

Report on an unannounced inspection of

HMP Featherstone

by HM Chief Inspector of Prisons

14–25 October 2013

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Printed and published by:
Her Majesty's Inspectorate of Prisons
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30–34 Kingsway
London WC2B 6EX
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Introduction

HMP Featherstone is a male category C training prison near Wolverhampton that holds nearly 700 adult men. This was a prison that lived up to its description – the quality and quantity of work and education on offer was much better than we usually see. The purposeful atmosphere this engendered, together with a good environment and generally good staff-prisoner relationships, mitigated the worst effects of some weak safety processes. Offender management processes also needed improvement and, despite some good practical support, the prison needed to do more to prepare men for release and reduce the risk that they would reoffend.

Most prisoners had more than 10 hours out of their cell each week day – much better than we now normally see. Most used this time productively in a good range of training and education. The quality of teaching and learning was good and prisoners obtained useful qualifications that would be valued by future employers. The workshops provided a realistic working environment and commercial partners spoke positively about their relationship with the prison and the quality of the work. Attendance and punctuality were good. Good use was made of peer mentors to support prisoners who needed extra help, but there was room for improvement in the support available to help prisoners improve their English and maths skills. There was, however, a good Toe by Toe scheme in which prisoners received individual support from mentors to improve their reading and the library hosted other programmes to support literacy. Good use was made of the 'virtual campus' which provided some limited internet access. PE provision was good.

The positive ethos this created was underpinned by a decent environment and generally good staff-prisoner relationships – although there were a small number of exceptions to this. Work on diversity, equality and faith was good and most prisoners from minority groups reported positively. More systematic consultation arrangements would have helped the prison understand and address the concerns that did exist. Health care was satisfactory and there was a high level of awareness among uniformed staff of mental health issues, which meant that men with a mental illness received good support on the wings. However, some important processes such as the management of applications, complaints, clothing and legal services required improvement.

Without these underlying strengths of the prison, we would have been more concerned about safety at Featherstone. There was clearly a problem of debt in the prison, in part linked to the availability of drugs and tradable medicines, some of which, as the prison was aware of and addressing, did not show up in the normal testing processes. Support for men with drug and alcohol problems was good. The issue of debt was, in turn, partly responsible for many of the violent incidents and much of the bullying, although these were mainly low level. The prison did not have an adequate handle on the patterns and trends of violent incidents. Support for victims was inadequate and they accounted for a significant proportion of those who self-harmed. A small number of prolific self-harmers contributed to levels of self-harm which were higher than we see in comparable prisons. We believed that staff offered a satisfactory level of care to those at risk of suicide or self-harm but poor recording practices meant that we could not be fully assured of this.

The incentives and earned privileges scheme was well managed and more effective than we often see. Recording of other discipline processes was sloppy; use of force was under-recorded and there was poor use of data across the range of discipline processes that would have helped understand and address trends. The environment and regime in the segregation unit required improvement. Despite these weaknesses we were satisfied that Featherstone was a safe environment for most of the men it held. A minority of men were more at risk and the prison was over-dependent on a generally positive culture and good relationships to support them; these were not sufficiently underpinned by rigorous processes.

It was disappointing that the prison's good work on preparing men for employment and dealing with substance misuse issues did not feed through into work to reduce the risk that men would reoffend. Offender management was the weakest part of the prison. There was a large backlog of risk assessments and sentence plans simply reflected what prisoners said they wanted to do rather than incorporating the assessments of other departments. Offender supervisors had too little contact with individual prisoners. The offender management unit was under resourced, isolated, and staff needed more support and training. The prison had recognised some of these deficiencies and started to introduce changes to address them but it was too early to assess their effectiveness. Practical resettlement support was better and prisoners could generally access adequate assistance with housing, employment, training, substance misuse and health issues.

HMP Featherstone was a very positive establishment. It did very well what other prisons sometimes find difficult – the more intangible qualities of culture, relationships and leadership. Most men at Featherstone could expect to make good progress in a decent environment and the excellent activity on offer would prepare them well for future employment. However, the prison struggled with what should have been an easier task – putting in place the processes and systems needed to underpin its good work and ensure there were no gaps through which more vulnerable men, or those who might pose a higher risk, might fall.

Nick Hardwick
HM Chief Inspector of Prisons

March 2014

Fact page

Task of the establishment

HMP Featherstone is a male category C training prison.

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

Public

Region/Department

West Midlands

Number held

676

Certified normal accommodation

671

Operational capacity

687

Date of last inspections (full and short follow-up)

Full inspection: 20–24 October 2008

Short follow-up inspection: 21–23 November 2011

Brief history

The prison was built in 1976; house blocks 5, 6 and 7 were added later.

Short description of residential units

House block 1: Residential

House block 2: Residential

House block 3: Residential

House block 4: Residential

House block 5: Induction unit

House block 6: Enhanced unit

House block 7: Residential/healthy living

Care and separation unit: segregation

Name of governor/director

Deborah Butler

Escort contractor

GeoAmey

Health service commissioner and providers

Commissioner: NHS England

Provider: Staffordshire and Stoke on Trent Partnership NHS Trust

Learning and skills providers

Milton Keynes College, Dudley College, Stoke College, N-ergy Training Group

Independent Monitoring Board chair

Jacky Whittle

About this inspection and report

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

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

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

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.

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

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

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

This report

- A8 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of prisoners and conditions in prisons*. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection.
- A9 Details of the inspection team and the prison population profile can be found in Appendices I and II respectively.
- A10 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix III of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.¹

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

Summary

Safety

S1 *Journey times to the prison were short for most and the reception experience for the majority of prisoners was positive. Most prisoners felt safe on their first night and induction was adequate. There were a large number of violent incidents but many were low level. The prison had a positive culture, and at a personal level staff demonstrated care for prisoners and were identifying risk factors; but formal monitoring was poor and some prisoners in crisis felt unsupported. Arrangements to support victims of anti-social behaviour were inadequate. Security was broadly proportionate. The IEP scheme was used effectively and to encourage positive behaviour, but the scheme required scrutiny regarding demotions. Too many prisoners said that drugs were easily available and current testing methods did not enable the prison to get an accurate picture of the extent of the problem, but the prison was taking action to address this. Use of force was high and some oversight was weak. The segregation unit was a poor environment with a limited regime but most prisoners spoke positively about staff support. Support for those with substance misuse issues was good. **Outcomes for prisoners were reasonably good against this healthy prison test.***

- S2** For most prisoners, journey times to the prison were relatively short. Some escort vans were dirty and some escort staff did not engage with prisoners. The reception area provided a clean, welcoming environment and most staff were polite and friendly. All prisoners were strip-searched on arrival, which was excessive. The reception process was generally a positive experience for prisoners but took too long.
- S3** Reception interviews took place in private and all new arrivals underwent a first night risk interview. Most prisoners felt safe on their first night and the majority were offered a shower and a telephone call. Induction started on the day after arrival and all prisoners completed the programme.
- S4** The prison's positive culture contributed to safety. Nevertheless many safety indicators in our survey were worse than the comparators and than at the time of the previous inspection. The prison was aware that debt was an issue for a significant minority of prisoners. The number of violent incidents was higher than at similar prisons but most were low level. The collation of safety data was chaotic, which hindered quality analysis. Reported violent and anti-social behaviour was tackled robustly but investigations were not always recorded well and files for perpetrators on formal monitoring were poor. The use of violence reduction peer mentors was positive but there was insufficient oversight of their work and evaluation of their effectiveness.
- S5** Staff were focused on risk factors for suicide and self-harm and opened assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm for appropriate reasons. There were more incidents of self-harm than at similar prisons and some prisoners on ACCTs did not feel adequately supported. Although staff appeared to care for prisoners this was not always reflected in ACCT documents, which were of poor quality. There was good access to Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners).
- S6** Although the prison had no local safeguarding policy or links with the local safeguarding adults board, there was evidence that some prisoners who needed intervention were appropriately looked after.

- S7 Security arrangements were generally proportionate and intelligence was processed efficiently but suspicion drug testing was poor. The security committee was afforded a high priority, appropriate security objectives were set and monitored, and staff were focused on making the prison safer. The mandatory drug testing rate was lower than the target but there were concerns about other substances that were not detected by this process; the prison had identified alternative tests to enable it to address the issue. In our survey, more prisoners than at comparator establishments said that it was easy to get illegal drugs at the prison and that they had developed a problem with drugs while at the prison.
- S8 The incentives and earned privileges (IEP) scheme was used effectively to encourage positive behaviour but prisoners in our survey were more negative than those at comparator prisons across the IEP indicators. At IEP reviews, some staff were too prone to demote prisoners to the basic level of the scheme. Targets set for prisoners on the basic level were rudimentary.
- S9 The collation of data across the spectrum of discipline was poor. The number of adjudications had reduced since the previous inspection but was still higher than at similar prisons. Records of hearings did not always reflect a thorough exploration of charges before a finding of guilt.
- S10 Incidents involving the use of force were under-reported and there were more uses than at similar prisons. Sustained, full use of control and restraint was infrequent and use of handcuffs and relocation to the segregation unit were not routine. Many records were incomplete and some lacked sufficient detail. Despite managing some challenging prisoners, special accommodation had not been used since the previous inspection.
- S11 Communal areas on the segregation unit were clean but drab. The cells were undergoing refurbishment but the environment was still shabby, with poor cells and showers. The exercise yard was austere. The regime on the unit was basic and offered limited constructive activity to most residents. Throughput was slightly lower than at similar prisons but some residents remained there for long periods. Most prisoners were reintegrated back into the main population. Documentation authorising segregation was often completed poorly and many targets were perfunctory. Staff on the unit were knowledgeable about those in their care and prisoners spoke well of most officers.
- S12 All prisoners received an initial screening on arrival and those with a drug and/or alcohol use problem were referred to the clinical substance misuse service and the drug and alcohol recovery service. The regular substance misuse meeting was well attended but issues of diverted medications had not been discussed for a long period. Prisoners were positive about the support they received from substance misuse services.

Respect

- S13** *The prison provided a clean and decent environment. Staff–prisoner engagement was mostly positive but a minority of staff had a negative impact. Arrangements for equality, diversity and faith were effective and there was good support across the protected characteristics. The management of applications, complaints, clothing and legal services provision needed attention. Arrangements for prisoner consultation were good. Health service provision was reasonable, with some evidence of good practice. Prisoners were critical about the food provided. **Outcomes for prisoners were good against this healthy prison test.***

- S14 Communal areas, although old and shabby, were clean. Access to cell cleaning materials was good, and cells were clean and free from graffiti and offensive displays. The cell toilets in house blocks 1 to 4 were insufficiently screened and the few double cells on these wings were cramped. Access to showers was good, and they were clean, sufficiently private and generally well maintained. Most prisoners could not wear their own clothes and prison clothing was generally of poor quality. Access to stored property was problematic and there was a large backlog of applications. Prisoners told us that it was easy to make a general application but they were not always answered politely or in a timely fashion.
- S15 Staff–prisoner relationships were generally positive but some prisoners reported a small number of belligerent staff and some of our observations supported this. Case history notes reflected a good understanding of prisoners and reported a balanced view of their behaviour. Preferred names were mostly used in written documentation but verbally were less well embedded. Prisoner consultation was regular and positive, but some action points took too long to be completed. Prisoner representatives were used across a number of departments.
- S16 Governance arrangements for equality and diversity were good and well embedded, and there was excellent promotion of diversity throughout the prison. We found no evidence of discrimination of any minority group. The number of discrimination incident reporting forms submitted was higher than at similar prisons but they were investigated thoroughly and acted on appropriately. Consultation arrangements for black and minority ethnic prisoners and those with disabilities were underdeveloped. The needs of Gypsy, Romany and Traveller prisoners were well met. There was insufficient provision for foreign national prisoners, with little use of professional interpreting and translation services and an over-reliance on peer workers to interpret. Support for prisoners with disabilities was excellent, and provision for older prisoners was good. There was good promotion and celebration of differences in sexual orientation throughout the prison, and provision for gay prisoners was excellent. All major faiths were provided for and there was a wide range of services and classes.
- S17 Most responses to formal complaints were timely, respectful and answered the issue raised, but a few were curt and did not address all the issues raised. Legal services provision was inadequate.
- S18 Prisoners received a health screen on arrival and had good access to daily nurse triage clinics. There was appropriate identification and care planning for long-term conditions. Clinical care and prescribing by GPs was good but prisoners sometimes waited too long for an appointment. There was insufficient follow-up of missed medication doses, and the administration of medicines was compromised by inconsistent and insufficiently vigilant supervision by discipline staff. Too many external hospital appointments were cancelled owing to a lack of escort staff. Access to the dentist was timely and the full range of routine NHS treatments was available. The health trainer initiative was good practice and provided easy access to health promotion advice and information. Mental health care was well integrated and responsive to need but lacked access to talking therapies. The links between the mental health team and prison staff supported men well.
- S19 Most prisoners were negative about the food provided, especially the quantity. We found the menu to be nutritionally balanced but some aspects of portion control were not well managed at the serveries.

Purposeful activity

S20 *Time out of cell for most prisoners was good and there were sufficient activity places. The quality of education and vocational provision was good and achievement outcomes were high. Peer workers were used effectively to encourage and support learning. Prisoners had satisfactory access to the library, which was well resourced and provided good opportunities for learning. The gym offered a good balance of courses. **Outcomes for prisoners were good against this healthy prison test.***

- S21 Time out of cell for a fully engaged prisoner was impressive, at over 10 hours. During roll checks, we found an average 19% of prisoners locked up; this was explained by unusually high sickness levels in staff and prisoners at the time of the inspection.
- S22 There were sufficient purposeful activity places available to occupy most prisoners and a wide range of vocational training courses was offered. Lessons were well planned and taught, and engaged and interested learners well. There was effective use of peer mentors in classrooms and workshops to encourage and support learning.
- S23 Good use was made of the virtual campus (internet access for prisoners to community education, training and employment opportunities). There was insufficient specialist support available in vocational training and work areas to improve prisoners' English and mathematics. Workshops offered a realistic working environment, with impressive links to commercial customers.
- S24 Qualification success rates were high for learners on education and vocational training courses. Attendance and punctuality were generally good. There was good development of work skills in most work areas, particularly the engineering production workshops.
- S25 Prisoners had satisfactory access to the library, which was well resourced and effectively supported education courses. Literacy was promoted through a well-coordinated Toe by Toe programme (a mentoring scheme to help prisoners learn to read), poetry and reading groups, and other activities.
- S26 A wide range of recreational and vocational PE activities was delivered, with high success rates for those taking qualifications. No quality improvement checks had been carried out recently to monitor and further improve the provision. The gym was located on a floor above some of the education classes, and noisy PE activities often caused disruptions to lessons.

Resettlement

S27 *The offender management and resettlement policies were not current and many aspects of delivery were fragmented. Sentence planning was poor and lacked a whole-prison approach. Caseloads for offender supervisors were high and there was insufficient regular contact with prisoners. There was a large backlog of offender assessment system (OASys) assessments. There was good support for indeterminate-sentenced prisoners. Aspects of public protection arrangements were sound but offender supervisors were insufficiently engaged in the process. Pathway provision was generally good but offender supervisor involvement was minimal. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

- S28 Both the offender management and reducing reoffending policies were out of date and did not reflect recent and planned changes in service delivery. There was no overarching needs analysis. Segmentation data (centrally collected data from the analysis of offender assessment system (OASys) assessments) were about 18 months old and local data from OASys assessments were not collated, despite the fact that over 99% of the population was serving sentences of over 12 months. The bimonthly pathways meetings covered all issues relating to offender management and resettlement and were attended by managers from across the establishment, including the offender management unit (OMU).
- S29 The OMU was going through a process of transition, with offender supervisors undertaking the dual functions of offender management and the role of supervising officer on the wings. This was having a negative impact on the level of engagement with prisoners and the effectiveness of the service.
- S30 Caseloads for offender supervisors were high, at over 100, and some of the present staff were inexperienced and still undergoing training for the role. There was a large backlog of OASys assessments, amounting to approximately a third of the population. This had been compounded by the large number of prisoners transferred in without an assessment. Sentence planning arrangements were extremely variable, with an inconsistent level of contribution from other departments. Offender supervisors had little contact with prisoners, even those identified as high or very high risk.
- S31 The role of the probation department in offender management appeared isolated. Probation staff focused primarily on indeterminate-sentenced prisoners but this work, although positive and appropriate, was not consistently coordinated with that of offender supervisors, and there were examples of probation staff not being invited to OASys reviews. The poor communication and information sharing was compounded by offender supervisors maintaining their own contact log rather than using P-Nomis (electronic case notes). Although some quality assurance had been undertaken regarding casework, there were too many cases that lacked effective engagement.
- S32 Public protection arrangements were generally reasonable. The dual system of a weekly screening and monthly risk management board was a robust model but offender supervisors were insufficiently sighted or involved in public protection processes. There were regular lifer and indeterminate-sentenced prisoner forums.
- S33 Pathway provision was reasonably good but links with offender supervisors and community offender managers were inconsistent. Accommodation support was generally good. Approximately 25% of prisoners being released were offered support via the service provider and the no fixed accommodation rate was relatively low, at about 4%.
- S34 There were good pre-release courses that targeted prisoners six weeks before discharge and there were links with an employment agency to provide paid employment on release. Links between the National Careers Service and the OMU were inadequate, and education and training needs were not included in sentence plan targets.
- S35 Prisoners due for release were seen by a nurse before discharge and advised about their prescribed medication and registering with a GP. Those with serious and enduring mental health needs were linked with their local community mental health team. There were good links with local drug intervention programme teams for those requiring substance use treatment on release.
- S36 Debt management support was well developed and provided by Citizens Advice. Budget management courses were also available through the education department and benefit information was easily accessible through the Jobcentre Plus service.

- S37 Reasonable support was provided to families visiting the establishment, including appropriate information and guidance. The visits hall offered a generally positive environment but sessions usually started late owing to delays in visitors being escorted to the visits hall. Access to family visits was dependent on completion of a parenting course, either at Featherstone or previously, elsewhere, but these visit days were held reasonably frequently.
- S38 Accredited offending behaviour programmes were limited to the thinking skills programme and controlling anger and learning to manage it course, with only 46 places available each year. Although the waiting list for programmes was short, the lack of an up-to-date needs analysis and the backlog of OASys assessments made it difficult to assess whether this provision was adequate for the population. Non-accredited programmes were delivered through the education department and the chaplaincy but referrals from offender supervisors were inconsistent.

Main concerns and recommendations

- S39 Concern: There was inadequate collation and analysis of data about violence and antisocial behaviour, which meant that the actions taken to address these issues lacked any trend or pattern analysis. The reports used to inform this area did not cover all indicators of violence and antisocial behaviour.

Recommendation: The collection and collation of data on violent and antisocial behaviour should be improved, with more effective data analysis and action taken to address these issues.

- S40 Concern: There was inadequate collation and analysis of data for disciplinary procedures, use of force and segregation, which meant that the actions taken to address these issues lacked any trend or pattern analysis.

Recommendation: Data for disciplinary procedures, use of force and segregation should be collated, analysed and used more effectively.

- S41 Concern: Although officers were present when drugs were issued, they did not consistently observe prisoners' behaviour concerning the diversion of tradable medicines or control numbers at the dispensing hatch.

Recommendation: There should be vigilant supervision of medication administration by discipline staff to reduce the potential for diversion of tradable medicines and for bullying, and to preserve confidentiality around the hatch.

- S42 Concern: The offender management unit (OMU) too often operated in isolation of other departments in the prison. The reducing reoffending and offender management policies covered the period 2011–2013 but both were out of date as neither covered the recent changes that had been introduced to the OMU.

Recommendation: The strategic functioning of offender management should be better integrated across the prison, be informed by a comprehensive and up-to-date needs analysis and meet the overall requirements of the population.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

- I.1** *Journey times were short, although vans were dirty, with graffiti etched into the walls. There was minimal interaction between escort staff and prisoners. Some prisoners told us that they had been left on vehicles for long periods but they were not handcuffed during disembarkation.*
- I.2** For most prisoners, journey times to the prison were relatively short (most prisoners being from the local area). Escort vans were dirty, with graffiti etched into the cell cubicle walls. The escort staff that we observed did not engage with prisoners but were not discourteous.
- I.3** Prisoners usually arrived early in the day and late arrivals were rare. Although we saw relatively quick disembarkation from escort vans, many prisoners told us that they had been left on vehicles outside reception for up to an hour. They were not handcuffed when being taken off the vehicles, which was proportionate to the risk.

Housekeeping point

- I.4** Escort vehicles should be clean and free from graffiti.

Early days in custody

Expected outcomes:

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

- I.5** *Reception was welcoming and staff were friendly. Prisoners were routinely strip-searched and the reception process took too long. Prisoners felt safe on their first night but the first night interview was rudimentary. Induction started on the day after arrival but the rolling programme was confusing for some prisoners.*
- I.6** The reception area provided a welcoming environment and was clean and well maintained. Two holding rooms and the induction holding room were carpeted and contained up-to-date information and reading materials, and there was a television in the main holding room.
- I.7** The reception process for many prisoners took longer than two hours, and in our survey only 32% of respondents said that they had spent less than two hours in reception. The reception interview took place in the reception office and the health care screening in a dedicated room, both of which afforded a good level of privacy. A cell sharing risk

assessment (CSRA) was carried out during the reception process, which involved a good examination of risk factors.

- I.8** The reception staff we saw treated prisoners respectfully and displayed a caring approach both to new arrivals and those returning to the establishment from court appearances. In our survey, only 73% of respondents (against the 84% comparator) said that they had been searched respectfully. All prisoners were subject to a strip-search, even if they had been in continuous custody (see section on security), but staff were polite and explained the searching process, putting prisoners at their ease throughout.
- I.9** Prisoners were offered a meal and a drink in reception. Once processed by reception staff, they were seen in the induction holding room by prisoner peer support workers, who started the induction process, informing prisoners of what to expect at the prison.
- I.10** New arrivals were located on house block 5. The first night cells that we observed on this unit were clean and ready for occupancy, although some furniture was damaged. A first night risk interview was carried out with all new arrivals but this did not consider the issues that had been raised during the CSRA interview; for example, we evidenced CSRAs highlighting self-harm, homophobic, racist, drug and first time in custody issues which had not been raised at the risk interview. Many prisoners told us that the first night interview felt like a tick-box exercise.
- I.11** Most prisoners felt safe on their first night and a Listener (a prisoner trained by the Samaritans to provide confidential emotional support to fellow prisoners) and Insider (a prisoner who introduces new arrivals to prison life) were on hand during the first night to assist and put prisoners at ease. New arrivals were offered a shower and a free £1 telephone call as well as sufficient reception grocery packs. Handover arrangements to the night staff worked well.
- I.12** Induction started on the first working day after arrival and all prisoners undertook the full programme, with a good tracking system to ensure that all modules were completed. It comprised a five-day fixed rolling programme, facilitated by Insiders. New arrivals started induction at different points, depending on the day of their arrival. Important prison regime information was explained only once during the programme cycle, which meant that some prisoners could wait seven days before receiving it. Some prisoners told us that this was confusing and that it would have been of most benefit if regime information had been received on arrival. The follow-up interview on completion of induction rarely took place. In our survey, only 58% of respondents, against the 63% comparator, said that the induction course had covered everything they needed to know.

Recommendations

- I.13** **Prisoners should be processed through reception expeditiously.**
- I.14** **First night risk interviews should take account of all prisoner issues and ensure that these are adequately dealt with and relevant departments notified.**

Housekeeping point

- I.15** Essential regime information should be explained to all new arrivals on the first day of their induction and the follow-up interview at the completion of induction should take place reliably.

Bullying and violence reduction

Expected outcomes:

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

I.16 *The prison's positive culture contributed to safety. However, although mostly low level, there were more violent incidents than at similar prisons. Many safety indicators in our survey were worse than comparators. Data collation and analysis were weak. Identified perpetrators of violence or antisocial behaviour were initially tackled robustly but support for victims was inadequate. Debt was a big issue that the prison was aware of and taking steps to address.*

I.17 The violence reduction policy covered the key requirements and was widely understood by staff and prisoners, although we noted that there was a lack of consultation with prisoners. There was no specific policy or location for the management of vulnerable prisoners (see also section on safeguarding).

I.18 The monthly safer custody committee oversaw violence reduction and suicide and self-harm prevention. Although generally well attended, the minutes of meetings were poor; they provided inadequate information about violence and antisocial behaviour or the actions taken to address issues, and lacked any trend or pattern analysis. There was inadequate collation and analysis of data. The report that informed the meeting did not cover all indicators of violence and antisocial behaviour and there was no violence reduction action plan (see main recommendation S39).

I.19 Our observations suggested that the prison's overall positive and purposeful culture helped make it a safer place. However, between April and September 2013, there had been eight assaults on staff, 18 assaults on prisoners and 23 fights; although these were mostly low level, the number of violent incidents was higher than at similar prisons. In our survey, more prisoners than at comparator prisons and than at the time of the previous inspection said that they had felt unsafe at the prison at some point and that they had been victimised by staff and other prisoners.

I.20 The strategy for perpetrators of violent or antisocial behaviour involved a first stage of monitoring (when there was insufficient proof of involvement with such behaviour), and a second stage (when there was evidence of involvement) which routinely resulted in demotion to the basic privilege level and the application of restrictions on regime access. Between April and September 2013, 135 perpetrators had been identified and at least 49 placed on stage 2. Although action was taken quickly, investigations were not always recorded well and in some cases action was taken before the investigation was completed. Files for perpetrators on formal monitoring were poor; targets were perfunctory and not specific to the improvement required and, as a result, ongoing monitoring was not properly focused. Workbooks referred to in the policy were not completed.

I.21 Safer custody investigation forms were generated by the security team and shared with the safer custody team; 103 such forms had been generated in the previous six months. Violence reduction representatives followed up those relating to prisoners but there were often delays. Information from these forms was not linked to formal monitoring processes and did not appear to be used in any meaningful way by the safer custody team.

- I.22** Although prisoner violence reduction representatives did not have job descriptions or training, they were selected on the basis of their enhanced IEP status in the prison and their good communication skills. They saw their role as contributing to reducing violence in the prison and in helping to mediate in inflammatory situations. They were clear about their remit and were always tasked and debriefed. The prison held no formal record of the number of times that mediation had been used or its effectiveness. The representatives were widely involved in consultation and were integral members of a number of committees, including safer custody and use of force. We concluded that their role was a positive initiative and many prisoners told us they appreciated support given by violence reduction peer workers. However, there was potential for these trusted positions to be exploited, as we found inadequate record keeping, oversight of their work was minimal and there had been limited evaluation of their effectiveness.
- I.23** Throughout the inspection, we were told by staff and prisoners that debt was a big issue at the establishment. The prison had investigated this thoroughly and addressed the procedural issues that they considered might have been exacerbating the problem, including repayment for the advance on telephone credit and reception grocery packs, and adjudication punishments such as loss of earnings or access to the prison shop or to private cash. The conclusion reached was that debt was problematic for a few prisoners who could not manage their finances well. Debts were accrued mostly for tobacco but also for drugs, including new psychoactive substances (see section on security). The prison was proactive in trying to address debt and in helping affected prisoners to manage it.
- I.24** Staff were aware of the small, but significant, minority of problematic debtors. These prisoners were offered assistance to address their debts, and the opportunity to meet prisoner violence reduction representatives, who were often able to mediate; they were also often afforded wing moves. These prisoners and other victims of violent or antisocial behaviour were generally monitored on support plans. However, the quality of these plans and the support offered was too often inadequate; other than being watched periodically by staff, they rarely included specific assistance and we spoke to a number of prisoners who felt unsupported and some who were too scared to come out of their cells. Many prisoners on support plans self-harmed.

Recommendations

- I.25** **There should be a consolidated safer custody action plan.**
- I.26** **Investigations into and formal monitoring of perpetrators of violent and antisocial incidents should be improved and should include interventions that are evaluated for effectiveness.**
- I.27** **There should be careful oversight of the violence reduction representatives and their work, and mediation should be monitored for its effectiveness.**
- I.28** **Support for victims of violent and antisocial behaviour, including those in debt, should be improved.**

Housekeeping point

- I.29** Minutes of the safer custody committee should be improved.

Self-harm and suicide

Expected outcomes:

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

I.30 *Initial identification of risk of self-harm and suicide was good. Levels of self-harm and the number of opened assessment, care in custody and teamwork (ACCT) case management documents were higher than at similar prisons but analysis of data was weak. Staff appeared caring but many prisoners felt unsupported. ACCT documents had many shortfalls. Access to Listeners was good and the crisis suite was well equipped.*

I.31 The suicide and self-harm prevention strategy was a generic Prison Service Instruction and not tailored to the specific needs of the establishment. Despite this, staff we spoke to were appropriately focused on the risk factors for suicide and self-harm, and opened assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm for appropriate reasons. Staff carried anti-ligature knives, but around 150 were out of date with safer custody refresher training.

I.32 The safer custody committee covered suicide and self-harm prevention and violence reduction (see section on bullying and violence reduction). There was limited analysis of trends or patterns of self-harm, and the minutes did not reflect discussions or actions required (see housekeeping point I.29).

I.33 Between April and September 2013, there had been 80 incidents of self-harm which involved 26 prisoners; and 99 ACCT documents had been opened, both figures being higher than at similar prisons. A large number of prisoners on victim support monitoring self-harmed (see section on bullying and violence reduction).

I.34 There were some important shortfalls in the quality of ACCT documents: most care maps were inadequate, there was inconsistent case management, reviews lacked multidisciplinary input and were not recorded well, observations were not always at the required frequency, records were mostly observational and not reflective of any meaningful engagement with staff, and counselling available through the chaplaincy was rarely referred to. However, there was evidence that prisoners on ACCTs participated in regime activity. Staff were knowledgeable, and spoke in a caring way, about prisoners on ACCTs, but this was generally not reflected in the ACCT documents and many prisoners told us, and indicated in our survey, that they felt unsupported. Quality assurance measures were ineffective at effecting necessary improvements.

I.35 A multi-agency safety and health (MASH) meeting met weekly to discuss all prisoners on ACCTs and any others of concern. The meeting was well attended but it was unclear how issues from this meeting fed into the ACCT process or were communicated to prisoners or other interested parties (see also section on safeguarding).

I.36 Since the previous inspection, there had been three deaths in custody, all from natural causes, and the prison was addressing recommendations by the Prisons and Probation Ombudsman; however, these had not been consolidated into an action plan and were not consistently reviewed by the safer custody committee or reinforced where necessary (see recommendation I.25).

- I.37** Between April and September 2013, four prisoners at risk of suicide had been monitored on constant supervision. During the inspection, a prisoner attempted suicide and was subject to constant observation in a designated cell on house block 3, which was well equipped and also contained the prisoner's personal possessions. The Perspex-covered gate was frequently unlocked and supervising officers interacted well with him, and he was encouraged to engage with the regime. However, there was no sense of urgency to investigate this or other such incidents in order to learn lessons and prevent a reoccurrence.
- I.38** A total of 19 Listeners operated on a rota basis, which was adequate for the needs of the population, but some did not feel well supported by staff. In our survey, prisoners were positive about access to Listeners. The crisis suite was well equipped and used frequently but its use was not monitored.

Recommendations

- I.39** All staff should receive safer custody training and subsequent refresher training.
- I.40** The quality of assessment, care in custody and teamwork (ACCT) documents and support for those in crisis should be improved.
- I.41** All suicide attempts with potentially the most serious consequences should be investigated quickly and action taken to prevent similar incidents.

Housekeeping points

- I.42** Suicide and self-harm prevention data should be used more effectively to identify trends and patterns and take appropriate action.
- I.43** The prison should understand and address the reasons why Listeners feel unsupported.

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

- I.44** *Formal safeguarding arrangements were undeveloped but there was some evidence of prisoners being identified and appropriate referrals made for them to be looked after on their release.*

- I.45** There was no local safeguarding policy and there were no formal links with the local safeguarding adults board. Staff we spoke to were aware of a range of vulnerabilities, focused on relevant issues and generally aware of their personal responsibility to protect those at risk. No one at the prison was responsible for coordinating safeguarding referrals, although we were told that the mental health team were due to take on this role.

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).

- I.46** We were provided with some anecdotal evidence of prisoners with identified social care and mental health needs being referred to appropriate agencies in the community to assist with their care after release.

Recommendation

- I.47** **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.

- I.48** *Security arrangements were generally proportionate. Appropriate security objectives were set and monitored, and staff were focused on making the prison safer. In our survey, prisoners said illegal drugs were easily available. MDT tests did not support this. However, the prison was concerned about the availability of new psychoactive substances which current testing methods did not detect and so a clear picture of the extent of the problem was not available. The prison was aware of drug- and debt-related issues and was taking action to address them.*

- I.49** With the exception of strip-searching on reception, after visits and on entry to the segregation unit (see sections on early days in custody and segregation), security arrangements were proportionate. Security was afforded a high priority and the prison was properly focused on trying to maintain a safe environment. The security meeting was well attended and informed by an intelligence assessment report that allowed them to set and monitor appropriate objectives.
- I.50** In the previous six months, 1,965 security information reports (SIRs) had been processed efficiently, and target searching had been completed within acceptable timeframes and yielded good finds, including 'hooch' (illicitly brewed alcohol), drugs and drug paraphernalia, and mobile telephones. The main challenges facing the security department were preventing the trafficking of unauthorised items, including mobile telephones, illegal drugs and new psychoactive substances (see section on substance misuse), into the prison and protecting vulnerable prisoners from harm. The prison was fully sighted on drug- and debt-related issues (see section on bullying and violence reduction) and was proactive in trying to address them.
- I.51** In our survey, more prisoners than at comparator establishments and than at the time of the previous inspection said that it was easy to get illegal drugs and alcohol at the prison, and that they had developed a problem with drugs while there but there was inconclusive evidence to support this. The mandatory drug testing (MDT) rate was reported as 6.9% in the year to date, against a target of 8%. Overall testing rates had reduced and, although targets for random testing were met, suspicion testing was not always completed in time. Information sharing with the drug and alcohol recovery service (DARS) was good and there was a clear focus on reducing the ingress of illegal drugs and new psychoactive substances. The latter were not detectable by MDT and the prison had sourced separate tests to try to

ascertain the scale of the problem. The prison had a good relationship with the local police and shared information appropriately with other departments.

- I.52** Closed visits had been applied to 23 prisoners in the previous six months and were generally used for reasons relating directly to the trafficking of unauthorised items through visits. This restriction was normally applied for a minimum of three months, even when there was no further intelligence to support it.

Recommendations

- I.53** Prisoners should only be strip-searched on the basis of intelligence or specific suspicion.

- I.54** All suspicion drug testing should be undertaken in time.

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.

- I.55** *Prisoners' perceptions of the incentives and earned privileges scheme were generally negative but we found the scheme to be used effectively and to encourage positive behaviour. Demotion to the basic level appeared to be automatic and some demotions were unjustified. Targets set at reviews for prisoners on the basic level were mechanistic.*

- I.56** At the time of the inspection, 45% of prisoners were on the enhanced and 4% on the basic level of the incentives and earned privileges (IEP) scheme. In our survey, prisoners were more negative than those at comparator prisons across the IEP indicators. Prisoners' pay was unfairly linked to their IEP status.
- I.57** In the 30 case history notes we reviewed, staff had issued IEP warnings appropriately and recorded both positive and negative behaviour. The facilities list allowed further privileges for enhanced prisoners, such as extra private monies, two extra visits per month, electronic games, cell furnishings and extra telephone PIN allowance.
- I.58** The IEP policy stated that three warnings would trigger an IEP review and that warnings would be expunged after two months if there were no further warnings. The IEP review paperwork we examined showed that demotion to the basic level appeared to be automatic and there was no quality assurance of the process. We found some cases where demotion to basic had not been in line with the policy, including one where a prisoner had been demoted from enhanced to basic status for three minor warnings. The targets set at reviews for prisoners on the basic level were perfunctory and did not reflect the reasons for the original demotion.

Recommendation

- I.59 Prisoners on the basic level of the IEP scheme should be set behaviour improvement targets that are linked to the behaviour that resulted in the original demotion.**

Housekeeping point

- I.60** There should be a robust quality assurance and monitoring system for the IEP scheme.

Discipline

Expected outcomes:

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

- I.61** *Although it had reduced, the number of adjudications was higher than at similar prisons. Some records reflected poor exploration of charges before a finding of guilt. Use of force was considerably under-reported and was higher than the comparator. Too many records were incomplete and lacked detail. The special accommodation had not been used since the previous inspection. Throughput of the segregation unit was not excessive and, while many residents remained there for long periods, most were reintegrated back into normal location. The environment on the unit was poor and the regime for most was limited. Staff were knowledgeable about those in their care and engaged well. The collation and analysis of data across the spectrum of discipline were poor.*

Disciplinary procedures

- I.62** There had been 765 adjudications between April and September 2013, which was lower than at the time of the previous inspection but higher than at similar prisons. Prisoners were given sufficient time to prepare their case and were able to seek legal advice on request. The records of hearings that we reviewed demonstrated variable quality and some reflected insufficient exploration of the charge before a finding of guilt. Punishments were generally in line with published tariffs. Informal quality assurance measures were underdeveloped.
- I.63** The collation of data on adjudications was inadequate and data were not properly analysed or acted on at the often poorly attended adjudication standardisation meeting (see main recommendation S40). Around 14% of charges were dismissed, many because they were out of time.

Recommendation

- I.64 All disciplinary charges should be fully investigated, with clear reasons given for the decisions reached, and the quality assurance of adjudication records should be improved.**

The use of force

- I.65** Batons had been drawn but not used on two occasions between April and September 2013, and this action appeared to have been proportionate in both cases. We were told that all planned interventions were filmed and reviewed by the deputy governor but little such footage was provided for us to review. One film we were able to watch contained some unprofessional behaviour by staff, which we referred to the governor. Despite managing some challenging individuals, it was positive that staff had not used the special accommodation since the previous inspection.
- I.66** The collation of data on the use of force was poor (see main recommendation S40) and there was considerable under-reporting of the number of prisoners against whom force was used. Our investigation found 98 incidents between April and September 2013, rather than the 76 reported to us. This was higher than at similar prisons and supported the results of our survey, in which more prisoners than at comparator prisons said that they had had control and restraint (C&R) used against them. Most incidents involved the use of C&R techniques but were de-escalated quickly, and few resulted in the sustained use of force. The records we sampled were variable; many had insufficient detail and far too many were incomplete. The use of handcuffs and relocation to the segregation unit were not routine.
- I.67** A use of force committee met regularly and, unusually, included prisoner representation. A supporting report contained some useful analysis of data, particularly in relation to prisoners on the integrated drug treatment system or with mental health issues who had been restrained. However, it appeared that little was done when areas of concern were highlighted, and oversight of use of force data and records was inadequate.

Recommendation

- I.68** **The quality of use of force records and management oversight of them should be improved.**

Segregation

- I.69** Between April and September 2013, 77 prisoners had been segregated, which was lower than at similar prisons. Figures suggested that few prisoners sought refuge in the segregation unit but some remained there for long periods, for many differing reasons. In response to prisoners seeing segregation as a means of bypassing transfer procedures, the prison had adopted a strategy of only transferring prisoners directly from the unit in exceptional circumstances.
- I.70** Communal areas on the unit were clean but drab. Cells were in the process of being refurbished following systematic damage by prisoners earlier in the year. The fabric of some cells was damaged; the flooring in most, including the refurbished cells, was poor; some cells contained graffiti and most had dirty, unscreened toilets with a broken or no toilet seat. The shower area was shabby, dirty and insufficiently private. The large, bare exercise yard was austere, with a cage-like roof and no seating.
- I.71** New arrivals on the unit were generally strip-searched, often in the absence of any robust risk assessment (see recommendation I.53). Protocols for unlocking individual prisoners were proportionate to their risk.
- I.72** All prisoners had access to a basic daily regime, including showers, exercise and telephone calls. Other than some menial in-cell work for a couple of prisoners, the regime for most

was limited. Education staff did not visit the unit and there were insufficient opportunities for off-unit activities. Prisoners were not permitted to have a television in their cell and many complained of a lack of constructive activity to keep them occupied.

- I.73** Multidisciplinary reviews of prisoners in segregation were timely but authorising documentation was often completed poorly and many targets were perfunctory. Most prisoners were reintegrated into normal location and there was some evidence of reintegration planning through the review process.
- I.74** In our survey, fewer prisoners than at similar prisons said that they had been treated well by segregation unit staff but those we spoke to were complimentary about most such staff. Staff were knowledgeable about the prisoners in their care and we saw some positive interactions.
- I.75** The collation of data on segregation was poor (see main recommendation S40). Although segregation was monitored, the data were not used in a meaningful way to identify and address trends.

Recommendations

- I.76** **The environment and regime in the segregation unit, including the exercise yard, should be improved.**
- I.77** **Segregation review documentation should be completed thoroughly and include meaningful targets.**

Substance misuse

Expected outcomes:

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

I.78 *The regular substance misuse meeting was well attended but issues of diverted medications had not been discussed for a long period. Prisoners were positive about the support they received from substance misuse services.*

- I.79** Substance misuse services were provided by Lifeline Project Limited, a charitable drug and alcohol service. Clinical services were subcontracted to Delphi Medical, an independent provider of drug and alcohol clinical services. There was an up-to-date substance misuse policy and strategy for drugs and alcohol. There was a good service model and a health needs assessment had started. The latter was in its infancy and contained no recommendations, but its completion had been planned.
- I.80** All prisoners received initial screening on arrival and those with a drug and/or alcohol use problem were referred to the clinical substance misuse service and the DARS.
- I.81** At the time of the inspection, there were 101 prisoners on substitute drugs. There were 90 prisoners on methadone, of whom 44 were actively detoxing, 30 were being maintained and 16 were stabilising. There were 11 prisoners on subutex. Prescribing regimes were flexible and prisoners praised the support of the team during their clinical reviews. There was access to a doctor twice a week and a non-medical prescriber when required. There were good

links with the health care department for medication reviews and symptom management when required.

- I.82** The DARS held a caseload of 250 prisoners, which was high because of staff vacancies, although this was being addressed. There was good access to psychosocial interventions such as the Lifeline Recovery and SMART Recovery programmes. Alcoholics Anonymous, but not Narcotics Anonymous, support was available. There was good use of peer mentors and links with the gym. We saw a range of health promotion information concerning substance abuse, although it was not always focused on the issues of concern in the prison – for example, the use of new psychoactive substances such as ‘black mamba’ and ‘spice’ (see section on security).
- I.83** There was effective integration of the services available, and prisoners reported positively about their experience. There was a regular substance misuse meeting, which was well attended; however, we noted that there had not been a health care representative or report for three months, which meant that issues relating to diverted medications had not been discussed (see sections on security and health services).
- I.84** Care was well coordinated at weekly multidisciplinary meetings, which included representatives from mental health services. Smoking cessation advice was available from the primary health care team. Record keeping and governance arrangements were reasonably good.

Recommendation

- I.85** **The drug and alcohol health needs assessment should include clear recommendations to develop future services.**

Housekeeping points

- I.86** The health care department should provide information about divertible medications to every substance misuse meeting.
- I.87** There should be robust health promotion planning that includes access to information about new psychoactive substances such as ‘black mamba’ and ‘spice’.

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** *Although some areas of the prison were old, communal areas and cells were clean. Some in-cell toilets were insufficiently screened. There was good access to showers. Not all prisoners could wear their own clothes and access to stored property had started to worsen. Some general applications were not dealt with promptly. Rules and routines were enforced fairly by staff. Mail procedures and access to telephones were satisfactory.*
- 2.2** Communal areas across the establishment were clean, although some areas on house blocks 1 to 4 were old and shabby, with damage to the flooring. External areas were well maintained. Access to cell cleaning materials was good and the cells we saw were clean. There was an offensive display policy, which was fully adhered to by prisoners, and we found no graffiti in the cells.
- 2.3** There were a few double cells on house blocks 1 to 4; these were small, cramped and not suitable to accommodate two prisoners. All cells on house block 5 had double occupancy and, although cupboards were available for storing personal possessions, no padlocks had been issued, even though a supply was available. In our survey and our groups, prisoners were positive about cell call bells being answered quickly, and our observations concurred with this.
- 2.4** House blocks 1 to 4 had in-cell toilets that were insufficiently screened; house blocks 5 and 7 had suitable separate toilet areas and house block 6 had no in-cell sanitation, although there was 24-hour access to a communal recess.
- 2.5** There was good access to showers and 97% of respondents in our survey said that they were able to shower daily. Communal showers were clean, private and mostly in a good state of repair. House block 7 had in-cell showers and this facility was appreciated by the prisoners residing there.
- 2.6** Most prisoners were not allowed to wear their own clothes, with only those prisoners on house blocks 6 and 7, which were wings for enhanced prisoners, afforded the privilege. These two wings had laundries, which worked well. In our survey, fewer prisoners than at comparator prisons said that they received clean and suitable prison clothing weekly. We saw many examples of shabby prison clothing and some prisoners told us that once they received a decent set, they kept them and laundered them in their in-cell sinks.
- 2.7** In our survey, more prisoners than at comparator prisons said that they were able to access their stored property promptly. The process had started to deteriorate in recent weeks and we found a backlog of 62 reception applications, dating back to August 2013. In the previous six months, 7% of all formal complaints related to property.

- 2.8** Prisoners told us that it was easy to make a general application but many said that some departments took too long to answer, and that on many occasions their application had not been dealt with fairly. We saw a number of curt replies to applications.
- 2.9** Rules and routines were explained during induction and every new arrival received a written code of conduct that laid out what was expected from the prisoner and the prison. Staff we observed and the case history notes we reviewed demonstrated a consistent and fair approach to the enforcement of these rules.
- 2.10** Incoming and outgoing mail was dealt with expeditiously and there was adequate access to telephones, although the early lock-up time (see section on time out of cell) meant that contact with families for some prisoners was problematic.

Recommendations

- 2.11** Cells designed for one prisoner should not be used to hold two.
- 2.12** Toilets in cells should be sufficiently screened.
- 2.13** Prisoners should be issued with high-quality clothing each week.

Housekeeping points

- 2.14** Padlocks should be issued to enable prisoners' personal lockers to be secured.
- 2.15** Applications to access stored property should be dealt with expeditiously.

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.

2.16 *In general, relationships across the prison were positive, with only a handful of staff who did not fully engage with prisoners. The use of preferred names was developing. Case history notes were good but the personal officer scheme needed improvement. Consultation arrangements were effective.*

- 2.17** Most prisoners felt that staff treated them respectfully, but that there were a few belligerent staff who did not engage positively with them; the prison was aware of these staff. We saw some impressive interactions; for example, in reception, we saw two prisoners being discharged, both of whom shook hands with staff and thanked them for all they had done for them.
- 2.18** Case history notes were well presented, regular and reflected both the positive and negative behaviour of prisoners. Preferred names were mostly used in written documentation but were less embedded verbally, and we heard some staff use surnames to address prisoners.

- 2.19** In our survey, only 62% of respondents, against the 73% comparator, said that they had a personal officer. Some prisoners we interviewed had not been introduced to their personal officer and did not know who they were. However, staff knew which prisoners they were responsible for and had a good understanding of their issues, and this was reflected in case history notes.
- 2.20** Prisoner consultation through the prison council was regular and meaningful, although some action points took nearly three months to be completed. There were many prisoner representatives, across a number of departments, and they were appreciated by other 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.

- 2.21** *Equality and diversity were well integrated throughout the prison but there was insufficient consultation with some groups. Discrimination reports were investigated thoroughly. There was good equality monitoring and we found no evidence of discrimination. The strategic management of foreign national prisoners required improvement. Provision for prisoners who were older, gay or with disabilities was good.*

Strategic management

- 2.22** The equality and diversity agenda was led by the governor and was thoroughly embedded throughout the establishment. There was no overarching policy that was specific to the establishment but there was a separate foreign national policy. The equality committee met bimonthly, chaired by the governor, and there was an effective equality action plan which was regularly updated at the meeting.
- 2.23** Each protected characteristic was driven by a senior manager, supported by an officer on each wing. A full-time equality coordinator was supported by the foreign nationals officer, and four full-time and a number of part-time prisoner equality peer workers. This structure ensured that all new arrivals were seen on the induction unit and their needs assessed. The full-time peer workers had all achieved a level 2 national certificate for further education (NCFE) in equality and diversity. They had unrestricted access around the establishment to conduct their duties.
- 2.24** There had been 41 discrimination incident reporting forms (DIRFs) submitted in the previous six months, which was slightly higher than at similar prisons. There was good access to DIRFs throughout the prison. Those we examined had been investigated to a good standard and appropriately acted on. Internal and external quality assurance processes were effective.

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

- 2.25** Systematic monitoring and analysis of race equality (SMART) data were collated monthly and analysed at the equality committee. With the exception of segregated white prisoners, there were no areas which had been out of range for more than a month. Out-of-range data had been fully investigated and reported through the equality committee for any subsequent action. The establishment did not monitor prisoner treatment and equality against any other protected characteristics; however, we found no evidence of discrimination against any minority groups.
- 2.26** Consultation with prisoners from minority groups was variable; some groups met monthly, while others had no specific forum. The promotion of equality and diversity throughout the establishment was impressive. There were many positive displays about each protected characteristic; a magazine promoting equality and diversity was produced by peer workers; and there were regular events celebrating different religious festivals and cultural events. There was regular promotion of various disabilities to increase knowledge and understanding about them. Community engagement was excellent, with a number of groups regularly attending the equality committee and recently participating in a cultural awareness event.

Recommendations

- 2.27** **The prison should have an equality policy which is specific to the population at Featherstone, including arrangements for the monitoring of equality against all protected characteristics and detailing the provision for prisoners from each minority group.**
- 2.28** **There should be effective consultation arrangements for all minority groups.**

Protected characteristics

- 2.29** Black and minority ethnic prisoners accounted for around 32% of the prison population. In our survey, black and minority ethnic prisoners reported more positively around indicators of safety than their white counterparts. Some black and minority ethnic prisoners in our groups held the perception that they were less likely than white prisoners to attain category D status. We found no evidence to support this view but, as there was no specific consultation with this group, the prison was unaware of this perception.
- 2.30** Eleven prisoners had identified themselves as Gypsy, Romany or Travellers. A support group met monthly in the chapel and had recently celebrated a Travellers event. They said that they were treated equally and felt supported by the prison, and our findings concurred with this.
- 2.31** At the time of the inspection, the prison held 73 foreign national prisoners. Until recently, the foreign nationals coordinator had met all new arrivals, explained his or her role and offered support but this no longer regularly occurred. Some foreign nationals were unaware that there was specific support for them. Consultation included a weekly drop-in surgery and a monthly meeting. There was little use of professional interpreting services and limited availability of information translated into languages other than English. There was an over-reliance on some peer workers to interpret for fellow prisoners.
- 2.32** At the time of the inspection, there were eight foreign national prisoners being held beyond the end of their sentence under immigration powers, the longest period being 11 months. These detainees did not have access to the facilities available at an immigration removal centre, such as the internet, fax machines and a less restrictive regime. Immigration enforcement staff attended the prison every six weeks and regularly saw over 20 foreign

national prisoners in a morning. Many foreign national prisoners said that they felt unsupported by immigration staff, and current provision was insufficient to meet demand. There was no independent immigration advice. The prison offered foreign national prisoners a free monthly five-minute telephone call. There was good provision of English for speakers of other languages (ESOL) in the education department and a wide variety of foreign language literature in the library.

- 2.33** Around 15% of the prison population were Muslim, and in our survey Muslim respondents more than non Muslim prisoners said they had been victimised by other prisoners or staff. We found little evidence of this, but the prison had not adequately addressed these perceptions.
- 2.34** Diversity peer workers helped prisoners to complete a disability questionnaire on arrival, and at the time of the inspection 70 men had identified themselves as having a disability; however, around double this number identified themselves as such in our survey. A number of reasonable adjustments had been made for such prisoners, and they had been involved throughout the process. There was a paid 'buddy' scheme (prisoners supporting peers with disabilities – for example, collecting meals for those who struggle with stairs). Personal emergency evacuation plans (PEEPs) had been prepared for all prisoners who required one, and were comprehensive. Staff were aware of all prisoners with a PEEP. There were no consultation arrangements for prisoners with disabilities but those we spoke to said that Featherstone was the most supportive prison they had been to. Several staff and prisoners were undertaking level 1 in British Sign Language to assist in communicating with a number of deaf or partially deaf prisoners.
- 2.35** There was only one prisoner over the age of 65 at the time of the inspection. Retirement pay was comparable with other pay rates and there was no charge for in-cell television. A bimonthly meeting was held for prisoners over the age of 50 and the PE department provided regular activities for this group, including bowls and a walking club.
- 2.36** Five prisoners had identified themselves as gay or bisexual to the equality team. The provision for these prisoners was good. A regular consultation group was held for them, and those we spoke to said that they felt supported. There was good promotion and celebration of differences in sexual orientation throughout the prison, and links with community groups, including the health promotion charity, 'Staffordshire Buddies', were impressive.

Recommendations

- 2.37** **Support for foreign national prisoners should be improved, including access to independent immigration advice.**
- 2.38** **The prison should investigate and address the negative perceptions of Muslim and black and minority ethnic prisoners.**

Housekeeping point

- 2.39** The prison should accurately record the number of prisoners with disabilities.

Good practice

- 2.40** *Several staff and prisoners were undertaking level 1 in British Sign Language to assist in communicating with a number of deaf or partially deaf prisoners.*

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.

2.41 *The chaplaincy was well integrated into prison life. With the exception of facilities for Muslim prayers, faith provision was good.*

2.42 The chaplaincy was well integrated into all aspects of prison life and covered all major faiths. Faith facilities were reasonable for most corporate services but inadequate for the large number of Muslim prisoners attending Friday prayers. On some occasions, these prisoners had used a kitchen area adjacent to the main room as an overflow for Friday prayers. In our survey, more prisoners than at comparator prisons said that their religious beliefs were respected, that they were able to speak to a religious leader of their faith in private and that it was easy to attend religious services. Access to corporate services was unrestricted. There was good promotion of religious festivals. The chaplaincy provided and facilitated a wide range of classes and groups.

Recommendation

2.43 **The room allocated for Friday prayers should be suitable for the numbers attending.**

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.

2.44 *Prisoners were negative about the formal complaints system. Most responses to complaints were good but a few were inappropriate.*

2.45 In our survey, 29% of respondents said that formal complaints were dealt with quickly and 27% that they had been prevented from making a complaint, which were worse than the comparators of 36% and 17%, respectively. Complaint forms were readily accessible on all wings, with notices explaining, in a range of languages, how to make a complaint.

2.46 Most complaints were answered quickly. The standard of responses was generally good, with most addressing the prisoner by his preferred name, demonstrating sufficient investigation of the issue and answered at the appropriately level. However, we found a few curt replies that had been inappropriately addressed and not answered the issue raised. A random 10% of responses were quality assured and this had led to some issues being addressed, but more checks were required to ensure further improvement. Senior managers analysed complaint trends at the monthly performance meeting.

Recommendation

- 2.47** Quality assurance processes should be reviewed to ensure that responses to complaints are timely, answer the points being raised and use appropriate language.

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.

- 2.48** *Legal services provision was inadequate. Legal correspondence was not always opened in the presence of the prisoner.*

- 2.49** A trained legal services officer provided advice on criminal court and extradition appeals and accessing a legal adviser, and assisted with complaints to the legal ombudsman, but did not see all new arrivals during the induction process. A wide selection of legal material was available in the library. Prisoners in our groups were unaware of the legal services provided.

- 2.50** In our survey, 55% of respondents said that staff had opened letters from their solicitor or legal representative when they were not with them, against the 41% comparator. A record of legal correspondence opened in error showed that this had occurred regularly.

Recommendations

- 2.51** All new arrivals should have access to appropriate legal services advice.
- 2.52** Staff should only open mail from solicitors or legal advisers in the presence of the prisoner.

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.

- 2.53** *The health services provided were reasonable. Prisoners had good access to primary care nurse assessment and advice but waits to see the GP were too long. A prisoner health trainer provided health promotion advice and information. Physiotherapy was used to support appropriate prescribing for pain. Too many hospital appointments were cancelled owing to a lack of escort staff. Supervision of medicines administration was inadequate. There was good access to the dentist. Mental health care provision was reasonable but lacked access to talking therapies.*

Governance arrangements

- 2.54** Health services were commissioned by NHS England and provided by Staffordshire and Stoke on Trent Partnership NHS Trust. There were regular cluster partnership board meetings, with appropriate representation and a focus on health outcomes for prisoners. A new health needs assessment was due to be published but excluded mental health needs.
- 2.55** The governance structure provided appropriate monitoring and development of services. Policies were comprehensive, including information sharing consent and infection control, but most were out of date and there were gaps in adaptation for the prison environment.
- 2.56** There was active health promotion, with excellent use of a prisoner health trainer to run daily well-being clinics. Up-to-date, relevant health promotion literature was distributed across the house blocks, although there was none available in languages other than English. Professional telephone interpreting services were underused. The prisoner health forum had not met since June 2013.
- 2.57** There was daytime nursing cover on weekdays and weekends, and evening cover on weekdays. Medical cover by the local NHS out-of-hours service met urgent care needs, with a timely response by emergency ambulances.
- 2.58** Automated external defibrillators were sited in locked cabinets across the prison, and discipline and nursing staff could access them. In the previous year, five discipline staff members had received first-aid training and two had received defibrillator training, with several staff booked for refresher training in the following three months.
- 2.59** The confidential health care complaint system mirrored that in the local community and encouraged prisoners to report concerns, rather than submitting formal complaints, in the first instance. There had been 166 complaint/concerns reported since January 2013 and most had related to access and waiting times for services.
- 2.60** There was regular reporting and monitoring of incidents. In the previous three months, 40 incidents had been reported, of which 15 had been related to inadequate staffing and 15 to cancellation of external hospital appointments due to a lack of escort staff, which was a regular occurrence (see also section on dentistry).
- 2.61** Low nursing staff levels were regularly reported and there were sometimes too few registered nurses adequately to supervise health support workers. There had been a reduction in discipline officer cover for health care clinics.
- 2.62** Mandatory training for some staff was not up to date. Clinical supervision arrangements were good.
- 2.63** Clinical rooms in the health care department and house blocks were clean and met infection control standards. A satisfactory infection control audit had been completed in December 2012. Cleaning arrangements were reasonable.

Recommendations

- 2.64** **The health needs assessment and health care policies should be up to date, readily available to staff and adapted where necessary to reflect the prison environment. The health needs assessment should include mental health needs.**

- 2.65** There should be increased use of professional telephone interpreting services, and health care literature, in a range of languages, should be readily available for prisoners with a poor understanding of English.
- 2.66** A risk assessment should be carried out on the impact of low nursing staff levels and reduced discipline officer cover on health outcomes for prisoners.

Housekeeping points

- 2.67** The prisoner health forum should resume regular meetings.
- 2.68** All discipline staff should have up-to-date first-aid training, including use of defibrillators.

Good practice

- 2.69** *The use of the health trainer to run well-being clinics encouraged and supported healthy living.*

Delivery of care (physical health)

- 2.70** Prisoners received a health screen on arrival; this was a combined reception and secondary health assessment and was often conducted by a health care support worker. Information on disability was shared with prison staff, and consent to information sharing was explained to prisoners.
- 2.71** Prisoners had good access to nursing staff, with twice-daily medication administration sessions on the house blocks and daily nurse triage clinics. Prisoners attended the health care centre unescorted, using an appointment slip. A prisoner 'runner' distributed the appointment slips and also provided information on how to access services.
- 2.72** Too many GP appointments were lost because of non-attendance, and the reasons for this were not clear. In our survey, fewer prisoners (27%) than at comparator prisons (32%) said that access to the doctor was good. We found waiting times of between 13 and 16 days for a routine GP appointment.
- 2.73** Regular physiotherapy clinics supported effective management of musculoskeletal problems and related pain management, and there were 'exercise on prescription' clinics in the gym. The waiting list for the podiatrist was too long. Access to an NHS optometrist clinic was excellent, with short waiting times.
- 2.74** There was reasonable management of long-term conditions for most men, with designated nurse-led clinics for some conditions supported by good GP-led care. There were some gaps in formal care planning with the prison. We saw an older man with progressive nutrition and memory problems, for whom there was no shared care plan with residential staff to meet his health needs.
- 2.75** Clinical records on SystmOne (the electronic clinical record) were completed appropriately. Diagnostic tests were well managed by the GPs, and the task communication system supported good and timely communication to meet patient needs.

Recommendations

- 2.76** Health screening on arrival or transfer should be robust and ensure that prisoners' health needs are identified early, with attention to those men who may not disclose issues immediately.
- 2.77** Joint care planning with prison staff should ensure positive health outcomes and identify any deterioration in health promptly.

Housekeeping point

- 2.78** Waiting times for the GP should be equitable with those in the community and the 'did not attend' rate should be reduced to support this.

Good practice

- 2.79** *A prisoner 'runner' distributed health care appointment slips and signposted prisoners to services.*
- 2.80** *The use of physiotherapy to support clinically appropriate prescribing for pain, and 'exercise on prescription' in the gym reflected best practice in the community.*

Pharmacy

- 2.81** Pharmacy services were provided by Lloyds Pharmacy. There was a separate provider for the integrated drug treatment system (IDTS). The pharmacist visited the prison fortnightly and a pharmacy dispenser visited weekly.
- 2.82** Supervised and in-possession medicines were administered twice a day on the house blocks, and controlled drugs were administered from the main health care department. We saw one young man receiving his Concerta XL medication (for attention-deficit hyperactivity disorder) several hours late, and this appeared to be a regular occurrence.
- 2.83** GPs adhered to clear criteria for prescribing strong pain medication. Health services staff conducted spot checks when prisoners could not satisfactorily explain missing tradable medications. We saw poor supervision by officers at the hatches, resulting in the potential for diversion and lack of confidentiality during administration of medications (see main recommendation S41).
- 2.84** Missed doses were not always recorded or followed up and there was no clear link back to the prescriber or supplying pharmacist to monitor these. We found examples of reissued prescriptions, even though the prisoners concerned had not collected previous supplies.
- 2.85** All prescribing was on a named-patient basis, other than for over-the-counter remedies. Methadone and subutex was ordered as stock by IDTS staff. Prescriptions were generated from SystemOne and supplied via a fax to Lloyds. Prisoners ordered their own in-possession medications. Nurses used the over-the-counter remedies policy to administer for simple ailments. There were a range of patient group directions.
- 2.86** The pharmacist conducted targeted medicines use reviews and saw patients on request. She was not routinely aware of which prisoners were receiving methadone or subutex.

- 2.87 The in-possession policy was out of date and risk assessments were not routinely attached to patient records.
- 2.88 Medicines storage was generally sound but we saw some loose, unlabelled medication being administered from envelopes belonging to new arrivals. The controlled drugs cupboard was not adequately bolted to the wall.
- 2.89 The pharmacist was invited to the medicines management meeting twice a year.

Recommendations

- 2.90 **Missed medications should be followed up and prescribers informed, to ensure therapeutic prescribing and that complete records of administration of medicines are routinely available to the pharmacist.**
- 2.91 **Pharmacy clinics should be provided, to reflect community arrangements.**
- 2.92 **Arrangements for in-possession medicines should ensure that up-to-date risk assessments are readily accessible to prescribers and nursing staff.**

Housekeeping points

- 2.93 Prescribed medications should only be administered from properly labelled packs.
- 2.94 The controlled drugs cupboard should be suitably bolted to the wall.
- 2.95 The pharmacist should attend medicines management meetings at least quarterly.

Dentistry

- 2.96 Prisoners waited up to five weeks for a routine dental appointment and there were 61 on the waiting list at the time of the inspection. Urgent cases were prioritised. The full range of routine NHS treatments was available. We came across one prisoner waiting for more complex dental surgery, whose external appointment had been postponed for three months owing to a lack of escorts (see recommendation 2.64). In our survey, more prisoners (17%) than at comparator prisons (13%) said that it was easy to see the dentist.
- 2.97 Clinical records were satisfactory, with appropriate details recorded and accessible to other clinicians on SystemOne and stored securely in locked cabinets.
- 2.98 Local anaesthetic was stored in the pharmacy room, which prevented quick access by the dentist.
- 2.99 The dental suite was clean and compliant with infection control requirements and national guidance. Servicing and regular checks of specialist equipment, including the ultrasonic bath and the autoclave, were up to date. The analogue X-ray equipment had received a satisfactory radiological protection service visit in June 2012. Records for the dental chair were not kept in the dental suite.

Housekeeping points

- 2.100** Local anaesthetic should be stored in a locked cupboard in the dental suite, to facilitate timely access by the dentist.
- 2.101** Copies of servicing and maintenance records for the dental chair should be retained in the dental suite.

Delivery of care (mental health)

- 2.102** Registered mental health nurses (RMNs) provided primary mental health services and acted as the gateway into all mental health services. There was effective and flexible integration between primary and secondary mental health services.
- 2.103** The threshold assessment grid (TAG) was used to determine mental health needs on arrival and there was an open referral system, including self-referral. RMNs assessed prisoners if they met the TAG threshold and/or if there was concern about their mental health.
- 2.104** Non-urgent cases were seen by the primary mental health team within a maximum of three weeks from referral, and at the time of the inspection there were eight men waiting to be assessed. Dedicated clinics provided prisoners with a reasonable level of care but there was no access to talking therapies, such as cognitive behavioural therapy or counselling.
- 2.105** Prisoners with severe and enduring mental health needs were initially identified by the primary mental health team and then assessed and treated by the mental health in-reach team (MHIRT) from South Staffordshire and Shropshire Healthcare NHS Foundation Trust. All specialist prescribing was done by the psychiatrist and monitored by the MHIRT. The need for special monitoring of atypical prescribing had recently been identified through a death in custody.
- 2.106** At the time of the inspection, there were 49 men on the MHIRT team caseload. Prisoners were usually seen within seven days and always within a target time of four weeks for non-urgent cases. Urgent referrals were prioritised and could usually be seen within 24 hours.
- 2.107** A weekly in-reach multidisciplinary team meeting was held off-site; there were plans to introduce a joint multidisciplinary team meeting between primary and in-reach mental health teams but, other than the wider prison multi-agency safeguarding hub (MASH) meeting, there was no formal mechanism for this. There was appropriate recording, using SystemOne, for both consultations and care programme approach risk assessments and care plans.
- 2.108** Mental health staff told us that discipline staff were generally sensitive to prisoners with mental health-related behaviour and distress. Approximately 23% of prison staff had received mental health awareness training in the previous year. Because of this, men waiting for transfer to secure mental health placements were usually able to stay in the house blocks pending transfer, rather than being sent out to a prison inpatient unit. In the previous year, two men had been transferred to prison inpatient units (one of whom had subsequently been transferred to a secure placement), and three had been transferred directly to secure placements. At the time of the inspection, all the prisoners waiting for direct transfer had waited at least three weeks, and two had waited more than five weeks.

Recommendations

- 2.109 Talking therapies should be available, to support good rehabilitation.**
- 2.110 Regular multidisciplinary team meetings between primary and in-reach clinicians should be scheduled, to enable formal clinical case management.**

Good practice

- 2.111** *Prison staff's awareness of mental health problems enabled men waiting for a secure hospital placement to stay on the house blocks rather than transfer to unfamiliar prison inpatient units while waiting for transfer.*

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.

2.112 *Prisoners were negative about the food provided, and some portion sizes were too small. The standard of cleanliness in the kitchen and serveries was good. Opportunities to dine out were limited. Consultation arrangements were adequate.*

- 2.113** In our survey, fewer respondents than at comparator establishments and than at the time of the previous inspection (21% versus 26% and 27%) said that the food provided was good. Prisoners told us that the quality of the food was generally satisfactory but that portion sizes were too small. We found the menu to be nutritionally balanced but that supervision at the serveries was inadequate, which meant that portion sizes were inconsistent.
- 2.114** The menu operated over a four-week cycle. Hot options were provided for lunch and the evening meal. The menu accommodated vegan, vegetarian, religious, healthy and medical diets. Fruit and vegetables were available daily. Meals were served at noon and 5pm. Breakfast cereals for the week were issued at the start of the week and breakfast packs were issued on the day before intended consumption. Many prisoners told us that they ate the packs on the evening they received them, leaving a long gap until their next meal. The food we sampled was of a reasonable quality. There were too few tables and chairs to allow all prisoners to dine in association.
- 2.115** The kitchen was large, clean and well equipped. Halal food was stored and prepared separately from other food. Wing serveries were clean and serving tools appropriately marked to prevent cross-contamination. Prisoners who worked there could achieve a range of qualifications, up to a level 2 National Vocational Qualification.
- 2.116** Prisoners were consulted about the food through a twice-yearly survey, the prisoner council meeting and the use of food comments books.

Recommendations

- 2.117 Staff supervising the serveries should ensure that portions of food are adequate and consistent.**
- 2.118 Breakfast packs should be issued on the day they are to be eaten.**

Housekeeping point

- 2.119 Opportunities to dine in association should be increased.**

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 *Some new arrivals waited too long for their first prison shop order. Black and minority ethnic and Muslim prisoners were negative about the range of items available.*

- 2.121** New arrivals received a reception grocery pack (see section on early days in custody) but, depending on their day of arrival, some had to wait up to 10 days before they could receive their first order from the prison shop, although they could buy extra reception packs if they had funds.
- 2.122** In our survey, only 16% of black and minority ethnic respondents, against 54% of white respondents, and 6% of Muslims, against 48% of non-Muslims, said that the shop sold a wide enough range of goods to meet their needs. The list of goods appeared to be reasonable but there was no specific consultation about the needs of minority groups. General consultation about changes to the shop list took place through the prisoner council, which collated prisoners' suggested changes on each wing.
- 2.123** Prisoners were able to order goods from several catalogues, but had to pay an administration fee of 50 pence on these orders.

Recommendations

- 2.124 Prisoners should be able to place a full shop order within 24 hours of arrival.**
- 2.125 Prisoners should not have to pay a catalogue administration fee.**

Housekeeping point

- 2.126** Consultation with black and minority ethnic and Muslim prisoners about the items available through the prison shop should be improved.

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** *Time out of cell for most prisoners was impressive and, although too many were locked up during our roll checks, this was due to unusual circumstances.*
- 3.2** The daily activity schedule (core day) indicated that a fully employed prisoner could achieve over 10 hours out of cell from Monday to Friday, and an unemployed prisoner just over four hours; at the weekend, all prisoners could achieve nearly eight hours out of cell. There was little regime slippage and these times were generally adhered to.
- 3.3** At roll checks during the morning and afternoon, we found about 19% of the population locked in their cells; this was mitigated by unusually high sickness levels in staff and prisoners at the time of the inspection, which had closed two work areas. At the time of the checks, we found around 60 prisoners who were either suffering sickness or whose work area was closed due to sickness; this equated to around half of those locked up (see section on learning and skills and work activities).
- 3.4** Exercise was offered twice a day, at lunchtime and after the working day had ended. Association was offered daily but ended at 6.30pm, in line with the regional policy. Cardiovascular rooms on the house blocks were appreciated by prisoners. Some association equipment was in need of replacement.

Housekeeping point

- 3.5** Association equipment should be fit for purpose.

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.

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 management of learning, skills and work activities was good. There were sufficient activity places to occupy most of the prison population, although some work was mundane and lacked challenge. There was a good process for allocating prisoners to activities. Learning and skills facilities and activities were good and most work areas reflected commercial work practices, particularly in standards of work and production levels. Attendance and punctuality at activities were generally good. The Offender Learning and Skills Service (OLASS) education provider had a suitable range of programmes to meet most learners' needs, and qualification success rates were high. A wide range of vocational training programmes were available through partner colleges and success rates were high, although there were no opportunities to progress to higher-level qualifications in construction programmes. The library was well staffed and well resourced, with a wide range of books and other materials.*

3.7 *Ofsted⁵ made the following assessments about the learning and skills and work provision:*

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

Management of learning and skills and work

- 3.8** The leadership and management of learning and skills were good. Effective partnership arrangements resulted in a wide range of vocational programmes being available and some good production work opportunities. However, construction programmes had no progression to higher-level qualifications, and further work was required by partner organisations to prevent duplication, share information and maximise the use of available resources.
- 3.9** Managers were responsive to external pressures in realigning their learning provision while continuing to meet the needs of learners. In response to the prison core day requirements, the education department was reorganising staff contracts, and there were well-advanced plans to introduce further vocational training and change the education provision to full time. However, learners were concerned about the potential detrimental impact of full-time education on their work responsibilities in the prison.
- 3.10** The Offender Learning and Skills Service (OLASS), provided by Milton Keynes College, was good. Quality improvement processes were good. Regular quality improvement group meetings involved all partners and focused well on monitoring and improving the provision. Regular systematic quality checks were carried out by prison managers to monitor and improve learning and skills programmes. The process for allocating prisoners to activities

⁵ Ofsted is the Office for Standards in Education, Children's Services and Skills. It reports directly to the UK Parliament and is independent and impartial. It (inter alia) inspects and regulates services that provide education and skills for all ages, including those in custody. For information on Ofsted's inspection framework, please visit: <http://www.ofsted.gov.uk>.

was good and new prisoners were individually interviewed by the allocations board to identify the best initial activity area for them. The teaching and learning we observed were adequate. The self-assessment report failed to include all areas of learning and skills across the prison. Attendance and punctuality were generally good.

- 3.11** Prisoners' educational needs, identified by the National Careers Service (NCS) at the start of their time in the prison, were not always included in the sentence plan (see also section on reintegration planning). These needs were not always addressed if prisoners did not want to attend education programmes.

Recommendations

- 3.12 Opportunities for learners to progress to higher-level qualifications in construction programmes should be provided.**
- 3.13 Education and training requirements should be included in sentence plan targets if identified as potential barriers to progression by the National Careers Service during initial advice sessions.**

Housekeeping points

- 3.14** All the learning and skills providers in the prison should work together, more effectively sharing information, plans and resources.
- 3.15** The full range of learning and skills across the prison should be included in the self-assessment report.

Provision of activities

- 3.16** There were enough activity places available to engage 96% of the prison population in purposeful activity. The range of provision in vocational training and education was good. The education department focused on functional skills from entry level 1 to level 2 in English and mathematics. The provision also included courses up to level 2 in English for Speakers of other Languages (ESOL), a range of personal development programmes, hospitality, art and design, music, computer games development, an information technology (IT) qualification, customer services, hard landscaping, barbering and business enterprise.
- 3.17** Vocational training programmes and qualifications in addition to those funded through OLASS were provided by Dudley College, Stoke College and an independent training provider, N-ergy. They provided a wide range of programmes that included construction trades, engineering, fabrication and welding, manufacturing, warehousing, motor vehicle maintenance, industrial cleaning, catering, customer service, horticulture and team leading.
- 3.18** Prison work was available in engineering contract workshops, contract services workshops, stores and warehousing, printing workshops, textiles, recycling, cleaning, assembly and manufacturing work, kitchen work and gardens. Most of the work was purposeful and provided men with opportunities to gain useful work skills. However, some of the contract services work was mundane and insufficiently challenging or stimulating.
- 3.19** The virtual campus (internet access for prisoners to community education, training and employment opportunities) provision was very good. A wide range of programmes was available in English and mathematics, together with training materials for vocational training

programmes, access to current job vacancies, learning packages for CV writing and preparation for interviews. Learners had good access to IT in classrooms and some laptop computers were available.

Housekeeping point

- 3.20** The work provided in some of the contract services areas should be more stimulating and challenging.

Quality of provision

- 3.21** Teaching, learning and assessment were good. Sessions were well planned and tutors exercised flexibility to adapt sessions according to issues and interests raised by learners. Tutors managed the long learning sessions well. They were skilled at introducing a wide range of short, relevant learning activities, for a diverse range of abilities, maintaining learner interest and motivation at an appropriate pace. Trained prisoner mentors provided effective support in classrooms and workshops.
- 3.22** Tutors checked that learning goals were being achieved throughout and at the end of learning sessions. Learners completed their learning logs but the content and quality of these were not checked sufficiently. Some session objectives included references to employability but too often there was no reference to work situations. Relationships between staff and learners were good and in most cases conduct was good and inappropriate language was challenged. Learning support materials were of a good quality.
- 3.23** The use of information learning technology was good and learners used the technology to demonstrate their learning effectively. Individual learning plans included relevant long-term targets to enable learners to progress with their main qualification but not all recorded learners' progress in lessons or what they needed to do to improve their work.
- 3.24** Initial and diagnostic assessments were effective in identifying the support that learners required to develop their English and mathematics skills. Appropriate interventions were available to help them succeed in their learning if they chose to do so. Learners were expected to achieve level 1 in English and mathematics before starting in the training workshops. This meant that they could be classroom based for long periods, which some considered demeaning. Many prisoners expressed a preference to learn in the work and vocational training workshops. However, specialist support for English and mathematics was not available in the work and vocational training areas.
- 3.25** There were good work opportunities in the prison engineering workshops to produce high-quality products for external companies. As the production requirements and specifications were subject to regular updates and modification requirements, the prison had arranged for managers from the companies to be security cleared, to facilitate their visits to the prison. This allowed managers to visit the prison as required and show prison staff and prisoners the modifications required, helping to reinforce and develop a work ethic in prisoners and continuing contract work between the prison and the company.
- 3.26** Classroom accommodation was adequate, with some effective use of wall displays that included learners' work. Some teaching rooms in the education department were inappropriate. The barbering room was inappropriately designed and presented a security risk, with a wall preventing direct line of sight in an area where tools were used. Some accommodation was cramped and some rooms were not conducive to positive learning experiences. Noise from the gym weights room on the floor above disrupted some learning.

Prisoners were not supervised sufficiently when they left education classes to obtain refreshments or to use the toilets, and this often disrupted learning.

Recommendations

- 3.27** The content and quality of learning statements in learning logs should be checked to help prisoners to understand their progress better and improve individual learning plans.
- 3.28** English and mathematics qualifications that are vocationally contextualised to provide relevance and maintain interest should be provided in vocational training and work areas.

Housekeeping points

- 3.29** The accommodation for barbering should be improved, to reduce the security risk, and teaching classrooms should be reviewed to ensure their suitability for a positive learning experience.
- 3.30** The supervision of learners in the education block should be improved when they use the toilets or obtain refreshments, to prevent disruptions to learning.

Good practice

- 3.31** *There were good work opportunities in the prison engineering workshops to produce high-quality products for external companies. This involved company managers visiting the prison as required to show prison staff and prisoners the modifications required, helping to reinforce and develop a work ethic in prisoners and ongoing contract work between the prison and the company.*

Education and vocational achievements

- 3.32** Achievements in education and training were good overall. Course success rates were high for prisoners who completed the programmes. The analysis of data did not include learners' outcomes and success rates by ethnicity or cohort, thereby failing to identify slow progress or low achievements and identify appropriate interventions. Learners made good progress in their work, developed good personal skills and improved their self-esteem and confidence.
- 3.33** The engineering workshops required men to be trained in engineering, manufacturing and welding skills. Prisoners developed good work skills in these areas and produced the high standards of work that were required to meet customers' demanding contract requirements. The accreditation of work skills was good across all the work areas. Assessors regularly visited the work areas and provided good support and assessment services, resulting in high achievements in vocational qualifications. However, occasionally the personal protective equipment supplied was not used, or was used incorrectly, in work and vocational training areas.
- 3.34** The overall standard of prisoners' work was acceptable, and in many cases it was good.

Recommendation

- 3.35** Performance data should be analysed, to identify and correct any differences in progress and achievement between different groups of learners.

Housekeeping point

- 3.36** Personal protective equipment supplied for health and safety reasons should be used correctly at all times in the workshop areas.

Library

- 3.37** The library was managed well. The service was provided by Staffordshire County Council and was operated by an area manager, a library supervisor, four assistants and seven orderlies. The orderlies were all qualified in customer service at level 2 and were offered further training to qualify as learning mentors. Four orderlies were also mentors in Toe by Toe (a mentoring scheme to help prisoners learn to read).
- 3.38** Access to the library was satisfactory and prisoners had one timetabled session each week, during the evening or at the weekend. The staff worked well with education and health services staff. For example, they provided books recommended by health services staff to individual prisoners to improve their well-being, and displayed support information on smoking cessation. Staff supported education classes taking place in the library, such as music, ESOL and functional English. Seven computers were used well to practise driving licence theory, health and safety practice tests and for CV preparation. Prisoners who wanted to research legal materials could book sessions in designated time slots during the week.
- 3.39** The book stock was ample for the size of the population, at over 8,000 books. A wide range of fiction, non-fiction, easy reads, foreign language, graphic and audio books, books to support education and vocational training, and newspapers and magazines were available, along with music CDs. Prison Service Instructions and current legal texts were up to date and readily available for reference. The book stock was refreshed frequently.
- 3.40** The library provided a wide and varied service that met prisoners' needs and interests well. Activities to promote literacy were particularly good and included a poetry group and a reading group, the Six-Book Challenge (for which the prison had won an award for its level of participation), Storybook Dads (in which detainees record stories for their children) and the newly introduced DVD Dads (which helped prisoners to keep in touch with their families). A range of competitions and events encouraged library use. Toe by Toe was well coordinated by the library and supported by the education department; at the time of the inspection, 12 prisoners were attending the library for five sessions each week. Ten prisoners had completed this programme in the year to date, and most progressed to functional English classes in the education department.

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.

- 3.41** *Recreational and vocational PE provision was good. The facilities were well used and provided sufficient activities to meet the needs of different groups of prisoners. Outdoor facilities were good and there were effective community links. There were good links with the health care department. Success rates for vocational programmes were high. No quality improvement checks had been carried out recently to monitor and further improve the provision.*
- 3.42** The PE provision, managed by six instructors, was good. Staff were well qualified in PE and also held basic-level teaching qualifications. Facilities were mostly good and consisted of a large sports hall, a cardiovascular room, which was cramped but acceptable, and a larger weights room. These were situated on the first floor, and the noise from PE activities disturbed the education classes and library activities that took place directly beneath. All accommodation wings had a small cardiovascular room. Outside facilities were good, and included an all-weather pitch and a grassed pitch used for rugby and football. League competition games were held at the prison with community teams in rugby, football and basketball.
- 3.43** There was a wide range of recreational PE. The programme offered a variety of team games, circuit training and racquet sports. Prisoners were required to book specific activity slots and could book a maximum of two weight training sessions each week. An annual programme of events such as the 'Featherstone marathon' and a 'diversity world cup' was also run. A range of charitable PE events encouraged prisoners to contribute to the local and wider community.
- 3.44** A good range of accredited courses was offered, including progression opportunities from level 1 to level 2. Courses were well planned and an annual schedule ensured that they ran frequently and varied in length and level to meet the differing abilities and sentence lengths. Diversity and equality were promoted well through a number of courses. Achievement rates were high and most learners stayed on their programme and successfully completed it.
- 3.45** Induction to the gym was timely and thorough, although the information leaflet given to prisoners was not suitable for those with low levels of literacy. Some quality improvement processes were underdeveloped. Instructors reviewed each course and identified what had gone well or could be improved, and also analysed retention and success rates. In addition, an annual prisoner survey helped to inform the PE programme. However, observations of teaching, learning and assessment in the PE department had not taken place for some time. Instructors did not collate the information from course reviews or the annual survey to inform a PE or learning and skills self-assessment.
- 3.46** Links with the health care department were good. A health trainer course accredited prisoners to work with individuals to improve their well-being – for example, with weight loss and smoking cessation. Their work was overseen by the instructors. Health champions signposted other prisoners to the support services available. Courses such as mental health awareness and health and social care in the community gave learners basic qualifications that they could progress further on release, to support employment. An annual prisoner health fair promoted health and well-being to all prisoners.

- 3.47** Showering facilities had been refurbished and were good. Changing and showering facilities were also provided in a building adjacent to the grassed pitch, for use by visiting league teams.

Recommendations

- 3.48** Managers should investigate how to minimise the noise level from the gym, to reduce the disruption caused in education classes.
- 3.49** Quality improvement procedures should be further developed to include lesson observations and self-assessment.

Housekeeping point

- 3.50** PE information leaflets should be suitable for those with low literacy levels.

Section 4. Resettlement

Strategic management of resettlement

Expected outcomes:

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

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

Good planning ensures a seamless transition into the community.

4.1 *Both the offender management and reducing reoffending policies were out of date and did not reflect the recent or planned developments for resettlement. Although pathway objectives were reviewed appropriately through regular pathway meetings, offender management was undergoing a period of transition, did not consistently meet the needs of the population and was insufficiently integrated within the wider function of the establishment.*

4.2 The offender management function of the prison was in a period of transition. In response to national guidelines, offender supervisors were being recruited to undertake a dual function as both offender supervisors and wing-based supervisory officers. In the long term, it was planned that a total of 12 officers would undertake these roles, with approximately half their time allocated to the offender management function. However, at the time of the inspection only eight were in post and a number were new to the role and/or were still undertaking training. The overall level of provision was therefore too low for the needs of the population and it was unlikely that the situation would improve for some months.

4.3 The reducing reoffending and offender management policies covered the period 2011–2013 but both were out of date as neither covered the recent changes that had been introduced to the offender management unit (OMU) (see main recommendation S42). However, the associated action plans reflecting developments under each resettlement pathway had been updated and broadly appeared to reflect the needs of the population.

4.4 Developments and progress against objectives were reviewed at the bimonthly pathways meeting, which was appropriately constituted and attended by representatives from all key departments across the prison, including offender management. Despite this, the prison did not have an up-to-date needs analysis. Segmentation data, based on offender assessment system (OASys) information, was about 18 months out of date and local information was not collated, despite the fact that over 99% of the prison population was serving sentences of over 12 months and subject to OASys.

4.5 Our analysis indicated that the operation of offender management did not have a sufficiently high profile in the prison. Although we saw examples of offender supervisors involved in good order and/or discipline reviews and assessment, care in custody and teamwork (ACCT) case management reviews, this was not consistently the case. The department appeared to operate in isolation from other key services (see section on offender management and planning) and there was no clear plan about how the prison intended to rectify these shortfalls or develop the establishment towards its longer-term role of a resettlement prison as part of the national “Transforming Rehabilitation Strategy”.

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.

4.6 *The role of offender supervisors was unclear and inconsistent. There was a large backlog of offender assessment system (OASys) assessments and the quality of sentence planning targets was variable. Offender supervisors had little engagement with community offender managers, even concerning high-risk cases, and support and contact with prisoners were also poor. Work with indeterminate-sentenced prisoners was similar to that for those serving determinate sentences but the latter had additional contact with probation staff. There was insufficient overall management scrutiny and supervision, and there were no casework reviews. The offender management unit too often operated in isolation of other departments in the prison. Public protection arrangements were reasonable but there was too little involvement of, and engagement by, offender supervisors.*

4.7 Virtually all prisoners at the establishment were serving sentences of over 12 months and were therefore subject to OASys assessments. All prisoners were allocated an offender supervisor, and more respondents to our survey than at comparator establishments said that they had a named offender supervisor (74% versus 67%). All offender supervisors were prison staff and, due to low staffing levels, caseloads were high, in some cases considerably higher than 100. The overall population consisted of 277 (40%) high and very high risk of harm prisoners.

4.8 At the time of the inspection, there was a considerable backlog of OASys assessments – including both those that were the responsibility of community offender managers (56) and also those under the remit of the prison (167) – and almost a third of the total population either had no assessment or one that was out of date. This situation was compounded by 111 prisoners having been transferred from HMP Hewell since April 2013 without an up-to-date OASys assessment. This backlog was reflected in our survey, in which only 64% of prisoners (against the 70% comparator and 82% at the time of the previous full inspection) said that they had a sentence plan.

4.9 We looked in detail at 20 high and very high risk of harm offender management cases, and in less detail at a further 19 cases, which were primarily low and medium risk. In light of the staffing shortages in the department, the prison had attempted to focus the work of offender supervisors, giving priority to high and very high risk prisoners. However, we saw considerable variation in the level and quality of work undertaken with this group of prisoners. Many meetings between offender supervisors and prisoners had not been recorded and the information available was inconsistent. A lack of experience and capability was evident in dealings between offender supervisors and offender managers; in all the high risk cases we reviewed there was insufficient communication between the two. Of the high risk cases assessed, only five had sentence plans which were outcome focused and only six plans included objectives to address the likelihood of reoffending. Interventions had been delivered in line with sentence plan objectives in only four cases, and timed and sequenced according to risk of harm in only five. In 13 cases, interventions included in the sentence plan had not been delivered.

- 4.10** Sentence planning arrangements were variable for low and medium risk prisoners. Targets were often vague and too general, often relating to maintaining or developing appropriate institutional behaviour, without clear indications that prisoners were sufficiently skilled or able to change former patterns of behaviour. Targets were also not sufficiently orientated to risk factors identified in OASys assessments.
- 4.11** For all prisoners, there was insufficient attention paid to assessments undertaken by other departments. For instance, assessments undertaken by the National Careers Service (NCS) and by drug and alcohol services were not included in sentence plans. Instead, targets simply reflected what prisoners said they wanted to do, or referred generally to engagement in work identified by these departments. Subsequent reviews also did not include updated assessments by these departments as to progress. Departments outside the OMU rarely contributed to sentence planning and were rarely asked to do so by offender supervisors (see main recommendation S42).
- 4.12** There was evidence of some quality assurance having been undertaken earlier in 2013 with regard to casework but this was not reflected in any of the cases that we reviewed. Offender supervisors did not receive regular casework supervision to develop their practice, and opportunities to discuss cases were limited to ad hoc arrangements when offender supervisors recognised difficulties in the cases they were working with.
- 4.13** The level of engagement by offender supervisors outside the OASys and sentence planning process was also extremely limited. For most of the medium risk cases and a number of high risk cases we reviewed, the prisoners concerned had little or no contact with offender supervisors between assessments. Prisoner contact logs in the OMU showed that this lack of contact had been going on for some time. Prisoners told us that they rarely had contact with their offender supervisor and that it was difficult to contact them or receive responses to applications from them. This issue was compounded further by the regular redeployment of the limited number of offender supervisors to undertake extra duties such as prisoner escorts and supervision of visits.
- 4.14** The OMU operated largely in isolation of other departments across the prison, as reflected by offender supervisors maintaining their own contact log rather than using P-Nomis (electronic case notes). The prison also had a separate probation department, consisting of two full- and one part-time probation officer and a full-time Probation Service officer. The three probation officers worked almost exclusively with indeterminate-sentenced prisoners, and all such prisoners were allocated to one of the probation staff. However, although there were some exceptions, there was little coordination between offender supervisors and probation staff, with each working largely in isolation of the other.
- 4.15** In an attempt to mitigate some of the concerns regarding isolation and a lack of prisoner contact, the prison had started to reorganise the allocation of offender supervisors by prisoner location, placing offender supervisors on the house blocks to ensure greater visibility. It was too early to establish the efficacy of this approach, and there remained concerns that the movement of prisoners between wings (as occurred for some of the more vulnerable prisoners) would result in a regular change of supervisor and thus a lack of continuity.
- 4.16** In the previous six months, only 41 of the 86 cases (48%) that had been considered for home detention curfew (HDC) had been successful. Cases were generally started on time (10 weeks before eligibility) but it was relatively rare that those who were successful were released on their eligibility date. Although there had been some delays in reviewing prisoners' cases for HDC a few months earlier, at the time of the inspection this issue had been resolved, although some delays still persisted. It appeared that most of these were caused by the late return of information by offender managers. Delays were chased up by

the OMU but there was no systematic process to escalate this issue to community managers to resolve the concerns.

- 4.17** A few prisoners were able to benefit from release on temporary licence (ROTL). Placements were available for prisoners to work in the visitors centre or in the prison grounds. In total, eight prisoners had been granted ROTL in the previous six months, with a total of 93 separate events. In many cases, prisoners working out of the prison quickly obtained category D status and moved to open prisons more able to manage community-working effectively.

Recommendations

- 4.18** The provision of offender supervision should be consistent and reflect the level of prisoner needs.
- 4.19** Prisoners should not be transferred to the establishment without an up-to-date offender assessment system (OASys) assessment.
- 4.20** All appropriate prisoners should have a completed and up-to-date OASys assessment.
- 4.21** All departments working with a prisoner, including their personal officer; education, training and employment providers; and drug and alcohol services, should attend sentence planning boards, or at least provide written contributions.
- 4.22** Casework reviews and regular professional supervision should be introduced for all offender supervisors, to ensure consistent standards of service delivery and effective case management.
- 4.23** The role of the probation department should be clearly defined and their work effectively integrated with that of offender supervisors.
- 4.24** An agreed system for escalating concerns regarding late contributions to reports from community offender managers should be introduced.
- 4.25** Offender supervisors should record information about, and contact with, prisoners on P-Nomis rather than in separate contact logs.

Public protection

- 4.26** Public protection arrangements and processes were generally well managed across the prison. Although virtually all prisoners were transferred from another establishment, where public protection arrangements should have been put in place, the prison undertook its own screening process to ensure that all those subject to monitoring or other arrangements were identified. All such prisoners were reviewed at the weekly public protection screening meeting to ensure that key information had been sought and that the monthly inter-departmental public protection meeting was able to focus on the most important cases.
- 4.27** The monthly public protection meeting was well attended and minutes indicated that discussions were appropriately focused on the prisoners being considered. All multi-agency public protection arrangements (MAPPAs) level 3 cases were reviewed monthly, along with all

level 2 cases in the last six months of their sentence. At the time of the inspection, there were a total of 426 prisoners identified as MAPPA cases, with two identified as level 3.

- 4.28** The monitoring of prisoners identified as being a risk to children, and of those subject to harassment restrictions (13 and 39, respectively, at the time of the inspection) was appropriate. MAPPA pre-release reports were prepared for all prisoners subject to MAPPA levels 2 and 3.
- 4.29** The level and extent of involvement of offender supervisors in public protection were weak. Nine of the high risk cases we reviewed had unsatisfactory risk management plans; six had not been completed and in the remainder the planned responses or actions were either unclear or inadequate. In only two of the high risk of serious harm cases we assessed was there evidence of appropriate management oversight of the work of the offender supervisor. MAPPA had not been used effectively to manage risk of harm in any of the three relevant cases. Offender supervisors were unsure if they were expected to attend community MAPPA meetings and did not routinely attend the internal monthly public protection meetings; information from these meetings was also not consistently disseminated to, or recorded by, offender supervisors.

Recommendation

- 4.30 The role of offender supervisors in the management of high risk offenders through public protection arrangements should be clarified and appropriate and consistent management scrutiny applied.**

Categorisation

- 4.31** At the time of the inspection, the prison was holding 24 category D prisoners (approximately 4% of the total population). In the previous six months, 350 prisoners had been considered for category D, with 67 (19%) granted. In most cases, reviews of categorisation were undertaken as part of the routine annual review, without any realistic likelihood of success. Although there had been some delays in the completion of recategorisation boards in previous months, this appeared now to have been largely resolved.
- 4.32** There were relatively few delays in transferring category D prisoners, most of whom went to HMPs Hewell or Leyhill.

Indeterminate sentence prisoners

- 4.33** At the time of the inspection, the prison was holding 130 indeterminate-sentenced prisoners (ISPs): 40 lifers and 90 serving indeterminate sentences for public protection (IPP). ISPs were mainly managed in the same way as other prisoners, with each allocated to an offender supervisor. However, all such prisoners were also allocated to one of the prison-based probation officers. The role of probation staff in the management of ISPs was not clearly defined but broadly focused on working specifically in relation to their offending behaviour and in assessing levels of risk and change (see recommendation 4.23). We saw some good examples of such work, including one-to-one work orientated to cognitive self-change. However, the levels of contact and engagement with offender supervisors were low and there were examples of sentence planning meetings taking place without the probation officer being invited.

- 4.34** Lifer forums took place three times a year and in recent months further consultation with ISPs had also been undertaken. A number of lifers had also had escorted town visits.

Reintegration planning

Expected outcomes:

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

4.35 *Arrangements for planning release were inconsistent and the lack of an up-to-date needs analysis made it difficult to assess the extent to which prisoner needs were being met. A preparation for release programme was available six weeks before release, and most prisoners were released with accommodation. The National Careers Service provision was inadequate. Health discharge arrangements were adequate but the palliative care policy was poor. For those with substance misuse issues, there was good care provision and continued treatment on release. Finance, benefit and debt support was reasonable. Visits arrangements, including family visits, were good but domestic visits sometimes started late. Two nationally accredited offender management programmes were delivered and waiting lists were short.*

- 4.36** The prison released an average of around 43 prisoners a month. Arrangements for planning release were inconsistent and the lack of an up-to-date needs analysis made it difficult to assess the extent to which prisoner needs were being met. Arrangements for the release of high and very high risk prisoners were the responsibility of community offender managers and were managed appropriately. For low and medium risk prisoners, resettlement pathway providers made their own assessments and managed arrangements reasonably well, but there was little integration with the OMU. Offender supervisors did not see prisoners as a matter of course before release, and in some cases there was no contact for several months before release. Offender managers were not therefore routinely equipped with information about release planning.

- 4.37** A prisoner resettlement orderly was based on the induction unit and saw all prisoners during their first few days at the prison. Before release, questionnaires were completed by prisoners, to give feedback on how useful and helpful they found various aspects of the resettlement service. This information was considered at the pathways meeting but had not been evaluated for several months. Although feedback was generally positive, that regarding engagement by offender supervisors was consistently poor. However, in our survey more respondents than at comparator prisons (20% versus 17%) said that someone had helped them to prepare for release.

Recommendation

- 4.38** **The prison should ensure that work undertaken by resettlement pathway providers is properly and effectively coordinated with the work of offender supervisors to support release.**

Housekeeping point

- 4.39** The prison should evaluate pre-release questionnaires completed by prisoners and use the data to inform the delivery of services.

Accommodation

- 4.40** The prison had one full-time housing officer, who was employed directly by the prison. The resettlement orderly identified prisoners' accommodation issues during induction and made referrals to the housing officer, who had established a wide range of links and community support. Where appropriate, prisoners were contacted by, and engaged with, the housing officer, primarily in the last few weeks before release.
- 4.41** It was estimated that approximately 25% of all prisoners released engaged with the housing officer before departure. In most cases, prisoners were able to find accommodation but in the previous six months 10 (4%) had been released with no fixed accommodation. In at least three of these cases, an appointment had been made for them to be seen by housing providers on the day of release. All prisoners were given an information pack on release, containing information about organisations able to offer accommodation and housing advice in the community.

Education, training and employment

- 4.42** Six weeks before their release date, prisoners were invited to participate in a one-week preparation for release programme. This included interview preparations and techniques, CV preparation and criminal disclosures, and gave prisoners practical support to help them find employment in the community. The Chance Project was a new employment agency initiative that gave prisoners short-term paid work placements to help them gain a full-time job; the project had only just started and it was too early to judge its success.
- 4.43** The NCS provision, managed by the Coventry Solihull and Warwickshire Partnership, was inadequate. Too much time was spent at review meetings discussing past achievements, leaving little time to focus on future plans and how they would be achieved. Skills action plans were not systematically shared with the OMU for any necessary actions to be included in sentence plans.
- 4.44** The learning and skills business manager used local and regional market information well to plan vocational provision to meet future job shortages in the area to which prisoners were to be released. However, links with employers to help prisoners gain and sustain employment on release were limited.

Recommendation

- 4.45** **Pertinent learner education activity information should be recorded accurately and in a timely manner, and the time available for discussion at prisoners' National Careers Service interviews should be maximised.**

Health care

- 4.46 Prisoners due for release were seen by a nurse at least a day before discharge and advised about registering with a GP. A week's supply of all prescribed medicines was provided on release.
- 4.47 Prisoners subject to the care programme approach were linked with their local community mental health team at least a month before discharge and some community mental health team representatives attended pre-discharge meetings.
- 4.48 There was a palliative care policy but it was out of date and did not incorporate any specific arrangements for prisoners at the establishment requiring palliative or end-of-life care.

Recommendation

- 4.49 **An up-to-date palliative care policy and protocol should clearly identify the arrangements for prisoners requiring palliative or end-of-life care.**

Drugs and alcohol

- 4.50 There was good care coordination for prisoners with substance misuse issues requiring interventions and continued treatment on release. There were links with local drug intervention programme teams. When requested, pre-sentence reports were offered, but links with the OMU were not sufficiently robust.

Finance, benefit and debt

- 4.51 Support for prisoners under this pathway was reasonable. During their induction, or at any other point during their time at the establishment, prisoners could be referred to Citizens Advice (CA) for debt advice and support. CA staff attended the prison three or four times a week and saw a total of around half a dozen prisoners weekly.
- 4.52 Appropriate benefit advice and information were available through the Jobcentre Plus service. A budget management course was provided through the education department, and prisoners could open bank accounts before release. The prison was hoping to introduce the Unlock programme through the National Association of Reformed Offenders charity.

Children, families and contact with the outside world

- 4.53 The visitors centre was operated by HALOW and included both paid and volunteer staff. A wide range of information was provided to visitors, including about specialist community services, in a number of different languages.
- 4.54 Domestic visits were available six afternoons a week, and could be booked either by telephone or email. The prison was able to accommodate up to 41 families at a time. Once booked into the visitors centre, visitors waited until they were called over to the visits hall. Although, in theory, visits took place between 2pm and 4pm, on two days during the inspection visitors did not start to go over to the visits hall until just after 2pm and the last visitors did not get there until almost 2.30pm, even though they had booked in well before 2pm. This meant that some prisoners received longer visits than others. We were told that, although the situation had improved over recent months, such delays were normal.

- 4.55** The visits hall was large, light and airy. Refreshments were available, including some healthy choices. However, prisoners had to end their visit if they needed to use the toilet, even though there were facilities within the visits complex.
- 4.56** Nine family visits were provided each year, usually during school holidays, and were open to all prisoners, regardless of their incentives and earned privileges status. However, before being able to access such visits, prisoners had to have completed a parenting course, either at Featherstone or previously elsewhere. They could apply for as many family visits as they wanted, although applications were managed to ensure equity of access; at the time of the inspection, there were 48 prisoners on the waiting list. The library also delivered the Storybook Dads programme (in which prisoners record stories for their children).

Recommendation

- 4.57 All prisoners and visitors should be able to receive the full visit length entitlement.**

Housekeeping point

- 4.58** Prisoners should be able to access a toilet during visits without having to end their visit.

Attitudes, thinking and behaviour

- 4.59** At the time of the inspection, the prison was delivering both the thinking skills programme (TSP) and controlling anger and learning to manage it (CALM), both of which appeared appropriate for the prison's population. However, it was planned that each of these programmes would be run only three times in 2013, giving a total completion number of only 48 (TSP 27 and CALM 21).
- 4.60** Waiting lists for the programmes were relatively short, with 27 on the list for TSP and seven for CALM at the time of the inspection, and there were few delays in prisoners accessing them. Referrals for programmes came from offender supervisors but, given the backlog of OASys assessments, it was not clear whether these short waiting lists reflected current need.
- 4.61** Two other, non-accredited programmes were run: the restorative justice programme, delivered through the chaplaincy, and an effective thinking programme, provided at level 1 through the education department; 56 prisoners had completed this programme in the previous six months.

Recommendation

- 4.62 The offending behaviour needs of all prisoners should be met at the prison or prisoners should be transferred, without delay, to an establishment that can deliver the necessary interventions.**

Section 5. Summary of recommendations and housekeeping points

The reference number at the end of each recommendation, housekeeping point or example of good practice refers to its paragraph location in the main report.

Main recommendations

To the governor

- 5.1 The collection and collation of data on violent and antisocial behaviour should be improved, with more effective data analysis and action taken to address these issues. (S39)
- 5.2 Data for disciplinary procedures, use of force and segregation should be collated, analysed and used more effectively. (S40)
- 5.3 There should be vigilant supervision of medication administration by discipline staff to reduce the potential for diversion of tradable medicines and for bullying, and to preserve confidentiality around the hatch. (S41)
- 5.4 The strategic functioning of offender management should be better integrated across the prison, be informed by a comprehensive and up-to-date needs analysis and meet the overall requirements of the population. (S42)

Recommendation

to the Deputy Director Custody

Offender management and planning

- 5.5 Prisoners should not be transferred to the establishment without an up-to-date offender assessment system (OASys) assessment. (4.19)

Recommendations

To the governor

Early days in custody

- 5.6 Prisoners should be processed through reception expeditiously. (1.13)
- 5.7 First night risk interviews should take account of all prisoner issues and ensure that these are adequately dealt with and relevant departments notified. (1.14)

Bullying and violence reduction

- 5.8 There should be a consolidated safer custody action plan. (1.25)
- 5.9 Investigations into and formal monitoring of perpetrators of violent and antisocial incidents should be improved and should include interventions that are evaluated for effectiveness. (1.26)

- 5.10** There should be careful oversight of the violence reduction representatives and their work, and mediation should be monitored for its effectiveness. (1.27)
- 5.11** Support for victims of violent and antisocial behaviour, including those in debt, should be improved. (1.28)

Self-harm and suicide

- 5.12** All staff should receive safer custody training and subsequent refresher training. (1.39)
- 5.13** The quality of assessment, care in custody and teamwork (ACCT) documents and support for those in crisis should be improved. (1.40)
- 5.14** All suicide attempts with potentially the most serious consequences should be investigated quickly and action taken to prevent similar incidents. (1.41)

Safeguarding

- 5.15** 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. (1.47)

Security

- 5.16** Prisoners should only be strip-searched on the basis of intelligence or specific suspicion. (1.53)
- 5.17** All suspicion drug testing should be undertaken in time. (1.54)

Incentives and earned privileges

- 5.18** Prisoners on the basic level of the IEP scheme should be set behaviour improvement targets that are linked to the behaviour that resulted in the original demotion. (1.59)

Discipline

- 5.19** All disciplinary charges should be fully investigated, with clear reasons given for the decisions reached, and the quality assurance of adjudication records should be improved. (1.64)
- 5.20** The quality of use of force records and management oversight of them should be improved. (1.68)
- 5.21** The environment and regime in the segregation unit, including the exercise yard, should be improved. (1.76)
- 5.22** Segregation review documentation should be completed thoroughly and include meaningful targets. (1.77)

Substance misuse

- 5.23** The drug and alcohol health needs assessment should include clear recommendations to develop future services. (1.85)

Residential units

- 5.24** Cells designed for one prisoner should not be used to hold two. (2.11)
- 5.25** Toilets in cells should be sufficiently screened. (2.12)
- 5.26** Prisoners should be issued with high-quality clothing each week. (2.13)

Equality and diversity

- 5.27** The prison should have an equality policy which is specific to the population at Featherstone, including arrangements for the monitoring of equality against all protected characteristics and detailing the provision for prisoners from each minority group. (2.27)
- 5.28** There should be effective consultation arrangements for all minority groups. (2.28)
- 5.29** Support for foreign national prisoners should be improved, including access to independent immigration advice. (2.37)
- 5.30** The prison should investigate and address the negative perceptions of Muslim and black and minority ethnic prisoners. (2.38)

Faith and religious activity

- 5.31** The room allocated for Friday prayers should be suitable for the numbers attending. (2.43)

Complaints

- 5.32** Quality assurance processes should be reviewed to ensure that responses to complaints are timely, answer the points being raised and use appropriate language. (2.47)

Legal rights

- 5.33** All new arrivals should have access to appropriate legal services advice. (2.51)
- 5.34** Staff should only open mail from solicitors or legal advisers in the presence of the prisoner. (2.52)

Health services

- 5.35** The health needs assessment and health care policies should be up to date, readily available to staff and adapted where necessary to reflect the prison environment. The health needs assessment should include mental health needs. (2.64)
- 5.36** There should be increased use of professional telephone interpreting services, and health care literature, in a range of languages, should be readily available for prisoners with a poor understanding of English. (2.65)
- 5.37** A risk assessment should be carried out on the impact of low nursing staff levels and reduced discipline officer cover on health outcomes for prisoners. (2.66)

- 5.38** Health screening on arrival or transfer should be robust and ensure that prisoners' health needs are identified early, with attention to those men who may not disclose issues immediately. (2.76)
- 5.39** Joint care planning with prison staff should ensure positive health outcomes and identify any deterioration in health promptly. (2.77)
- 5.40** Missed medications should be followed up and prescribers informed, to ensure therapeutic prescribing and that complete records of administration of medicines are routinely available to the pharmacist. (2.90)
- 5.41** Pharmacy clinics should be provided, to reflect community arrangements. (2.91)
- 5.42** Arrangements for in-possession medicines should ensure that up-to-date risk assessments are readily accessible to prescribers and nursing staff. (2.92)
- 5.43** Talking therapies should be available, to support good rehabilitation. (2.109)
- 5.44** Regular multidisciplinary team meetings between primary and in-reach clinicians should be scheduled, to enable formal clinical case management. (2.110)

Catering

- 5.45** Staff supervising the serveries should ensure that portions of food are adequate and consistent. (2.117)
- 5.46** Breakfast packs should be issued on the day they are to be eaten. (2.118)

Purchases

- 5.47** Prisoners should be able to place a full shop order within 24 hours of arrival. (2.124)
- 5.48** Prisoners should not have to pay a catalogue administration fee. (2.125)

Learning and skills and work activities

- 5.49** Opportunities for learners to progress to higher-level qualifications in construction programmes should be provided. (3.12)
- 5.50** Education and training requirements should be included in sentence plan targets if identified as potential barriers to progression by the National Careers Service during initial advice sessions. (3.13)
- 5.51** The content and quality of learning statements in learning logs should be checked to help prisoners to understand their progress better and improve individual learning plans. (3.27)
- 5.52** English and mathematics qualifications that are vocationally contextualised to provide relevance and maintain interest should be provided in vocational training and work areas. (3.28)
- 5.53** Performance data should be analysed, to identify and correct any differences in progress and achievement between different groups of learners. (3.35)

Physical education and healthy living

- 5.54** Managers should investigate how to minimise the noise level from the gym, to reduce the disruption caused in education classes. (3.48)
- 5.55** Quality improvement procedures should be further developed to include lesson observations and self-assessment. (3.49)

Offender management and planning

- 5.56** The provision of offender supervision should be consistent and reflect the level of prisoner needs. (4.18)
- 5.57** All appropriate prisoners should have a completed and up-to-date OASys assessment. (4.20)
- 5.58** All departments working with a prisoner, including their personal officer; education, training and employment providers; and drug and alcohol services, should attend sentence planning boards, or at least provide written contributions. (4.21)
- 5.59** Casework reviews and regular professional supervision should be introduced for all offender supervisors, to ensure consistent standards of service delivery and effective case management. (4.22)
- 5.60** The role of the probation department should be clearly defined and their work effectively integrated with that of offender supervisors. (4.23)
- 5.61** An agreed system for escalating concerns regarding late contributions to reports from community offender managers should be introduced. (4.24)
- 5.62** Offender supervisors should record information about, and contact with, prisoners on P-Nomis rather than in separate contact logs. (4.25)
- 5.63** The role of offender supervisors in the management of high risk offenders through public protection arrangements should be clarified and appropriate and consistent management scrutiny applied. (4.30)

Reintegration planning

- 5.64** The prison should ensure that work undertaken by resettlement pathway providers is properly and effectively coordinated with the work of offender supervisors to support release. (4.38)
- 5.65** Pertinent learner education activity information should be recorded accurately and in a timely manner, and the time available for discussion at prisoners' National Careers Service interviews should be maximised. (4.45)
- 5.66** An up-to-date palliative care policy and protocol should clearly identify the arrangements for prisoners requiring palliative or end-of-life care. (4.49)
- 5.67** All prisoners and visitors should be able to receive the full visit length entitlement. (4.57)
- 5.68** The offending behaviour needs of all prisoners should be met at the prison or prisoners should be transferred, without delay, to an establishment that can deliver the necessary interventions. (4.62)

Housekeeping point to Prisoner Escort and Custody Services

Courts, escort and transfers

- 5.69** Escort vehicles should be clean and free from graffiti. (1.4)

Housekeeping points to the governor

Early days in custody

- 5.70** Essential regime information should be explained to all new arrivals on the first day of their induction and the follow-up interview at the completion of induction should take place reliably. (1.15)

Bullying and violence reduction

- 5.71** Minutes of the safer custody committee should be improved. (1.29)

Self-harm and suicide

- 5.72** Suicide and self-harm prevention data should be used more effectively to identify trends and patterns and take appropriate action. (1.42)
- 5.73** The prison should understand and address the reasons why Listeners feel unsupported. (1.43)

Incentives and earned privileges

- 5.74** There should be a robust quality assurance and monitoring system for the IEP scheme. (1.60)

Substance misuse

- 5.75** The health care department should provide information about divertible medications to every substance misuse meeting. (1.86)
- 5.76** There should be robust health promotion planning that includes access to information about new psychoactive substances such as 'black mamba' and 'spice'. (1.87)

Residential units

- 5.77** Padlocks should be issued to enable prisoners' personal lockers to be secured. (2.14)
- 5.78** Applications to access stored property should be dealt with expeditiously. (2.15)

Equality and diversity

- 5.79** The prison should accurately record the number of prisoners with disabilities. (2.39)

Health services

- 5.80** The prisoner health forum should resume regular meetings. (2.67)
- 5.81** All discipline staff should have up-to-date first-aid training, including use of defibrillators. (2.68)
- 5.82** Waiting times for the GP should be equitable with those in the community and the 'did not attend' rate should be reduced to support this. (2.78)
- 5.83** Prescribed medications should only be administered from properly labelled packs. (2.93)
- 5.84** The controlled drugs cupboard should be suitably bolted to the wall. (2.94)
- 5.85** The pharmacist should attend medicines management meetings at least quarterly. (2.95)
- 5.86** Local anaesthetic should be stored in a locked cupboard in the dental suite, to facilitate timely access by the dentist. (2.100)
- 5.87** Copies of servicing and maintenance records for the dental chair should be retained in the dental suite. (2.101)

Catering

- 5.88** Opportunities to dine in association should be increased. (2.119)

Purchases

- 5.89** Consultation with black and minority ethnic and Muslim prisoners about the items available through the prison shop should be improved. (2.126)

Time out of cell

- 5.90** Association equipment should be fit for purpose. (3.5)

Learning and skills and work activities

- 5.91** All the learning and skills providers in the prison should work together, more effectively sharing information, plans and resources. (3.14)
- 5.92** The full range of learning and skills across the prison should be included in the self-assessment report. (3.15)
- 5.93** The work provided in some of the contract services areas should be more stimulating and challenging. (3.20)
- 5.94** The accommodation for barbering should be improved, to reduce the security risk, and teaching classrooms should be reviewed to ensure their suitability for a positive learning experience. (3.29)
- 5.95** The supervision of learners in the education block should be improved when they use the toilets or obtain refreshments, to prevent disruptions to learning. (3.30)

- 5.96** Personal protective equipment supplied for health and safety reasons should be used correctly at all times in the workshop areas. (3.36)

Physical education and healthy living

- 5.97** PE information leaflets should be suitable for those with low literacy levels. (3.50)

Reintegration planning

- 5.98** The prison should evaluate pre-release questionnaires completed by prisoners and use the data to inform the delivery of services. (4.39)
- 5.99** Prisoners should be able to access a toilet during visits without having to end their visit. (4.58)

Examples of good practice

Equality and diversity

- 5.100** Several staff and prisoners were undertaking level 1 in British Sign Language to assist in communicating with a number of deaf or partially deaf prisoners. (2.40)

Health services

- 5.101** The use of the health trainer to run well-being clinics encouraged and supported healthy living. (2.69)
- 5.102** A prisoner 'runner' distributed health care appointment slips and signposted prisoners to services. (2.79)
- 5.103** The use of physiotherapy to support clinically appropriate prescribing for pain, and 'exercise on prescription' in the gym reflected best practice in the community. (2.80)
- 5.104** Prison staff's awareness of mental health problems enabled men waiting for a secure hospital placement to stay on the house blocks rather than transfer to unfamiliar prison inpatient units while waiting for transfer. (2.111)

Learning and skills and work activities

- 5.105** There were good work opportunities in the prison engineering workshops to produce high-quality products for external companies. This involved company managers visiting the prison as required to show prison staff and prisoners the modifications required, helping to reinforce and develop a work ethic in prisoners and ongoing contract work between the prison and the company. (3.31)

Section 6. Appendices

Appendix I: Inspection team

Nick Hardwick	Chief inspector
Kieron Taylor	Team leader
Andy Lund	Inspector
Kevin Parkinson	Inspector
Keith McInnis	Inspector
Kellie Reeve	Inspector
Joe Simmonds	Researcher
Lucy Higgins	Researcher
Hayley Cripps	Senior researcher

Specialist inspectors

Helen Carter	Substance misuse inspector
Nicola Rabjohns	Health services inspector
Eilean Robson	Pharmacy inspector
John Grimmer	Ofsted inspector
Jen Walters	Ofsted inspector
Sheila Willis	Ofsted inspector
Ian Simpkins	Offender management inspector
Krystyna Findley	Offender management inspector
Caroline Nicklin	Offender management 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	627	92.2
Recall	0	45	6.6
Convicted unsentenced	0	0	0
Remand	0	0	0
Civil prisoners	0	0	0
Detainees	0	8	1.2
Total	0	680	100

Sentence	18–20-year-olds	21 and over	%
Unsentenced	0	8	1.2
Less than six months	0	0	0
six months to less than 12 months	0	4	0.6
12 months to less than 2 years	0	64	9.4
2 years to less than 4 years	0	190	27.9
4 years to less than 10 years	0	261	38.4
10 years and over (not life)	0	24	3.5
ISPP (indeterminate sentence for public protection)	0	0	0
Life	0	129	19
Total	0	680	100

Age	Number of prisoners	%
Please state minimum age here: 21		
Under 21 years	0	0
21 years to 29 years	270	39.7
30 years to 39 years	257	37.8
40 years to 49 years	113	16.6
50 years to 59 years	30	4.4
60 years to 69 years	9	1.3
70 plus years	1	0.1
Please state maximum age here: 74		
Total	680	100

Nationality	18–20-year-olds	21 and over	%
British	0	607	89.3
Foreign nationals	0	73	10.7
Total	0	680	100

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced	0	0	0
Uncategorised sentenced	0	2	0.2
Category A	0	0	0
Category B	0	0	0
Category C	0	654	96.2

Category D	0	24	3.5
Other	0	0	0
Total	0	680	100

Ethnicity	18–20-year-olds	21 and over	%
White			
British	0	441	64.9
Irish	0	5	0.7
Gypsy/Irish Traveller	0	0	0
Other white	0	18	2.6
Mixed			
White and black Caribbean	0	15	2.2
White and black African	0	2	0.3
White and Asian	0	4	0.6
Other mixed	0	7	1.0
Asian or Asian British			
Indian	0	24	3.5
Pakistani	0	40	5.9
Bangladeshi	0	3	0.4
Chinese	0	3	0.4
Other Asian	0	17	2.5
Black or black British			
Caribbean	0	56	8.2
African	0	14	2.1
Other black	0	14	2.1
Other ethnic group			
Arab	0	3	0.4
Other ethnic group	0	8	1.2
Not stated	0	6	0.9
Total	0	680	100

Religion	18–20-year-olds	21 and over	%
Baptist	0	0	0%
Church of England	0	131	19.3
Roman Catholic	0	113	16.6
Other Christian denominations	0	73	10.7
Muslim	0	107	15.7
Sikh	0	14	2.1
Hindu	0	3	0.4
Buddhist	0	20	2.9
Jewish	0	2	0.3
Other	0	19	1.8
No religion	0	198	29.1
Total	0	680	100

Other demographics	18–20-year-olds	21 and over	%
Veteran (ex-armed services)			
Total			

Sentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	0	0	75	11.0
1 month to 3 months	0	0	150	22.1
3 months to six months	0	0	139	20.4
six months to 1 year	0	0	138	20.3
1 year to 2 years	0	0	127	18.7
2 years to 4 years	0	0	35	5.1
4 years or more	0	0	8	1.2
Total	0	0	680	100

Sentenced prisoners only

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

Unsentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	0	0	0	0
1 month to 3 months	0	0	0	0
3 months to six months	0	0	2	25
six months to 1 year	0	0	2	25
1 year to 2 years	0	0	1	12.5
2 years to 4 years	0	0	3	37.5
4 years or more	0	0	0	0
Total	0	0	8	1.2

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

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.

Sampling

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

Distributing and collecting questionnaires

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

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

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

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

Survey response

At the time of the survey on 14 October 2013, the prisoner population at HMP Featherstone was 683. Using the method described above, questionnaires were distributed to a sample of 195 prisoners.

We received a total of 162 completed questionnaires, a response rate of 83%. This included one questionnaire completed via interview. Thirteen respondents refused to complete a questionnaire, 17 questionnaires were not returned and three were returned blank.

House	Number of completed survey returns
1	31
2	26
3	28
4	25
5	21
6	10
7	19
Segregation unit	2

Presentation of survey results and analyses

Over the following pages we present the survey results for HMP Featherstone.

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

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

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

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

The following comparative analyses are presented:

- The current survey responses from HMP Featherstone in 2013 compared with responses from prisoners surveyed in all other category C trainer prisons. This comparator is based on all responses from prisoner surveys carried out in 39 category C trainer prisons since April 2008.
- The current survey responses from HMP Featherstone in 2013 compared with the responses of prisoners surveyed at HMP Featherstone in 2008.
- A comparison within the 2013 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2013 survey between the responses of Muslim prisoners and non-Muslim prisoners.
- A comparison within the 2013 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2011 survey between the induction wing (house block 5) and the rest of the establishment.

Survey summary

Section I: About You

Q1.2	How old are you?		
	<i>Under 21</i>		1 (1%)
	<i>21 - 29</i>		68 (42%)
	<i>30 - 39</i>		52 (32%)
	<i>40 - 49</i>		30 (19%)
	<i>50 - 59</i>		9 (6%)
	<i>60 - 69</i>		2 (1%)
	<i>70 and over</i>		0 (0%)
Q1.3	Are you sentenced?		
	<i>Yes</i>		148 (91%)
	<i>Yes - on recall</i>		11 (7%)
	<i>No - awaiting trial</i>		0 (0%)
	<i>No - awaiting sentence</i>		0 (0%)
	<i>No - awaiting deportation</i>		3 (2%)
Q1.4	How long is your sentence?		
	<i>Not sentenced</i>		3 (2%)
	<i>Less than 6 months</i>		3 (2%)
	<i>6 months to less than 1 year</i>		5 (3%)
	<i>1 year to less than 2 years</i>		21 (13%)
	<i>2 years to less than 4 years</i>		41 (26%)
	<i>4 years to less than 10 years</i>		50 (31%)
	<i>10 years or more</i>		4 (3%)
	<i>IPP (indeterminate sentence for public protection)</i>		24 (15%)
	<i>Life</i>		8 (5%)
Q1.5	Are you a foreign national? (i.e. do not have UK citizenship.)		
	<i>Yes</i>		14 (9%)
	<i>No</i>		147 (91%)
Q1.6	Do you understand spoken English?		
	<i>Yes</i>		156 (97%)
	<i>No</i>		5 (3%)
Q1.7	Do you understand written English?		
	<i>Yes</i>		155 (96%)
	<i>No</i>		6 (4%)
Q1.8	What is your ethnic origin?		
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	95 (60%)	<i>Asian or Asian British - Chinese</i> 1 (1%)
	<i>White - Irish</i>	3 (2%)	<i>Asian or Asian British - other</i> 3 (2%)
	<i>White - other</i>	13 (8%)	<i>Mixed race - white and black Caribbean</i> 9 (6%)
	<i>Black or black British - Caribbean</i>	15 (9%)	<i>Mixed race - white and black African</i> 1 (1%)
	<i>Black or black British - African</i>	0 (0%)	<i>Mixed race - white and Asian</i> 1 (1%)
	<i>Black or black British - other</i>	2 (1%)	<i>Mixed race - other</i> 2 (1%)
	<i>Asian or Asian British - Indian</i>	3 (2%)	<i>Arab</i> 0 (0%)

<i>Asian or Asian British - Pakistani</i>	9 (6%)	<i>Other ethnic group</i>	1 (1%)
<i>Asian or Asian British - Bangladeshi</i>	1 (1%)		

Q1.9 Do you consider yourself to be Gypsy/ Romany/ Traveller?

Yes	5 (3%)
No	152 (97%)

Q1.10 What is your religion?

<i>None</i>	53 (33%)	<i>Hindu</i>	0 (0%)
<i>Church of England</i>	34 (21%)	<i>Jewish</i>	0 (0%)
<i>Catholic</i>	35 (22%)	<i>Muslim</i>	18 (11%)
<i>Protestant</i>	2 (1%)	<i>Sikh</i>	2 (1%)
<i>Other Christian denomination</i>	6 (4%)	<i>Other</i>	8 (5%)
<i>Buddhist</i>	1 (1%)		

Q1.11 How would you describe your sexual orientation?

<i>Heterosexual/ Straight</i>	153 (98%)
<i>Homosexual/Gay</i>	2 (1%)
<i>Bisexual</i>	1 (1%)

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	33 (21%)
No	126 (79%)

Q1.13 Are you a veteran (ex- armed services)?

Yes	13 (8%)
No	144 (92%)

Q1.14 Is this your first time in prison?

Yes	48 (30%)
No	111 (70%)

Q1.15 Do you have children under the age of 18?

Yes	90 (56%)
No	70 (44%)

Section 2: Courts, transfers and escorts**Q2.1 On your most recent journey here, how long did you spend in the van?**

<i>Less than 2 hours</i>	110 (69%)
<i>2 hours or longer</i>	38 (24%)
<i>Don't remember</i>	12 (8%)

Q2.2 On your most recent journey here, were you offered anything to eat or drink?

<i>My journey was less than two hours</i>	110 (69%)
Yes	32 (20%)
No	12 (8%)
<i>Don't remember</i>	6 (4%)

Q2.3 On your most recent journey here, were you offered a toilet break?

<i>My journey was less than two hours</i>	110 (68%)
Yes	7 (4%)
No	37 (23%)
<i>Don't remember</i>	7 (4%)

Q2.4	On your most recent journey here, was the van clean?		
	Yes		89 (55%)
	No		64 (40%)
	Don't remember		9 (6%)
Q2.5	On your most recent journey here, did you feel safe?		
	Yes		135 (83%)
	No		24 (15%)
	Don't remember		3 (2%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?		
	Very well		37 (23%)
	Well		76 (47%)
	Neither		28 (17%)
	Badly		9 (6%)
	Very badly		6 (4%)
	Don't remember		6 (4%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (please tick all that apply to you.)		
	Yes, someone told me		106 (65%)
	Yes, I received written information		10 (6%)
	No, I was not told anything		47 (29%)
	Don't remember		2 (1%)
Q2.8	When you first arrived here did your property arrive at the same time as you?		
	Yes		132 (82%)
	No		26 (16%)
	Don't remember		3 (2%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?			
	Less than 2 hours		51 (32%)	
	2 hours or longer		98 (62%)	
	Don't remember		10 (6%)	
Q3.2	When you were searched, was this carried out in a respectful way?			
	Yes		116 (73%)	
	No		38 (24%)	
	Don't remember		5 (3%)	
Q3.3	Overall, how were you treated in reception?			
	Very well		40 (25%)	
	Well		78 (49%)	
	Neither		17 (11%)	
	Badly		12 (8%)	
	Very badly		9 (6%)	
	Don't remember		2 (1%)	
Q3.4	Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)			
	Loss of property	32 (21%)	Physical health	26 (17%)
	Housing problems	15 (10%)	Mental health	27 (18%)
	Contacting employers	3 (2%)	Needing protection from other prisoners	9 (6%)

<i>Contacting family</i>	26 (17%)	<i>Getting phone numbers</i>	27 (18%)
<i>Childcare</i>	2 (1%)	<i>Other</i>	8 (5%)
<i>Money worries</i>	27 (18%)	<i>Did not have any problems</i>	49 (32%)
<i>Feeling depressed or suicidal</i>	23 (15%)		

Q3.5 Did you receive any help/support from staff in dealing with these problems when you first arrived here?

<i>Yes</i>	40 (26%)
<i>No</i>	65 (42%)
<i>Did not have any problems</i>	49 (32%)

Q3.6 When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)

<i>Tobacco</i>	137 (86%)
<i>A shower</i>	54 (34%)
<i>A free telephone call</i>	80 (50%)
<i>Something to eat</i>	97 (61%)
<i>PIN phone credit</i>	99 (62%)
<i>Toiletries/ basic items</i>	57 (36%)
<i>Did not receive anything</i>	7 (4%)

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>	86 (55%)
<i>Someone from health services</i>	111 (71%)
<i>A Listener/Samaritans</i>	93 (59%)
<i>Prison shop/ canteen</i>	42 (27%)
<i>Did not have access to any of these</i>	21 (13%)

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>	90 (58%)
<i>What support was available for people feeling depressed or suicidal</i>	67 (43%)
<i>How to make routine requests (applications)</i>	82 (53%)
<i>Your entitlement to visits</i>	72 (46%)
<i>Health services</i>	88 (56%)
<i>Chaplaincy</i>	77 (49%)
<i>Not offered any information</i>	32 (21%)

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

<i>Yes</i>	135 (85%)
<i>No</i>	20 (13%)
<i>Don't remember</i>	3 (2%)

Q3.10 How soon after you arrived here did you go on an induction course?

<i>Have not been on an induction course</i>	11 (7%)
<i>Within the first week</i>	116 (73%)
<i>More than a week</i>	22 (14%)
<i>Don't remember</i>	9 (6%)

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

<i>Have not been on an induction course</i>	11 (7%)
<i>Yes</i>	85 (54%)
<i>No</i>	50 (32%)
<i>Don't remember</i>	12 (8%)

Q3.12 How soon after you arrived here did you receive an education ('skills for life') assessment?

<i>Did not receive an assessment</i>	25 (16%)
<i>Within the first week</i>	54 (35%)
<i>More than a week</i>	47 (31%)
<i>Don't remember</i>	27 (18%)

Section 4: Legal rights and respectful custody**Q4.1 How easy is it to.....**

	Very easy	Easy	Neither	Difficult	Very difficult	N/A
<i>Communicate with your solicitor or legal representative?</i>	29 (19%)	46 (30%)	23 (15%)	32 (21%)	14 (9%)	7 (5%)
<i>Attend legal visits?</i>	24 (17%)	61 (44%)	17 (12%)	15 (11%)	9 (6%)	14 (10%)
<i>Get bail information?</i>	8 (6%)	16 (13%)	25 (20%)	15 (12%)	18 (14%)	43 (34%)

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>	13 (8%)
<i>Yes</i>	85 (55%)
<i>No</i>	56 (36%)

Q4.3 Can you get legal books in the library?

<i>Yes</i>	78 (51%)
<i>No</i>	15 (10%)
<i>Don't know</i>	61 (40%)

Q4.4 Please answer the following questions about the wing/unit you are currently living on:

	Yes	No	Don't know
<i>Do you normally have enough clean, suitable clothes for the week?</i>	90 (58%)	62 (40%)	4 (3%)
<i>Are you normally able to have a shower every day?</i>	151 (97%)	4 (3%)	1 (1%)
<i>Do you normally receive clean sheets every week?</i>	130 (83%)	24 (15%)	2 (1%)
<i>Do you normally get cell cleaning materials every week?</i>	107 (69%)	47 (30%)	2 (1%)
<i>Is your cell call bell normally answered within five minutes?</i>	85 (54%)	45 (29%)	26 (17%)
<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	108 (71%)	45 (29%)	0 (0%)
<i>If you need to, can you normally get your stored property?</i>	47 (31%)	80 (52%)	27 (18%)

Q4.5 What is the food like here?

<i>Very good</i>	6 (4%)
<i>Good</i>	27 (17%)
<i>Neither</i>	43 (28%)
<i>Bad</i>	34 (22%)
<i>Very bad</i>	45 (29%)

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>	5 (3%)
<i>Yes</i>	68 (44%)
<i>No</i>	81 (53%)

Q4.7 Can you speak to a Listener at any time, if you want to?

<i>Yes</i>	107 (69%)
<i>No</i>	10 (6%)
<i>Don't know</i>	37 (24%)

Q4.8	Are your religious beliefs respected?	
	Yes	93 (60%)
	No	20 (13%)
	Don't know/ N/A	42 (27%)
Q4.9	Are you able to speak to a Chaplain of your faith in private if you want to?	
	Yes	99 (64%)
	No	13 (8%)
	Don't know/ N/A	43 (28%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	<i>I don't want to attend</i>	26 (17%)
	Very easy	45 (29%)
	Easy	41 (26%)
	Neither	3 (2%)
	Difficult	8 (5%)
	Very difficult	3 (2%)
	Don't know	31 (20%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?		
	Yes		130 (84%)
	No		22 (14%)
	Don't know		2 (1%)
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>)		
		<i>Not made one</i>	<i>Yes</i>
	Are applications dealt with fairly?	8 (5%)	74 (50%)
	Are applications dealt with quickly (within seven days)?	8 (6%)	43 (33%)
			<i>No</i>
			65 (44%)
			81 (61%)
Q5.3	Is it easy to make a complaint?		
	Yes		89 (60%)
	No		36 (24%)
	Don't know		23 (16%)
Q5.4	Please answer the following questions about complaints (<i>If you have not made a complaint please tick the 'not made one' option.</i>)		
		<i>Not made one</i>	<i>Yes</i>
	Are complaints dealt with fairly?	49 (33%)	31 (21%)
	Are complaints dealt with quickly (within seven days)?	49 (35%)	26 (19%)
			<i>No</i>
			67 (46%)
			65 (46%)
Q5.5	Have you ever been prevented from making a complaint when you wanted to?		
	Yes		38 (27%)
	No		101 (73%)
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>		53 (35%)
	Very easy		18 (12%)
	Easy		21 (14%)
	Neither		22 (14%)
	Difficult		23 (15%)
	Very difficult		16 (10%)

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>	14 (9%)
	Yes	65 (42%)
	No	60 (39%)
	<i>Don't know</i>	14 (9%)
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>	14 (9%)
	Yes	62 (41%)
	No	65 (43%)
	<i>Don't know</i>	11 (7%)
Q6.3	In the last six months have any members of staff physically restrained you (C&R)?	
	Yes	11 (7%)
	No	143 (93%)
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>	109 (79%)
	Very well	2 (1%)
	Well	6 (4%)
	Neither	13 (9%)
	Badly	4 (3%)
	Very badly	4 (3%)

Section 7: Relationships with staff

Q7.1	Do most staff treat you with respect?	
	Yes	120 (77%)
	No	36 (23%)
Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	Yes	112 (72%)
	No	43 (28%)
Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	55 (36%)
	No	98 (64%)
Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	10 (7%)
	Never	34 (22%)
	Rarely	33 (22%)
	Some of the time	51 (34%)
	Most of the time	16 (11%)
	All of the time	8 (5%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	58 (38%)
	<i>In the first week</i>	48 (31%)
	<i>More than a week</i>	34 (22%)

Don't remember 14 (9%)

Q7.6 How helpful is your personal (named) officer?

Do not have a personal officer/ I have not met him/ her 58 (38%)
Very helpful 34 (22%)
Helpful 29 (19%)
Neither 13 (8%)
Not very helpful 6 (4%)
Not at all helpful 14 (9%)

Section 8: Safety**Q8.1 Have you ever felt unsafe here?**

Yes 60 (38%)
No 97 (62%)

Q8.2 Do you feel unsafe now?

Yes 22 (15%)
No 129 (85%)

Q8.3 In which areas have you felt unsafe? (Please tick all that apply to you.)

<i>Never felt unsafe</i>	97 (64%)	<i>At meal times</i>	13 (9%)
<i>Everywhere</i>	19 (13%)	<i>At health services</i>	17 (11%)
<i>Segregation unit</i>	6 (4%)	<i>Visits area</i>	10 (7%)
<i>Association areas</i>	19 (13%)	<i>In wing showers</i>	17 (11%)
<i>Reception area</i>	10 (7%)	<i>In gym showers</i>	13 (9%)
<i>At the gym</i>	15 (10%)	<i>In corridors/stairwells</i>	26 (17%)
<i>In an exercise yard</i>	15 (10%)	<i>On your landing/wing</i>	23 (15%)
<i>At work</i>	19 (13%)	<i>In your cell</i>	12 (8%)
<i>During movement</i>	29 (19%)	<i>At religious services</i>	4 (3%)
<i>At education</i>	12 (8%)		

Q8.4 Have you been victimised by other prisoners here?

Yes 46 (29%)
No 111 (71%)

Q8.5 If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)

Insulting remarks (about you or your family or friends) 23 (15%)
Physical abuse (being hit, kicked or assaulted) 19 (12%)
Sexual abuse 1 (1%)
Feeling threatened or intimidated 32 (20%)
Having your canteen/property taken 19 (12%)
Medication 10 (6%)
Debt 13 (8%)
Drugs 15 (10%)
Your race or ethnic origin 3 (2%)
Your religion/religious beliefs 6 (4%)
Your nationality 4 (3%)
You are from a different part of the country than others 10 (6%)
You are from a traveller community 2 (1%)
Your sexual orientation 2 (1%)
Your age 5 (3%)
You have a disability 4 (3%)
You were new here 8 (5%)
Your offence/ crime 3 (2%)
Gang related issues 8 (5%)

Q8.6	Have you been victimised by staff here?	
	Yes	63 (41%)
	No	91 (59%)
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>	26 (17%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	13 (8%)
	<i>Sexual abuse</i>	1 (1%)
	<i>Feeling threatened or intimidated</i>	28 (18%)
	<i>Medication</i>	7 (5%)
	<i>Debt</i>	6 (4%)
	<i>Drugs</i>	10 (6%)
	<i>Your race or ethnic origin</i>	6 (4%)
	<i>Your religion/religious beliefs</i>	4 (3%)
	<i>Your nationality</i>	3 (2%)
	<i>You are from a different part of the country than others</i>	2 (1%)
	<i>You are from a traveller community</i>	1 (1%)
	<i>Your sexual orientation</i>	2 (1%)
	<i>Your age</i>	5 (3%)
	<i>You have a disability</i>	3 (2%)
	<i>You were new here</i>	6 (4%)
	<i>Your offence/ crime</i>	7 (5%)
	<i>Gang related issues</i>	4 (3%)
Q8.8	If you have been victimised by prisoners or staff, did you report it?	
	<i>Not been victimised</i>	85 (60%)
	Yes	29 (20%)
	No	28 (20%)

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	9 (6%)	13 (8%)	28 (18%)	23 (15%)	51 (33%)	29 (19%)
	The nurse	7 (5%)	28 (19%)	58 (39%)	15 (10%)	31 (21%)	11 (7%)
	The dentist	16 (11%)	10 (7%)	15 (10%)	13 (9%)	38 (26%)	56 (38%)
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	16 (10%)	21 (14%)	36 (24%)	30 (20%)	26 (17%)	24 (16%)
	The nurse	12 (8%)	30 (20%)	42 (28%)	24 (16%)	25 (17%)	18 (12%)
	The dentist	32 (21%)	24 (16%)	29 (19%)	24 (16%)	21 (14%)	19 (13%)
Q9.3	What do you think of the overall quality of the health services here?						
	<i>Not been</i>					8 (5%)	
	<i>Very good</i>					19 (12%)	
	<i>Good</i>					37 (24%)	
	<i>Neither</i>					37 (24%)	
	<i>Bad</i>					26 (17%)	
	<i>Very bad</i>					27 (18%)	
Q9.4	Are you currently taking medication?						
	Yes					79 (50%)	
	No					78 (50%)	

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>	78 (50%)
	<i>Yes, all my meds</i>	32 (21%)
	<i>Yes, some of my meds</i>	26 (17%)
	<i>No</i>	20 (13%)
Q9.6	Do you have any emotional or mental health problems?	
	<i>Yes</i>	43 (28%)
	<i>No</i>	113 (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>	113 (74%)
	<i>Yes</i>	21 (14%)
	<i>No</i>	19 (12%)

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?	
	<i>Yes</i>	37 (24%)
	<i>No</i>	117 (76%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	<i>Yes</i>	26 (17%)
	<i>No</i>	125 (83%)
Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	<i>Very easy</i>	66 (44%)
	<i>Easy</i>	15 (10%)
	<i>Neither</i>	15 (10%)
	<i>Difficult</i>	3 (2%)
	<i>Very difficult</i>	5 (3%)
	<i>Don't know</i>	47 (31%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	<i>Very easy</i>	35 (23%)
	<i>Easy</i>	24 (16%)
	<i>Neither</i>	15 (10%)
	<i>Difficult</i>	7 (5%)
	<i>Very difficult</i>	12 (8%)
	<i>Don't know</i>	60 (39%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	<i>Yes</i>	22 (14%)
	<i>No</i>	132 (86%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	<i>Yes</i>	18 (12%)
	<i>No</i>	135 (88%)
Q10.7	Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?	
	<i>Did not / do not have a drug problem</i>	105 (70%)
	<i>Yes</i>	31 (21%)
	<i>No</i>	14 (9%)

Q10.8	Have you received any support or help (for example substance misuse teams for your alcohol problem, whilst in this prison?)	
	<i>Did not / do not have an alcohol problem</i>	125 (84%)
	Yes	15 (10%)
	No	9 (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>	114 (75%)
	Yes	31 (20%)
	No	7 (5%)

Section II: 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	10 (7%)	36 (24%)	65 (43%)	19 (13%)	18 (12%)	3 (2%)
	Vocational or skills training	17 (11%)	22 (15%)	61 (41%)	27 (18%)	17 (11%)	5 (3%)
	Education (including basic skills)	16 (11%)	34 (23%)	71 (48%)	16 (11%)	10 (7%)	2 (1%)
	Offending behaviour programmes	40 (27%)	7 (5%)	33 (22%)	19 (13%)	31 (21%)	20 (13%)
Q11.2	Are you currently involved in the following? (Please tick all that apply to you.)						
	<i>Not involved in any of these</i>						24 (16%)
	Prison job						108 (72%)
	Vocational or skills training						24 (16%)
	Education (including basic skills)						24 (16%)
	Offending behaviour programmes						12 (8%)
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?						
		<i>Not been involved</i>	<i>Yes</i>	<i>No</i>	<i>Don't know</i>		
	Prison job	8 (6%)	72 (51%)	52 (37%)	9 (6%)		
	Vocational or skills training	14 (13%)	46 (43%)	36 (34%)	10 (9%)		
	Education (including basic skills)	16 (14%)	64 (54%)	30 (25%)	8 (7%)		
	Offending behaviour programmes	20 (18%)	47 (42%)	34 (30%)	12 (11%)		
Q11.4	How often do you usually go to the library?						
	<i>Don't want to go</i>						23 (15%)
	Never						34 (22%)
	Less than once a week						48 (31%)
	About once a week						42 (27%)
	More than once a week						8 (5%)
Q11.5	Does the library have a wide enough range of materials to meet your needs?						
	<i>Don't use it</i>						41 (27%)
	Yes						60 (39%)
	No						52 (34%)
Q11.6	How many times do you usually go to the gym each week?						
	<i>Don't want to go</i>						31 (20%)
	0						34 (22%)
	1 to 2						54 (36%)
	3 to 5						31 (20%)

	<i>More than 5</i>	2 (1%)
Q11.7	How many times do you usually go outside for exercise each week?	
	<i>Don't want to go</i>	18 (12%)
	<i>0</i>	47 (31%)
	<i>1 to 2</i>	56 (37%)
	<i>3 to 5</i>	19 (13%)
	<i>More than 5</i>	11 (7%)
Q11.8	How many times do you usually have association each week?	
	<i>Don't want to go</i>	4 (3%)
	<i>0</i>	14 (10%)
	<i>1 to 2</i>	70 (48%)
	<i>3 to 5</i>	39 (27%)
	<i>More than 5</i>	19 (13%)
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>	22 (14%)
	<i>2 to less than 4 hours</i>	30 (20%)
	<i>4 to less than 6 hours</i>	17 (11%)
	<i>6 to less than 8 hours</i>	27 (18%)
	<i>8 to less than 10 hours</i>	20 (13%)
	<i>10 hours or more</i>	27 (18%)
	<i>Don't know</i>	9 (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?	
	<i>Yes</i>	57 (38%)
	<i>No</i>	94 (62%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	<i>Yes</i>	58 (38%)
	<i>No</i>	96 (62%)
Q12.3	Have you had any problems getting access to the telephones?	
	<i>Yes</i>	36 (24%)
	<i>No</i>	115 (76%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	26 (17%)
	<i>Very easy</i>	15 (10%)
	<i>Easy</i>	42 (28%)
	<i>Neither</i>	15 (10%)
	<i>Difficult</i>	20 (13%)
	<i>Very difficult</i>	29 (19%)
	<i>Don't know</i>	5 (3%)

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>	3 (2%)
	<i>Yes</i>	114 (77%)
	<i>No</i>	31 (21%)

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>	34 (23%)
	<i>No contact</i>	48 (32%)
	<i>Letter</i>	44 (29%)
	<i>Phone</i>	34 (23%)
	<i>Visit</i>	33 (22%)
Q13.3	Do you have a named offender supervisor in this prison?	
	<i>Yes</i>	109 (74%)
	<i>No</i>	39 (26%)
Q13.4	Do you have a sentence plan?	
	<i>Not sentenced</i>	3 (2%)
	<i>Yes</i>	93 (63%)
	<i>No</i>	52 (35%)
Q13.5	How involved were you in the development of your sentence plan?	
	<i>Do not have a sentence plan/ not sentenced</i>	55 (37%)
	<i>Very involved</i>	31 (21%)
	<i>Involved</i>	26 (17%)
	<i>Neither</i>	10 (7%)
	<i>Not very involved</i>	16 (11%)
	<i>Not at all involved</i>	12 (8%)
Q13.6	Who is working with you to achieve your sentence plan targets? (please tick all that apply to you.)	
	<i>Do not have a sentence plan/ not sentenced</i>	55 (37%)
	<i>Nobody</i>	46 (31%)
	<i>Offender supervisor</i>	37 (25%)
	<i>Offender manager</i>	23 (16%)
	<i>Named/ personal officer</i>	11 (7%)
	<i>Staff from other departments</i>	14 (10%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	<i>Do not have a sentence plan/ not sentenced</i>	55 (38%)
	<i>Yes</i>	62 (43%)
	<i>No</i>	17 (12%)
	<i>Don't know</i>	11 (8%)
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?	
	<i>Do not have a sentence plan/ not sentenced</i>	55 (38%)
	<i>Yes</i>	21 (15%)
	<i>No</i>	55 (38%)
	<i>Don't know</i>	13 (9%)
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?	
	<i>Do not have a sentence plan/ not sentenced</i>	55 (38%)
	<i>Yes</i>	28 (19%)
	<i>No</i>	37 (26%)
	<i>Don't know</i>	25 (17%)
Q13.10	Do you have a needs based custody plan?	
	<i>Yes</i>	16 (11%)
	<i>No</i>	67 (46%)
	<i>Don't know</i>	63 (43%)

Q13.11 Do you feel that any member of staff has helped you to prepare for your release?

Yes	29 (20%)
No	117 (80%)

**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	31 (23%)	36 (26%)	69 (51%)
Accommodation	33 (24%)	32 (24%)	70 (52%)
Benefits	32 (24%)	42 (32%)	59 (44%)
Finances	36 (27%)	25 (19%)	70 (53%)
Education	42 (32%)	25 (19%)	64 (49%)
Drugs and alcohol	38 (29%)	46 (35%)	48 (36%)

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>	3 (2%)
Yes	79 (55%)
No	61 (43%)

Main comparator and comparator to last time



Prisoner survey responses HMP Featherstone 2013

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

Key to tables

		HMP Featherstone 2013	Category C training prisons comparator	HMP Featherstone 2013	HMP Featherstone 2008
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		162	6466	162	115
SECTION 1: General information					
1.2	Are you under 21 years of age?	1%	2%	1%	0%
1.3	Are you sentenced?	98%	100%	98%	100%
1.3	Are you on recall?	7%	10%	7%	8%
1.4	Is your sentence less than 12 months?	5%	6%	5%	1%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	15%	10%	15%	7%
1.5	Are you a foreign national?	9%	10%	9%	12%
1.6	Do you understand spoken English?	97%	99%	97%	
1.7	Do you understand written English?	96%	98%	96%	
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	30%	27%	30%	34%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	3%	4%	3%	
1.1	Are you Muslim?	11%	13%	11%	11%
1.11	Are you homosexual/gay or bisexual?	2%	3%	2%	0%
1.12	Do you consider yourself to have a disability?	21%	18%	21%	12%
1.13	Are you a veteran (ex-armed services)?	8%	6%	8%	
1.14	Is this your first time in prison?	30%	37%	30%	22%
1.15	Do you have any children under the age of 18?	56%	52%	56%	56%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	24%	46%	24%	19%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	64%	72%	64%	
2.3	Were you offered a toilet break?	14%	9%	14%	
2.4	Was the van clean?	55%	66%	55%	
2.5	Did you feel safe?	83%	81%	83%	
2.6	Were you treated well/very well by the escort staff?	70%	71%	70%	57%
2.7	Before you arrived here were you told that you were coming here?	65%	61%	65%	
2.7	Before you arrived here did you receive any written information about coming here?	6%	18%	6%	
2.8	When you first arrived here did your property arrive at the same time as you?	82%	89%	82%	91%

Main comparator and comparator to last time

Key to tables

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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				
SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	32%	51%	32%	
3.2	When you were searched in reception, was this carried out in a respectful way?	73%	84%	73%	81%
3.3	Were you treated well/very well in reception?	75%	73%	75%	76%
	When you first arrived:				
3.4	Did you have any problems?	68%	61%	68%	56%
3.4	Did you have any problems with loss of property?	21%	16%	21%	14%
3.4	Did you have any housing problems?	10%	15%	10%	16%
3.4	Did you have any problems contacting employers?	2%	3%	2%	7%
3.4	Did you have any problems contacting family?	17%	21%	17%	27%
3.4	Did you have any problems ensuring dependants were being looked after?	1%	2%	1%	5%
3.4	Did you have any money worries?	18%	14%	18%	16%
3.4	Did you have any problems with feeling depressed or suicidal?	15%	13%	15%	15%
3.4	Did you have any physical health problems?	17%	11%	17%	
3.4	Did you have any mental health problems?	18%	12%	18%	
3.4	Did you have any problems with needing protection from other prisoners?	6%	4%	6%	5%
3.4	Did you have problems accessing phone numbers?	18%	18%	18%	16%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	38%	37%	38%	
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	86%	75%	86%	92%
3.6	A shower?	34%	30%	34%	43%
3.6	A free telephone call?	50%	42%	50%	51%
3.6	Something to eat?	61%	63%	61%	89%
3.6	PIN phone credit?	62%	50%	62%	
3.6	Toiletries/ basic items?	36%	44%	36%	
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?	55%	52%	55%	
3.7	Someone from health services?	71%	69%	71%	
3.7	A Listener/Samaritans?	59%	32%	59%	
3.7	Prison shop/ canteen?	27%	20%	27%	10%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	58%	51%	58%	48%
3.8	Support was available for people feeling depressed or suicidal?	43%	42%	43%	46%
3.8	How to make routine requests?	53%	46%	53%	39%
3.8	Your entitlement to visits?	46%	45%	46%	41%
3.8	Health services?	56%	54%	56%	59%
3.8	The chaplaincy?	49%	49%	49%	42%

Main comparator and comparator to last time

Key to tables

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	Percentages which are not highlighted show there is no significant difference				
3.9	Did you feel safe on your first night here?	85%	83%	85%	83%
3.10	Have you been on an induction course?	93%	91%	93%	93%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	58%	63%	58%	60%
3.12	Did you receive an education (skills for life) assessment?	84%	83%	84%	
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?	50%	48%	50%	55%
4.1	Attend legal visits?	61%	52%	61%	61%
4.1	Get bail information?	19%	15%	19%	15%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	55%	41%	55%	48%
4.3	Can you get legal books in the library?	51%	43%	51%	
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	58%	68%	58%	46%
4.4	Are you normally able to have a shower every day?	97%	93%	97%	97%
4.4	Do you normally receive clean sheets every week?	83%	79%	83%	67%
4.4	Do you normally get cell cleaning materials every week?	69%	72%	69%	74%
4.4	Is your cell call bell normally answered within five minutes?	55%	37%	55%	49%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	71%	69%	71%	75%
4.4	Can you normally get your stored property, if you need to?	31%	26%	31%	39%
4.5	Is the food in this prison good/very good?	21%	26%	21%	27%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	44%	45%	44%	31%
4.7	Are you able to speak to a Listener at any time, if you want to?	69%	57%	69%	58%
4.8	Are your religious beliefs are respected?	60%	53%	60%	58%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	64%	59%	64%	53%
4.10	Is it easy/very easy to attend religious services?	55%	50%	55%	
SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	84%	83%	84%	
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	53%	61%	53%	59%
5.2	Do you feel applications are dealt with quickly (within seven days)?	35%	48%	35%	45%
5.3	Is it easy to make a complaint?	60%	61%	60%	
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	32%	34%	32%	43%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	29%	36%	29%	38%
5.5	Have you ever been prevented from making a complaint when you wanted to?	27%	17%	27%	
5.6	Is it easy/very easy to see the Independent Monitoring Board?	26%	29%	26%	27%

Main comparator and comparator to last time

Key to tables

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SECTION 6: Incentives and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	43%	55%	43%	
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	41%	48%	41%	
6.3	In the last six months have any members of staff physically restrained you (C&R)?	7%	5%	7%	
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?	28%	40%	28%	
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	77%	77%	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?	72%	75%	72%	77%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	36%	29%	36%	
7.4	Do staff normally speak to you most of the time/all of the time during association?	16%	20%	16%	23%
7.5	Do you have a personal officer?	62%	73%	62%	70%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	66%	63%	66%	59%
SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	38%	31%	38%	32%
8.2	Do you feel unsafe now?	15%	13%	15%	16%
8.4	Have you been victimised by other prisoners here?	29%	22%	29%	15%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	15%	10%	15%	7%
8.5	Hit, kicked or assaulted you?	12%	6%	12%	5%
8.5	Sexually abused you?	1%	1%	1%	0%
8.5	Threatened or intimidated you?	20%	13%	20%	
8.5	Taken your canteen/property?	12%	4%	12%	4%
8.5	Victimised you because of medication?	6%	4%	6%	
8.5	Victimised you because of debt?	8%	3%	8%	
8.5	Victimised you because of drugs?	10%	3%	10%	2%
8.5	Victimised you because of your race or ethnic origin?	2%	3%	2%	5%
8.5	Victimised you because of your religion/religious beliefs?	4%	2%	4%	2%
8.5	Victimised you because of your nationality?	3%	2%	3%	
8.5	Victimised you because you were from a different part of the country?	6%	4%	6%	5%
8.5	Victimised you because you are from a Traveller community?	1%	1%	1%	
8.5	Victimised you because of your sexual orientation?	1%	1%	1%	0%
8.5	Victimised you because of your age?	3%	2%	3%	
8.5	Victimised you because you have a disability?	3%	2%	3%	0%
8.5	Victimised you because you were new here?	5%	4%	5%	5%
8.5	Victimised you because of your offence/crime?	2%	4%	2%	2%
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?	41%	27%	41%	27%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	17%	10%	17%	16%
8.7	Hit, kicked or assaulted you?	9%	3%	9%	2%
8.7	Sexually abused you?	1%	1%	1%	0%
8.7	Threatened or intimidated you?	18%	12%	18%	
8.7	Victimised you because of medication?	5%	4%	5%	
8.7	Victimised you because of debt?	4%	2%	4%	
8.7	Victimised you because of drugs?	7%	2%	7%	3%
8.7	Victimised you because of your race or ethnic origin?	4%	5%	4%	5%
8.7	Victimised you because of your religion/religious beliefs?	3%	3%	3%	3%
8.7	Victimised you because of your nationality?	2%	3%	2%	
8.7	Victimised you because you were from a different part of the country?	1%	3%	1%	4%
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?	3%	2%	3%	
8.7	Victimised you because you have a disability?	2%	2%	2%	1%
8.7	Victimised you because you were new here?	4%	4%	4%	8%
8.7	Victimised you because of your offence/crime?	5%	4%	5%	1%
8.7	Victimised you because of gang related issues?	3%	2%	3%	
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	51%	39%	51%	43%
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	27%	32%	27%	29%
9.1	Is it easy/very easy to see the nurse?	57%	55%	57%	59%
9.1	Is it easy/very easy to see the dentist?	17%	13%	17%	8%
	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?	42%	48%	42%	41%
9.2	The nurse?	52%	60%	52%	61%
9.2	The dentist?	45%	42%	45%	35%
9.3	The overall quality of health services?	38%	44%	38%	40%
9.4	Are you currently taking medication?	50%	47%	50%	42%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	74%	86%	74%	
9.6	Do you have any emotional well being or mental health problems?	28%	26%	28%	19%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	52%	49%	52%	

Main comparator and comparator to last time

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SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	24%	24%	24%	23%
10.2	Did you have a problem with alcohol when you came into this prison?	17%	18%	17%	17%
10.3	Is it easy/very easy to get illegal drugs in this prison?	54%	30%	54%	37%
10.4	Is it easy/very easy to get alcohol in this prison?	39%	18%	39%	
10.5	Have you developed a problem with drugs since you have been in this prison?	14%	8%	14%	9%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	12%	6%	12%	
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	69%	64%	69%	
10.8	Have you received any support or help with your alcohol problem while in this prison?	62%	64%	62%	
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	82%	80%	82%	75%
SECTION 11: Activities					
	Is it very easy/ easy to get into the following activities:				
11.1	A prison job?	67%	42%	67%	
11.1	Vocational or skills training?	56%	36%	56%	
11.1	Education (including basic skills)?	71%	51%	71%	
11.1	Offending behaviour programmes?	27%	20%	27%	
	Are you currently involved in any of the following activities:				
11.2	A prison job?	72%	60%	72%	75%
11.2	Vocational or skills training?	16%	17%	16%	16%
11.2	Education (including basic skills)?	16%	26%	16%	19%
11.2	Offending behaviour programmes?	8%	13%	8%	16%
11.3	Have you had a job while in this prison?	94%	83%	94%	
	For those who have had a prison job while in this prison:				
11.3	Do you feel the job will help you on release?	54%	43%	54%	
11.3	Have you been involved in vocational or skills training while in this prison?	87%	73%	87%	
	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?	50%	59%	50%	
11.3	Have you been involved in education while in this prison?	87%	79%	87%	
	For those who have been involved in education while in this prison:				
11.3	Do you feel the education will help you on release?	63%	61%	63%	
11.3	Have you been involved in offending behaviour programmes while in this prison?	82%	71%	82%	
	For those who have been involved in offending behaviour programmes while in this prison:				
11.3	Do you feel the offending behaviour programme(s) will help you on release?	51%	54%	51%	
11.4	Do you go to the library at least once a week?	32%	47%	32%	36%
11.5	Does the library have a wide enough range of materials to meet your needs?	39%	45%	39%	
11.6	Do you go to the gym three or more times a week?	22%	37%	22%	35%
11.7	Do you go outside for exercise three or more times a week?	20%	47%	20%	46%
11.8	Do you go on association more than five times each week?	13%	76%	13%	91%

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11.9	Do you spend ten or more hours out of your cell on a weekday?	18%	16%	18%	10%
SECTION 12: Friends and family					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	38%	35%	38%	38%
12.2	Have you had any problems with sending or receiving mail?	38%	44%	38%	30%
12.3	Have you had any problems getting access to the telephones?	24%	24%	24%	25%
12.4	Is it easy/ very easy for your friends and family to get here?	38%	27%	38%	
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?	79%	82%	79%	
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	41%	33%	41%	
13.2	Contact by letter?	38%	38%	38%	
13.2	Contact by phone?	29%	25%	29%	
13.2	Contact by visit?	28%	33%	28%	
13.3	Do you have a named offender supervisor in this prison?	74%	67%	74%	
For those who are sentenced:					
13.4	Do you have a sentence plan?	64%	70%	64%	82%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	60%	55%	60%	54%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	50%	46%	50%	
13.6	Offender supervisor?	40%	36%	40%	
13.6	Offender manager?	25%	27%	25%	
13.6	Named/ personal officer?	12%	13%	12%	
13.6	Staff from other departments?	15%	17%	15%	
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	69%	65%	69%	65%
13.8	Are there plans for you to achieve any of your targets in another prison?	24%	22%	24%	
13.9	Are there plans for you to achieve any of your targets in the community?	31%	29%	31%	
13.10	Do you have a needs based custody plan?	11%	7%	11%	
13.11	Do you feel that any member of staff has helped you to prepare for release?	20%	17%	20%	19%
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?	34%	35%	34%	
13.12	Accommodation?	31%	38%	31%	
13.12	Benefits?	42%	39%	42%	
13.12	Finances?	26%	27%	26%	
13.12	Education?	28%	36%	28%	
13.12	Drugs and alcohol?	49%	45%	49%	
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?	56%	56%	56%	57%



Diversity analysis

Key question responses (ethnicity and religion) HMP Featherstone 2013

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

Key to tables

		Black and minority ethnic prisoners	White prisoners	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				
Number of completed questionnaires returned		48	111	18	141
1.3	Are you sentenced?	98%	98%	100%	99%
1.5	Are you a foreign national?	14%	5%	5%	9%
1.6	Do you understand spoken English?	96%	98%	95%	98%
1.7	Do you understand written English?	94%	98%	95%	97%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			95%	21%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	2%	4%	5%	3%
1.1	Are you Muslim?	37%	1%		
1.12	Do you consider yourself to have a disability?	17%	23%	11%	21%
1.13	Are you a veteran (ex-armed services)?	2%	11%	0%	10%
1.14	Is this your first time in prison?	38%	26%	47%	28%
2.6	Were you treated well/very well by the escort staff?	60%	73%	67%	70%
2.7	Before you arrived here were you told that you were coming here?	65%	66%	61%	66%
3.2	When you were searched in reception, was this carried out in a respectful way?	58%	79%	72%	73%
3.3	Were you treated well/very well in reception?	66%	78%	61%	77%
3.4	Did you have any problems when you first arrived?	68%	69%	53%	70%
3.7	Did you have access to someone from health care when you first arrived here?	60%	75%	39%	74%
3.9	Did you feel safe on your first night here?	83%	86%	100%	84%
3.10	Have you been on an induction course?	87%	95%	83%	94%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	44%	52%	55%	48%
4.4	Are you normally offered enough clean, suitable clothes for the week?	61%	56%	59%	58%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally able to have a shower every day?	98%	96%	100%	96%
4.4	Is your cell call bell normally answered within five minutes?	56%	55%	72%	52%
4.5	Is the food in this prison good/very good?	18%	23%	17%	22%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	16%	54%	6%	48%
4.7	Are you able to speak to a Listener at any time, if you want to?	61%	73%	78%	68%
4.8	Do you feel your religious beliefs are respected?	60%	59%	78%	57%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	65%	62%	89%	61%
5.1	Is it easy to make an application?	81%	85%	89%	83%
5.3	Is it easy to make a complaint?	48%	65%	59%	60%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	37%	44%	35%	43%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	37%	42%	39%	42%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	4%	8%	0%	8%
7.1	Do most staff, in this prison, treat you with respect?	76%	77%	72%	77%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	72%	72%	72%	72%
7.3	Do staff normally speak to you at least most of the time during association time (most/all of the time)	9%	18%	11%	17%
7.4	Do you have a personal officer?	74%	57%	89%	58%
8.1	Have you ever felt unsafe here?	22%	44%	28%	39%
8.2	Do you feel unsafe now?	9%	17%	17%	15%
8.3	Have you been victimised by other prisoners?	24%	32%	45%	27%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	11%	25%	22%	21%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	2%	2%	5%	1%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	2%	5%	11%	3%
8.5	Have you been victimised because of your nationality? (By prisoners)	2%	3%	5%	2%

Diversity analysis

Key to tables

Any percentage highlighted in green is significantly better		Black and minority ethnic prisoners	White prisoners	Muslim prisoners	Non-Muslim prisoners
Any percentage highlighted in blue is significantly worse					
Any percentage highlighted in orange shows a significant difference in prisoners' background details					
Percentages which are not highlighted show there is no significant difference					
8.5	Have you been victimised because you have a disability? (By prisoners)	0%	4%	0%	3%
8.6	Have you been victimised by a member of staff?	44%	40%	61%	38%
8.7	Have you ever felt threatened or intimidated by staff here?	22%	17%	45%	15%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	9%	1%	11%	2%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	4%	2%	17%	1%
8.7	Have you been victimised because of your nationality? (By staff)	2%	1%	5%	1%
8.7	Have you been victimised because you have a disability? (By staff)	0%	3%	0%	2%
9.1	Is it easy/very easy to see the doctor?	23%	28%	17%	28%
9.1	Is it easy/ very easy to see the nurse?	59%	55%	59%	57%
9.4	Are you currently taking medication?	30%	58%	33%	52%
9.6	Do you feel you have any emotional well being/mental health issues?	18%	32%	33%	27%
10.3	Is it easy/very easy to get illegal drugs in this prison?	46%	57%	47%	54%
11.2	Are you currently working in the prison?	71%	71%	78%	70%
11.2	Are you currently undertaking vocational or skills training?	22%	12%	11%	17%
11.2	Are you currently in education (including basic skills)?	19%	14%	11%	17%
11.2	Are you currently taking part in an offending behaviour programme?	7%	8%	5%	8%
11.4	Do you go to the library at least once a week?	27%	35%	22%	34%
11.6	Do you go to the gym three or more times a week?	18%	22%	6%	24%
11.7	Do you go outside for exercise three or more times a week?	19%	20%	12%	21%
11.8	On average, do you go on association more than five times each week?	15%	12%	18%	12%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	24%	15%	18%	18%
12.2	Have you had any problems sending or receiving mail?	32%	40%	29%	39%
12.3	Have you had any problems getting access to the telephones?	30%	21%	29%	23%

Diversity Analysis



Key question responses (disability) HMP Featherstone 2013

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		33	126
1.3	Are you sentenced?	97%	99%
1.5	Are you a foreign national?	3%	10%
1.6	Do you understand spoken English?	97%	98%
1.7	Do you understand written English?	97%	97%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	25%	32%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	13%	1%
1.1	Are you Muslim?	6%	13%
1.12	Do you consider yourself to have a disability?	-	-
1.13	Are you a veteran (ex-armed services)?	6%	9%
1.14	Is this your first time in prison?	30%	30%
2.6	Were you treated well/very well by the escort staff?	67%	70%
2.7	Before you arrived here were you told that you were coming here?	60%	67%
3.2	When you were searched in reception, was this carried out in a respectful way?	56%	77%
3.3	Were you treated well/very well in reception?	75%	74%
3.4	Did you have any problems when you first arrived?	90%	64%
3.7	Did you have access to someone from health care when you first arrived here?	64%	73%
3.9	Did you feel safe on your first night here?	69%	89%
3.10	Have you been on an induction course?	94%	93%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	32%	54%
4.4	Are you normally offered enough clean, suitable clothes for the week?	55%	58%

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 able to have a shower every day?	94%	98%
4.4	Is your cell call bell normally answered within five minutes?	53%	55%
4.5	Is the food in this prison good/very good?	28%	19%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	49%	43%
4.7	Are you able to speak to a Listener at any time, if you want to?	77%	68%
4.8	Do you feel your religious beliefs are respected?	53%	62%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	66%	63%
5.1	Is it easy to make an application?	81%	85%
5.3	Is it easy to make a complaint?	72%	57%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	43%	43%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	45%	41%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	6%	7%
7.1	Do most staff, in this prison, treat you with respect?	77%	76%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	77%	70%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	18%	16%
7.4	Do you have a personal officer?	57%	64%
8.1	Have you ever felt unsafe here?	56%	33%
8.2	Do you feel unsafe now?	17%	13%
8.3	Have you been victimised by other prisoners?	41%	27%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	25%	20%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	3%	2%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	3%	4%
8.5	Have you been victimised because of your nationality? (By prisoners)	3%	3%
8.5	Have you been victimised because of your age? (By prisoners)	10%	2%

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		
8.5	Have you been victimised because you have a disability? (By prisoners)	10%	1%
8.6	Have you been victimised by a member of staff?	45%	40%
8.7	Have you ever felt threatened or intimidated by staff here?	22%	17%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	3%	3%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	3%
8.7	Have you been victimised because of your nationality? (By staff)	0%	2%
8.7	Have you been victimised because of your age? (By staff)	10%	2%
8.7	Have you been victimised because you have a disability? (By staff)	6%	1%
9.1	Is it easy/very easy to see the doctor?	40%	24%
9.1	Is it easy/ very easy to see the nurse?	64%	56%
9.4	Are you currently taking medication?	69%	46%
9.6	Do you feel you have any emotional well being/mental health issues?	50%	21%
10.3	Is it easy/very easy to get illegal drugs in this prison?	52%	54%
11.2	Are you currently working in the prison?	71%	72%
11.2	Are you currently undertaking vocational or skills training?	11%	17%
11.2	Are you currently in education (including basic skills)?	14%	17%
11.2	Are you currently taking part in an offending behaviour programme?	14%	7%
11.4	Do you go to the library at least once a week?	47%	29%
11.6	Do you go to the gym three or more times a week?	13%	23%
11.7	Do you go outside for exercise three or more times a week?	10%	22%
11.8	On average, do you go on association more than five times each week?	10%	13%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	13%	20%
12.2	Have you had any problems sending or receiving mail?	49%	35%
12.3	Have you had any problems getting access to the telephones?	29%	22%



Prisoner survey responses HMP Featherstone 2013 Induction wing comparator

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

Key to tables

Any percentage highlighted in green is significantly better	House 5	Houses 1, 2, 3, 4, 6 and 7
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	21	139
SECTION 1: General information		
1.2 Are you under 21 years of age?	0%	1%
1.3 Are you sentenced?	96%	99%
1.3 Are you on recall?	15%	6%
1.4 Is your sentence less than 12 months?	19%	3%
1.4 Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	16%
1.5 Are you a foreign national?	5%	10%
1.6 Do you understand spoken English?	100%	96%
1.7 Do you understand written English?	100%	96%
1.8 Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	15%	33%
1.9 Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	4%
1.1 Are you Muslim?	0%	13%
1.11 Are you homosexual/gay or bisexual?	0%	2%
1.12 Do you consider yourself to have a disability?	20%	21%
1.13 Are you a veteran (ex-armed services)?	0%	10%
1.14 Is this your first time in prison?	5%	35%
1.15 Do you have any children under the age of 18?	52%	57%
SECTION 2: Transfers and escorts		
On your most recent journey here:		
2.1 Did you spend more than 2 hours in the van?	9%	26%
2.5 Did you feel safe?	81%	84%
2.6 Were you treated well/very well by the escort staff?	62%	71%
2.7 Before you arrived here were you told that you were coming here?	62%	67%
2.8 When you first arrived here did your property arrive at the same time as you?	72%	83%
SECTION 3: Reception, first night and induction		
3.1 Were you in reception for less than 2 hours?	15%	35%
3.2 When you were searched in reception, was this carried out in a respectful way?	76%	73%
3.3 Were you treated well/very well in reception?	76%	75%
When you first arrived:		
3.4 Did you have any problems?	81%	66%
3.4 Did you have any problems with loss of property?	33%	19%
3.4 Did you have any housing problems?	5%	11%
3.4 Did you have any problems contacting employers?	0%	2%

Key to tables

	Any percentage highlighted in green is significantly better	House 5	Houses 1,2,3,4,6 and 7
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
3.4	Did you have any problems contacting family?	9%	18%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	2%
3.4	Did you have any money worries?	24%	16%
3.4	Did you have any problems with feeling depressed or suicidal?	5%	16%
3.4	Did you have any physical health problems?	24%	16%
3.4	Did you have any mental health problems?	15%	19%
3.4	Did you have any problems with needing protection from other prisoners?	15%	5%
3.4	Did you have problems accessing phone numbers?	15%	18%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	85%	85%
3.6	A shower?	28%	35%
3.6	A free telephone call?	62%	49%
3.6	Something to eat?	72%	60%
3.6	PIN phone credit?	52%	63%
3.6	Toiletries/ basic items?	33%	37%
	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?	57%	54%
3.7	Someone from health services?	85%	68%
3.7	A Listener/Samaritans?	72%	57%
3.7	Prison shop/ canteen?	24%	27%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	57%	58%
3.8	Support was available for people feeling depressed or suicidal?	43%	43%
3.8	How to make routine requests?	62%	52%
3.8	Your entitlement to visits?	43%	47%
3.8	Health services?	57%	56%
3.8	The chaplaincy?	43%	51%
3.9	Did you feel safe on your first night here?	81%	87%
3.10	Have you been on an induction course?	91%	93%
3.12	Did you receive an education (skills for life) assessment?	80%	84%
	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?	58%	48%
4.1	Attend legal visits?	40%	63%
4.1	Get bail information?	33%	18%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	24%	60%
4.3	Can you get legal books in the library?	50%	52%

Key to tables

	Any percentage highlighted in green is significantly better	House 5	Houses 1, 2, 3, 4, 6 and 7
	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		
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	48%	60%
4.4	Are you normally able to have a shower every day?	95%	97%
4.4	Do you normally receive clean sheets every week?	95%	83%
4.4	Do you normally get cell cleaning materials every week?	70%	69%
4.4	Is your cell call bell normally answered within five minutes?	52%	55%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	66%	72%
4.4	Can you normally get your stored property, if you need to?	30%	31%
4.5	Is the food in this prison good/very good?	33%	19%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	48%	44%
4.7	Are you able to speak to a Listener at any time, if you want to?	62%	70%
4.8	Are your religious beliefs are respected?	43%	64%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	43%	67%
4.10	Is it easy/very easy to attend religious services?	24%	59%
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	91%	84%
5.3	Is it easy to make a complaint?	78%	58%
5.5	Have you ever been prevented from making a complaint when you wanted to?	21%	28%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	48%	22%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	57%	41%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	52%	40%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	0%	8%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	80%	76%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	81%	71%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	40%	35%
7.4	Do staff normally speak to you most of the time/all of the time during association?	5%	18%
7.5	Do you have a personal officer?	35%	66%
SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	43%	37%
8.2	Do you feel unsafe now?	10%	15%
8.4	Have you been victimised by other prisoners here?	33%	28%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	19%	14%
8.5	Hit, kicked or assaulted you?	9%	12%
8.5	Sexually abused you?	0%	1%

Key to tables

	Any percentage highlighted in green is significantly better	House 5	Houses 1,2,3,4,6 and 7
	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		
8.5	Threatened or intimidated you?	15%	21%
8.5	Taken your canteen/property?	24%	10%
8.5	Victimised you because of medication?	5%	7%
8.5	Victimised you because of debt?	19%	7%
8.5	Victimised you because of drugs?	19%	7%
8.5	Victimised you because of your race or ethnic origin?	0%	1%
8.5	Victimised you because of your religion/religious beliefs?	0%	4%
8.5	Victimised you because of your nationality?	0%	2%
8.5	Victimised you because you were from a different part of the country?	0%	7%
8.5	Victimised you because you are from a traveller community?	0%	1%
8.5	Victimised you because of your sexual orientation?	0%	1%
8.5	Victimised you because of your age?	5%	3%
8.5	Victimised you because you have a disability?	0%	3%
8.5	Victimised you because you were new here?	9%	4%
8.5	Victimised you because of your offence/crime?	0%	2%
8.5	Victimised you because of gang related issues?	9%	4%
SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	48%	40%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	19%	17%
8.7	Hit, kicked or assaulted you?	5%	9%
8.7	Sexually abused you?	0%	1%
8.7	Threatened or intimidated you?	15%	18%
8.7	Victimised you because of medication?	15%	3%
8.7	Victimised you because of debt?	5%	4%
8.7	Victimised you because of drugs?	9%	5%
8.7	Victimised you because of your race or ethnic origin?	0%	5%
8.7	Victimised you because of your religion/religious beliefs?	0%	3%
8.7	Victimised you because of your nationality?	0%	2%
8.7	Victimised you because you were from a different part of the country?	0%	2%
8.7	Victimised you because you are from a traveller community?	0%	1%
8.7	Victimised you because of your sexual orientation?	0%	2%
8.7	Victimised you because of your age?	5%	3%
8.7	Victimised you because you have a disability?	0%	2%
8.7	Victimised you because you were new here?	5%	4%
8.7	Victimised you because of your offence/crime?	0%	5%
8.7	Victimised you because of gang related issues?	9%	2%

Key to tables

	Any percentage highlighted in green is significantly better	House 5	Houses 1, 2, 3, 4, 6 and 7
	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		
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	26%	27%
9.1	Is it easy/very easy to see the nurse?	50%	59%
9.1	Is it easy/very easy to see the dentist?	22%	16%
9.4	Are you currently taking medication?	52%	50%
9.6	Do you have any emotional well being or mental health problems?	24%	29%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	28%	24%
10.2	Did you have a problem with alcohol when you came into this prison?	0%	20%
10.3	Is it easy/very easy to get illegal drugs in this prison?	81%	49%
10.4	Is it easy/very easy to get alcohol in this prison?	28%	39%
10.5	Have you developed a problem with drugs since you have been in this prison?	15%	14%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	9%	12%
SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	52%	70%
11.1	Vocational or skills training?	50%	58%
11.1	Education (including basic skills)?	62%	72%
11.1	Offending Behaviour Programmes?	40%	25%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	50%	75%
11.2	Vocational or skills training?	5%	18%
11.2	Education (including basic skills)?	17%	16%
11.2	Offending Behaviour Programmes?	17%	7%
11.4	Do you go to the library at least once a week?	28%	33%
11.5	Does the library have a wide enough range of materials to meet your needs?	50%	38%
11.6	Do you go to the gym three or more times a week?	30%	21%
11.7	Do you go outside for exercise three or more times a week?	24%	19%
11.8	Do you go on association more than five times each week?	0%	15%
11.9	Do you spend ten or more hours out of your cell on a weekday?	9%	19%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	43%	38%
12.2	Have you had any problems with sending or receiving mail?	33%	37%
12.3	Have you had any problems getting access to the telephones?	15%	25%
12.4	Is it easy/ very easy for your friends and family to get here?	38%	38%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	55%	76%
13.10	Do you have a needs based custody plan?	15%	11%
13.11	Do you feel that any member of staff has helped you to prepare for release?	25%	19%