

Report on an unannounced inspection of

HMP Dartmoor

by HM Chief Inspector of Prisons

2–13 December 2013

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Contents

Introduction	5
Fact page	7
About this inspection and report	9
Summary	11
Section 1. Safety	19
Section 2. Respect	29
Section 3. Purposeful activity	41
Section 4. Resettlement	47
Section 5. Summary of recommendations and housekeeping points	55
Section 6. Appendices	63
Appendix I: Inspection team	63
Appendix II: Progress on recommendations from the last report	65
Appendix III: Prison population profile	73
Appendix IV: Summary of prisoner questionnaires and interviews	77

Introduction

HMP Dartmoor was established in 1809 to hold French prisoners-of-war from the Napoleonic wars. It has had many incarnations since then and developed a notorious reputation as a high security prison. However, the prison is now a category C training prison which, at the time of this inspection, held 655 adult men.

The prison's isolated location high on Dartmoor itself, and the age and dilapidated state of some of its buildings, make it a very challenging establishment to run. A few months before our inspection, ministers announced that negotiations would take place with the Duchy of Cornwall, which owns the prison, about its closure. However, there is a notice period of 10 years and it is therefore quite possible that the prison will continue to operate for many years to come. Despite the challenges of the environment and location, we saw no reason why HMP Dartmoor could not offer improved and reasonable prisoner outcomes for the prisoners it held. There had been improvements in some areas since our last inspection and there were some credible plans in place to make more. The prison had created good partnerships with external service providers. There were significant weaknesses – but most of these were in the prison's direct control.

However, an essential foundation for improvement is some certainty about the timeframe in which the prison will continue to operate. Even a minimum timeframe would enable staff to know where they stand, facilitate some sensible decisions about the capital investment required and provide a basis for effective planning to meet the needs of the prison population, which were changing and included many more sex offenders as other prisons in the South West closed.

The prison was not safe enough. Men had long journeys to the prison and reception processes were efficient and welcoming. Care for men at risk of suicide or self-harm was reasonable. However, too many prisoners felt unsafe and levels of victimisation were high. Sloppy processes meant that the prison was not adequately sighted on the true levels of violence. We found hard evidence of violent incidents in wing observation books, adjudication records and meeting minutes that were not centrally recorded. There was little support for victims who were often moved to the vulnerable prisoners wing. Vulnerable prisoners felt even less safe than the population as a whole. Safety was compromised by the too ready availability of prohibited drugs (which included synthetic cannabinoids such as 'Spice', which were not detectable with current testing methods), injected drugs, tradable prescribed drugs and illicitly brewed alcohol, or 'hooch'.

Discipline and behaviour management processes required improvement. The environment of the segregation unit had improved since our last inspection and relationships between staff and prisoners were good, but very little was done to address the behaviour of the men held there. At the time of the inspection a more restrictive incentives and earned privileges scheme had been introduced nationally. Implementation of the scheme had been poor at Dartmoor. The timescales and criteria set out in the national scheme had not been followed in some cases and prisoners did not understand why they had been demoted. Some retired prisoners and those with disabilities were demoted because they were not working. Prisoners without sentence plans were demoted – because they were not following their sentence plan. We found men at risk of suicide on assessment, care in custody and teamwork (ACCT) case management who were placed on the basic regime with very little to occupy them or distract them.

One wing of the prison was closed and derelict but good efforts had been made to improve the external environment. The cells in use were very small and some of these, which were cramped for one man, were shared by two. Unscreened toilets were placed by the beds. Some roofs leaked badly and some cells were damp. Good and improved relationships between staff and prisoners mitigated the worst effects of the poor physical conditions. The strategic management of diversity and equality issues was weak but practical support on the wings was better. The prison had a high proportion of older and disabled prisoners. Many of them were on the vulnerable prisoners wing where support

was good; support for those on other wings was less so. Some prisoners from black and minority ethnic backgrounds and foreign national prisoners told us they felt isolated and unsupported. Perhaps because of its location, the prison had more prisoners who identified themselves as ex-service personnel or veterans; support for these men was good. Dorset Healthcare University NHS Foundation Trust, the new health care provider, had improved health services.

Most men enjoyed good time out of their cells, although opportunities for outdoor exercise were too limited. The education, training and work environment was impressive and the quality of what was provided was good. There was good use of peer mentors. It was good to see prisoners' success publicly celebrated. Prisoners made real progress and there was a good focus on the literacy and numeracy skills that would help them obtain jobs or further training on release. It was very unfortunate therefore that the prison had miscalculated the number of activity places available and too few prisoners benefited from what was on offer. Further activity places were due to come on stream a few months after the inspection and we believed the prison would be able to make up the shortfall.

Rehabilitation processes were weak. Some of this was a regional problem. Far too many men arrived at the prison without an up-to-date risk assessment or sentence plan which severely compromised the progress they could make at Dartmoor. The prison itself had done little to react to this situation had there had been no attempt to give offender supervisors clear priorities in dealing with the backlogs.

Following the closure of other prisons in the region, the prison held a large population of sex offenders. Vulnerable prisoners made up more than half the population. The intention was that Dartmoor would prepare these men to take part in sex offender treatment programmes at HMP Channings Wood. However, a significant proportion of the sex offenders held at Dartmoor were judged to be in denial of their offence and there was no provision for them. These men made no progress and so the number was increasing. An effective strategy and suitable programmes needed to be developed to address these men's offending behaviour.

The resettlement support unit provided effective support to help some men prepare for release. This included some opportunities for release on temporary licence (ROTL). ROTL was an important tool but in the prison as a whole it was poorly managed and there was insufficient attention paid to public protection concerns. Practical resettlement support was generally effective but visits arrangements and support for men to maintain contact with their family and friends was inadequate and did not take sufficient account of the isolated location of the prison.

There is a risk that staff and managers at HMP Dartmoor become paralysed by the things over which they have very little control – the uncertainties over the prison's future, the state of the buildings, the prison's location and the make up of the population it holds – and that this becomes an excuse for not addressing the things they can change. The improvements that have been made show what can be done by determined leadership. The prison and regional managers should now focus on reducing levels of violence, building on the improvements made to education, training and work, tackling the backlog of risk assessments and ensuring an effective strategy is in place to deal with the sex offender population.

Nick Hardwick
HM Chief Inspector of Prisons

April 2014

Fact page

Task of the establishment

HMP Dartmoor is a category C training prison for adult males.

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

Public

Region/Department

South-West

Number held

655

Certified normal accommodation

639

Operational capacity

659

Date of last full inspection

12–16 December 2011

Brief history

Built in 1809, Dartmoor was a category B training prison until November 2000, when it was re-roled to a category C prison.

Short description of residential units

A wing: vulnerable prisoner unit (holds 132)

B wing: vulnerable prisoner unit (holds 134)

D wing: integrated vulnerable prisoner and mainstream prisoner wing (holds 122)

E wing: resettlement unit (holds 49)

F wing: enhanced mainstream wing (holds 47)

G wing: mainstream wing (holds 157)

Name of governor/director

Terry Witton

Escort contractor

GeoAmey

Health service provider

Dorset Healthcare University NHS Foundation Trust

Learning and skills provider

Weston College

Independent Monitoring Board chair

Margaret Blake

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 report

- A8 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of prisoners and conditions in prisons*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.
- A9 Details of the inspection team and the prison population profile can be found in Appendices I and III respectively.
- A10 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix IV of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.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 *Reception was welcoming and processes were efficient. First night and induction arrangements were good for vulnerable prisoners but considerably less positive for mainstream prisoners. Violence reduction arrangements had deteriorated. Too many prisoners felt unsafe and levels of victimisation were high. Suicide and self-harm procedures were reasonably good. Security was generally proportionate, security information was analysed well and areas of concern were identified. Incentives and earned privileges processes were poor. Levels of use of force were lower than at similar prisons. The segregation regime was inadequate and there was minimal reintegration planning. Illicit drug and alcohol availability was relatively high. Clinical services for drug users were overstretched but there was a suitable range of support services. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S2 *At the last inspection in 2011 we found that outcomes for prisoners in Dartmoor were reasonably good against this healthy prison test. We made 21 recommendations in the area of safety. At this follow-up inspection we found that five of the recommendations had been achieved, two had been partially achieved and 14 had not been achieved.*
- S3 In our survey, prisoners reported relatively long journeys to the establishment but they were taken off vans swiftly, reception processes started immediately and they had relatively short stays in reception.
- S4 Reception processes were thorough and welcoming. Prisoner orderlies provided support and refreshments at any time of day to arriving prisoners. However, the initial reception interviews were held in full view and hearing of the reception orderlies.
- S5 First night safety interviews took place in private in wing offices and focused on risk issues. The first night experience for vulnerable prisoners on D wing was good. Cells there were clean and reasonably well prepared, and immediate support was provided by well-trained Insiders (prisoners who introduce new arrivals to prison life). The experience for mainstream prisoners on G wing was less positive. Some first night accommodation was ill prepared, with dirty, poorly equipped cells.
- S6 Most prisoners attended an initial induction course. The course for mainstream prisoners was adequate but it was much more comprehensive and supportive for vulnerable prisoners, with a team of Insiders delivering a well-considered presentation on key information.
- S7 Too many prisoners felt unsafe. The number of recorded violent incidents was low but we found a significant amount of under-reporting; for example, incidents in wing observation books were not reflected in the prison's violence reduction data. Our survey results indicated that levels of victimisation from other prisoners were high. Vulnerable prisoners, despite now being in the majority, felt even less safe than mainstream prisoners, particularly on the vulnerable prisoner wings. Overall strategic management and action in relation to violence reduction was poor, with inadequate analysis of data and no trend analysis or action to make the prison safer. There was no support for victims.

- S8 The levels of self-harm and the number of prisoners being monitored and supported on self-harm monitoring processes were similar to those at comparator prisons. Arrangements for the management of suicide and self-harm and the quality of care were generally effective, and supported by good recording. Access to Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) was good and they felt well supported by the prison and Samaritans. The care suites were dirty and unprepared, providing a poor environment for prisoners in crisis.
- S9 Security was generally proportionate, although there were still some unnecessary security restrictions on prison shop items. A reasonable amount of security information was analysed well and areas of concern, such as possession of drugs and mobile telephones, were identified. Our survey results, finds and intelligence indicated relatively high levels of drug availability, including diverted medications, synthetic cannabinoids, alcohol and needles. The random mandatory drug testing positive rate was lower than at comparator prisons, although synthetic cannabinoids were not detectable under these arrangements. Too few prisoners suspected of taking drugs were tested. A good drug supply-reduction strategy and proactive measures had been introduced and there was good information sharing between health care and security departments.
- S10 The new incentives and earned privileges policy had been poorly implemented and nearly half of the prisoners in our survey said that they had not been treated fairly under the scheme. A number of prisoners had been disadvantaged under the new scheme because of age, disability or the lack of a sentence plan.
- S11 There were fewer adjudications than at similar prisons. Levels of use of force were slightly lower than at comparator prisons and than at the time of the previous inspection. Incidents were well documented, although planned uses of force were not always video-recorded. Uses of force were monitored to identify patterns and trends.
- S12 The cleanliness of the segregation unit had improved but the regime was inadequate, and all the prisoners we spoke to complained of boredom. Staff-prisoner relationships on the unit were good but there was insufficient challenge of poor behaviour on the unit. Few prisoners remained there for long periods but care planning did not always take place or started too late, and reviews lacked focus on reintegration. Too many segregated prisoners were transferred out of the establishment without their issues being addressed.
- S13 The clinical substance misuse service was overstretched, resulting in delays in prisoner assessments and reviews. Opiate substitute treatment was flexible and needs based, and controlled drug administration was safe. Integration between clinical and psychosocial services had improved and there was better joint working with mental health staff, but still no dual diagnosis service (for those with both mental health and substance misuse problems). There was a suitable range of interventions, including alcohol programmes, peer support and mentoring, and good recovery support.

Respect

- S14 *The general environment was decent. Most cellular accommodation was poor and unacceptably small. Access to showers and suitable clean clothing was good. Staff–prisoner relationships were reasonable, with good levels of engagement. The strategic management of diversity was poor but arrangements for some protected characteristics were good. Faith provision was good. The number of complaints submitted was relatively low but responses were often poor. Health services had improved and were mostly good. The food provided was reasonable. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S15 *At the last inspection in 2011 we found that outcomes for prisoners in Dartmoor were not sufficiently good against this healthy prison test. We made 43 recommendations in the area of respect.² At this follow-up inspection we found that 18 of the recommendations had been achieved, nine had been partially achieved, 14 had not been achieved and two were no longer relevant.*
- S16 The external environment was mostly well kept, although a few areas were littered and derelict. Cells were mostly clean, with the notable exception of G wing. Single cells were used to hold two prisoners, and were too small and inadequately furnished.
- S17 Many toilets were unscreened, and located next to prisoners' beds. There were problems with water ingress and damp cells on F and G wings. Laundry facilities had improved and there was good access to suitable clothing, and most prisoners could wear their own clothes. Showers were easily accessible for most, with the exception of those with disabilities and some older prisoners. Many showers lacked sufficient privacy. Application forms were freely available but responses to applications were not tracked.
- S18 Most prisoners said that staff treated them respectfully, although fewer vulnerable than mainstream prisoners said this. More prisoners than at comparator prisons said that staff mixed with them during association. Staff–prisoner interactions across the prison were mainly positive and courteous, with some staff showing a good level of knowledge about individual prisoners.
- S19 The strategic management of equality and diversity was poor. The equality policy did not refer adequately to each protected characteristic and was not tailored to reflect the population. The equality action plan was not widely shared or up to date. The number of discrimination incident report forms submitted was low and investigations were of good quality. The identification of protected characteristics during induction was effective and issues were followed up.
- S20 Despite poor strategic management, outcomes for some prisoners with protected characteristics were reasonably good. There was a monthly forum for black and minority ethnic prisoners but they were not all were aware of it and some felt isolated and discriminated against. There was no tailored support for prisoners from a Gypsy/Romany/Traveller background, although attempts had been made to recruit a prisoner representative.

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

- S21 Support for the few foreign national prisoners held at the establishment was limited and there was no dedicated foreign nationals coordinator or support group. An offender supervisor afforded a useful link to the Home Office, which provided regular support.
- S22 In our survey, prisoners with disabilities reported more negatively across a range of issues. There was no regular prisoner disability forum but prisoners could access support through a buddy system. There were care plans for most, but not all, prisoners with disabilities and these were available on the wings. The diversity centre provided good employment, support and information for older prisoners and those with disabilities from the vulnerable prisoner wings but the facility was not used by mainstream prisoners.
- S23 Support for older prisoners on the vulnerable prisoner wings was good, with a bi-monthly over-50s group. There was less support for older prisoners on the other wings, and some we met felt isolated. There was good support for gay and bisexual prisoners.
- S24 Prisoners in our survey were more negative than elsewhere about faith provision but we found it to be good.
- S25 Relatively few prisoner complaints were submitted. There was good access to complaint forms and an effective tracking and monitoring system to ensure timely responses, but there was no quality assurance and some responses were poor. There was inadequate analysis of complaints and relatively few actions were taken to address emerging themes.
- S26 Legal services were no longer provided and prisoners did not know where to go to for legal advice.
- S27 Although respondents to our survey were less positive about health services than at the time of the previous inspection, we found that services had generally improved. Clinical governance arrangements were well established with the new provider of services. The health services team was adequately staffed but there had been no health needs assessment for over two years.
- S28 A wide range of primary care services was provided. Waiting times to see a doctor or nurse, and access to clinics had improved. Pharmacy services were generally satisfactory, although too many tradable medicines were prescribed and prisoners were not able to see a pharmacist. There were problems with the ordering of repeat medication. Dental services were good. Prisoners had good access to a range of mental health services and were seen quickly.
- S29 Prisoners had a negative perception of food quality and quantity but we found these to be reasonable, with the exception of the breakfast packs, which were issued on the day before consumption. Most prisoners had to eat in their small cells, many near unscreened toilets.

Purposeful activity

S30 *The amount of time out of cell was reasonable and few prisoners were locked up during the day. Access to association and exercise was too limited. Management of learning and skills had greatly improved but quality improvement processes were not fully developed. The number of activity spaces for the population was lower than the prison had calculated and managers were unaware that only two-thirds of the population was routinely engaged in any form of scheduled purposeful activity. The range and levels of education and vocational training were adequate. Achievement of qualifications was generally high. Effective use was made of peer mentors. Library and PE provision was good.*
Outcomes for prisoners were not sufficiently good against this healthy prison test.

S31 *At the last inspection in 2011 we found that outcomes for prisoners in Dartmoor were not sufficiently good against this healthy prison test. We made 16 recommendations in the area of purposeful activity. At this follow-up inspection we found that seven of the recommendations had been achieved, six had been partially achieved and three had not been achieved.*

S32 The amount of time out of cell was reasonable. The evening unlock period finished too early, and prisoners were routinely locked up 15 minutes earlier than advertised. In our roll checks, we found few prisoners locked up but too many prisoners were on the wings with nothing to do. Access to association was far too limited and exercise periods were too short, at a maximum of 30 minutes.

S33 The management of learning and skills was much improved, with increasingly effective partnership working and good planning for future provision. Quality improvement measures had greatly improved but some aspects were not sufficiently developed. There were only enough activity places for around three-quarters of the prison population of working age. Workplaces were underutilised and we found only two-thirds of prisoners engaged in learning and skills.

S34 The induction to education, vocational training and work was comprehensive and coordinated well. Prisoners' subsequent learning and training were well planned and the allocation process was efficient and effective. The range and levels of vocational training provision were adequate to meet the needs of most prisoners. Teaching and learning in education and training were good. Peer mentoring was effective.

S35 Levels of achievement of qualifications in vocational courses and work were high. Success rates on education courses had improved considerably and were generally very high but for functional skills qualifications in English and mathematics were lower. The standard of practical work was high overall.

S36 The library was well managed and welcoming, with a wide range of materials. Access had improved and usage had increased.

S37 PE facilities and resources were good, well maintained and well used. Healthy living and a wide range of other activities were promoted effectively. The activity timetable was well planned and structured.

Resettlement

S38 *Far too many prisoners did not have an offender assessment system (OASys) assessment or sentence plan. Offender supervisors had large caseloads, their work was not prioritised and they had too little contact with prisoners. Too many home detention curfew decisions were late. Public protection arrangements were mainly sound but release on temporary licence risk assessments were poor. The resettlement support unit provided good resettlement opportunities, but this was confined to mainstream prisoners. There was good assessment of resettlement needs and pathway provision was mainly effective, although the visits capacity was inadequate. The lack of offending behaviour courses, particularly for the many sex offenders in denial of their offending, was a concern.*
Outcomes for prisoners were not sufficiently good against this healthy prison test.

S39 *At the last inspection in 2011 we found that outcomes for prisoners in Dartmoor were reasonably good against this healthy prison test. We made 18 recommendations in the area of resettlement. At this follow-up inspection we found that seven of the recommendations had been achieved, four had been partially achieved and seven had not been achieved.*

S40 The reducing reoffending strategy was comprehensive and practical but it was not sufficiently informed by the needs analysis. The resettlement support unit (RSU) was used effectively to progress prisoners, provide a constructive regime and improve employability through release on temporary licence (ROTL) opportunities, but it was not available to sex offenders.

S41 The prison was struggling to adapt to the large increase in the number of vulnerable prisoners received and those received from local prisons without an assessment. A very large number of prisoners did not have an OASys assessment or sentence plan and some were released, including on temporary licence, without having received either. This had a severe impact on the identification and management of risks and prisoners' ability to progress. There was no effective strategy to reduce the backlog or to prioritise the work of offender supervisors. Offender supervisors had large caseloads and did not maintain regular contact with prisoners to drive their progression.

S42 Procedures for assessing suitability for home detention curfew (HDC) were adequate but too many HDC applications were not considered until after their eligibility date.

S43 Procedures for identifying high-risk prisoners were good and the restrictions imposed were appropriate. Interdepartmental risk management meetings involved relevant departments and were effective. ROTL processes were poor and risk assessments were not robust.

S44 Categorisation reviews were timely and decisions were appropriate. Arrangements to facilitate transfers had improved, with reduced waiting times, but there were transport difficulties and some programmes at other prisons were difficult to access.

S45 Indeterminate-sentenced prisoners were reasonably well supported, with trained offender supervisors assigned to them, and parole reports were up to date.

S46 Resettlement needs were identified during induction and necessary referrals made but we were not assured that all prisoners were seen by the discharge board. In our survey, more prisoners than at other prisons said that they knew whom to turn to for help across most of the resettlement pathways.

- S47 There was adequate housing provision, with a part-time housing adviser and two well-trained orderlies. No-fixed-abode rates had decreased and were relatively low.
- S48 Staff from a wide range of specialist support agencies worked effectively together to support prisoners' plans for resettlement into employment, education and training, and the National Careers Service was good. A formal employability course was offered in the RSU and a resettlement training course was delivered by the YMCA. The virtual campus (internet access for prisoners to community education, training and employment opportunities) was not easily available for RSU prisoners.
- S49 There were good health care discharge arrangements, with clinics attended two weeks in advance.
- S50 There was good joint working between substance misuse staff and the offender management unit. A peer-led pre-release group had started. There were good links with local drug intervention programme teams and community providers.
- S51 A large proportion of prisoners arrived at the prison with money concerns and there was an effective and wide range of financial and debt provision.
- S52 Although around half of the prison population lived over 100 miles away, no transport to the prison was provided. The visits capacity was inadequate to meet demand. Those receiving visits reported a positive experience. Choices provided a wide range of support, the visitors centre was welcoming and the small visits hall was bright and clean. Too many family days had been cancelled in 2013. The Storybook Dads scheme (in which prisoners record stories for their children) and the Family Matters course were well used.
- S53 The offending behaviour needs of the diverse population had not been comprehensively analysed. There was only one accredited offending behaviour course available and referral rates were low, leaving much unmet need. There was no formal strategy to manage the large number of sex offenders judged to be in denial of their offending. Many offender supervisors had little opportunity or training to provide individual offence-focused work.

Main concerns and recommendations

- S54 Concern: Too many prisoners, especially vulnerable prisoners, felt unsafe and reported high levels of victimisation. There was evidence that not all incidents of violence and intimidation were actioned or reported. There was no proper analysis of violence within the prison to identify trends and improve safety.

Recommendation: All data relating to violence should be collated and analysed to identify trends, action should be taken to improve safety, and all identified incidents of violence should be investigated and appropriate action taken.

- S55 Concern: The number of available activity places had been overestimated by the prison and there were insufficient available. Too many prisoners, as many as a third, were not engaged in any work, education or training.

Recommendation: The number of available activity places should be increased and accurately identified, and all prisoners should be engaged in work, education or training, with attendance monitored.

S56 Concern: The number of prisoners without an OASys assessment or sentence plan was high and some prisoners were released, including on temporary release, without ever having received one. This had a severe impact on the identification and management of risks and prisoners' ability to progress.

Recommendation: The backlog of offender assessment system (OASys) assessments should be reduced and the work of offender supervisors prioritised.

S57 Concern: The prison held a large number of sexual offenders who were judged to be in denial of their offending, yet there was no strategy to address their offending behaviour and many remained unchallenged in their attitude to their offence.

Recommendation: The needs of sex offenders in denial should be analysed. A strategy and suitable programmes should be introduced.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

I.1 *Escort vans were clean and staff helpful. Many prisoners had long journeys to the prison, without being given comfort breaks. Access to the prison was reasonably expedient and there were few delays.*

I.2 The vans we looked at were clean and prisoners told us that escort staff had been helpful and polite. In our survey, 65% of respondents said that they had spent more than two hours on vehicles on their journey to the prison, against the 46% comparator. In our groups, prisoners told us that they had not stopped off en route for a toilet break. Most prisoners said that the van had been clean.

I.3 Reception did not close over the lunch period, and on arrival prisoners were quickly taken off vans, without handcuffs, and taken the short distance to reception.

I.4 Around 10 prisoners appeared at court each month and records showed that most returned to the prison on the same day.

Recommendation

I.5 **Long escort journeys to the prison should include a toilet break.** (Repeated recommendation I.6)

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.6 *The reception area was clean and well run. Prisoner orderlies assisted in the welcoming process. Health screening was conducted privately. A good level of equipment and clothing was issued before location on the first night units. First night arrangements were reasonably good for vulnerable prisoners but less positive for mainstream prisoners. Initial risk assessment processes were thorough and telephone calls provided. Induction was reasonable but took too long to complete.*

I.7 The new reception area was clean and efficiently managed. On average, around 13 new receptions were received weekly and due consideration was paid to managing the mixed (mainstream and vulnerable) prisoner population through the unit. Reception was generally

welcoming, and in our survey most prisoners said that they had been treated well and not remained there for too long.

- I.8** The holding rooms were clean. All had working televisions and a wide range of information was displayed on noticeboards. Showers were available but seldom used, although most prisoners were able to shower on the first night wings. Three prisoner peer supporters worked as reception orderlies and provided support to prisoners, including providing them with food and drinks throughout the day.
- I.9** Strip-searching in reception was intelligence led. Health screening was conducted privately in a well-equipped suite in the reception building. Prisoners were issued with a full range of clothing, bedding and equipment in reception before moving to one of the first night units. The first night process started with a basic personal interview soon after arrival at the prison. However, this interview was conducted in the sight and hearing of the reception orderlies.
- I.10** There were two first night wings: D for vulnerable prisoners and G for mainstream prisoners. The first night experience and the conditions for vulnerable prisoners were reasonably good. The cells on the D5 landing were clean and reasonably prepared. Immediate support was available from well-trained Insiders (prisoners who introduce new arrivals to prison life). For mainstream prisoners on G wing, dedicated prisoner support was not available and the G wing cells that we saw prisoners being located into were dirty and ill-prepared, with some damaged toilets and furniture.
- I.11** First night safety interviews concerning well-being and risk issues were conducted in private in wing offices, and all prisoners were able to make a free telephone call to alert their next of kin of their arrival at the establishment, subject to public protection arrangements. In our survey, fewer respondents than at comparator prisons said that they had felt safe on their first night, especially vulnerable prisoners, older prisoners and those with disabilities.
- I.12** Night staff we spoke to were aware of the locations of newly arrived prisoners but not of their particular needs or concerns, and they made no further contact with them on their first night. Risk assessment folders were available to the night staff for reference but were not all signed by night staff.
- I.13** In our survey, only 81% of respondents (against the 91% comparator and 93% at the time of the previous inspection) said that they had undergone an induction. Induction processes started on arrival and continued on location to the first night landings, with a formal presentation taking place on the following Monday or Tuesday. Insiders provided a useful and informative presentation to newly arrived vulnerable prisoners on the day after arrival but this was not replicated for the mainstream prisoners we spoke to, who had not been seen by induction Insiders until the week after arrival. Induction information was comprehensive, providing all the information needed to participate fully with the regime but, at two weeks, took too long to complete, leaving newly arrived prisoners with long periods of inactivity.

Recommendations

- I.14 All initial interviews should be conducted in private.**
- I.15 First night cells should be maintained to a high standard and made welcoming for new arrivals.** (Repeated recommendation I.19)
- I.16 Night staff should always check and sign the risk assessment for new arrivals and check on their well-being.**

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.17 *Too many prisoners felt unsafe, and processes to identify and manage acts of violence were weak. There was significant under-reporting of violent incidents. There was no support for victims of antisocial behaviour.*

I.18 Overall strategic management and action in relation to violence reduction were poor. The violence reduction strategy failed to identify specific strategies and actions to monitor and combat acts of violence or other antisocial behaviour. Although the number of recorded violent incidents was low, we found much more evidence of violence on the wings (including actual injuries), in wing observation books, in adjudication records and in the minutes of security meetings than was being reported and recorded at safer custody meetings. Analysis of available data was poor and there was little evidence of any attempt to identify trends in order to take appropriate action to make the prison safer (see main recommendation S54).

I.19 Prisoners who were identified as bullies or suspected of committing assaults were required to sign a compact that served as a warning against any future similar behaviour and resulted in their demotion to the basic level of the incentives and earned privileges (IEP) scheme if they breached it. This warning lasted for three months, during which time there was no monitoring unless a further transgression occurred. Wing staff told us that they generally had little involvement in these procedures. There were no processes to support victims of antisocial behaviour; these prisoners were often moved to the vulnerable prisoner wings.

I.20 Our survey results were worse than at comparator prisons across a range of safety issues; 42% of prisoners (against a comparator of 32%) said they had felt unsafe at some time, and, most notably, 40% of prisoners said that they had been victimised by other prisoners, against the 23% comparator and 18% at the time of the previous inspection.

I.21 Vulnerable prisoners accounted for around 60% of the population and were accommodated on A, B and D wings. D wing was an integrated wing holding mainly vulnerable prisoners, with a few mainstream prisoners. About 80% of vulnerable prisoners had been sentenced for sex-related offences, and the remainder were unable to cope with conditions in the main prison or were in need of protection for other reasons. Vulnerable prisoners felt considerably less safe than mainstream prisoners. In our survey, 54% of vulnerable prisoners said that they had felt unsafe at some time (compared with 30% of mainstream prisoners), and 55% that they had been victimised by other prisoners (compared with 28% on other wings) (see main recommendation S54).

Recommendation

I.22 **Victims of antisocial behaviour should be fully supported.**

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.23 *Support for prisoners subject to assessment, care in custody and teamwork (ACCT) procedures was reasonable. Most prisoners on ACCTs felt supported but care suite and constant watch provision was inadequate.*

- I.24** There had been no self-inflicted deaths in custody since the previous inspection. Levels of self-harm and the number of prisoners subject to assessment, care in custody and teamwork (ACCT) case management procedures for prisoners at risk of suicide or self-harm was comparable with that at similar prisons, at around 13 per 100 prisoners over the previous six months. At the time of the inspection, there were eight prisoners subject to ACCTs. The quality of the documentation we saw was good, with the exception of some night-time entries which were repetitive and predictable. Reviews were conducted on time and, where practicable, included a wide range of staff. Care planning was effective, managerial oversight was good and post-closure reviews were conducted on time. There were six Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) currently in post and they told us that they felt well supported by the prison and by the Samaritans. Most prisoners that we spoke to who were currently subject to ACCT procedures felt cared for and were aware of the range of support open to them. However, for a small number of prisoners on ACCTs there was a lack of daytime activity and no process to expedite them into work in order to keep them occupied. This issue was compounded for those who were on ACCTs and also unemployed and/or on the basic level of the IEP scheme, and insufficient attention was paid to the regime for such prisoners.
- I.25** The constant observation cell inappropriately remained in the segregation unit, and the two care suites were dirty and poorly prepared. A Samaritans telephone was available but the processes for its issue were unclear and confused. All the prisoners we spoke to understood the Listener scheme and how they could access it.
- I.26** The monthly safer custody meeting viewed and discussed a range of data but attendance was often inconsistent, with some key members failing to attend.

Recommendations

- I.27** **The quality of night entries in assessment, care in custody and teamwork (ACCT) documents should be improved and demonstrate meaningful engagement.**
- I.28** **Additional consideration should be given to the regime for prisoners subject to ACCTs who are unemployed and/or on the basic level of the IEP scheme.**
- I.29** **The gated cell in the segregation unit should not be used for prisoners in crisis and at risk of self-harm, and an alternative location should be found. (Repeated recommendation 3.28)**

Housekeeping points

- I.30 The care suites should be maintained to a high standard.
- I.31 Instructions for the issue and use of the Samaritans telephone should be widely available.
- I.32 Representatives from all departments identified in the safer custody meeting terms of reference should attend the meetings.

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.³

I.33 *There were no links to external safeguarding services.*

I.34 The prison had a safeguarding policy but it referred to internal processes, such as care for older and infirm prisoners and those with disabilities, and there were no links to external safeguarding committees.

Recommendation

I.35 **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.36 *Security was generally proportionate, although there were still some unnecessary restrictions on prison shop items. A reasonable amount of security information was analysed well and objectives were set and followed up to address key areas of concern. Actions from information reports were not always undertaken quickly. Information sharing with other departments was well developed. In our survey, more respondents than at comparator establishments said that it was easy to get illegal drugs and alcohol at the prison.*

³ 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.37** Physical security was generally proportionate and free-flow arrangements for prisoners to get to activities reflected the risks posed by the partially integrated population of vulnerable and mainstream prisoners. There were some unnecessary restrictions on items that could be bought from the prison shop; for example, sugar was still unavailable to be purchased.
- I.38** Work had been undertaken to improve the quality of information reports (IRs) received from staff. The security department had received 1,236 IRs in the previous six months, which was similar to the number at other category C prisons. The intelligence was well analysed. The main areas of concern were possession of illegal drugs and mobile telephones. The security committee met monthly and set security objectives to address these issues. Minutes showed clear follow-up on these objectives. However, follow up actions from intelligence reports were not always carried out quickly and a large number of searches had not been carried out. Information sharing between security and other departments was well developed, particularly with health services and substance misuse staff. There were good links with the police and they provided considerable support to the prison in stemming the flow of illegal drugs into the establishment.
- I.39** The prison's random mandatory drug testing (MDT) positive rate averaged 6.5% over the previous six months, which was within the annual target of 7% and lower than at comparator prisons. However, in our survey more respondents than at comparator establishments said that it was easy to get illegal drugs (38% versus 31%) and alcohol (30% versus 19%) at the prison. In addition, 10% reported developing a problem with diverted medication since they had been at the prison, against a comparator of 7%. Positive tests were for codeine, subutex and cannabis. However, finds and intelligence pointed to the availability of a new psychoactive substance, a synthetic cannabinoid known as "Spice" (which was not detectable under MDT), diverted medication and hooch (illicitly brewed alcohol). There was also anecdotal evidence of injecting drug use; the prison had appropriately launched a 'needle amnesty', which allowed prisoners to dispose of injecting equipment safely and to speak to a drugs worker in confidence.
- I.40** Too few prisoners who were suspected of taking drugs were tested and in the previous six months only 22 suspicion tests (out of 77 requested) had been completed. In addition, records showed that there had been gaps of up to 12 days when no testing had taken place.
- I.41** There was good information sharing between health care and security departments. A good supply-reduction action plan had recently been developed and proactive measures had been introduced to tackle this problem.

Recommendations

- I.42** **The items that prisoners can buy in the prison shop should only be restricted on the basis of sound assessments of risk.** (Repeated recommendation 7.9)
- I.43** **Outcomes from security information reports, including searches and mandatory drug tests, should be carried out quickly.**
- I.44** **The mandatory drug testing (MDT) programme should be sufficiently resourced to undertake the required level of suspicion testing.** (Repeated recommendation 3.61)

Incentives and earned privileges⁴

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.45** *The new incentives and earned privileges scheme had been poorly implemented and nearly half of prisoners reported not being treated fairly under the scheme. Documentation was not always fully completed and some prisoners had been disadvantaged because of age, disability or the lack of a sentence plan.*
- I.46** A new national IEP policy had been introduced by the Prison Service in November 2013 but the scheme had been poorly implemented at the establishment. Reviews of prisoners under the new criteria had taken place before the scheme's national implementation date; all prisoners had been reviewed (irrespective of their previous review dates), which was not in accordance with the new policy. In our survey, only 47% of prisoners said that they had been treated fairly under the scheme.
- I.47** The revised scheme had introduced new criteria for prisoners on the enhanced IEP level and many prisoners had been unreasonably demoted to the standard level since its introduction. Documentation was not always fully completed and many prisoners did not receive a copy of the reasons why they had been demoted under the scheme. We came across some older prisoners and those with disabilities who were not required to work who had been demoted or discouraged from applying for enhanced status because they were not working. Prisoners who did not have sentence plans had also been treated unfairly as they had been penalised for not engaging fully in offending behaviour or rehabilitation work, despite no such targets having been set for them.
- I.48** Prisoners on the basic level of the scheme were not treated consistently. Staff on some wings required prisoners to be on the basic level for at least 28 days, whereas on other wings they could be taken off basic after 14 days if their behaviour had improved.
- I.49** Quality assurance of IEP reviews was not undertaken and there was no formal monitoring of the application of the scheme.

Recommendations

- I.50** **The incentives and earned privileges (IEP) scheme should be implemented consistently and fairly across the prison.**
- I.51** **Prisoners should not be disadvantaged by the IEP scheme owing to protected characteristics or because of the lack of sentence plan or targets.**

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

Discipline

Expected outcomes:

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

I.52 *The number of adjudications was lower than at similar prisons. Levels of use of force had reduced slightly. Incidents were well documented but not all planned incidents were video-recorded. The cleanliness of the segregation unit had improved but the regime was poor and segregated prisoners complained of boredom. Relationships between staff and prisoners on the unit were good but there was little challenge of poor behaviour. Care planning lacked a focus on reintegration and did not take place for all prisoners on the unit. Too many prisoners were transferred out of the prison from the segregation unit without their issues being challenged or addressed.*

Disciplinary procedures

- I.53** There had been 393 adjudications in the previous six months, which was fewer than at similar prisons. Adjudications, including those heard by the independent adjudicator, were held in a suitable room, although there was a large amount of graffiti in the prisoner holding room.
- I.54** Records showed a full account of the events leading up to the charge but we found some where prisoners had raised issues relating to bullying and personal safety that had not been followed up (see section on bullying and violence reduction). Adjudication standardisation meetings were combined with the segregation monitoring meetings, and sufficient attention was given to quality assurance and monitoring of adjudications.

Recommendation

- I.55** **Safety issues raised by prisoners during adjudications should be actioned and reported.**

The use of force

- I.56** Levels of use of force were slightly lower than at comparator prisons and than at the time of the previous inspection. Incidents were well documented and showed that force was used as a last resort, and de-escalation was evident. Not all planned removals had been video-recorded. In the recordings that we viewed, the identity of the prisoner involved was not clear.
- I.57** Use of force meetings showed that all incidents were reviewed and trends identified through monitoring had been addressed.
- I.58** Special accommodation had been used four times since January 2013. Records showed that prisoners were not held there longer than necessary but were often strip-searched and placed in anti-tear clothing without sufficient justification.

Recommendation

- I.59 Strip-searching and use of anti-tear clothing for those placed in special accommodation should be fully justified.**

Housekeeping point

- I.60** All planned incidents of use of force should be video-recorded and the prisoner involved clearly identifiable.

Segregation

- I.61** The segregation unit was cleaner than at the time of the previous inspection, although the exercise yard remained bleak. The showers were clean and prisoners had daily access to these and to outside exercise and telephones.
- I.62** There had been 85 prisoners held on the unit in the previous six months, which was similar to the number at other prisons. Only six prisoners had remained on the unit for over 20 days during that period. Segregation reviews had not resulted in care plans for any of the current residents and we were shown only two care plans for prisoners held on the unit since the beginning of 2013. Reviews did not focus on reintegration and staff said that they would not begin care planning until a prisoner had been on the unit for 20 days. Too many prisoners (48%) had been transferred out of the prison from the unit during the previous six months without the issues they had raised being addressed or poor behaviour challenged.
- I.63** The regime on the unit was pre-printed on the review documentation rather than individually assessed, and was poor, and all the prisoners we spoke to complained of boredom. Daily records showed that prisoners spent most of their time in their cells or in bed. One cardiovascular exercise machine was available to some (subject to risk-assessment) but no off-unit activities or education provision was regularly available.
- I.64** Staff on the unit had a good knowledge of the prisoners in their care, and staff–prisoner relationships on the unit were good, although this was not always reflected in history sheets. Poor behaviour, such as shouting out of windows, was not always challenged by staff. The segregation monitoring meeting took place regularly.

Recommendations

- I.65 All prisoners in the segregation unit should have a care plan to address problem or vulnerable behaviour, and options for their safe integration back into the main prison or transfer should be identified.** (Repeated recommendation HP44)
- I.66 A range of regime activities should be available for all prisoners located in the segregation unit.** (Repeated recommendation 7.32)

Housekeeping point

- I.67** History sheet records should reflect the good levels of interaction between staff and prisoners.

Substance misuse

Expected outcomes:

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

I.68 *Prisoners requiring opiate substitutes could access treatment based on individual need. Integration between clinical and psychosocial providers had improved, but a shortage of substance misuse nurses resulted in delayed assessments and reviews. Interventions for prisoners with alcohol problems had improved and peer support was developing. The needs analysis was out of date.*

I.69 At the time of the inspection, 60 prisoners were being prescribed either methadone or subutex. Treatment regimes were flexible and included re-initiation before release as well as secondary detoxification to reflect need. Controlled drug administration was safe but time consuming. The clinical substance use service was overstretched; 23 recent arrivals had not yet been reviewed and less than a third of prisoners were currently reducing their dosage. Better integration between clinical and psychosocial providers had improved care coordination, and communication with the mental health team had also improved, but there was still no dual diagnosis service (for those with both mental health and substance misuse problems).

I.70 Substance use strategy meetings had recently been relaunched and were well attended. The strategy document contained an annual delivery plan but the needs analysis was out of date.

I.71 At the time of the inspection, 200 prisoners were engaging with the psychosocial interventions team, and in our survey 77% of those with drug or alcohol problems said that they had received support for these issues at the prison, against the 64% comparator. We saw evidence of good-quality case work. A range of group-work options were available and two alcohol programmes had been introduced – one focusing on alcohol dependency and the other on alcohol-related violence. Prisoners could access a family worker, peer mentors, self-management and recovery training (SMART) recovery and Alcoholic Anonymous groups. A service user forum had been established but did not meet sufficiently regularly to inform service development.

Recommendations

I.72 **The clinical substance misuse service should be adequately resourced to provide good-quality, consistent and coordinated care to all prisoners requiring treatment, including those who need secondary detoxification.** (Repeated recommendation 3.55)

I.73 **The health service providers' skill mix should include dual diagnosis expertise.** (Repeated recommendation 3.56)

I.74 **The drug and alcohol strategy action plans should be updated and informed by a comprehensive population needs analysis.** (Repeated recommendation 9.56)

Section 2. Respect

Residential units

Expected outcomes:

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

2.1 *The general environment was decent. External areas were generally well kept, although a few were littered and derelict. Prisoner accommodation was poor but kept clean, although G wing was much dirtier than the other wings. There was water ingress on F and G wings, resulting in problems with damp cells. Some single cells used for two prisoners were too small, with insufficient furniture. Many toilets were unscreened. Access to laundry facilities had improved. Showers were clean but many lacked sufficient privacy. Access to these was good, except for older prisoners and those with disabilities. Application forms were available in the new prisoner information rooms but responses were not tracked.*

2.2 Outside areas of the prison were generally well kept and tidy but a few areas were littered and derelict. The quality of cellular accommodation across the prison was poor. Some single cells used to hold two prisoners were too small and contained insufficient furniture, and few prisoners had lockable cabinets. Many toilets were unscreened and were located too close to prisoners' beds. Water leaked through the roof on both F and G wings, leading to problems with damp cells. In our survey, most prisoners said that they had access to cell cleaning materials weekly. Most areas were clean, with the notable exception of G wing, which was far dirtier than other wings, particularly on the upper levels.

2.3 Laundry facilities had improved; equipment was being installed on all wings, with a central laundry available in the meantime. Prisoners were able to get sufficient prison clothing and bedding and staff ensured that clothing was of the correct size. Under the revised incentives and earned privileges scheme, all prisoners, with the exception of the few on the basic regime, could wear their own clothing (see also section on incentives and earned privileges). Access to stored property was dealt with in a timely manner.

2.4 Showers were easily accessible for most, with the exception of those with disabilities and some older prisoners as not all wings had adequately adapted facilities. Most showers had been refurbished and were clean but lacked adequate privacy.

2.5 Application forms were freely available in the new prisoner information rooms on the residential units but responses to applications were not tracked.

2.6 Access to telephones was adequate and prisoners could apply to make calls after the night-time lock-up.

2.7 Prisoners' mail was despatched and received promptly to the wings daily. They could receive emails from their families via the 'email a prisoner' scheme and this facility was well used.

Recommendations

- 2.8 All cells should be properly maintained and kept warm and dry, and all toilets should be screened.** (Repeated recommendation HP45)
- 2.9 Single cells should not be used to house two prisoners.**
- 2.10 Showers should be accessible to older prisoners and those with disabilities, and be adequately screened.**

Housekeeping point

- 2.11** The system for monitoring and tracking applications should be improved.

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.

2.12 *Staff-prisoner interactions across the prison were mainly positive and courteous. Communication between wing staff and offender supervisors had become more difficult with the ending of the personal officer scheme. Entries in electronic case notes were infrequent and often of poor quality.*

- 2.13** Staff-prisoner interactions across the prison, including work and education, were mainly positive and courteous, with some staff showing a good level of knowledge about individual prisoners. In our survey, more prisoners than elsewhere said that staff mixed with them during association, and most said that they were treated respectfully by staff.
- 2.14** The personal officer scheme had ended a few months before the inspection. However, some staff still maintained the role and as a result some prisoners still considered themselves to have a personal officer. In our survey, the proportion of prisoners saying that they had someone to turn to for help was similar to that at other prisons.
- 2.15** Wing staff entries in P-Nomis (electronic case notes) were generally infrequent and often of poor quality, and there was little management oversight. Offender supervisors said that without a named personal officer to act as a link, it was more difficult to receive information about individual prisoners.
- 2.16** Consultation with prisoners was regular and good. It had resulted in some clear changes and improvements being made.

Recommendation

- 2.17 Entries by wing staff in electronic case notes should be regular, of good quality and overseen by managers.**

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 characteristic⁵ 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.

2.18 *The strategic management of equality and diversity was poor. The equality policy did not refer adequately to each protected characteristic, and the equality action plan was out of date. The number of discrimination incident report forms submitted was low and investigations were of good quality. Outcomes for some prisoners with protected characteristics were reasonably good. Some black and minority ethnic prisoners felt discriminated against. Some older prisoners on mainstream wings were isolated.*

Strategic management

2.19 The strategic management of equality and diversity was poor. There was an overarching equality plan but it was outdated, did not adequately address each protected characteristic and was not specific about local needs, and awareness of it was limited. Attendance at the quarterly equality action team (EAT) meetings was reasonable and included some prisoner representatives. An equality action plan had been drafted but was not up to date and had not been presented at an EAT meeting in the previous six months. Data about most protected characteristics were presented at the meeting, including ethnic monitoring data. Since April 2013, work to monitor and progress equal treatment for all prisoners had become fragmented. Responsibility for diversity and equality had been split across several roles, and not all staff or prisoners were aware of who was responsible for this work. Only 13 discrimination incident report forms (DIRFs) had been submitted in the previous six months. These had been completed appropriately and promptly, with a good level of investigation. Not all prisoners we spoke to were aware of the DIRF procedure. There was some internal quality assurance but there were no external quality checks.

Recommendations

- 2.20** **The overarching equality policy should include provision for all protected characteristics of diversity.** (Repeated recommendation 4.9)
- 2.21** **An up-to-date equality action plan should underpin the strategic management of diversity and equality.**
- 2.22** **Prisoners and staff should be aware of who is responsible for equality and diversity issues and how concerns can be addressed.**
- 2.23** **Investigation of discrimination incident report forms (DIRFs) should be subject to external quality checks.**

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

Housekeeping point

- 2.24** All prisoners should be aware of the DIRF system and how to access it.

Protected characteristics

- 2.25** Identification of prisoners with protected characteristics during induction was effective. Issues were followed up by the social inclusion officer, who visited most such prisoners and arranged for a care support plan and link with a buddy. We saw evidence in wing files and heard from some older prisoners and those with disabilities that this had worked well. However, since April 2013, the role of social inclusion officer was no longer a full-time post and not all prisoners received this level of support. For example, one partially sighted prisoner had no care plan and was not able to access adapted equipment to help with daily living.
- 2.26** At the time of the inspection, 7% of the population were from a minority ethnic background. There was a monthly forum for black and minority ethnic prisoners, attended by a small number of prisoners, but they were not all aware of it and some felt isolated and discriminated against. Work to explore the negative perceptions of these prisoners in 2012 had not been sustained.
- 2.27** In our survey, 7% of respondents said that they were from a Gypsy/Romany/Traveller background. There was no specific support for these prisoners, although attempts had been made to recruit a prisoner representative.
- 2.28** There were 16 foreign national prisoners at the time of the inspection, four of whom had been detained solely under immigration powers for several months. Free telephone calls abroad were facilitated but there had been no designated foreign nationals coordinator since April 2013, and there was no support group. An offender supervisor provided a useful link to the Home Office, which provided regular support. A list of local immigration solicitors was available, although we met some prisoners who said that they were struggling to access advice as they could not afford to pay. There was no information about sources of free advice on immigration or asylum matters.
- 2.29** Monitoring data on religion were collected and presented at EAT meetings. There was no evidence of religious discrimination in the prison and all prisoners had equal access to a range of religious services and faith education.
- 2.30** The prison's own monitoring data showed a high number of prisoners with disabilities (236 prisoners in December 2013). In our survey, 24% of respondents identified themselves as having a disability and they reported negatively across a range of issues. Personal emergency evacuation plans were in place for most prisoners who needed them, and wing staff knew the location of plans. A prisoner disability representative attended EAT meetings but there was no dedicated support forum for this group.
- 2.31** A buddy system was in place, and was appreciated by older prisoners and those with disabilities. The buddies had a clear job description and met staff monthly to discuss issues and concerns. Most prisoners with buddies had an agreed weekly care summary detailing the practical help needed. The diversity centre provided good employment, support and information to some older prisoners and those with disabilities. The centre was used by around 30 prisoners each day, all of whom were from the vulnerable prisoner wings. Staff and prisoners told us that the facility was not used by mainstream prisoners.

- 2.32** There was a large population of older prisoners at the time of inspection; over a fifth of prisoners were over 50, and 30 were over 70. Support for older prisoners on the two vulnerable prisoner wings was good; a bimonthly over-50s forum met in the diversity centre and around 30 prisoners each day accessed work and information there. However, there was less support for the older prisoners on the other wings, and some we spoke to said that they felt isolated. Outside agencies provided support and events regularly, including a resettlement fair for older prisoners in November 2013 and one-to-one support for prisoners from Resettlement and Care for Older ex-Offenders and Prisoners (RECOOP).
- 2.33** In our survey, 6% of respondents said that they were gay or bisexual. A well-attended support group for these prisoners met monthly. There were two prisoner representatives who were able to see gay/bisexual prisoners who requested one-to-one support. Freephone numbers to external support agencies were well advertised, although there were no formal links to such groups.
- 2.34** There were no transgender prisoners at the time of the inspection. The policy on transgender prisoners had been updated shortly before the inspection but it was not yet widely available on the wings.

Recommendations

- 2.35** **Care support plans should be in place for all prisoners who need them, and should be regularly reviewed and updated.**
- 2.36** **The identification of Gypsy, Romany or Traveller prisoners, and support for all black and minority ethnic prisoners, should be improved, including support groups or forums and support from external community agencies.** (Repeated recommendation 4.18)
- 2.37** **There should be regular support forums and improved support for foreign national prisoners from all staff.** (Repeated recommendation 4.29)
- 2.38** **The prison should explore and take action to address the negative perceptions of some older prisoners and those with disabilities.** (Repeated recommendation 4.41)
- 2.39** **Older prisoners and those with disabilities from mainstream wings who are not using the diversity centre should be able to access support and information on the wings.**

Housekeeping points

- 2.40** Lists of sources of legal advice and free specialist support should be available for foreign national prisoners.
- 2.41** The transgender policy should be available throughout the relevant areas of the prison.

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.

2.42 *A wide range of religious services was accessible to all prisoners, and the chaplaincy supported prisoners in crisis. Prisoners' negative perceptions about faith provision had not been explored by the prison.*

2.43 A wide range of religious services were on offer weekly, with most services separated for mainstream and vulnerable prisoners.

2.44 In our survey, fewer respondents than at comparator prisons said that their religious beliefs were respected (46% versus 53%), that they were able to speak to a chaplain when they needed to (55% versus 59%) and that it was easy to attend religious services (44% versus 50%). There had been no recent consultation with prisoners to understand their negative perceptions about religious provision in the establishment.

2.45 The chapel was currently designated as the multi-faith area, as the refurbished multi-faith room had been allocated to another function. Attempts were being made to find appropriate multi-faith accommodation with appropriate levels of supervision and ablution facilities.

2.46 The chaplaincy offered bereavement support and was involved in the care of prisoners in crisis.

Recommendation

2.47 **Prisoners' negative perceptions about faith provision should be explored and concerns addressed.**

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.

2.48 *There were relatively few complaints submitted, complaint forms were easily accessible across the wings and there was a good tracking system, but there was no quality assurance and some responses were poor.*

2.49 The number of complaints submitted was around 20% lower than at comparator prisons. Our survey results were in line with comparator prisons in regard to ease of access and better on the fairness of the system. Complaint forms were freely available across all the residential units and prisoners told us that they had good access to the Independent Monitoring Board.

- 2.50** The tracking and monitoring of complaints ensured a timely response. However, some responses were poor, and in some cases unhelpful. Many responses were over-bureaucratic and there was no quality assurance.
- 2.51** Monitoring data were submitted to the senior management team monthly meeting but there was poor overall analysis of the emerging themes or trends and little evidence of subsequent actions.

Recommendation

- 2.52** **There should be regular analysis and quality assurance of complaints to ensure that emerging trends are identified and acted on and to improve the quality of responses.**

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.

- 2.53** *There were no legal services at the prison and there was little knowledge of how to access external services.*

- 2.54** The prison no longer had a legal services officer and prisoners told us that they did not know whom to go to for help or signposting with regard to legal advice. Information was limited to a range of Prison Service Orders and some legal textbooks in the library.
- 2.55** Access to legal visits was made difficult because the telephone booking line was open for only around two hours a day. All visitors (social and professional) told us that it was difficult to get through to the booking clerk, and we too failed to get through on a number of occasions (see section on children, families and contact with the outside world).

Recommendation

- 2.56** **Information on how to access a range of legal advice should be made available to prisoners.**

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.

2.57 *The delivery of health services had improved with the new provider and more robust clinical governance arrangements. Access to the services was good. Clinical rooms were suited to their purpose but the waiting rooms and wings provided little health promotion information. Pharmacy services were satisfactory but patients were unable to see a pharmacist and there was overprescribing of tradable medicines. Dental services were good and waiting times short. Access to mental health care was good.*

Governance arrangements

- 2.58** Clinical governance arrangements were well established with the new provider of services. The governor was actively involved with the partnership board and there were good relationships with the commissioning services. All clinics were delivered in good facilities in the health centre and a treatment room was also available for prisoners located on F and G wings.
- 2.59** A health needs assessment had not been completed since 2011. The team of health services staff was small but offered some limited flexibility to cope with absence and allow senior staff to be involved in strategic development and supervision. The team was well qualified to deliver a wide range of clinics. Training was managed by the new provider but was mostly delivered in Dorset, which created some difficulties for attendance. Clinical supervision was provided on a one-to-one basis.
- 2.60** Access to health care was now much better. Seven GP clinics were delivered each week. Pharmacy services were provided by Dorset Healthcare University NHS Foundation Trust, a pharmacist visited the prison for two hours once or twice a month and there was a full-time pharmacy technician. Three dental sessions were provided weekly.
- 2.61** The electronic record SystemOne was used for all clinical records and those that we saw were generally well written. Paper records were stored appropriately and managed effectively by one of the administrators.
- 2.62** Emergency resuscitation equipment was located in the F wing treatment room and in the health centre. The equipment was well organised and appropriately stocked but checking procedures were not recorded or adequate. Additional automated external defibrillators had been distributed around the prison, and discipline staff had been trained in their use.
- 2.63** A monthly health care forum enabled prisoners to be involved in their care. A small number of health care complaints were submitted each month and were dealt with professionally. Health promotion was available to prisoners through a range of clinics but there was limited information distributed around the prison or in the health care waiting areas.

Recommendations

- 2.64** A health needs assessment should be commissioned and completed as soon as possible to inform the future delivery of services.
- 2.65** Automated external defibrillator checks should be recorded daily.

Housekeeping points

- 2.66** Training and development should be easily available to all staff.
- 2.67** Prisoners should have access to health care information and health promotion material in a range of languages.

Delivery of care (physical health)

- 2.68** Prisoners in our survey were generally more negative than at the time of the previous inspection about waiting times for clinics and the quality of health care, but we observed a much improved service. Health services were available during the day, with a more limited service at the weekend. Health care applications were triaged daily by nursing staff and appointments allocated as required. Waiting times for clinics were reasonable and prisoners could see a GP within a week. Mobile screening clinics were delivered. Condoms were available to prisoners at a number of locations around the prison.
- 2.69** Access to outside hospital appointments had improved, with nine escort opportunities each week and often more if needed. Cancellations were rare and the process was well managed.

Pharmacy

- 2.70** Pharmacy services were located in the treatment rooms in the health centre and on F wing. There were no medicine use reviews and, with the limited amount of time that the pharmacist spent at the prison, there was no access to the pharmacist or to one-to-one counselling, even for the many prisoners who were older and on long-term medication.
- 2.71** There was an in-possession policy. Risk assessments for in-possession medication were attached to SystemOne but not all nursing staff knew how to access them. A number of medicines were available under patient group directions (PGDs) but the supply of these had not been ratified by the medicines and therapeutics committee. There was no formal out-of-hours policy. A prescribing formulary (a list of medications used to inform prescribing) was in place and we were told that it was adhered to. The medicines and therapeutics committee met every six weeks at HMP Channings Wood and the pharmacist usually attended.
- 2.72** SystemOne was used for both the prescribing and administration of medicines. Approximately two-thirds of patients received their medication in-possession, usually for 28 days. However, 31 patients (5% of the prison population) received the highly tradable medicine, tramadol, for seven days in-possession. Prisoners were responsible for ordering medicines for 28 days in-possession but there was no contingency arrangement if these were not ordered in time.
- 2.73** A total of 70 patients received supervised medication, with administration times of 8am and 4pm. Some patients received night-time hypnotic medication at 4pm, which was too early. Health services staff told us that there were issues with the timely supplies of supervised medicines, and occasionally of in-possession medicines.

- 2.74** There were good stock reconciliation procedures for medicines ordered in-possession but not for those supplied out of hours or via the PGDs. There was insufficient space to store all medicines in the available locked cupboards in the central treatment room. The medicines available under the PGDs in this room were stored in a trolley that was not chained to the wall, and the controlled drugs cabinet was not secured according to the regulations. Access to the keys to this cabinet was not sufficiently well managed.
- 2.75** Some medicines, including paracetamol, were available to buy from the prison shop, allowing prisoners to take responsibility for the management of minor health issues.

Recommendations

- 2.76** There should be more allocated time for a pharmacist to enable medicines use reviews and routine counselling of patients to take place, and this service should be prominently advertised.
- 2.77** A formal out-of-hours policy should be introduced, with a displayed list of approved medicines that can be supplied under the policy, and consideration should be given to the geographical location of the prison to ensure that all situations are catered for.
- 2.78** The prescribing of tramadol in-possession should be reviewed in order to reduce the likelihood of prisoners being bullied for, and trading, this medicine.
- 2.79** Supervision times should be reviewed to ensure that medication is given at appropriate clinical times.

Housekeeping points

- 2.80** Staff should be trained in how to access the risk assessments on SystemOne for medicines that are given in-possession.
- 2.81** There should be a contingency plan for the ordering of prescriptions to ensure that there is no disruption in the supply of medicines to prisoners.
- 2.82** Stock reconciliation procedures should be introduced for items supplied out of hours or under patient group directions.
- 2.83** There should be a clear audit trail of who has accessed all controlled drugs cabinets, and the controlled drugs cabinet in the central treatment room should be secured according to the regulations.

Dentistry

- 2.84** Access to, and facilities for, dental care had improved. At the time of the inspection, there were only 50 patients waiting for a routine appointment and the average waiting time was about three weeks, with those requiring urgent care seen more quickly. Emergency care requirements were well managed, with drugs available in the surgery if required. Dental records were well maintained on paper, with a summary of care transcribed to the clinical record on SystemOne.

Delivery of care (mental health)

- 2.85** Prisoners had good access to mental health care and were seen quickly. The mental health nurses were fully integrated into the primary care team. Each carried a caseload of patients and was also involved in delivering some of the general health care. The demand for mental health care was low; there were up to 10 referrals each month, with a total caseload of about 30 patients divided between five staff.
- 2.86** A forensic psychiatrist visited the prison for one day each week, seeing patients and attending the weekly multidisciplinary team meeting. Once a month, the weekly meeting was attended by a wider group, and mental health staff had a good working relationship with prison staff. All mental health care was recorded electronically on SystmOne.
- 2.87** Prisoners had no access to professional counselling services, other than bereavement counselling provided through the chaplaincy. Patients who were transferred to secure mental health units were managed swiftly. Mental health awareness training was delivered on a rolling programme for all discipline staff.

Recommendation

- 2.88** Prisoners should have access to professional counselling services.

Catering

Expected outcomes:

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

2.89 *Menus were varied and the portion sizes we saw were adequate, but prisoners were negative about the food provided. There were very few opportunities to dine in association. Breakfast packs were provided on the day before consumption. Consultation arrangements were good.*

- 2.90** In our survey, only 20% of prisoners said that the food was good or very good, which was worse than the comparator (26%) and than at the time of the previous inspection (33%). This was reflected in our conversations with prisoners, who were negative about the quality and quantity of the food provided. We found it to be reasonable; menus were varied and the portion sizes we saw were adequate. However, breakfast packs were meagre and were issued on the day before consumption.
- 2.91** There were few opportunities to dine out of cell and most prisoners had to eat in their small cells (some shared), many near unscreened toilets (see also section on residential units).
- 2.92** The kitchen and most serveries (with the exception of G wing) were clean and well maintained. Prisoners involved in catering services were trained in basic food hygiene and wore appropriate clothing. Halal food was appropriately stored, prepared and served and the serveries were well supervised.

- 2.93** There were good consultation mechanisms and the food representatives were easily accessible. An annual survey informed the catering staff of prisoners' issues and there were food comments books on the residential units which were readily available to prisoners; catering staff had responded appropriately to the comments and questions.

Recommendations

- 2.94** **The prison should explore and address prisoners' negative perceptions of the food.** (Repeated recommendation 8.8)
- 2.95** **Breakfast packs should be issued on the morning they are to be eaten.**

Purchases

Expected outcomes:

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

2.96 *The range of goods in the shop met the diverse needs of the population. Consultation arrangements were good and resulted in improvements. Prisoners had to pay an administration fee for catalogue orders.*

- 2.97** The prison shop broadly met the diverse needs of the prison population. Some items, such as sugar, were inappropriately restricted owing to security arrangements (see also section on security). The shop list was freely available but many prisoners told us that the writing on the list was too small to read; this had been raised repeatedly in meetings and remained an outstanding issue.
- 2.98** Consultation arrangements were good and we saw good outcomes as a result of issues raised, including wider provision of items for black and minority ethnic prisoners.
- 2.99** Prisoners had to submit their shop order forms by Sunday and received their goods the following Friday. For some new prisoners, there could be a delay of almost two weeks before they received their first order.
- 2.100** Access to catalogue goods was reasonable but prisoners were charged an administration fee.

Recommendations

- 2.101** **All prisoners should have weekly access to the shop.** (Repeated recommendation 8.15)
- 2.102** **Prisoners should not be charged an administration fee for catalogue orders.** (Repeated recommendation 8.16)

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.⁶

- 3.1** *The amount of time out of cell was reasonable and few prisoners were locked up for long periods during the day. There was some regular slippage of the regime, and access to association and exercise was far too limited.*
- 3.2** The amount of time out of cell for most was reasonable, at around nine hours for employed and six hours for unemployed prisoners. Prisoners on the basic regime could be out of their cells for around four hours a day.
- 3.3** In our roll checks, we found around 18% of prisoners locked up, most of whom were unlocked at some time during the day for either part-time work or 'domestic time', which allowed prisoners out of their cells to clean, access showers and telephones but not to access to recreational activities.
- 3.4** Access to exercise, although regular, was limited to only 30 minutes. There was no association available during the working week. Unemployed and part-time prisoners had access to the daytime domestic periods described above but there was no evening association available until the weekend. Some prisoners (a maximum of 10% of the population) attended evening classes, the library or could apply to use the telephone but most were locked up by 6.15pm; although this was the lock-up time indicated in the published regime, we routinely observed prisoners being locked up as early as 6pm.

Recommendations

- 3.5 All prisoners should have access to at least one hour's exercise each day.**
- 3.6 Association periods should be available during the week.**
- 3.7 Inappropriate regime slippage should be reduced.** (Repeated recommendation 6.6)

⁶ 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.

3.8 *The management of learning and skills had greatly improved, although quality improvement processes were not fully developed. Managers had developed increasingly effective collaborative working relationships. Quality monitoring and improvement work had progressed, although the range and analysis of data were not sufficiently broad or rigorous. The number of activity places had been overestimated and too many prisoners were not involved in purposeful activity. Attendance at education and vocational training activities had improved. Waiting lists were reasonably short and well managed. Teaching and learning were good. The peer mentoring programme was effective. The range of qualification-based courses offered was adequate. Achievement of qualifications was high on vocational courses and in work, and mostly high on education courses. The library was well used and managed.*

3.9 *Ofsted⁷ made the following assessments about the learning and skills and work provision:*

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

Management of learning and skills and work

3.10 Leadership and management of learning and skills had developed but required further improvement. Effective, collaborative working relationships had been established and the relevant managers involved in education, training and work worked well in partnership to achieve shared objectives. Managers paid close attention to performance monitoring and quality improvement action-planning. Weston College provided good education and training under the Offender Learning and Skills Service (OLASS) contract, accounting for around a quarter of all activity places.

3.11 An extensive quality action plan had been jointly agreed and was monitored regularly by a cross-departmental team, but many actions were still in progress and had not had sufficient impact. The management team had not identified that the total number of activity places had been overestimated considerably and that only two-thirds of prisoners were involved routinely in any form of daily purposeful activity, with the remainder staying on the accommodation units (mainly G wing) (see main recommendation S55).

⁷ 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>.

- 3.12** The range of performance management and monitoring data available to managers in the prison was too narrow, although the analysis and use of the available data were now good. Self-assessment had become more self-critical and evaluative but it was not a unified process and the number of different quality-related documents compromised the clarity of decision-making about quality improvement.
- 3.13** The allocation process had been completely revised and was now efficient and effective. It used good-quality communications and information from a range of sources to make prompt and fair decisions on prisoners' allocation to education, training and work.
- 3.14** Strategies to increase participation in education were increasingly effective. Access to all vocational training courses was now contingent on a prisoner attaining level 1 in English and mathematics functional skills.
- 3.15** Attendance rates at education and vocational training activities had improved and were monitored closely. The number of learners leaving education and vocational training sessions early to attend other appointments and not returning was starting to reduce through better communication between prison departments, but was still too high. For example, in the course of one education session during the inspection, 13 out of 75 (17%) original attendees subsequently left to attend another activity and not all returned.
- 3.16** Observations of teaching and learning sessions in education were generally sound; written records correlated with the grades awarded and staff development was linked appropriately. The process for observing the quality of vocational training and the link to staff development both required improvement.
- 3.17** There was insufficient cover for training staff absences in vocational sessions.

Recommendations

- 3.18** **The learning and skills quality improvement action plan should be expanded and used to improve the self-assessment process and produce a single summary self-assessment report.**
- 3.19** **The number of prisoners who leave education or training sessions to attend another activity should be reduced.**
- 3.20** **Better use should be made of the observations of teaching and learning in accredited vocational sessions.**
- 3.21** **There should be appropriate cover for staff absences in vocational training.**
(Repeated recommendation 6.24)

Provision of activities

- 3.22** There were activity places for only 75% of the prison population of working age, which was 10% lower than the prison's own figure (see section on leadership and management, and main recommendation S55). Around 100 places were available in education and 180 in vocational training; most were occupied but workplaces were underutilised. The number of activity places was planned to increase early in 2014, to provide places for 84% of the population which was adequate given the number of retired prisoners and those unable to work.

- 3.23** The overall range of provision offered was adequate but primarily met the needs of the large number of learners with relatively low-level functional and technical skills. Most education, training and work activities integrated vulnerable and mainstream prisoners, and vulnerable prisoners were no longer disadvantaged. Few prisoners were on waiting lists and waiting times were reasonably short and well managed.
- 3.24** The range of courses offered in education was adequate. Courses focused mainly on improving prisoners' functional skills in English and mathematics and developing a good grounding in information technology. Additional courses included study skills, peer mentoring and business enterprise. Most courses were offered from entry to intermediate levels. At the time of the inspection, 19 prisoners were enrolled on Open University or distance learning courses.
- 3.25** The range of accredited vocational training was adequate and the number of full-time courses offered had increased. Some of the qualifications offered in workshops were voluntary and many prisoners preferred not to take them. Courses included carpentry, painting and decorating, construction skills, and Prisons Information Communication Technology Academy (PICTA). No courses were offered above intermediate level. Plans were well developed to provide additional vocational training places on the farm, in workshops and in a call centre.
- 3.26** Most of the work options enabled prisoners to develop employability skills. Work was available in the kitchen, laundry, gardens, waste recycling, wing cleaning, painting, textiles and various orderly roles. Most work allowed prisoners to complete a vocational qualification but few took this opportunity. Attendance rates and punctuality for work were very good.
- 3.27** The induction to education, vocational training and work was comprehensive. National Careers Service staff produced thorough individual skills action plans for, and general profiles of, prisoners. The aims and options agreed with prisoners were realistic and subsequent learning was well planned.

Quality of provision

- 3.28** All of the teaching and learning we observed in education and vocational training were good. Well-qualified and experienced tutors in education and vocational training provided good classroom teaching and individual coaching in workshops. Teachers and trainers gave prisoners a high-quality learning experience and engaged well with them.
- 3.29** Teaching resources for education and vocational training were generally good and the accommodation was fit for purpose. The prison's virtual campus (internet access for prisoners to community education, training and employment opportunities) was used well by many prisoners for job searches and developing study skills but there was insufficient access for prisoners based in the resettlement unit.
- 3.30** The peer mentoring programme was effective. Peer mentors were selected for their potential aptitude to provide support to teachers and other prisoners during classes and workshops. Those selected were trained and supported well, and played a strong role in promoting individual learning.
- 3.31** The use of individual learning plans (ILPs) by teachers in education classes had improved but there was no written definition of learners' achievements, and target setting was not sufficiently specific. In vocational training, trainers' written feedback in ILPs was detailed and useful.

Recommendation

- 3.32 Individual learning plans in education classes should include clearer written records of prisoners' achievements and more specific and time-bound targets for improvement, and their format should be improved.**

Education and vocational achievements

- 3.33** There was good celebration of success. Prisoners' achievement of qualifications, when offered, was high on vocational courses and in work. The development of personal skills was good and integrated with the development of vocational skills. Prisoners progressed well and completed their qualifications within the allotted time. In vocational training, the standard of practical work was high overall, and particularly good in Braille, carpentry, dry lining and brickwork.
- 3.34** Success rates on education courses had improved considerably, with most being very high and some outstanding. In the classroom sessions we observed, prisoners gained new learning quickly and applied it well. However, success rates in functional skills qualifications in English and mathematics were lower than for other courses. This reflected a relative lack of hours available for teaching these subjects in the recent past. Most prisoners completed their education courses but around 5% were moved to a different prison before completion.

Recommendation

- 3.35 The success rates in functional skills qualifications in English and mathematics should be improved.**

Library

- 3.36** Devon County Council provided a well-managed library service. It was centrally located and provided a welcoming facility that was extensively used by many prisoners to borrow books and participate in individual study and small-group work. Library opening times had been revised and now included some evenings, which had increased the number using the facility.
- 3.37** There was a wide range of fiction and non-fiction books and other learning resources, including Prison Service Orders. Prisoners also had good access to an appropriate range of reference materials, and those on Open University courses used the library laptop computers daily. There were also small, frequently replenished, bookstores in the resettlement and the segregation units.
- 3.38** Reading clubs operated monthly and the Storybook Dads scheme (in which prisoners record stories for their children) was popular. Toe by Toe (a mentoring scheme to help prisoners learn to read) was managed well. At the time of the inspection, there were 19 Toe by Toe mentors supporting 18 prisoners, and in the previous three months 13 achievement certificates at stages 1 and 2 had been awarded.

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.

3.39 *PE facilities and resources were good, well maintained and well used. Healthy living and the wide range of physical training activities were promoted effectively to all groups of prisoners. The activity timetable was well planned and linked to the education department. Achievement rates for prisoners completing the gym instructor courses were high.*

3.40 The PE facilities were managed well and activities were promoted effectively. Weekly inductions ensured that all prisoners understood how to use the equipment and stay healthy. A limited range of activities was offered. Well-used and maintained cardiovascular, modular and Olympic weight-lifting equipment and a small sports hall were available but the outside facilities had not been refurbished and were unavailable.

3.41 Prisoners were able to engage in physical activity at least twice a week, with sessions running before work, at lunchtime and in the early evening for those in work. Weekend allocations were fair, providing sufficient opportunities for all prisoners to engage in activities. Several prisoners participated in exercise programmes to lose weight and improve their fitness levels. Close working with the health care department and the drug strategy unit ensured a wide range of activity sessions for targeted groups.

3.42 One intermediate-level gym instructor course was offered twice a year and had high success rates. A 'fitter thinking' programme, run in conjunction with the education provider, engaged mainstream (G wing) prisoners who were otherwise unwilling to attend education classes to develop their literacy and numeracy skills, and was compulsory for those wishing to attend activities in the gym. Progression rates to education classes from this course were very good.

Recommendation

3.43 **The outdoor PE facilities should be renovated and improved.** (Repeated recommendation 6.40)

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 *There was a comprehensive reducing reoffending strategy but the needs analysis did not sufficiently inform development objectives. Governance structures were sound but attendance at the strategic group was erratic. There were good release on temporary licence opportunities but not for sex offenders.*

4.2 The reducing reoffending strategy was comprehensive and addressed the resettlement pathways. Strategic objectives focused mainly on maintaining rather than developing provision. A good needs analysis had been prepared at the beginning of 2013, which drew on a range of relevant information, including a prisoner survey and offender assessment system (OASys) data, although it was not sufficiently clear how it had been used in the development of the strategy. The population had changed significantly since the needs analysis had been undertaken and a new one was planned to inform a review of the reducing reoffending strategy.

4.3 The strategy was overseen by a multi-disciplinary group, including offender management and public protection staff, which met every three months. The meeting was well structured and reviewed progress in each area, but the minutes we examined showed that attendance was poor and that there were no reports for some regime areas. External providers were not represented at the meeting.

4.4 A key part of the strategy involved the resettlement support unit (RSU), which provided non-sex offender prisoners with a staged transition to release on temporary licence (ROTL) to work voluntarily in the community and rebuild community and family ties. ROTL was available only to prisoners on the RSU; there was no clear process for others to apply, effectively excluding sex offenders from the opportunity (see public protection section 4.19).

4.5 To qualify for working in the community, prisoners spent a six-month assessment period on the RSU, during which they worked or attended training in the prison. The next stage was working on the prison farm, where they were under close supervision before being allowed unaccompanied release and project work involving contact with the public. At the time of the inspection, the unit held 47 prisoners, of whom eight worked on the prison farm and seven on project work, including the prison museum and restoration of a National Trust property. We were told that in the 11 years that the unit had been offering ROTL, no prisoners had failed to return.

Recommendations

- 4.6 The prison should use needs analysis information more effectively to plan and deliver resettlement and offender management services.** (Repeated recommendation 9.5)
- 4.7 All prisoners should have the opportunity to apply for release on temporary licence (ROTL).**

Housekeeping point

- 4.8** There should be full representation at the reducing reoffending strategy group meeting, including external providers.

Offender management and planning

Expected outcomes:

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

4.9 *Offender management and planning were inadequate. Too many prisoners did not have sentence plans and contact with offender supervisors was poor. Only a small proportion of home detention curfew applications were successful and too many were delayed, often for reasons outside the prison's control. Public protection procedures were generally sound, although risk assessments for release on temporary licence were inadequate. Categorisation reviews were timely and transfer arrangements had improved.*

- 4.10** The offender management unit (OMU) was not effective. A very large number of prisoners did not have an OASys assessment or sentence plan. In our survey, 58% of sentenced prisoners said that they did not have a sentence plan, which was worse than the comparator and than at the time of the previous inspection; this had a severe impact on the identification and management of risks and prisoners' ability to progress. We were told that there were 133 prisoners without an OASys assessment, and that a further 100 were out of date, representing more than a third of the population. We found that only five of the 14 prisoners due for release in the following month had a sentence plan, and those prisoners without a plan had served a sentence without their offending behaviour or resettlement needs being fully addressed. In the sample of cases we examined, we found examples of prisoners well into their sentences with no sentence plan. The problem was being compounded by an increase in the number received from local prisons without an assessment of any kind, and the rise in the number of vulnerable prisoners (see main recommendation S56). Sentence planning boards did not include contributions from all staff with knowledge of the prisoner.
- 4.11** Managers could not tell us how many of the OASys assessments were their responsibility and how many the responsibility of community-based offender managers. There was no plan to reduce the backlog and offender supervisors were not given direction in prioritising their work (see main recommendation S56). Caseloads were large but additional offender supervisors had been appointed and were due to start in the New Year. Oversight of the quality of work done by offender supervisors had improved and a senior practitioner

probation officer provided professional guidance to all offender supervisors. As so few assessments had been completed by offender supervisors, it was difficult to assess overall quality but we found deficits in assessments of risk of harm, a lack of risk management plans and late assessments of the likelihood of reoffending. Assessments by offender managers were better.

- 4.12** Offender supervisor contact with prisoners was unstructured or non-existent and prisoners complained about difficulties in seeing their offender supervisor. Prisoners were not clear about how they could progress; in our survey, fewer prisoners with a sentence plan than those at other training prisons said that they could achieve their targets at the establishment or that there were plans for them to be achieved elsewhere.
- 4.13** Procedures for assessing suitability for home detention curfew were adequate and were supported by an accommodation service for those without an address. However, we found that in the previous six months 23 applications out of 51 had been considered after their eligibility date. In most cases, this had been due to reasons outside the prison's control, such as delayed assessments from home Probation Services or the prisoner having been received at the prison without the process being under way. Only 19 applications out of 51 had been approved in the previous six months.

Recommendations

- 4.14 Prisoners should not be sent to the establishment without a full OASys assessment in place.**
- 4.15 Sentence planning meetings should include contributions from all departments involved in working with the prisoner concerned.** (Repeated recommendation 9.19)
- 4.16 The low proportion of successful home detention curfew (HDC) applications and delays in the process should be investigated and any remedial action identified taken.**

Public protection

- 4.17** Prisoners who presented a risk of harm to the public were promptly identified by the dedicated public protection administrator. Restrictions imposed, including telephone monitoring, were proportionate and were reviewed after five weeks.
- 4.18** Attendance at the regular and effective interdepartmental risk management meeting had improved, and included relevant departments. The meetings were well structured and information from community multi-agency public protection arrangements (MAPPA) boards was shared, although we found examples of late communication from community MAPPA boards to the prison. All prisoners due for release were considered by the meeting to decide on any restrictions on licence. The prison used the violent and sexual offenders register (ViSOR) electronic information-sharing database and added information where appropriate.
- 4.19** ROTL risk assessments were inadequate and ROTL was not available to the whole population. Although there was a thorough observation and analysis of prisoners' behaviour during the staged transition into unsupervised temporary release, the risk assessment did not adequately address risk in the community. The residential officers undertaking the assessment were not trained in risk of harm and an offender supervisor assigned to all the prisoners on the resettlement unit did not contribute fully to the assessment. We found that

some of those undertaking ROTL did not have an up-to-date OASys assessment of their risk in the community, including four of the five prisoners who were receiving home leave. We also found that the risk assessment was not adequately reviewed when prisoners progressed from high levels of supervision to less restricted temporary release. In one file, we found a licence signed by a governor, even though ROTL had not been granted, which may have indicated that licences were being signed before the risk assessment board had made a decision.

Recommendation

- 4.20 The risk assessment of prisoners being released on temporary licence should fully address their risk of harm in the community.**

Categorisation

- 4.21** Categorisation reviews were up to date. The categorisation review processes ensured that prisoners were able to make full representations, and the range of contributions from staff who knew the prisoner was appropriate. When prisoners' applications for recategorisation were refused, the reasons were fully explained.
- 4.22** The recategorisation refusals we examined were appropriate. However, too many prisoners were unfairly prevented from progressing because recategorisation had been refused as a result of their offending behaviour not having been addressed, even though they had not had a sentence plan or been given the opportunity to complete interventions (see main recommendation S56).
- 4.23** Procedures for arranging the transfer of prisoners had improved with the establishment of an observation, classification and allocation department. The number waiting for transfer was reasonable and most did not wait more than six weeks. Although transfer arrangements had improved, we found examples of prisoners without sentence plans whose transfer needs had not been identified, masking a greater need than that identified by the number of transfer applications outstanding (see main recommendation S56.) At the time of the inspection, there were 34 category D prisoners, of whom five were waiting for transfer to open conditions; the remaining 29 were appropriately located on the RSU or had been returned from open conditions.

Indeterminate sentence prisoners

- 4.24** There were 64 indeterminate-sentenced prisoners (ISPs) at the time of the inspection: 33 life-sentenced prisoners and 31 serving indeterminate sentences for public protection. There had been an influx of life-sentenced prisoners with the closure of prisons holding them.
- 4.25** Consultation meetings were held with life-sentenced prisoners which identified some of their needs and provided them with information but specialist facilities, such as lifer days, were not provided.
- 4.26** ISPs were managed by two probation officer offender supervisors, who had received specialist training. They worked actively with many ISPs to ensure that parole board reports were provided on time and to facilitate constructive work or suitable transfers.

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.

4.27 *Most prisoners knew whom to turn to for help with resettlement, and their needs were identified during induction. Discharge planning was in place but not comprehensive enough. Most pathway provision was mainly effective. Support under the children and families pathway was adequate but too few visits were available and too many family days had been cancelled. Sex offenders in denial were not proactively managed and the offending behaviour needs of these and the wider population had not been comprehensively analysed.*

4.28 Our survey showed that knowledge among prisoners about whom to turn to for help across most pathways was relatively good. New prisoners were interviewed by an offender supervisor during the induction period. The protective factors interview form was used to identify immediate needs and referrals were made as necessary to resettlement agencies.

4.29 A discharge planning process was in place. Membership of the discharge board was generally limited to the offender supervisor and Jobcentre Plus staff, with the main focus on setting up fresh benefits claims. We were not assured that all prisoners attended, and record-keeping of the outcomes was poor.

4.30 There was a large number (45) of former servicemen at the prison, and in our survey 15% of respondents said that they were veterans. Their survey responses were more positive overall than those of the rest of the respondents. All new arrivals were issued with a form to complete, asking if they had served in the armed forces and if they needed any help, or prisoners could submit an application for support. Veterans could access a wide range of help from the Soldiers, Sailors, Airmen and Families' Association (SSAFA), either on an individual or group basis. SSAFA staff attended the prison regularly. Their support was well advertised on the wings, and included preparation for release, help with rent, help with buying household goods and relocation costs.

Housekeeping point

4.31 Membership of the discharge board should be improved, attendance by the prisoner should be monitored and the outcome should be formally recorded.

Accommodation

4.32 A part-time housing adviser and two part-time orderlies assisted in securing accommodation. The orderlies were well trained and had appropriately focused job descriptions. A4E and Citizen's Advice provided regular support and operated pre-booked sessions by application. Our data showed that, at 7.5%, the proportion of prisoners released as homeless had decreased and was lower than at comparator prisons.

4.33 The housing adviser monitored referrals, delegated the work and met the orderlies every week to discuss any further issues, and was responsible for updating records. Referrals were received from a number of sources, which resulted in a high number of contacts and

eventual positive outcomes, which further demonstrated effective links with other services and a good knowledge of the housing service within the prison.

Education, training and employment

- 4.34** Staff from a wide range of specialist support agencies worked effectively together to support prisoners' plans for employment, training or education on release. Overall, the National Careers Service (NCS) was good, and had strong working partnerships within and outside the prison.
- 4.35** NCS personal advisers carried out well-structured interviews for all prisoners during the education induction. Analysis of prisoners' needs was particularly effective. The service effectively promoted the availability of further careers information and advice. However, advisers' lack of access to the NCS internet browser impeded their ability to support prisoners in looking for jobs or researching specific training courses to take up on release.
- 4.36** A formal employability course was offered in the RSU but was not available to vulnerable prisoners. A nine-week training course in partnership with the YMCA helped RSU prisoners to focus on time-keeping, social skills and the expectations of employers. The virtual campus (internet access for prisoners to community education, training and employment opportunities) was accessible to most prisoners and reasonably well used but it was not easily available for RSU prisoners for writing CVs or job searches.
- 4.37** The education provider ran a small range of courses for non-RSU prisoners which included budgeting, preparation for work and personal finance. Links with employers were underdeveloped.

Recommendations

- 4.38 National Careers Service (NCS) advisers should have real-time links to the NCS internet browser.**
- 4.39 Resettlement courses should be provided for vulnerable prisoners and mainstream prisoners outside the RSU.**
- 4.40 Resettlement support unit prisoners should have access to the virtual campus.**

Health care

- 4.41** Health care discharge arrangements were planned well in advance and included a pre-discharge clinic held two weeks before release. Packs were prepared, including a GP letter outlining care and treatment during custody, NHS information and health promotion material. Prescribed drugs were given to prisoners on their release, through reception.
- 4.42** The care programme approach was used for prisoners with enduring mental health problems. Palliative care and end-of-life policies and protocols were available.

Drugs and alcohol

- 4.43** The substance misuse team contributed to sentence planning and had successfully referred prisoners requiring more structured interventions to establishments offering intensive drug and alcohol programmes. A resettlement worker from the offender management unit had been appointed, and the service was developing a peer-led pre-release group. Prisoners consistently received harm reduction advice pre-release, there were good links with local drug intervention programmes, and the prison was represented at the local continuity of care group.

Finance, benefit and debt

- 4.44** In our survey, more prisoners than at comparator prisons said that they had arrived at the prison with financial concerns. Issues were identified during an induction initial assessment and then referred on to other services, such as Jobcentre Plus, Citizen's Advice and A4E, which provided support and advice.
- 4.45** Data collected showed evidence of a good level of finance, benefit and debt provision, and the prison also ran a course called 'Time for Change', which helped prisoners to understand budgeting and becoming financially responsible.

Children, families and contact with the outside world

- 4.46** Given the geography of the establishment, it was not surprising that around half of the population lived over 100 miles from the prison and that fewer prisoners in our survey than at comparator prisons said that it was easy for their family and friends to get to the prison. However, the prison had not made any progress in providing transport from the nearest railway station.
- 4.47** Visits capacity did not meet demand. There were only 17 visits places available and visits sessions ran only five afternoons a week. As a result, at the time of the inspection visits were booked up for the following three weeks. We were unable to get through to the telephone visits booking line, even though the opening hours had been increased slightly since the previous inspection. Many visitors we spoke to complained about this, and the lack of an email booking system.
- 4.48** The visitors centre was welcoming and Choices (the organisation responsible for running the centre) staff were on hand to support visitors, including those new to the establishment. The small visits hall was bright and clean, the refreshments bar was well run and the children's play area was supervised. Visits staff were polite and courteous to prisoners and visitors. Those receiving visits reported a positive experience, and Choices provided a wide range of support to families before and during visits. Choices staff were also able to provide emotional and practical support to individual prisoners, including support during divorce or separation. They also provided an input to the induction programme.
- 4.49** A survey of visitors' views had not been undertaken within the last couple of years.
- 4.50** Twenty family days had been scheduled for 2013 but nearly half had been cancelled owing to the re-profiling of staff. The Storybook Dads scheme (see also section on library) and the Family Matters course were well used.

Recommendations

- 4.51** The number of visits and family days should be increased to meet demand.
- 4.52** Visits booking should be improved and practical help with getting to the prison should be explored.

Housekeeping point

- 4.53** A visitors survey should be undertaken and used to make further improvements.

Attitudes, thinking and behaviour

- 4.54** The offending behaviour needs of the diverse population had not been comprehensively analysed. The thinking skills programme was the only accredited offending behaviour programme provided, and did not meet the range of needs within the prison. The lack of OASys assessments meant that not all potentially suitable prisoners had been referred to this programme, so waiting lists did not reflect the true level of places needed.
- 4.55** Offending behaviour arrangements for the large number of sex offenders were inadequate. Dartmoor was intended to be a sex offender treatment preparation centre, motivating prisoners to take part in a sex offender treatment programme run at HMP Channings Wood. However, the 'A to Z motivational programme' at Dartmoor had been withdrawn as it was not sufficiently effective. There was no alternative provision and no formal strategy for managing those in denial of their offending. This meant that the pool of sex offenders in denial was increasing; 134 out of 263 sex offenders were deemed to be in denial. Many offender supervisors had little opportunity or training to provide individual offence-focused work and there was little psychological support available to prisoners. Many prisoners received little or no offending behaviour work before their release (see main recommendation S57).

Housekeeping point

- 4.56** All suitable prisoners should be referred to the thinking skills programme.

Section 5. Summary of recommendations and housekeeping points

The following is a listing of repeated and new recommendations, housekeeping points and examples of good practice included in this report. The reference numbers at the end of each refer to the paragraph location in the main report, and in the previous report where recommendations have been repeated.

Main recommendations

To the governor

- 5.1 All data relating to violence should be collated and analysed to identify trends, action should be taken to improve safety, and all identified incidents of violence should be investigated and appropriate action taken. (S54)
- 5.2 The number of available activity places should be increased and accurately identified, and all prisoners should be engaged in work, education or training, with attendance monitored. (S55)
- 5.3 The backlog of offender assessment system (OASys) assessments should be reduced and the work of offender supervisors prioritised. (S56)
- 5.4 The needs of sex offenders in denial should be analysed. A strategy and suitable programmes should be introduced. (S57)

Recommendations

To NOMS

Courts, escort and transfers

- 5.5 Long escort journeys to the prison should include a toilet break. (1.5, repeated recommendation 1.6)

Offender management and planning

- 5.6 Prisoners should not be sent to the establishment without a full OASys assessment in place. (4.14)

Recommendations

To the governor

Early days in custody

- 5.7 All initial interviews should be conducted in private. (1.14)
- 5.8 First night cells should be maintained to a high standard and made welcoming for new arrivals. (1.15, repeated recommendation 1.19)
- 5.9 Night staff should always check and sign the risk assessment for new arrivals and check on their well-being. (1.16)

Bullying and violence reduction

- 5.10** Victims of antisocial behaviour should be fully supported. (1.22)

Self-harm and suicide

- 5.11** The quality of night entries in assessment, care in custody and teamwork (ACCT) documents should be improved and demonstrate meaningful engagement. (1.27)
- 5.12** Additional consideration should be given to the regime for prisoners subject to ACCTs who are unemployed and/or on the basic level of the IEP scheme. (1.28)
- 5.13** The gated cell in the segregation unit should not be used for prisoners in crisis and at risk of self-harm, and an alternative location should be found. (1.29, repeated recommendation 3.28)

Safeguarding

- 5.14** The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (1.35)

Security

- 5.15** The items that prisoners can buy in the prison shop should only be restricted on the basis of sound assessments of risk. (1.42, repeated recommendation 7.9)
- 5.16** Outcomes from security information reports, including searches and mandatory drug tests, should be carried out quickly. (1.43)
- 5.17** The mandatory drug testing (MDT) programme should be sufficiently resourced to undertake the required level of suspicion testing. (1.44, repeated recommendation 3.61)

Incentives and earned privileges

- 5.18** The incentives and earned privileges (IEP) scheme should be implemented consistently and fairly across the prison. (1.50)
- 5.19** Prisoners should not be disadvantaged by the IEP scheme owing to protected characteristics or because of the lack of sentence plan or targets. (1.51)

Discipline

- 5.20** Safety issues raised by prisoners during adjudications should be actioned and reported. (1.55)
- 5.21** Strip-searching and use of anti-tear clothing for those placed in special accommodation should be fully justified. (1.59)
- 5.22** All prisoners in the segregation unit should have a care plan to address problem or vulnerable behaviour, and options for their safe integration back into the main prison or transfer should be identified. (1.65, repeated recommendation HP44)

- 5.23** A range of regime activities should be available for all prisoners located in the segregation unit. (1.66, repeated recommendation 7.32)

Substance misuse

- 5.24** The clinical substance misuse service should be adequately resourced to provide good-quality, consistent and coordinated care to all prisoners requiring treatment, including those who need secondary detoxification. (1.72, repeated recommendation 3.55)
- 5.25** The health service providers' skill mix should include dual diagnosis expertise. (1.73, repeated recommendation 3.56)
- 5.26** The drug and alcohol strategy action plans should be updated and informed by a comprehensive population needs analysis. (1.74, repeated recommendation 9.56)

Residential units

- 5.27** All cells should be properly maintained and kept warm and dry, and all toilets should be screened. (2.8, repeated recommendation HP45)
- 5.28** Single cells should not be used to house two prisoners. (2.9)
- 5.29** Showers should be accessible to older prisoners and those with disabilities, and be adequately screened. (2.10)

Staff-prisoner relationships

- 5.30** Entries by wing staff in electronic case notes should be regular, of good quality and overseen by managers. (2.17)

Equality and diversity

- 5.31** The overarching equality policy should include provision for all protected characteristics of diversity. (2.20, repeated recommendation 4.9)
- 5.32** An up-to-date equality action plan should underpin the strategic management of diversity and equality. (2.21)
- 5.33** Prisoners and staff should be aware of who is responsible for equality and diversity issues and how concerns can be addressed. (2.22)
- 5.34** Investigation of discrimination incident report forms (DIRFs) should be subject to external quality checks. (2.23)
- 5.35** Care support plans should be in place for all prisoners who need them, and should be regularly reviewed and updated. (2.35)
- 5.36** The identification of Gypsy, Romany or Traveller prisoners, and support for all black and minority ethnic prisoners, should be improved, including support groups or forums and support from external community agencies. (2.36, repeated recommendation 4.18)
- 5.37** There should be regular support forums and improved support for foreign national prisoners from all staff. (2.37, repeated recommendation 4.29)

- 5.38** The prison should explore and take action to address the negative perceptions of some older prisoners and those with disabilities. (2.38, repeated recommendation 4.41)
- 5.39** Older prisoners and those with disabilities from mainstream wings who are not using the diversity centre should be able to access support and information on the wings. (2.39)

Faith and religious activity

- 5.40** Prisoners' negative perceptions about faith provision should be explored and concerns addressed. (2.47)

Complaints

- 5.41** There should be regular analysis and quality assurance of complaints to ensure that emerging trends are identified and acted on and to improve the quality of responses. (2.52)

Legal rights

- 5.42** Information on how to access a range of legal advice should be made available to prisoners. (2.56)

Health services

- 5.43** A health needs assessment should be commissioned and completed as soon as possible to inform the future delivery of services. (2.64)
- 5.44** Automated external defibrillator checks should be recorded daily. (2.65)
- 5.45** There should be more allocated time for a pharmacist to enable medicines use reviews and routine counselling of patients to take place, and this service should be prominently advertised. (2.76)
- 5.46** A formal out-of-hours policy should be introduced, with a displayed list of approved medicines that can be supplied under the policy, and consideration should be given to the geographical location of the prison to ensure that all situations are catered for. (2.77)
- 5.47** The prescribing of tramadol in-possession should be reviewed in order to reduce the likelihood of prisoners being bullied for, and trading, this medicine. (2.78)
- 5.48** Supervision times should be reviewed to ensure that medication is given at appropriate clinical times. (2.79)
- 5.49** Prisoners should have access to professional counselling services. (2.88)

Catering

- 5.50** The prison should explore and address prisoners' negative perceptions of the food. (2.94, repeated recommendation 8.8)
- 5.51** Breakfast packs should be issued on the morning they are to be eaten. (2.95)

Purchases

- 5.52** All prisoners should have weekly access to the shop. (2.101, repeated recommendation 8.15)
- 5.53** Prisoners should not be charged an administration fee for catalogue orders. (2.102, repeated recommendation 8.16)

Time out of cell

- 5.54** All prisoners should have access to at least one hour's exercise each day. (3.5)
- 5.55** Association periods should be available during the week. (3.6)
- 5.56** Inappropriate regime slippage should be reduced. (3.7, repeated recommendation 6.6)

Learning and skills and work activities

- 5.57** The learning and skills quality improvement action plan should be expanded and used to improve the self-assessment process and produce a single summary self-assessment report. (3.18)
- 5.58** The number of prisoners who leave education or training sessions to attend another activity should be reduced. (3.19)
- 5.59** Better use should be made of the observations of teaching and learning in accredited vocational sessions. (3.20)
- 5.60** There should be appropriate cover for staff absences in vocational training. (3.21, repeated recommendation 6.24)
- 5.61** Individual learning plans in education classes should include clearer written records of prisoners' achievements and more specific and time-bound targets for improvement, and their format should be improved. (3.32)
- 5.62** The success rates in functional skills qualifications in English and mathematics should be improved. (3.35)

Physical education and healthy living

- 5.63** The outdoor PE facilities should be renovated and improved. (3.43, repeated recommendation 6.40)

Strategic management of resettlement

- 5.64** The prison should use needs analysis information more effectively to plan and deliver resettlement and offender management services. (4.6, repeated recommendation 9.5)
- 5.65** All prisoners should have the opportunity to apply for release on temporary licence (ROTL). (4.7)

Offender management and planning

- 5.66** Sentence planning meetings should include contributions from all departments involved in working with the prisoner concerned. (4.15, repeated recommendation 9.19)
- 5.67** The low proportion of successful home detention curfew (HDC) applications and delays in the process should be investigated and any remedial action identified taken. (4.16)
- 5.68** The risk assessment of prisoners being released on temporary licence should fully address their risk of harm in the community. (4.20)

Reintegration planning

- 5.69** National Careers Service (NCS) advisers should have real-time links to the NCS internet browser. (4.38)
- 5.70** Resettlement courses should be provided for vulnerable prisoners and mainstream prisoners outside the RSU (4.39)
- 5.71** Resettlement support unit prisoners should have access to the virtual campus. (4.40)
- 5.72** The number of visits and family days should be increased to meet demand. (4.51)
- 5.73** Visits booking should be improved and practical help with getting to the prison should be explored. (4.52)

Housekeeping points

Self-harm and suicide

- 5.74** The care suites should be maintained to a high standard. (1.30)
- 5.75** Instructions for the issue and use of the Samaritans telephone should be widely available. (1.31)
- 5.76** Representatives from all departments identified in the safer custody meeting terms of reference should attend the meetings. (1.32)

Discipline

- 5.77** All planned incidents of use of force should be video-recorded and the prisoner involved clearly identifiable. (1.60)
- 5.78** History sheet records should reflect the good levels of interaction between staff and prisoners. (1.67)

Residential units

- 5.79** The system for monitoring and tracking applications should be improved. (2.11)

Equality and diversity

- 5.80** All prisoners should be aware of the DIRF system and how to access it. (2.24)
- 5.81** Lists of sources of legal advice and free specialist support should be available for foreign national prisoners. (2.40)
- 5.82** The transgender policy should be available throughout the relevant areas of the prison. (2.41)

Health services

- 5.83** Training and development should be easily available to all staff. (2.66)
- 5.84** Prisoners should have access to health care information and health promotion material in a range of languages. (2.67)
- 5.85** Staff should be trained in how to access the risk assessments on SystemOne for medicines that are given in-possession. (2.80)
- 5.86** There should be a contingency plan for the ordering of prescriptions to ensure that there is no disruption in the supply of medicines to prisoners. (2.81)
- 5.87** Stock reconciliation procedures should be introduced for items supplied out of hours or under patient group directions. (2.82)
- 5.88** There should be a clear audit trail of who has accessed all controlled drugs cabinets, and the controlled drugs cabinet in the central treatment room should be secured according to the regulations. (2.83)

Strategic management of resettlement

- 5.89** There should be full representation at the reducing reoffending strategy group meeting, including external providers. (4.8)

Reintegration planning

- 5.90** Membership of the discharge board should be improved, attendance by the prisoner should be monitored and the outcome should be formally recorded. (4.31)
- 5.91** A visitors survey should be undertaken and used to make further improvements. (4.53)
- 5.92** All suitable prisoners should be referred to the thinking skills programme. (4.56)

Section 6. Appendices

Appendix I: Inspection team

Nick Hardwick	Chief inspector
Alison Perry	Team leader
Paul Rowlands	Inspector
Andrew Rooke	Inspector
Sandra Fieldhouse	Inspector
Maneer Afsar	Inspector
Sarah Cutler	Inspector
Karen Dillon	Inspector
Gemma Quayle	Researcher
Helen Ranns	Researcher
Ewan Kennedy	Researcher

Specialist inspectors

Sigrid Engelen	Substance misuse inspector
Michael Bowen	Health services inspector
Deborah Hylands	Pharmacist
Jane Poole	Care Quality Commission
Nick Crombie	Ofsted inspector
Charles Clarke	Ofsted inspector
Martin Hughes	Ofsted inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2011, reception staff were welcoming and reception procedures were efficient. Most prisoners felt safe on their first night but first night accommodation was in a poor condition. Violence reduction arrangements were reasonably good and few prisoners reported feeling unsafe. Suicide and self-harm procedures were good. Security arrangements were generally proportionate. Use of force was relatively low and governance well developed. The segregation unit regime was inadequate for long-stay prisoners and reintegration planning was poor. Illicit drug use was low but drug testing and integrated drug treatment system arrangements were stretched. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

All prisoners in the segregation unit should have a care plan to address problem or vulnerable behaviour, and options for their safe integration back into the main prison or transfer should be identified. (HP44)

Not achieved (recommendation repeated, 1.65)

Recommendations

Long escort journeys to the prison should include a toilet break. (1.6)

Not achieved (recommendation repeated, 1.5)

Prisoners arriving during the lunch period should not be left on escort vehicles and should be disembarked into the holding rooms. (1.7)

Achieved

There should be a clear policy on the location of court returns with prisoners advised of their intended location before they leave the establishment to attend court. (1.8)

Achieved

First night cells should be maintained to a high standard and made welcoming for new arrivals. (1.19)

Not achieved (recommendation repeated, 1.15)

Night patrols should always check and sign the risk assessment for new arrivals. (1.20)

Not achieved

The induction presentations should be streamlined and carried out with staff supporting prisoner peer supporters. (1.24)

Partially achieved

All procedures and protocols described in the violence reduction policy should be implemented. (3.12)

Not achieved

The quality of investigations into incidents of suspected or alleged bullying should be improved. (3.13)

Not achieved

The reporting of actual or suspected incidents of bullying should be improved. (3.14)

Not achieved

Attendance at assessment, care in custody and teamwork (ACCT) reviews should include all staff who know the prisoner. (3.27)

Not achieved

The gated cell in the segregation unit should not be used for prisoners in crisis and at risk of self-harm, and an alternative location should be found. (3.28)

Not achieved (recommendation repeated, 1.29)

The clinical substance misuse service should be adequately resourced to provide good quality, consistent and coordinated care to all prisoners requiring treatment, including those who need secondary detoxification. (3.55)

Not achieved (recommendation repeated, 1.72)

The health service providers' skill mix should include dual diagnosis expertise. (3.56)

Not achieved (recommendation repeated, 1.73)

The mandatory drug testing (MDT) programme should be sufficiently resourced to undertake the required level of suspicion testing. (3.61)

Not achieved (recommendation repeated, 1.44)

The prison should develop and implement a drug supply reduction strategy and action plan. (3.62)

Achieved

The items that prisoners can buy in the prison shop should only be restricted on the basis of sound assessments of risk. (7.9)

Not achieved (recommendation repeated, 1.42)

The quality of security information reports submitted should be improved. (7.10)

Achieved

All areas of the segregation unit, including cells and showers, should be clean and in good condition, and conditions in the exercise yard should be improved. (7.30)

Partially achieved

Prisoners should not be routinely strip searched on admission to the segregation unit. (7.31)

Achieved

A range of regime activities should be available for all prisoners located in the segregation unit. (7.32)

Not achieved (recommendation repeated, 1.66)

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2011, the quality of accommodation was variable but very poor for some. Staff-prisoner relationships were mostly reasonable with suitable levels of respect, although there was relatively little active engagement. The diversity strategy was incomplete but most diversity strands were being developed. Black and minority ethnic prisoners said that they were treated less favourably than white prisoners across most areas. Support for foreign national prisoners was good but there was little translated information. Support for older prisoners and those with disabilities was particularly good. Faith provision was appreciated by prisoners. Health services had been disrupted and curtailed by staff shortages. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

All cells should be properly maintained and kept warm and dry, and all toilets should be screened. (HP45)

Not achieved (recommendation repeated, 2.8)

The prison should investigate and address the reasons behind the negative perceptions of black and minority ethnic prisoners. (HP46)

Partially achieved

The prison health partnership board should ensure that there is robust monitoring of the implementation, quality and management of health care provision. (HP47)

Achieved

Recommendations

Wings should be maintained to a high standard, and the roof on G wing should be repaired. (2.7)

Partially achieved

Cells designed for one prisoner should not be used to hold two. (2.8)

Not achieved

The number of telephones on wings should be increased and any breakages repaired. (2.9)

Achieved

Prison clothing should be of a decent standard. (2.14)

Achieved

All prisoners should be able to wear their own clothes. (2.15)

Achieved

Showers should be maintained to a good standard and include full privacy screening. (2.18)

Partially achieved

Links between personal officers and the offender management unit should be developed. (2.29)

No longer relevant

The system for monitoring and tracking applications should be improved. (3.34)

Not achieved

Legal services staff should receive refresher training. (3.40)

No longer relevant

The legal visits booking line should be open longer. (3.41)

Not achieved

The multi-faith room should be improved. (3.47)

Not achieved

The overarching equality policy should include provision for all strands of diversity. (4.9)

Not achieved (recommendation repeated, 2.20)

Monitoring for equality of treatment should be extended to all strands of diversity. (4.10)

Achieved

Prisoner diversity representatives should have a clearer understanding of their role. (4.11)

Achieved

The identification of Gypsy, Romany or Traveller prisoners, and support for all black and minority ethnic prisoners, should be improved, including support groups or forums and support from external community agencies. (4.18)

Partially achieved (recommendation repeated, 2.36)

There should be formal interventions to challenge prisoners who engage in racist behaviour. (4.19)

Not achieved

There should be regular support forums and improved support for foreign national prisoners from all staff. (4.29)

Not achieved (recommendation repeated, 2.37)

All foreign national prisoners should be able to make a free monthly international telephone call, whether or not they receive visits. (4.30)

Achieved

Foreign national prisoners should have access to independent immigration advice. (4.31)

Partially achieved

The prison should explore and take action to address the negative perceptions of some older prisoners and those with disabilities. (4.41)

Partially achieved (recommendation repeated, 2.38)

Accessible showers should be repaired or refurbished and be well maintained. (4.42)

Achieved

The identification, assessment and support for prisoners with learning disabilities/difficulties should be improved. (4.43)

Achieved

Appropriate prisoners from the mainstream wings should be encouraged to use the diversity centre. (4.44)

Not achieved

There should be arrangements in place to enable effective partnership working between the governor, commissioner and provider. (5.6)

Achieved

The stock in emergency bags should be reviewed, and emergency equipment should be easily accessible to prison staff and all staff trained in its use. (5.15)

Achieved

SystemOne should be used to its full potential. (5.16)

Achieved

The full range of clinics should be provided. (5.24)

Achieved

There should be sufficient access to GP services. (5.25)

Achieved

Medicines use reviews and pharmacist-led clinics should be introduced. (5.37)

Not achieved

The in-possession policy should include a list of medication not allowed in possession, there should be a comprehensive system of grading medication to assess overall risk, and risk assessments should be completed for all patients who have their medication in possession. (5.38)

Achieved

The special sick policy and patient group directions should ensure that there is adequate provision for the supply of medicines in all circumstances. (5.39)

Partially achieved

All medication, particularly controlled drugs, should be transported securely with consideration to staff safety, and there should be a robust audit trail for the collection of controlled drugs from the gate. (5.40)

Achieved

The partnership board should take action to reduce the number of moved or cancelled external appointments. (5.49)

Achieved

A range of counselling services should be available for prisoners. (5.53)

Not achieved

Day care services should be available to prisoners with mental health problems who are struggling to cope on the wings. (5.54)

Achieved

The prison should explore and address prisoners' negative perceptions of the food. (8.8)

Not achieved (recommendation repeated, 2.94)

Breakfast packs should be issued on the morning they are to be eaten. Lunch should be served between 12 noon and 1.30pm and dinner between 5pm and 6.30pm. (8.9)

Partially achieved

Prisoners should be able to dine in association. (8.10)

Partially achieved

All prisoners should have weekly access to the shop. (8.15)

Not achieved (recommendation repeated, 2.101)

Prisoners should not be charged an administration fee for catalogue orders. (8.16)

Not achieved (recommendation repeated, 2.102)

Purposeful activity

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

At the last inspection, in 2011, time out of cell was satisfactory for most prisoners and very good for some. There were sufficient good quality activity places to occupy prisoners fully, yet too many were unemployed or not engaged in purposeful activity. Activity allocation processes were poor. Learning and skills were given insufficient priority across the prison, and their overall management was inadequate. The quality and range of education, training and employment activities were mainly satisfactory, as were outcomes for learners. The library was a good resource and adequately used. Recreational PE provision was very good. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

The activity allocation process should be improved and attendance at activity should be monitored. The prison, commissioners and providers of learning and skills should work together to monitor and manage the quality of the provision. (HP48)

Partially achieved

Recommendations

Inappropriate regime slippage should be reduced. (6.6)

Not achieved (recommendation repeated, 3.7)

Exercise should only be curtailed in exceptional circumstances with proper authority, and records of this should be maintained and monitored. (6.7)

Achieved

The quality improvement group meetings should have a clearer focus on quality improvement and a cooperative approach to continuous development. (6.12)

Achieved

There should be better use of lesson observations to identify appropriate training for staff and to improve the quality of teaching and learning. (6.13)

Partially achieved

The self-assessment report should provide a more self-critical and evaluative analysis of performance and be used more effectively to inform quality improvement and strategic planning. (6.14)

Partially achieved

There should be clearer recording and better use of data for regular analysis of the performance of learners and providers and the continuous improvement of provision. (6.15)

Partially achieved

The range of work for vulnerable prisoners should be increased. (6.20)

Achieved

More vocational training should be provided. (6.23)

Achieved

There should be appropriate cover for staff absences in vocational training. (6.24)

Not achieved (recommendation repeated, 3.21)

Prisoner attendance on vocational courses and in education should be improved. (6.28)

Achieved

Individual learning plans should be better recorded and contain clear, well-informed long- and short-term targets. (6.29)

Partially achieved

Classrooms should be improved. (6.30)

Achieved

The outdoor PE facilities should be renovated and improved. (6.40)

Not achieved (recommendation repeated, 3.43)

PE should be rescheduled to avoid disrupting learning and work. (6.41)

Achieved

Accredited PE courses should be made available. (6.42)

Partially achieved

Resettlement

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

At the last inspection, in 2011, the reducing reoffending strategy covered all the pathways but further work was required to address identified prisoner needs. Offender management was insufficiently oriented to risk of reoffending. The use of release on temporary licence was good, but prisoners recategorised to D waited too long for transfer to open conditions. Public protection arrangements were sound. There was effective and early identification of prisoners' resettlement needs, but pathway provision was mixed. The accommodation service was stretched, and finance, benefit and debt provision was poor. Drugs services were well developed but there was no dedicated alcohol programme. General visits provision was inadequate although family visits were frequent and of good quality. There was not enough offending behaviour work. Outcomes for prisoners were reasonably good against this healthy prison test.

Recommendations

The prison should use needs analysis information more effectively to plan and deliver resettlement and offender management services. (9.5)

Not achieved (recommendation repeated, 4.6)

Sentence planning meetings should include contributions from all departments involved in working with the prisoner concerned. (9.19)

Not achieved (recommendation repeated, 4.15)

Quality assurance, supervision and training for offender supervisors should be improved to ensure consistent high standards of assessment, engagement and evaluation of prisoners, and such evaluations should focus on issues of risk. (9.20)

Partially achieved

Pre-release and discharge boards should include attendance of, and contributions from, all departments involved in release planning. (9.21)

Not achieved

The prison should ensure that prisoners needing to transfer to complete sentence planning work and/or who are categorised as D are moved quickly. (9.23)

Achieved

The support for prisoners with housing needs should be extended to meet the level of demand, and should include effective post-release provision. (9.33)

Achieved

The prison should closely monitor and amend prisoner discharge data to establish the extent of need/demand for and the effectiveness of the housing provision. (9.34)

Achieved

Timing of the preparation for work course should be linked to release dates. (9.38)

Achieved

The prison should establish further links with employers to offer prisoners better opportunities for jobs on release. (9.39)

Not achieved

Prisoners due for release should have more opportunities to research available jobs. (9.40)

Partially achieved

Provision for prisoners with debt and financial problems should be increased to reflect the level of demand. (9.45)

Achieved

The drug and alcohol strategy action plans should be updated and informed by a comprehensive population needs analysis. (9.56)

Partially achieved (recommendation repeated, 1.74)

The establishment should introduce an alcohol programme that meets the needs of prisoners who require structured intervention. (9.57)

Achieved

The establishment should provide additional support to prisoners who want to remain abstinent. (9.58)

Achieved

The counselling, assessment, referral, advice and throughcare (CARAT) service should develop service user feedback to inform future service provision. (9.59)

Partially achieved

The availability of visits should meet the needs of prisoners and enable them to receive their allocation of sessions. (9.67)

Not achieved

Visits booking arrangements should be monitored to ensure that visitors are able to make bookings. (9.68)

Not achieved

The level and range of offending behaviour treatment should meet the needs of the prisoner population at Dartmoor. (9.75)

Not achieved

Appendix III: Prison population profile

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

Status	18–20-year-olds	21 and over	%
Sentenced	0	579	88.4
Recall	0	71	10.8
Convicted unsentenced	0	0	0.0
Remand	0	0	0.0
Civil prisoners	0	1	0.2
Detainees	0	0	0.0
other	0	4	0.6
Total	0	655	100

Sentence	18–20-year-olds	21 and over	%
Unsentenced		2	0.3
Less than six months		5	0.8
six months to less than 12 months		16	2.4
12 months to less than 2 years		57	8.7
2 years to less than 4 years		175	26.8
4 years to less than 10 years		296	45.2
10 years and over (not life)		44	6.7
ISPP (indeterminate sentence for public protection)		0	0
Life		60	9.2
Total		655	100

Age	Number of prisoners	%
Please state minimum age here:		
Under 21 years	0	0
21 years to 29 years	176	26.9
30 years to 39 years	198	30.2
40 years to 49 years	132	20.2
50 years to 59 years	76	11.6
60 years to 69 years	43	6.6
70 plus years	30	4.6
Please state maximum age here: 82	0	0
Total	655	100

Nationality	18–20-year-olds	21 and over	%
British	0	636	97.1
Foreign nationals	0	18	2.7
Not Stated	0	1	0.2
Total		655	100

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced			
Uncategorised sentenced			
Category A			
Category B			
Category C	0	621	94.8
Category D	0	34	5.2
Other			
Total		655	100

Ethnicity	18–20-year-olds	21 and over	%
White	0		
British/Eng./Welsh/scot/N. Irish	0	595	90.8
Irish	0	4	0.6
Gypsy/Irish Traveller	0	4	0.6
Other white	0	9	1.4
	0		
Mixed	0		
White and black Caribbean	0	7	1.1
White and black African	0	0	0.0
White and Asian	0	0	0.0
Other mixed	0	3	0.5
	0		
Asian or Asian British	0		
Indian	0	2	0.3
Pakistani	0	3	0.5
Bangladeshi	0	0	0.0
Chinese	0	0	0.0
Other Asian	0	3	0.5
	0		
Black or black British	0		
Caribbean	0	7	1.1
African	0	6	0.9
Other black	0	9	1.4
	0		
Other ethnic group	0		
Arab	0	1	0.2
Other ethnic group	0	2	0.3
	0		
Not stated	0	0	0.0
Total			100

Religion	18–20-year-olds	21 and over	%
Baptist	0	0	0.0
Church of England	0	159	24.3
Roman Catholic	0	101	15.4
Other Christian denominations	0	89	13.6
Muslim	0	24	3.7
Sikh	0	1	0.2
Hindu	0	2	0.3
Buddhist	0	24	3.7
Jewish	0	3	0.5
Other	0	12	1.8

No religion	0	240	36.6
Total			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	0.0%	75	11.5
1 month to 3 months	0	0.0%	116	17.7
3 months to six months	0	0.0%	133	20.3
six months to 1 year	0	0.0%	154	23.5
1 year to 2 years	0	0.0%	144	22.0
2 years to 4 years	0	0.0%	32	4.9
4 years or more	0	0.0%	1	0.2
Total			655	100

Appendix IV: 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 2 December 2013 the prisoner population at HMP Dartmoor was 652. Using the method described above, questionnaires were distributed to a sample of 201 prisoners.

We received a total of 169 completed questionnaires, a response rate of 84%. This included one questionnaire completed via interview. Ten respondents refused to complete a questionnaire, 17 questionnaires were not returned and five were returned blank.

Wing/unit	Number of completed survey returns
A	34
B	31
D	38
E	15
F	16
G	33
Segregation unit	2

Presentation of survey results and analyses

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

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 have been weighted to enable valid statistical comparison between establishments.

The following comparative analyses are presented:

- The current survey responses from HMP Dartmoor 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 local prisons since April 2008.
- The current survey responses from HMP Dartmoor in 2013 compared with the responses of prisoners surveyed at HMP Dartmoor in 2011.
- 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 2013 survey between those who are aged 50 and over and those under 50.
- A comparison within the 2013 survey between responses of prisoners who considered themselves to be a veteran and those who did not.
- A comparison within the 2013 survey between the vulnerable prisoner wings (A and B) and the main wings (E, F and G).

Survey summary

Section I: About You

Q1.2	How old are you?			
	<i>Under 21</i>			2 (1%)
	<i>21 - 29</i>			41 (24%)
	<i>30 - 39</i>			50 (30%)
	<i>40 - 49</i>			36 (21%)
	<i>50 - 59</i>			18 (11%)
	<i>60 - 69</i>			17 (10%)
	<i>70 and over</i>			5 (3%)
Q1.3	Are you sentenced?			
	<i>Yes</i>			152 (92%)
	<i>Yes - on recall</i>			14 (8%)
	<i>No - awaiting trial</i>			0 (0%)
	<i>No - awaiting sentence</i>			0 (0%)
	<i>No - awaiting deportation</i>			0 (0%)
Q1.4	How long is your sentence?			
	<i>Not sentenced</i>			0 (0%)
	<i>Less than 6 months</i>			3 (2%)
	<i>6 months to less than 1 year</i>			7 (4%)
	<i>1 year to less than 2 years</i>			14 (8%)
	<i>2 years to less than 4 years</i>			50 (30%)
	<i>4 years to less than 10 years</i>			71 (43%)
	<i>10 years or more</i>			7 (4%)
	<i>IPP (indeterminate sentence for public protection)</i>			8 (5%)
	<i>Life</i>			6 (4%)
Q1.5	Are you a foreign national? (i.e. do not have UK citizenship.)			
	<i>Yes</i>			6 (4%)
	<i>No</i>			163 (96%)
Q1.6	Do you understand spoken English?			
	<i>Yes</i>			167 (99%)
	<i>No</i>			2 (1%)
Q1.7	Do you understand written English?			
	<i>Yes</i>			165 (98%)
	<i>No</i>			3 (2%)
Q1.8	What is your ethnic origin?			
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	142 (85%)	<i>Asian or Asian British - Chinese</i>	0 (0%)
	<i>White - Irish</i>	6 (4%)	<i>Asian or Asian British - other</i>	1 (1%)
	<i>White - other</i>	7 (4%)	<i>Mixed race - white and black Caribbean</i>	1 (1%)
	<i>Black or black British - Caribbean</i>	2 (1%)	<i>Mixed race - white and black African</i>	2 (1%)
	<i>Black or black British - African</i>	2 (1%)	<i>Mixed race - white and Asian</i>	0 (0%)
	<i>Black or black British - other</i>	1 (1%)	<i>Mixed race - other</i>	0 (0%)
	<i>Asian or Asian British - Indian</i>	2 (1%)	<i>Arab</i>	0 (0%)

<i>Asian or Asian British - Pakistani</i>	0 (0%)	<i>Other ethnic group</i>	1 (1%)
<i>Asian or Asian British - Bangladeshi</i>	0 (0%)		

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

Yes	12 (7%)
No	155 (93%)

Q1.10 What is your religion?

<i>None</i>	60 (36%)	<i>Hindu</i>	0 (0%)
<i>Church of England</i>	56 (34%)	<i>Jewish</i>	1 (1%)
<i>Catholic</i>	27 (16%)	<i>Muslim</i>	5 (3%)
<i>Protestant</i>	2 (1%)	<i>Sikh</i>	0 (0%)
<i>Other Christian denomination</i>	7 (4%)	<i>Other</i>	2 (1%)
<i>Buddhist</i>	5 (3%)		

Q1.11 How would you describe your sexual orientation?

<i>Heterosexual/ Straight</i>	159 (94%)
<i>Homosexual/Gay</i>	4 (2%)
<i>Bisexual</i>	6 (4%)

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	39 (23%)
No	127 (77%)

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

Yes	25 (15%)
No	143 (85%)

Q1.14 Is this your first time in prison?

Yes	73 (43%)
No	96 (57%)

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

Yes	88 (52%)
No	81 (48%)

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>	59 (35%)
<i>2 hours or longer</i>	109 (64%)
<i>Don't remember</i>	1 (1%)

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>	59 (35%)
Yes	86 (51%)
No	22 (13%)
<i>Don't remember</i>	0 (0%)

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

<i>My journey was less than two hours</i>	59 (35%)
Yes	4 (2%)
No	104 (62%)
<i>Don't remember</i>	1 (1%)

Q2.4	On your most recent journey here, was the van clean?		
	Yes		123 (74%)
	No		35 (21%)
	Don't remember		9 (5%)
Q2.5	On your most recent journey here, did you feel safe?		
	Yes		132 (78%)
	No		35 (21%)
	Don't remember		2 (1%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?		
	Very well		45 (27%)
	Well		72 (43%)
	Neither		40 (24%)
	Badly		4 (2%)
	Very badly		3 (2%)
	Don't remember		3 (2%)
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		80 (48%)
	Yes, I received written information		51 (30%)
	No, I was not told anything		41 (24%)
	Don't remember		1 (1%)
Q2.8	When you first arrived here did your property arrive at the same time as you?		
	Yes		146 (86%)
	No		17 (10%)
	Don't remember		6 (4%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?			
	Less than 2 hours		119 (70%)	
	2 hours or longer		41 (24%)	
	Don't remember		9 (5%)	
Q3.2	When you were searched, was this carried out in a respectful way?			
	Yes		142 (85%)	
	No		20 (12%)	
	Don't remember		5 (3%)	
Q3.3	Overall, how were you treated in reception?			
	Very well		49 (29%)	
	Well		78 (46%)	
	Neither		27 (16%)	
	Badly		10 (6%)	
	Very badly		3 (2%)	
	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	25 (15%)	Physical health	26 (15%)
	Housing problems	31 (18%)	Mental health	26 (15%)
	Contacting employers	6 (4%)	Needing protection from other prisoners	16 (10%)
	Contacting family	38 (23%)	Getting phone numbers	29 (17%)

<i>Childcare</i>	5 (3%)	<i>Other</i>	6 (4%)
<i>Money worries</i>	34 (20%)	<i>Did not have any problems</i>	66 (39%)
<i>Feeling depressed or suicidal</i>	29 (17%)		

Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?		
	<i>Yes</i>		41 (25%)
	<i>No</i>		57 (35%)
	<i>Did not have any problems</i>		66 (40%)
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)		
	<i>Tobacco</i>		129 (76%)
	<i>A shower</i>		38 (22%)
	<i>A free telephone call</i>		73 (43%)
	<i>Something to eat</i>		127 (75%)
	<i>PIN phone credit</i>		89 (53%)
	<i>Toiletries/ basic items</i>		97 (57%)
	<i>Did not receive anything</i>		6 (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>		87 (52%)
	<i>Someone from health services</i>		121 (72%)
	<i>A Listener/Samaritans</i>		53 (32%)
	<i>Prison shop/ canteen</i>		39 (23%)
	<i>Did not have access to any of these</i>		32 (19%)
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>		83 (51%)
	<i>What support was available for people feeling depressed or suicidal</i>		74 (46%)
	<i>How to make routine requests (applications)</i>		72 (44%)
	<i>Your entitlement to visits</i>		62 (38%)
	<i>Health services</i>		92 (57%)
	<i>Chaplaincy</i>		80 (49%)
	<i>Not offered any information</i>		38 (23%)
Q3.9	Did you feel safe on your first night here?		
	<i>Yes</i>		132 (80%)
	<i>No</i>		29 (17%)
	<i>Don't remember</i>		5 (3%)
Q3.10	How soon after you arrived here did you go on an induction course?		
	<i>Have not been on an induction course</i>		31 (19%)
	<i>Within the first week</i>		105 (63%)
	<i>More than a week</i>		20 (12%)
	<i>Don't remember</i>		11 (7%)
Q3.11	Did the induction course cover everything you needed to know about the prison?		
	<i>Have not been on an induction course</i>		31 (19%)
	<i>Yes</i>		80 (48%)
	<i>No</i>		42 (25%)
	<i>Don't remember</i>		12 (7%)

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

<i>Did not receive an assessment</i>	33 (20%)
<i>Within the first week</i>	75 (46%)
<i>More than a week</i>	45 (27%)
<i>Don't remember</i>	11 (7%)

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>	30 (18%)	48 (29%)	23 (14%)	29 (18%)	13 (8%)	22 (13%)
<i>Attend legal visits?</i>	24 (16%)	53 (35%)	19 (13%)	11 (7%)	6 (4%)	39 (26%)
<i>Get bail information?</i>	7 (5%)	16 (11%)	18 (13%)	16 (11%)	12 (9%)	71 (51%)

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>	26 (16%)
<i>Yes</i>	62 (37%)
<i>No</i>	78 (47%)

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

<i>Yes</i>	66 (40%)
<i>No</i>	11 (7%)
<i>Don't know</i>	87 (53%)

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>	118 (70%)	49 (29%)	1 (1%)
<i>Are you normally able to have a shower every day?</i>	154 (92%)	12 (7%)	1 (1%)
<i>Do you normally receive clean sheets every week?</i>	142 (86%)	22 (13%)	1 (1%)
<i>Do you normally get cell cleaning materials every week?</i>	129 (77%)	38 (23%)	0 (0%)
<i>Is your cell call bell normally answered within five minutes?</i>	65 (40%)	64 (40%)	32 (20%)
<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	115 (69%)	51 (31%)	0 (0%)
<i>If you need to, can you normally get your stored property?</i>	60 (36%)	65 (39%)	40 (24%)

Q4.5 What is the food like here?

<i>Very good</i>	5 (3%)
<i>Good</i>	29 (17%)
<i>Neither</i>	36 (22%)
<i>Bad</i>	53 (32%)
<i>Very bad</i>	43 (26%)

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>	3 (2%)
<i>Yes</i>	86 (51%)
<i>No</i>	78 (47%)

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

<i>Yes</i>	102 (61%)
<i>No</i>	8 (5%)
<i>Don't know</i>	57 (34%)

Q4.8	Are your religious beliefs respected?	
	Yes	77 (46%)
	No	16 (10%)
	Don't know/ N/A	74 (44%)
Q4.9	Are you able to speak to a Chaplain of your faith in private if you want to?	
	Yes	92 (55%)
	No	7 (4%)
	Don't know/ N/A	69 (41%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	<i>I don't want to attend</i>	54 (32%)
	Very easy	36 (21%)
	Easy	38 (23%)
	Neither	8 (5%)
	Difficult	2 (1%)
	Very difficult	5 (3%)
	Don't know	25 (15%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?	
	Yes	140 (85%)
	No	18 (11%)
	Don't know	7 (4%)
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> <i>No</i>
	Are applications dealt with fairly?	11 (7%) 98 (63%) 46 (30%)
	Are applications dealt with quickly (within seven days)?	11 (7%) 81 (55%) 56 (38%)
Q5.3	Is it easy to make a complaint?	
	Yes	97 (59%)
	No	28 (17%)
	Don't know	40 (24%)
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> <i>No</i>
	Are complaints dealt with fairly?	71 (44%) 36 (22%) 54 (34%)
	Are complaints dealt with quickly (within seven days)?	71 (47%) 32 (21%) 48 (32%)
Q5.5	Have you ever been prevented from making a complaint when you wanted to?	
	Yes	29 (18%)
	No	131 (82%)
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>	31 (19%)
	Very easy	28 (17%)
	Easy	48 (30%)
	Neither	38 (24%)
	Difficult	14 (9%)
	Very difficult	2 (1%)

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>	3 (2%)
Yes	78 (47%)
No	75 (45%)
<i>Don't know</i>	9 (5%)

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>	3 (2%)
Yes	63 (39%)
No	89 (55%)
<i>Don't know</i>	8 (5%)

Q6.3 In the last six months have any members of staff physically restrained you (C&R)?

Yes	7 (4%)
No	157 (96%)

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>	139 (85%)
<i>Very well</i>	5 (3%)
<i>Well</i>	4 (2%)
<i>Neither</i>	9 (6%)
<i>Badly</i>	3 (2%)
<i>Very badly</i>	3 (2%)

Section 7: Relationships with staff

Q7.1 Do most staff treat you with respect?

Yes	127 (78%)
No	35 (22%)

Q7.2 Is there a member of staff you can turn to for help if you have a problem?

Yes	124 (76%)
No	40 (24%)

Q7.3 Has a member of staff checked on you personally in the last week to see how you are getting on?

Yes	48 (29%)
No	118 (71%)

Q7.4 How often do staff normally speak to you during association?

<i>Do not go on association</i>	6 (4%)
<i>Never</i>	31 (19%)
<i>Rarely</i>	44 (26%)
<i>Some of the time</i>	41 (25%)
<i>Most of the time</i>	29 (17%)
<i>All of the time</i>	16 (10%)

Q7.5 When did you first meet your personal (named) officer?

<i>I have not met him/her</i>	65 (39%)
<i>In the first week</i>	43 (26%)
<i>More than a week</i>	48 (29%)

Don't remember 11 (7%)

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

Do not have a personal officer/ I have not met him/ her 65 (41%)
Very helpful 29 (18%)
Helpful 24 (15%)
Neither 18 (11%)
Not very helpful 14 (9%)
Not at all helpful 9 (6%)

Section 8: Safety

Q8.1 Have you ever felt unsafe here?

Yes 71 (42%)
No 97 (58%)

Q8.2 Do you feel unsafe now?

Yes 26 (16%)
No 135 (84%)

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

<i>Never felt unsafe</i>	97 (59%)	<i>At meal times</i>	11 (7%)
<i>Everywhere</i>	21 (13%)	<i>At health services</i>	25 (15%)
<i>Segregation unit</i>	4 (2%)	<i>Visits area</i>	10 (6%)
<i>Association areas</i>	16 (10%)	<i>In wing showers</i>	18 (11%)
<i>Reception area</i>	7 (4%)	<i>In gym showers</i>	7 (4%)
<i>At the gym</i>	7 (4%)	<i>In corridors/stairwells</i>	21 (13%)
<i>In an exercise yard</i>	12 (7%)	<i>On your landing/wing</i>	19 (12%)
<i>At work</i>	15 (9%)	<i>In your cell</i>	12 (7%)
<i>During movement</i>	27 (16%)	<i>At religious services</i>	3 (2%)
<i>At education</i>	11 (7%)		

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

Yes 66 (40%)
No 98 (60%)

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

<i>Insulting remarks (about you or your family or friends)</i>	32 (20%)
<i>Physical abuse (being hit, kicked or assaulted)</i>	14 (9%)
<i>Sexual abuse</i>	2 (1%)
<i>Feeling threatened or intimidated</i>	42 (26%)
<i>Having your canteen/property taken</i>	19 (12%)
<i>Medication</i>	10 (6%)
<i>Debt</i>	4 (2%)
<i>Drugs</i>	5 (3%)
<i>Your race or ethnic origin</i>	7 (4%)
<i>Your religion/religious beliefs</i>	3 (2%)
<i>Your nationality</i>	4 (2%)
<i>You are from a different part of the country than others</i>	9 (5%)
<i>You are from a traveller community</i>	1 (1%)
<i>Your sexual orientation</i>	3 (2%)
<i>Your age</i>	11 (7%)
<i>You have a disability</i>	7 (4%)
<i>You were new here</i>	13 (8%)
<i>Your offence/ crime</i>	13 (8%)
<i>Gang related issues</i>	12 (7%)

Q8.6	Have you been victimised by staff here?	
	Yes	45 (27%)
	No	120 (73%)
Q8.7	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)	
	<i>Insulting remarks (about you or your family or friends)</i>	16 (10%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	7 (4%)
	<i>Sexual abuse</i>	1 (1%)
	<i>Feeling threatened or intimidated</i>	23 (14%)
	<i>Medication</i>	3 (2%)
	<i>Debt</i>	0 (0%)
	<i>Drugs</i>	2 (1%)
	<i>Your race or ethnic origin</i>	3 (2%)
	<i>Your religion/religious beliefs</i>	4 (2%)
	<i>Your nationality</i>	3 (2%)
	<i>You are from a different part of the country than others</i>	7 (4%)
	<i>You are from a traveller community</i>	0 (0%)
	<i>Your sexual orientation</i>	3 (2%)
	<i>Your age</i>	8 (5%)
	<i>You have a disability</i>	7 (4%)
	<i>You were new here</i>	6 (4%)
	<i>Your offence/ crime</i>	10 (6%)
	<i>Gang related issues</i>	3 (2%)
Q8.8	If you have been victimised by prisoners or staff, did you report it?	
	<i>Not been victimised</i>	89 (59%)
	Yes	24 (16%)
	No	38 (25%)

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	18 (11%)	9 (5%)	40 (24%)	23 (14%)	58 (35%)	17 (10%)
	The nurse	18 (11%)	19 (12%)	65 (40%)	24 (15%)	28 (17%)	7 (4%)
	The dentist	25 (16%)	5 (3%)	27 (17%)	16 (10%)	43 (27%)	43 (27%)
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	20 (12%)	11 (7%)	43 (27%)	35 (22%)	36 (22%)	16 (10%)
	The nurse	16 (10%)	24 (15%)	53 (33%)	30 (19%)	26 (16%)	12 (7%)
	The dentist	38 (25%)	15 (10%)	44 (29%)	23 (15%)	18 (12%)	16 (10%)
Q9.3	What do you think of the overall quality of the health services here?						
	<i>Not been</i>					11 (7%)	
	<i>Very good</i>					9 (6%)	
	<i>Good</i>					39 (24%)	
	<i>Neither</i>					41 (25%)	
	<i>Bad</i>					39 (24%)	
	<i>Very bad</i>					23 (14%)	
Q9.4	Are you currently taking medication?						
	Yes					87 (52%)	
	No					79 (48%)	

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>	79 (48%)
	<i>Yes, all my meds</i>	57 (35%)
	<i>Yes, some of my meds</i>	18 (11%)
	<i>No</i>	11 (7%)
Q9.6	Do you have any emotional or mental health problems?	
	<i>Yes</i>	55 (34%)
	<i>No</i>	108 (66%)
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>	108 (67%)
	<i>Yes</i>	19 (12%)
	<i>No</i>	35 (22%)

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?	
	<i>Yes</i>	41 (24%)
	<i>No</i>	127 (76%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	<i>Yes</i>	29 (18%)
	<i>No</i>	136 (82%)
Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	<i>Very easy</i>	38 (23%)
	<i>Easy</i>	25 (15%)
	<i>Neither</i>	15 (9%)
	<i>Difficult</i>	8 (5%)
	<i>Very difficult</i>	3 (2%)
	<i>Don't know</i>	78 (47%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	<i>Very easy</i>	27 (16%)
	<i>Easy</i>	23 (14%)
	<i>Neither</i>	12 (7%)
	<i>Difficult</i>	16 (10%)
	<i>Very difficult</i>	7 (4%)
	<i>Don't know</i>	82 (49%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	<i>Yes</i>	12 (7%)
	<i>No</i>	156 (93%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	<i>Yes</i>	16 (10%)
	<i>No</i>	151 (90%)
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>	120 (74%)
	<i>Yes</i>	33 (20%)
	<i>No</i>	10 (6%)

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>	136 (82%)
	Yes	20 (12%)
	No	9 (5%)

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>	116 (75%)
	Yes	29 (19%)
	No	10 (6%)

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 (6%)	18 (11%)	58 (35%)	21 (13%)	45 (27%)	14 (8%)
	Vocational or skills training	21 (14%)	12 (8%)	51 (33%)	27 (18%)	30 (20%)	12 (8%)
	Education (including basic skills)	18 (12%)	19 (13%)	75 (49%)	20 (13%)	14 (9%)	6 (4%)
	Offending behaviour programmes	35 (23%)	6 (4%)	31 (21%)	20 (13%)	35 (23%)	23 (15%)

Q11.2	Are you currently involved in the following? (Please tick all that apply to you.)	
	<i>Not involved in any of these</i>	37 (22%)
	Prison job	98 (59%)
	Vocational or skills training	28 (17%)
	Education (including basic skills)	32 (19%)
	Offending behaviour programmes	27 (16%)

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	26 (17%)	52 (35%)	52 (35%)	19 (13%)
	Vocational or skills training	35 (29%)	45 (37%)	29 (24%)	12 (10%)
	Education (including basic skills)	27 (21%)	54 (43%)	35 (28%)	11 (9%)
	Offending behaviour programmes	32 (27%)	32 (27%)	38 (32%)	18 (15%)

Q11.4	How often do you usually go to the library?	
	<i>Don't want to go</i>	23 (14%)
	<i>Never</i>	16 (10%)
	<i>Less than once a week</i>	45 (27%)
	<i>About once a week</i>	66 (40%)
	<i>More than once a week</i>	15 (9%)

Q11.5	Does the library have a wide enough range of materials to meet your needs?	
	<i>Don't use it</i>	34 (21%)
	Yes	86 (52%)
	No	45 (27%)

Q11.6	How many times do you usually go to the gym each week?	
	<i>Don't want to go</i>	48 (29%)
	<i>0</i>	33 (20%)
	<i>1 to 2</i>	22 (13%)
	<i>3 to 5</i>	50 (30%)
	<i>More than 5</i>	15 (9%)

Q11.7	How many times do you usually go outside for exercise each week?	
	<i>Don't want to go</i>	24 (14%)
	<i>0</i>	33 (20%)
	<i>1 to 2</i>	59 (35%)
	<i>3 to 5</i>	26 (16%)
	<i>More than 5</i>	25 (15%)
Q11.8	How many times do you usually have association each week?	
	<i>Don't want to go</i>	5 (3%)
	<i>0</i>	11 (7%)
	<i>1 to 2</i>	46 (28%)
	<i>3 to 5</i>	26 (16%)
	<i>More than 5</i>	79 (47%)
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>	16 (10%)
	<i>2 to less than 4 hours</i>	20 (12%)
	<i>4 to less than 6 hours</i>	22 (13%)
	<i>6 to less than 8 hours</i>	38 (23%)
	<i>8 to less than 10 hours</i>	43 (26%)
	<i>10 hours or more</i>	27 (16%)
	<i>Don't know</i>	2 (1%)

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>	56 (34%)
	<i>No</i>	107 (66%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	<i>Yes</i>	69 (41%)
	<i>No</i>	98 (59%)
Q12.3	Have you had any problems getting access to the telephones?	
	<i>Yes</i>	38 (23%)
	<i>No</i>	125 (77%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	38 (23%)
	<i>Very easy</i>	11 (7%)
	<i>Easy</i>	21 (13%)
	<i>Neither</i>	5 (3%)
	<i>Difficult</i>	33 (20%)
	<i>Very difficult</i>	59 (35%)
	<i>Don't know</i>	0 (0%)

Section 13: Preparation for release

Q13.1	Do you have a named offender manager (home probation officer) in the probation service?	
	<i>Not sentenced</i>	0 (0%)
	<i>Yes</i>	148 (88%)
	<i>No</i>	20 (12%)

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>	20 (12%)
	<i>No contact</i>	43 (26%)
	<i>Letter</i>	59 (36%)
	<i>Phone</i>	42 (26%)
	<i>Visit</i>	45 (27%)
Q13.3	Do you have a named offender supervisor in this prison?	
	<i>Yes</i>	139 (85%)
	<i>No</i>	24 (15%)
Q13.4	Do you have a sentence plan?	
	<i>Not sentenced</i>	0 (0%)
	<i>Yes</i>	95 (58%)
	<i>No</i>	70 (42%)
Q13.5	How involved were you in the development of your sentence plan?	
	<i>Do not have a sentence plan/ not sentenced</i>	70 (43%)
	<i>Very involved</i>	27 (16%)
	<i>Involved</i>	20 (12%)
	<i>Neither</i>	15 (9%)
	<i>Not very involved</i>	16 (10%)
	<i>Not at all involved</i>	16 (10%)
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>	70 (43%)
	<i>Nobody</i>	39 (24%)
	<i>Offender supervisor</i>	35 (21%)
	<i>Offender manager</i>	27 (16%)
	<i>Named/ personal officer</i>	13 (8%)
	<i>Staff from other departments</i>	16 (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>	70 (44%)
	<i>Yes</i>	53 (33%)
	<i>No</i>	23 (14%)
	<i>Don't know</i>	14 (9%)
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>	70 (43%)
	<i>Yes</i>	16 (10%)
	<i>No</i>	59 (37%)
	<i>Don't know</i>	16 (10%)
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>	70 (43%)
	<i>Yes</i>	21 (13%)
	<i>No</i>	41 (25%)
	<i>Don't know</i>	31 (19%)
Q13.10	Do you have a needs based custody plan?	
	<i>Yes</i>	5 (3%)
	<i>No</i>	75 (46%)
	<i>Don't know</i>	83 (51%)

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

Yes	31 (19%)
No	133 (81%)

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	34 (22%)	36 (24%)	82 (54%)
Accommodation	37 (25%)	50 (33%)	64 (42%)
Benefits	27 (18%)	58 (38%)	67 (44%)
Finances	40 (27%)	32 (22%)	75 (51%)
Education	47 (32%)	43 (29%)	58 (39%)
Drugs and alcohol	58 (39%)	52 (35%)	39 (26%)

Q13.13 Have you done anything, or has anything happened to you here, that you think will make you less likely to offend in the future?

<i>Not sentenced</i>	0 (0%)
Yes	79 (50%)
No	79 (50%)

Main comparator and comparator to last time



Prisoner survey responses HMP Dartmoor 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 Dartmoor 2013	Category C training prisons comparator	HMP Dartmoor 2013	HMP Dartmoor 2011
	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		169	6450	169	178
SECTION 1: General information					
1.2	Are you under 21 years of age?	1%	2%	1%	0%
1.3	Are you sentenced?	100%	100%	100%	99%
1.3	Are you on recall?	8%	10%	8%	13%
1.4	Is your sentence less than 12 months?	6%	6%	6%	12%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	5%	10%	5%	5%
1.5	Are you a foreign national?	4%	10%	4%	8%
1.6	Do you understand spoken English?	99%	99%	99%	
1.7	Do you understand written English?	98%	98%	98%	
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	7%	27%	7%	13%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	7%	4%	7%	6%
1.1	Are you Muslim?	3%	13%	3%	6%
1.11	Are you homosexual/gay or bisexual?	6%	3%	6%	4%
1.12	Do you consider yourself to have a disability?	24%	18%	24%	18%
1.13	Are you a veteran (ex-armed services)?	15%	6%	15%	
1.14	Is this your first time in prison?	43%	37%	43%	30%
1.15	Do you have any children under the age of 18?	52%	52%	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?	65%	46%	65%	59%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	80%	72%	80%	
2.3	Were you offered a toilet break?	4%	9%	4%	
2.4	Was the van clean?	74%	66%	74%	
2.5	Did you feel safe?	78%	81%	78%	
2.6	Were you treated well/very well by the escort staff?	70%	71%	70%	68%
2.7	Before you arrived here were you told that you were coming here?	48%	61%	48%	
2.7	Before you arrived here did you receive any written information about coming here?	30%	17%	30%	
2.8	When you first arrived here did your property arrive at the same time as you?	86%	89%	86%	89%

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?	70%	51%	70%	
3.2	When you were searched in reception, was this carried out in a respectful way?	85%	84%	85%	85%
3.3	Were you treated well/very well in reception?	75%	73%	75%	73%
	When you first arrived:				
3.4	Did you have any problems?	61%	61%	61%	66%
3.4	Did you have any problems with loss of property?	15%	16%	15%	13%
3.4	Did you have any housing problems?	19%	15%	19%	17%
3.4	Did you have any problems contacting employers?	4%	3%	4%	3%
3.4	Did you have any problems contacting family?	23%	20%	23%	21%
3.4	Did you have any problems ensuring dependants were being looked after?	3%	2%	3%	3%
3.4	Did you have any money worries?	20%	14%	20%	15%
3.4	Did you have any problems with feeling depressed or suicidal?	17%	13%	17%	19%
3.4	Did you have any physical health problems?	15%	11%	15%	
3.4	Did you have any mental health problems?	15%	12%	15%	
3.4	Did you have any problems with needing protection from other prisoners?	10%	4%	10%	10%
3.4	Did you have problems accessing phone numbers?	17%	18%	17%	18%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	42%	37%	42%	
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	76%	75%	76%	91%
3.6	A shower?	23%	30%	23%	28%
3.6	A free telephone call?	43%	42%	43%	52%
3.6	Something to eat?	75%	62%	75%	88%
3.6	PIN phone credit?	53%	50%	53%	
3.6	Toiletries/ basic items?	57%	43%	57%	
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?	52%	52%	52%	
3.7	Someone from health services?	72%	70%	72%	
3.7	A Listener/Samaritans?	32%	33%	32%	
3.7	Prison shop/ canteen?	23%	21%	23%	13%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	51%	51%	51%	59%
3.8	Support was available for people feeling depressed or suicidal?	46%	42%	46%	50%
3.8	How to make routine requests?	45%	46%	45%	50%
3.8	Your entitlement to visits?	38%	45%	38%	50%

Key to tables

Main comparator and comparator to last time

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3.8	Health services?	57%	54%	57%	54%
3.8	The chaplaincy?	49%	49%	49%	52%
3.9	Did you feel safe on your first night here?	80%	83%	80%	85%
3.10	Have you been on an induction course?	81%	91%	81%	93%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	60%	63%	60%	64%
3.12	Did you receive an education (skills for life) assessment?	80%	83%	80%	
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?	47%	48%	47%	47%
4.1	Attend legal visits?	51%	52%	51%	47%
4.1	Get bail information?	17%	15%	17%	20%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	37%	41%	37%	42%
4.3	Can you get legal books in the library?	40%	43%	40%	
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	70%	68%	70%	53%
4.4	Are you normally able to have a shower every day?	92%	93%	92%	90%
4.4	Do you normally receive clean sheets every week?	86%	79%	86%	86%
4.4	Do you normally get cell cleaning materials every week?	77%	72%	77%	81%
4.4	Is your cell call bell normally answered within five minutes?	40%	37%	40%	42%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	69%	69%	69%	69%
4.4	Can you normally get your stored property, if you need to?	36%	26%	36%	47%
4.5	Is the food in this prison good/very good?	20%	26%	20%	33%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	52%	45%	52%	51%
4.7	Are you able to speak to a Listener at any time, if you want to?	61%	57%	61%	64%
4.8	Are your religious beliefs are respected?	46%	53%	46%	50%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	55%	59%	55%	57%
4.10	Is it easy/very easy to attend religious services?	44%	50%	44%	
SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	85%	83%	85%	
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	68%	61%	68%	75%
5.2	Do you feel applications are dealt with quickly (within seven days)?	59%	48%	59%	55%
5.3	Is it easy to make a complaint?	59%	61%	59%	
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	40%	34%	40%	40%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	40%	36%	40%	42%
5.5	Have you ever been prevented from making a complaint when you wanted to?	18%	17%	18%	
5.6	Is it easy/very easy to see the Independent Monitoring Board?	47%	28%	47%	35%

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					
SECTION 6: Incentives and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	47%	54%	47%	60%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	39%	47%	39%	48%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	4%	5%	4%	5%
6.4	In the last six months, if you have spent a night in the segregation/ care and separation unit, were you treated very well/ well by staff?	38%	40%	38%	
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	78%	77%	78%	76%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	76%	75%	76%	72%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	29%	29%	29%	
7.4	Do staff normally speak to you most of the time/all of the time during association?	27%	20%	27%	15%
7.5	Do you have a personal officer?	61%	73%	61%	69%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	57%	64%	57%	61%
SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	42%	32%	42%	37%
8.2	Do you feel unsafe now?	16%	13%	16%	15%
8.4	Have you been victimised by other prisoners here?	40%	23%	40%	18%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	20%	10%	20%	11%
8.5	Hit, kicked or assaulted you?	9%	6%	9%	7%
8.5	Sexually abused you?	1%	1%	1%	2%
8.5	Threatened or intimidated you?	26%	13%	26%	
8.5	Taken your canteen/property?	12%	4%	12%	6%
8.5	Victimised you because of medication?	6%	4%	6%	
8.5	Victimised you because of debt?	2%	3%	2%	
8.5	Victimised you because of drugs?	3%	3%	3%	3%
8.5	Victimised you because of your race or ethnic origin?	4%	3%	4%	4%
8.5	Victimised you because of your religion/religious beliefs?	2%	2%	2%	2%
8.5	Victimised you because of your nationality?	2%	2%	2%	
8.5	Victimised you because you were from a different part of the country?	6%	4%	6%	7%
8.5	Victimised you because you are from a Traveller community?	1%	1%	1%	
8.5	Victimised you because of your sexual orientation?	2%	1%	2%	0%
8.5	Victimised you because of your age?	7%	2%	7%	3%
8.5	Victimised you because you have a disability?	4%	2%	4%	1%
8.5	Victimised you because you were new here?	8%	4%	8%	5%
8.5	Victimised you because of your offence/crime?	8%	4%	8%	5%
8.5	Victimised you because of gang related issues?	7%	3%	7%	2%

Main comparator and comparator to last time

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	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	27%	28%	27%	20%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	10%	10%	10%	11%
8.7	Hit, kicked or assaulted you?	4%	3%	4%	5%
8.7	Sexually abused you?	1%	1%	1%	0%
8.7	Threatened or intimidated you?	14%	12%	14%	
8.7	Victimised you because of medication?	2%	4%	2%	
8.7	Victimised you because of debt?	0%	2%	0%	
8.7	Victimised you because of drugs?	1%	3%	1%	2%
8.7	Victimised you because of your race or ethnic origin?	2%	5%	2%	5%
8.7	Victimised you because of your religion/religious beliefs?	2%	3%	2%	2%
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?	4%	3%	4%	5%
8.7	Victimised you because you are from a Traveller community?	0%	1%	0%	
8.7	Victimised you because of your sexual orientation?	2%	1%	2%	0%
8.7	Victimised you because of your age?	5%	2%	5%	1%
8.7	Victimised you because you have a disability?	4%	2%	4%	1%
8.7	Victimised you because you were new here?	4%	4%	4%	4%
8.7	Victimised you because of your offence/crime?	6%	4%	6%	7%
8.7	Victimised you because of gang related issues?	2%	2%	2%	4%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	39%	39%	39%	36%
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	30%	32%	30%	41%
9.1	Is it easy/very easy to see the nurse?	52%	55%	52%	59%
9.1	Is it easy/very easy to see the dentist?	20%	13%	20%	20%
	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?	38%	48%	38%	42%
9.2	The nurse?	53%	59%	53%	61%
9.2	The dentist?	51%	42%	51%	56%
9.3	The overall quality of health services?	32%	44%	32%	44%
9.4	Are you currently taking medication?	52%	47%	52%	48%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	87%	85%	87%	
9.6	Do you have any emotional well being or mental health problems?	34%	26%	34%	31%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	35%	49%	35%	

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%	23%	24%	31%
10.2	Did you have a problem with alcohol when you came into this prison?	18%	17%	18%	25%
10.3	Is it easy/very easy to get illegal drugs in this prison?	38%	31%	38%	38%
10.4	Is it easy/very easy to get alcohol in this prison?	30%	19%	30%	
10.5	Have you developed a problem with drugs since you have been in this prison?	7%	8%	7%	5%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	10%	7%	10%	
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	77%	64%	77%	
10.8	Have you received any support or help with your alcohol problem while in this prison?	69%	64%	69%	
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	74%	80%	74%	85%
SECTION 11: Activities					
	Is it very easy/ easy to get into the following activities:				
11.1	A prison job?	46%	43%	46%	
11.1	Vocational or skills training?	41%	37%	41%	
11.1	Education (including basic skills)?	62%	52%	62%	
11.1	Offending behaviour programmes?	25%	20%	25%	
	Are you currently involved in any of the following activities:				
11.2	A prison job?	59%	60%	59%	59%
11.2	Vocational or skills training?	17%	17%	17%	16%
11.2	Education (including basic skills)?	20%	26%	20%	21%
11.2	Offending behaviour programmes?	16%	13%	16%	12%
11.3	Have you had a job while in this prison?	83%	83%	83%	75%
	For those who have had a prison job while in this prison:				
11.3	Do you feel the job will help you on release?	42%	43%	42%	55%
11.3	Have you been involved in vocational or skills training while in this prison?	71%	73%	71%	64%
	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?	52%	59%	52%	62%
11.3	Have you been involved in education while in this prison?	79%	79%	79%	74%
	For those who have been involved in education while in this prison:				
11.3	Do you feel the education will help you on release?	54%	61%	54%	63%
11.3	Have you been involved in offending behaviour programmes while in this prison?	73%	71%	73%	69%
	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?	37%	53%	37%	61%
11.4	Do you go to the library at least once a week?	49%	47%	49%	49%
11.5	Does the library have a wide enough range of materials to meet your needs?	52%	45%	52%	
11.6	Do you go to the gym three or more times a week?	39%	37%	39%	55%
11.7	Do you go outside for exercise three or more times a week?	31%	47%	31%	29%
11.8	Do you go on association more than five times each week?	47%	75%	47%	86%

Key to tables

Main comparator and comparator to last time

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11.9	Do you spend ten or more hours out of your cell on a weekday?	16%	16%	16%	20%
SECTION 12: Friends and family					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	34%	35%	34%	36%
12.2	Have you had any problems with sending or receiving mail?	41%	44%	41%	56%
12.3	Have you had any problems getting access to the telephones?	23%	24%	23%	23%
12.4	Is it easy/ very easy for your friends and family to get here?	19%	27%	19%	
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?	88%	82%	88%	
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	29%	33%	29%	
13.2	Contact by letter?	41%	38%	41%	
13.2	Contact by phone?	29%	25%	29%	
13.2	Contact by visit?	32%	33%	32%	
13.3	Do you have a named offender supervisor in this prison?	85%	67%	85%	
For those who are sentenced:					
13.4	Do you have a sentence plan?	58%	70%	58%	64%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	50%	55%	50%	61%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	41%	46%	41%	
13.6	Offender supervisor?	37%	36%	37%	
13.6	Offender manager?	29%	27%	29%	
13.6	Named/ personal officer?	14%	13%	14%	
13.6	Staff from other departments?	17%	17%	17%	
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	59%	65%	59%	77%
13.8	Are there plans for you to achieve any of your targets in another prison?	18%	22%	18%	
13.9	Are there plans for you to achieve any of your targets in the community?	23%	29%	23%	
13.10	Do you have a needs based custody plan?	3%	7%	3%	
13.11	Do you feel that any member of staff has helped you to prepare for release?	19%	17%	19%	17%
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?	31%	35%	31%	
13.12	Accommodation?	44%	37%	44%	
13.12	Benefits?	46%	39%	46%	
13.12	Finances?	30%	27%	30%	
13.12	Education?	43%	36%	43%	
13.12	Drugs and alcohol?	57%	45%	57%	
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?	50%	56%	50%	54%

Diversity Analysis



Key question responses (disability, age over 50) HMP Dartmoor 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

		Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
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	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		39	127	40	129
1.3	Are you sentenced?	100%	100%	100%	100%
1.5	Are you a foreign national?	3%	4%	0%	5%
1.6	Do you understand spoken English?	97%	99%	100%	98%
1.7	Do you understand written English?	95%	99%	100%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	13%	6%	5%	8%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	13%	6%	3%	9%
1.1	Are you Muslim?	3%	3%	3%	3%
1.12	Do you consider yourself to have a disability?			47%	16%
1.13	Are you a veteran (ex-armed services)?	28%	11%	27%	11%
1.14	Is this your first time in prison?	49%	40%	68%	36%
2.6	Were you treated well/very well by the escort staff?	59%	73%	74%	69%
2.7	Before you arrived here were you told that you were coming here?	46%	49%	50%	47%
3.2	When you were searched in reception, was this carried out in a respectful way?	85%	86%	92%	83%
3.3	Were you treated well/very well in reception?	80%	75%	83%	73%
3.4	Did you have any problems when you first arrived?	80%	54%	65%	59%
3.7	Did you have access to someone from health care when you first arrived here?	67%	74%	73%	72%
3.9	Did you feel safe on your first night here?	67%	85%	70%	83%
3.10	Have you been on an induction course?	82%	81%	80%	82%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	34%	52%	47%	47%

Key to tables

Diversity Analysis

		Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	69%	71%	88%	65%
4.4	Are you normally able to have a shower every day?	87%	94%	87%	94%
4.4	Is your cell call bell normally answered within five minutes?	30%	42%	42%	40%
4.5	Is the food in this prison good/very good?	24%	20%	23%	20%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	55%	50%	59%	49%
4.7	Are you able to speak to a Listener at any time, if you want to?	56%	62%	57%	62%
4.8	Do you feel your religious beliefs are respected?	47%	46%	65%	40%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	54%	56%	73%	49%
5.1	Is it easy to make an application?	85%	85%	83%	86%
5.3	Is it easy to make a complaint?	63%	58%	53%	61%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	38%	51%	46%	48%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	34%	41%	41%	38%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	8%	3%	0%	6%
7.1	Do most staff, in this prison, treat you with respect?	70%	80%	78%	78%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	67%	80%	77%	75%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	31%	26%	31%	26%
7.4	Do you have a personal officer?	54%	63%	72%	58%
8.1	Have you ever felt unsafe here?	51%	39%	47%	41%
8.2	Do you feel unsafe now?	30%	12%	15%	16%
8.3	Have you been victimised by other prisoners?	56%	35%	47%	38%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	41%	21%	25%	26%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	8%	3%	5%	4%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	3%	2%	3%	2%
8.5	Have you been victimised because of your nationality? (By prisoners)	0%	3%	3%	3%
8.5	Have you been victimised because of your age? (By prisoners)	15%	4%	18%	3%

Diversity Analysis

Key to tables

		Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.5	Have you been victimised because you have a disability? (By prisoners)	15%	1%	8%	3%
8.6	Have you been victimised by a member of staff?	41%	22%	40%	23%
8.7	Have you ever felt threatened or intimidated by staff here?	23%	11%	18%	13%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	5%	1%	5%	1%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	5%	2%	5%	2%
8.7	Have you been victimised because of your nationality? (By staff)	0%	3%	3%	2%
8.7	Have you been victimised because of your age? (By staff)	10%	3%	20%	0%
8.7	Have you been victimised because you have a disability? (By staff)	13%	2%	8%	3%
9.1	Is it easy/very easy to see the doctor?	29%	31%	27%	31%
9.1	Is it easy/ very easy to see the nurse?	61%	49%	62%	49%
9.4	Are you currently taking medication?	92%	39%	77%	45%
9.6	Do you feel you have any emotional well being/mental health issues?	55%	26%	27%	36%
10.3	Is it easy/very easy to get illegal drugs in this prison?	34%	38%	30%	40%
11.2	Are you currently working in the prison?	61%	59%	55%	61%
11.2	Are you currently undertaking vocational or skills training?	13%	19%	15%	18%
11.2	Are you currently in education (including basic skills)?	21%	19%	23%	18%
11.2	Are you currently taking part in an offending behaviour programme?	24%	14%	15%	17%
11.4	Do you go to the library at least once a week?	40%	52%	40%	52%
11.6	Do you go to the gym three or more times a week?	8%	49%	12%	47%
11.7	Do you go outside for exercise three or more times a week?	31%	30%	37%	28%
11.8	On average, do you go on association more than five times each week?	42%	49%	44%	48%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	15%	17%	15%	16%
12.2	Have you had any problems sending or receiving mail?	36%	43%	30%	45%
12.3	Have you had any problems getting access to the telephones?	19%	25%	21%	24%

Diversity analysis



Key question responses (veterans) HMP Dartmoor 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

	Any percentage highlighted in green is significantly better	Consider themselves to be a veteran	Do not consider themselves to be a veteran
	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		25	143
1.3	Are you sentenced?	100%	100%
1.5	Are you a foreign national?	0%	4%
1.6	Do you understand spoken English?	100%	99%
1.7	Do you understand written English?	100%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	4%	8%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	8%
1.1	Are you Muslim?	4%	3%
1.12	Do you consider yourself to have a disability?	44%	20%
1.14	Is this your first time in prison?	52%	42%
2.6	Were you treated well/very well by the escort staff?	75%	70%
2.7	Before you arrived here were you told that you were coming here?	48%	47%
3.2	When you were searched in reception, was this carried out in a respectful way?	96%	84%
3.3	Were you treated well/very well in reception?	84%	74%
3.4	Did you have any problems when you first arrived?	56%	61%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to be a veteran	Do not consider themselves to be a veteran
	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		
3.7	Did you have access to someone from health care when you first arrived here?	75%	72%
3.9	Did you feel safe on your first night here?	88%	79%
3.10	Have you been on an induction course?	80%	82%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	56%	45%
4.4	Are you normally offered enough clean, suitable clothes for the week?	84%	68%
4.4	Are you normally able to have a shower every day?	96%	92%
4.4	Is your cell call bell normally answered within five minutes?	38%	41%
4.5	Is the food in this prison good/very good?	12%	22%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	56%	50%
4.7	Are you able to speak to a Listener at any time, if you want to?	68%	60%
4.8	Do you feel your religious beliefs are respected?	60%	44%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	76%	51%
5.1	Is it easy to make an application?	76%	86%
5.3	Is it easy to make a complaint?	70%	57%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	68%	43%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	68%	33%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	0%	5%
7.1	Do most staff, in this prison, treat you with respect?	84%	78%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	80%	75%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to be a veteran	Do not consider themselves to be a veteran
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	44%	24%
7.4	Do you have a personal officer?	72%	59%
8.1	Have you ever felt unsafe here?	32%	44%
8.2	Do you feel unsafe now?	9%	17%
8.3	Have you been victimised by other prisoners?	36%	41%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	16%	27%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	5%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	4%	2%
8.5	Have you been victimised because of your nationality? (By prisoners)	0%	2%
8.5	Have you been victimised you are from a different part of the country than others? (By prisoners)		
8.5	Have you been victimised because you are from a traveller community? (By prisoners)		
8.5	Have you been victimised because of your age? (By prisoners)	8%	7%
8.5	Have you been victimised because you have a disability? (By prisoners)	4%	4%
8.6	Have you been victimised by a member of staff?	12%	30%
8.7	Have you ever felt threatened or intimidated by staff here?	4%	16%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	2%
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 you are from a different part of the country than others? (By staff)		

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to be a veteran	Do not consider themselves to be a veteran
	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		
8.7	Have you been victimised because you are from a traveller community? (By staff)		
8.7	Have you been victimised because of your age? (By staff)	4%	5%
8.7	Have you been victimised because you have a disability? (By staff)	0%	4%
9.1	Is it easy/very easy to see the doctor?	42%	28%
9.1	Is it easy/ very easy to see the nurse?	58%	51%
9.4	Are you currently taking medication?	60%	51%
9.6	Do you feel you have any emotional well being/mental health issues?	28%	35%
10.3	Is it easy/very easy to get illegal drugs in this prison?	44%	36%
11.2	Are you currently working in the prison?	60%	59%
11.2	Are you currently undertaking vocational or skills training?	24%	16%
11.2	Are you currently in education (including basic skills)?	24%	19%
11.2	Are you currently taking part in an offending behaviour programme?	16%	16%
11.4	Do you go to the library at least once a week?	48%	50%
11.6	do you go to the gym three or more times a week?	32%	39%
11.7	Do you go outside for exercise three or more times a week?	36%	29%
11.8	On average, do you go on association more than five times each week?	52%	46%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	36%	13%
12.2	Have you had any problems sending or receiving mail?	28%	43%
12.3	Have you had any problems getting access to the telephones?	13%	25%



Prisoner survey responses HMP Dartmoor 2013 VP Analysis

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	A and B Wings	E, F and G wings
	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		65	64
SECTION 1: General information			
1.2	Are you under 21 years of age?	0%	2%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	5%	8%
1.4	Is your sentence less than 12 months?	0%	13%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	5%	6%
1.5	Are you a foreign national?	5%	3%
1.6	Do you understand spoken English?	98%	100%
1.7	Do you understand written English?	98%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	5%	6%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	6%	10%
1.1	Are you Muslim?	3%	2%
1.11	Are you homosexual/gay or bisexual?	11%	2%
1.12	Do you consider yourself to have a disability?	40%	13%
1.13	Are you a veteran (ex-armed services)?	20%	13%
1.14	Is this your first time in prison?	57%	30%
1.15	Do you have any children under the age of 18?	40%	50%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	72%	56%
2.5	Did you feel safe?	71%	84%
2.6	Were you treated well/very well by the escort staff?	72%	70%
2.7	Before you arrived here were you told that you were coming here?	49%	51%
2.8	When you first arrived here did your property arrive at the same time as you?	88%	87%
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	69%	72%

Key to tables

	Any percentage highlighted in green is significantly better	A and B Wings	E, F and G wings
	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		
3.2	When you were searched in reception, was this carried out in a respectful way?	86%	91%
3.3	Were you treated well/very well in reception?	72%	80%
	When you first arrived:		
3.4	Did you have any problems?	72%	46%
3.4	Did you have any problems with loss of property?	12%	16%
3.4	Did you have any housing problems?	18%	22%
3.4	Did you have any problems contacting employers?	5%	3%
3.4	Did you have any problems contacting family?	23%	17%
3.4	Did you have any problems ensuring dependants were being looked after?	2%	3%
3.4	Did you have any money worries?	26%	17%
3.4	Did you have any problems with feeling depressed or suicidal?	22%	16%
3.4	Did you have any physical health problems?	26%	6%
3.4	Did you have any mental health problems?	20%	11%
3.4	Did you have any problems with needing protection from other prisoners?	14%	3%
3.4	Did you have problems accessing phone numbers?	26%	8%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	66%	86%
3.6	A shower?	25%	25%
3.6	A free telephone call?	36%	49%
3.6	Something to eat?	74%	75%
3.6	PIN phone credit?	48%	58%
3.6	Toiletries/ basic items?	65%	50%
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?	51%	52%
3.7	Someone from health services?	72%	71%
3.7	A Listener/Samaritans?	34%	29%
3.7	Prison shop/ canteen?	26%	21%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	54%	44%
3.8	Support was available for people feeling depressed or suicidal?	54%	34%
3.8	How to make routine requests?	48%	32%
3.8	Your entitlement to visits?	40%	32%

Key to tables

	Any percentage highlighted in green is significantly better	A and B Wings	E, F and G wings
	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		
3.8	Health services?	54%	50%
3.8	The chaplaincy?	52%	39%
3.9	Did you feel safe on your first night here?	73%	89%
3.10	Have you been on an induction course?	81%	78%
3.12	Did you receive an education (skills for life) assessment?	81%	77%
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?	48%	48%
4.1	Attend legal visits?	59%	46%
4.1	Get bail information?	15%	19%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	38%	40%
4.3	Can you get legal books in the library?	41%	40%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	80%	65%
4.4	Are you normally able to have a shower every day?	89%	98%
4.4	Do you normally receive clean sheets every week?	87%	91%
4.4	Do you normally get cell cleaning materials every week?	86%	70%
4.4	Is your cell call bell normally answered within five minutes?	33%	44%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	70%	73%
4.4	Can you normally get your stored property, if you need to?	45%	28%
4.5	Is the food in this prison good/very good?	22%	11%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	58%	46%
4.7	Are you able to speak to a Listener at any time, if you want to?	66%	52%
4.8	Are your religious beliefs are respected?	52%	39%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	61%	51%
4.10	Is it easy/very easy to attend religious services?	52%	37%
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	82%	87%
5.3	Is it easy to make a complaint?	60%	63%
5.5	Have you ever been prevented from making a complaint when you wanted to?	16%	19%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	48%	44%

Key to tables

	Any percentage highlighted in green is significantly better	A and B Wings	E, F and G wings
	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 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	36%	57%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	38%	39%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	2%	5%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	74%	85%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	77%	77%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	34%	31%
7.4	Do staff normally speak to you most of the time/all of the time during association?	29%	28%
7.5	Do you have a personal officer?	60%	68%
SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	54%	30%
8.2	Do you feel unsafe now?	19%	13%
8.4	Have you been victimised by other prisoners here?	55%	28%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	27%	17%
8.5	Hit, kicked or assaulted you?	8%	10%
8.5	Sexually abused you?	2%	0%
8.5	Threatened or intimidated you?	34%	22%
8.5	Taken your canteen/property?	17%	3%
8.5	Victimised you because of medication?	8%	3%
8.5	Victimised you because of debt?	3%	2%
8.5	Victimised you because of drugs?	0%	3%
8.5	Victimised you because of your race or ethnic origin?	2%	5%
8.5	Victimised you because of your religion/religious beliefs?	2%	2%
8.5	Victimised you because of your nationality?	2%	0%
8.5	Victimised you because you were from a different part of the country?	5%	3%
8.5	Victimised you because you are from a traveller community?	0%	0%
8.5	Victimised you because of your sexual orientation?	5%	0%

Key to tables

	Any percentage highlighted in green is significantly better	A and B Wings	E, F and G wings
	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	Victimised you because of your age?	11%	5%
8.5	Victimised you because you have a disability?	9%	0%
8.5	Victimised you because you were new here?	8%	8%
8.5	Victimised you because of your offence/crime?	16%	0%
8.5	Victimised you because of gang related issues?	9%	3%
SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	31%	16%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	11%	3%
8.7	Hit, kicked or assaulted you?	3%	3%
8.7	Sexually abused you?	2%	0%
8.7	Threatened or intimidated you?	20%	8%
8.7	Victimised you because of medication?	3%	2%
8.7	Victimised you because of debt?	0%	0%
8.7	Victimised you because of drugs?	0%	3%
8.7	Victimised you because of your race or ethnic origin?	2%	2%
8.7	Victimised you because of your religion/religious beliefs?	2%	3%
8.7	Victimised you because of your nationality?	2%	0%
8.7	Victimised you because you were from a different part of the country?	5%	3%
8.7	Victimised you because you are from a traveller community?	0%	0%
8.7	Victimised you because of your sexual orientation?	5%	0%
8.7	Victimised you because of your age?	9%	0%
8.7	Victimised you because you have a disability?	8%	0%
8.7	Victimised you because you were new here?	5%	2%
8.7	Victimised you because of your offence/crime?	13%	0%
8.7	Victimised you because of gang related issues?	2%	0%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	38%	23%
9.1	Is it easy/very easy to see the nurse?	56%	47%
9.1	Is it easy/very easy to see the dentist?	21%	16%
9.4	Are you currently taking medication?	66%	37%

Key to tables

	Any percentage highlighted in green is significantly better	A and B Wings	E, F, and G wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
9.6	Do you have any emotional well being or mental health problems?	40%	25%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	20%	28%
10.2	Did you have a problem with alcohol when you came into this prison?	10%	21%
10.3	Is it easy/very easy to get illegal drugs in this prison?	29%	40%
10.4	Is it easy/very easy to get alcohol in this prison?	17%	37%
10.5	Have you developed a problem with drugs since you have been in this prison?	2%	8%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	8%	6%
SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	39%	53%
11.1	Vocational or skills training?	45%	34%
11.1	Education (including basic skills)?	66%	52%
11.1	Offending Behaviour Programmes?	22%	26%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	60%	71%
11.2	Vocational or skills training?	19%	17%
11.2	Education (including basic skills)?	25%	15%
11.2	Offending Behaviour Programmes?	19%	18%
11.4	Do you go to the library at least once a week?	41%	53%
11.5	Does the library have a wide enough range of materials to meet your needs?	49%	57%
11.6	Do you go to the gym three or more times a week?	18%	65%
11.7	Do you go outside for exercise three or more times a week?	30%	27%
11.8	Do you go on association more than five times each week?	38%	59%
11.9	Do you spend ten or more hours out of your cell on a weekday?	16%	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?	41%	30%
12.2	Have you had any problems with sending or receiving mail?	41%	39%
12.3	Have you had any problems getting access to the telephones?	31%	13%
12.4	Is it easy/ very easy for your friends and family to get here?	22%	21%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	83%	90%
13.10	Do you have a needs based custody plan?	5%	2%
13.11	Do you feel that any member of staff has helped you to prepare for release?	19%	22%