in the van?	5%	7%	5%	7%
3	Were you treated well/very well by the escort staff?	63%	63%	63%	59%
4a	Did you know where you were going when you left court or when transferred from another prison?	84%	83%	84%	80%
4b	Before you arrived here did you receive any written information about what would happen to you?	20%	24%	20%	17%
4c	When you first arrived here did your property arrive at the same time as you?	82%	85%	82%	82%

Main comparator and comparator to last time

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Percentages which are not highlighted show there is no significant difference					
SECTION 3: Reception, first night and induction					
1	In the first 24 hours, did staff ask you if you needed help/support with the following:				
1b	Problems with loss of property?	15%	14%	15%	16%
1c	Housing problems?	37%	30%	37%	32%
1d	Problems contacting employers?	14%	12%	14%	13%
1e	Problems contacting family?	64%	58%	64%	71%
1f	Problems ensuring dependants were looked after?	13%	12%	13%	14%
1g	Money problems?	16%	17%	16%	20%
1h	Problems of feeling depressed/suicidal?	53%	48%	53%	54%
1i	Health problems?	63%	60%	63%	71%
1j	Problems in needing protection from other prisoners?	24%	18%	24%	23%
1k	Problems accessing phone numbers?	50%	44%	50%	52%
2	When you first arrived:				
2a	Did you have any problems?	56%	59%	56%	63%
2b	Did you have any problems with loss of property?	13%	16%	13%	18%
2c	Did you have any housing problems?	20%	20%	20%	20%
2d	Did you have any problems contacting employers?	9%	6%	9%	6%
2e	Did you have any problems contacting family?	23%	22%	23%	21%
2f	Did you have any problems ensuring dependants were being looked after?	3%	3%	3%	4%
2g	Did you have any money worries?	17%	20%	17%	11%
2h	Did you have any problems with feeling depressed or suicidal?	11%	13%	11%	15%
2i	Did you have any health problems?	11%	13%	11%	11%
2j	Did you have any problems with needing protection from other prisoners?	9%	9%	9%	11%
2k	Did you have problems accessing phone numbers?	13%	18%	13%	11%
3a	Were you seen by a member of health services in reception?	95%	90%	95%	95%
3b	When you were searched in reception, was this carried out in a respectful way?	85%	78%	85%	84%
4	Were you treated well/very well in reception?	76%	60%	76%	69%
5	On your day of arrival, were you offered information about any of the following:				
5a	What was going to happen to you?	52%	54%	52%	53%
5b	Support was available for people feeling depressed or suicidal?	51%	54%	51%	51%
5c	How to make routine requests?	48%	46%	48%	49%
5d	Your entitlement to visits?	52%	57%	52%	60%
5e	Health services?	59%	63%	59%	69%
5f	The chaplaincy?	52%	57%	52%	57%

Main comparator and comparator to last time

Key to tables

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SECTION 3: Reception, first night and induction continued					
6	On your day of arrival, were you offered any of the following:				
6a	A smokers/non-smokers pack?	84%	92%	84%	88%
6b	The opportunity to have a shower?	13%	42%	13%	15%
6c	The opportunity to make a free telephone call?	74%	68%	74%	92%
6d	Something to eat?	78%	80%	78%	81%
7	Within the first 24 hours did you meet any of the following people:				
7a	The chaplain or a religious leader?	47%	45%	47%	46%
7	Someone from health services?	75%	78%	75%	75%
	A Listener/Samaritans?	18%	15%	18%	21%
8	Did you have access to the prison shop/canteen within the first 24 hours?	7%	10%	7%	11%
9	Did you feel safe on your first night here?	77%	78%	77%	74%
10	Have you been on an induction course?	91%	88%	91%	80%
For those who have been on an induction course:					
11	Did the course cover everything you needed to know about the prison?	65%	60%	65%	55%
SECTION 4: Legal rights and respectful custody					
1	In terms of your legal rights, is it easy/very easy to:				
1a	Communicate with your solicitor or legal representative?	41%	40%	41%	32%
1b	Attend legal visits?	66%	51%	66%	58%
1c	Obtain bail information?	29%	21%	29%	27%
2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	40%	38%	40%	40%
3	For the wing/unit you are currently on:				
3a	Are you normally offered enough clean, suitable clothes for the week?	49%	55%	49%	32%
3b	Are you normally able to have a shower every day?	82%	68%	82%	23%
3c	Do you normally receive clean sheets every week?	82%	81%	82%	86%
3d	Do you normally get cell cleaning materials every week?	89%	55%	89%	84%
3e	Is your cell call bell normally answered within five minutes?	39%	43%	39%	31%
3f	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	55%	57%	55%	46%
3g	Can you normally get your stored property if you need to?	43%	36%	43%	25%
4	Is the food in this prison good/very good?	17%	24%	17%	13%
5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	49%	42%	49%	45%
6a	Is it easy/very easy to get a complaints form?	84%	83%	84%	72%
6b	Is it easy/very easy to get an application form?	90%	87%	90%	83%
7	Have you made an application?	69%	85%	69%	65%
For those who have made an application:					
8a	Do you feel applications are dealt with fairly?	65%	61%	65%	54%
8b	Do you feel applications are dealt with promptly (within seven days)?	58%	46%	58%	47%
9	Have you made a complaint?	37%	43%	37%	42%
For those who have made a complaint:					
10a	Do you feel complaints are dealt with fairly?	34%	35%	34%	32%
10b	Do you feel complaints are dealt with promptly (within seven days)?	40%	41%	40%	27%
11	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	33%	24%	33%	31%

Key to tables

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10c	Were you given information about how to make an appeal?	24%	28%	24%	23%
12	Is it easy/very easy to see the Independent Monitoring Board?	25%	24%	25%	19%
13	Are you on the enhanced (top) level of the IEP scheme?	28%	35%	28%	
14	Do you feel you have been treated fairly in your experience of the IEP scheme?	48%	50%	48%	
15	Do the different levels of the IEP scheme encourage you to change your behaviour?	60%	56%	60%	
16a	In the last six months have any members of staff physically restrained you (C&R)?	19%	15%	19%	
16b	In the last six months have you spent a night in the segregation/care and separation unit?	18%	17%	18%	
13a	Do you feel your religious beliefs are respected?	49%	53%	49%	42%
13b	Are you able to speak to a religious leader of your faith in private if you want to?	56%	57%	56%	49%
14	Are you able to speak to a Listener at any time if you want to?	45%	42%	45%	23%
15a	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	78%	73%	78%	73%
15b	Do most staff in this prison treat you with respect?	75%	67%	75%	63%
SECTION 5: Safety					
1	Have you ever felt unsafe in this prison?	37%	36%	37%	32%
2	Do you feel unsafe in this prison at the moment?	15%	14%	15%	8%
4	Have you been victimised by another prisoner?	23%	21%	23%	20%
5	Since you have been here, has another prisoner:				
5a	Made insulting remarks about you, your family or friends?	15%	12%	15%	12%
5b	Hit, kicked or assaulted you?	10%	9%	10%	11%
5c	Sexually abused you?	4%	1%	4%	2%
5d	Victimised you because of your race or ethnic origin?	4%	3%	4%	2%
5e	Victimised you because of drugs?	2%	1%	2%	3%
5f	Taken your canteen/property?	8%	5%	8%	7%
5g	Victimised you because you were new here?	9%	7%	9%	10%
5h	Victimised you because of your sexuality?	2%	1%	2%	3%
5i	Victimised you because you have a disability?	2%	2%	2%	2%
5j	Victimised you because of your religion/religious beliefs?	1%	2%	1%	2%
5k	Victimised you because of your age?	2%	2%	2%	
5l	Victimised you because you were from a different part of the country?	9%	6%	9%	7%
5m	Victimised you because of your offence/crime?	4%	4%	4%	3%
5n	Victimised you because of gang related issues?	4%	5%	4%	
6	Have you been victimised by a member of staff?	19%	23%	19%	22%
7	Since you have been here, has a member of staff:				
7a	Made insulting remarks about you, your family or friends?	10%	12%	10%	11%
7b	Hit, kicked or assaulted you?	7%	5%	7%	3%
7c	Sexually abused you?	1%	1%	1%	3%
7d	Victimised you because of your race or ethnic origin?	2%	5%	2%	2%
7e	Victimised you because of drugs?	2%	2%	2%	2%
7f	Victimised you because you were new here?	5%	6%	5%	5%
7g	Victimised you because of your sexuality?	1%	1%	1%	1%
7h	Victimised you because you have a disability?	3%	2%	3%	1%

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7i	Victimised you because of your religion/religious beliefs?	1%	3%	1%	2%
7j	Victimised you because of your age?	2%	2%	2%	
7k	Victimised you because you were from a different part of the country?	4%	5%	4%	7%
7l	Victimised you because of your offence/crime?	1%	4%	1%	3%
7m	Victimised you because of gang related issues?	2%	3%	2%	
For those who have been victimised by staff or other prisoners:					
8	Did you report any victimisation that you have experienced?	27%	32%	27%	43%
9	Have you ever felt threatened or intimidated by another prisoner/ group of prisoners in here?	29%	27%	29%	21%
10	Have you ever felt threatened or intimidated by a member of staff in here?	15%	18%	15%	22%
11	Is it easy/very easy to get illegal drugs in this prison?	17%	20%	17%	18%
SECTION 6: Health services					
1a	Is it easy/very easy to see the doctor?	43%	42%	43%	46%
1b	Is it easy/very easy to see the nurse?	65%	60%	65%	70%
1c	Is it easy/very easy to see the dentist?	23%	16%	23%	12%
1d	Is it easy/very easy to see the optician?	19%	17%	19%	12%
2	Are you able to see a pharmacist?	39%	49%	39%	46%
For those who have been to the following services, do you think the quality of the health service from the following is good/very good:					
3a	The doctor?	69%	61%	69%	59%
3b	The nurse?	68%	65%	68%	73%
3c	The dentist?	48%	44%	48%	33%
3d	The optician?	47%	47%	47%	33%
4	The overall quality of health services?	55%	53%	55%	52%
5	Are you currently taking medication?	21%	23%	21%	25%
For those currently taking medication:					
6	Are you allowed to keep possession of your medication in your own cell?	78%	66%	78%	82%
7	Do you feel you have any emotional well-being/mental health issues?	24%	22%	24%	35%
For those with emotional well-being/mental health issues, are these being addressed by any of the following:					
8a	Not receiving any help?	52%	41%	52%	28%
8b	A doctor?	32%	25%	32%	28%
8c	A nurse?	14%	21%	14%	17%
8d	A psychiatrist?	14%	21%	14%	38%
8e	The mental health in-reach team?	26%	37%	26%	38%
8f	A counsellor?	5%	10%	5%	31%
9a	Did you have a drug problem when you came into this prison?	35%	31%	35%	46%
9b	Did you have an alcohol problem when you came into this prison?	25%	27%	25%	40%
10a	Have you developed a drug problem since you have been in this prison?	5%	5%	5%	7%
For those with drug or alcohol problems:					
11	Do you know who to contact in this prison for help?	82%	82%	82%	79%
12	Have you received any help or intervention while in this prison?	71%	80%	71%	61%
For those who have received help or intervention with their drug or alcohol problem:					
13	Was this intervention or help useful?	84%	82%	84%	79%

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14a	Do you think you will have a problem with drugs when you leave this prison? (Yes/don't know)	31%	24%	31%	38%
14b	Do you think you will have a problem with alcohol when you leave this prison? (Yes/don't know)	27%	23%	27%	39%
For those who may have a drug or alcohol problem on release, do you know who in this prison:					
15	Can help you contact external drug or alcohol agencies on release?	53%	52%	53%	57%

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	Percentages which are not highlighted show there is no significant difference				
SECTION 7: Purposeful activity					
1	Are you currently involved in any of the following activities:				
1a	A prison job?	32%	44%	32%	34%
1b	Vocational or skills training?	30%	18%	30%	22%
1c	Education (including basic skills)?	31%	37%	31%	34%
1d	Offending behaviour programmes?	5%	11%	5%	7%
2ai	Have you had a job while in this prison?	72%	76%	72%	
For those who have had a prison job while in this prison:					
2aii	Do you feel the job will help you on release?	55%	50%	55%	
2bi	Have you been involved in vocational or skills training while in this prison?	81%	67%	81%	
For those who have had vocational or skills training while in this prison:					
2bii	Do you feel the vocational or skills training will help you on release?	65%	65%	65%	
2ci	Have you been involved in education while in this prison?	87%	80%	87%	
For those who have been involved in education while in this prison:					
2cii	Do you feel the education will help you on release?	67%	68%	67%	
2di	Have you been involved in offending behaviour programmes while in this prison?	67%	63%	67%	
For those who have been involved in offending behaviour programmes while in this prison:					
2dii	Do you feel the offending behaviour programme(s) will help you on release?	53%	56%	53%	
3	Do you go to the library at least once a week?	41%	32%	41%	18%
4	On average, do you go to the gym at least twice a week?	60%	50%	60%	66%
5	On average, do you go outside for exercise three or more times a week?	64%	41%	64%	23%
6	On average, do you spend ten or more hours out of your cell on a weekday?	5%	8%	5%	4%
7	On average, do you go on association more than five times each week?	72%	52%	72%	5%
8	Do staff normally speak to you most of the time/all of the time during association?	18%	25%	18%	20%
SECTION 8: Resettlement					
1	Do you have a personal officer?	66%	75%	66%	70%
For those with a personal officer:					
2	Do you think your personal officer is helpful/very helpful?	64%	60%	64%	68%
For those who are sentenced:					
3	Do you have a sentence plan?	38%	63%	38%	44%
For those with a sentence plan?					
4	Were you involved/very involved in the development of your plan?	52%	63%	52%	57%
5	Can you achieve some/all of your sentence plan targets in this prison?	89%	81%	89%	80%
6	Are there plans for you to achieve some/all your targets in another prison?	53%	46%	53%	67%
For those who are sentenced:					
7	Do you feel that any member of staff has helped you address your offending behaviour while at this prison?	43%	39%	43%	33%
8	Do you feel that any member of staff has helped you to prepare for release?	22%	21%	22%	17%
9	Have you had any problems with sending or receiving mail?	37%	46%	37%	47%
10	Have you had any problems getting access to the telephones?	28%	34%	28%	29%
11	Did you have a visit in the first week that you were here?	45%	30%	45%	34%
12	Did you receive one or more visits in the last week?	46%	40%	46%	46%
For those who have had visits:					
13	How are you and your family/ friends usually treated by visits staff? (Very well/well)	51%	53%	51%	

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	Percentages which are not highlighted show there is no significant difference				
14	Have you been helped to maintain contact with family/friends while in this prison?	47%	43%	47%	41%
15	Do you know who to contact within this prison to get help with the following:				
15b	Maintaining good relationships?	20%	17%	20%	16%
15c	Avoiding bad relationships?	15%	12%	15%	13%
15d	Finding a job on release?	32%	32%	32%	38%
15e	Finding accommodation on release?	28%	34%	28%	34%
15f	With money/finances on release?	17%	22%	17%	19%
15g	Claiming benefits on release?	32%	28%	32%	33%
15h	Arranging a place at college/continuing education on release?	24%	25%	24%	26%
15i	Accessing health services on release?	19%	17%	19%	18%
15j	Opening a bank account on release?	16%	20%	16%	15%
16	Do you think you will have a problem with any of the following on release from prison?				
16b	Maintaining good relationships?	15%	14%	15%	17%
16c	Avoiding bad relationships?	16%	16%	16%	18%
16d	Finding a job?	50%	47%	50%	58%
16e	Finding accommodation?	31%	29%	31%	30%
16f	Money/finances?	32%	26%	32%	32%
16g	Claiming benefits?	24%	24%	24%	29%
16h	Arranging a place at college/continuing education?	26%	25%	26%	32%
16i	Accessing health services?	14%	12%	14%	15%
16j	Opening a bank account?	23%	16%	23%	30%
For those who are sentenced:					
17	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	56%	57%	56%	53%

Diversity analysis



Key question responses (ethnicity) HMYOI Lancaster Farms 2011

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		
Number of completed questionnaires returned		24	145
1.3	Are you sentenced?	83%	84%
1.7	Are you a foreign national?	17%	7%
1.8	Is English your first language?	82%	98%
1.9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?		
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	0%	5%
1.11	Are you Muslim?	61%	1%
1.12	Do you consider yourself to have a disability?	21%	11%
1.13	Is this your first time in prison?	41%	32%
2.1d	Was the attention paid to your health needs good/very good on your journey here?	33%	36%
2.3	Were you treated well/very well by the escort staff?	63%	63%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	79%	84%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	67%	63%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	54%	52%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	79%	59%
3.2a	Did you have any problems when you first arrived?	55%	57%
3.3a	Were you seen by a member of health care staff in reception?	91%	95%
3.3b	When you were searched in reception, was this carried out in a respectful way?	91%	84%
3.4	Were you treated well/very well in reception?	83%	73%
3.7b	Did you have access to someone from health care within the first 24 hours?	71%	75%
3.9	Did you feel safe on your first night here?	67%	78%
3.10	Have you been on an induction course?	96%	91%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	33%	42%

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		
4.3a	Are you normally offered enough clean, suitable clothes for the week?	59%	48%
4.3b	Are you normally able to have a shower every day?	87%	81%
4.3e	Is your cell call bell normally answered within five minutes?	63%	35%
4.4	Is the food in this prison good/very good?	25%	16%
4.5	Does the shop /canteen sell a wide enough range of goods to meet your needs?	37%	50%
4.6a	Is it easy/very easy to get a complaints form?	83%	84%
4.6b	Is it easy/very easy to get an application form?	96%	88%
4.9	Have you made a complaint?	27%	38%
4.13	Are you on the enhanced (top) level of the IEP scheme?	43%	26%
4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?	50%	48%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	62%	60%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	13%	19%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	23%	16%
4.17a	Do you feel your religious beliefs are respected?	57%	48%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	66%	53%
4.18	Are you able to speak to a Listener at any time if you want to?	52%	43%
4.19a	Is there a member of staff you can turn to for help if you have a problem in this prison?	91%	76%
4.19b	Do most staff in this prison treat you with respect?	96%	71%
5.1	Have you ever felt unsafe in this prison?	30%	36%
5.2	Do you feel unsafe in this prison at the moment?	18%	15%
5.4	Have you been victimised by another prisoner?	13%	22%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	5%	4%
5.5i	Have you been victimised because you have a disability? (By prisoners)	0%	2%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	5%	0%
5.6	Have you been victimised by a member of staff?	18%	18%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	5%	2%

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		
5.7h	Have you been victimised because you have a disability? (By staff)	0%	3%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	1%
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	13%	29%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	9%	15%
5.11	Is it easy/very easy to get illegal drugs in this prison?	9%	17%
6.1a	Is it easy/very easy to see the doctor?	34%	44%
6.1b	Is it easy/ very easy to see the nurse?	55%	67%
6.2	Are you able to see a pharmacist?	43%	38%
6.5	Are you currently taking medication?	22%	21%
6.7	Do you feel you have any emotional well-being/mental health issues?	18%	24%
7.1a	Are you currently working in the prison?	27%	33%
7.1b	Are you currently undertaking vocational or skills training?	39%	29%
7.1c	Are you currently in education (including basic skills)?	30%	30%
7.1d	Are you currently taking part in an offending behaviour programme?	0%	6%
7.3	Do you go to the library at least once a week?	61%	37%
7.4	On average, do you go to the gym at least twice a week?	74%	59%
7.5	On average, do you go outside for exercise three or more times a week?	70%	65%
7.6	On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	13%	4%
7.7	On average, do you go on association more than five times each week?	91%	70%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	22%	16%
8.1	Do you have a personal officer?	66%	67%
8.9	Have you had any problems sending or receiving mail?	43%	36%
8.10	Have you had any problems getting access to the telephones?	22%	28%

Diversity analysis - disability



Key questions (disability analysis) HMYOI Lancaster Farms 2011

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

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	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		
Number of completed questionnaires returned		22	154
1.3	Are you sentenced?	77%	84%
1.7	Are you a foreign national?	12%	8%
1.8	Is English your first language?	100%	95%
1.9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	24%	13%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	15%	3%
1.11	Are you Muslim?	15%	8%
1.14	Is this your first time in prison?	41%	32%
2.1d	Was the attention paid to your health needs good/very good?	30%	36%
2.3	Were you treated well/very well by the escort staff?	62%	63%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	76%	85%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	80%	61%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	75%	49%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	75%	61%
3.2a	Did you have any problems when you first arrived?	68%	54%
3.3a	Were you seen by a member of health care staff in reception?	100%	94%
3.3b	When you were searched in reception, was this carried out in a respectful way?	75%	86%
3.4	Were you treated well/very well in reception?	72%	76%
3.7b	Did you have access to someone from health care within the first 24 hours?	84%	74%
3.9	Did you feel safe on your first night here?	75%	77%
3.10	Have you been on an induction course?	85%	92%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	42%	41%

Diversity analysis - disability

Key to tables

		Consider themselves to have a disability	Do not consider themselves to have a disability
	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		
4.3a	Are you normally offered enough clean, suitable clothes for the week?	48%	49%
4.3b	Are you normally able to have a shower every day?	80%	81%
4.3e	Is your cell call bell normally answered within five minutes?	43%	38%
4.4	Is the food in this prison good/very good?	15%	17%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	40%	50%
4.6a	Is it easy/very easy to get a complaints form?	66%	87%
4.6b	Is it easy/very easy to get an application form?	83%	91%
4.9	Have you made a complaint?	27%	38%
4.13	Are you on the enhanced (top) level of the IEP scheme?	20%	29%
4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?	40%	49%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	53%	61%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	36%	17%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	36%	15%
4.17a	Do you feel your religious beliefs are respected?	62%	47%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	64%	54%
4.18	Are you able to speak to a Listener at any time if you want to?	40%	46%
4.19a	Is there a member of staff you can turn to for help if you have a problem in this prison?	66%	79%
4.19b	Do most staff in this prison treat you with respect?	70%	76%
5.1	Have you ever felt unsafe in this prison?	40%	36%
5.2	Do you feel unsafe in this prison at the moment?	20%	14%
5.4	Have you been victimised by another prisoner?	43%	19%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	24%	1%
5.5i	Victimised you because you have a disability?	15%	0%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	5%	1%
5.6	Have you been victimised by a member of staff?	43%	15%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	5%	1%
5.7h	Victimised you because you have a disability?	19%	1%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	1%

Diversity analysis - disability

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	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		
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	35%	28%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	35%	13%
5.11	Is it easy/very easy to get illegal drugs in this prison?	25%	16%
6.1a	Is it easy/very easy to see the doctor?	42%	43%
6.1b	Is it easy/ very easy to see the nurse?	72%	64%
6.2	Are you able to see a pharmacist?	34%	39%
6.5	Are you currently taking medication?	21%	21%
6.7	Do you feel you have any emotional well-being/mental health issues?	36%	22%
7.1a	Are you currently working in the prison?	25%	33%
7.1b	Are you currently undertaking vocational or skills training?	31%	30%
7.1c	Are you currently in education (including basic skills)?	40%	29%
7.1d	Are you currently taking part in an offending behaviour programme?	5%	5%
7.3	Do you go to the library at least once a week?	47%	40%
7.4	On average, do you go to the gym at least twice a week?	53%	61%
7.5	On average, do you go outside for exercise three or more times a week?	55%	65%
7.6	On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	0%	5%
7.7	On average, do you go on association more than five times each week?	66%	73%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	23%	17%
8.1	Do you have a personal officer?	58%	68%
8.9	Have you had any problems sending or receiving mail?	32%	37%
8.10	Have you had any problems getting access to the telephones?	32%	27%