

Report on an announced inspection of

HMP Ranby

5–9 March 2012

by HM Chief Inspector of Prisons

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Introduction

HMP Ranby is a category C training prison in Nottinghamshire. It holds about 1,000 adult men on a large, sprawling site which makes it difficult to manage. Despite this, the prison delivers its core training and resettlement functions well overall. The prison had some excellent features but performance was undermined by some significant weaknesses, some of which were outside its direct control.

The prison had sufficient activity places for all its population and offered a very realistic working environment to most. Prisoners were positive about the opportunities to engage in a full working week which included night and shift working (although the prison needed to quickly sort out meal and sleeping arrangements for those on night shifts). The quality of some of the vocational training, such as the rail and street works workshop, was excellent and supervisors had a good rapport with the prisoners and a good knowledge of the industries concerned. A high proportion of prisoners progressed to employment or training on release.

Given the supply of sufficient high quality training and work places, it was frustrating that these were not fully utilised. The prison offered 936 activity places – but at any one time 300 or so of these were not used. We found a quarter of prisoners locked in their cells during the working day. Too many prisoners were turned away from workshops or did not take up optional education places. About half the prisoners had literacy and numeracy skills below level 1 – what you would expect of an 11-year-old. The workshops offered a good environment to address this in a practical context but the opportunity was not taken.

Resettlement had been a weakness in the past but was now generally good. There were some procedural weaknesses in offender management but in practice what happened on the ground worked well. Few prisoners left the prison without somewhere to stay and there was good support to help them find a job or training. Debt was a significant problem – and common sense would suggest it was directly linked to offending behaviour. There was high demand for the good debt and financial advice service and so it was a concern that long-term funding for this had been withdrawn and the future of the service was uncertain. There was good work with veterans. Visit arrangements were satisfactory.

Relationships between staff and prisoners were generally good. Most prisoners said they had a member of staff they could turn to with a problem and we observed friendly, mature interactions. Low staffing levels, however, limited the amount of contact. The external environment was good but too many small single cells had been doubled up and had graffiti, broken furniture and unscreened toilets. Prisoners complained it was difficult to get cleaning materials and some cells were grubby. Laundry facilities were disorganised and prisoners had problems getting enough clean clothes that fitted them. These issues were a particular problem on a prisoner's first night. Some of these problems were reflected in complaints, which were overused for issues that should have been quickly sorted out informally. Prisoners lacked confidence in the applications process.

Diversity issues were generally well managed with personal, visible leadership by the governor. We were concerned to find that there appeared to be an unofficial cap on the number of prisoners attending religious services.

Prisoner movement around the prison was relaxed and the place felt peaceful. Most prisoners told us they felt safe but for a minority this was definitely not the case. Significant numbers of prisoners reported being victimised and this was often linked to gang and debt issues. Although the actual level of assaults was not high, staff reported reasonably high levels of

bullying. A large number of prisoners were held in the segregation unit for their own protection and they were too often 'shipped out' to another prison without the underlying issues being addressed. There were generally insufficient efforts to reduce levels of violence. Levels of self-harm were low and suicide and self-harm procedures were reasonable, but their use was increasing and the prison had not explored why. There had been no self-inflicted deaths since the last inspection.

There were high levels of drug and alcohol availability despite good efforts by the prison to address this. Almost a quarter said it was easy to get alcohol in the prison, compared with 4% in similar establishments, and there had been 75 finds of 'hooch' brewed in the prison in the previous six months. This had serious consequences for individual prisoners and staff – one man in segregation for possession of alcohol had lost his place on one of the best workshops and an almost guaranteed offer of a job as a result. There was an alcohol-related disturbance shortly after the inspection. The random drug testing rate was low but drug finds indicated that prisoners were using substances like 'Spice', a synthetic cannabinoid, which did not show up on the tests. It was a particular concern that one in 10 of the population – amounting to about 100 prisoners – said they had developed a problem with diverted medicines that had been administered by the prison itself. Prescribing practices were weak. Almost a third of prisoners were on potentially abusable medication which they were given 'in possession' but had nowhere to store safely, so there were many opportunities for diversion and theft.

Poor prescribing practice was one element of very poor health care commissioned by NHS South Yorkshire and Bassetlaw. The prison had tried to address this prior to the inspection but without success. The care provided by individual medical staff was good. There were a high number of missed appointments but long waiting lists for an appointment. There was no out of hours service and unqualified prison staff had to judge whether a prisoner who complained of being unwell at night should be taken out of the prison to hospital with all the disruption that entailed, or told to wait until the next morning when a nurse or doctor would be available to see him. In our view, this seriously compromised prisoner safety. At the heart of these issues were poor partnership arrangements and the partnership board, which should have provided a forum for sorting them out, had not met for more than six months. We raised these issues formally with the Trust immediately following the inspection and they responded promptly to our concerns. We will return to check the effectiveness of this response.

HMP Ranby could be outstanding and has some features comparable prisons would envy. Most prisoners have good quality work and training opportunities, together with effective resettlement help, that are provided in a safe and decent environment. However, for a minority there is an undercurrent of victimisation, frustration sorting out some of the practical necessities of prison life and a lack of encouragement or opportunity to take advantage of the work and training opportunities available. Some problems are difficult for the prison itself to address – the big site and thin staffing levels make it difficult to get on top of alcohol availability, and poor partnership arrangements with the health care commissioner have made it difficult to reduce the availability of tradable medication and improve other elements of health care. I hope this report will assist all those involved in the delivery of services at HMP Ranby to build on the prison's strength and deliver its full potential.

Nick Hardwick
HM Chief Inspector of Prisons

May 2012

Fact page

Task of the establishment

HMP Ranby is a category C adult male training prison.

Prison status

Public

Region/Department

East Midlands

Number held

1,068

Certified normal accommodation

892

Operational capacity

1,098

Date of last full inspection

March 2007

Brief history

The prison opened in 1971 on the site of a former army camp. It has seen a steady expansion from 2004 with the development of modern house blocks. The most recent expansion was C wing, which opened in 2008. Workshops, a new kitchen, a library and education facilities have been added as part of previous expansions. The recent expansion of the prison has enabled a larger number and variety of work places, including the conversion of the former clothing exchange store and original C wing into the health care building and performance suite.

Short description of residential units

A wing is a two-storey building, built in 1983, with spurred single-cell accommodation. It has places for 192 prisoners, including a spur for prisoners with disabilities and the over-40s. C wing is a quick build wing, offering 60 places in double occupancy with integral showers and sanitation. D (118), E (124), F (126) and G (124) wings have a mixture of single and double cells with integral sanitation on each wing. H and I wings have accommodation for 60 prisoners in single cells with integral sanitation; H wing is the drug-free wing. J and K wings opened in September 2004 and accommodate 226 prisoners in a mixture of single and double cells, some of which are constructed to safer cells standard.

Name of governor

Neil Richards

Escort contractor

GeoAmey

Health service commissioner and providers

Commissioners: NHS South Yorkshire and Bassetlaw

Providers: GP services – The Riverside Partnership

Nursing and out of hours – Medacs

Mental health care – Nottinghamshire Healthcare NHS Trust

Dental – VOSG Bassetlaw Limited

Pharmacy – Lloyds

Learning and skills providers

Lincoln College

IMB chair

George Slaughter

Healthy prison summary

Introduction

HP1 Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, immigration detention facilities and police custody.

HP2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.

HP3 All Inspectorate of Prisons reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this inspectorate's thematic review *Suicide is everyone's concern*, published in 1999. The criteria are:

Safety prisoners, particularly the most vulnerable, are held safely

Respect prisoners are treated with respect for their human dignity

Purposeful activity prisoners are able, and expected, to engage in activity that is likely to benefit them

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

HP4 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the National Offender Management Service.

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

There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.

- outcomes for prisoners are reasonably good against this healthy prison test.

There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.

- outcomes for prisoners are not sufficiently good against this healthy prison test.

There is evidence that outcomes for prisoners are being adversely affected in many

areas or particularly in those areas of greatest importance to the well-being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.

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

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

Safety

- HP5 Staff in reception were considerate and reception procedures were satisfactory. First night accommodation was reasonable but processes were weak and prisoners were not adequately supported. Induction was good but prisoners spent too long locked in their cells after completing it. Prisoners generally reported feeling safe and levels of violence were not high, although bullying around debt, gangs and drugs was a concern. Violence reduction arrangements were weak. Suicide and self-harm procedures were good. Security arrangements were generally proportionate. Levels of use of force were relatively low but governance was underdeveloped. Use of segregation for those seeking protection was high and too many prisoners were transferred out from the segregation unit. Illicit drug availability, including alcohol and diverted medication, was high. Integrated drug treatment system arrangements were reasonably good. Outcomes for prisoners against this healthy prison test were not sufficiently good.
- HP6 Prisoners reported generally positive experiences on transfer to the establishment, although some on longer journeys did not receive comfort breaks. Escort vans sometimes had insufficient space for prisoners' property, resulting in some prisoners having to wait a considerable time for all their possessions.
- HP7 Reception was large, clean and adequate for the number of prisoners passing through. All prisoners were unnecessarily strip-searched on arrival. Holding rooms were clean and there were good information displays but these were mostly only in English. Reception processes were generally swift, although prisoners received over lunchtime often spent too long in reception waiting for processes to start. Staff were polite and respectful and we observed some good interactions with newly arrived prisoners. A Listener in reception greeted and supported all new arrivals and they were all interviewed in private by induction staff, who then escorted them to the induction wing
- HP8 First night accommodation was provided in designated cells and was clean and in a good state of repair; however, cells were not fully prepared and prisoners had to wait for bedding, clothing and toilet rolls. The clothing provided was often of the wrong size and had to be exchanged the following day, and not all prisoners were able to shower on their first night. A prisoner orderly provided support to new arrivals. However, there was no formal first night presentation and we observed, and prisoners in our survey reported, that they received insufficient help or support from staff in dealing with problems on their first night.¹

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.

- HP9 The induction programme was well presented by an induction orderly, with support from induction staff. Prisoners were generally negative about the information they received during induction. However, the induction programme and leaflet had recently been updated and covered all the necessary aspects. There was insufficient local information in languages other than English. There were good recording systems to ensure that all new arrivals completed their induction but prisoners spent too long locked up after completing the programme.
- HP10 Most prisoners felt safe but too many reported victimisation by other prisoners, specifically over debt and gang-related issues. The level of assaults on prisoners was not high but the number of bullying reports was higher than in comparable prisons. Oversight of violence reduction through the safer custody group was inadequate. Limited information was reported and there was no analysis to identify trends or patterns of behaviour, although prisoner surveys had been conducted and had led to some improvements in practice. The violence reduction management process had been updated to include behaviour targets to challenge bullying behaviour but we saw little evidence of this in action. Support for victims was reasonably good and formalised, and the documents we examined were comprehensive, but this practice was not applied to prisoners seeking sanctuary in the segregation unit.
- HP11 Care for prisoners at risk of suicide and self-harm was reasonable. There had been no recent deaths in custody and incidents of serious self-harm were investigated. Levels of self-harm and the number of prisoners subject to assessment, care in custody and teamwork (ACCT) procedures was reasonably low but the number of ACCT documents opened was increasing, with no adequate explanation established. The quality of ACCT documents was mostly good and prisoners told us that they felt well supported but there was insufficient multidisciplinary attendance at reviews. The suicide prevention policy did not reflect specific local characteristics, and the analysis and use of information to identify concerns and issues were poor. There was an adequate team of Listeners, who received full training and regular support from the local Samaritans group, although prisoners in our survey were negative about access to Listeners.
- HP12 The prison did not have a specific safeguarding policy but some at-risk prisoners who required extra support were identified and their needs met through safer custody, diversity and health care arrangements. There were no protocols established with social services to implement safeguarding procedures and staff were not clear about their responsibilities.
- HP13 Security arrangements were generally appropriate. Security staff were well sighted on the main security issues around drugs and violence and worked proactively with other

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*.)

departments but monthly objectives were not sufficiently publicised to staff. The large number of security information reports was analysed effectively and used to identify trends.

- HP14 The incentives and earned privileges scheme was well publicised and mostly understood but prisoners complained that there were insufficient incentives to encourage improved behaviour. Fewer prisoners than at comparator prisons believed that they were treated fairly in the scheme and we were not convinced that prisoners were always subject to a review before being downgraded.
- HP15 Adjudication processes and governance were thorough. Levels of use of force were low but governance was poor. Too much use of force paperwork was incomplete and planned use of force was not video-recorded. Special accommodation was rarely used but its governance was similarly weak.
- HP16 The segregation unit was clean, well maintained and well managed, with a mostly appropriate regime. Staff–prisoner interactions on the unit were positive and respectful. Although few prisoners stayed in segregation for long periods, the use of segregation was high, with most prisoners segregated for their own protection due to debt and bullying issues. Reintegration and care planning arrangements were limited and too many prisoners located on the unit were transferred out of the prison.
- HP17 There were high numbers of prisoners on opiate substitution, although most were on reducing doses. While the clinical and psychosocial teams worked effectively with prisoners, there was insufficient integration between the teams. There were high levels of illegal drug availability. The number of prisoners testing positive through mandatory drug testing was low but there was some slippage of suspicion testing. There was evidence of high levels of medication diversion and almost one in 10 prisoners said that they had developed a problem with drug diversion while at the prison. Approximately a third of prisoners were prescribed potentially abusable medications and many were given these in possession, without the facility to lock them away. More prisoners than in comparator establishments said that they had had a problem with alcohol on arrival and that alcohol was easy to acquire at the establishment. The number of alcohol finds was high.

Respect

HP18 The prison was generally clean and litter free. The quality of accommodation varied across the prison. Staff–prisoner relationships were reasonably good, with suitable levels of respect but sometimes limited engagement. The quality of prison clothing and access to telephones were poor. Equality and diversity were well managed and outcomes for prisoners generally good. Faith provision was reasonable but some access was restricted. Complaints processes were weak. Primary health provision was poor and gave us serious cause for concern. Mental health services were generally sound. Food and catering arrangements were reasonable. Outcomes for prisoners against this healthy prison test were not sufficiently good.

HP19 Standards of accommodation varied across the wings. Most communal and external areas were clean but there was graffiti in some cells. Most of the doubled cells were too small, without sufficient space for two sets of furniture. Much cell furniture was in

poor condition. Some showers had been refurbished but most were in a poor condition, with insufficient screening. Most toilets were not well screened.

- HP20 Laundry services were adequate but access to prison clothing was problematic and the quality was poor. Cell call bells were not always answered promptly, with some excessive delays. Applications were logged but not all tracked and prisoners told us they were not dealt with fairly or quickly. There were insufficient telephones on all but three wings and most prisoners had restricted access to them.
- HP21 Staff–prisoner relationships were respectful and we observed reasonably interactive and supportive relationships between staff and prisoners. Prisoners were negative about the frequency of contact with staff and allocation of personal officers. Staff did not make regular, detailed entries in electronic prisoner records. Prisoner consultation arrangements were effective.
- HP22 Equality and diversity were well managed. There was a comprehensive overarching equality and diversity policy and an updated equality action plan. There was effective monitoring of systematic monitoring and analysing of the race equality template (SMART) data, and monitoring had been extended to cover religion and disability. There were good consultation arrangements with prisoner equality representatives. A prisoner diversity needs analysis had been conducted and a number of outcomes progressed. There had been insufficient investigation into a number of the discrimination incident reporting forms we examined.
- HP23 In our survey, black and minority ethnic and Muslim prisoners reported less favourably than white prisoners across a range of indicators. Race equality was well promoted and prisoner representatives felt well supported but there was no forum for black and minority ethnic prisoners. Prisoners with racially motivated alerts were known to the diversity team and published to staff. A focus group for Gypsy/Romany/Traveller prisoners had recently been established.
- HP24 There was a knowledgeable foreign nationals coordinator and a detailed foreign national policy. All foreign national prisoners were identified and their needs and status discussed soon after arrival. Regular UK Border Agency clinics were held but there was no independent immigration advice available. Professional telephone interpreting services were underutilised but, with the exception of early days information, prisoners generally had access to a wide range of translated materials.
- HP25 Some actions had been taken to address the negative perceptions of Muslim prisoners around communication, attitudes of staff and food, but in our survey a number of negative perceptions still prevailed.
- HP26 In our survey, prisoners with disabilities were more negative than other prisoners across a range of indicators, although we found no evidence to support this view. Prisoners declaring a disability on reception were identified by health services staff and had access to a weekly disability clinic. There was evidence of some reasonable adjustments being made for individual prisoners but there were no formal care planning arrangements to meet the social care needs of prisoners. Prisoners requiring assistance in the event of an emergency were known to staff and evacuation plans were in place. The forum for older prisoner and those with disabilities was a recent initiative and some actions had already been progressed. There were no suitable daytime activities available for older prisoners and those with disabilities who were unable to work.

- HP27 There was a regular support group for gay and bisexual prisoners and the library had a range of gay, bisexual and transgender literature, including information on local support networks.
- HP28 In our survey, fewer prisoners than at comparator prisons said that their religious beliefs were respected, and some prisoners had to apply to attend weekend religious services. There was also evidence of attendance being capped. Faith provision and chaplaincy facilities were reasonably good but the multi-faith room was grubby. Communication and integration with other parts of the prison was good but community engagement was weak.
- HP29 The number of prisoner complaints was high and many related to matters that could have been dealt with informally. Analysis of complaints was good but some responses did not address the issues raised and quality assurance processes were not sufficiently robust.
- HP30 The provision of legal assistance was poor. The use of the domestic visits room for legal visits did not provide sufficient privacy.
- HP31 Poor commissioning arrangements had resulted in fragmented health services which were difficult to manage and adversely impacted on prisoner care. Governance arrangements were weak, with no partnership board meeting for over six months. Engagement with prisoners was constructive and professional. In our survey, fewer prisoners than at comparator prisons said that the quality of health services was good. Prisoners waited too long to see nurses and doctors. The number of missed appointments was high and was not being addressed. There was no out-of-hours service available and this had compromised prisoner safety. Medicines management was poor. Primary and secondary mental health care was good. There was no therapeutic activity available for prisoners who were vulnerable because of mental ill health.
- HP32 Prisoners were negative about the quality and quantity of food but we found both to be adequate. Some meals were served too early and breakfast packs were issued on the day before consumption. Consultation arrangements were good and had led to changes in practice.

Purposeful activity

- HP33 Most prisoners experienced a reasonable amount of time out of cell but did not have association daily. There were sufficient activity places but too few prisoners attended at any one time and too many were locked up during the day. For prisoners attending learning and skills and work activities there was a good focus on employability. The range and quality of vocational and industrial training and work provision were good. Teaching and learning were generally good but weak in literacy and numeracy. Achievement of qualifications was generally good but the number taking them was low. The opportunity to gain skills above level 2 was too limited. The excellent library resource was well used and promoted. PE facilities and access to recreational PE were good but inappropriately interrupted the working day. Outcomes for prisoners against this healthy prison test were reasonably good.

- HP34 Most prisoners had a reasonable amount of time out of cell, with an average of nine hours during the working week. During the inspection we found a quarter of prisoners locked in their cells during the working day. Prisoners on H and I wings had adequate time in the open air but others had only half-hour exercise periods. Prisoners did not have association each day, which meant that they could not make telephone calls or have showers daily.
- HP35 There was a good focus on developing employability skills throughout learning and skills through excellent partnerships with employers. A comprehensive needs analysis was used well to develop the provision. The development of a full working week, including night and shift working, was promising but the wider prison regime, including meal provision and opportunities to sleep, needed to support this initiative. Quality improvement arrangements were satisfactory but staff did not receive sufficiently detailed feedback on the effectiveness of their work and there was insufficient use of data to monitor the achievement of different groups of prisoners.
- HP36 The prison had sufficient high-quality activity places. However, not enough prisoners (only 70%) were engaged in activities at any one time, with too many prisoners not required and turned away from work or not attending optional classes. The allocation process was equitable, transparent and informed by sentence planning but some prisoners had to wait too long to be allocated to an activity.
- HP37 There was a good careers information and advice support service but not all prisoners were seen on arrival. There was a wide variety of purposeful industrial workshops and vocational training. Prisoners had good opportunities to work towards qualifications, mainly at level 1, in many areas. Resources for vocational training and industry workshops were very good. Vocational training and coaching were good and peer mentors provided effective support. Achievement was good for prisoners entered for vocational qualifications but the number of prisoners achieving qualifications was low. Teaching and learning were good in personal and social skills and these programmes were used well to develop prisoners' employability skills and increase their confidence. The number of prisoners achieving qualifications in literacy, numeracy and English for speakers of other languages was low and did not meet the needs of the prison population. Too few programmes were offered at level 3 or above but there were 40 prisoners on Open University and distance learning programmes.
- HP38 The purpose-built library was spacious, well managed and promoted. Access was generally good and usage was high.
- HP39 PE facilities were good and prisoners had good access to them. There were specific sessions for older prisoners and those with disabilities. Some orderlies were trained as health champions and supported other prisoners well. Achievement on full-time accredited PE courses was good but there were insufficient accredited courses to meet the needs of short-term prisoners. Recreational PE sessions inappropriately interrupted the working day for many prisoners.

Resettlement

- HP40 There was no overarching vision for reducing reoffending and provision was not suitably informed by a needs analysis. Offender assessment system (OASys) assessments were up to date and applied to all prisoners, although offender

supervisor contact was usually insufficient and reactive. Public protection arrangements were generally sound but not sufficiently integrated with offender management. Home detention curfew and recategorisation processes were inadequate. Category D prisoners waited too long for transfer to open conditions. Release on temporary licence was used positively. Indeterminate-sentenced prisoners were reasonably well managed. All prisoners received an individual resettlement needs assessment on induction. The advice provided by resettlement staff was good but compromised by a shortage of staff, resulting in a large backlog of work. Resettlement pathway provision was generally good and particularly effective around accommodation, employment and training, and finance benefit and debt. Outcomes for prisoners against this healthy prison test were reasonably good.

- HP41 There was no comprehensive reducing reoffending strategy. Neither the resettlement policy (which did not cover offender management) nor the action plan were informed by a comprehensive or robust needs analysis. The needs of specific groups such as indeterminate-sentenced prisoners (ISPs) were not well enough defined. There was a lack of integration and insufficient communication between resettlement, offender management and public protection and this had led to some weaknesses in practice.
- HP42 Offender assessment system (OASys) assessments were used to assess all prisoners and were up to date. More prisoners than at the time of the previous inspection had a sentence plan, although this remained lower than at other category C prisons. While some prisoners received excellent support, offender supervisor contact with prisoners was infrequent in too many cases and offender supervisors were often not sufficiently proactive in driving forward sentence plans. Not all offender supervisors were sufficiently confident in identifying risk factors and communicating these to offender managers. Too many prisoners were released on home detention curfew after their eligibility date. Release on temporary licence was used positively and opportunities were being developed. Prisoners were not fully informed of reasons for recategorisation decisions and paperwork was incomplete. Some category D prisoners, especially ISPs, waited too long for a transfer to an open prison.
- HP43 Public protection screening and assessment processes were applied thoroughly, with appropriate restrictions applied. New public protection information (for example, breaches of a non-contact order) was not always shared with the offender supervisor. In addition, the use of the violent and sexual offenders register (ViSOR) was limited, further hindering effective information sharing.
- HP44 ISPs were reasonably well managed, with good consultation and suitable prioritisation for interventions. ISP family days were provided but there were too few to accommodate the growing population. Too many prisoners serving an indeterminate sentence for public protection were considerably over tariff but parole reports were timely.
- HP45 All prisoners received an individual resettlement needs assessment on induction, followed by appropriate referrals. The advice provided by resettlement staff was good but compromised by a shortage of staff, resulting in a large backlog of work.
- HP46 Support and advice services for prisoners needing help finding accommodation on release were excellent and few prisoners left without an address to go to.
- HP47 Education, training and employment support was delivered effectively by the Training, Education and Support Team (TEST), supported well by the careers information and

advice support service. There were good facilities for job searching and all prisoners engaged in relevant pre-release work, including CV and interview techniques. Progression to work and training on release was excellent. Over half of all prisoners discharged over the previous 12 months had been released into employment or training.

- HP48 Most prisoners were seen by health services staff before release and given a suitable supply of prescribed medications where necessary. Prisoners with severe and enduring mental health problems were linked with their local community mental health team.
- HP49 The drug strategy document lacked an action plan for supply reduction and demand. In addition to group work and one-to-one sessions offered by the counselling, assessment, referral, advice and throughcare (CARAT) team, there was a range of interventions for prisoners with both alcohol and drugs problems. Waiting lists for the alcohol programme were long and Alcoholics Anonymous and Narcotics Anonymous were not available. A well-supported peer mentoring scheme was being developed. Compact-based drug testing was well managed and levels of compliance testing were high. Links with local drug intervention programmes (DIPs) were good but there were limited opportunities for many prisoners to meet a DIP worker before release.
- HP50 Prisoners could access advice and support from St Anne's Advice Centre to resolve debts and other financial problems. Demand for this was high but the service was under threat. A large number of prisoners had opened bank accounts before release.
- HP51 Access to visits sessions and booking arrangements were satisfactory and visitors could book their next visit session before leaving the prison. Recent visitor consultation had generated some improvements. There were frequent family days and a programme of child-friendly activities took place during school holidays. Prisoners could wear their own clothes on visits but were required to wear coloured tabards, even on ISP family days. Prisoners did not have access to parenting courses.
- HP52 An adequate range of offending behaviour programmes was available and although waiting lists were substantial, they were managed effectively. Some creative work was undertaken to prepare prisoners for attendance on a programme and address diversity issues.

Main concerns and recommendations

- HP53 Concern: Prisoners reported relatively high levels of victimisation around debt and gang issues. Large numbers sought sanctuary in the segregation unit but were transferred out without any identification or management of their issues. The management of violence reduction was weak and failed to collate or analyse data to identify trends or look at ways of making the establishment safer.

Recommendation: All data around violence and safety should be collated and analysed to identify trends and direct action. A comprehensive policy should be introduced for the management and transfer of prisoners in the segregation unit and should include how problem or vulnerable behaviour and underlying causes will be investigated, how individual needs will be met and options for reintegration or transfer.

HP54 Concern: Our survey results and prison drug and alcohol finds indicated high levels of illicit drug and alcohol availability. There was evidence of high levels of medication diversion, exacerbated by the very high number of prisoners prescribed potentially abusable, tradable medication, poorly supervised treatment times and the lack of lockable cabinets. Suspicion testing was not monitored. The drug strategy lacked an action plan to address supply reduction and demand.

Recommendation: An action plan to address supply reduction and demand, including alcohol, should be implemented and should address the specific issue of diverted medication. Intelligence indicating a need for suspicion testing should be monitored and resourced.

HP55 Concern: Access to health services was inadequate and some practices seriously compromised prisoner safety. The number of prisoners missing appointments was high, yet prisoners waited too long to see a nurse or doctor. There was no out-of-hours cover. Medicines management was weak and failed to follow risk assessments. Commissioning arrangements were poor and not all provision could be managed directly. Partnership meetings between the prison and the primary care trust had not taken place for over six months and the service was not being monitored effectively.

Recommendation: Commissioning arrangements should be urgently reviewed to enable effective day to day management of all health services. The commissioner and the governor should hold regular partnership meetings to monitor health delivery and address shortcomings.

HP56 Concern: Despite sufficient high-quality activity places, too many prisoners were on their wing or attending recreational PE and not engaged in purposeful work during the core day.

Recommendation: Attendance at activity should be monitored robustly and more prisoners should be engaged in purposeful activity. Recreational PE should not be scheduled during the working day.

HP57 Concern: There were high literacy and numeracy needs among prisoners (with around half of all prisoners assessed as being below level 1) which were not being met. Low numbers of prisoners progressed and achieved qualifications and there was ineffective monitoring of the quality of learning, teaching or achievements.

Recommendation: The monitoring of the quality of learning and teaching should be fully implemented in numeracy and literacy. The progress and achievements of prisoners engaged in numeracy and literacy work should be monitored.

Section 1: Safety

Courts, escorts and transfers

Expected outcomes:

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

- 1.1 Escorting vans were clean and most prisoners told us that they had been treated well by escorting staff. Vans were not always large enough to accommodate prisoners and their property. Some prisoners on longer journeys had not been offered toilet breaks. There were no video-link facilities.
- 1.2 The escort provider, GeoAmey, had a fleet of new vans, which were clean. We observed respectful interactions between escort staff and prisoners, and in our survey, 67% of prisoners, similar to the comparator, reported that they were treated well or very well by escort staff. In our survey, 84% of prisoners said that they had felt safe during their journey. Most had experienced journeys of less than two hours. Those experiencing longer journeys said that they had not been offered toilet breaks routinely and only 57% of respondents to our survey, compared with the 65% comparator, said that they had been offered anything to eat or drink. Some vans did not have sufficient storage space for all prisoners' property and some prisoners reported long waits for their possessions to arrive.
- 1.3 There were no facilities for video-link, although this was due to come online in April 2012. Prisoners attending court could obtain suitable clothing from reception if they needed it.

Recommendations

- 1.4 **Prisoners should be offered adequate comfort breaks and refreshments during journeys to and from the establishment.**
- 1.5 **Prisoners should be able to take all their property when transferred.**

Early days in custody

Expected outcomes:

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

- 1.6 Prisoners who were received over the lunch period often spent too long in reception. All prisoners were unnecessarily strip-searched on arrival. Staff were polite and respectful. First night accommodation was clean but cells were not fully prepared. Not all prisoners could shower on their first night. Not all staff on the induction wing were trained in induction procedures. Night staff were unable to tell us quickly where new arrivals were located. The induction programme and leaflet had recently been updated and covered all the necessary

information. Prisoners spent too long locked up before allocation to work or activities. There were good recording systems to ensure that all new arrivals completed their induction.

- 1.7 Escorting staff gave reception staff all the necessary information relating to new arrivals, and induction staff carried out risk assessments before prisoners were located on the induction wing. Interactions between staff and prisoners were good humoured and prisoners we spoke to said that they had been treated well. A Listener was in reception daily and met all new arrivals, offering support when required.
- 1.8 The reception environment was large, clean, well maintained and adequate for the number of prisoners passing through. Although prisoners could be received over the lunch period, if they arrived at this time they were taken off vehicles and left in holding rooms until there were sufficient staff to process them. This resulted in some prisoners spending too long in reception. New receptions were given food and drinks, and holding rooms contained information and a television. Most information was available only in English (see also section on protected characteristics). All prisoners were strip-searched, regardless of risk.
- 1.9 Induction staff interviewed all prisoners in private and gave both written and verbal information about the prison and what would happen next. Induction information was also available on a dedicated television channel. Few prisoners arrived late and those who did were given adequate information before being located to the induction wing (F wing). Prisoners were escorted to F wing by induction staff and located in designated first night cells. These were clean but not adequately prepared and prisoners received during the inspection did not have toilet rolls, bedding or prison clothing on arrival. When clothing was provided later in the day, it was not always of the right size and had to be exchanged the following day (see also section on residential units). Prisoners were able to make telephone calls on their first night but not all had access to showers due to the association rota in operation.
- 1.10 Not all staff on F wing were trained in induction procedures and there were concerns that new arrivals might not get the support they needed on their first night. Night staff could not quickly tell us where new arrivals were located. In our survey, fewer prisoners than at comparator prisons said that they had received help or support from staff in dealing with problems on their first night. Prisoners requiring assistance with substance use problems were located on D wing. There were no designated first night cells on this wing but staff there were supportive and knew where the new prisoners were located.
- 1.11 The induction programme started on the next working day and covered all the necessary information, although prisoners in our survey were generally negative about the information they received. The induction orderly, who was also a trained Listener, presented information well and offered ongoing support to new prisoners. Staff provided additional supervision and support to the orderly. The induction programme and leaflet had recently been updated but was available only in English. After completion of the programme, prisoners spent too long locked in their cells before allocation to work or activities (see recommendation 3.13). There were good recording systems to ensure that all new arrivals completed their induction.

Recommendations

- 1.12 **Prisoners should not have to wait for long periods in reception over lunchtime.**
- 1.13 **Prisoners should be fully supported during their early days at the establishment, and on their first night should have access to showers and suitable clothing that fits and their cells should be fully prepared with bedding and basic toiletries.**

Housekeeping point

- 1.14 Key information about the early days in custody should be available in languages other than English.

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). Prisoners at risk/subject to victimisation are protected through active and fair systems known to staff, prisoners and visitors, and which inform all aspects of the regime.

- 1.15 Prisoners reported feeling safe but also high levels of victimisation. The violence reduction policy was too generic and governance was poor, with no meaningful analysis of information. Consultation with prisoners was ongoing and had led to improvements. Levels of assaults were low but the number of bullying incidents reported was high. The bullying intervention process had not been properly implemented.
- 1.16 There was a comprehensive violence reduction policy, which had been written to cover each point in the relevant Prison Service Order but did not reflect the specific characteristics of the establishment.
- 1.17 Governance of violence reduction was poor. There was an interdepartmental committee covering violence reduction and self-harm but attendance was erratic. Minimal information on violence was reported to the committee and there was no evidence of analysis or action resulting. For example, there had been a spike of 19 applications for segregation in August 2011, compared with the average of nine a month, with no explanation or action recorded. Safer custody staff attended the security committee but there was no adequate analysis of safety matters in this forum and concerns about poor communication had been recorded (see main recommendation HP53).
- 1.18 In our survey, 29% of prisoners said they had felt unsafe in the establishment at some time and 13% that they currently felt unsafe, both of which were in line with the comparators. However, more reported being victimised by other prisoners (23% compared with 19%), specifically because of debt (4% compared with 1%) and gang-related issues (5% compared with 3%). This corresponded with a considerable number of applications for segregation, which totalled 53 in the six months before the inspection (see section on segregation and main recommendation HP53).
- 1.19 Prisoners arriving at the prison were well informed about violence reduction. There was a well-advertised hotline number available in residential units for prisoners to report bullying and concerns about possible self-harm or suicide but it was not being used.
- 1.20 Consultation with prisoners about safety had been conducted through a survey and issues had been identified and actioned, such as the need for improved supervision of prisoner movements. An exit survey had been started, the results of which were due to be reported.
- 1.21 The level of assaults on prisoners was not high, at 4.2 per hundred prisoners over the last six months, and was similar to comparator prisons. However, the number of bullying reports by

staff over this period was comparatively high, at 15.4 per hundred. Unexplained injuries and violent incidents were reported to the safer custody team, which ensured that they were examined. However, cases of prisoners seeking refuge in the segregation unit were not routinely investigated (see main recommendation HP53).

- 1.22 There was a three-stage bullying intervention and at the time of the inspection there were 22 prisoners being actively monitored. The system had been modernised to include behavioural targets for those subject to the second and third stages. Staff had been briefed on the operation of the new system but the files we examined did not contain any behavioural objectives and remained solely observational.
- 1.23 Monitoring booklets were opened on victims with their agreement, and those we examined were of good quality, with evidence of planning for the prisoner's safety and continuing interaction during the monitoring period.

Recommendation

- 1.24 **The new anti-bullying intervention should be fully implemented, including the setting of behavioural targets.**

Self-harm and suicide prevention

Expected outcomes:

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

- 1.25 The suicide prevention strategy did not reflect the specific characteristics of the prison and governance was inadequate. Levels of self-harm and the number of assessment, care in custody and teamwork (ACCT) documents opened were low. The quality of ACCT supervision was reasonable. Prisoners' perceptions of Listeners were poor in our survey but we found an adequate, well-trained and supported team providing 24-hour access.
- 1.26 The suicide prevention strategy was reasonably comprehensive but did not reflect specific local concerns.
- 1.27 Self-harm and suicide prevention was covered at the monthly safer custody meeting and was attended by prisoner representatives. Little information was provided to the meeting and it was mainly limited to the ethnicity of prisoners and the number of incidents; analysis of this to inform action was poor.
- 1.28 There had been no deaths in custody since the previous inspection and the number of reported incidents of self-harm was low, at 4.4 per 100 prisoners over the six months before the inspection. There had been a serious incident of self-harm in the month before the inspection which was being investigated.
- 1.29 At the time of the inspection, there were 11 assessment, care in custody and teamwork (ACCT) documents open, which was reasonably low, but the number was rising, with 89

opened in the six months before the inspection compared with 52 in the previous six months. This had not been explored or adequately explained.

- 1.30 There was ongoing training of staff in ACCT procedures and the records we examined were mostly of good quality in terms of assessment, planning and interaction but there was insufficient attendance and no consistency in case manager at many reviews. Prisoners we spoke to who were subject to ACCT procedures felt well supported and the care plans being implemented were appropriate to their needs.
- 1.31 Prisoners in our survey were negative about access to Listeners, with only 53%, against the 60% comparator, reporting that they were able to speak to a Listener at any time, and only 29%, against the 53% comparator, that they had had access to a Listener on arrival. However, our observations did not support these responses. A team of 16 Listeners was available 24 hours a day on a rota. Those we spoke to told us that they were well used and received good training and support. Prisoners we spoke to knew about the availability of Listeners, although some felt that there was a stigma to being seen to need them. A Listener suite was available but was not often used because Listeners used their own or prisoners' cells for meetings. Samaritans telephones were located on the residential units and were in good working order.

Recommendations

- 1.32 **An adequate range of information about incidents of self-harm should be collated and analysed by the safer custody meeting to identify improvements to practice.**
- 1.33 **Assessment, care in custody and teamwork (ACCT) reviews should be attended by all staff with a knowledge of the prisoner and who can contribute to his care.**

Housekeeping point

- 1.34 The suicide prevention strategy should reflect specific local concerns.

Safeguarding (protection of adults at risk)

Expected outcomes:

The prison promotes the welfare of prisoners, particularly adults at risk, and protects them from all kinds of harm and neglect.²

- 1.35 There was no formal adult safeguarding policy and there were no links with social services. Staff were not aware of their responsibilities, with the exception of health services staff, who had been trained in adult safeguarding. Some prisoners were having their specific needs met through health care and diversity arrangements.
- 1.36 The prison did not have a specific policy or procedures for adult safeguarding. Some guidelines for the management of adults at risk were contained in the suicide and self-harm

² We define an adult at risk as a vulnerable person aged 18 years or over, 'who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'. 'No secrets' definition (Department of Health 2000).

prevention strategy but these did not provide guidance for staff in making referrals for such prisoners. There were no formal links with the local social services department.

- 1.37 There was good support for older prisoners and those with disabilities through the diversity department (see section on protected characteristics) and reasonable adjustments had been made for a prisoner with cerebral palsy.
- 1.38 Support for prisoners with mental health problems and some learning difficulties was provided through the health care department and staff there had been trained in adult safeguarding. Staff in other areas of the prison were not aware of their formal responsibilities.

Recommendation

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

Security

Expected outcomes:

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

- 1.40 Security arrangements were proportionate. Drug testing arrangements were mostly appropriate, although not all suspicion tests were completed. Mandatory drug testing positive figures were low but the control of prescribed medication and availability of illicit alcohol created cause for concern.
- 1.41 Physical security arrangements were proportionate and prisoners were not over-restricted from having free access around the prison, which was controlled outside of mass movement times by the issuing of movement passes. The security team had a good understanding of the key threats to the prison, such as violence and drug issues, and liaised well with other departments in the establishment.
- 1.42 Prisoners on the standard and enhanced levels of the incentives and earned privileges scheme could wear their own clothes, including on social visits, although they were required to wear tabards (see also section on resettlement pathways).
- 1.43 The security department encouraged the use of security information reports (SIRs), and an average of around 700 were submitted each month, mainly referring to the diversion of medication, possession of unauthorised items and violence. SIRs were analysed effectively, enabling an awareness of trends of behaviour and emerging issues to be developed, although this information was not used effectively by the violence reduction team. Insufficient information was contributed to the violent and sexual offenders register (ViSOR).
- 1.44 The monthly security meeting was mostly well attended. Security objectives were developed and agreed but there was limited awareness of these around the prison.

- 1.45 In our survey, 38% of respondents, against the 31% comparator, said that it was easy or very easy to get illegal drugs. However, random mandatory drug testing (MDT) positive rates were low, at 3% for the second half of 2011. MDT arrangements were generally appropriate, although not all suspicion tests were completed and slippage was not monitored.
- 1.46 Drug finds from the second half of 2011 indicated that prisoners were using several drugs not detected under the current MDT process. These included 'Spice', which contained synthetic cannabinoids and large quantities of diverted medication. Approximately a third of the prison population was on potentially abusable medications and most were given in possession, with no provision to lock them away, creating many opportunities for diversion and theft. In our survey, 9% of respondents, against the 1% comparator, said that they had developed a problem with diverted medication since being at the establishment (see section on health services and main recommendation HP54). More prisoners than at comparator prisons said that they had had a problem with alcohol on arrival and 23%, against a comparator of 4%, that alcohol was easy to acquire at the establishment. Illicitly brewed alcohol was problematic, with 75 hooch finds in the six months before the inspection.
- 1.47 Visits restrictions were appropriately linked to trafficking, with five prisoners being subject to closed visits and 13 visitors banned at the time of the inspection. This was reviewed appropriately and restrictions were lifted or amended when the level of risk was deemed to have changed.

Recommendation

- 1.48 **The security analysts should record relevant events on the violent and sexual offenders register (ViSOR) system.**

Housekeeping points

- 1.49 Monthly security objectives should be communicated to all staff.
- 1.50 Suspicion testing should be managed more effectively to ensure that tests are undertaken within the required timeframe and that any slippage is monitored.

Incentives and earned privileges

Expected outcomes:

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

- 1.51 The incentives and earned privileges scheme was generally understood by staff and prisoners. Almost 50% of prisoners were on the enhanced level. Individual target setting for prisoners on the basic level was inadequate.
- 1.52 Understanding of the incentives and earned privileges (IEP) scheme by staff and prisoners was good, with a full explanation included in the induction process and posters on the wings to explain the process. In our survey, only 40% of respondents said that it was worthwhile being

on the enhanced level of the scheme (although almost half were on this level) and only 48% that they were treated fairly on the scheme.

- 1.53 Staff made at least one monthly entry on prisoners' case notes; the quality of these varied widely across the prison. Prisoners on the basic level of the scheme, although reviewed weekly, remained on this level for at least three weeks. Behaviour improvement objectives were mostly generic, consisting of 'obey all the rules' and 'be polite to staff and others'. A number of actions could result in a demotion to basic and we were not convinced that prisoners were subject to a review in all cases before this occurred.

Recommendation

- 1.54 **Prisoners on the basic level of the incentives and earned privileges (IEP) scheme should be set meaningful individualised targets.**

Housekeeping point

- 1.55 The quality of prisoner case note IEP entries should be standardised and closely monitored by managers.

Disciplinary procedures

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.

- 1.56 Adjudication procedures were appropriate. The level of use of force was low but governance was poor. The segregation unit was clean and well maintained and managed, although contained a disproportionately high number of prisoners seeking their own protection.

- 1.57 There was an average of around 120 adjudications a month, with around 45 of these being heard by the independent adjudicator, who visited up to twice a month. Most offences were for damaging property, threatening behaviour and for possession of unauthorised articles. The hearings that we observed were conducted appropriately, with the adjudicating governor ensuring that the prisoner understood proceedings at all stages and was fully involved in the process.

- 1.58 A quarterly standardisation meeting took place to analyse trends, assess the quality of proceedings, ensure the standardisation of punishments, where appropriate, and to review issues surrounding diversity.

The use of force

- 1.59 The level of use of force was low, with 92 recorded incidents in 2011. Most of these (and the 14 in the year to date) were recorded as spontaneous. No video recordings were available for planned uses of force.

- 1.60 In a sample of nearly 50% of 2011/12 reports, over half lacked any contribution from health services staff, although the quality of officer contributions was generally good. Most of the 2012 reports were incomplete and there appeared to be no management oversight to ensure expeditious completion.
- 1.61 Attendance at the use of force committee was mixed, with some regular absentees. A wide range of data was discussed and actions were highlighted but subsequent minutes failed to reflect outcomes.
- 1.62 There had been two uses of the special accommodation during 2012. While both appeared to have been proportionate and appropriate, records were incomplete.

Recommendations

- 1.63 **All planned uses of force should be video-recorded and examined to improve performance where necessary.**
- 1.64 **All use of force records should be accompanied by an F213 (injury report form) and completed in full and on time.**

Housekeeping point

- 1.65 Actions identified at use of force meetings should be followed up and outcomes recorded.

Segregation

- 1.66 The segregation unit was kept clean and in good condition by the staff and two orderlies, who prepared cells for occupation as soon as they were vacated. The regime was appropriate, with access to the chaplaincy, health care department, telephones and showers daily. Exercise, although taken with other prisoners, was restricted to 30 minutes a day. There was some access to the gym; subject to the conditions of segregation, televisions were allowed in some cells and prisoners were able to attend other off-unit activities.
- 1.67 Many prisoners were segregated under Rule 45 (segregation for own protection) following incidents of bullying and due to debts but few stayed for long periods. In the six months before the inspection, over half (108) of all prisoners located on the unit had been transferred out (see main recommendation HP53). Reintegration planning was limited, with no specific multidisciplinary approach to identifying and addressing reasons for segregation and managing prisoners back to normal location.
- 1.68 In our survey, prisoners reported negatively about their treatment on the unit; however, all prisoners we spoke to said that they were treated well by all of the staff on the unit.
- 1.69 Staff were selected to work on the unit following interview and most had been trained in mental health awareness by an on-site trainer.
- 1.70 A wide range of data was collated, and this was reviewed by the segregation monitoring and review group (SMARG).

Recommendation

- 1.71 **Prisoners should have a minimum of one hour of exercise in the open air while undergoing segregation.**

Substance misuse

Expected outcomes:

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

- 1.72 Most prisoners on opiate substitution received reducing doses but there was insufficient integration between the clinical and psychosocial staff teams.
- 1.73 Integrated drug treatment system arrangements were reasonably good. A total of 119 prisoners were receiving opiate substitution: 28 on methadone maintenance, 80 on methadone reduction, one on buprenorphine (Subutex) maintenance and 10 on buprenorphine reduction. Although 75% were appropriately on reducing doses, our survey showed that 29% of prisoners were arriving at the establishment with drug problems, against the 22% comparator.
- 1.74 We observed buprenorphine being administered; this involved prisoners sitting on a chair in an open thoroughfare on the wing for 10 minutes to wait for the sublingual lozenge to dissolve.
- 1.75 While the individual clinical and psychosocial teams worked effectively with prisoners, there were insufficient levels of integration between the teams. There was sporadic dual attendance at clinical reviews and a low level of co-facilitation of group work, and no regular multidisciplinary casework meetings took place.

Recommendation

- 1.76 **Clinical and psychosocial substance misuse services should integrate further and undertake joint care plans and reviews.**

Housekeeping point

- 1.77 Subutex and other medications requiring long periods of observation should be administered in locations that afford respect and privacy.

Section 2: Respect

Residential units

Expected outcomes:

Prisoners live in a safe, clean and decent environment within which they are encouraged to take personal responsibility for themselves and their possessions. Prisoners are aware of the rules and routines of the prison which encourage responsible behaviour.

- 2.1 The external environment and communal areas were clean and well maintained. Prisoners complained about access to cleaning materials. Many of the doubled cells were too small. The furniture in many cells was broken. Night workers experienced sleep disruption during the day because of high noise levels on A wing. Cell call bells were not always answered quickly enough. Many showers were in a poor condition and had insufficient screening. Toilets were not all well screened. There was reasonable provision of laundries but access to prison clothing was problematic. Applications were not all tracked. There were insufficient telephones on all but three wings and prisoners were negative about getting access to them. Mail was dealt with daily, including at weekends.
- 2.2 The external environment and communal areas on residential units were clean and litter free. Standards of accommodation varied across the wings and prisoners had different experiences according to their location. Prisoners complained about access to cell cleaning materials, and staff on some wings reported shortages. Many cells were grubby and we found graffiti etched on mirrors in some cells. Many single cells were shared and were too small to accommodate two sets of furniture. The furniture in many cells was broken and few prisoners had lockable cupboards. Toilets were not all well screened, particularly in shared single cells, where they were screened with shower curtains. Prisoners on some wings had en-suite showers and toilets which provided a better environment for those sharing cells.
- 2.3 Two sets of showers had been refurbished to a good standard but others were in a poor condition, with peeling paint and insufficient screening. Prisoners reported good access to showers.
- 2.4 There was reasonable provision of laundries. Clothing exchange took place weekly and prisoners were required to order in advance the clothing they required. This was often of the wrong size when delivered and many prisoners told us that there was insufficient clothing for their needs. There were many formal complaints relating to prison clothing (see section on complaints).
- 2.5 Night workers were accommodated on A wing, which was too noisy during the day. They told us that they were expected to attend roll checks and that their sleep was disturbed by staff carrying out cell fabric checks.
- 2.6 Staff supervision was adequate on most wings, including during association. Prisoners on all but G wing had privacy keys to their cells. Cell call bells were not always answered quickly enough; the records we reviewed showed that in some cases staff took between 20 minutes and an hour and a half to respond.

- 2.7 There were insufficient telephones on all but three wings. Apart from those located on A wing, telephones were switched off at various times during the day, restricting prisoners' access to them. In our survey, 53% of prisoners reported problems with access to telephones, which was worse than the 24% comparator. Telephones afforded adequate privacy.
- 2.8 Mail was dealt with daily, including at weekends. There were adequate procedures for dealing with recorded and special delivery mail and privileged mail from legal advisers. Staff in the correspondence office were advised about prisoners whose mail required monitoring, and the lists were updated daily. More prisoners in our survey than at comparator prisons said that there were problems with sending and receiving mail but we were unable to find evidence of any delays.
- 2.9 Applications could be submitted daily and were logged but not all were tracked. In our survey, fewer prisoners than at comparator establishments said that applications were dealt with fairly or quickly, and this view was echoed by prisoners in our groups.

Recommendations

- 2.10 **Single cells should not be used to accommodate two prisoners.**
- 2.11 **Cells should be equipped with sufficient serviceable furniture and adequate toilet screens, and cell cleaning materials should be freely available. All shower areas should be refurbished.**
- 2.12 **Showers should be refurbished where necessary and provide adequate privacy.**
- 2.13 **The procedures for issuing prison clothing should be improved so that all prisoners can obtain sufficient clothing, of good quality and in the right size.**
- 2.14 **Night workers should be able to sleep without disruption.**
- 2.15 **Additional telephones should be provided and access to telephones increased.**

Housekeeping point

- 2.16 Cell call bells should be answered promptly.

Staff–prisoner relationships

Expected outcomes:

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

- 2.17 Relationships between staff and prisoners were good but low staffing levels meant that opportunities for engagement were limited. There were effective prisoner representatives and good consultation procedures. The personal officer scheme was not run effectively.
- 2.18 In our survey, 77% of prisoners said that most staff treated them with respect, and 74% that there was a member of staff they could turn to for help, both of which were in line with the

comparators. Prisoners in our groups told us that staff were mostly respectful and we observed friendly and mature relationships between prisoners and staff.

- 2.19 Prisoners in our survey were more negative about the frequency of contact with staff, with 21% reporting that a member of staff had checked on them personally in the previous week, against the 46% comparator. Staffing levels on the wings during association had been reduced and, although we observed some interaction, this was reflected in our survey, with only 16% reporting that staff spoke to them most of the time during association, against the 20% comparator.
- 2.20 There were prisoner representatives on each residential unit and those we spoke to said that staff and wing managers were receptive to the issues they raised. Most prisoners told us that wing representatives were active on their unit and were helpful.
- 2.21 Prisoner consultation was good, with specialist diversity and facility consultative groups as well as a monthly wing representatives meeting attended by residential governors, but there were no formal wing-based groups. Prisoner representatives told us that their forum had led to important changes, such as to visits, release on temporary licence opportunities and rules on clothing.
- 2.22 There was a clear personal officer policy and all prisoners were allocated a personal officer. However, in our survey only 53% of prisoners said that they had a personal officer, which was worse than the 77% comparator. We found that the system was not run effectively, which could have accounted for the poor perception by prisoners. None of those we spoke to met their personal officer regularly and the prisoner records we examined either had no personal officer entries or had only comments relating to events such as recategorisation or incentives and earned privileges reviews.

Recommendation

- 2.23 **The personal officer scheme should be effective in providing regular support and motivation to prisoners.**

Equality and diversity

Expected outcomes:

The prison demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no prisoner is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The distinct needs of each protected characteristic³ are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.

- 2.24 Equality and diversity were well managed and outcomes for prisoners were generally good. Consultation arrangements were mainly effective, but not with black and minority ethnic prisoners, and the quality of investigations and responses following the submission of discrimination incident report forms was inadequate. Governance and monitoring arrangements identified inequality and actions were taken. Each of the protected

³ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

characteristics received attention, and training packs had been developed for most strands. There was insufficient confidential communication with some foreign nationals. There was no multidisciplinary care planning for older prisoners and those with disabilities.

Strategic management

- 2.25 There was a good equality and diversity policy, which covered all protected characteristics. A short summary of this policy was provided to all prisoners on induction. There was an up-to-date equality action plan, which included action points from equality impact assessments.
- 2.26 The governor took a direct interest in diversity and equality, chairing the monthly equality committee and engaging personally with prisoner diversity representatives. Attendance at this meeting was variable, with some notable absences, including a chaplain, foreign nationals officer and the catering manager. However, an external representative had begun to attend.
- 2.27 There had been a comprehensive prisoner diversity needs analysis in 2010, which had led to an action plan. The survey had been repeated shortly before the inspection; analysis of the data was in progress, in order to create a new action plan.
- 2.28 Discrimination incident report forms (DIRFs) were freely available but prisoners had little confidence in the process. A total of 160 DIRFs (including racist incident report forms, the predecessor to DIRFs) had been submitted in 2011, fewer than in 2010 and low in comparison with other prisons. Managers generally investigated these quickly but there were often delays in sending a response to the prisoner. The quality of some responses was poor, failing to explain to prisoners how the incident had been investigated and how conclusions had been drawn. In two cases we examined, the person complained against had been asked to conduct the investigation.
- 2.29 Systematic monitoring and analysing of the race equality template (SMART) was routinely discussed, appropriately analysed and action was taken. Monitoring had been extended to cover religion and disability. SMART data were shared with prisoner diversity representatives but were not routinely available to the general population. Equality committee minutes recorded discussion of SMART monitoring that was out of range, and there was evidence that action was initiated.

Recommendation

- 2.30 **Discrimination incident report forms should be investigated by managers who are demonstrably impartial, in order to inspire user confidence in the process. Responses should be full and timely.**

Housekeeping point

- 2.31 Simplified systematic monitoring and analysing of the race equality template (SMART) data should be published to prisoners.

Protected characteristics

- 2.32 In many areas of our survey, particularly those relating to safety and respect, black and minority ethnic and Muslim prisoners reported more negatively than their white and non-

Muslim counterparts. These perceptions were also apparent in our conversations with prisoners. However, some actions had been taken to address the negative perceptions of Muslim prisoners (see paragraph 2.38) around communication, attitudes of staff and food but in our survey a number of negative perceptions still prevailed.

- 2.33 Although all staff had completed 'challenge it, change it' training, prisoners still felt that staff sometimes behaved inappropriately without intending offence. Training in 'unconscious bias' had been introduced in 2011 in partnership with the Holocaust Centre and it was hoped that this would continue. Prisoners with racially motivated alerts were known to the diversity team and published to staff.
- 2.34 There was a group of 15 paid prisoner diversity representatives, many of whom were from black and minority ethnic backgrounds, working from the newly established equality office. They had recently been given responsibility for particular strands, met daily and had regular meetings with the equality manager. Some of them had not received training but they were all familiar with SMART monitoring. This group was represented at the equality committee but expressed some doubts about the extent to which their views were considered. The minutes of these meetings did not evidence a significant contribution from these prisoners.
- 2.35 Race equality was well promoted and prisoner representatives felt well supported but there was no regular focus group for black and minority ethnic prisoners; the prison relied entirely on the prisoner representatives to communicate with this group of prisoners. The chaplaincy team had recently established a support group for prisoners from Gypsy, Romany or Traveller communities. The first meeting had been well attended.
- 2.36 There was a comprehensive foreign nationals policy and a knowledgeable foreign nationals coordinator. A comprehensive database of the 123 foreign nationals held at the time of the inspection was maintained, which helped to case manage each prisoner. All foreign national prisoners were identified and their needs and status discussed soon after arrival. Prisoners were used to interpret for others, rather than using a professional telephone interpreting service, which had been used for a total of only five hours in 2011, and there were published lists of staff and prisoners who spoke foreign languages and were prepared to interpret.
- 2.37 The UK Border Agency (UKBA) ran two clinics a month and although there was no independent immigration advice available on site, prisoners were signposted to the Detention Advisory Service (DAS) in London. A number of key documents had been translated into a variety of different languages and there was a wide selection in the library, which also arranged to download newspapers in different languages. However, there was insufficient translated material relating to the early days in custody, including induction (see section on early days in custody). A recent needs assessment questionnaire for foreign national prisoners had recently been translated into several languages, including the accompanying notice to prisoners, and the results were awaiting analysis.
- 2.38 During 2011, equality impact assessments had been commissioned to examine 'Access to religion' and 'Perceptions of Muslim prisoners'. Action plans existed in both cases and some work had been completed, although more was required. SMART monitoring for religion had just begun, so it was too soon to draw firm conclusions.
- 2.39 Prisoners with disabilities were identified on reception primarily through the health care department. Referrals were then made to the full-time disability liaison officer, who ran a weekly clinic to manage each man's specific needs. There were examples of reasonable adjustments being made for individual prisoners. Personal emergency evacuation plans were in place across the prison, and the prisoners concerned were known to staff, but there was no

evidence of multidisciplinary care planning to meet the social care needs of prisoners. There was a spur on A wing which was equipped for prisoners with disabilities, and another for those over 40 years old, but there were no suitable daytime activities for prisoners on these spurs who were unable to work. The disabled/older prisoner forum was a recent initiative and some actions had already been progressed. Prisoners over retirement age had in-cell television free of charge.

- 2.40 In our survey, prisoners with disabilities were more negative than other prisoners about a range of indicators. However, the men we met were mostly positive about their experiences.
- 2.41 There was a regular support group for gay and bisexual prisoners and the library had a range of gay, bisexual and transgender literature, including information on local support networks. In the most recent needs analysis, 1–2% of prisoners had identified as gay or bisexual. A monthly support meeting for such prisoners had been set up with the help of a community organisation and took place in the chaplaincy. There were few reported incidents of homophobic behaviour.

Recommendations

- 2.42 **There should be a regular consultation forum with black and minority ethnic prisoners to ensure that the reasons for their negative perceptions are understood and addressed.**
- 2.43 **Multidisciplinary care plans should be developed for prisoners with social care needs and made available to wing staff.**

Housekeeping points

- 2.44 The role of prisoner representatives at the equality meeting should be clarified and promoted.
- 2.45 Prisoners should have access to independent immigration advice.

Good practice

- 2.46 *Equality monitoring had been extended to cover religion and disability.*

Faith and religious activity

Expected outcomes:

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

- 2.47 In our survey, fewer prisoners than at comparator prisons said that their religious beliefs were respected, apart from black and minority ethnic and Muslim prisoners, who reported positively. The chaplaincy team reported good relationships with staff and prisoners alike but expressed concern that access to Sunday worship was restricted by the requirement for prisoners to apply to attend Christian worship, and there was evidence that the numbers were capped.

- 2.48 The chaplaincy team reflected the faith/denominational requirements of the prison population. There were sufficient staff in the department to fulfil statutory requirements but a coordinating chaplain had not been appointed. This role had been performed for the previous 18 months unofficially by the full-time Roman Catholic chaplain, and the uncertainty about the position of coordinating chaplain hindered the strategic direction of the team.
- 2.49 A range of faith-based classes was available for predominantly Christian and Muslim prisoners. Good pastoral care was provided to all prisoners who had experienced significant events, including bereavements, and the Roman Catholic chaplain was a trained counsellor. A wide range of religious and cultural events was celebrated throughout the year.
- 2.50 Communication and integration with other parts of the prison was good but community engagement was weak. The chaplaincy team reported good relationships with staff and prisoners alike but reported concern about the requirement for prisoners to apply to attend Christian worship. We were told by other managers that this process had been stopped but most staff and prisoners believed that it was still in place. Many prisoners, some staff and some members of the chaplaincy team also believed that there was an official cap on the number attending, due to weekend staffing issues, and that there had been occasions when wing managers failed to unlock prisoners for worship. Fewer prisoners in our survey than at comparator prisons said that their religious beliefs were respected. By contrast, Muslim and black and minority ethnic respondents to our survey were content with religious provision.
- 2.51 The multi-faith room was stark and grubby and the ablutions area dirty.

Recommendation

- 2.52 **Prisoners should not be required to apply to attend Christian worship and attendance should not be capped.**

Housekeeping point

- 2.53 The multi-faith room should be thoroughly and regularly cleaned.

Complaints

Expected outcomes:

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

- 2.54 Complaints were inappropriately collected by the night orderly officer. Some complaints were not dealt with appropriately. Analysis of complaints was good but quality assurance processes were not sufficiently robust. Many complaints related to matters that could have been dealt with more quickly by application and some did not address the issues raised.
- 2.55 Complaint forms were freely available on all wings. Complaints boxes were emptied by the night orderly officer, which compromised confidentiality. A large number of formal complaints were submitted to deal with minor issues that could have been more suitably dealt with by wing

staff, such as requests for clothing and queries about pay and money. Complaints were assigned to functional heads and responded to at an appropriate level.

- 2.56 We examined 50 complaints and found that those relating to category D appeals and safer custody matters, particularly bullying, were not dealt with appropriately. Category D appeals were returned to the prisoner with an additional form for them to complete and reports of bullying were referred to the safer custody team for a response within 28 days. Some complaints did not fully address the issues raised and resulted in prisoners submitting additional queries. Analysis and monitoring of complaints was good. Quality assurance was carried out but was not sufficiently robust to identify the issues we raised.

Recommendation

- 2.57 **Complaints should be responded to appropriately and systems developed to ensure that prisoners receive a prompt and full response.**

Legal rights

Expected outcomes:

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

- 2.58 Prisoners did not have access to legal services staff. Legal visits did not afford sufficient privacy.

- 2.59 In our survey, prisoners reported positively about access to legal visits but negatively about the availability of legal information and confidentiality – particularly the opening of legally privileged correspondence. There was no legal services officer provision, which was a serious omission, given the number of foreign national prisoners and recalled prisoners in the population.

- 2.60 Legal visits took place in close proximity to one another, with insufficient privacy for a confidential discussion. The visits policy restricted legal visits to 20 per session in an attempt to provide privacy but we frequently noted occasions when this figure was exceeded. Prisoners reported difficulty in accessing a telephone during the working day to speak to their solicitor (see section on residential units).

Recommendations

- 2.61 **Legal visits should take place out of the hearing of others.**
- 2.62 **Legal services should be provided.**

Health services

Expected outcomes:

Prisoners are cared for by a health service that assesses and meets their health needs while in prison and which promotes continuity of health and social care on release. The standard of

health service provided is equivalent to that which prisoners could expect to receive elsewhere in the community.

2.63 Poor commissioning arrangements had resulted in fragmented health services which were difficult to manage and adversely impacted on prisoner care. Governance arrangements were weak and there had been no partnership board meeting for over six months. We observed constructive and professional engagement with prisoners. In our survey, fewer prisoners than at comparator prisons said that the quality of health services was good. Prisoners waited too long to see nurses and doctors. The number of missed appointments was high and was not being addressed. There was no out-of-hours service available and this had compromised prisoner safety. Medicines management was poor. Primary and secondary mental health care was good and prisoners were positive about the help they had received. There was no therapeutic activity available for prisoners vulnerable because of mental ill health.

Governance arrangements

- 2.64 Health services were commissioned by NHS South Yorkshire and Bassetlaw cluster, pending national health and social care reorganisation. There had been little engagement between the commissioner and the prison and no partnership board meeting for more than six months. Medacs provided the primary nursing service. All other providers were directly contracted by the commissioner, with no formal operational oversight of providers at the prison level (see main recommendation HP55).
- 2.65 A health needs assessment (HNA) had been published in 2011 but data inaccuracy and the low number of respondents made some aspects unreliable. Most prisoners surveyed for the HNA said that health services failed to meet their minimum expectations.
- 2.66 In our survey, fewer men than at comparator prisons said that access to or the quality of health services was good. Health services were the main source of complaint by prisoners in our groups and individually during the inspection. Complaints were dealt with using the main prison complaints system, which was unsuitable for confidential health issues; we noted some complaint responses which did not address the focus of the complaint appropriately. The health care manager held a regular 'surgery' for individual prisoners to discuss concerns.
- 2.67 The health care centre was clean, with good signage, but there was insufficient space for individual consultations on some days during the inspection and we saw a patient consultation conducted in a thoroughfare.
- 2.68 The number of prisoners missing appointments was high. Over the previous three months, 'did not attend' rates for GP and nurse appointments averaged between 17% and 29%, respectively, and were not being addressed (see main recommendation HP55).
- 2.69 Nursing staffing was at full complement. Staff were appropriately line managed, with separate arrangements for clinical supervision.
- 2.70 Service and clinical policies were out of date and there was no clinical governance meeting to review and ratify policies (see main recommendation HP55).
- 2.71 Information-sharing protocols were recorded on SystemOne, the electronic patient record system. Electronic records were used effectively, with proactive, focused care plans.

- 2.72 Clinical and serious untoward incidents were logged and followed through by individual line managers. However, we did not see the data and it was not clear how incidents were reported and escalated to the commissioners.
- 2.73 The resuscitation kit was kept in the main health care department and wing treatment rooms in sealed bags but with no kit checklists or recorded monitoring of equipment.
- 2.74 There were regular chronic disease management, blood-borne virus and visiting specialist genito-urinary medicine clinics.
- 2.75 Health promotion literature was available in the health care department, and was up to date and targeted appropriately. Condoms were available on a 'one for one return' basis, which was unacceptable. Two smoking cessation clinics were provided but success rates were low.

Recommendations

- 2.76 **Consultations should always be conducted with respect for privacy and dignity.**
- 2.77 **Prisoners should be able to access a suitable confidential health complaints system.**

Housekeeping point

- 2.78 Resuscitation kit checklists should be maintained.

Delivery of care (physical health)

- 2.79 Prisoners were health screened on arrival, with appropriate identification and follow-through to the GP, dentist, optician and mental health and substance use workers. There was also a basic screening to identify those with learning disabilities but there were no specific follow-up services. We observed a reception screening conducted by a non-clinical manager.
- 2.80 There was no routine secondary health assessment. Prisoners over 50 were offered well-man screening and those with long-term conditions were followed up at designated clinics. There were 10 men on the waiting list for the well-man clinic at the time of the inspection and they had waited for up to a month.
- 2.81 Primary care services included a fortnightly optician clinic, and 'ready specs' were available. There was a podiatry service, with 62 on the waiting list at the time of the inspection. There was no access to physiotherapy for triage and no therapy for men with long-standing musculoskeletal problems and on strong prescribed analgesics.
- 2.82 Prisoners regularly waited up to two weeks to see the nurse and a further three weeks to see the GP (see main recommendation HP55).
- 2.83 There were designated lead nurses for older prisoners, asthma and diabetes but it was not clear whether nurses had received specialist training.
- 2.84 The health care department was staffed between 7.45am and 8pm during the week and for a shorter time at the weekend, with no nursing or medical cover arrangements outside those hours. Few discipline staff had been trained in first aid or resuscitation and there was no access to resuscitation equipment out of hours (see main recommendation HP55).

- 2.85 There were few cancellations of external hospital appointments. There were some difficulties in getting X-ray appointments promptly and we found one prisoner with a traumatic injury who had waited a month for an X-ray.

Housekeeping points

- 2.86 Reception screenings should be conducted by a registered health professional.
- 2.87 All prisoners should be given a follow-up health assessment within 72 hours of arrival, to ensure that health problems are identified at an early stage.
- 2.88 Provision of prison primary care services should be equivalent to those in the community.

Pharmacy

- 2.89 Pharmacy services were provided by Lloyds Pharmacy and comprised a dispensing assistant and fortnightly pharmacist visits. Nursing staff provided day-to-day support to run the pharmacy.
- 2.90 Prescribing was electronic and faxed signed copies were sent to Lloyds for dispensing. We observed, and were told by prisoners, that prescribed medication was often not available when required.
- 2.91 Most medication was dispensed and collected in possession. Prisoners collecting medication were unable to discuss their medicines in confidence because queues were unsupervised. There was a robust risk assessment policy and protocol but prescription charts showed that some prisoners whose medication had been prescribed as daily in-possession were given a longer supply.
- 2.92 There was no consistent use of an agreed formulary and no monitoring of prescribing (see section on security). There were no arrangements for prisoners needing to keep refrigerated medicines, such as insulin, in possession.
- 2.93 There was no medicines and therapeutics meeting and no locally agreed standard operating procedures. Not all patient group directions had been signed and read by designated staff; the self-care scheme enabled prisoners to buy simple pain relief but we were told by some men that they had been refused pain relief and told to buy it.
- 2.94 Storage and stock control of medicines were compromised by the fixings for the controlled drug cupboard not being compliant with regulations and out-of-hours stock being stored alongside controlled drugs, methadone being transported daily between the health care department and integrated drug treatment system wing, and controlled drug registers not being compliant with new regulations.

Recommendations

- 2.95 **Safe medicines management should be implemented in line with legislation and recognised professional practice and clinical guidance.**
- 2.96 **Prescribing reviews should be implemented to ensure that medicines are used therapeutically and safely within the prison environment.**

Housekeeping points

- 2.97 The controlled drugs cupboard should be fixed in compliance with Controlled Drugs (Supervision of, Management and Use) Regulations 2006.
- 2.98 Out-of-hours medicines should be stored separately from the controlled drugs.

Dentistry

- 2.99 Dental services were provided by VOSG Bassetlaw Ltd. There were eight dental sessions a week. There were 14 prisoners on the waiting list at the time of the inspection and most waited less than four weeks for a routine appointment. Those with urgent dental problems could sometimes be seen on the same day. The full range of NHS dental treatment was provided, including individual oral hygiene and health promotion.
- 2.100 SystmOne was used for all clinical recording, except for dental charts, for which traditional paper records were used. Records were suitably detailed, showing appropriate periodontal and soft-tissue examinations.
- 2.101 Infection control arrangements were reasonable, with a separate decontamination room. There was no washer disinfector and an ordinary hand basin with non-elbow taps was used to clean instruments.
- 2.102 The fixed equipment, including the chair and X-ray machine, was owned by the prison; there was a current Radiological Protection Board certificate but servicing was considerably overdue. Moveable equipment, including the autoclave, had been serviced in the previous year.

Housekeeping point

- 2.103 There should be suitable arrangements for washing and cleaning instruments.

Delivery of care (mental health)

- 2.104 In our survey, more prisoners (15%) than at comparator establishments (9%) said that they had had mental health problems on arrival, and fewer (33%) than at comparator prisons (66%) that they had been able to get help. The HNA indicated difficulty in assessing the true prevalence of mental health problems at the establishment.
- 2.105 Primary mental health services were provided by the core nursing team, supported by the GPs. The nurses had dedicated clinic time. Primary mental health referrals were accepted from any member of staff, and also self-referrals. At the time of the inspection, there were 35 prisoners on the team caseload, with eight waiting to be seen; the longest wait had been two days. Urgent referrals were prioritised.
- 2.106 There was a weekly joint allocation meeting which enabled appropriate case management and allocation across primary and secondary mental health services. Primary mental health nurses visited the segregation unit daily and attended assessment, care in custody and teamwork (ACCT) reviews.

- 2.107 Secondary mental health services were provided by NHS Nottinghamshire Healthcare Foundation Trust. There was daily nursing cover between Monday and Friday and two forensic psychiatrist sessions each week. At the time of the inspection, there were 55 prisoners on the team caseload, with 18 men on the waiting list, five of whom had already waited three weeks. Prisoners generally waited up to three weeks for a first assessment but were prioritised if clinically urgent.
- 2.108 Clinical recording was via SystmOne, including separately scanned care programme approach (CPA) documentation, and the recording we reviewed was thorough and appropriate. A largely satisfactory CPA audit had been completed in January 2011.
- 2.109 There was a lack of suitable spaces for consultations on some days, which compromised privacy and confidentiality.
- 2.110 There had been two final assessments under the Mental Health Act during the previous year and no significant delays. A voluntary placement under the Mental Health Act had been refused by the Ministry of Justice, as the prisoner had been due for release and it would have compromised his liberty; he had been appropriately linked with a community mental health team and arrangements made for an approved placement with community mental health support.
- 2.111 There was no therapeutic activity available for prisoners who were vulnerable because of mental ill health. Prisoners we spoke to were positive about their experience of help from mental health services.

Recommendation

- 2.112 **An up-to-date health needs assessment, including mental health, learning disability and personality disorder, should inform mental health provision.**

Catering

Expected outcomes:

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

- 2.113 Prisoners were negative about the quality and quantity of food. Consultation procedures were good and the kitchen and other food areas were in good order. There were no facilities for prisoners to cook for themselves.
- 2.114 In our survey, only 26% of prisoners said that the food was good or very good, against the 29% comparator and 31% at the time of the previous inspection. In our groups, the main complaints were in relation to portion size. A new system of portion control had been introduced and if prisoners took all that they were entitled to then, with the exception of breakfast, meals were of sufficient quality and quantity. Consultation was good and had led to some changes in the way that the kitchen operated.
- 2.115 Prisoners had access to either kettles or, in the case of A wing, a hot water boiler at all times.

- 2.116 The kitchen and other food areas were in good order. There were no cooking facilities on any of the wings and only prisoners on A wing could dine out of cell. The evening meal was served too early, at 4.20pm, and the meagre breakfast packs, consisting of a small portion of cereal and milk, were issued on the day before consumption.
- 2.117 There were no qualifications available above basic food handling certificates. A few prisoners were able to work towards National Vocational Qualifications at levels 1 and 2 in the staff mess (see section on learning and skills and work activities).

Recommendations

- 2.118 **The evening meal should not be served before 5pm.**
- 2.119 **Prisoners involved in the preparation of food should be able to obtain nationally recognised qualifications.**

Purchases

Expected outcomes:

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

- 2.120 Prisoners were dissatisfied with the prison shop and the range of goods available. Access to catalogues was limited.
- 2.121 Prisoners arriving from other prisons could wait up to 10 days to place a shop order. Basic grocery bags were available but were unpopular with prisoners. Access to catalogues for specialist items was limited and an administration charge of 50 pence – about 20% of a retired prisoner's weekly allowance, was levied on each purchase. In our survey, only 35% of prisoners, against the 46% comparator, said that the shop sold a wide enough range of goods to meet their needs.
- 2.122 Newspapers could be ordered in advance but there was no provision for families to order them for prisoners.
- 2.123 A quarterly prisoner consultation identified items for inclusion and deletion from the shop list. The shop provider (DHL) conducted an annual survey in line with the national contract.

Recommendation

- 2.124 **Prisoners should be able to place a shop order on the day after reception.**

Housekeeping point

- 2.125 Prisoners should not be charged an administration fee for catalogue orders.

Section 3: Purposeful activity

Time out of cell

Expected outcomes:

All prisoners are actively encouraged to engage in activities available during unlock, and the prison offers a timetable of regular and varied activities.⁴

- 3.1 Prisoners' experience of time out of cell was generally good. They did not have association every day, which meant that they could not make telephone calls or have showers daily. Our roll checks showed that 30% of prisoners were not engaged in activity and 25% were locked in their cells. Some prisoners had only half-hour exercise periods.
- 3.2 Prisoners who were fully employed could have nine hours per day out of their cell during the week and 5.5 hours at weekends. There was a rota for association which enabled prisoners to have evening association only three times a week. This impacted on prisoners being able to telephone family and friends in the evenings and being able to have a shower every day. Association took place according to the scheduled programme and was not routinely cancelled. Association areas were reasonable but the leisure equipment available, such as pool tables, was in poor repair on some wings.
- 3.3 In our roll checks, carried out during the morning and afternoon core day periods, 30% of prisoners were not engaged in activity and 25% were locked in their cells (see main recommendation HP56). The number locked up included some retired prisoners.
- 3.4 Prisoners on H and I wings had an hour of exercise daily and were able to access a pleasant outdoor area around H wing. Prisoners on other wings were unlocked for only half an hour of exercise a day.

Recommendation

- 3.5 **All prisoners should have association and one hour of exercise every day.**

Learning and skills and work activities

Expected outcomes:

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

- 3.6 The prison offered sufficient high-quality activity places, which focused well on developing employability skills and preparing prisoners for employment on release. At least half of prisoners discharged from the prison progressed to a job or further training. Links with

⁴ Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities to take showers or make telephone calls.

employers were excellent and the range and quality of vocational and industrial training and work provision were good. Teaching and learning were generally good but the provision in literacy and numeracy did not adequately meet the needs of prisoners. Achievement of qualifications was generally good but the number of prisoners achieving qualifications was low. The prison offered too few opportunities to gain skills above level 2. Prisoners made good use of the well-resourced library.

3.7 Ofsted made the following assessments about the learning and skills and work provision:

| | |
|--|--------------|
| Achievements of prisoners engaged in learning and skills and work: | Satisfactory |
| Quality of learning and skills and work provision: | Good |
| Leadership and management of learning and skills and work: | Good |

Management of learning and skills and work

- 3.8 The prison had focused well on developing prisoners' employability throughout learning and skills and work. Managers used a comprehensive needs analysis of the prison population and labour management information in the main locations for resettlement effectively to prioritise vocational areas for training and industry workshops. Excellent partnership working had contributed to a wide range of innovative provision of specialist skills training, such as rail and street works and wood milling. Many of the commercial workshops promoted realistic work environments through successful initiatives such as contractual and production targets and extended working hours. However, the wider prison regime did not adequately support night and shift working by ensuring that prisoners had appropriate provision of food and that sleeping arrangements were adequate (see section on residential units).
- 3.9 Quality assurance arrangements were satisfactory. The prison consulted prisoners and worked with its partners well to self-assess the provision and used detailed action plans to drive forward improvements. Although data were used well to set targets for retention and achievement, the prison did not analyse the performance of different groups of prisoners sufficiently well. The quality of training was not monitored fully in all workshops and vocational training. Although Lincoln College, the provider of the Offender Learning and Skills Service education and vocational training, assessed the quality of teaching and learning systematically throughout its provision, staff did not receive sufficiently detailed feedback on the effectiveness of their work, especially in teaching literacy, numeracy and English for speakers of other languages (ESOL).

Recommendation

- 3.10 **The quality of teaching, training and learning should be monitored in all areas and staff should receive detailed feedback on the quality of their work.**

Provision of activities

- 3.11 The prison had 935 activity places, which was sufficient to occupy the prison population. Approximately 830 prisoners were involved in learning and skills and work overall but not enough (only 70%) prisoners were engaged in activities at any one time. The prison did not monitor the take-up of places adequately, especially in education, where a full-time place often accounted for only six actual learning sessions of the nine allocated, and too many prisoners were turned away from the workshops (see main recommendation HP56).

- 3.12 The wide range of activities was promoted well at induction and across the prison but, although allocation arrangements were equitable, transparent and informed by sentence planning, some prisoners had to wait too long to be allocated to an activity. The management of waiting lists was satisfactory. Pay rates were being reviewed at the time of the inspection, as the prison had recognised that they were over-complex. The current pay did not act as a disincentive to participation in purposeful activity.

Recommendation

- 3.13 **The length of time that prisoners wait for allocation to activities should be reduced.**

Quality of provision

- 3.14 The careers information and advice support (CIAS) service, provided by Lincoln College, involved thorough interviews to identify prisoners' learning and development aims in line with their plans for resettlement. This information was shared well across the prison. However, not all prisoners received an initial guidance interview at induction and the individual learning plans used in education did not include sufficient information on prisoners' employment or training goals.
- 3.15 The prison offered a wide variety of purposeful industrial workshops and vocational training. Most work areas offered employment-related training, and effective links with external employers, such as Trackwork Ltd and Utilise TDS Ltd, supported successful entry to employment for many prisoners on release. Prisoners had good opportunities to work towards qualifications, predominantly at level 1, in many areas. Resources for vocational training and industry workshops were very good, with much commercial-standard machinery. Accommodation for plumbing training was cramped. Individual training and coaching were good. Staff were experienced and had a good commercial understanding of their area, and the peer mentors provided effective individual support. Sound health and safety practices were reinforced well.
- 3.16 The teaching and learning in the wider educational subjects such as business enterprise, creative art and design, performing arts and cookery were very good. Prisoners participated well in relevant learning activities, developed good practical, personal and social skills, and built their confidence well. Business enterprise programmes were successful at supporting prisoners to create realistic business plans underpinned by the development of useful employability skills, such as team building and problem solving. The 40 prisoners on Open University and distance learning courses received good support and the prison had developed an innovative study skills programme in partnership with the university. However, there were too few opportunities for prisoners to work towards qualifications at level 2 and above.
- 3.17 The provision in literacy, numeracy and ESOL was weak (see main recommendation HP57). Prisoners did not have sufficient opportunities to develop these skills in practical contexts that related to their training and employment aims. Teaching and learning focused too much on using worksheets and practice test papers, including in the outreach provision in the vocational training workshops.

Recommendation

- 3.18 **All prisoners should receive sufficient initial careers information and guidance, and employment and training goals should be recorded on their individual learning plans.**

Housekeeping point

- 3.19 The plumbing workshop should be better organised to maximise space for training and outreach education support.

Education and vocational achievements

- 3.20 A high proportion of prisoners progressed to employment or training on release. For example, half of the 56 prisoners discharged in February 2012 had gained a job and an additional 12 had progressed to further training. Prisoners developed good skills to a high standard in the industry and vocational workshops and in PE. Achievement by those entered for qualifications was generally high but few prisoners had gained qualifications in the industry workshops. No accredited learning was available in the main kitchens, although National Vocational Qualifications (NVQs) were available in the officers' mess. There had been long delays in processing certificates for many of the qualifications on programmes run by Lincoln College, especially in construction, catering and on personal and social development programmes.
- 3.21 The number of prisoners achieving qualifications in literacy, numeracy and ESOL was low, especially at entry level. This did not meet the needs of the prison population, in which 45% of prisoners, on average, were assessed as below level 1 in literacy at induction, and 49% in numeracy.
- 3.22 The prison had revised procedures for organising movement to activities and, although punctuality had improved, it was still unacceptable in some activities.

Recommendations

- 3.23 **The prison should increase the learning and accreditation opportunities available through to level 2 and above and ensure that more prisoners achieve qualifications across learning and skills.**
- 3.24 **Punctuality should be improved, to minimise disruption to training, education and work and ensure that working time is fully productive.**

Library

- 3.25 The library was a spacious, purpose-built facility and was managed well. Access was good, with opening hours that included evenings and Saturdays. Library usage was high and it had increased by 12% since the previous inspection, to approximately 670 users every two weeks. Staffing arrangements were good and the library orderlies received appropriate training in the practical skills required. Some were also training as peer mentors.
- 3.26 The range of stock was good and ordering services were efficient. The service had recently introduced the provision of DVDs, and the sections on careers and jobs were excellent. Resources for foreign nationals generally met the need and were enhanced by the provision of news sheets in foreign languages. However, the overall stock was slightly low and book loss was high.
- 3.27 Library staff had developed links with the education, industries and vocational training departments and responded well to requests for specialist resources. The library coordinated

successful Storybook Dads and Toe by Toe provision and the facilities to support prisoners on Open University and distance learning programmes were good.

Physical education and healthy living

Expected outcomes:

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

- 3.28 Health and well-being was well promoted. Prisoners had good access to a wide range of sports and PE facilities, although this interrupted the working day for too many prisoners. The range of accredited full-time programmes was wide but there were insufficient to meet the needs of short-term prisoners.
- 3.29 Health and well-being was well promoted and prisoners had the opportunity for regular gym use and a healthy lifestyle. All prisoners attended a thorough gym induction, which was offered on two mornings a week; this included an introduction to first aid and manual handling. A large number of orderlies were trained as health champions and they provided useful guidance and support for prisoners with specific needs. Special sessions were provided for men over 40 and 50, and remedial PE was available.
- 3.30 There was good access to a wide range of sports and PE facilities, offering free weight training and cardiovascular exercise. Some of these areas were cramped when fully used. The outdoor pitches were used well to support league fixtures with visiting teams, including volleyball, cricket, rugby and football.
- 3.31 Approximately 58% of the population used the PE facilities. Prisoners on full-time education or vocational training programmes were given priority to attend evening and weekend sessions. Those in industry workshops were allowed to attend during the core day, in consultation with workplace managers, but this inappropriately interrupted their work routine (see main recommendation HP56). The facilities were not open before prisoners' movement to activities or during lunchtimes.
- 3.32 A range of full-time accredited courses was offered, including a modular PE activities course, an NVQ in sports recreation and allied occupations at levels 1 and 2, a Focus gym instructor course and a healthy lifestyle management course, and achievements were high. However, there were insufficient accredited courses to meet the needs of short-term prisoners.

Recommendations

- 3.33 **PE facilities should be open and available to prisoners before morning movement and during lunchtimes, to reflect access to leisure facilities in the community.**
- 3.34 **More accredited courses should be provided to meet the needs of short-term prisoners.**

Section 4: Resettlement

Strategic management of resettlement

Expected outcomes:

Planning for a prisoner's release or transfer starts on their arrival to the prison. Resettlement underpins the work of the whole prison, supported by strategic partnerships in the community and informed by assessment of prisoner risk and need. Good planning ensures a seamless transition into the community.

- 4.1 There was no comprehensive reducing reoffending strategy and there were no action plans covering public protection and offender management. The needs analysis of the total population was limited. The offender management unit spreadsheet had the potential to provide aggregated data. Prisoners were aware of the help available in relation to resettlement and consultation was good. The long waiting list for some resettlement services was hindering effectiveness. Release on temporary licence was used effectively for the small number of prisoners suitable for it and more community work placements were being developed.
- 4.2 The reducing reoffending strategy failed to incorporate offender management, resettlement and public protection. Governance was provided through the bimonthly reducing reoffending committee but the resettlement pathways action plan was not always updated to reflect the progress made or barriers to improvement. Attendance by some prison staff was sporadic and voluntary agencies did not attend.
- 4.3 The reducing reoffending work was not supported by a comprehensive or robust needs analysis detailing the specific groups of prisoners held at the establishment – for example, indeterminate-sentenced prisoners (ISPs), those serving under 12 months and those presenting a high risk of serious harm. A prisoner survey was not routinely undertaken. An offender management unit (OMU) spreadsheet had been developed to monitor the individual needs of prisoners and, while this had been used to evidence specific projects, it had not yet been used to demonstrate the full range of resettlement needs. However, it was a useful tool in managing waiting lists and prioritising allocation to interventions.
- 4.4 Resettlement work was delivered through two teams: Community Links Advice and Support Services (CLASS) and the Training, Education and Support Team (TEST). Consultation with prisoners took place but there was no opportunity for them to attend drop-in centres or surgeries to access immediate advice. Resettlement work was well advertised, and prisoners we spoke to and those replying to our survey knew whom to turn to for help with resettlement. The number of prisoners serving under 12 months had increased considerably and this had brought additional challenges to the provision of reducing reoffending work. In spite of this, the quality of resettlement work was good, with no major gaps, and prisoners were prioritised by release date. However, at the time of the inspection, about 250 prisoners were waiting to access advice and support from CLASS.
- 4.5 Release on temporary licence (ROTL) was used well for the small number of prisoners suitable for it. A total of 33 prisoners had benefited from ROTL in the previous year and there were five prisoners undertaking it at the time of the inspection. However, prisoners told us that when attending the resettlement forums they were incorrectly told that they had to be category D to

be eligible to apply for ROTL. There were plans to increase ROTL provision and some promising community work placements were developing.

Recommendations

- 4.6 **A comprehensive and up-to-date reducing reoffending strategy and action plan should be developed, based on a robust needs analysis of the complex population, and clearly direct developments across offender management, public protection and resettlement work.**
- 4.7 **The waiting list for Community Links Advice and Support Services (CLASS) should be cleared, to avoid prisoners experiencing delays in receiving support.**

Offender management and planning

Expected outcomes:

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

- 4.8 The backlog of offender assessment system (OASys) assessments had been cleared and all prisoners underwent a full assessment. The quality of the likelihood of reoffending assessments was generally good but assessment and planning for the management of risk of harm to others was inadequate. The lack of integration between offender management, public protection and resettlement led to some weaknesses in practice through a lack of information exchange. Not all sentence plans were reviewed following significant change. Support given to some prisoners was good but too many had no formal contact with offender supervisors. Home detention curfew assessments were completed late in too many cases. Public protection arrangements were generally sound but the violent and sexual offenders register was underutilised. There were some weaknesses in categorisation processes. Too many indeterminate-sentenced prisoners were beyond tariff, despite attempts to prioritise them for offending behaviour programmes, and some category D prisoners waited too long for a transfer to open conditions.
- 4.9 The OMU had a good mix of prison and probation staff, most holding generic caseloads. Offender assessment system (OASys) assessments were completed on all prisoners, including those serving less than 12 months, and the previous backlog had been cleared.
- 4.10 A lack of integration between public protection, offender management and resettlement led to some weaknesses in practice. For example, the individual needs assessment completed during induction was not routinely shared with offender supervisors. In addition, some public protection information, indicative of an increased risk of serious harm, was not passed on to the offender supervisor; for example, details of breaches of contact restrictions were not directly communicated to the offender supervisor or the offender manager. The likelihood of reoffending assessment was adequate in most of the cases we inspected, with sufficient attention to diversity issues.
- 4.11 In our survey, more prisoners (66%) than at the time of the previous inspection (40%) said that they had a sentence plan but this remained lower than the comparator (71%). More prisoners than at the time of the previous inspection and than the comparator said that they had been

involved in the development of the plan. Three-quarters of the in-scope cases we inspected showed evidence that the prisoner understood the steps he had to take to achieve his sentence plan objectives. Prisoners' families were invited to sentence planning review boards and other types of meetings.

- 4.12 Most sentence plan objectives for in-scope prisoners were outcome focused and addressed the likelihood of reoffending and the management of risk of harm. Review of the sentence plan following a significant change had been carried out in only two of the 11 in-scope cases that we examined, and staff other than the offender supervisor were not adequately involved.
- 4.13 Risk of serious harm was correctly classified in all the cases we inspected. The full risk of harm analysis was adequate in all of the in-scope cases but not all risks had been identified in the out-of-scope cases. In one case, serious risks to prison staff had not been recognised. Only half of all the cases we inspected contained an adequate risk management plan. Not all uniformed offender supervisors felt confident in identifying, assessing and planning to manage risk of harm to others and this was evident in some of the OASys documents we inspected. Management oversight of this work was also inadequate in too many cases. Some informal training in the management of risk of harm had been delivered by the probation officers but more was needed.
- 4.14 Contact between the prisoner and his offender supervisor beyond the assessment and planning stages was inconsistent. While some prisoners received a good level of contact, others did not and those who were out of scope received little structured contact. OMU services were too often reactive rather than proactive, responding to applications for help rather than scheduling regular meetings with the prisoner to drive forward the sentence plan. The frequency and purpose of contact were not well enough defined, with offender supervisors and managers having differing views on the minimum expectations. This was reflected in our survey, where only 55% of prisoners, against the 84% comparator, said that they had a named offender supervisor. Only 36%, against the 44% comparator, said that their offender supervisor was working with them to achieve their sentence plan targets.
- 4.15 P-Nomis was not used to record all contacts between offender supervisors and prisoners, or work carried out by staff outside of the OMU (for example, in resettlement); this contributed to the sense that the work being delivered was fragmented.
- 4.16 Home detention curfew was used appropriately and the assessment process was thorough but too many prisoners experienced a delay in the completion of the assessment. Just under half were released after their earliest eligibility date, due to delays in gathering reports from wing staff or community-based probation officers, with some being delayed because the sending establishment had not started the assessment on time.

Recommendations

- 4.17 **Integration between offender management, public protection and resettlement teams should be improved, to ensure effective information exchange.**
- 4.18 **The quality of the assessment of risk of harm to others completed by offender supervisors should be improved, so that a comprehensive plan results in all relevant cases.**
- 4.19 **Minimum contact between the offender supervisor and prisoner should be clearly defined, with the frequency based on the risk of harm to others.**

- 4.20 **Home detention curfew assessments should be completed on time, to enable prisoners to be released on their earliest eligible date.**

Housekeeping point

- 4.21 Sentence plan reviews should be undertaken in all cases when necessary and fully involve all relevant staff.

Public protection

- 4.22 Screening and assessment processes were undertaken quickly following reception. They were thorough and resulted in the application of appropriate restrictions. The weekly public protection meeting agreed restrictions on contact, and the interdepartmental risk management team (IRMT) reviewed multi-agency public protection arrangements (MAPPA) cases in preparation for release. However, we saw a small number of cases that had not been discussed by the IRMT within six months of release and the minutes of the public protection meeting were not routinely shared with the offender supervisor.
- 4.23 MAPPA operated well, with offender supervisors contributing to level 2 and 3 meetings, generally through a written report. The violent and sexual offenders register (ViSOR) was underutilised; while all cases had been set up to allow information exchange, this did not happen in practice. Too many parole reports on determinate-sentenced prisoners were late.

Housekeeping points

- 4.24 Minutes of the interdepartmental risk management team should be shared with the offender supervisor.
- 4.25 All parole reports should be completed on time.

Categorisation

- 4.26 Recategorisation reviews were undertaken on time, coordinated through the public protection team. Offender supervisors had only recently become involved in these, and the quality of their contributions was inadequate. The categorisation paperwork we looked at was incomplete and in some examples the approval date was before the recommendation date. Foreign national prisoners were reviewed but not recategorised to category D if their immigration status remained unclear or the UK Border Agency had any ongoing involvement. Prisoners were not given a detailed explanation for the decision and appeal paperwork was not automatically issued.
- 4.27 Sessions were held with prisoners to promote awareness about the category D assessment process. They also gave constructive advice on how to improve their chances of being successful.
- 4.28 At the time of the inspection, the establishment was holding 65 category D prisoners. Some, especially ISPs, often waited too long for transfer to an open prison.

Recommendation

- 4.29 **Category D prisoners should not experience a delay in being transferred to an open prison.**

Housekeeping point

- 4.30 The quality of categorisation review paperwork should be improved, with the decision for refusal fully explained to the prisoner. An appeal form should be issued automatically when relevant.

Good practice

- 4.31 *Sessions were held with prisoners to promote awareness about the category D assessment process and give constructive advice on how to improve their chances of being successful.*

Indeterminate sentence prisoners

- 4.32 At the time of the inspection, the establishment was holding 142 prisoners serving indeterminate sentences for public protection (IPP) and 71 life-sentenced prisoners. Over half were beyond tariff, with most IPP prisoners being over two years beyond tariff. Parole reports on ISPs were completed on time and were up to date.
- 4.33 Provision for ISPs had improved slightly, with good consultation and more one-to-one work with psychologists. IPP prisoners were prioritised for offending behaviour programmes. ISP family days were provided but there were too few to accommodate the increased ISP population. However, they could apply to attend the general family days.

Housekeeping point

- 4.34 More indeterminate-sentenced prisoner family days should be provided, to accommodate the growing population.

Reintegration planning

Expected outcomes:

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

- 4.35 Resettlement needs were assessed during induction and referrals made as required. Ongoing contact with prisoners was limited and discharge interviews conducted only with those who requested help. Help to overcome accommodation, finance and debt problems was good. There were sound arrangements to support education, training and employment, with evidence of good outcomes for prisoners. Most prisoners were seen by health services staff before

release and links were made with local drug intervention programmes for the small number of prisoners released locally. Visits arrangements were satisfactory and family days were a regular feature of the regime. The range of accredited offender behaviour programmes was generally adequate for the needs of the population, although some prisoners waited too long to get a programme place.

- 4.36 All prisoners received an individual resettlement needs assessment on induction, followed by appropriate referrals. The advice provided by resettlement staff was good but compromised by a shortage of staff, resulting in a large backlog of work (see section on strategic management of resettlement). Ongoing support was provided only at the request of the prisoner. Discharge interviews were not routinely undertaken with all prisoners. A letter was sent to prisoners 30 days before release, to ask them if they needed help. Prisoners who responded underwent a discharge interview but too near their release date to be of maximum benefit.

Recommendation

- 4.37 **All prisoners should have a resettlement discharge interview well in advance of their release date.**

Accommodation

- 4.38 Support and advice services for prisoners needing help in finding accommodation on release were excellent and few prisoners left without an address to go to. Only 23 prisoners out of 771 discharges in 2011/12 had left without suitable accommodation arranged. Services were promoted across the prison, and resettlement forums held by the CLASS team ensured that prisoners could ask questions about the available support. Prisoners had access to a range of providers, including Stonham Housing. The use of the local authority internet bidding scheme was a positive step forward and eight prisoners had secured accommodation through this in the previous year. Resettlement officers provided good support and advice to prisoners.
- 4.39 While key performance targets were met year on year, evaluation of the effectiveness of the accommodation services was limited, with no tracking of the number of prisoners securing accommodation before their release.

Education, training and employment

- 4.40 The education, training and employment resettlement pathway was well managed. TEST effectively delivered pre-release interventions, with good support from the careers information and advice support (CIAS) service. There were effective arrangements to ensure that all prisoners engaged in relevant pre-release interventions. A comprehensive range of programmes was offered to support resettlement, including CV and application form completion, interview techniques and disclosure rights. Prisoners wishing to enter self-employment on release were supported well by Nottingham Business Venture and Lincoln College. A recently opened centre provided facilities for individual and group job searches. The prison had also started to use a newly operational computer facility to aid job searching. Prisoners moving to other establishments were appropriately encouraged and supported to continue with their learning programme through the use of accurate transfer records.
- 4.41 External links with employers and education and training providers were excellent, with a good focus on developing opportunities for placements through ROTL. However, at the time of the

inspection only four prisoners were gaining work experience in the community. Overall, prisoners' resettlement needs for employment and training were met well, with a large proportion of released prisoners entering work (31%) and further training (21%) in the previous 12 months.

Recommendation

- 4.42 **The prison should further develop its use of release on temporary licence.**

Health care

- 4.43 Most prisoners were seen by health services staff before release. Prisoners with long-term conditions were identified and seen four weeks before release and given advice and information about registration with community services. Two weeks' supply of prescribed medications was given.
- 4.44 Prisoners with severe and enduring mental health problems were linked with their local community mental health team. One prisoner being prepared for release told us that mental health services had worked with his community probation officer to ensure better understanding of his behaviour and the implications for him on release.

Drugs and alcohol

- 4.45 The drug strategy had been updated in January 2012 but did not contain specific action plans for drug supply and demand reduction.
- 4.46 In addition to group work and one-to-one sessions offered by the counselling, assessment, referral, advice and throughcare (CARAT) team, a range of psychosocial interventions was offered, including prison addressing substance related offending (P-ASRO), the Alcohol Intervention Service (AIS), family liaison through a local charity, yoga and acupuncture. All of these services were well integrated with each other and many prisoners were positive about the help they were receiving from these teams. However, Alcoholics Anonymous and Narcotics Anonymous were not available.
- 4.47 A well-supported peer mentoring scheme was being developed. Six mentors were in place at the time of the inspection, with opportunities planned to enable them to attain National Vocational Qualifications in mentoring.
- 4.48 Compact-based drug testing (CBDT) was available, with a total of 375 compacts in place. Most (322) compacts were compliance based, for prisoners residing on the enhanced wings and those working as wing cleaners, kitchen workers and in rail and street works. The remainder were voluntary compacts.
- 4.49 Links with local drug intervention programmes (DIPs) were described by CARAT workers as good but, as only 20–25% of prisoners were released locally, there were limited opportunities for many prisoners to meet face to face with a DIP worker before release.

Recommendations

- 4.50 **The drug strategy document should contain a detailed action plan, informed by the needs analysis, which includes specific outcome-focused targets and clear accountabilities for drug supply and demand reduction.**
- 4.51 **Alcoholics Anonymous and Narcotics Anonymous fellowship groups should be made available to prisoners.**

Finance, benefit and debt

- 4.52 Almost 400 bank accounts had been opened in the previous year and prisoners were positive about this opportunity. Finance and debt advice was provided by St Anne's Advice Centre and was excellent, enabling the repayment of debts and the resolution of other financial difficulties. Demand for this service was high, although the long-term funding of this centre had been withdrawn, making future provision uncertain. A money management course was available through the education department, and a Jobcentre Plus worker based in the TEST team provided access to benefits on release.

Children, families and contact with the outside world

- 4.53 Prisoners' entitlement to visits depended on their incentives and earned privileges level. Visits were available from Friday to Monday, with morning and afternoon sessions of two hours' duration. We were not able to observe a domestic visits session but observed one of the monthly family days which was open to standard and enhanced prisoners. Support services were available from Sure Start volunteers, who were suitably trained and able to signpost to community services across the UK. Two additional family days per year were aimed exclusively at ISPs. Although they could wear their own clothing, prisoners attending the ISP days and all those on domestic visits had to wear brightly coloured tabards.
- 4.54 The visitors centre was clean and welcoming, with generally good facilities and sources of information. Refreshments were provided by means of a vending machine but there were no snacks to purchase. Visitors could book their next visit before leaving the prison and we were able to book a visit during the inspection.
- 4.55 The visits hall was large, accommodating 52 visits. Some of the soft furnishings were in a poor state of repair. Children had access to a well-equipped crèche but there were no play support workers. A programme of table-top, child friendly activities was arranged during school holidays. A kiosk operated by orderlies on weekdays and volunteers on Saturdays served drinks and visitors could purchase snacks but there was no opportunity to purchase snacks on Sundays.
- 4.56 In our survey, fewer prisoners than at comparator prisons felt positive about arrangements to keep in touch with friends and families. In response to concerns about delays for visitors entering the prison, processes had been changed but this was too recent for improved performance to have been recognised in the visitors survey conducted in January 2012. On weekend visits, if a prisoner's visitors did not arrive, he had to remain seated in the visits hall for the duration of the session.
- 4.57 There had been no parenting courses for several years.

Recommendations

- 4.58 **Visitors should be able to purchase snacks during each visits session.**
- 4.59 **Prisoners should be able to return to their wing if a visitor does not arrive.**
- 4.60 **Parenting courses should be provided.**

Housekeeping points

- 4.61 Indeterminate-sentenced prisoners attending family days should not be required to wear tabards.
- 4.62 The soft furnishings in the visits hall should be replaced where necessary.
- 4.63 A copy of the visits policy, data from the recent visitors survey and discrimination incident report forms should be available in the visitors centre.

Attitudes, thinking and behaviour

- 4.64 Three accredited programmes (the thinking skills programme, controlling anger and learning to manage it (CALM) and the self-change programme (SCP)) were delivered, and provided an adequate range of provision for the population. However, some prisoners sent to the establishment required a programme not available there – for example, a domestic violence programme. The establishment was one of a small number of prisons delivering the SCP and the waiting list for this programme was long. Waiting lists for the other two offender behaviour programmes were managed adequately and ISPs were appropriately prioritised for places. A pack aimed at increasing victim awareness had been developed which could be completed by the prisoner during their time in-cell. However, it was not used often and was not suitable for those with literacy problems.
- 4.65 Programme staff made efforts to prepare prisoners for attendance on a programme and drop-out rates were low. Attention was also given to managing prisoners' individual diversity issues, enabling them to complete a programme – for example, by the use of a learning style questionnaire. Involvement in a performing arts project was also used to help those about to start a programme to develop self-confidence. Programme information packs were sent out to family or friends nominated by the prisoner to raise awareness of the work that the prisoner would be doing. Families were involved in post-programme reviews and links had been developed with offender supervisors, who chaired some of these meetings.

Recommendation

- 4.66 **Prisoners should be able to access a place on an accredited programme without a long delay.**

Good practice

- 4.67 *Programme information packs were sent out to family or friends nominated by the prisoner to raise awareness of the work the prisoner would be doing.*

Section 5: 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

-
- 5.1 All data around violence and safety should be collated and analysed to identify trends and direct action. A comprehensive policy should be introduced for the management and transfer of prisoners in the segregation unit and should include how problem or vulnerable behaviour and underlying causes will be investigated, how individual needs will be met and options for reintegration or transfer. (HP53)
 - 5.2 An action plan to address supply reduction and demand, including alcohol, should be implemented and should address the specific issue of diverted medication. Intelligence indicating a need for suspicion testing should be monitored and resourced. (HP54)
 - 5.3 Commissioning arrangements should be urgently reviewed to enable effective day-to-day management of all health services. The commissioner and the governor should hold regular partnership meetings to monitor health delivery and address shortcomings. (HP55)
 - 5.4 Attendance at activity should be monitored robustly and more prisoners should be engaged in purposeful activity. Recreational PE should not be scheduled during the working day. (HP56)
 - 5.5 The monitoring of the quality of learning and teaching should be fully implemented in numeracy and literacy. The progress and achievements of prisoners engaged in numeracy and literacy work should be monitored. (HP57)

Recommendation

To NOMS

-
- 5.6 Category D prisoners should not experience a delay in being transferred to an open prison. (4.29)

Recommendations

To the governor

Courts, escorts and transfers

-
- 5.7 Prisoners should be offered adequate comfort breaks and refreshments during journeys to and from the establishment. (1.4)
 - 5.8 Prisoners should be able to take all their property when transferred. (1.5)

Early days in custody

-
- 5.9 Prisoners should not have to wait for long periods in reception over lunchtime. (1.12)

- 5.10 Prisoners should be fully supported during their early days at the establishment, and on their first night should have access to showers and suitable clothing that fits and their cells should be fully prepared with bedding and basic toiletries. (1.13)

Bullying and violence reduction

- 5.11 The new anti-bullying intervention should be fully implemented, including the setting of behavioural targets. (1.24)

Self-harm and suicide prevention

- 5.12 An adequate range of information about incidents of self-harm should be collated and analysed by the safer custody meeting to identify improvements to practice. (1.32)
- 5.13 Assessment, care in custody and teamwork (ACCT) reviews should be attended by all staff with a knowledge of the prisoner and who can contribute to his care. (1.33)

Safeguarding (protection of adults at risk)

- 5.14 The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (1.39)

Security

- 5.15 The security analysts should record relevant events on the violent and sexual offenders register (ViSOR) system. (1.48)

Incentives and earned privileges

- 5.16 Prisoners on the basic level of the incentives and earned privileges (IEP) scheme should be set meaningful individualised targets. (1.54)

The use of force

- 5.17 All planned uses of force should be video-recorded and examined to improve performance where necessary. (1.63)
- 5.18 All use of force records should be accompanied by an F213 (injury report form) and completed in full and on time. (1.64)

Segregation

- 5.19 Prisoners should have a minimum of one hour of exercise in the open air while undergoing segregation. (1.71)

Substance misuse

- 5.20 Clinical and psychosocial substance misuse services should integrate further and undertake joint care plans and reviews. (1.76)

Residential units

- 5.21 Single cells should not be used to accommodate two prisoners. (2.10)
- 5.22 Cells should be equipped with sufficient serviceable furniture and adequate toilet screens, and cell cleaning materials should be freely available. All shower areas should be refurbished. (2.11)
- 5.23 Showers should be refurbished where necessary and provide adequate privacy. (2.12)
- 5.24 The procedures for issuing prison clothing should be improved so that all prisoners can obtain sufficient clothing, of good quality and in the right size. (2.13)
- 5.25 Night workers should be able to sleep without disruption. (2.14)
- 5.26 Additional telephones should be provided and access to telephones increased. (2.15)

Staff-prisoner relationships

- 5.27 The personal officer scheme should be effective in providing regular support and motivation to prisoners. (2.23)

Equality and diversity

- 5.28 Discrimination incident report forms should be investigated by managers who are demonstrably impartial, in order to inspire user confidence in the process. Responses should be full and timely. (2.30)
- 5.29 There should be a regular consultation forum with black and minority ethnic prisoners to ensure that the reasons for their negative perceptions are understood and addressed. (2.42)
- 5.30 Multidisciplinary care plans should be developed for prisoners with social care needs and made available to wing staff. (2.43)

Faith and religious activity

- 5.31 Prisoners should not be required to apply to attend Christian worship and attendance should not be capped. (2.52)

Complaints

- 5.32 Complaints should be responded to appropriately and systems developed to ensure that prisoners receive a prompt and full response. (2.57)

Legal rights

- 5.33 Legal visits should take place out of the hearing of others. (2.61)
- 5.34 Legal services should be provided. (2.62)

Health services

- 5.35 Consultations should always be conducted with respect for privacy and dignity. (2.76)
- 5.36 Prisoners should be able to access a suitable confidential health complaints system. (2.77)
- 5.37 Safe medicines management should be implemented in line with legislation and recognised professional practice and clinical guidance. (2.95)
- 5.38 Prescribing reviews should be implemented to ensure that medicines are used therapeutically and safely within the prison environment. (2.96)
- 5.39 An up-to-date health needs assessment, including mental health, learning disability and personality disorder, should inform mental health provision. (2.112)

Catering

- 5.40 The evening meal should not be served before 5pm. (2.118)
- 5.41 Prisoners involved in the preparation of food should be able to obtain nationally recognised qualifications. (2.119)

Purchases

- 5.42 Prisoners should be able to place a shop order on the day after reception. (2.124)

Time out of cell

- 5.43 All prisoners should have association and one hour of exercise every day. (3.5)

Learning and skills and work activities

- 5.44 The quality of teaching, training and learning should be monitored in all areas and staff should receive detailed feedback on the quality of their work. (3.10)
- 5.45 The length of time that prisoners wait for allocation to activities should be reduced. (3.13)
- 5.46 All prisoners should receive sufficient initial careers information and guidance, and employment and training goals should be recorded on their individual learning plans. (3.18)
- 5.47 The prison should increase the learning and accreditation opportunities available through to level 2 and above and ensure that more prisoners achieve qualifications across learning and skills. (3.23)
- 5.48 Punctuality should be improved, to minimise disruption to training, education and work and ensure that working time is fully productive. (3.24)

Physical education and healthy living

- 5.49 PE facilities should be open and available to prisoners before morning movement and during lunchtimes, to reflect access to leisure facilities in the community. (3.33)
- 5.50 More accredited courses should be provided to meet the needs of short-term prisoners. (3.34)

Strategic management of resettlement

- 5.51 A comprehensive and up-to-date reducing reoffending strategy and action plan should be developed, based on a robust needs analysis of the complex population, and clearly direct developments across offender management, public protection and resettlement work. (4.6)
- 5.52 The waiting list for Community Links Advice and Support Services (CLASS) should be cleared, to avoid prisoners experiencing delays in receiving support. (4.7)

Offender management and planning

- 5.53 Integration between offender management, public protection and resettlement teams should be improved, to ensure effective information exchange. (4.17)
- 5.54 The quality of the assessment of risk of harm to others completed by offender supervisors should be improved, so that a comprehensive plan results in all relevant cases. (4.18)
- 5.55 Minimum contact between the offender supervisor and prisoner should be clearly defined, with the frequency based on the risk of harm to others. (4.19)
- 5.56 Home detention curfew assessments should be completed on time, to enable prisoners to be released on their earliest eligible date. (4.20)

Reintegration planning

- 5.57 All prisoners should have a resettlement discharge interview well in advance of their release date. (4.37)
- 5.58 The prison should further develop its use of release on temporary licence. (4.42)
- 5.59 The drug strategy document should contain a detailed action plan, informed by the needs analysis, which includes specific outcome-focused targets and clear accountabilities for drug supply and demand reduction. (4.50)
- 5.60 Alcoholics Anonymous and Narcotics Anonymous fellowship groups should be made available to prisoners. (4.51)
- 5.61 Visitors should be able to purchase snacks during each visits session. (4.58)
- 5.62 Prisoners should be able to return to their wing if a visitor does not arrive. (4.59)
- 5.63 Parenting courses should be provided. (4.60)

- 5.64 Prisoners should be able to access a place on an accredited programme without a long delay. (4.66)

Housekeeping points

Early days in custody

- 5.65 Key information about the early days in custody should be available in languages other than English. (1.14)

Self-harm and suicide prevention

- 5.66 The suicide prevention strategy should reflect specific local concerns. (1.34)

Security

- 5.67 Monthly security objectives should be communicated to all staff. (1.49)
- 5.68 Suspicion testing should be managed more effectively to ensure that tests are undertaken within the required timeframe and that any slippage is monitored. (1.50)

Incentives and earned privileges

- 5.69 The quality of prisoner case note IEP entries should be standardised and closely monitored by managers. (1.55)

The use of force

- 5.70 Actions identified at use of force meetings should be followed up and outcomes recorded. (1.65)

Substance misuse

- 5.71 Subutex and other medications requiring long periods of observation should be administered in locations that afford respect and privacy. (1.77)

Residential units

- 5.72 Cell call bells should be answered promptly. (2.16)

Equality and diversity

- 5.73 Simplified systematic monitoring and analysing of the race equality template (SMART) data should be published to prisoners. (2.31)
- 5.74 The role of prisoner representatives at the equality meeting should be clarified and promoted. (2.44)

- 5.75 Prisoners should have access to independent immigration advice. (2.45)

Faith and religious activity

- 5.76 The multi-faith room should be thoroughly and regularly cleaned. (2.53)

Health services

- 5.77 Resuscitation kit checklists should be maintained. (2.78)
- 5.78 Reception screenings should be conducted by a registered health professional. (2.86)
- 5.79 All prisoners should be given a follow-up health assessment within 72 hours of arrival, to ensure that health problems are identified at an early stage. (2.87)
- 5.80 Provision of prison primary care services should be equivalent to those in the community. (2.88)
- 5.81 The controlled drugs cupboard should be fixed in compliance with Controlled Drugs (Supervision of, Management and Use) Regulations 2006. (2.97)
- 5.82 Out-of-hours medicines should be stored separately from the controlled drugs. (2.98)
- 5.83 There should be suitable arrangements for washing and cleaning instruments. (2.103)

Purchases

- 5.84 Prisoners should not be charged an administration fee for catalogue orders. (2.125)

Learning and skills and work activities

- 5.85 The plumbing workshop should be better organised to maximise space for training and outreach education support. (3.19)

Offender management and planning

- 5.86 Sentence plan reviews should be undertaken in all cases when necessary and fully involve all relevant staff. (4.21)
- 5.87 Minutes of the interdepartmental risk management team should be shared with the offender supervisor. (4.24)
- 5.88 All parole reports should be completed on time. (4.25)
- 5.89 The quality of categorisation review paperwork should be improved, with the decision for refusal fully explained to the prisoner. An appeal form should be issued automatically when relevant. (4.30)
- 5.90 More indeterminate-sentenced prisoner family days should be provided, to accommodate the growing population. (4.34)

Reintegration planning

- 5.91 Indeterminate-sentenced prisoners attending family days should not be required to wear tabards. (4.61)
- 5.92 The soft furnishings in the visits hall should be replaced where necessary. (4.62)
- 5.93 A copy of the visits policy, data from the recent visitors survey and discrimination incident report forms should be available in the visitors centre. (4.63)

Examples of good practice

Equality and diversity

- 5.94 Equality monitoring had been extended to cover religion and disability. (2.46)

Offender management and planning

- 5.95 Sessions were held with prisoners to promote awareness about the category D assessment process and give constructive advice on how to improve their chances of being successful. (4.31)

Reintegration planning

- 5.96 Programme information packs were sent out to family or friends nominated by the prisoner to raise awareness of the work the prisoner would be doing. (4.67)

Appendix I: Inspection team

| | |
|-------------------|-----------------|
| Nick Hardwick | Chief Inspector |
| Alison Perry | Team leader |
| Michael Calvert | Inspector |
| Karen Dillon | Inspector |
| Sandra Fieldhouse | Inspector |
| Jeanette Hall | Inspector |
| Andrew Rooke | Inspector |
| Paul Rowlands | Inspector |
| Alice Reid | Researcher |
| Chloe Flint | Researcher |

Specialist inspectors

| | |
|-----------------|---------------------------|
| Paul Roberts | Drugs inspector |
| Nicola Rabjohns | Health services inspector |
| Helen Jackson | Pharmacist |
| Karen Adriaanse | Ofsted inspector |
| Nigel Bragg | Ofsted inspector |
| Bob Cowdrey | 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-year-olds | 21 and over | % |
|-----------------------|-----------------|--------------|------------|
| Sentenced | 0 | 1,008 | 93 |
| Recall | 0 | 75 | 6.9 |
| Convicted unsentenced | 0 | 1 | 0.1 |
| Remand | 0 | 0 | 0 |
| Civil prisoners | 0 | 0 | 0 |
| Detainees | 0 | 0 | 0 |
| Total | 0 | 1,084 | 100 |

| Sentence | 18–20-year-olds | 21 and over | % |
|---------------------------------|-----------------|--------------|------------|
| Unsentenced | 0 | 0 | 0 |
| Less than 6 months | 0 | 31 | 2.9 |
| 6 months to less than 12 months | 0 | 50 | 4.6 |
| 12 months to less than 2 years | 0 | 127 | 11.7 |
| 2 years to less than 4 years | 0 | 121 | 11.2 |
| 4 years to less than 10 years | 0 | 150 | 13.8 |
| 10 years and over (not life) | 0 | 346 | 31.9 |
| ISPP | 0 | 47 | 4.3 |
| Life | 0 | 212 | 19.6 |
| Total | 0 | 1,084 | 100 |

| Age | Number of prisoners | % |
|-------------------------------|---------------------|------------|
| Please state minimum age - 21 | - | - |
| Under 21 years | 0 | 0 |
| 21 years to 29 years | 512 | 47.2 |
| 30 years to 39 years | 342 | 31.5 |
| 40 years to 49 years | 163 | 15 |
| 50 years to 59 years | 49 | 4.5 |
| 60 years to 69 years | 14 | 1.3 |
| 70 plus years | 4 | 0.4 |
| Please state maximum age - 84 | - | - |
| Total | 1,084 | 100 |

| Nationality | 18–20-year-olds | 21 and over | % |
|-------------------|-----------------|--------------|------------|
| British | 0 | 945 | 87.2 |
| Foreign nationals | 0 | 119 | 11 |
| Not stated | 0 | 20 | 1.8 |
| | 0 | 1,084 | 100 |

| Security category | 18–20-year-olds | 21 and over | % |
|-------------------|-----------------|-------------|------|
| Unsentenced | 0 | 5 | 0.5 |
| Unclassified | 0 | 1 | 0.1 |
| Category B | 0 | 10 | 0.9 |
| Category C | 0 | 1000 | 92.2 |

| | | | |
|--------------|----------|-------------|------------|
| Category D | 0 | 66 | 6.1 |
| Other | 0 | 2 | 0.2 |
| Total | 0 | 1084 | 100 |

| Ethnicity | 18–20-year-olds | 21 and over | % |
|--------------------------------------|------------------------|--------------------|------------|
| <i>White</i> | | | |
| British | 0 | 757 | 69.8 |
| Irish | 0 | 6 | 0.6 |
| Other white | 0 | 45 | 4.1 |
| | | | |
| <i>Mixed</i> | | | |
| White and black Caribbean | 0 | 35 | 3.2 |
| White and black African | 0 | 3 | 0.3 |
| White and Asian | 0 | 1 | 0.1 |
| Other mixed | 0 | 5 | 0.5 |
| | | | |
| <i>Asian or Asian British</i> | | | |
| Indian | 0 | 30 | 2.8 |
| Pakistani | 0 | 16 | 1.5 |
| Bangladeshi | 0 | 2 | 0.2 |
| Other Asian | 0 | 30 | 2.8 |
| | | | |
| <i>Black or black British</i> | | | |
| Caribbean | 0 | 88 | 8.1 |
| African | 0 | 19 | 1.8 |
| Other black | 0 | 28 | 2.6 |
| | | | |
| <i>Chinese or other ethnic group</i> | | | |
| Chinese | 0 | 2 | 0.2 |
| Other ethnic group | 0 | 5 | 0.5 |
| | | | |
| Not stated (code missing) | 0 | 11 | 1 |
| Prefer not to say | 0 | 1 | 0.1 |
| Total | 0 | 1,084 | 100 |

| Religion | 18–20-year-olds | 21 and over | % |
|-------------------------------|------------------------|--------------------|------------|
| Baptist | 0 | 0 | 0 |
| Church of England | 0 | 286 | 26.4 |
| Roman Catholic | 0 | 186 | 17.2 |
| Other Christian denominations | 0 | 110 | 10.1 |
| Muslim | 0 | 139 | 12.8 |
| Sikh | 0 | 15 | 1.4 |
| Hindu | 0 | 6 | 0.6 |
| Buddhist | 0 | 18 | 1.7 |
| Jewish | 0 | 1 | 0.1 |
| Other | 0 | 8 | 0.8 |
| No religion | 0 | 308 | 28.4 |
| Not stated | 0 | 7 | 0.7 |
| Total | 0 | 1084 | 100 |

Sentenced prisoners only

| Length of stay | 18–20-year-olds | | 21 and over | |
|----------------------|-----------------|-------------|--------------|------------|
| | Number | % | Number | % |
| Less than 1 month | 0 | 0.0% | 132 | 12.2 |
| 1 month to 3 months | 0 | 0.0% | 263 | 24.3 |
| 3 months to 6 months | 0 | 0.0% | 240 | 22.1 |
| 6 months to 1 year | 0 | 0.0% | 237 | 21.9 |
| 1 year to 2 years | 0 | 0.0% | 160 | 14.8 |
| 2 years to 4 years | 0 | 0.0% | 44 | 4.1 |
| 4 years or more | 0 | 0.0% | 4 | 0.4 |
| Total | 0 | 0.0% | 1,084 | 100 |

Appendix III: Summary of prisoner questionnaires and interviews

Prisoner survey methodology

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

Choosing the sample size

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

At the time of the survey on 6 February 2012, the prisoner population at HMP Ranby was 1,082. The sample size was 216. Overall, this represented 20% of the prisoner population.

Selecting the sample

Respondents were randomly selected from a P-Nomis prisoner population printout using a stratified systematic sampling method. This basically means that 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. Eight respondents from the main population, and three respondents from the CSC and MCBS population, refused to complete a questionnaire.

Interviews were carried out with any respondents with literacy difficulties. No 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, 173 respondents completed and returned their questionnaires. This represented 16% of the prison population. The response rate was 80%. In addition to the eight respondents who refused to complete a questionnaire, 20 questionnaires were not returned and 15 were returned blank.

Comparisons

The following details the results from the survey. Data from each establishment were 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 2012 against comparator figures for all prisoners surveyed in category C trainer prisons. This comparator is based on all responses from prisoner surveys carried out in 36 category C trainer prisons since April 2007.
- The current survey responses in 2012 against the responses of prisoners surveyed at HMP Ranby in 2007.
- A comparison within the 2012 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2012 survey between the responses of Muslim prisoners and non-Muslim prisoners.
- A comparison within the 2012 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.

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

It should be noted that, in order for statistical comparisons to be made between the most recent survey data and 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.

Summary of prisoner survey results

Section 1: About you

| | | | |
|-------------|--|-----------|--|
| Q1.2 | How old are you? | | |
| | <i>Under 21</i> | | 0 (0%) |
| | <i>21 - 29</i> | | 86 (50%) |
| | <i>30 - 39</i> | | 58 (34%) |
| | <i>40 - 49</i> | | 19 (11%) |
| | <i>50 - 59</i> | | 5 (3%) |
| | <i>60 - 69</i> | | 3 (2%) |
| | <i>70 and over</i> | | 1 (1%) |
| Q1.3 | Are you sentenced? | | |
| | <i>Yes</i> | | 156 (91%) |
| | <i>Yes - on recall</i> | | 16 (9%) |
| | <i>No - awaiting trial</i> | | 0 (0%) |
| | <i>No - awaiting sentence</i> | | 0 (0%) |
| | <i>No - awaiting deportation</i> | | 0 (0%) |
| Q1.4 | How long is your sentence? | | |
| | <i>Not sentenced</i> | | 0 (0%) |
| | <i>Less than 6 months</i> | | 8 (5%) |
| | <i>6 months to less than 1 year</i> | | 16 (9%) |
| | <i>1 year to less than 2 years</i> | | 22 (13%) |
| | <i>2 years to less than 4 years</i> | | 30 (18%) |
| | <i>4 years to less than 10 years</i> | | 54 (32%) |
| | <i>10 years or more</i> | | 4 (2%) |
| | <i>IPP (indeterminate sentence for public protection)</i> | | 29 (17%) |
| | <i>Life</i> | | 8 (5%) |
| Q1.5 | Are you a foreign national? (i.e. do not have UK citizenship) | | |
| | <i>Yes</i> | | 15 (9%) |
| | <i>No</i> | | 157 (91%) |
| Q1.6 | Do you understand spoken English? | | |
| | <i>Yes</i> | | 168 (98%) |
| | <i>No</i> | | 3 (2%) |
| Q1.7 | Do you understand written English? | | |
| | <i>Yes</i> | | 167 (98%) |
| | <i>No</i> | | 4 (2%) |
| Q1.8 | What is your ethnic origin? | | |
| | <i>White - British (English/Welsh/Scottish/Northern Irish)</i> | 123 (72%) | <i>Asian or Asian British - Chinese</i> 1 (1%) |
| | <i>White - Irish</i> | 1 (1%) | <i>Asian or Asian British - other</i> 1 (1%) |
| | <i>White - other</i> | 8 (5%) | <i>Mixed race - white and black Caribbean</i> 6 (4%) |
| | <i>Black or black British - Caribbean</i> | 8 (5%) | <i>Mixed race - white and black African</i> 3 (2%) |
| | <i>Black or black British - African</i> | 2 (1%) | <i>Mixed race - white and Asian</i> 2 (1%) |
| | <i>Black or black British - other</i> | 1 (1%) | <i>Mixed race - other</i> 2 (1%) |
| | <i>Asian or Asian British - Indian</i> | 2 (1%) | <i>Arab</i> 2 (1%) |

Asian or Asian British - Pakistani 5 (3%) Other ethnic group 0 (0%)
 Asian or Asian British - Bangladeshi 4 (2%)

- Q1.9 Do you consider yourself to be Gypsy/Romany/Traveller?**
 Yes 7 (4%)
 No 158 (96%)
- Q1.10 What is your religion?**
 None 55 (32%) Hindu 0 (0%)
 Church of England 49 (29%) Jewish 0 (0%)
 Catholic 34 (20%) Muslim 24 (14%)
 Protestant 0 (0%) Sikh 0 (0%)
 Other Christian denomination 4 (2%) Other 2 (1%)
 Buddhist 2 (1%)
- Q1.11 How would you describe your sexual orientation?**
 Heterosexual/straight 166 (99%)
 Homosexual/gay 2 (1%)
 Bisexual 0 (0%)
- Q1.12 Do you consider yourself to have a disability (i.e. do you need help with any long term physical, mental or learning needs)?**
 Yes 31 (18%)
 No 140 (82%)
- Q1.13 Are you a veteran (ex-armed services)?**
 Yes 8 (5%)
 No 162 (95%)
- Q1.14 Is this your first time in prison?**
 Yes 42 (25%)
 No 126 (75%)
- Q1.15 Do you have children under the age of 18?**
 Yes 107 (63%)
 No 64 (37%)

Section 2: Courts, transfers and escorts

- Q2.1 On your most recent journey here, how long did you spend in the van?**
 Less than 2 hours 100 (58%)
 2 hours or longer 64 (37%)
 Don't remember 8 (5%)
- Q2.2 On your most recent journey here, were you offered anything to eat or drink?**
 My journey was less than two hours 100 (59%)
 Yes 40 (24%)
 No 25 (15%)
 Don't remember 5 (3%)
- Q2.3 On your most recent journey here, were you offered a toilet break?**
 My journey was less than two hours 100 (59%)
 Yes 3 (2%)
 No 62 (36%)

| | | |
|-------------|--|-----------|
| | <i>Don't remember</i> | 5 (3%) |
| Q2.4 | On your most recent journey here, was the van clean? | |
| | Yes | 107 (64%) |
| | No | 48 (29%) |
| | <i>Don't remember</i> | 12 (7%) |
| Q2.5 | On your most recent journey here, did you feel safe? | |
| | Yes | 143 (84%) |
| | No | 24 (14%) |
| | <i>Don't remember</i> | 4 (2%) |
| Q2.6 | On your most recent journey here, how were you treated by the escort staff? | |
| | <i>Very well</i> | 43 (25%) |
| | <i>Well</i> | 73 (42%) |
| | <i>Neither</i> | 40 (23%) |
| | <i>Badly</i> | 7 (4%) |
| | <i>Very badly</i> | 4 (2%) |
| | <i>Don't remember</i> | 5 (3%) |
| Q2.7 | Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.) | |
| | <i>Yes, someone told me</i> | 98 (57%) |
| | <i>Yes, I received written information</i> | 14 (8%) |
| | <i>No, I was not told anything</i> | 57 (33%) |
| | <i>Don't remember</i> | 2 (1%) |
| Q2.8 | When you first arrived here did your property arrive at the same time as you? | |
| | Yes | 156 (91%) |
| | No | 15 (9%) |
| | <i>Don't remember</i> | 1 (1%) |

Section 3: Reception, first night and induction

| | | |
|-------------|--|-----------|
| Q3.1 | How long were you in reception? | |
| | <i>Less than 2 hours</i> | 49 (29%) |
| | <i>2 hours or longer</i> | 112 (66%) |
| | <i>Don't remember</i> | 8 (5%) |
| Q3.2 | When you were searched, was this carried out in a respectful way? | |
| | Yes | 142 (84%) |
| | No | 21 (12%) |
| | <i>Don't remember</i> | 6 (4%) |
| Q3.3 | Overall, how were you treated in reception? | |
| | <i>Very well</i> | 40 (23%) |
| | <i>Well</i> | 77 (45%) |
| | <i>Neither</i> | 35 (20%) |
| | <i>Badly</i> | 13 (8%) |
| | <i>Very badly</i> | 6 (3%) |
| | <i>Don't remember</i> | 1 (1%) |

| | | | |
|--------------|---|-----------|--|
| Q3.4 | Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.) | | |
| | <i>Loss of property</i> | 22 (13%) | <i>Physical health</i> |
| | <i>Housing problems</i> | 23 (14%) | <i>Mental health</i> |
| | <i>Contacting employers</i> | 4 (2%) | <i>Needing protection from other prisoners</i> |
| | <i>Contacting family</i> | 43 (25%) | <i>Getting phone numbers</i> |
| | <i>Childcare</i> | 7 (4%) | <i>Other</i> |
| | <i>Money worries</i> | 24 (14%) | Did not have any problems |
| | <i>Feeling depressed or suicidal</i> | 22 (13%) | 64 (38%) |
| Q3.5 | Did you receive any help/support from staff in dealing with these problems when you first arrived here? | | |
| | <i>Yes</i> | 31 (19%) | |
| | <i>No</i> | 72 (43%) | |
| | Did not have any problems | 64 (38%) | |
| Q3.6 | When you first arrived here, were you offered any of the following? (Please tick all that apply to you.) | | |
| | <i>Tobacco</i> | 138 (81%) | |
| | <i>A shower</i> | 27 (16%) | |
| | <i>A free telephone call</i> | 44 (26%) | |
| | <i>Something to eat</i> | 107 (63%) | |
| | <i>PIN phone credit</i> | 111 (65%) | |
| | <i>Toiletries/basic items</i> | 43 (25%) | |
| | Did not receive anything | 9 (5%) | |
| Q3.7 | When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.) | | |
| | <i>Chaplain</i> | 69 (41%) | |
| | <i>Someone from health services</i> | 122 (73%) | |
| | <i>A Listener/Samaritans</i> | 49 (29%) | |
| | <i>Prison shop/canteen</i> | 35 (21%) | |
| | Did not have access to any of these | 28 (17%) | |
| Q3.8 | When you first arrived here, were you offered information on the following? (Please tick all that apply to you.) | | |
| | <i>What was going to happen to you</i> | 65 (41%) | |
| | <i>What support was available for people feeling depressed or suicidal</i> | 50 (31%) | |
| | <i>How to make routine requests (applications)</i> | 63 (39%) | |
| | <i>Your entitlement to visits</i> | 55 (34%) | |
| | <i>Health services</i> | 67 (42%) | |
| | <i>Chaplaincy</i> | 57 (36%) | |
| | Not offered any information | 55 (34%) | |
| Q3.9 | Did you feel safe on your first night here? | | |
| | <i>Yes</i> | 136 (80%) | |
| | <i>No</i> | 30 (18%) | |
| | <i>Don't remember</i> | 3 (2%) | |
| Q3.10 | How soon after you arrived here did you go on an induction course? | | |
| | Have not been on an induction course | 10 (6%) | |
| | <i>Within the first week</i> | 121 (71%) | |
| | <i>More than a week</i> | 36 (21%) | |
| | <i>Don't remember</i> | 4 (2%) | |

| | | |
|--------------|---|----------|
| Q3.11 | Did the induction course cover everything you needed to know about the prison? | |
| | <i>Have not been on an induction course</i> | 10 (6%) |
| | Yes..... | 91 (53%) |
| | No..... | 60 (35%) |
| | <i>Don't remember</i> | 10 (6%) |
| Q3.12 | How soon after you arrived here did you receive an education ('skills for life') assessment? | |
| | <i>Did not receive an assessment</i> | 30 (18%) |
| | <i>Within the first week</i> | 76 (45%) |
| | <i>More than a week</i> | 42 (25%) |
| | <i>Don't remember</i> | 21 (12%) |

Section 4: Legal rights and respectful custody

| | | | | | | | |
|-------------|--|------------------|-------------|-------------------|------------------|-----------------------|------------|
| Q4.1 | How easy is it to: | | | | | | |
| | | <i>Very easy</i> | <i>Easy</i> | <i>Neither</i> | <i>Difficult</i> | <i>Very difficult</i> | <i>N/A</i> |
| | <i>Communicate with your solicitor or legal representative?</i> | 18 (11%) | 53 (32%) | 19 (11%) | 37 (22%) | 24 (14%) | 17 (10%) |
| | <i>Attend legal visits?</i> | 24 (16%) | 67 (44%) | 18 (12%) | 10 (7%) | 5 (3%) | 29 (19%) |
| | <i>Get bail information?</i> | 6 (4%) | 10 (7%) | 23 (16%) | 15 (11%) | 17 (12%) | 70 (50%) |
| Q4.2 | Have staff here ever opened letters from your solicitor or your legal representative when you were not with them? | | | | | | |
| | <i>Not had any letters</i> | | | | | | 27 (16%) |
| | Yes..... | | | | | | 87 (52%) |
| | No..... | | | | | | 54 (32%) |
| Q4.3 | Can you get legal books in the library? | | | | | | |
| | Yes..... | | | | | | 71 (42%) |
| | No..... | | | | | | 12 (7%) |
| | <i>Don't know</i> | | | | | | 85 (51%) |
| Q4.4 | Please answer the following questions about the wing/unit you are currently living on: | | | | | | |
| | | <i>Yes</i> | <i>No</i> | <i>Don't know</i> | | | |
| | <i>Do you normally have enough clean, suitable clothes for the week?</i> | 91 (55%) | 73 (44%) | 2 (1%) | | | |
| | <i>Are you normally able to have a shower every day?</i> | 135 (80%) | 33 (20%) | 0 (0%) | | | |
| | <i>Do you normally receive clean sheets every week?</i> | 120 (72%) | 38 (23%) | 8 (5%) | | | |
| | <i>Do you normally get cell cleaning materials every week?</i> | 116 (69%) | 47 (28%) | 5 (3%) | | | |
| | <i>Is your cell call bell normally answered within five minutes?</i> | 44 (27%) | 99 (60%) | 23 (14%) | | | |
| | <i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i> | 109 (66%) | 54 (33%) | 1 (1%) | | | |
| | <i>If you need to, can you normally get your stored property?</i> | 28 (17%) | 97 (59%) | 40 (24%) | | | |

| | | |
|--------------|---|-----------|
| Q4.5 | What is the food like here? | |
| | Very good | 3 (2%) |
| | Good | 41 (24%) |
| | Neither | 42 (25%) |
| | Bad | 43 (25%) |
| | Very bad | 41 (24%) |
| Q4.6 | Does the shop/canteen sell a wide enough range of goods to meet your needs? | |
| | <i>Have not bought anything yet/don't know</i> | 6 (4%) |
| | Yes | 59 (35%) |
| | No | 102 (61%) |
| Q4.7 | Can you speak to a Listener at any time if you want to? | |
| | Yes | 89 (53%) |
| | No | 17 (10%) |
| | Don't know | 62 (37%) |
| Q4.8 | Are your religious beliefs respected? | |
| | Yes | 72 (43%) |
| | No | 18 (11%) |
| | Don't know/N/A | 78 (46%) |
| Q4.9 | Are you able to speak to a Chaplain of your faith in private if you want to? | |
| | Yes | 80 (48%) |
| | No | 11 (7%) |
| | Don't know/N/A | 77 (46%) |
| Q4.10 | How easy or difficult is it for you to attend religious services? | |
| | <i>I don't want to attend</i> | 38 (23%) |
| | Very easy | 36 (21%) |
| | Easy | 49 (29%) |
| | Neither | 7 (4%) |
| | Difficult | 4 (2%) |
| | Very difficult | 0 (0%) |
| | Don't know | 34 (20%) |

Section 5: Applications and complaints

| | | | | |
|-------------|---|-------------------------|----------|----------|
| Q5.1 | Is it easy to make an application? | | | |
| | Yes | 139 (83%) | | |
| | No | 23 (14%) | | |
| | Don't know | 5 (3%) | | |
| Q5.2 | Please answer the following questions about applications: | | | |
| | <i>(If you have not made an application please tick the 'not made one' option.)</i> | | | |
| | | Not made one | | |
| | | Yes | | |
| | | No | | |
| | Are <i>applications</i> dealt with fairly? | 6 (4%) | 89 (55%) | 66 (41%) |
| | Are <i>applications</i> dealt with quickly (within seven days)? | 6 (4%) | 71 (46%) | 78 (50%) |
| Q5.3 | Is it easy to make a complaint? | | | |
| | Yes | 112 (67%) | | |
| | No | 29 (17%) | | |
| | Don't know | 25 (15%) | | |

| | | | | |
|-------------|---|-------------------------|------------|-----------|
| Q5.4 | Please answer the following questions about complaints: (If you have not made a complaint please tick the 'not made one' option.) | Not made one | Yes | No |
| | Are complaints dealt with fairly? | 48 (30%) | 40 (25%) | 72 (45%) |
| | Are complaints dealt with quickly (within seven days)? | 48 (30%) | 47 (30%) | 63 (40%) |
| Q5.5 | Have you ever been prevented from making a complaint when you wanted to? | | | |
| | Yes | | 31 (20%) | |
| | No | | 125 (80%) | |
| Q5.6 | How easy or difficult is it for you to see the Independent Monitoring Board (IMB)? | | | |
| | <i>Don't know who they are</i> | | 39 (24%) | |
| | Very easy | | 11 (7%) | |
| | Easy | | 34 (21%) | |
| | Neither | | 35 (22%) | |
| | Difficult | | 30 (19%) | |
| | Very difficult | | 11 (7%) | |

Section 6: Incentive and earned privileges scheme

| | | | | |
|-------------|---|--|-----------|--|
| Q6.1 | Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels.) | | | |
| | <i>Don't know what the IEP scheme is</i> | | 7 (4%) | |
| | Yes | | 81 (48%) | |
| | No | | 67 (40%) | |
| | <i>Don't know</i> | | 13 (8%) | |
| Q6.2 | Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels.) | | | |
| | <i>Don't know what the IEP scheme is</i> | | 7 (4%) | |
| | Yes | | 66 (40%) | |
| | No | | 80 (48%) | |
| | <i>Don't know</i> | | 12 (7%) | |
| Q6.3 | In the last six months have any members of staff physically restrained you (C&R)? | | | |
| | Yes | | 9 (5%) | |
| | No | | 158 (95%) | |
| Q6.4 | If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff? | | | |
| | <i>I have not been to segregation in the last 6 months</i> | | 137 (84%) | |
| | Very well | | 4 (2%) | |
| | Well | | 7 (4%) | |
| | Neither | | 6 (4%) | |
| | Badly | | 3 (2%) | |
| | Very badly | | 7 (4%) | |

Section 7: Relationships with staff

| | | | |
|-------------|--|-----------|--|
| Q7.1 | Do most staff treat you with respect? | | |
| | Yes | 127 (77%) | |
| | No | 39 (23%) | |

| | | |
|-------------|--|-----------|
| Q7.2 | Is there a member of staff you can turn to for help if you have a problem? | |
| | Yes | 122 (74%) |
| | No | 42 (26%) |
| Q7.3 | Has a member of staff checked on you personally in the last week to see how you are getting on? | |
| | Yes | 35 (21%) |
| | No | 132 (79%) |
| Q7.4 | How often do staff normally speak to you during association? | |
| | Do not go on association | 6 (4%) |
| | Never | 45 (27%) |
| | Rarely | 45 (27%) |
| | Some of the time | 43 (26%) |
| | Most of the time | 18 (11%) |
| | All of the time | 9 (5%) |
| Q7.5 | When did you first meet your personal (named) officer? | |
| | I have not met him/her | 78 (47%) |
| | In the first week | 32 (19%) |
| | More than a week | 28 (17%) |
| | Don't remember | 29 (17%) |
| Q7.6 | How helpful is your personal (named) officer? | |
| | Do not have a personal officer/I have not met him/her | 78 (49%) |
| | Very helpful | 23 (15%) |
| | Helpful | 26 (16%) |
| | Neither | 15 (9%) |
| | Not very helpful | 8 (5%) |
| | Not at all helpful | 8 (5%) |

Section 8: Safety

| | | |
|-------------|--|-----------|
| Q8.1 | Have you ever felt unsafe here? | |
| | Yes | 48 (29%) |
| | No | 119 (71%) |
| Q8.2 | Do you feel unsafe now? | |
| | Yes | 21 (13%) |
| | No | 143 (87%) |
| Q8.3 | In which areas have you felt unsafe? (Please tick all that apply to you.) | |
| | Never felt unsafe | 119 (73%) |
| | Everywhere | 11 (7%) |
| | Segregation unit | 4 (2%) |
| | Association areas | 16 (10%) |
| | Reception area | 1 (1%) |
| | At the gym | 7 (4%) |
| | In an exercise yard | 8 (5%) |
| | At work | 6 (4%) |
| | During movement | 19 (12%) |
| | At education | 2 (1%) |
| | At mealtimes | 4 (2%) |
| | At health services | 7 (4%) |
| | Visits area | 1 (1%) |
| | In wing showers | 15 (9%) |
| | In gym showers | 4 (2%) |
| | In corridors/stairwells | 1 (1%) |
| | On your landing/wing | 11 (7%) |
| | In your cell | 7 (4%) |
| | At religious services | 2 (1%) |

| | | |
|-------------|--|-----------|
| Q8.4 | Have you been victimised by other prisoners here? | |
| | Yes | 38 (23%) |
| | No | 130 (77%) |
| Q8.5 | 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> | 16 (10%) |
| | <i>Physical abuse (being hit, kicked or assaulted)</i> | 10 (6%) |
| | <i>Sexual abuse</i> | 1 (1%) |
| | <i>Feeling threatened or intimidated</i> | 21 (13%) |
| | <i>Having your canteen/property taken</i> | 8 (5%) |
| | <i>Medication</i> | 6 (4%) |
| | <i>Debt</i> | 6 (4%) |
| | <i>Drugs</i> | 3 (2%) |
| | <i>Your race or ethnic origin</i> | 6 (4%) |
| | <i>Your religion/religious beliefs</i> | 4 (2%) |
| | <i>Your nationality</i> | 6 (4%) |
| | <i>You are from a different part of the country than others</i> | 8 (5%) |
| | <i>You are from a traveller community</i> | 0 (0%) |
| | <i>Your sexual orientation</i> | 0 (0%) |
| | <i>Your age</i> | 2 (1%) |
| | <i>You have a disability</i> | 2 (1%) |
| | <i>You were new here</i> | 7 (4%) |
| | <i>Your offence/crime</i> | 5 (3%) |
| | <i>Gang related issues</i> | 8 (5%) |
| Q8.6 | Have you been victimised by staff here? | |
| | Yes | 45 (27%) |
| | No | 120 (73%) |
| Q8.7 | 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> | 14 (9%) |
| | <i>Physical abuse (being hit, kicked or assaulted)</i> | 4 (2%) |
| | <i>Sexual abuse</i> | 0 (0%) |
| | <i>Feeling threatened or intimidated</i> | 12 (7%) |
| | <i>Medication</i> | 7 (4%) |
| | <i>Debt</i> | 2 (1%) |
| | <i>Drugs</i> | 4 (2%) |
| | <i>Your race or ethnic origin</i> | 8 (5%) |
| | <i>Your religion/religious beliefs</i> | 8 (5%) |
| | <i>Your nationality</i> | 5 (3%) |
| | <i>You are from a different part of the country than others</i> | 6 (4%) |
| | <i>You are from a traveller community</i> | 1 (1%) |
| | <i>Your sexual orientation</i> | 1 (1%) |
| | <i>Your age</i> | 1 (1%) |
| | <i>You have a disability</i> | 2 (1%) |
| | <i>You were new here</i> | 5 (3%) |
| | <i>Your offence/crime</i> | 7 (4%) |
| | <i>Gang related issues</i> | 3 (2%) |
| Q8.8 | If you have been victimised by prisoners or staff did you report it? | |
| | Not been victimised | 110 (72%) |
| | Yes | 18 (12%) |
| | No | 25 (16%) |

Section 9: Health services

| | | | | | | | |
|-------------|---|-------------------|------------------|-------------|----------------|------------------|-----------------------|
| Q9.1 | 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 | 21 (13%) | 4 (2%) | 20 (12%) | 10 (6%) | 50 (30%) | 59 (36%) |
| | The nurse | 19 (12%) | 5 (3%) | 31 (19%) | 20 (13%) | 39 (25%) | 45 (28%) |
| | The dentist | 27 (17%) | 2 (1%) | 14 (9%) | 5 (3%) | 33 (21%) | 79 (49%) |
| Q9.2 | What do you think of the quality of the health service from the following people? | | | | | | |
| | | <i>Not been</i> | <i>Very good</i> | <i>Good</i> | <i>Neither</i> | <i>Bad</i> | <i>Very bad</i> |
| | The doctor | 37 (23%) | 11 (7%) | 35 (21%) | 19 (12%) | 27 (16%) | 35 (21%) |
| | The nurse | 30 (19%) | 12 (8%) | 47 (30%) | 16 (10%) | 25 (16%) | 29 (18%) |
| | The dentist | 51 (32%) | 10 (6%) | 21 (13%) | 12 (8%) | 28 (18%) | 37 (23%) |
| Q9.3 | What do you think of the overall quality of the health services here? | | | | | | |
| | <i>Not been</i> | | | | | | 26 (16%) |
| | <i>Very good</i> | | | | | | 12 (7%) |
| | <i>Good</i> | | | | | | 31 (19%) |
| | <i>Neither</i> | | | | | | 13 (8%) |
| | <i>Bad</i> | | | | | | 39 (24%) |
| | <i>Very bad</i> | | | | | | 41 (25%) |
| Q9.4 | Are you currently taking medication? | | | | | | |
| | Yes | | | | | | 79 (48%) |
| | No | | | | | | 86 (52%) |
| Q9.5 | If you are taking medication, are you allowed to keep some/ all of it in your own cell? | | | | | | |
| | <i>Not taking medication</i> | | | | | | 86 (52%) |
| | <i>Yes, all my meds</i> | | | | | | 48 (29%) |
| | <i>Yes, some of my meds</i> | | | | | | 20 (12%) |
| | <i>No</i> | | | | | | 10 (6%) |
| Q9.6 | Do you have any emotional or mental health problems? | | | | | | |
| | Yes | | | | | | 47 (28%) |
| | No | | | | | | 119 (72%) |
| Q9.7 | Are you being helped/ supported by anyone in this prison? (E.g. a psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff) | | | | | | |
| | <i>Do not have any emotional or mental health problems</i> | | | | | | 119 (73%) |
| | Yes | | | | | | 14 (9%) |
| | No | | | | | | 29 (18%) |

Section 10: Drugs and alcohol

| | | | |
|--------------|--|--|-----------|
| Q10.1 | Did you have a problem with drugs when you came into this prison? | | |
| | Yes | | 48 (29%) |
| | No | | 118 (71%) |
| Q10.2 | Did you have a problem with alcohol when you came into this prison? | | |
| | Yes | | 34 (20%) |
| | No | | 132 (80%) |

| | | |
|--------------|---|-----------|
| Q10.3 | Is it easy or difficult to get illegal drugs in this prison? | |
| | <i>Very easy</i> | 33 (20%) |
| | <i>Easy</i> | 28 (17%) |
| | <i>Neither</i> | 14 (9%) |
| | <i>Difficult</i> | 8 (5%) |
| | <i>Very difficult</i> | 10 (6%) |
| | <i>Don't know</i> | 68 (42%) |
| Q10.4 | Is it easy or difficult to get alcohol in this prison? | |
| | <i>Very easy</i> | 21 (13%) |
| | <i>Easy</i> | 16 (10%) |
| | <i>Neither</i> | 19 (12%) |
| | <i>Difficult</i> | 14 (9%) |
| | <i>Very difficult</i> | 16 (10%) |
| | <i>Don't know</i> | 75 (47%) |
| Q10.5 | Have you developed a problem with illegal drugs since you have been in this prison? | |
| | <i>Yes</i> | 14 (9%) |
| | <i>No</i> | 150 (91%) |
| Q10.6 | Have you developed a problem with diverted medication since you have been in this prison? | |
| | <i>Yes</i> | 15 (9%) |
| | <i>No</i> | 149 (91%) |
| Q10.7 | Have you received any support or help (e.g. substance misuse teams) for your drug problem, while in this prison? | |
| | <i>Did not/do not have a drug problem</i> | 106 (66%) |
| | <i>Yes</i> | 34 (21%) |
| | <i>No</i> | 20 (13%) |
| Q10.8 | Have you received any support or help (e.g. substance misuse teams) for your alcohol problem, whilst in this prison? | |
| | <i>Did not/do not have an alcohol problem</i> | 132 (81%) |
| | <i>Yes</i> | 21 (13%) |
| | <i>No</i> | 10 (6%) |
| Q10.9 | Was the support or help you received, whilst in this prison, helpful? | |
| | <i>Did not have a problem/did not receive help</i> | 115 (74%) |
| | <i>Yes</i> | 33 (21%) |
| | <i>No</i> | 8 (5%) |

Section 11: Activities

| | | | | | | | |
|--------------|--|-------------------|------------------|-------------|----------------|-----------------------|-------------|
| Q11.1 | How easy or difficult is it to get into the following activities, in this prison? | | | | | | |
| | | <i>Don't know</i> | <i>Very Easy</i> | <i>Easy</i> | <i>Neither</i> | <i>Difficult</i> | |
| | | | | | | <i>Very difficult</i> | |
| | Prison job | 12 (7%) | 22 (13%) | 63 (38%) | 25 (15%) | 24 (15%) | 18 (11%) |
| | Vocational or skills training | 21 (14%) | 11 (7%) | 45 (29%) | 25 (16%) | 36 (23%) | 17 (11%) |
| | Education (including basic skills) | 20 (13%) | 13 (8%) | 57 (36%) | 33 (21%) | 16 (10%) | 18 (11%) |

| | | | | | | |
|--------------------------------|-------------|-----------|-------------|-------------|-------------|-------------|
| Offending behaviour programmes | 35 (22%) | 7 (4%) | 22 (14%) | 23 (14%) | 31 (19%) | 42 (26%) |
|--------------------------------|-------------|-----------|-------------|-------------|-------------|-------------|

Q11.2 Are you currently involved in the following? (Please tick all that apply to you.)

| | |
|---|-----------|
| Not involved in any of these | 22 (13%) |
| Prison job | 115 (71%) |
| Vocational or skills training | 34 (21%) |
| Education (including basic skills)..... | 42 (26%) |
| Offending behaviour programmes..... | 30 (18%) |

Q11.3 If you have been involved in any of the following, while in this prison, do you think they will help you on release?

| | Not been involved | Yes | No | Don't know |
|------------------------------------|--------------------------|------------|-----------|-------------------|
| Prison job | 19 (14%) | 50 (36%) | 63 (45%) | 7 (5%) |
| Vocational or skills training | 25 (21%) | 65 (54%) | 21 (18%) | 9 (8%) |
| Education (including basic skills) | 20 (17%) | 67 (56%) | 24 (20%) | 9 (8%) |
| Offending behaviour programmes | 26 (21%) | 52 (43%) | 33 (27%) | 10 (8%) |

Q11.4 How often do you usually go to the library?

| | |
|------------------------------------|----------|
| Don't want to go | 19 (12%) |
| <i>Never</i> | 23 (14%) |
| <i>Less than once a week</i> | 52 (32%) |
| <i>About once a week</i> | 61 (37%) |
| <i>More than once a week</i> | 9 (5%) |

Q11.5 Does the library have a wide enough range of materials to meet your needs?

| | |
|---------------------------|----------|
| Don't use it | 27 (17%) |
| <i>Yes</i> | 94 (58%) |
| <i>No</i> | 40 (25%) |

Q11.6 How many times do you usually go to the gym each week?

| | |
|-------------------------------|----------|
| Don't want to go | 35 (21%) |
| <i>0</i> | 24 (15%) |
| <i>1 to 2</i> | 42 (26%) |
| <i>3 to 5</i> | 49 (30%) |
| <i>More than 5</i> | 13 (8%) |

Q11.7 How many times do you usually go outside for exercise each week?

| | |
|-------------------------------|----------|
| Don't want to go | 26 (16%) |
| <i>0</i> | 31 (19%) |
| <i>1 to 2</i> | 64 (40%) |
| <i>3 to 5</i> | 22 (14%) |
| <i>More than 5</i> | 18 (11%) |

Q11.8 How many times do you usually have association each week?

| | |
|-------------------------------|-----------|
| Don't want to go | 2 (1%) |
| <i>0</i> | 2 (1%) |
| <i>1 to 2</i> | 2 (1%) |
| <i>3 to 5</i> | 51 (31%) |
| <i>More than 5</i> | 107 (65%) |

Q11.9 How many hours do you usually spend out of your cell on a weekday? (Please include hours at education, at work etc.)

| | |
|--------------------------------|----------|
| <i>Less than 2 hours</i> | 21 (13%) |
|--------------------------------|----------|

| | |
|------------------------------|----------|
| 2 to less than 4 hours..... | 22 (13%) |
| 4 to less than 6 hours..... | 29 (18%) |
| 6 to less than 8 hours..... | 32 (20%) |
| 8 to less than 10 hours..... | 24 (15%) |
| 10 hours or more..... | 25 (15%) |
| Don't know..... | 10 (6%) |

Section 12: Contact with family and friends

| | | |
|--------------|---|-----------|
| Q12.1 | Have staff supported you and helped you to maintain contact with your family/friends while in this prison? | |
| | Yes..... | 46 (29%) |
| | No..... | 114 (71%) |
| Q12.2 | Have you had any problems with sending or receiving mail (letters or parcels)? | |
| | Yes..... | 76 (47%) |
| | No..... | 87 (53%) |
| Q12.3 | Have you had any problems getting access to the telephones? | |
| | Yes..... | 87 (53%) |
| | No..... | 77 (47%) |
| Q12.4 | How easy or difficult is it for your family and friends to get here? | |
| | <i>I don't get visits</i> | 24 (15%) |
| | Very easy..... | 13 (8%) |
| | Easy..... | 31 (19%) |
| | Neither..... | 15 (9%) |
| | Difficult..... | 40 (25%) |
| | Very difficult..... | 39 (24%) |
| | Don't know..... | 1 (1%) |

Section 13: Preparation for release

| | | |
|--------------|---|-----------|
| Q13.1 | Do you have a named offender manager (home probation officer) in the probation service? | |
| | <i>Not sentenced</i> | 0 (0%) |
| | Yes..... | 125 (78%) |
| | No..... | 36 (22%) |
| Q13.2 | What type of contact have you had with your offender manager since being in prison? (Please tick all that apply to you.) | |
| | <i>Not sentenced/NA</i> | 36 (23%) |
| | No contact..... | 47 (29%) |
| | Letter..... | 46 (29%) |
| | Phone..... | 33 (21%) |
| | Visit..... | 38 (24%) |
| Q13.3 | Do you have a named offender supervisor in this prison? | |
| | Yes..... | 88 (55%) |
| | No..... | 71 (45%) |
| Q13.4 | Do you have a sentence plan? | |
| | <i>Not sentenced</i> | 0 (0%) |
| | Yes..... | 108 (66%) |

No 55 (34%)

Q13.5 How involved were you in the development of your sentence plan?
Do not have a sentence plan/not sentenced 55 (35%)
 Very involved 25 (16%)
 Involved 39 (25%)
 Neither 11 (7%)
 Not very involved 15 (9%)
 Not at all involved 14 (9%)

Q13.6 Who is working with you to achieve your sentence plan targets? (Please tick all that apply to you.)
Do not have a sentence plan/not sentenced 55 (34%)
 Nobody 46 (29%)
 Offender supervisor 38 (24%)
 Offender manager 29 (18%)
 Named/ personal officer 11 (7%)
 Staff from other departments 22 (14%)

Q13.7 Can you achieve any of your sentence plan targets in this prison?
Do not have a sentence plan/not sentenced 55 (34%)
 Yes 78 (48%)
 No 18 (11%)
 Don't know 12 (7%)

Q13.8 Are there plans for you to achieve any of your sentence plan targets in another prison?
Do not have a sentence plan/not sentenced 55 (34%)
 Yes 19 (12%)
 No 74 (45%)
 Don't know 15 (9%)

Q13.9 Are there plans for you to achieve any of your sentence plan targets in the community?
Do not have a sentence plan/not sentenced 55 (34%)
 Yes 36 (22%)
 No 46 (28%)
 Don't know 25 (15%)

Q13.10 Do you have a needs based custody plan?
 Yes 11 (7%)
 No 79 (49%)
 Don't know 72 (44%)

Q13.11 Do you feel that any member of staff has helped you to prepare for your release?
 Yes 34 (21%)
 No 126 (79%)

Q13.12 Do you know of anyone in this prison who can help you with the following on release? (Please tick all that apply to you.)

| | <i>Do not need help</i> | Yes | No |
|---------------|-------------------------|----------|----------|
| Employment | 29 (19%) | 59 (39%) | 65 (42%) |
| Accommodation | 27 (17%) | 65 (42%) | 63 (41%) |
| Benefits | 27 (18%) | 58 (38%) | 69 (45%) |
| Finances | 28 (19%) | 50 (33%) | 73 (48%) |
| Education | 30 (20%) | 63 (41%) | 60 (39%) |

| | | | |
|-------------------|----------|----------|----------|
| Drugs and alcohol | 38 (25%) | 68 (44%) | 48 (31%) |
|-------------------|----------|----------|----------|

Q13.13 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> | 0 (0%) |
| Yes | 92 (59%) |
| No | 64 (41%) |

Main comparator and comparator to last time



Prisoner survey responses HMP Ranby 2012

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

| | | HMP Ranby 2012 | Category C training prisons comparator | HMP Ranby 2012 | HMP Ranby 2007 |
|--|---|----------------|--|----------------|----------------|
| | 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 | | 173 | 5181 | 173 | 118 |
| SECTION 1: General information | | | | | |
| 1.2 | Are you under 21 years of age? | 0% | 2% | 0% | 1% |
| 1.3 | Are you sentenced? | 100% | 100% | 100% | 97% |
| 1.3 | Are you on recall? | 9% | 10% | 9% | 20% |
| 1.4 | Is your sentence less than 12 months? | 14% | 5% | 14% | 10% |
| 1.4 | Are you here under an indeterminate sentence for public protection (IPP prisoner)? | 17% | 9% | 17% | 0% |
| 1.5 | Are you a foreign national? | 9% | 11% | 9% | 10% |
| 1.6 | Do you understand spoken English? | 98% | 100% | 98% | |
| 1.7 | Do you understand written English? | 98% | 98% | 98% | |
| 1.8 | Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)? | 23% | 25% | 23% | 31% |
| 1.9 | Do you consider yourself to be Gypsy/Romany/Traveller? | 4% | 4% | 4% | |
| 1.1 | Are you Muslim? | 14% | 10% | 14% | 14% |
| 1.11 | Are you homosexual/gay or bisexual? | 1% | 3% | 1% | 4% |
| 1.12 | Do you consider yourself to have a disability? | 18% | 16% | 18% | 12% |
| 1.13 | Are you a veteran (ex-armed services)? | 5% | 16% | 5% | |
| 1.14 | Is this your first time in prison? | 25% | 35% | 25% | 27% |
| 1.15 | Do you have any children under the age of 18? | 63% | 51% | 63% | 54% |
| SECTION 2: Transfers and escorts | | | | | |
| On your most recent journey here: | | | | | |
| 2.1 | Did you spend more than 2 hours in the van? | 37% | 44% | 37% | 30% |
| For those who spent two or more hours in the escort van: | | | | | |
| 2.2 | Were you offered anything to eat or drink? | 57% | 65% | 57% | |
| 2.3 | Were you offered a toilet break? | 4% | 10% | 4% | |
| 2.4 | Was the van clean? | 64% | 85% | 64% | |
| 2.5 | Did you feel safe? | 84% | 82% | 84% | |
| 2.6 | Were you treated well/very well by the escort staff? | 67% | 66% | 67% | 62% |
| 2.7 | Before you arrived here were you told that you were coming here? | 57% | 75% | 57% | |
| 2.7 | Before you arrived here did you receive any written information about coming here? | 8% | 9% | 8% | |
| 2.8 | When you first arrived here did your property arrive at the same time as you? | 91% | 88% | 91% | 88% |

Main comparator and comparator to last time

Key to tables

| | | HMP Ranby 2012 | Category C training prisons comparator | HMP Ranby 2012 | HMP Ranby 2007 |
|--|--|----------------|--|----------------|----------------|
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| SECTION 3: Reception, first night and induction | | | | | |
| 3.1 | Were you in reception for less than 2 hours? | 29% | 51% | 29% | |
| 3.2 | When you were searched in reception, was this carried out in a respectful way? | 84% | 80% | 84% | 70% |
| 3.3 | Were you treated well/very well in reception? | 68% | 70% | 68% | 69% |
| | When you first arrived: | | | | |
| 3.4 | Did you have any problems? | 62% | 62% | 62% | 54% |
| 3.4 | Did you have any problems with loss of property? | 13% | 16% | 13% | 9% |
| 3.4 | Did you have any housing problems? | 14% | 16% | 14% | 14% |
| 3.4 | Did you have any problems contacting employers? | 2% | 4% | 2% | 4% |
| 3.4 | Did you have any problems contacting family? | 25% | 23% | 25% | 19% |
| 3.4 | Did you have any problems ensuring dependants were being looked after? | 4% | 4% | 4% | 5% |
| 3.4 | Did you have any money worries? | 14% | 15% | 14% | 13% |
| 3.4 | Did you have any problems with feeling depressed or suicidal? | 13% | 14% | 13% | 6% |
| 3.4 | Did you have any physical health problems? | 13% | 14% | 13% | |
| 3.4 | Did you have any mental health problems? | 15% | 9% | 15% | |
| 3.4 | Did you have any problems with needing protection from other prisoners? | 2% | 5% | 2% | 2% |
| 3.4 | Did you have problems accessing phone numbers? | 14% | 22% | 14% | |
| | For those with problems: | | | | |
| 3.5 | Did you receive any help/ support from staff in dealing with these problems? | 30% | 52% | 30% | |
| | When you first arrived here, were you offered any of the following: | | | | |
| 3.6 | Tobacco? | 81% | 84% | 81% | 86% |
| 3.6 | A shower? | 16% | 39% | 16% | 42% |
| 3.6 | A free telephone call? | 26% | 46% | 26% | 36% |
| 3.6 | Something to eat? | 63% | 75% | 63% | 80% |
| 3.6 | PIN phone credit? | 65% | 28% | 65% | |
| 3.6 | Toiletries/ basic items? | 25% | 37% | 25% | |

Key to tables

Main comparator and comparator to last time

| | | | | | |
|--|---|-------------------|---|-------------------|-------------------|
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| SECTION 3: Reception, first night and induction continued | | | | | |
| | When you first arrived here did you have access to the following people: | | | | |
| 3.7 | The chaplain or a religious leader? | 41% | 45% | 41% | |
| 3.7 | Someone from health services? | 73% | 77% | 73% | |
| 3.7 | A Listener/Samaritans? | 29% | 53% | 29% | |
| 3.7 | Prison shop/ canteen? | 21% | 17% | 21% | 20% |
| | When you first arrived here were you offered information about any of the following: | | | | |
| 3.8 | What was going to happen to you? | 41% | 53% | 41% | 66% |
| 3.8 | Support was available for people feeling depressed or suicidal? | 31% | 47% | 31% | 58% |
| 3.8 | How to make routine requests? | 39% | 43% | 39% | 38% |
| 3.8 | Your entitlement to visits? | 34% | 47% | 34% | 55% |
| 3.8 | Health services? | 42% | 59% | 42% | |
| 3.8 | The chaplaincy? | 36% | 51% | 36% | |
| 3.9 | Did you feel safe on your first night here? | 81% | 83% | 81% | 89% |
| 3.10 | Have you been on an induction course? | 94% | 93% | 94% | 90% |
| | For those who have been on an induction course: | | | | |
| 3.11 | Did the course cover everything you needed to know about the prison? | 57% | 66% | 57% | 69% |
| 3.12 | Did you receive an education (skills for life) assessment? | 82% | 91% | 82% | |
| SECTION 4: Legal rights and respectful custody | | | | | |
| | In terms of your legal rights, is it easy/very easy to: | | | | |
| 4.1 | Communicate with your solicitor or legal representative? | 42% | 49% | 42% | 48% |
| 4.1 | Attend legal visits? | 60% | 54% | 60% | 57% |
| 4.1 | Get bail information? | 11% | 16% | 11% | 23% |
| 4.2 | Have staff ever opened letters from your solicitor or legal representative when you were not with them? | 52% | 41% | 52% | 43% |
| 4.3 | Can you get legal books in the library? | 42% | 52% | 42% | |
| | For the wing/unit you are currently on: | | | | |
| 4.4 | Are you normally offered enough clean, suitable clothes for the week? | 55% | 62% | 55% | 58% |
| 4.4 | Are you normally able to have a shower every day? | 80% | 92% | 80% | 94% |
| 4.4 | Do you normally receive clean sheets every week? | 72% | 83% | 72% | 79% |
| 4.4 | Do you normally get cell cleaning materials every week? | 69% | 74% | 69% | 84% |
| 4.4 | Is your cell call bell normally answered within five minutes? | 27% | 43% | 27% | 39% |
| 4.4 | Is it normally quiet enough for you to be able to relax or sleep in your cell at night time? | 66% | 71% | 66% | 56% |
| 4.4 | Can you normally get your stored property if you need to? | 17% | 31% | 17% | 32% |
| 4.5 | Is the food in this prison good/very good? | 26% | 29% | 26% | 31% |
| 4.6 | Does the shop/canteen sell a wide enough range of goods to meet your needs? | 35% | 46% | 35% | 57% |
| 4.7 | Are you able to speak to a Listener at any time if you want to? | 53% | 60% | 53% | 56% |
| 4.8 | Are your religious beliefs are respected? | 43% | 55% | 43% | 59% |
| 4.9 | Are you able to speak to a religious leader of your faith in private if you want to? | 48% | 59% | 48% | 63% |
| 4.10 | Is it easy/very easy to attend religious services? | 51% | 58% | 51% | |

Main comparator and comparator to last time

Key to tables

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| SECTION 5: Applications and complaints | | | | | |
| 5.1 | Is it easy to make an application? | 83% | 96% | 83% | |
| | For those who have made an application: | | | | |
| 5.2 | Do you feel applications are dealt with fairly? | 57% | 62% | 57% | 54% |
| 5.2 | Do you feel applications are dealt with quickly (within seven days)? | 48% | 52% | 48% | 52% |
| 5.3 | Is it easy to make a complaint? | 67% | 70% | 67% | |
| | For those who have made a complaint: | | | | |
| 5.4 | Do you feel complaints are dealt with fairly? | 36% | 34% | 36% | 35% |
| 5.4 | Do you feel complaints are dealt with quickly (within seven days)? | 43% | 39% | 43% | 40% |
| 5.5 | Have you ever been prevented from making a complaint when you wanted to? | 20% | 13% | 20% | |
| 5.6 | Is it easy/very easy to see the Independent Monitoring Board? | 28% | 33% | 28% | 42% |
| SECTION 6: Incentive and earned privileges scheme | | | | | |
| 6.1 | Do you feel you have been treated fairly in your experience of the IEP scheme? | 48% | 56% | 48% | 53% |
| 6.2 | Do the different levels of the IEP scheme encourage you to change your behaviour? | 40% | 48% | 40% | |
| 6.3 | In the last six months have any members of staff physically restrained you (C&R)? | 5% | 5% | 5% | 5% |
| 6.4 | In the last six months, if you have spent a night in the segregation/care and separation unit, were you treated very well/well by staff? | 41% | 62% | 41% | |
| SECTION 7: Relationships with staff | | | | | |
| 7.1 | Do most staff, in this prison, treat you with respect? | 77% | 75% | 77% | 73% |
| 7.2 | Is there a member of staff in this prison that you can turn to for help if you have a problem? | 74% | 75% | 74% | 60% |
| 7.3 | Has a member of staff checked on you personally in the last week to see how you were getting on? | 21% | 46% | 21% | |
| 7.4 | Do staff normally speak to you most of the time/all of the time during association? | 16% | 20% | 16% | 13% |
| 7.5 | Do you have a personal officer? | 53% | 77% | 53% | 64% |
| | For those with a personal officer: | | | | |
| 7.6 | Do you think your personal officer is helpful/very helpful? | 61% | 63% | 61% | 59% |

Main comparator and comparator to last time

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| SECTION 8: Safety | | | | | |
| 8.1 | Have you ever felt unsafe here? | 29% | 31% | 29% | 33% |
| 8.2 | Do you feel unsafe now? | 13% | 13% | 13% | 16% |
| 8.4 | Have you been victimised by other prisoners here? | 23% | 19% | 23% | 19% |
| Since you have been here, have other prisoners: | | | | | |
| 8.5 | Made insulting remarks about you, your family or friends? | 10% | 9% | 10% | 8% |
| 8.5 | Hit, kicked or assaulted you? | 6% | 5% | 6% | 4% |
| 8.5 | Sexually abused you? | 1% | 1% | 1% | 2% |
| 8.5 | Threatened or intimidated you? | 13% | 18% | 13% | |
| 8.5 | Taken your canteen/property? | 5% | 4% | 5% | 3% |
| 8.5 | Victimised you because of medication? | 4% | 5% | 4% | |
| 8.5 | Victimised you because of debt? | 4% | 1% | 4% | |
| 8.5 | Victimised you because of drugs? | 2% | 2% | 2% | 4% |
| 8.5 | Victimised you because of your race or ethnic origin? | 4% | 3% | 4% | 4% |
| 8.5 | Victimised you because of your religion/religious beliefs? | 2% | 2% | 2% | 4% |
| 8.5 | Victimised you because of your nationality? | 4% | 4% | 4% | |
| 8.5 | Victimised you because you were from a different part of the country? | 5% | 4% | 5% | 8% |
| 8.5 | Victimised you because you are from a traveller community? | 0% | 0% | 0% | |
| 8.5 | Victimised you because of your sexual orientation? | 0% | 1% | 0% | 2% |
| 8.5 | Victimised you because of your age? | 1% | 2% | 1% | |
| 8.5 | Victimised you because you have a disability? | 1% | 2% | 1% | 1% |
| 8.5 | Victimised you because you were new here? | 4% | 4% | 4% | 4% |
| 8.5 | Victimised you because of your offence/crime? | 3% | 4% | 3% | |
| 8.5 | Victimised you because of gang related issues? | 5% | 3% | 5% | |

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| | Percentages which are not highlighted show there is no significant difference | | | | |
| SECTION 8: Safety continued | | | | | |
| 8.6 | Have you been victimised by staff here? | 27% | 22% | 27% | 20% |
| | Since you have been here, have staff: | | | | |
| 8.7 | Made insulting remarks about you, your family or friends? | 9% | 10% | 9% | 11% |
| 8.7 | Hit, kicked or assaulted you? | 2% | 2% | 2% | 2% |
| 8.7 | Sexually abused you? | 0% | 1% | 0% | 1% |
| 8.7 | Threatened or intimidated you? | 7% | 15% | 7% | |
| 8.7 | Victimised you because of medication? | 4% | 2% | 4% | |
| 8.7 | Victimised you because of debt? | 1% | 0% | 1% | |
| 8.7 | Victimised you because of drugs? | 2% | 3% | 2% | 3% |
| 8.7 | Victimised you because of your race or ethnic origin? | 5% | 5% | 5% | 4% |
| 8.7 | Victimised you because of your religion/religious beliefs? | 5% | 3% | 5% | 2% |
| 8.7 | Victimised you because of your nationality? | 3% | 2% | 3% | |
| 8.7 | Victimised you because you were from a different part of the country? | 4% | 4% | 4% | 5% |
| 8.7 | Victimised you because you are from a traveller community? | 1% | 1% | 1% | |
| 8.7 | Victimised you because of your sexual orientation? | 1% | 1% | 1% | 0% |
| 8.7 | Victimised you because of your age? | 1% | 2% | 1% | |
| 8.7 | Victimised you because you have a disability? | 1% | 2% | 1% | 4% |
| 8.7 | Victimised you because you were new here? | 3% | 4% | 3% | 6% |
| 8.7 | Victimised you because of your offence/crime? | 4% | 4% | 4% | |
| 8.7 | Victimised you because of gang related issues? | 2% | 2% | 2% | |
| | For those who have been victimised by staff or other prisoners: | | | | |
| 8.8 | Did you report any victimisation that you have experienced? | 42% | 40% | 42% | 32% |

Main comparator and comparator to last time

Key to tables

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| SECTION 9: Health services | | | | | |
| 9.1 | Is it easy/very easy to see the doctor? | 15% | 39% | 15% | |
| 9.1 | Is it easy/very easy to see the nurse? | 23% | 62% | 23% | |
| 9.1 | Is it easy/very easy to see the dentist? | 10% | 15% | 10% | |
| | 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: | | | | |
| 9.2 | The doctor? | 36% | 52% | 36% | 56% |
| 9.2 | The nurse? | 46% | 66% | 46% | 63% |
| 9.2 | The dentist? | 29% | 47% | 29% | 52% |
| 9.3 | The overall quality of health services? | 32% | 47% | 32% | 44% |
| 9.4 | Are you currently taking medication? | 48% | 46% | 48% | 37% |
| | For those currently taking medication: | | | | |
| 9.5 | Are you allowed to keep possession of some or all of your medication in your own cell? | 87% | 97% | 87% | |
| 9.6 | Do you have any emotional well being or mental health problems? | 28% | 26% | 28% | |
| | For those who have problems: | | | | |
| 9.7 | Are you being helped or supported by anyone in this prison? | 33% | 66% | 33% | |
| SECTION 10: Drugs and alcohol | | | | | |
| 10.1 | Did you have a problem with drugs when you came into this prison? | 29% | 22% | 29% | 11% |
| 10.2 | Did you have a problem with alcohol when you came into this prison? | 21% | 16% | 21% | 5% |
| 10.3 | Is it easy/very easy to get illegal drugs in this prison? | 38% | 31% | 38% | 42% |
| 10.4 | Is it easy/very easy to get alcohol in this prison? | 23% | 4% | 23% | |
| 10.5 | Have you developed a problem with drugs since you have been in this prison? | 9% | 8% | 9% | |
| 10.6 | Have you developed a problem with diverted medication since you have been in this prison? | 9% | 1% | 9% | |
| | For those with drug or alcohol problems: | | | | |
| 10.7 | Have you received any support or help with your drug problem while in this prison? | 63% | 75% | 63% | |
| 10.8 | Have you received any support or help with your alcohol problem while in this prison? | 68% | 88% | 68% | |
| | For those who have received help or support with their drug or alcohol problem: | | | | |
| 10.9 | Was the support helpful? | 81% | 80% | 81% | |

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| SECTION 11: Activities | | | | | |
| Is it very easy/ easy to get into the following activities: | | | | | |
| 11.1 | A prison job? | 52% | 49% | 52% | |
| 11.1 | Vocational or skills training? | 36% | 35% | 36% | |
| 11.1 | Education (including basic skills)? | 45% | 46% | 45% | |
| 11.1 | Offending Behaviour Programmes? | 18% | 15% | 18% | |
| Are you currently involved in any of the following activities: | | | | | |
| 11.2 | A prison job? | 71% | 63% | 71% | |
| 11.2 | Vocational or skills training? | 21% | 19% | 21% | |
| 11.2 | Education (including basic skills)? | 26% | 29% | 26% | |
| 11.2 | Offending Behaviour Programmes? | 18% | 17% | 18% | |
| 11.3 | Have you had a job while in this prison? | 86% | 87% | 86% | |
| For those who have had a prison job while in this prison: | | | | | |
| 11.3 | Do you feel the job will help you on release? | 42% | 47% | 42% | |
| 11.3 | Have you been involved in vocational or skills training while in this prison? | 79% | 77% | 79% | |
| For those who have had vocational or skills training while in this prison: | | | | | |
| 11.3 | Do you feel the vocational or skills training will help you on release? | 68% | 66% | 68% | |
| 11.3 | Have you been involved in education while in this prison? | 83% | 82% | 83% | |
| For those who have been involved in education while in this prison: | | | | | |
| 11.3 | Do you feel the education will help you on release? | 67% | 68% | 67% | |
| 11.3 | Have you been involved in offending behaviour programmes while in this prison? | 79% | 77% | 79% | |
| For those who have been involved in offending behaviour programmes while in this prison: | | | | | |
| 11.3 | Do you feel the offending behaviour programme(s) will help you on release? | 55% | 61% | 55% | |
| 11.4 | Do you go to the library at least once a week? | 43% | 50% | 43% | 48% |
| 11.5 | Does the library have a wide enough range of materials to meet your needs? | 58% | 57% | 58% | |
| 11.6 | Do you go to the gym three or more times a week? | 38% | 36% | 38% | 26% |
| 11.7 | Do you go outside for exercise three or more times a week? | 25% | 52% | 25% | 50% |
| 11.8 | Do you go on association more than five times each week? | 65% | 79% | 65% | 85% |
| 11.9 | Do you spend ten or more hours out of your cell on a weekday? | 15% | 15% | 15% | 22% |
| SECTION 12: Friends and family | | | | | |
| 12.1 | Have staff supported you and helped you to maintain contact with family/friends while in this prison? | 29% | 38% | 29% | |
| 12.2 | Have you had any problems with sending or receiving mail? | 47% | 43% | 47% | 41% |
| 12.3 | Have you had any problems getting access to the telephones? | 53% | 24% | 53% | 23% |
| 12.4 | Is it easy/ very easy for your friends and family to get here? | 27% | 32% | 27% | |

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| Percentages which are not highlighted show there is no significant difference | | | | | |
| SECTION 13: Preparation for release | | | | | |
| For those who are sentenced: | | | | | |
| 13.1 | Do you have a named offender manager (home probation officer) in the probation service? | 78% | 95% | 78% | |
| For those who are sentenced what type of contact have you had with your offender manager: | | | | | |
| 13.2 | No contact? | 38% | 17% | 38% | |
| 13.2 | Contact by letter? | 37% | 53% | 37% | |
| 13.2 | Contact by phone? | 27% | 35% | 27% | |
| 13.2 | Contact by visit? | 31% | 53% | 31% | |
| 13.3 | Do you have a named offender supervisor in this prison? | 55% | 84% | 55% | |
| For those who are sentenced: | | | | | |
| 13.4 | Do you have a sentence plan? | 66% | 71% | 66% | 40% |
| For those with a sentence plan: | | | | | |
| 13.5 | Were you involved/very involved in the development of your plan? | 62% | 56% | 62% | 54% |
| Who is working with you to achieve your sentence plan targets: | | | | | |
| 13.6 | Nobody? | 44% | 40% | 44% | |
| 13.6 | Offender supervisor? | 36% | 44% | 36% | |
| 13.6 | Offender manager? | 28% | 41% | 28% | |
| 13.6 | Named/personal officer? | 11% | 23% | 11% | |
| 13.6 | Staff from other departments? | 21% | 25% | 21% | |
| For those with a sentence plan: | | | | | |
| 13.7 | Can you achieve any of your sentence plan targets in this prison? | 72% | 71% | 72% | 61% |
| 13.8 | Are there plans for you to achieve any of your targets in another prison? | 18% | | 18% | |
| 13.9 | Are there plans for you to achieve any of your targets in the community? | 34% | | 34% | |
| 13.10 | Do you have a needs based custody plan? | 7% | 7% | 7% | |
| 13.11 | Do you feel that any member of staff has helped you to prepare for release? | 21% | 19% | 21% | |
| For those that need help do you know of anyone in this prison who can help you on release with the following: | | | | | |
| 13.12 | Employment? | 48% | 46% | 48% | |
| 13.12 | Accommodation? | 51% | 47% | 51% | |
| 13.12 | Benefits? | 46% | 50% | 46% | |
| 13.12 | Finances? | 41% | 44% | 41% | |
| 13.12 | Education? | 51% | 54% | 51% | |
| 13.12 | Drugs and alcohol? | 59% | 62% | 59% | |
| For those who are sentenced: | | | | | |
| 13.13 | Have you done anything, or has anything happened to you here to make you less likely to offend in future? | 59% | 56% | 59% | 52% |

Diversity Analysis



Key question responses (ethnicity and religion) HMP Ranby 2012

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

Key to tables

| | | Black and minority ethnic prisoners | White prisoners | Muslim prisoners | Non-Muslim prisoners |
|--|---|-------------------------------------|-----------------|------------------|----------------------|
| | Any percentage highlighted in green is significantly better | | | | |
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| | 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 | | 39 | 132 | 24 | 146 |
| 1.3 | Are you sentenced? | 100% | 100% | 100% | 100% |
| 1.5 | Are you a foreign national? | 23% | 4% | 33% | 4% |
| 1.6 | Do you understand spoken English? | 98% | 98% | 96% | 99% |
| 1.7 | Do you understand written English? | 98% | 98% | 96% | 98% |
| 1.8 | Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)? | | | 87% | 12% |
| 1.9 | Do you consider yourself to be Gypsy/Romany/Traveller? | 3% | 5% | 9% | 4% |
| 1.1 | Are you Muslim? | 53% | 2% | | |
| 1.12 | Do you consider yourself to have a disability? | 10% | 21% | 9% | 20% |
| 1.13 | Are you a veteran (ex-armed services)? | 3% | 5% | 0% | 6% |
| 1.14 | Is this your first time in prison? | 35% | 22% | 39% | 22% |
| 2.6 | Were you treated well/very well by the escort staff? | 57% | 71% | 54% | 71% |
| 2.7 | Before you arrived here were you told that you were coming here? | 43% | 62% | 33% | 61% |
| 3.2 | When you were searched in reception, was this carried out in a respectful way? | 80% | 86% | 71% | 86% |
| 3.3 | Were you treated well/very well in reception? | 54% | 73% | 50% | 71% |
| 3.4 | Did you have any problems when you first arrived? | 67% | 60% | 65% | 62% |
| 3.7 | Did you have access to someone from healthcare when you first arrived here? | 74% | 73% | 69% | 73% |
| 3.9 | Did you feel safe on your first night here? | 69% | 85% | 67% | 83% |
| 3.10 | Have you been on an induction course? | 95% | 94% | 91% | 95% |
| 4.1 | Is it easy/very easy to communicate with your solicitor or legal representative? | 36% | 45% | 29% | 45% |

Diversity Analysis

Key to tables

| | | Black and minority ethnic prisoners | White prisoners | Muslim prisoners | Non-Muslim prisoners |
|-----|--|-------------------------------------|-----------------|------------------|----------------------|
| | Any percentage highlighted in green is significantly better | | | | |
| | Any percentage highlighted in blue is significantly worse | | | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners background details | | | | |
| | Percentages which are not highlighted show there is no significant difference | | | | |
| 4.4 | Are you normally offered enough clean, suitable clothes for the week? | 55% | 55% | 44% | 57% |
| 4.4 | Are you normally able to have a shower every day? | 74% | 82% | 65% | 83% |
| 4.4 | Is your cell call bell normally answered within five minutes? | 28% | 26% | 29% | 26% |
| 4.5 | Is the food in this prison good/very good? | 26% | 26% | 25% | 25% |
| 4.6 | Does the shop /canteen sell a wide enough range of goods to meet your needs? | 23% | 39% | 29% | 36% |
| 4.7 | Are you able to speak to a Listener at any time if you want to? | 49% | 54% | 50% | 54% |
| 4.8 | Do you feel your religious beliefs are respected? | 49% | 41% | 54% | 41% |
| 4.9 | Are you able to speak to a religious leader of your faith in private if you want to? | 49% | 48% | 58% | 47% |
| 5.1 | Is it easy to make an application? | 79% | 84% | 83% | 83% |
| 5.3 | Is it easy to make a complaint? | 58% | 70% | 71% | 67% |
| 6.1 | Do you feel you have been treated fairly in your experience of the IEP scheme? | 24% | 55% | 25% | 52% |
| 6.2 | Do the different levels of the IEP scheme encourage you to change your behaviour? | 30% | 43% | 37% | 41% |
| 6.3 | In the last six months have any members of staff physically restrained you (C&R)? | 8% | 5% | 9% | 5% |
| 7.1 | Do most staff, in this prison, treat you with respect? | 67% | 79% | 69% | 77% |
| 7.2 | Is there a member of staff you can turn to for help if you have a problem in this prison? | 71% | 76% | 65% | 76% |
| 7.3 | Do staff normally speak to you at least most of the time during association time? (Most/all of the time) | 19% | 16% | 21% | 16% |
| 7.4 | Do you have a personal officer? | 50% | 54% | 46% | 55% |
| 8.1 | Have you ever felt unsafe here? | 40% | 25% | 50% | 26% |
| 8.2 | Do you feel unsafe now? | 22% | 10% | 26% | 11% |
| 8.3 | Have you been victimised by other prisoners? | 30% | 20% | 44% | 20% |
| 8.5 | Have you ever felt threatened or intimidated by other prisoners here? | 19% | 10% | 31% | 10% |
| 8.5 | Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) | 8% | 2% | 17% | 2% |
| 8.5 | Have you been victimised because of your religion/religious beliefs? (By prisoners) | 6% | 2% | 17% | 0% |
| 8.5 | Have you been victimised because of your nationality? (By prisoners) | 8% | 2% | 17% | 2% |
| 8.5 | Have you been victimised because you have a disability? (By prisoners) | 0% | 2% | 0% | 2% |

Diversity Analysis

Key to tables

| | | Black and minority ethnic prisoners | White prisoners | Muslim prisoners | Non-Muslim 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 | | | | |
| 8.6 | Have you been victimised by a member of staff? | 37% | 24% | 56% | 23% |
| 8.7 | Have you ever felt threatened or intimidated by staff here? | 17% | 4% | 26% | 4% |
| 8.7 | Have you been victimised because of your race or ethnic origin since you have been here? (By staff) | 14% | 2% | 31% | 1% |
| 8.7 | Have you been victimised because of your religion/religious beliefs? (By staff) | 17% | 1% | 31% | 1% |
| 8.7 | Have you been victimised because of your nationality? (By staff) | 6% | 2% | 17% | 1% |
| 8.7 | Have you been victimised because you have a disability? (By staff) | 0% | 2% | 0% | 2% |
| 9.1 | Is it easy/very easy to see the doctor? | 6% | 18% | 4% | 17% |
| 9.1 | Is it easy/ very easy to see the nurse? | 18% | 24% | 10% | 24% |
| 9.4 | Are you currently taking medication? | 38% | 50% | 33% | 51% |
| 9.6 | Do you feel you have any emotional wellbeing/mental health issues? | 29% | 28% | 33% | 28% |
| 10.3 | Is it easy/very easy to get illegal drugs in this prison? | 33% | 39% | 43% | 38% |
| 11.2 | Are you currently working in the prison? | 65% | 72% | 65% | 72% |
| 11.2 | Are you currently undertaking vocational or skills training? | 19% | 22% | 13% | 22% |
| 11.2 | Are you currently in education (including basic skills)? | 43% | 21% | 44% | 22% |
| 11.2 | Are you currently taking part in an offending behaviour programme? | 19% | 18% | 13% | 19% |
| 11.4 | Do you go to the library at least once a week? | 51% | 41% | 52% | 40% |
| 11.6 | do you go to the gym three or more times a week? | 43% | 36% | 52% | 35% |
| 11.7 | Do you go outside for exercise three or more times a week? | 25% | 25% | 17% | 26% |
| 11.8 | On average, do you go on association more than five times each week? | 62% | 66% | 61% | 66% |
| 11.9 | Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.) | 11% | 17% | 9% | 17% |
| 12.2 | Have you had any problems sending or receiving mail? | 57% | 43% | 54% | 46% |
| 12.3 | Have you had any problems getting access to the telephones? | 61% | 50% | 59% | 52% |

Diversity Analysis



Key question responses (disability) HMP Ranby 2012

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

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 | | 31 | 140 |
| 1.3 | Are you sentenced? | 100% | 100% |
| 1.5 | Are you a foreign national? | 7% | 9% |
| 1.6 | Do you understand spoken English? | 90% | 100% |
| 1.7 | Do you understand written English? | 90% | 99% |
| 1.8 | Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)? | 13% | 25% |
| 1.9 | Do you consider yourself to be Gypsy/Romany/Traveller? | 14% | 2% |
| 1.1 | Are you Muslim? | 7% | 16% |
| 1.12 | Do you consider yourself to have a disability? | | |
| 1.13 | Are you a veteran (ex-armed services)? | 7% | 4% |
| 1.14 | Is this your first time in prison? | 34% | 23% |
| 2.6 | Were you treated well/very well by the escort staff? | 64% | 69% |
| 2.7 | Before you arrived here were you told that you were coming here? | 68% | 55% |
| 3.2 | When you were searched in reception, was this carried out in a respectful way? | 80% | 85% |
| 3.3 | Were you treated well/very well in reception? | 55% | 71% |
| 3.4 | Did you have any problems when you first arrived? | 87% | 56% |
| 3.7 | Did you have access to someone from healthcare when you first arrived here? | 68% | 74% |
| 3.9 | Did you feel safe on your first night here? | 74% | 82% |
| 3.10 | Have you been on an induction course? | 93% | 94% |
| 4.1 | Is it easy/very easy to communicate with your solicitor or legal representative? | 37% | 44% |

Diversity Analysis

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 | | |
| 4.4 | Are you normally offered enough clean, suitable clothes for the week? | 60% | 54% |
| 4.4 | Are you normally able to have a shower every day? | 77% | 81% |
| 4.4 | Is your cell call bell normally answered within five minutes? | 20% | 28% |
| 4.5 | Is the food in this prison good/very good? | 17% | 27% |
| 4.6 | Does the shop /canteen sell a wide enough range of goods to meet your needs? | 47% | 33% |
| 4.7 | Are you able to speak to a Listener at any time if you want to? | 30% | 58% |
| 4.8 | Do you feel your religious beliefs are respected? | 23% | 47% |
| 4.9 | Are you able to speak to a religious leader of your faith in private if you want to? | 34% | 51% |
| 5.1 | Is it easy to make an application? | 70% | 86% |
| 5.3 | Is it easy to make a complaint? | 47% | 72% |
| 6.1 | Do you feel you have been treated fairly in your experience of the IEP scheme? | 40% | 50% |
| 6.2 | Do the different levels of the IEP scheme encourage you to change your behaviour? | 31% | 42% |
| 6.3 | In the last six months have any members of staff physically restrained you (C&R)? | 7% | 5% |
| 7.1 | Do most staff, in this prison, treat you with respect? | 72% | 77% |
| 7.2 | Is there a member of staff you can turn to for help if you have a problem in this prison? | 83% | 72% |
| 7.3 | Do staff normally speak to you at least most of the time during association time? (Most/all of the time) | 10% | 18% |
| 7.4 | Do you have a personal officer? | 60% | 52% |
| 8.1 | Have you ever felt unsafe here? | 47% | 25% |
| 8.2 | Do you feel unsafe now? | 14% | 13% |
| 8.3 | Have you been victimised by other prisoners? | 31% | 21% |
| 8.5 | Have you ever felt threatened or intimidated by other prisoners here? | 28% | 9% |
| 8.5 | Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) | 0% | 4% |
| 8.5 | Have you been victimised because of your religion/religious beliefs? (By prisoners) | 0% | 3% |
| 8.5 | Have you been victimised because of your nationality? (By prisoners) | 0% | 4% |
| 8.5 | Have you been victimised because of your age? (By prisoners) | 0% | 2% |
| 8.5 | Have you been victimised because you have a disability? (By prisoners) | 7% | 0% |

Diversity Analysis

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 | | |
| 8.6 | Have you been victimised by a member of staff? | 39% | 25% |
| 8.7 | Have you ever felt threatened or intimidated by staff here? | 3% | 8% |
| 8.7 | Have you been victimised because of your race or ethnic origin since you have been here? (By staff) | 0% | 6% |
| 8.7 | Have you been victimised because of your religion/religious beliefs? (By staff) | 0% | 6% |
| 8.7 | Have you been victimised because of your nationality? (By staff) | 0% | 4% |
| 8.7 | Have you been victimised because of your age? (By staff) | 0% | 1% |
| 8.7 | Have you been victimised because you have a disability? (By staff) | 7% | 0% |
| 9.1 | Is it easy/very easy to see the doctor? | 14% | 15% |
| 9.1 | Is it easy/ very easy to see the nurse? | 28% | 22% |
| 9.4 | Are you currently taking medication? | 83% | 40% |
| 9.6 | Do you feel you have any emotional wellbeing/mental health issues? | 53% | 23% |
| 10.3 | Is it easy/very easy to get illegal drugs in this prison? | 35% | 39% |
| 11.2 | Are you currently working in the prison? | 63% | 72% |
| 11.2 | Are you currently undertaking vocational or skills training? | 27% | 20% |
| 11.2 | Are you currently in education (including basic skills)? | 23% | 27% |
| 11.2 | Are you currently taking part in an offending behaviour programme? | 13% | 20% |
| 11.4 | Do you go to the library at least once a week? | 43% | 43% |
| 11.6 | do you go to the gym three or more times a week? | 34% | 39% |
| 11.7 | Do you go outside for exercise three or more times a week? | 21% | 26% |
| 11.8 | On average, do you go on association more than five times each week? | 57% | 67% |
| 11.9 | Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.) | 17% | 15% |
| 12.2 | Have you had any problems sending or receiving mail? | 40% | 48% |
| 12.3 | Have you had any problems getting access to the telephones? | 77% | 47% |