Report on an unannounced inspection of

HMP Huntercombe

by HM Chief Inspector of Prisons

6-17 February 2017

This inspection was carried out with assistance from colleagues at the General Pharmaceutical Council and in partnership with the following bodies:





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Glossary of terms

We try to make our reports as clear as possible, but if you find terms that you do not know, please see the glossary in our 'Guide for writing inspection reports' on our website at: http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/

Introduction

HMP Huntercombe, in Oxfordshire, had a long history as a young offender institution. For the last five years it has, however, been a category C prison for 480 adults, and one of only two facilities in the country retained for the sole purpose of holding convicted foreign nationals. As a prison for convicted prisoners, it differs markedly from an immigration removal centre (IRC).

We last visited Huntercombe in late 2012 when it was at the point of completing its transition to its new role, and found a good institution. At this inspection we found this remained largely the case overall, but without a specific resettlement function the prison's purpose was limited to holding men before they were deported or moved on.

Huntercombe remained a safe prison, despite some surprisingly poor perceptions among prisoners. Levels of violence were low and despite the prevalence of self-harm, men in crisis were reasonably well cared for. Work to promote safety was generally effective and security was proportionate. Force was rarely used and the use of segregation was low.

Accommodation was clean and properly maintained, although some cells were overcrowded. Staff were confident in their roles and relationships were proactive and supportive. Work to promote equality was improving and outcomes for protected groups were reasonably good. Surprisingly for a foreign national prison there was a general lack of translated material or use of translation services to assist prisoners. This is the subject of one of our main recommendations.

Huntercombe was a purposeful prison and most prisoners had a significant amount of predictable time out of their cells. There was not enough education and work to employ everybody full time but all places were used well and allocated fairly. The quality of learning and skills and work activities was meaningful and our colleagues in Ofsted assessed the overall effectiveness as 'good'.

The key challenge the prison faced was how it was able to assist prisoners prior to their departure or release. In the six months before our arrival just 12 men had been released into the community. Some 185 had been deported, repatriated or sent to an IRC. Many of this latter group would be subsequently deported. Prisoners often arrived without a basic custody screening and developed resettlement services were lacking, except for the interest of a small number of supportive third sector organisations. Despite some prisoners posing significant risk, offender risk management and sentence planning was under-resourced and ineffective. Public protection arrangements were reasonable, especially in relation to prisoners released in the UK, but it was unclear how risk in general was being addressed. We have made a main recommendation to the Ministry of Justice (MOJ) that it clarifies Huntercombe's role in offender management and particularly how it deals with the risks posed by those to be released or deported.

This important strategic issue aside, the managers and staff of Huntercombe should be praised for maintaining a safe, decent and purposeful institution which, in the main, treated its prisoners with respect.

Peter Clarke CVO OBE QPM HM Chief Inspector of Prisons

April 2017

Introduction	
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Fact page

Task of the establishment

Category C foreign national prison

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

Public

Region/Department

London and Thames Valley

Number held

480

Certified normal accommodation

370

Operational capacity

480

Date of last full inspection

7-11 January 2013

Brief history

The site was originally built as an internment camp. After World War II the site opened as a prison and was a Borstal until 1983. In 2000 Huntercombe became a prison for male juveniles aged 15 to 18. In November 2010 the establishment re-roled to an adult category C training prison and since March 2012 it has held solely category C foreign national prisoners, one of two prisons of this type.

Short description of residential units

There are five residential units: Patterson, Rich, Howard, Fry and Mountbatten. Mountbatten is a modern unit of traditional gallery design and has 120 single cells. Howard, Fry, Rich and Patterson are self-contained units unique in design to Huntercombe, and can each hold 90 prisoners, some in single cells and some in doubles. Patterson is currently used as the induction/first night unit and also contains a spur for some enhanced prisoners who are unlocked for longer periods.

Name of governor

David Redhouse

Escort contractor

GeoAmey for serving prisoners Tascor for immigration detainees

Health service provider

Care UK

Learning and skills providers

Milton Keynes College

Independent Monitoring Board chair

John Evans

Community rehabilitation company (CRC)

None

Fact page	
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About this inspection and report

- Al 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.
- 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.
- 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
 - 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.
- All inspections of prisons are conducted jointly with Ofsted or Estyn (Wales), the Care Quality Commission, the General Pharmaceutical Council (GPhC) and HM Inspectorate of Probation. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

This report

- A9 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.
- A10 Details of the inspection team and the prison population profile can be found in Appendices I and IV respectively.
- All Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix V of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant. ¹

The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

Summary

Safety

- Overall, Huntercombe was a safe prison. Early days arrangements were sound. The prisoner-led induction was helpful. Levels of violence were low and structures to manage violence were effective, but prisoners' perceptions of safety were poor. Levels of self-harm were high but men in crisis received good care. Security arrangements were generally proportionate. The incentives and earned privileges (IEP) scheme was used appropriately on the whole. Adjudications were mostly fair but some lacked thorough investigation. Force was rarely used but governance was not robust enough. The segregation unit was a reasonably good environment and its use was generally appropriate. The substance misuse service was good but provided a reduced service at the time of our inspection.

 Outcomes for prisoners were good against this healthy prison test.
- At the last inspection in 2013, we found that outcomes for prisoners in Huntercombe were reasonably good against this healthy prison test. We made 13 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 six had not been achieved.
- Many men were anxious about transferring to Huntercombe. Property did not always accompany prisoners on transfer. The reception area was bright and spacious. Newly arrived prisoners were processed quickly and peer mentors set a good tone. Information was in English only and telephone interpreting was not used for all non-English speakers. In our survey, too few prisoners said they felt safe on their first night but the care and monitoring that we saw were good. The prisoner-led induction was good but the induction booklet was complicated and only available in English.
- Huntercombe was largely a safe prison. Levels of violence were low but the poor perceptions of safety in the prison's and our own surveys required further investigation. Structures to identify, report and analyse violence and antisocial behaviour were effective. Tools to challenge violence were largely punitive but some restorative justice work helped prisoners to improve their behaviour.
- Progress was good against the Prisons and Probation Ombudsman's recommendations following a self-inflicted death. The number of self-harm incidents was high, mostly because of frustration and fear about deportation and use of the basic level of the IEP scheme. Assessment, care in custody and teamwork (ACCT)² documents were generally of a good standard, with some weaknesses, and reflected compassionate care for men in crisis. Quality assurance was reasonably good, but the gated cell for constant watch was inappropriately sited in the segregation unit. Listeners³ felt well supported and access to them was good. The safeguarding policy was up to date and there were links with the Oxfordshire Safeguarding Adults Board. Staff were aware of men who were potentially at risk on their wings and described appropriate action to support them.
- Access to the regime was not unnecessarily restricted by security measures which were proportionate for a category C training prison. Intelligence reports and required actions were managed in a timely manner. Mandatory drug testing arrangements were good and positive rates were low. The prison was conscious of the emerging threat from new

² Case management of prisoners at risk of suicide and self-harm.

³ Prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners.

- psychoactive substances⁴. Closed visits were used too frequently and not only for visits related issues, which was inappropriate.
- S7 The IEP scheme was used proportionately but too many prisoners felt that the scheme was punitive. Staff recognised positive behaviour but did not always communicate this to prisoners.
- The number of adjudications remained low. Quality assurance was in place but some records did not indicate thorough investigation. The process was administered fairly and adjudicators tried to take a rehabilitative approach.
- Force had been used 24 times during the last six months, which was low, but governance was particularly weak for special accommodation.
- The use of segregation was low. The unit was clean, with adequate facilities and good care by staff. Some reviews and safety screenings were missing and the regime for prisoners segregated for their own protection was inadequate.
- The substance misuse service was good but at the time of our inspection prisoners received a reduced service. The drama group and 12-step fellowships were examples of good practice. Clinical treatment policies, procedures and practice were good.

Respect

- Most residential units were clean and in good condition but too many cells were overcrowded. Staff were proactive and supportive to the men in their custody. The strategic management of equality and diversity had improved. Outcomes for most protected groups were reasonably good but not enough use was made of professional interpreting and translation. Faith provision was good. Complaints were responded to promptly and appropriately. Health services were very good. Too few prisoners were satisfied with the food. Catalogue orders took too long to arrive. Outcomes for prisoners were good against this healthy prison test.
- At the last inspection in 2013, we found that outcomes for prisoners in Huntercombe were reasonably good against this healthy prison test. We made 27 recommendations in the area of respect. At this follow-up inspection we found that 16 of the recommendations had been achieved, three had been partially achieved and eight had not been achieved.
- Almost all residential areas were clean and in good condition. Communal areas were well used and met the needs of the prisoners. Many cells which had been converted for double occupancy were too cramped. Applications were dealt with quickly, and most responses were helpful.
- Some wing staff knew prisoners well and supported them proactively, but other wing staff were reactive. Most specialist staff had very good relationships with prisoners. Staff had not received training in cultural awareness or the needs of foreign nationals. The personal officer scheme was effective. Consultation arrangements were effective and the prisoners' voice was heard.

⁴ Drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life threatening effects.

- The strategic management of equality and diversity had improved since our last inspection and was now reasonably good. Investigations into discrimination incidents were timely but varied in quality. Equality representatives were active in induction and supported prisoners with disabilities.
- There was a lack of translated material, and there was limited use of telephone interpreting. Prisoners sometimes interpreted in inappropriate contexts. In our survey, more black and minority ethnic than white prisoners said they had been victimised by staff and there was some evidence to support these perceptions. The chaplaincy and equality representatives offered good support to older prisoners but we found an older prisoner with unmet needs. The equality team was aware of prisoners with disabilities and knew complex cases well. Faith provision was good and there was a wide range of religious and pastoral services. The chaplaincy was very well integrated into the wider prison.
- Responses to complaints were appropriate and timely. Complaints data were collected and trends noted but not used to drive improvements. Prisoners could only freely access complaint forms in English. Quality assurance arrangements were not sufficiently robust.
- There were no longer any legal service officers. Migrant Help provided useful but limited legal advice. The library stocked a good range of up-to-date legal resources.
- The access to and quality of health services were very good. Health professionals cared for men thoughtfully and compassionately. Screening on arrival appropriately identified health needs and risks with proactive referrals to meet these needs. The range of primary care services was equivalent to the community and included access to a dietician. Medicines management was sound with low levels of prescribing of tradable medicines. Dental care was good with priority for urgent needs, but prisoners waited too long for routine treatment. Opportunities for patient feedback were good and effective health promotion responded to men's needs. Social care arrangements were reasonably good. The mental health service was good and well integrated in the prison. Prisoners were able to access some helpful group and individual work in trauma and post-traumatic stress disorder. Transfers to secure mental health units could take far too long. During the past 10 months, it had taken nine weeks to transfer one prisoner and six months to transfer another.
- S21 In our survey, only 31% of prisoners said the food was good or very good and the food was unappetising at the time of the inspection. Portion sizes were appropriate and consultation arrangements reasonably good. The needs of men with special diets were met. The canteen system was efficient, but there were long delays in receiving catalogue orders.

Purposeful activity

- Time out of cell for most prisoners was good and the regime was predictable. The management of learning, skills and work was good. There were not enough activity places for the population.

 Teaching and learning were good. Many prisoners gained valuable new skills. The library was good but access was too limited. Physical education was good. Outcomes for prisoners were reasonably good against this healthy prison test.
- At the last inspection in 2013, we found that outcomes for prisoners in Huntercombe were good against this healthy prison test. We made 13 recommendations in the area of purposeful activity. At this follow-up inspection we found that six of the recommendations had been achieved, three had been partially achieved, two had not been achieved and two were no longer relevant.

- S24 Most prisoners spent good time out of their cells and had good access to exercise and association. The core day worked well and the regime was predictable. Prisoners had enough time to complete domestic tasks. Our roll checks found 12% locked up, which was not excessive.
- Senior prison managers and Milton Keynes College thoroughly understood prisoners' needs and offered services which met the needs of most men. A range of qualifications, vocational training and work increased prisoners' chances of employment on release. Managers used prisoner feedback well to modify courses. Prison managers made sure that prisoners attended sessions regularly and punctually. The Milton Keynes College quality improvement arrangements ensured that the quality of teaching, learning and assessment was good. Prison managers did not evaluate the quality of training and assessments adequately.
- There were not enough full-time activity places to keep all prisoners purposefully active. Allocation to activities was fair and swift. Pay rates encouraged prisoners to engage with education, vocational training and work. Not all prisoners who needed to could take the English for speakers of other languages (ESOL) course. The virtual campus⁵ was not in operation.
- Tutors and instructors coached prisoners well and gave good oral feedback. They did not, however, set clear and challenging targets. Prisoners received good additional learning support. Records of progress were good and planning of learning was effective for most prisoners. Tutors did not ensure that the range of learning activities met the needs of all prisoners, especially the most able. The barbering training was very good. Instructors did not routinely develop prisoners' English and mathematics skills in work. The Turning Pages⁶ scheme was implemented effectively.
- Prisoners took pride in their work. Much of their work was good but too little was outstanding. Attendance and punctuality were good. Prisoners behaved well and respected staff and their peers. Prisoners' progress in English was not good enough. Prisoners made good progress towards completing their courses and many developed valuable skills. Achievement on most accredited courses was good.
- Many prisoners benefited from using the well resourced library but it was closed in the evenings, weekends and on Fridays. A high proportion of prisoners used the gym. The gym induction provided a good emphasis on health and safety and healthy living. Recreational and remedial PE were good and effectively linked with health care. Accredited qualifications were available in the gym and most prisoners who started courses completed them successfully.

⁵ Prisoner access to community education, training and employment opportunities via the internet.

⁶ A reading programme created by the Shannon Trust, written specifically for adults (unlike its predecessor Toe by Toe) and delivered by peer mentors.

Resettlement

- The role of offender management in a foreign national prison was unclear. Little work was done to reduce risk of reoffending. Supervision of offenders was poor and too many prisoners did not have an OASys (offender assessment system). Public protection work was sound for the few men released from the prison into the UK. Men were not re-categorised to category D, or released on temporary licence or home detention curfew. There was no community rehabilitation company to meet men's resettlement needs or systematic assessment of need. Visits arrangements were good. **Outcomes for prisoners were poor against this healthy prison test.**
- At the last inspection in 2013, we found that outcomes for prisoners in Huntercombe were reasonably good against this healthy prison test. We made nine recommendations in the area of resettlement. At this follow-up inspection we found that two of the recommendations had been achieved, one had been partially achieved and six had not been achieved.
- The reducing re-offending strategy was tailored to the distinctive population and reflected national policy on the removal of foreign national prisoners. Many prisoners were removed or released with no intervention to reduce their risks of offending. As Huntercombe was not a resettlement prison, there was no community rehabilitation company to assess and address prisoners' resettlement needs.
- The structures and resources to manage offenders were inadequate. With only three offender supervisors responsible for about 480 prisoners, there was little ongoing contact. Too many prisoners had an out-of-date OASys or no OASys at all, partly because many men arrived without one. Sentence planning did not drive the sentence in most cases and prisoners' experience was dominated by immigration concerns. Very little offending behaviour work was available. Prisoners were not released on temporary licence or home detention curfew.
- Initial public protection procedures were reasonably good; relevant cases were identified on arrival and information appropriately shared. The offender management unit (OMU) appropriately prioritised high-risk prisoners who were fighting removal to co-ordinate safe release arrangements. Interdepartmental risk management meetings were usually well attended and furnished with detailed information on relevant prisoners. Despite expedient and persistent chasing by the OMU, community offender managers did not always confirm multi-agency public protection arrangement (MAPPA) levels or arrange MAPPA meetings in a timely manner.
- Category D prisoners were no longer held. No prisoners had successfully been recategorised during the last six months because of stringent eligibility criteria.
- There were no services specific to prisoners with indeterminate sentences. They were treated in the same way as other prisoners, which was appropriate given their low numbers.
- S37 Almost 200 men had left the prison during the last six months, about 5% of whom were released into the community in the UK. There was no co-ordinated assessment of release or resettlement needs and little was done to address prisoners' needs beyond useful support from peer mentors. Links had been made with some third sector organisations in the UK.
- Support for accommodation and finance issues was limited and not all prisoners who needed help knew where to obtain it. Useful help was provided by enthusiastic and knowledgeable orderlies trained by the St Giles Trust, but they were only able to give limited assistance to the majority of prisoners being removed abroad.

- S39 The National Careers Service provided a good service. Prisoners received appropriate advice for training. Prison staff worked hard to provide information about employment opportunities in home countries. Good quality careers advice helped prisoners make informed choices about courses which prepared them for life after leaving the UK.
- All prisoners were seen by a health care professional about two weeks before their release and given information about their health condition. Those on prescribed medicines were given an appropriate supply. Where possible, prisoners with mental health conditions were linked with known statutory agencies or voluntary organisations in their home countries.
- The drugs and alcohol recovery team (DART) referred prisoners with substance misuse problems to community agencies abroad for support wherever possible. Release plans were not routinely shared between DART and the OMU.
- The visiting area had recently been refurbished and was now a reasonably comfortable environment. Family days were well received by prisoners and their families. Limited support was offered to prisoners to restore and maintain relationships.
- S43 There were no offending behaviour programmes and the non-accredited interventions we saw at the last inspection were no longer delivered. Despite referrals, very few men were transferred elsewhere to complete offending behaviour programmes.

Main concerns and recommendations

Concern: Prisoners were routinely deported or released into the UK without their offending behaviour and resettlement needs being addressed. The role of offender management in a foreign national prison was unclear, and there were systemic problems that needed to be addressed by HMPPS, such as poor completion of OASys assessments by sending establishments and the inaccurate assumption that all foreign national prisoners would be removed.

Recommendation: The Ministry of Justice (MOJ) should clarify the role of, and resolve systemic problems with, offender management and resettlement in foreign national prisons to ensure that the needs of prisoners, including the risks they pose, are addressed before they are released or removed.

Concern: Little material was translated into other languages, much less than in many prisons where foreign nationals are a minority. This ranged from basic information in reception and induction to every medium of communication, including notice boards. Use of telephone interpreting had fallen into abeyance during the reception process, although it was used in some confidential contexts such as health care and adjudications. Wing staff, including the personal officers of prisoners who did not speak English, did not use professional interpreting.

Recommendation: Basic information about the prison and the regime should be available in the main languages spoken by prisoners, and key notices should be displayed in these languages. Telephone interpreting should be used in all cases where confidentiality or accuracy is required.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

- I.I In our survey, fewer than two-thirds of prisoners said they had felt safe during transfer to Huntercombe. Many spoke of feeling anxious and uncertain about where they were going before their arrival at the establishment.
- 1.2 Our survey showed less positive perceptions of treatment on the journey and on arrival than the comparator. Prisoners whom we observed arriving were treated decently.
- 1.3 Too many prisoners still arrived without their property and cash. Staff followed this up and we observed good information sharing about prisoners between escort and reception staff.

Recommendation

1.4 Prisoners' property should arrive at the establishment with them. (Repeated recommendation 1.6)

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.

- 1.5 The reception area was clean, bright and spacious and had a relaxed atmosphere. Prisoners had access to a toilet and television while waiting. Men were met by a peer mentor who offered them drinks and provided information about the prison. Written information was only available in English. New arrivals were given a rub-down search.
- 1.6 We saw prisoners being treated well in reception but prisoners responded less positively in our survey. These perceptions reflected the anxiety about imminent deportation which many felt on arrival.
- 1.7 The reception process was efficient and there was no evidence of undue delays. New arrivals were offered a free telephone call (subject to public protection restrictions), which could be made to an overseas number.
- 1.8 New arrivals were interviewed in private but there was no evidence that telephone interpreting had been used in the last six months. Staff told us that they called on prisoners to interpret if required, and a list of prisoners who could speak other languages was held in reception (see main recommendation \$45).
- In our survey, only 65% of prisoners said they felt safe on their first night against the comparator of 80% and 78% at the previous inspection. However, the care and monitoring

- that we observed were good. Detailed handovers took place between reception and first night staff. The first night centre made good use of a passport booklet as a running record.
- 1.10 New arrivals were met by staff and peer mentors on the induction unit. Peer mentors ensured that cells were adequately equipped and hot food was ordered before new prisoners arrived.
- 1.11 Most prisoners were positive about the induction process, which lasted five days. Prisoner mentors delivered much of this programme. Written information was only available in English and the induction booklet was complicated. Orderlies spent much of their time helping men to complete complex feedback sheets following sessions.
- 1.12 The induction mentors supported men during their first week, escorting them around the establishment. Home Office immigration enforcement officers saw prisoners on the next working day following arrival.

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.

- 1.13 Overall, Huntercombe was a safe establishment. Levels of violence were comparatively low; during the previous six months there had been 17 fights and 16 assaults including one against a member of staff. Injuries resulting from these incidents were relatively minor. In our survey, 46% of prisoners said they had felt unsafe at some time in Huntercombe and 25% that they felt unsafe now, significantly worse than the respective comparators and the last inspection. This was reflected in the prison's own safety survey conducted in June 2016. Despite being aware of prisoners' feelings about safety, the prison had done too little to mitigate their fears.
- 1.14 However, prisoners we spoke to said they felt safe and that there was little bullying. The uncertainty of their immigration status was frequently cited as a factor in prisoners' perceptions of safety.
- 1.15 There were robust systems and procedures to identify violent and antisocial behaviour and data collated were accurate and comprehensive. During the previous six months, 70 prisoners had been formally monitored under violence reduction measures. Punitive sanctions were used to address this behaviour, including adjudications and the incentives and earned privileges (IEP) scheme. A restorative justice approach had been used in a few cases. The monitoring procedure encouraged staff to help prisoners understand why their behaviour was unacceptable. This was done with varying degrees of skill, but there was some evidence that poor behaviour abated following these individual interventions.
- 1.16 A comprehensive violence reduction policy was underpinned by a high profile, well-attended monthly safer prisons meeting and a safer prisons team which was well resourced and committed. They provided the safer prisons meetings with accurate data which were analysed and used well to improve safety in the prison.

Recommendation

1.17 The reasons for prisoners' negative perceptions of safety should be addressed.

Self-harm and suicide prevention

Expected outcomes:

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

- 1.18 There had been one self-inflicted death since the last inspection, the first in the history of Huntercombe. The prison had conducted a comprehensive preliminary inquiry and had addressed and rectified most concerns before receipt of the report from the Prisons and Probation Ombudsman (PPO). Progress against recommendations made by the PPO was good.
- 1.19 During the previous six months, the levels of self-harm and the number of prisoners on assessment, care in custody and teamwork (ACCT) case management of prisoners at risk of suicide and self-harm were high. There was good identification of prisoners at risk of self-harm. ACCT documents indicated that triggers included fear of deportation and the loss of privileges through the IEP scheme. On-site Home Office immigration enforcement staff attended safer prisons meetings regularly. They did not, however, actively engage with men at ACCT reviews about their immigration and deportation anxieties.
- 1.20 The quality of ACCT documents was generally good and reflected compassionate care for men in crisis. Most prisoners in crisis said they felt well supported. Quality assurance procedures were sometimes effective but had not driven improvements in all areas. For example, attention was needed to ensure consistent case management, comprehensive care maps and observations of prisoners at the required frequency. Other prisoners were sometimes used as interpreters in case review meetings, which was unacceptable given the sensitive nature of the information discussed (see main recommendation S45).
- 1.21 The gated constant watch cell was located in the segregation unit, which was unacceptable and not conducive to caring for prisoners at risk. It had been used eight times in the previous six months to house prisoners in crisis. A further seven prisoners on ACCTs were held in the segregation unit at the same time and this was not justified by exceptional circumstances in every case.
- In our survey, 50% of prisoners said they could speak to a Listener⁷ at any time. There were enough Listeners for the population and those we spoke to felt well supported by the Samaritans and most prison staff. Access to Samaritans telephones was good.

Prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners.

Recommendations

- 1.23 Weaknesses in ACCT procedures should be addressed, particularly the consistency of case management, quality of care maps and adherence to levels of observation.
- 1.24 Prisoners on an open ACCT should only be held in segregation if there are exceptional reasons for doing so.

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.⁸

1.25 The safeguarding strategy was comprehensive and up to date. Many staff had received safer custody training, including a mental health component, and some had been trained in awareness of trauma and torture. The prison had links with the local safeguarding adults board and attended meetings in the community. No safeguarding referrals had been deemed necessary to date. Staff were aware of vulnerability among prisoners and they described appropriate action to support men who were at risk.

Security

Expected outcomes:

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

- 1.26 Security procedures were proportionate for a category C training prison. Access to the regime was not restricted unnecessarily by security measures. Physical security arrangements were adequate.
- 1.27 During the previous six months, 1,144 information reports had been submitted and processed promptly. The most significant challenges facing the prison were the availability of mobile phones and drugs. Equipment was used regularly to detect mobile phones. Cell-searching and strip-searching of prisoners were based on intelligence; some illicit articles had been found as a result.
- 1.28 Well-attended monthly security meetings provided a strategic overview. Analysis of the intelligence reports received was good, and recommended actions were carried out. Appropriate security objectives and tasks were identified.
- In our survey, more prisoners that at our last inspection said it was easy to obtain drugs and alcohol. The positive random mandatory drug testing (MDT) rate in the past six months was 1.5%, which was low. MDT arrangements were good. There had been an emerging

⁸ 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).

- prevalence of incidents relating to new psychoactive substances⁹ (NPS) and a number of drug tests had returned positive for these substances. The prison was vigilant about NPS. Levels of suspicion testing were good and generally timely.
- 1.30 Closed visits had been applied 33 times in the previous six months, which was high. Records did not always demonstrate that closed visits related directly to the trafficking of unauthorised articles through visits. This was inappropriate.

Recommendation

1.31 Closed visits should only be used for reasons relating directly to the trafficking of unauthorised articles through visits.

Incentives and earned privileges

Expected outcomes:

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

- 1.32 At the time of the inspection, 45% of prisoners were on the enhanced level of the IEP scheme and only 15 men were on the basic level. While this distribution was proportionate and fair, prisoners felt that IEP was used as a form of punishment, and staff tended to emphasise the punitive aspects of IEP. Many prisoners were anxious that a warning might jeopardise their immigration status. The case notes that we reviewed contained positive comments about behaviour, but many prisoners were not aware of this. Most prisoners said that they were only ever informed about entries on negative behaviour.
- 1.33 Prisoners on the basic level could attend work and received at least 60 minutes' domestic time each day. Many prisoners routinely stayed on the basic level for at least 28 days. Quality assurance required further development.

Recommendation

1.34 The incentives and earned privileges scheme should encourage positive behaviour through meaningful incentives and differentials between levels. (Repeated recommendation 1.49)

⁹ Drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life threatening effects.

Discipline

Expected outcomes:

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

Disciplinary procedures

- 1.35 The number of adjudications was low at 402 in the previous six months. Most records of hearings were good but some did not demonstrate thorough investigation before a finding of guilt. The hearings that we observed were administered fairly and correctly. Adjudicators were supportive and tried to use a rehabilitative approach.
- **1.36** Telephone interpretation had been used on some appropriate occasions. Quality assurance was carried out on a small sample of records, but detailed investigation was limited.

The use of force

- 1.37 The recorded level of incidents involving force was low at 24 in the previous six months. Batons had not been drawn or used in the previous 12 months. Use of force paperwork was of a reasonable standard but some lacked detail and there was not always evidence of attempts to de-escalate. The reasons for using handcuffs when moving some prisoners to the segregation unit were not recorded. We remained unconvinced that all use of force was justified.
- **1.38** Filmed evidence demonstrated appropriate use of force. Incidents of use of force were not reviewed in detail, but were discussed in general terms at the monthly safer custody meeting.
- 1.39 We found two cases where special accommodation had been used during the previous six months. Authorising documentation was only available for one of these cases. In both cases the prisoners were placed in the special cell to be strip-searched before being segregated. The men were locked alone in the special cell. The practice of using the special cell for strip-searching was inappropriate.

Recommendation

1.40 There should be rigorous governance of the use of force, including special accommodation, planned interventions and use of batons. (Repeated recommendation HP 51)

Segregation

- 1.41 During the previous six months, 68 prisoners had been segregated, fewer than at other Category C prisons. Eleven of these were located on the unit for their own protection and 43 were held pending adjudication. This was appropriate in the cases that we reviewed.
- 1.42 Communal areas and showers on the segregation unit were clean and well maintained. The exercise yard was large and contained seats. All cells were clean with in-cell electricity, but toilets remained unscreened.

- 1.43 One cell on the unit was designated as a constant watch gated cell. This was an inappropriate area to locate a prisoner in crisis (see paragraph 1.21).
- 1.44 The segregation regime was satisfactory for most prisoners, but those segregated for their own protection were not allowed to associate. One prisoner had been located in the unit for his own protection for 11 weeks with no access to a meaningful regime. Prisoners on the unit were given a booklet about the regime, which was available in English only. The individual risk-assessed regimes for prisoners that we had seen previously were no longer used.
- 1.45 Relationships between staff and prisoners on the unit were good. At the time of our inspection, two mandatory reviews had been missed for a prisoner held for his own protection. This was quickly rectified, as was the routine review of safety screens following a change in circumstances.
- 1.46 The local segregation policy had been updated but did not reflect changes in national policy.
 Data about all areas of discipline were still collated but not used effectively to analyse trends and patterns or to identify and take action where necessary.

Recommendations

- 1.47 Cells in the segregation unit should contain screens.
- 1.48 Prisoners held in the segregation unit for their own protection should have access to activities and association.
- 1.49 All required reviews of individual segregation, including safety screens, should take place at the correct time.

Substance misuse

Expected outcomes:

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

- 1.50 The substance misuse service was good. Clinical services were delivered by Care UK and psychosocial services by Inclusion, known locally as the drug and alcohol recovery team (DART). The team had a caseload of 80. A good range of recovery focused group-work and one-to-one sessions was available, but there was no up-to-date needs analysis.
- 1.51 Following a recent unexpected reduction in staff numbers in the DART team, group and one-to-one sessions had had to be rescheduled and some prisoners were receiving a reduced service. Wing staff did not always give prisoners their movement slips promptly to enable them to attend DART appointments, which caused frustration among prisoners keen to address their substance use.
- 1.52 An excellent drama group exploring substance use issues was running at the time of the inspection. The week-long course, facilitated by a community group called Unlock Drama, allowed 12 prisoners to explore the effects of their substance use on their families and friends. Those who had difficulty with traditional learning approaches found drama and role play helpful. Participants told us that the course was liberating and thought-provoking. At the end of the week, the participants presented the finished drama to the rest of the prison.

- 1.53 Prisoners could take 12-step fellowships in the tradition of Alcoholics and Narcotics Anonymous. These groups were well attended.
- 1.54 Only one prisoner was receiving opiate substitution therapy at the time of the inspection. The establishment only accepted prisoners on reducing rather than maintenance doses with a view to abstinence when they left Huntercombe.
- 1.55 All relevant policies were in place and daily administration procedures and practices were good. The one prisoner receiving methadone told us he was well cared for by the nursing staff. We observed that he was supervised politely by an officer when he received his daily medication.

Recommendation

1.56 Prisoners should be able to attend pre-arranged appointments with the drug and alcohol recovery team without delays.

Good practice

1.57 The drama group exploring the effects of substance use on families gave prisoners valuable insights into their behaviour.

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 Cells and communal areas on the six wings were clean and in good order. Toilets were screened by curtains or half-height walls in all but the induction wing cells. Most cell furniture was in good repair. Prisoners usually had access to cleaning materials. Noise levels were now acceptable on Mountbatten wing.
- 2.2 The prison was more overcrowded than at the previous inspection with III cells designed for one person used to house two. Most of these cells were cramped and inadequate for two people.
- 2.3 Prisoners said that they were not able to have clean bedding every week, because of limitations on use of the wing laundry rooms. Bed bases were in poor condition and prisoners improvised to make a flat surface.
- 2.4 Communal areas were well used and met the needs of the prisoners. During evening association the atmosphere among staff and prisoners was relaxed and calm. Wing gyms and outdoor space were well kept and used each day. Showers were clean and those on Mountbatten had been refurbished since the last inspection.
- 2.5 There were queues for the telephone on some wings and their location on a busy corridor meant that the areas were often noisy. In our survey, 28% of prisoners against the comparator of 21% said they had difficulty accessing the telephones. Post was administered efficiently, and checks were made to ensure that confidential legal items were treated appropriately.
- 2.6 All written information on the wings was in English, including complaint forms and details of the core day and support services. Other prisoners routinely interpreted for those with limited English and staff placed too much reliance on this (see main recommendation S45).
- 2.7 Cell call bells were answered quickly. Applications were dealt with in good time and most responses were constructive. Prisoners' property was usually stored appropriately and items were located quickly. We found instances of insecure storage of valuable items in the reception area.

Recommendation

2.8 Cells designed for one should not hold two. (Repeated recommendation 2.9)

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.

- 2.9 Relationships between staff and prisoners were on the whole positive and courteous, although some staff did not interact proactively with prisoners. Many staff clearly knew prisoners well and most prisoners said they had somebody they could speak to. We observed a few interactions where staff appeared defensive, but most interactions were appropriate. None of the staff had received training on working with foreign national prisoners.
- 2.10 More prisoners than at comparator prisons said they had a personal officer. The personal officer policy was up to date and provided helpful advice to staff on establishing boundaries and professional relationships. However, it did not cover the specific fears and concerns of this group of prisoners. Personal officers made regular entries in prisoners' electronic case files.
- **2.11** There were some good examples of consultation, including access to the governor. Prisoners were able to speak to senior staff freely and their views and concerns were heard.
- 2.12 Health care and education staff were supportive of prisoners, but many prisoners expressed frustration about the lack of response or courtesy from the offender management unit (OMU) and immigration enforcement staff.

Equality and diversity

Expected outcomes:

The prison demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no prisoner is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The distinct needs of each protected characteristic of 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.

Strategic management

- 2.13 The strategic management of equality and diversity had improved since our last inspection, and was reasonably good. A small dedicated group of equality staff was led by a custodial manager and well supported by senior management. The equality policy had recently been reviewed and reflected the needs of the population. The equality team produced a comprehensive annual report which described themes and trends and provided useful comparison with the previous year.
- 2.14 The quarterly equality action team meetings were well attended, including prisoner representatives from each wing and all senior managers. At the meeting, many aspects of prison life were monitored and discrimination incidents analysed. Data were collated from

¹⁰ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

- the equality monitoring tool and local statistics. Out-of-range data were explored and issues identified. These discussions informed the equality action plan.
- 2.15 Equality information was displayed in the main corridor of the prison and a useful information folder was available on each wing. Twelve prisoner equality representatives were well supported by the equality officer and played an important part in the promotion of equality and diversity. They were particularly active during induction, supporting prisoners with disabilities on the wings and helping prisoners to complete forms.
- 2.16 During the previous six months, 45 discrimination incidents had been reported. This high number may have been caused by the equality representatives raising awareness of how to report incidents. Most discrimination incidents concerned race, disability and religion. The quality of responses varied, but they were timely and any delay was explained. Responses were reviewed by the governor and there was now regular independent external scrutiny. Discrimination incident report forms were freely available on all wings, but only in English.
- **2.17** Prisoners were appropriately supported to disclose their protected characteristics during reception and induction. Regular meetings for some minority groups were facilitated by the chaplaincy.

Recommendation

2.18 Discrimination incident report forms should be freely available in a range of languages.

Protected characteristics

- **2.19** Only four prisoners were known to the prison as gay or bisexual at the time of the inspection. Those we spoke to did not have any concerns about their experience in the prison. The chaplaincy offered support to gay and bisexual prisoners, and the equality team was sensitive to their needs.
- **2.20** Very little material was translated into other languages. There was not enough use of professional telephone interpretation services. We found examples of prisoners interpreting in situations where accuracy or confidentiality was required.
- 2.21 In our survey, 4% of prisoners told us they were Gypsy, Romany or Traveller which suggested about 19 were held, but the prison had only identified two.
- 2.22 About half of the population were black or minority ethic prisoners. In our survey, 41% of black and minority ethnic prisoners said they had been victimised by staff compared to 21% of white prisoners. The prison had already identified areas of potentially unfair treatment such as the use of the IEP scheme and adjudications. A recent MQPL (measuring the quality of prison life) survey had noted negative perceptions by black and minority ethnic prisoners in a number of areas. The equality team were aware of this and were working with equality representatives to investigate this further. Black and minority ethnic prisoners spoke to us of a culture of disrespect and lack of understanding from some staff, but they also told us that some staff were very helpful.
- 2.23 Forty-one prisoners were known to have a disability. All had had a disability assessment, but too many were brief and not reviewed regularly. In our survey, 43% of prisoners with disabilities said that they felt unsafe, 52% that they had been victimised by other prisoners and 57% that they had been victimised by staff. Prisoners we spoke to were unable to

provide examples of victimisation, but spoke more generally of feeling disrespected. There were no support plans on the wings for prisoners with disabilities, but staff knew them well and were aware of their needs. The equality team was particularly knowledgeable about the more complex cases and there were good links with health and social care services. Five prisoners had a personal emergency evacuation plan but they were not regularly reviewed or specific to the individual.

- 2.24 Fifteen prisoners were over 55 years old and the oldest was 70. They were located across all wings but were offered the opportunity to meet once a week in the chaplaincy. This was appreciated and well attended. There was no dedicated gym time for older prisoners but walking football was played once a week. Many older prisoners were still engaged in activities, but those who were not spent most of their time in their cells. One in particular was not receiving the support he needed to keep himself and his cell clean. While many older prisoners were supported appropriately, regular reviews were not undertaken to identify any changing needs.
- 2.25 A register of staff who spoke other languages was held by the equality team, but it was common practice to use fellow prisoners to interpret. Telephone interpretation was not used regularly enough. During the last three months, it had only been used 33 times by seven members of staff, mainly from the OMU and segregation unit (see main recommendation S45).
- 2.26 Home Office immigration enforcement had a permanent presence in the prison and was available seven days a week. They were able to access their own information systems and were well used by prisoners for advice and information. They were very well integrated into the wider prison team and communicated effectively with all departments. Key staff were informed by Home Office immigration enforcement staff in advance of deportation papers and removal directions being served so that appropriate support could be provided. These good relationships among colleagues contrasted with prisoners' perceptions of the immigration enforcement staff (see paragraph 2.12).

Recommendation

2.27 Older prisoners and prisoners with disabilities should be reviewed regularly and detailed support plans should be in place for those who need them.

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.

- **2.28** Faith services were good. In our survey, 73% of prisoners said that their religious beliefs were respected against the comparator of 51%. Almost three-quarters of prisoners said it was easy to attend religious services and 65% said they could speak to a religious leader in private.
- 2.29 The full-time chaplain co-ordinated a team of sessional and volunteer leaders for all faiths. There was high demand for Muslim services and support and two Muslim chaplains provided full-time cover.

- 2.30 The single multi-faith area could accommodate up to 70 prisoners. This was adequate for all services except Muslim Friday prayers, when high demand required prisoners to use the gym.
- 2.31 The chaplaincy was very well integrated into the prison and attended a wide range of multidisciplinary meetings. They provided a good range of pastoral care activities for minority groups. The chaplain had forged links with charities and support groups in other countries to help prisoners who were to be deported.

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.

- 2.32 Over the previous six months, 730 complaints had been submitted. In our survey, 44% of prisoners who had made a complaint said they were dealt with quickly against the comparator of 27%. Complaint forms were available only in English and few staff knew they were produced in other languages.
- 2.33 Responses to complaints were generally appropriate and timely but some replies were hard to read. A recent analysis of complaints had been completed by the equality and safer custody teams. Common themes and trends had been identified but it was not clear if action had been taken as a result.
- 2.34 The complaints administrator compiled a list of the top five complaint themes for the monthly senior management team meeting to discuss. Data monitoring did not drive improvements. Quality assurance arrangements were not robust enough.

Recommendations

- 2.35 Complaint forms should be available in a range of languages.
- 2.36 Robust quality assurance systems should drive improvement in the responses to complaints.

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.

2.37 The legal service officers in place at our previous inspection were no longer in post. The third sector organisation Migrant Help provided helpful but basic legal advice and signposted prisoners to legal representatives. Prisoners could not borrow access-to-justice laptops or use computers to write and print letters. They could dictate letters to peer mentors trained by the St Giles Trust, but this lacked confidentiality. The library stocked a reasonable range of legal text books and forms. Information on the Criminal Casework Review Commission was displayed around the prison. Legal visits took place twice a week in the visits hall but

there was only one consulting room and prisoners could not always consult their solicitors in private.

Recommendation

2.38 Prisoners should be able to consult their solicitors in private.

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.

2.39 The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)¹¹ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. The CQC found there were no breaches of the relevant regulations.

Governance arrangements

- **2.40** Care UK was the prime provider of health care services, but subcontracted some specialist services to other providers. There was an effective working relationship with NHS England commissioners.
- 2.41 A health needs assessment had been completed in August 2015 and an NHS England quality visit had taken place in November 2016. Some service gaps identified in the reports remained, including access to physiotherapy and limited identification of learning disability.
- 2.42 The health care team held a weekly quality assurance and governance meeting. Issues identified at the meeting were followed up and lessons were learned from complaints. There was a suitable range of policies and protocols.
- 2.43 Nurses were available between 7.45am and 6.30pm on weekdays and 8.30am to 4.30pm at weekends and bank holidays. There was a suitable skill mix and all the permanent nursing team had recent experience in acute health care outside the prison. During health service hours, there was access to a GP and out-of-hours cover was provided through the NHS III service in line with community arrangements.
- 2.44 Mandatory staff training included intermediate life support and safeguarding and all staff were up to date. A safeguarding alert had been raised appropriately in the last year. New nursing staff were appropriately inducted to work in a prison health care setting.
- **2.45** There were plans to train nursing staff to manage the care of prisoners' long-term conditions and provide immunisations. At the time of our inspection, GPs appropriately cared for prisoners with long-term conditions.

¹¹ CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: http://www.cqc.org.uk.

- **2.46** Screening for blood-borne viruses was offered and regular sexual health clinics were delivered by community specialist services. There was no routine chlamydia screening.
- 2.47 An initiative was being developed to increase immunisation rates and introduce routine screening for bowel cancer, retinal conditions and abdominal aortic aneurysms.
- 2.48 Prisoners could complain in confidence and responses were timely and focused. Prisoner health forums were held every other month. A Patient Advice and Liaison Service prisoner orderly signposted prisoners with limited English to the complaints processes and encouraged prisoners to complete the monthly feedback survey.
- 2.49 Health literature, including the complaint form, was in English only. Health care staff used telephone interpreting services appropriately for consultations. Consent for information sharing was not always sought during reception screening because of a technical issue with SystmOne (electronic case records). We were assured that this would be resolved.
- 2.50 Incidents were regularly recorded, appropriate action taken and learning shared. We reviewed an example of the effective use of the Duty of Candour¹² which included a suitable apology and explanation to the prisoner, an incident log and an entry on the individual clinical record. A learning from events discussion was held at the weekly team meeting.
- **2.5 I** Care planning was good for prisoners with the most serious, complex conditions. One prisoner with complex palliative care needs was well supported through a detailed care plan shared with prison staff. However, prison staff were not always sufficiently aware of the risks associated with long-term conditions such as asthma, angina, diabetes and epilepsy.
- 2.52 Prisoners waited 10 weeks for a routine physiotherapy appointment, which was too long. Additional funding had been secured to provide additional sessions and reduce waiting times.
- 2.53 A dietician provided excellent care for prisoners, including a weight management clinic and pre-diabetes identification. A protocol was being developed for restarting food following prisoner food refusals.
- **2.54** There was an established referral pathway to the local authority occupational therapist for assessment of mobility and equipment needs. This service had been used on several occasions in the last year.
- 2.55 Treatment rooms were clinically clean and compliant with infection control. Cleaning arrangements were suitable. Emergency arrangements were sound, but there were some gaps in the records of daily equipment checks. We found a few out-of-date items which were rectified during the inspection. Automated external defibrillators (AEDs) were stored in a health care office and the substance misuse treatment room but not on the residential units of the gym. This may have caused unnecessary delay in the event of an emergency. All custodial managers had received up-to-date basic life support skills training and some staff were trained to use an AED.

¹² The Duty of Candour is a legal duty on hospital, community and mental health trusts to inform and apologise to patients if there have been mistakes in their care that have led to significant harm. (Regulation 20, CQC. March 2015)

Recommendations

- 2.56 Waiting times for physiotherapy appointments should reflect community waiting times.
- 2.57 All wing and gym staff should have timely access to emergency equipment and automated external defibrillators.

Good practice

- **2.58** The detailed shared care plan for a man with complex palliative care needs helped prison staff to understand his condition and provide appropriate care for him.
- **2.59** Use of a dietitian to provide education and support for overweight prisoners and those with dietary needs improved their health and wellbeing.

Delivery of care (physical health)

- 2.60 In our survey, more prisoners than at comparable prisons said they had good access to nurses. We found good access and care by nurses and GPs, with urgent needs appropriately prioritised following nurse triage at daily walk-in clinics.
- **2.61** An initial health screening on arrival provided effective identification of immediate risks and needs and there was appropriate information sharing between health care and prison staff.
- 2.62 A comprehensive secondary health assessment included measurement of blood sugar (for diabetes), peak flow (lung function), height, weight and waist circumference. Appropriate referrals were made to the GP, mental health and substance misuse service.
- 2.63 There was no telephone in the reception health care room and prisoners with limited English were taken to the health care department to use telephone interpreting. All health literature was available in English only (see main recommendation S45).
- 2.64 Arrangements for prisoners requiring secondary care were sound. An agreed protocol between the health care department and the local hospital supported improved liaison and continuity of care for prisoners attending or admitted to hospital. Clinical records were clear and factual and supported effective communication of key issues.

Good practice

2.65 The joint protocol with the local hospital promoted continuity of care for prisoners attending or admitted to hospital.

Pharmacy

2.66 Nurses and the pharmacy technician administered medicines using electronic administration on SystmOne. Prisoners could obtain small supplies of simple pain relief medicines under the 'special sick' 13 policy.

¹³ Immediate health treatment without an appointment.

- 2.67 General medicines were administered from the main health care hatch at 8.15am, 11.30am and 4.15pm. Any night time medicines were administered at 6pm. Opiate substitution was administered at 1.45pm from the substance misuse treatment room. Officers supervised regularly except for the 11.30am medicines administration (tradable medicines only). The prison agreed to resolve this during our inspection.
- **2.68** Nurses transported medicines for prisoners in the segregation unit already decanted into unlabelled containers, which was potentially unsafe.
- 2.69 Most prisoners were able to keep their medicines in possession. Risk assessments were completed on arrival and attached to patient records. Not all prisoners had an individual locked cupboard in their cells.
- **2.70** Urgent prescriptions could be supplied on the same day, and there was a suitable range of stock medicines for emergency use.
- 2.71 An agreed formulary informed prescribing by the GPs. There was a sound evidence based approach to pain prescribing and high-risk and tradable medicines were monitored. A range of patient group directions (PGDs)¹⁴ had been authorised with imminent plans to train staff to use them.
- 2.72 The pharmacy technician carried out medicine use reviews with patients and supported the smoking cessation clinic. A range of suitable policies and procedures was reviewed on a rolling basis.
- 2.73 Medicines storage was effective, including appropriate date checking and temperature monitoring. The two controlled drug registers did not meet the current regulations. Original prescriptions were not retained after being dispensed.
- **2.74** The medicines management committee met monthly, with appropriate representation and good attendance, to analyse the prescribing data in detail.

Recommendations

- 2.75 Medicines should not be transferred from pharmacy labelled packs into unlabelled containers.
- 2.76 Original prescriptions should be retained for audit purposes.

Dentistry

- 2.77 Prisoners waited up to 11 weeks for a routine dental appointment, which was too long. Funding had been secured to run one additional session a month to reduce waiting times.
- 2.78 Men with oral pain or infection were appropriately prioritised through nurse triage at the daily walk-in clinic. The dentist provided individual oral health education.
- 2.79 Dental records on SystmOne were clear and contained helpful information that was accessible to all clinical staff. The dental suite window blinds were not always closed, and

¹⁴ PGDs authorise registered nurses and other designated health professionals with specific training to prescribe medicines to groups of patients, subject to specific criteria being fulfilled.

- prisoners undergoing treatment were visible to anyone passing outside. This was remedied immediately following our inspection.
- **2.80** The newly installed dental suite was clean with clearly identified clean/dirty flows to support effective infection control. Equipment was maintained and serviced appropriately.

Recommendation

2.81 Waits for routine dental appointments should be reduced to reflect community waiting times.

Delivery of care (mental health)

- 2.82 The mental health service reflected the positive collaboration between the two main health providers. The integrated team included nurses, psychiatrists and a psychologist. There was no dedicated learning disability service, although advice could be sought from the wider mental health trust services.
- 2.83 There was good access to services and prisoners could be referred by any member of staff or could refer themselves. All new referrals were reviewed and allocated at a weekly meeting records of which were kept.
- 2.84 New routine referrals were seen within a maximum of six days and urgent referrals could usually be seen the same day and always within three days. Most new referrals were initially assessed by the primary mental health nurse. Prisoners with established serious and enduring mental health problems were cared for by the community psychiatric nurses and reviewed by the psychiatrist as necessary.
- 2.85 We observed clinically effective and sensitive consultations with nurses who had established suitable links with other health services and prison departments to support prisoners. Clinical records included evidence of suitable risk assessment, review and care plans. Recognised mental health assessment tools were employed to identify risks and progress.
- **2.86** Prisoners could attend groups focusing on sleep problems, relaxation and meditation.
- 2.87 A psychologist provided a trauma service for prisoners with post-traumatic stress disorder, although men sometimes waited a few weeks to access this service. All new specialist psychiatric prescribing was initiated by the psychiatrist with appropriate continuation by GPs. There was a sound process for ensuring review of key clinical indicators of men on anti-psychotic medication.
- **2.88** Mental health nurses attended all assessment, care in custody and teamwork (ACCT) reviews for prisoners at risk of suicide or self-harm.
- **2.89** During the previous 10 months, there had been three direct transfers to secure mental hospitals. Two of the transfers had been very delayed: one took six months and the other nine weeks from identification of need to transfer.
- **2.90** Three-quarters of the prison staff had received mental health awareness training from the mental health service, far more than we usually find.

Recommendation

2.91 Transfers of prisoners to secure mental hospitals should be timely.

Good practice

- **2.92** Group work and a trauma service supported prisoners with sleep difficulties and distress from trauma.
- **2.93** The high number of prison staff who had received mental health training supported prisoners with anxiety and depression.

Social care

2.94 The prison had developed an effective working relationship with Oxford County Council to assess prisoners with potential social care needs. A joint memorandum of understanding was in the process of being formally ratified. Two referrals had been made in the previous year but they did not meet the criteria. We did not find prisoners with unmet social care needs.

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.

- 2.95 Only 31% of prisoners in our survey said the food was good or very good and the food we tasted was unappetising. Portion sizes were appropriate. The menu was on a five-week cycle, with vegan, vegetarian and hal'al options available. Breakfast packs were served the night before they were eaten. The lunch and evening meal were served too early, at 11.45am and 4.45pm respectively. Attempts were made to cater for the multinational population, with international dishes served occasionally. Men could use toasters and microwaves on their residential units. Good efforts were made to cater for the needs of men with special diets.
- 2.96 Consultation arrangements were reasonably good. The catering manager met wing servery staff every Monday to discuss food issues. However, food comments books were not fully used. The book we looked at had not been checked by a member of the catering team since May 2016, nine months before our inspection.
- **2.97** The 20 prisoners who worked in the kitchen could not gain catering qualifications other than a basic food hygiene certificate. The kitchen was cramped and not all the equipment was in working order.

Purchases

Expected outcomes:

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

- **2.98** The canteen list included goods which met the needs of the diverse range of prisoners, and it was regularly reviewed. A fortnightly ordering system was in place and ordered goods arrived quickly.
- **2.99** The system of ordering from catalogues had caused much frustration to prisoners. There were long delays before goods were received, so that some prisoners who had ordered warm coats for the winter had still not received them four months later. The prison had tried unsuccessfully to resolve the problem.

Recommendation

2.100 Prisoners should be able to buy clothes and other items without undue delays.

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.¹⁵

- The core day allowed fully employed prisoners over 10 hours out of their cells on weekdays, which was good. Part-time workers and those who were unemployed were unlocked less. The few prisoners on restricted regimes, such as the basic incentives and earned privileges level who did not attend activities, could experience as little as an hour and a half unlocked each day, which was unacceptable.
- 3.2 The daily regime worked well and gave prisoners good access to outside exercise, association and time to complete domestic tasks. There was no evidence of regime slippage but we did observe frequent curtailment of planned activities such as the tiling workshop.
- 3.3 During roll checks conducted during the working day we found an average of 12% of prisoners locked up, twice as many as at the last inspection but still not excessive.

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.

3.4 Ofsted ¹⁶ made the following assessments about the learning and skills and work provision:

Overall effectiveness of learning and skills and work:	Good
Achievements of prisoners engaged in learning and skills and work:	Good
Quality of learning and skills and work provision, including the quality of teaching, training, learning and assessment:	Good
Personal development and behaviour:	Good
Leadership and management of learning and skills and work:	Good

¹⁵ 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.

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Management of learning and skills and work

- Prison managers and the provider, Milton Keynes College, had a thorough understanding of the services that foreign national prisoners required. They planned and introduced a good range of qualifications and vocational training which increased prisoners' chances of employment on release to their home countries. Managers consulted prisoners frequently, seeking their views about the provision and modifying it to ensure that prisoners' learning was relevant to work in their home countries. For example, tutors changed one qualification, based principally on the English legal system and not applicable in prisoners' countries. The new qualification developed a broader understanding of good customer service.
- 3.6 Prison managers had high aspirations for regular and punctual attendance at sessions, so that prisoners made the best of their allocated study and training time. A useful peer mentoring scheme encouraged prisoners to engage in education and training. The scheme also enhanced the mentors' negotiating and communication skills. Prison managers successfully motivated prisoners to improve their English and mathematics. However, not all prisoners could get onto an ESOL (English for speakers of other languages) course because Milton Keynes College managers had been unable to recruit enough teachers.
- 3.7 The Milton Keynes College provision was good. College managers had implemented effective quality improvements resulting in good standards of teaching, learning and assessment. They observed education and training sessions regularly and used their findings well to improve the performance of tutors. They used data well to analyse, monitor and improve prisoners' achievements. Managers ensured that the proportion of prisoners who gained qualifications improved. Prison managers had introduced 'learning walks' to monitor the quality of the vocational training. However, the monitoring and improvement of training in prison work required further development. The instructors had benefited from a number of staff development events, such as setting learning targets and embedding English and mathematics in their training. However, not all instructors were proficient in using effective training and assessment practices.
- 3.8 Managers had the capacity to improve the provision further and had an accurate understanding of the strengths and weaknesses. To increase the pace of improvements, they had developed more effective arrangements to share good practice between tutors in education and instructors in vocational training and prison work. They worked well with other prisons in the region to improve the quality of the teaching and training activities. Managers had implemented successfully most of the recommendations made at the previous inspection. We found that they took swift action when health and safety issues or concerns about working practices required investigation.

Recommendation

3.9 Prison managers should robustly evaluate the quality of training and assessment in prison workshops, and should use their findings to improve instructors' training practices.

Provision of activities

3.10 There were not enough full-time activities to engage the whole population in full-time or part-time activities throughout the week. The prison offered 129 full-time and 318 part-time places through prison work. Prisoners attended 54 full-time places and 140 part-time places on education courses.

- 3.11 Well-informed prison and College staff and orderlies provided prisoners with useful information on the education, training and work opportunities available to them. The vast majority of prisoners were speakers of other languages. Most had low levels of skills in spoken and written English, and a small minority had difficulty in speaking and understanding English.
- 3.12 Staff took account of prisoners' preferences to allocate them to education, training or prison work promptly and equitably. Most prisoners started on purposeful activities soon after their arrival. Managers set pay rates which encouraged prisoners to attend education and motivated them to improve their English before starting prison work. Some prisoners waited too long to start their ESOL courses (see paragraph 3.6).
- 3.13 Prisoners attended vocational courses in tiling, painting and decorating, hospitality and barbering. They benefited from a good range of prison work opportunities including industrial cleaning, cleaning and maintenance roles on wings, orderlies in the library and gym, teaching assistants and peer mentors. Prisoners benefited from an appropriate range of education courses such as art, business enterprise, English, mathematics, ESOL and information and communication technology. Six prisoners were studying Open University and distance learning courses.

Recommendations

- 3.14 The number of activity places should be increased to meet the needs of the population.
- 3.15 There should be an adequate number of places on ESOL courses to meet the needs of the population.

Quality of provision

- 3.16 Most tutors and instructors had a good understanding of barriers to learning and adapted their teaching and training to enable prisoners to progress. They coached prisoners well to help them develop new skills. However, a minority of tutors and instructors did not ensure that the range of learning activities helped all prisoners to improve their competencies, especially the most able. For example, in an information technology lesson the work was set at a lower level than the prisoners' ability.
- 3.17 Prisoners received good additional learning support from specialist tutors. Across all the learning and skills provision, suitably selected prisoners acted as peer teaching assistants in classrooms and workshops, providing effective support and encouragement. Many prisoners benefited from the Turning Pages¹⁷ literacy scheme which had been implemented effectively. A minority of tutors and instructors did not ensure that the work of peer teaching assistants and the specialist tutors was well coordinated. The supervision of peer teaching assistants by instructors required improvement.
- 3.18 The instructors in barbering were skilled and had high expectations of prisoners. They were particularly good at linking practical skills and technical knowledge, and prisoners developed outstanding barbering skills. Most prisoners who started the course were successful, and they recognised the employment opportunities and benefits of the course.

¹⁷ A reading programme created by the Shannon Trust, written specifically for adults (unlike its predecessor Toe by Toe) and delivered by peer mentors.

- 3.19 Most tutors and instructors maintained detailed records of individual progress. This was particularly effective when prisoners studied at different levels and aspects of courses. For example, in art lessons tutors recorded each prisoner's development of skills using watercolours, oils and acrylic paints. Most prisoners knew the level of their progress and how to achieve further success. Instructors recorded the development of wider skills such as teamwork.
- 3.20 Assessment practices were reliable and timely. Tutors and instructors provided regular feedback to prisoners on how to improve their work. Most tutors challenged prisoners well to extend their knowledge and practical skills. However, a minority of tutors and instructors did not have high expectations of prisoners and their feedback did not help prisoners to produce better work or fulfil their potential.
- 3.21 Many prisoners recognised the value of English and mathematics to their progress, and most tutors helped them to improve in these subjects in education. However, their low level of English affected the ability of many prisoners to progress in mathematics. Most work instructors did not develop prisoners' English and mathematics well enough. Peer teaching assistants used signs and simple words to guide prisoners with little knowledge of English through the sessions. These prisoners did not develop their skills well.
- 3.22 Tutors and instructors set high standards for prisoners' behaviour and conduct. They worked hard to ensure that most prison work areas and classrooms were clean and tidy with excellent, vibrant wall displays, some of which included prisoners' work.
- **3.23** Tutors supported prisoners on their Open University and distance learning courses. However, prisoners did not benefit from the virtual campus 18 because it was not connected to the intranet.

Recommendations

- 3.24 All tutors and instructors should set clear and challenging targets for prisoners' skill development. Learning activities should help to enhance prisoners' existing knowledge, particularly the most able.
- 3.25 Instructors should routinely develop prisoners' use of English and mathematics.
- 3.26 Tutors and instructors should effectively plan and supervise the work of peer teaching assistants in teaching and training activities.
- 3.27 The virtual campus should be operational and used well.

Personal development and behaviour

In lessons, vocational training and work, prisoners conducted themselves well and were respectful. They were also keen to help and support each other. Prisoners took pride in their work which they were keen to show us. Their attendance and punctuality in lessons, vocational training and work was good. The vast majority of absentees had justifiable reasons, for example visits to health care, legal advice or chaplaincy.

¹⁸ Internet access for prisoners to community education, training and employment opportunities.

3.29 Good quality careers advice helped prisoners to make informed choices about courses that best prepared them for life after leaving the UK. Prisoners' development of written and communication skills in English was not good enough.

Education and vocational achievements

- 3.30 In general prisoners made good progress given their low starting points and the personal challenges they faced. A high proportion of prisoners gained their qualifications. Prisoners who started on most courses were successful.
- 3.31 Prisoners underperformed in a few courses, including functional skills in English. During 2015 to 2016, too many prisoners who started their ESOL courses had left without achieving, but all those who stayed had been successful.
- 3.32 The standard of prisoners' work was good but too few produced work of outstanding quality. Prisoners on Open University and distance learning courses increased their knowledge in their chosen area of study. A minority of prisoners did not develop good industrial practices because instructors did not promote them adequately.

Recommendation

3.33 Managers should ensure that instructors always use good industrial practices, so that prisoners develop the working practices that employers expect.

Library

- 3.34 The well-resourced library was managed by a qualified librarian. Prisoners received a good induction. The library provided an inviting and friendly environment with space for independent and group study. There was an adequate range of reading materials and resources in a number of languages, including books, audio, periodicals and newspapers. Resources were obtained from foreign embassies. A mobile library service was delivered on the wings.
- 3.35 Most prisoners attended the library once a week. However, access was limited as the library was closed on Fridays, weekends and evenings. Library staff did not collect and analyse information about prisoners who used the library and could not, therefore, ensure equitable access for all prisoners.
- 3.36 A number of initiatives previously in place to help prisoners develop their reading skills had been suspended because of staffing issues. Although the library was part of Oxford County Council, previous stock loss rates prevented the library from participating in the inter-library lending scheme.

Recommendations

- 3.37 The library should be open at weekends and in the evenings.
- 3.38 Library staff should collect and analyse information about the different groups of prisoners who use the library, so that they can ensure that the library service meets the needs of all prisoners.

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 Prisoners benefited from a well-equipped gym, a weights room and an outdoor artificial pitch. Prisoners had access to a small range of cardiovascular equipment on each wing. However, the responsibility for the regular monitoring of gym facilities on the wings was not clear.
- 3.40 Prisoners were offered a useful induction to the gym with emphasis on health and safety and healthy living. Gym instructors ensured that prisoners understood the safe use of the gym equipment and assessed prisoners' health for the use of facilities.
- 3.41 A high proportion of prisoners used the gym facilities. Most used the main gym at least twice a week and a large majority attended three times or more. A range of evening and weekend activities were available. Prisoners who had achieved the personal trainer qualification acted as wing champions and successfully encouraged prisoners to attend regularly.
- **3.42** Gym instructors planned recreational and remedial PE activities well and had developed effective links with health care. Remedial sessions for prisoners with health concerns were planned and offered in consultation with health care.
- **3.43** Gym staff had introduced a good range of relevant PE qualifications, including a level 2 qualification in spin instructor training and a level 3 in personal training. All prisoners who started courses completed them.

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** The reducing re-offending strategy was specific to the foreign national population. It reflected the national policy on foreign national prisoners and primarily focused on removal rather than offender management and resettlement.
- 4.2 Quality assurance meetings every two months focused primarily on education, learning and skills work with little discussion on resettlement and reducing re-offending. The offender management unit (OMU) was not represented at these meetings.
- 4.3 The OMU was poorly resourced (see paragraph 4.6). Many prisoners, including some very high risk, were removed or released without having their offending risks addressed (see main recommendation \$44 and paragraph 4.44).
- 4.4 Huntercombe had been benchmarked as a category C training prison rather than a resettlement prison. There was, therefore, no community rehabilitation company (CRC) to assess and address prisoners' resettlement needs. This was reflected in our survey where prisoners reported little awareness of support across most of the resettlement pathways.

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.

- The National Probation Service was responsible for managing all the men held in the prison. Despite this, in our survey only 41% of prisoners said they had a named offender manager in the community against the comparator of 81% and 72% at the previous inspection. In addition, only 38% said they had a named offender supervisor and 35% a sentence plan.
- 4.6 The structures and resources to manage offenders were inadequate. There were only six offender supervisor posts in the OMU, of which three were filled at the time of the inspection: two probation staff and a prison offender supervisor. Each offender supervisor managed a combination of high, medium and low risk cases. With only three staff responsible for about 480 prisoners, there was little contact between them and their allocated prisoners. A senior probation officer attended the prison monthly and was responsible for countersigning OASys (offender assessment system) and supervising probation staff.
- 4.7 Ninety-two prisoners had no OASys and a further 72 had an out-of-date OASys, most of which were the responsibility of the prison to complete rather than the community offender manager. Too many men arrived without a completed OASys, which compounded the

- problem as Huntercombe was not resourced to complete initial assessments (see main recommendation S44).
- 4.8 Offender supervisors often only completed a brief OASys risk review to identify high and medium risk prisoners who did not want to return to their country of origin. These men, who were to be released into the community, were prioritised by the OMU for OASys completion but little else (see paragraph 4.16). There was no offending behaviour work (see paragraph 4.43) beyond in-cell work booklets which were in the early stages of development. Sentence planning did not drive the sentence in most cases and prisoners' experience was dominated by immigration concerns.
- **4.9** Offender supervisors did little to support or motivate prisoners. Prisoners complained of the inaccessibility of offender supervisors and an inability to complete work to progress through their sentence plan.
- 4.10 Release on temporary licence (ROTL) was no longer used. Many men who had been issued with a deportation order and had exhausted all rights of appeal were not eligible, but this was not the case for all prisoners. To be eligible for ROTL, prisoners also had to be assessed by immigration enforcement as a very low risk of absconding. This almost never happened. Despite this, the prison had revised the ROTL policy and was hoping to re-introduce it to enable prisoners to work in the gardens.
- **4.11** Release on home detention curfew (HDC) was similarly not used. Under prevailing policy, while foreign national prisoners were technically eligible for HDC, those for whom a decision to deport had been made or was likely were not eligible. This affected the majority of the population.

Recommendations

- 4.12 All prisoners should have an up-to-date OASys assessment and a sentence plan which can be progressed and achieved by appropriate interventions and regular support from an offender supervisor.
- 4.13 Release on temporary licence should be used for resettlement purposes with relevant prisoners following an individual risk assessment which sets out clear evidence for any risks they pose.

Public protection

- 4.14 Initial public protection procedures were reasonably good. Relevant cases were identified on arrival by an administrator and added to a database which other staff could use as required. Monitoring restrictions were implemented quickly and reviewed regularly.
- 4.15 At the time of the inspection, there were 42 sex offenders, 33 harassment cases and five child protection cases. There were no level 3 multi-agency public protection arrangement (MAPPA) cases and three level 2 MAPPA cases. Four men were on monitoring restrictions, three on mail monitoring only and one on mail and telephone monitoring.
- 4.16 The OMU appropriately prioritised high-risk prisoners who were appealing their deportation to co-ordinate safe release arrangements (see paragraph 4.8). Monthly interdepartmental risk management team (IRMT) meetings were usually well attended, including by the security department, and were chaired by the senior probation officer or the head of the OMU.

- Offender supervisors also attended, and detailed information was presented to the meeting. The quality of MAPPA reports produced by offender supervisors was reasonable.
- 4.17 Despite expedient and persistent follow up by the OMU, it was evident that community offender managers did not always confirm MAPPA levels or arrange MAPPA meetings in a timely manner. Staff said this was at least in part a reflection of the low priority given to foreign national prisoners by community offender managers because they incorrectly assumed that they would all be removed from the UK.

Recommendation

4.18 HMPPS should ensure expeditious assessment of multi-agency public protection arrangements (MAPPA) levels. (Repeated recommendation 4.22)

Categorisation

4.19 Unlike the previous inspection, no category D prisoners were held and no prisoners had been re-categorised to D during the last six months. Stringent eligibility criteria in the Prison Service instruction required foreign national prisoners to be assessed as a very low risk of absconding (in addition to other criteria) in order to obtain category D status. In practice, no prisoners were considered low risk by immigration enforcement, including men who wanted to return to their country of origin. This meant that potentially suitable prisoners were not re-categorised to open conditions because they were of interest to immigration enforcement, rather than on the basis of their individual risk.

Recommendation

4.20 Re-categorisation decisions should be made on the basis of individual risk assessments and supported by clear evidence of the risks posed.

Indeterminate sentence prisoners

- **4.21** There were three indeterminate sentence prisoners (ISPs) at the establishment, all of whom had life sentences. One prisoner had recently been approved for the tariff expiry removal scheme and would be removed from the UK on expiry of the minimum tariff set by the court.
- **4.22** There were no specific services for ISPs, which was appropriate given their low numbers.

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.

- **4.23** During the previous six months, 12 men had been released into the community and 185 had been deported, repatriated or transferred to immigration detention. Some men transferred into immigration detention would eventually be released into the UK on bail or because immigration enforcement were no longer pursuing deportation. The prison did not know how many men were ultimately released into the community.
- 4.24 Men often arrived with no basic custodial screening completed. In the absence of a CRC, there was no co-ordinated assessment of release or resettlement needs (with the exception of good work by the OMU to ensure that MAPPA cases were released safely see paragraph 4.16). Little was done to address prisoners' needs beyond useful support from peer mentors. Links had been made with some third sector organisations in the UK. Migrant Help, Bail for Immigration Detainees and the Salvation Army attended the prison.

Recommendation

4.25 There should be a co-ordinated assessment of prisoners' release and resettlement needs. Action should be taken to meet these needs before release or transfer.

Accommodation

- **4.26** Only 5% of the men who had left Huntercombe in the past year had resettled directly in to the community. The remainder had been transferred to immigration removal centres or other prisons or had been removed from the country. We were advised that all who were released had had appropriate, settled accommodation.
- 4.27 In our survey, fewer prisoners than the comparator and the last inspection said they knew who to go to for help with accommodation. There was no specialist accommodation advice. The St Giles trained peer supporters provided useful support but assistance was limited for those being removed abroad.

Education, training and employment

- 4.28 The quality of the National Careers Service provided by Advisa was good. All prisoners benefited from an initial interview to help them determine their best options and improve their chances of successful resettlement. The vast majority of prisoners had follow-up meetings to seek further guidance and support. Prisoners benefited from good advice and guidance from the St Giles mentors.
- **4.29** The well-qualified and experienced part-time adviser used induction well to ensure that all prisoners were aware of the service offered. Prisoners received good advice on their education and training options. Prison staff worked hard to provide information about

¹⁹ Repatriation occurs when a prisoner is transferred to a prison in their country of origin to complete their sentence.

employment opportunities in the prisoners' home countries. Prisoners were provided with the most up-to-date labour market data and information about the barriers to employment for prisoners returning home from the UK. Where available, staff provided prisoners with contact details for charitable organisations in other countries which supported returning prisoners.

Health care

- **4.30** There was effective discharge planning for prisoners being transferred or deported. Prisoners were given advice on how to manage their conditions on arrival, and provided with prescribed medicines that reflected availability in the destination country.
- **4.31** Prisoners with mental health problems were linked with similar services where possible and the chaplaincy made efforts to link them with voluntary agencies in their destination countries.

Drugs and alcohol

4.32 The drug and alcohol recovery team (DART) worked with prisoners nearing their deportation or release date to devise release plans for on-going harm reduction, recovery and support. Wherever possible, referrals were made to community agencies abroad for post-release support, but these release plans were not routinely shared between the DART and the OMU.

Finance, benefit and debt

4.33 In our survey, fewer prisoners than the comparator said they knew of somebody in the prison who could help them with finances or benefits on release. Support with finance, benefit and debt was limited, particularly for prisoners returning abroad. There was no specialist provision and prisoners relied on the St Giles trained peer supporters to help them with signposting to other agencies.

Recommendation

4.34 Information and advice on finance, benefit and debt should be available for those returning abroad. (Repeated recommendation 4.35)

Children, families and contact with the outside world

- 4.35 Prisoners with families living abroad were able to exchange visits for telephone calls. In 2016, only five prisoners had been on accumulated visits to prisons closer to their families. ROTL was not being used at all to maintain family links.
- 4.36 More prisoners (28%) than the comparator (21%) said in our survey that they had had problems getting access to telephones. Many prisoners complained to us about expensive telephone costs. This was being investigated as part of the equality action plan.
- **4.37** The visits hall had recently been refurbished and offered a bright welcoming space. The session that we observed was calm and well ordered. A popular dedicated children's play

- area was well equipped with toys and activities. A small snack bar run by prisoners offered affordable food and drinks for purchase by visitors.
- 4.38 Visits were booked on a dedicated telephone line or email, both of which were easy to use. Social visits were held four times a week. There was space for 21 prisoners at each session, which was adequate to meet demand. During the inspection, we observed the visits session starting 30 minutes later than advertised. Prisoners and visitors said this was a regular occurrence.
- 4.39 Regular family days were held on average once a month. Each session could accommodate 10 prisoners and their families. Lunch was provided free by the prison, and a local charity helped to support the children during the day. We were told that this longer, more relaxed visit was often used by families who travelled from abroad and was therefore very popular with prisoners and their visitors. Family visits were oversubscribed. At the time of the inspection, 38 prisoners were on the waiting list.
- **4.40** The support offered to prisoners to repair and maintain relationships was very limited. In our survey, only 35% of prisoners said that staff supported them to maintain family ties. Parent craft courses and Storybook Dads²⁰ were no longer running.

Recommendations

- 4.41 Social visits should start at the advertised time.
- 4.42 Prisoners should be able to access support designed to repair and maintain relationships.

Attitudes, thinking and behaviour

- 4.43 The prison did not deliver any accredited offending behaviour programmes and the non-accredited programmes in place at the previous inspection were no longer delivered. The OMU applied for men to be transferred to other prisons to complete programmes, particularly the sex offender treatment programme. However, only four men had successfully been transferred during 2016.
- **4.44** Men were deported or released having done little or no offending behaviour work to reduce their risk of re-offending (see main recommendation S44). No formal national information-sharing protocols were in place to ensure that receiving countries knew of the risk posed by returning men.

Recommendation

4.45 Prisoners assessed as needing accredited offending behaviour interventions should be able to complete them during their sentence. (Repeated recommendation 4.42)

²⁰ A project for prisoners to record stories for their children.

Section 5. Summary of recommendations and good practice

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

Main recommendation

To the Ministry of Justice

5.1 The Ministry of Justice (MOJ) should clarify the role of, and resolve systemic problems with, offender management and resettlement in foreign national prisons to ensure that the needs of prisoners, including the risks they pose, are addressed before they are released or removed. (S44)

Main recommendation

To the governor

5.2 Basic information about the prison and the regime should be available in the main languages spoken by prisoners, and key notices should be displayed in these languages. Telephone interpreting should be used in all cases where confidentiality or accuracy is required. (S45)

Recommendation

To HMPPS

5.3 Prisoners' property should arrive at the establishment with them. (1.4)

Recommendations

To the governor

Bullying and violence reduction

5.4 The reasons for prisoners' negative perceptions of safety should be addressed. (1.17)

Self-harm and suicide

- Weaknesses in ACCT procedures should be addressed, particularly the consistency of case management, quality of care maps and adherence to levels of observation. (1.23)
- Prisoners on an open ACCT should only be held in segregation if there are exceptional reasons for doing so. (1.24)

Security

5.7 Closed visits should only be used for reasons relating directly to the trafficking of unauthorised articles through visits. (1.31)

Incentives and earned privileges

The incentives and earned privileges scheme should encourage positive behaviour through meaningful incentives and differentials between levels. (1.34)

Discipline

- There should be rigorous governance of the use of force, including special accommodation, planned interventions and use of batons. (1.40)
- **5.10** Cells in the segregation unit should contain screens. (1.47)
- **5.11** Prisoners held in the segregation unit for their own protection should have access to activities and association. (1.48)
- **5.12** All required reviews of individual segregation, including safety screens, should take place at the correct time. (1.49)

Substance misuse

5.13 Prisoners should be able to attend pre-arranged appointments with the drug and alcohol recovery team without delays. (1.56)

Residential units

5.14 Cells designed for one should not hold two. (2.8)

Equality and diversity

- 5.15 Discrimination incident report forms should be freely available in a range of languages. (2.18)
- **5.16** Older prisoners and prisoners with disabilities should be reviewed regularly and detailed support plans should be in place for those who need them. (2.27)

Complaints

- **5.17** Complaint forms should be available in a range of languages. (2.35)
- **5.18** Robust quality assurance systems should drive improvement in the responses to complaints. (2.36)

Legal rights

5.19 Prisoners should be able to consult their solicitors in private. (2.38)

Health services

- **5.20** Waiting times for physiotherapy appointments should reflect community waiting times. (2.56)
- **5.21** All wing and gym staff should have timely access to emergency equipment and automated external defibrillators. (2.57)

- **5.22** Medicines should not be transferred from pharmacy labelled packs into unlabelled containers. (2.75)
- **5.23** Original prescriptions should be retained for audit purposes. (2.76)
- **5.24** Waits for routine dental appointments should be reduced to reflect community waiting times. (2.81)
- **5.25** Transfers of prisoners to secure mental hospitals should be timely. (2.91)

Purchases

5.26 Prisoners should be able to buy clothes and other items without undue delays. (2.100)

Learning and skills and work activities

- 5.27 Prison managers should robustly evaluate the quality of training and assessment in prison workshops, and should use their findings to improve instructors' training practices. (3.9)
- The number of activity places should be increased to meet the needs of the population. (3.14)
- **5.29** There should be an adequate number of places on ESOL courses to meet the needs of the population. (3.15)
- **5.30** All tutors and instructors should set clear and challenging targets for prisoners' skill development. Learning activities help to enhance prisoners' existing knowledge, particularly the most able. (3.24)
- **5.31** Instructors should routinely develop prisoners' use of English and mathematics. (3.25)
- **5.32** Tutors and instructors should effectively plan and supervise the work of peer teaching assistants in teaching and training activities. (3.26)
- **5.33** The virtual campus should be operational and used well. (3.27)
- **5.34** Managers should ensure that instructors always use good industrial practices, so that prisoners develop the working practices that employers expect. (3.33)
- **5.35** The library should be open at weekends and in the evenings. (3.37)
- **5.36** Library staff should collect and analyse information about the different groups of prisoners who use the library, so that they can ensure that the library service meets the needs of all prisoners. (3.38)

Offender management and planning

- 5.37 All prisoners should have an up-to-date OASys assessment and a sentence plan which can be progressed and achieved by appropriate interventions and regular support from an offender supervisor. (4.12)
- **5.38** Release on temporary licence should be used for resettlement purposes with relevant prisoners following an individual risk assessment which sets out clear evidence for any risks they pose. (4.13)

- **5.39** HMPPS should ensure expeditious assessment of multi-agency public protection arrangements (MAPPA) levels. (4.18)
- **5.40** Re-categorisation decisions should be made on the basis of individual risk assessments and supported by clear evidence of the risks posed. 4.20

Reintegration planning

- There should be a co-ordinated assessment of prisoners' release and resettlement needs. Action should be taken to meet these needs before release or transfer. (4.25)
- **5.42** Information and advice on finance, benefit and debt should be available for those returning abroad. (4.34)
- **5.43** Social visits should start at the advertised time. (4.41)
- Prisoners should be able to access support designed to repair and maintain relationships.(4.42)
- **5.45** Prisoners assessed as needing accredited offending behaviour interventions should be able to complete them during their sentence. (4.45)

Examples of good practice

- 5.46 The drama group exploring the effects of substance use on families gave prisoners valuable insights into their behaviour. (1.57)
- 5.47 The detailed shared care plan for a man with complex palliative care needs helped prison staff to understand his condition and provide appropriate care for him. (2.58)
- **5.48** Use of a dietitian to provide education and support for overweight prisoners and those with dietary needs improved their health and wellbeing. (2.59)
- **5.49** The joint protocol with the local hospital promoted continuity of care for prisoners attending or admitted to hospital. (2.65)
- **5.50** Group work and a trauma service supported prisoners with sleep difficulties and distress from trauma. (2.92)
- The high number of prison staff who had received mental health training supported prisoners with anxiety and depression. (2.93)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas Deputy Chief Inspector

Colin Carroll Team leader Beverley Alden Inspector Martin Kettle Inspector Yvonne McGuckian Inspector Tamara Pattinson Inspector Kellie Reeve Inspector Elizabeth Walsh Inspector Alissa Redmond Researcher Natalie-Anne Hall Researcher Ellis Cowling Researcher

Paul Roberts Substance misuse inspector
Nicola Rabjohns Health services inspector

Simon Denton Pharmacist

Catriona Reeves Care Quality Commission inspector

Shahram Safavi Ofsted inspector
Christopher Dearnley Ofsted inspector
Allan Shaw Ofsted inspector

Keith Humphries Offender management inspector

Section 6 – Appendix I: Inspection team	

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 2013, prisoners were generally positive about escort staff. The reception area was clean and staff were welcoming, but there was very little use of professional interpreting. Induction was informative. Violence reduction work was good and most prisoners described a safe prison. Self-harm risk was generally well managed, but some prisoners reported limited access to Listeners and there was no care suite. Security was proportionate. Adjudications were conducted fairly. Use of force was low but the special cell was used excessively. The segregation unit was overused. There was little evidence of an illicit drug problem and prisoners received good support from drug support services. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

There should be rigorous governance of the use of force, including special accommodation, planned interventions and use of batons. (HP51)

Not achieved (Recommendation repeated, 1.40)

Recommendations

Prisoners' property should arrive at the establishment with them. (1.6)

Not achieved (Recommendation repeated, 1.4)

Prisoners should not be used to interpret during interviews with other prisoners covering sensitive or personal issues. (1.17)

Not achieved

A range of translated information about the prison should be available to prisoners soon after arrival. (1.18)

Not achieved

Managers should ensure that prisoners' offence details are not revealed to other prisoners. (1.25) **Achieved**

Prisoners should have ready access to Listeners at night. (1.32)

Achieved

Prisoners should not be held in the segregation unit for self-harm risk alone. There should be a dedicated care suite. (1.33)

Not achieved

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. (1.37)

Achieved

Routine strip-searching in reception and after visits should cease. Strip searching and closed visits reviews should be conducted on the basis of supporting intelligence. (1.42)

Partially achieved

The incentives and earned privileges (IEP) scheme should encourage positive behaviour through meaningful incentives and differentials between levels. (1.49)

Not achieved (Recommendation repeated, 1.34)

Prisoners should not be held for extended periods in segregation while investigations are carried out or pending adjudication. (1.67)

Achieved

Cells on the segregation unit cells should contain screened toilets and an electricity supply. (1.68) Information collated on the segregation unit should be analysed and used more effectively to inform strategy. (1.69)

Partially achieved

The range of services for substance users should meet assessed need and reflect best practice guidance. (1.77)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection in 2013, the environment was clean and well maintained. Mountbatten unit was noisy. Staff—prisoner relationships were generally good and personal officer work was reasonable. Diversity work was improving but not enough was done to identify different minority groups and provide support. UK Border Agency provision was effective but access could be limited because of the lack of on-site provision. Legal services were underdeveloped. Faith provision was good. Complaint investigations were variable. Health care services were generally good. The range and quality of food were poor. Outcomes for prisoners were reasonably good against this healthy prison test.

Recommendations

Cells designed for one should not hold two. (2.9)

Not achieved (Recommendation repeated, 2.8)

Noise levels on Mountbatten unit should be reduced. (2.8)

Achieved

All cells should have appropriate privacy screening and furniture, and toilets should be kept clean. (2.10)

Achieved

Showers on Mountbatten unit should be refurbished. (2.11)

Achieved

Applications should be responded to promptly and appropriately. (2.12)

Partially acheived

Staff should receive training in cultural awareness and the specific needs of a foreign national population. (2.18)

Not achieved

Personal officers should make a particular effort to maintain contact with immigration detainees, and make early contact with all allocated prisoners. (2.19)

Achieved

Prison life should be monitored by all relevant protected characteristics. (2.27)

Achieved

Discrimination incident report forms (DIRFs) should be freely available in a range of languages, replies should be timely and subject to independent scrutiny, and DIRF data should be analysed to identify long-term trends and patterns. (2.28)

Partially achieved

There should be regular minority group meetings to provide information and support and improve communication. (2.29)

Achieved

Managers should investigate and act on the reasons for the more negative perceptions of black and minority ethnic prisoners. (2.38)

Achieved

Gypsy and Roma prisoners should be identified and supported. (2.39)

Achieved

The UK Border Agency should have a permanent onsite presence with access to their case-working database. (2.40)

Achieved

Staff should use telephone interpreting when communicating confidential or sensitive information to prisoners who do not speak English. (2.41)

Not achieved

All prisoners with disabilities should be identified during their reception, and their needs should be met through multidisciplinary care planning where appropriate. (2.42)

Achieved

Gay and bisexual prisoners should be supported through specific groups and schemes in the prison and through referral to external support networks. (2.43)

Achieved

Responses to complaints should be polite, easy to understand and address the issues raised. (2.51)

Partially achieved

The National Offender Management Service (NOMS) should consult the Legal Services Commission about providing the prison with a legal advice service similar to the detention duty advice service in immigration removal centres. (2.58)

Not achieved

The legal services officers should receive updated training on prison, criminal and immigration law, and have a dedicated office with internet access, printers and a fax machine. (2.59)

Not achieved

Prisoners should be able to consult their lawyers in private, and the frequency and length of visits should be increased to meet demand. (2.60)

Not achieved

Patients should have access to pharmacist-led clinics. (2.68)

Achieved

Prisoners should not be transferred to the prison if they have an outstanding hospital appointment at their previous location. (2.72)

Achieved

The in-possession policy should be fully implemented and adhered to. (2.78)

Achieved

Pharmacy procedures and policies should be reviewed to ensure that they cover all aspects of the service. They should be agreed by the medicines and therapeutics committee and all staff should read and sign the adopted procedures. (2.79)

Achieved

The use of patient group directions should be extended to allow the supply of more potent medicines by the nursing staff where appropriate. (2.80)

Achieved

Prisoners should have access to professional counselling services. (2.89)

Not achieved

The quality and range of food should be improved. (2.97)

Not achieved

Purposeful activity

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

At the last inspection in 2013, time out of cell was good and nearly all prisoners were involved in structured activity. There was good management and planning of learning and skills provision. A wide range of vocational training and education classes was offered. Achievement rates were very high. The library had recently been improved and provided a reasonably good service. PE provision was impressive. Outcomes for prisoners were good against this healthy prison test.

Recommendations

The training needs analysis should be reviewed regularly to ensure that learning, skills and work remain relevant to prisoners' employment needs. (3.9)

Achieved

The skills strategy should be updated so that it provides a clear structure for the integration of English, mathematics and information technology into learning, skills and work. (3.10)

Partially achieved

Staff should formally share best practice in learning and skills. (3.11)

Achieved

There should be sufficient toilet facilities for prisoners undertaking vocational training on the residential units. (3.12)

No longer relevant

The prison should introduce a dyslexia assessment to ensure that all prisoners' support needs are identified and met fully. (3.15)

Achieved

There should be sufficient accredited English for speakers of other languages (ESOL) support to meet the needs of the population. (3.16)

Not achieved

The brickwork and car mechanics workshops should be staffed and included as part of the vocational training offer. (3.17)

No longer relevant

Staff should support and develop prisoners' English and mathematics knowledge and skills through vocational programmes. (3.23)

Partially achieved

Prisoners' interpersonal employability skills and vocational skills development should be recognised and recorded. (3.24)

Achieved

The resources for teaching, training, learning and assessment should be improved and the layout of some learning areas should be better planned to maximise learning opportunities. (3.25)

Achieved

Low achievements and problematic assessment and verification processes for prisoners on information and communications technology courses should be addressed effectively. (3.27)

Partially achieved

Access to the library should be improved by opening it in the evenings and at weekends and extending sessions beyond 30 minutes. (3.30)

Not achieved

A more systematic approach should be used to identify and supply appropriate and relevant newspapers and journals.

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 2013, the reducing reoffending strategy was not up to date, but a needs analysis had been completed for the new population. Prisoners were appropriately recategorised and there was good use of release on temporary licence. Offending behaviour needs were largely met for low- and medium-risk offenders, but less so for higher-risk offenders. Offender supervisors' caseloads were high and they spent insufficient time seeing prisoners. Provision on the resettlement pathways was reasonably good and took some account of the needs of prisoners being deported. Visits provision was good. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

All high-risk prisoners should have their risk factors addressed promptly after reception and before they are deported. (HP52)

Not achieved

Recommendations

The 2013/2014 reducing reoffending strategy should focus on the needs of the foreign national population and take account of specific resettlement needs in countries outside the UK. (4.8)

Partially achieved

The prison should evaluate the resettlement outcomes for prisoners, including those released into the UK, and use this to improve and develop resettlement services. (4.9)

Not achieved

Offender supervisors should have regular, recorded contact with prisoners, and an initial assessment of prisoners' needs against the resettlement pathways should be made as soon a practical after their arrival at the establishment. (4.18)

Not achieved

NOMS should ensure expeditious assessment of multi-agency public protection arrangements (MAPPA) levels. (4.22)

Not achieved (Recommendation repeated, 4.18)

The prison should explore ways of identifying education, training and employment success for those being sent abroad. (4.31)

Achieved

Information and advice on finance, benefit and debt should be available for those returning abroad. (4.35)

Not achieved (Recommendation repeated, 4.34)

Prisoners should not be required to pay for the lunches of family members attending family days. (4.39)

Achieved

Prisoners assessed as needing accredited offending behaviour interventions should be able to complete them during their sentence. (4.42)

Not achieved (Recommendation repeated, 4.45)

Appendix III: Prison population profile

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

Population breakdown by:

Status	18-20 yr olds	21 and over	%
Sentenced		460	96.4%
Recall		[0.2%
Convicted unsentenced		I	0.2%
Remand			
Civil prisoners			
Detainees		П	2.3%
Total			

Sentence	18-20 yr olds	21 and over	%
Unsentenced		9	1.9%
Less than six months		0	
six months to less than 12		I	0.2%
months			
12 months to less than 2 years		37	7.8%
2 years to less than 4 years		125	26.2%
4 years to less than 10 years		270	56.6%
10 years and over (not life)		31	6.5%
ISPP (indeterminate sentence for		4	0.8%
public protection)			
Life			
Total		477	100%

Age	Number of prisoners	%
Please state minimum age here:		
Under 21 years		
21 years to 29 years	166	34.8%
30 years to 39 years	189	39.6%
40 years to 49 years	89	18.7%
50 years to 59 years	25	5.2%
60 years to 69 years	7	1.5%
70 plus years	1	0.2%
Please state maximum age here:		
Total	477	100%

Nationality	18-20 yr olds	21 and over	%
British		1	0.2%
Foreign nationals		476	99.8%
Total		477	100%

Security category	18-20 yr olds	21 and over	%
Uncategorised unsentenced		9	1.9%
Uncategorised sentenced			
Category A			
Category B			
Category C		468	98.1%
Category D			
Other			
Total		477	100%

Ethnicity	18-20 yr olds	21 and over	%
White			
British		2	0.4%
Irish			
Gypsy/Irish Traveller		2	0.4%
Other white		207	43.4%
Mixed			
White and black Caribbean		2	0.4%
White and black African		6	1.3%
White and Asian		ı	0.2%
Other mixed		8	1.7%
		-	
Asian or Asian British			
Indian		17	3.6%
Pakistani		17	3.6%
Bangladeshi		8	1.7%
Chinese		3	0.6%
Other Asian		26	5.5%
Diagle on black Dateick			
Black or black British		44	9.2%
Caribbean African		77	
Other black		29	16.1%
Other black		27	6.1%
Other ethnic group			
Arab			
Other ethnic group			
Natara		28	
Not stated		477	100%
Total		4//	100%

Religion	18-20 yr olds	21 and over	%
Baptist		0	
Church of England		24	5.0%
Roman Catholic		105	22.0%
Other Christian denominations		117	24.5%
Muslim		167	35.0%
Sikh		8	1.7%
Hindu		5	1.0%
Buddhist		7	1.5%
Jewish		5	1.0%
Other		17	3.6%
No religion		22	4.6%
Total		477	100%

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

Sentenced prisoners only

Length of stay	18–20 yr old	18–20 yr olds		21 and over	
-	Number	%	Number	%	
Less than I month			81	17.%	
I month to 3 months			105	22.0%	
3 months to six months			108	22.6%	
six months to 1 year			90	18.9%	
I year to 2 years			73	15.3%	
2 years to 4 years			11	2.3%	
4 years or more			0		
Total			468	98.1%	

Sentenced prisoners only

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

Unsentenced prisoners only

Length of stay	18–20 yr old	18–20 yr olds		21 and over	
	Number	%	Number	%	
Less than I month					
I month to 3 months			2	22.2%	
3 months to six months			2	22.2%	
six months to I year			2	22.2%	
I year to 2 years			3	33,3%	
2 years to 4 years					
4 years or more					
Total			9	15.91%	

Main offence	18-20 yr olds	21 and over	%
Violence against the person		80	16.78%
Sexual offences		34	7.13%
Burglary		26	5.45%
Robbery		49	10.27%
Theft and handling		15	3.14%
Fraud and forgery		23	4.8%
Drugs offences		160	33.5%
Other offences		59	12.37%
Civil offences		22	4.6%
Offence not recorded /holding		9 (IS91)	1.89%
warrant			
Total		477	99.93%

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 establishment²¹. Respondents were then randomly selected from a P-Nomis prisoner population printout using a stratified systematic sampling method.

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 interpreting 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 6 February 2017 the prisoner population at HMP Huntercombe was 477. Using the method described above, questionnaires were distributed to a sample of 191 prisoners.

We received a total of 155 completed questionnaires, a response rate of 81%. This included two questionnaires completed via interview. Eleven respondents refused to complete a questionnaire and 25 questionnaires were not returned.

²¹ 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments) and we routinely 'oversample' to ensure we achieve the minimum number of responses required.

W ing/unit	Number of completed survey returns			
Fry	27			
Howard	30			
Mountbatten A	21			
Mountbatten B	20			
Patterson	27			
Rich	30			

Presentation of survey results and analyses

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

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 differences²² 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 Huntercombe in 2017 compared with responses from prisoners surveyed in all other local prisons. This comparator is based on all responses from prisoner surveys carried out in 38 category C prisons since April 2013.
- The current survey responses from HMP Huntercombe in 2017 compared with the responses of prisoners surveyed at HMP Huntercombe in 2012.
- A comparison within the 2017 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2017 survey between the responses of Muslim prisoners and non-Muslim prisoners.
- A comparison within the 2017 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.

²² A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. Our significance level is set at 0.01 which means that there is only a 1% likelihood that the difference is due to chance.

Survey summary

	Section I: About You	
QI.I	What wing or houseblock are you currently living on? See survey n	nethodology
Q1.2	How old are you? Under 21	I (1%) 53 (34%) 66 (43%) 24 (16%) 6 (4%) 3 (2%) I (1%)
Q1.3	Are you sentenced? Yes Yes - on recall No - awaiting trial No - awaiting sentence No - awaiting deportation	4 (3%) I (1%) 0 (0%)
QI.4	How long is your sentence? Not sentenced	I (1%) 3 (2%) 7 (5%) 26 (17%) 36 (24%) 68 (45%) 7 (5%) I (1%) 3 (2%)
Q1.5	Are you a foreign national (i.e. do not have UK citizenship)? Yes	(/
Q1.6	Do you understand spoken English? Yes	, ,
Q1.7	Do you understand written English? Yes	134 (88%) 18 (12%)

Q1.8	What is your ethnic origin?			4 (500)
	White - British (English/ Welsh/ Scottish/ Northern Irish)	I (I%)	Asian or Asian British - Chinese	4 (3%)
	White - Irish	I (I%)	Asian or Asian British - other	4 (3%)
	White - other	60 (4Í%)	Mixed race - white and black Caribbean	5 (3%)
	Black or black British - Caribbean	12 (8%)	Mixed race - white and black African	7 (5%)
	Black or black British - African	21 (14%)	Mixed race - white and Asian	0 (0%)
	Black or black British - other	I (Ì%) ´	Mixed race - other	3 (2%)
	Asian or Asian British - Indian	2 (1%)	Arab	6 (4%)
	Asian or Asian British - Pakistani	8 (6%)	Other ethnic group	6 (4%)
	Asian or Asian British - Bangladeshi	4 (3%)	• • • • • • • • • • • • • • • • • • •	- ()
Q1.9	Do you consider yourself to be Gypsy	/ Romany	/ Traveller?	
	Yes	-		5 (4%)
	No			135 (96%)
Q1.10	What is your religion?			
	None	10 (7%)	Hindu	2 (1%)
	Church of England	7 (5%)	Jewish	4 (3%)
	Catholic	41 (28%)	Muslim	49 (33%)
	Protestant	I (I%)	Sikh	2 (1%)
	Other Christian denomination	27 (18%)	Other	4 (3%)
	Buddhist	2 (1%)		
Q1.11	How would you describe your sexual			
				, ,
	•			` '
	Bisexual			2 (1%)
Q1.12	Do you consider yourself to have a di	isability (i.	e. do you need help with any long t	erm
	physical, mental or learning needs)?	., (, , , , , , , , , , , , , , , , , , , ,	
	Yes			24 (16%)
	No			128 (84%)
				120 (01/0)
Q1.13	Are you a veteran (ex- armed service	25)?		
Q 1113	Yes	,		11 (8%)
	No			135 (92%)
		•••••••••••		133 (72/0)
Q1.14	Is this your first time in prison?			
				123 (81%)
	No	••••••		29 (19%)
Q1.15	Do you have children under the age of			
				80 (53%)
	No			70 (47%)
	Section 2: Cour	ts, transfe	rs and escorts	
Q2.1	On your most recent journey here, how long did you spend in the van?			
	Less than 2 hours	_		36 (24%)
	2 hours or longer			107 (70%)
	Don't remember			9 (6%)

Q2.2	On your most recent journey here, were you offered anything to eat or drink?	
Q 2 2	My journey was less than two hours	36 (24%)
	Yes	88 (59%)
		20 (14%)
	No Don't remember	` ,
	Don't remember	4 (3%)
Q2.3	On your most recent journey here, were you offered a toilet break?	
•	My journey was less than two hours	36 (24%)
	Yes	11 (7%)
	No	98 (65%)
	Don't remember	5 (3%)
Q2.4	On your most recent journey have was the yen clean?	
Q2.4	On your most recent journey here, was the van clean?	74 (50%)
	Yes	76 (50%)
	No	61 (40%)
	Don't remember	14 (9%)
Q2.5	On your most recent journey here, did you feel safe?	
	Yes	99 (65%)
	No	46 (30%)
	Don't remember	7 (5%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
Q2.0	Very well	21 (20%)
	,	31 (20%)
	Well	62 (41%)
	Neither	47 (31%)
	Badly	7 (5%)
	Very badly	3 (2%)
	Don't remember	2 (1%)
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	71 (47%)
	Yes, I received written information	13 (9%)
	·	, ,
	No, I was not told anything	61 (40%)
	Don't remember	6 (4%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	Yes	111 (73%)
	No	37 (24%)
	Don't remember	5 (3%)
	Section 3: Reception, first night and induction	
02.1	U	
Q3.1	How long were you in reception?	(0 (4(0))
	Less than 2 hours	69 (46%)
	2 hours or longer	74 (49%)
	Don't remember	8 (5%)
Q3.2	When you were searched, was this carried out in a respectful way?	
	Yes	107 (72%)
	No	33 (22%)
	Don't remember	8 (5%)
		- (-/ - /

Q3.3	Overall, how were you treated in reception?							
	Very well	26 (18%)						
	Well	63 (43%)						
	Neither	37 (25%)						
	Badly	13 (9%)						
	Very badly	6 (4%)						
	Don't remember	3 (2%)						
Q3.4	Did you have any of the following problems when you first arrived here? (Please t	ick all that						
	apply to you.)							
	Loss of property	15 (10%)						
	Housing problems	19 (13%)						
	Contacting employers	8 (5%)						
	Contacting family	22 (15%)						
	Childcare	10 (7%)						
	Money worries	57 (38%)						
	Feeling depressed or suicidal	,						
Q3.5	Did you receive any help/support from staff in dealing with these problems when	vou first						
Q 3.3	arrived here?	,						
	Yes	26 (18%)						
	No	62 (43%)						
	Did not have any problems	57 (39%)						
	Did not have any problems	37 (37/0)						
Q3.6	When you first arrived here, were you offered any of the following? (Please tick a	ll that						
	apply to you.)							
	Tobacco	97 (65%)						
	A shower	51 (34%)						
	A free telephone call	102 (68%)						
	Something to eat	67 (4 5%)						
	PIN phone credit	55 (37%)						
	Toiletries/ basic items	98 (65%)						
	Did not receive anything	9 (6%)						
Q3.7	When you first arrived here, did you have access to the following people or services?							
	(Please tick all that apply to you.)							
	Chaplain	71 (47%)						
	Someone from health services	108 (72%)						
	A Listener/Samaritans	49 (33%)						
	Prison shop/ canteen	48 (32%)						
	Did not have access to any of these	24 (16%)						
Q3.8	When you first arrived here, were you offered information on the following? (Plea	ase tick all						
•	that apply to you.)							
	What was going to happen to you	77 (54%)						
	What support was available for people feeling depressed or suicidal	55 (38%)						
	How to make routine requests (applications)	67 (47%)						
	Your entitlement to visits	63 (44%)						
	Health services	90 (63%)						
	Chaplaincy	75 (52%)						
	Not offered any information	23 (16%)						
Q3.9	Did you feel safe on your first night here?							
• • • •	Yes	98 (64%)						
	No	38 (25%)						
	Don't remember	16 (11%)						
		\/						

Q3.10	How soon after you arrived here did you go on an induction course?						
	Have not been on an induction course						4 (3%)
							118 (78%)
	More than a week						23 (15%)
	Don't remember	•••••	••••••	•••••			7 (5%)
Q3.11	Did the induction course cov	er everytl	hing you ne	eded to kr	ow about	the prison?	
•	Have not been on an inductio						4 (3%)
	Yes						
	No						40 (27%)
	Don't remember			•••••			14 (9%)
Q3.12	How soon after you arrived l	nere did v	ou receive	an educati	on <i>(</i> 'skills f	or life') asse	essment?
Q 32	Did not receive an assessmen	_			-	-	9 (6%)
	Within the first week						61 (41%)
	More than a week						60 (41%)
	Don't remember						18 (12%)
	Soction 4:	Logal righ	ate and res	pectful cust	-odv		
	Section 4.	Legai rigi	its and resp	pectiui cusi	louy		
Q4.1	How easy is it to		_		5 . OO . I		
		Very easy	Easy	Neither	Difficult	Very difficult	
	Communicate with your solicitor or	16 (12%)	40 (30%)	24 (18%)	14 (10%)	21 (16%)	20 (15%)
	legal representative?						
	Attend legal visits?	9 (7%)	` ,	24 (20%)	10 (8%)	10 (8%)	31 (25%)
	Get bail information?	4 (3%)	15 (13%)	17 (14%)	16 (13%)	32 (27%)	36 (30%)
Q4.2	Have staff here ever opened	letters fro	om your so	licitor or y	our legal r	epresentati	ve when
•	you were not with them?		,	,			
	Not had any letters						44 (31%)
	Yes						42 (30%)
	No						56 (39%)
Q4.3	Can you get legal books in the library?						
Q 1.5	Yes	_					64 (44%)
	No						30 (21%)
	Don't know						50 (35%)
	Duit know	••••••	••••••••	••••••	••••••	••••••	30 (33%)
Q4.4	Please answer the following	questions	about the	wing/unit y		, ,	•
	Yes					No	Don't know
	Do you normally have enough clean, suitable clothes for the week?				92 (65%)	48 (34%)	I (I%)
	Are you normally able to have a sho	•	,		135 (93%)		I (I%)
	Do you normally receive clean shee				40 (29%)	94 (68%)	4 (3%)
	Do you normally get cell cleaning materials every week? 97 (69%) 38				38 (27%)	5 (4%)	
	Is your cell call bell normally answered within five minutes? 87 (60%)				87 (60%)	38 (26%)	20 (14%)
	Is it normally quiet enough for you to be able to relax or sleep in your cell 98 (69%) 42 (29%)					42 (29%)	3 (2%)
	at night time?				20 (24%)	75 (530()	21 (220()
	If you need to, can you normally ge	t your stored	i property?		38 (26%)	75 (52%)	31 (22%)
Q4.5	What is the food like here?						
	Very good						6 (4%)
	Good	•••••					39 (27%)
	Neither	•••••					48 (33%)
	Bad	•••••					23 (16%)
	Very bad						31 (21%)

Q4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?					
	Have not bought anything yet/ don't know			4 (3%)		
	Yes			63 (43%)		
	No	•••••	••••••	78 (54%)		
Q4.7	Can you speak to a Listener at any time, if you want to?					
	Yes			74 (50%)		
	No			12 (8%)		
	Don't know			63 (42%)		
				,		
Q4.8	Are your religious beliefs respected?			107 (730()		
	Yes			107 (73%)		
	No			23 (16%)		
	Don't know/ N/A	•••••		17 (12%)		
Q4.9	Are you able to speak to a Chaplain of your faith in private	if you want	t to?			
-	Yes	_		96 (64%)		
	No			18 (12%)		
	Don't know/ N/A			35 (23%)		
	DOIT C KIOW/ TV//	••••••	••••••	JJ (23/8)		
Q4.10	How easy or difficult is it for you to attend religious service					
	I don't want to attend			10 (7%)		
	Very easy			47 (32%)		
	Easy	•••••		59 (40%)		
	Neither			9 (6%)		
	Difficult			4 (3%)		
	Very difficult			6 (4%)		
	Don't know			, ,		
	Don t know	••••••	•••••	12 (8%)		
	Section 5: Applications and complaint	:s				
Q5.1	Is it easy to make an application?					
Q 3.1	Yes			118 (80%)		
	No			21 (14%)		
	Don't know	•••••	••••••	9 (6%)		
Q5.2	Please answer the following questions about applications. (I	If you have	not made	an		
	application please tick the 'not made one' option.)	-				
		Not made	Yes	No		
		one				
	Are applications dealt with fairly?	18 (13%)	68 (50%)	51 (37%)		
	Are applications dealt with quickly (within seven days)?	18 (14%)	54 (41%)	60 (45%)		
OF 2	la it consta molec a compleint?					
Q5.3	Is it easy to make a complaint?			70 (5.40()		
	Yes			78 (54%)		
	No			30 (21%)		
	Don't know	•••••		37 (26%)		
Q5.4	Please answer the following questions about complaints. (If	you have r	not made a	complaint		
	please tick the 'not made one' option.)	-		-		
		Not made	Yes	No		
		one				
	Are complaints dealt with fairly?	57 (40%)	30 (21%)	55 (39%)		
	Are complaints dealt with quickly (within seven days)?	57 (41%)	,			
	, , , , , , , , , , , , , , , , , , , ,	` /	` /	` '		

Q5.5	Have you ever been prevented from making a complaint when you wanted to?	
	Yes	35 (26%)
	No	101 (74%)
Q5.6	How easy or difficult is it for you to see the Independent Monitoring Board (IMB	1)?
Q 3.0	Don't know who they are	•
	Very easy	13 (9%)
	Easy	27 (19%)
	Neither	24 (17%)
	Difficult	15 (11%)
	Very difficult	18 (13%)
	Section 6: Incentive and earned privileges scheme	
Q6.1	Have you been treated fairly in your experience of the incentive and earned priv	ileges (IEP)
	scheme? (This refers to enhanced, standard and basic levels.)	12 (00()
	Don't know what the IEP scheme is	13 (9%)
	Yes	68 (47%)
	No	, ,
	Don't know	23 (16%)
Q6.2	Do the different levels of the IEP scheme encourage you to change your behavio	our? (This
-	refers to enhanced, standard and basic levels.)	•
	Don't know what the IEP scheme is	13 (10%)
	Yes	61 (46%)
	No	39 (29%)
	Don't know	20 (15%)
Q6.3	In the last six months have any members of staff physically restrained you (C&R)	\?
Q 0.5	Yes)• 10 (7%)
	No	132 (93%)
		, ,
Q6.4	If you have spent a night in the segregation/care and separation unit in the last s	ix months,
	how were you treated by staff?	114 (039/)
	I have not been to segregation in the last 6 months	
	Very well	
	Well	` '
	Neither	` '
	Badly	` '
	Very badly	5 (4%)
	Section 7: Relationships with staff	
Q7.1	Do most staff treat you with respect?	
	Yes	109 (75%)
	No	36 (25%)
07 2	le there a manches of staff you can turn to for help if you have a muchland?	
Q7.2	Is there a member of staff you can turn to for help if you have a problem? Yes	108 (73%)
	No	39 (27%)
		J (21/0)
Q7.3	Has a member of staff checked on you personally in the last week to see how yo	u are
	getting on?	44 (2100)
	Yes	44 (31%)
	No	100 (69%)

Q7.4	How often do staff normally speak to you during association?	
	Do not go on association	9 (6%)
	Never	27 (18%)
	Rarely	32 (22%)
	Some of the time	47 (32%)
	Most of the time	20 (14%)
	All of the time	12 (8%)
Q7.5	When did you first meet your personal (named) officer?	
• • • • •	I have not met him/her	45 (31%)
	In the first week	39 (27%)
	More than a week	29 (20%)
	Don't remember	31 (22%)
Q7.6	How helpful is your personal (named) officer?	
Q1.0	Do not have a personal officer/ I have not met him/ her	45 (31%)
	Very helpful	22 (15%)
	Helpful	37 (26%)
	Neither	17 (12%)
	Not very helpful	9 (6%)
	Not at all helpful	13 (9%)
	That de di neipjul	13 (770)
	Section 8: Safety	
Q8.1	Have you ever felt unsafe here?	
	Yes	68 (46%)
	No	80 (54%)
Q8.2	Do you feel unsafe now?	
	Yes	36 (25%)
	No	108 (75%)
Q8.3	In which areas have you felt unsafe? (Please tick all that apply to you.)	
•	Never felt unsafe	7 (5%)
	Everywhere	
	Segregation unit	7 (5%)
	Association areas	13 (9%)
	Reception area	5 (4%)
	At the gym	8 (6%)
	In an exercise yard	10 (7%)
	At work	8 (6%)
	During movement	4 (3%)
	At education 5 (4%)	,
Q8.4	Have you been victimised by other prisoners here?	
→ = : =	Yes	31 (21%)
	No	117 (79%)
		(/3)

Q8.5	If yes, what did the incide	ent(s) involve	what was	it about? (I	Please tick	all that ap	ply to you.)
	Insulting remarks (about	you or your fami	ly or friends).				8 (5%)
	Physical abuse (being hit,						
	Sexual abuse		•••••				I (I%)
	Feeling threatened or inti	midated					9 (6%)
	Having your canteen/prof						4 (3%)
	Medication						3 (2%)
	Debt						3 (2%)
	Drugs						4 (3%)
	Your race or ethnic origin						8 (5%)
	Your religion/religious beli						8 (5%)
	Your nationality	•••••	•••••	•••••			13 (9%)
	You are from a different	bart of the coun	try than other	s			3 (2%)
	You are from a traveller of						2 (1%)
	Your sexual orientation	-					I (ÌI%)
	Your age	•••••					ii
	You have a disability						5 (3%)
	You were new here						5 (3%)
	Your offence/ crime						3 (2%)
	Gang related issues						3 (2%)
	8						- (=)
Q8.6	Have you been victimised	l by staff here	<u>.</u> ?				
₹5.5	Yes						47 (32%)
	No						99 (68%)
							** (55,5)
Q8.7	If yes, what did the incide	ent(s) involve	/ what was	it about? (I	Please tick	all that an	nly to you.)
Q 5	Insulting remarks (about	• •		•		-	
	Physical abuse (being hit,	•					6 (4%)
	Sexual abuse		,				0 (0%)
	Feeling threatened or inti						16 (11%)
	Medication						2 (1%)
	Debt						I (1%)
							, ,
	Drugs						0 (0%)
	Your race or ethnic origin						12 (8%)
	Your religion/religious beli	•					8 (6%)
	Your nationality						13 (9%)
	You are from a different						4 (3%)
	You are from a traveller o						1 (1%)
	Your sexual orientation						0 (0%)
	Your age						I (I%)
	You have a disability						3 (2%)
	You were new here						6 (4%)
	Your offence/ crime						3 (2%)
	Gang related issues		•••••	•••••	•••••	•••••	I (I%)
Q8.8	If you have been victimis						// /-/
	Not been victimised						87 (64%)
	Yes						15 (11%)
	No	•••••	•••••			•••••	35 (26%)
		Section 9:	Health ser	vices			
				_			
Q9.1	How easy or difficult is it			-			
			Very easy	Easy	Neither	Difficult	Very difficult
	The doctor	7 (5%)	13 (9%)	31 (22%)	29 (21%)	22 (16%)	39 (28%)
	The nurse	5 (4%)	28 (21%)	51 (39%)	23 (18%)	13 (10%)	11 (8%)
	The dentist	9 (7%)	6 (4%)	12 (9%)	7 (5%)	31 (23%)	69 (51%)

Q9.2	What do you think of the	quality of the	e health se	rvice from	the follow	ing people:	
	-	Not been	Very good	Good	Neither	Bad	Very bad
	The doctor	10 (7%)	26 (18%)	48 (33%)	28 (19%)	11 (8%)	21 (15%)
	The nurse	5 (4%)		59 (43%)	22 (16%)	10 (7%)	12 (9%)
	The dentist	29 (21%)	17 (12%)	28 (20%)	16 (12%)	18 (13%)	29 (21%)
Q9.3	What do you think of the	overall quali	ty of the he	ealth servic	es here?		
	Not been		•••••				5 (4%)
	Very good		•••••				27 (19%)
	Good						47 (33%)
	Neither						28 (20%)
	Bad						19 (13%)
	Very bad			•••••			16 (11%)
Q9.4	Are you currently taking	medication?					
	Yes						69 (48%)
	No						74 (52%)
		_					
Q9.5	If you are taking medicat						
	Not taking medication						74 (51%)
	Yes, all my meds						44 (31%)
	Yes, some of my meds						23 (16%)
	No		••••••	•••••	•••••		3 (2%)
Q9.6	Do you have any emotion	nal or mental	health pro	blems?			
	Yes		•			•••••	38 (27%)
	No					•••••	104 (73%)
Q9.7	Are you being helped/ sup						chiatrist,
	nurse, mental health wor Do not have any emotion	•	•			•	104 (75%)
	Yes		•				104 (75%)
	No						19 (14%) 15 (11%)
	NU	•••••••	••••••	••••••	••••••	••••••	13 (11/0)
		Section 10: I	Drugs and a	alcohol			
Q10.1	Did you have a problem v	with drugs wh	nen vou car	ne into this	s prison?		
C 1311	Yes	•	-		•		14 (10%)
	No						132 (90%)
							,
Q10.2	Did you have a problem v		-		-		o (=00)
	Yes						8 (5%)
	No		•••••	•••••	••••••	••••••	139 (95%)
Q10.3	Is it easy or difficult to ge	t illegal drugs	s in this pri	son?			
	Very easy		_				15 (11%)
	Easy						19 (13%)
	Neither						8 (6%)
	Difficult						2 (1%)
	Very difficult						13 (9%)
	Don't know						85 (60%)

Q10.4	Is it easy or difficult to get a	lcohol in th	is prison?				
	Very easy						10 (7%)
	Easy						II (8%)
	Neither			•••••		•••••	12 (8%)
	Difficult			•••••		•••••	7 (5%)
	Very difficult						14 (10%)
	Don't know						89 (62%)
							(/
Q10.5	Have you developed a probl	em with ill	egal drugs	since you	have been	in this prise	on?
	Yes			- 		-	7 (5%)
	No			•••••		•••••	135 (95%)
							, ,
Q10.6	Have you developed a proble	em with di	verted me	dication si	nce you ha	ve been in	this prison?
	Yes				-	•••••	7 (5%)
	No					•••••	133 (95%)
							, ,
Q10.7	Have you received any supp	ort or help	(for exam	ple substa	nce misuse	teams) fo	r your drug
	problem, while in this prison	n?	•	-		•	
	Did not / do not have a drug	problem		•••••		•••••	. 120 (88%)
	Yes						
	No						. 5 (4%)
Q10.8	Have you received any supp	ort or help	(for exam	ple substa	nce misuse	teams) fo	r your
	alcohol problem, whilst in th	nis prison?				-	_
	Did not / do not have an alco	hol problem.		•••••		•••••	. 139 (96%)
	Yes		•••••	•••••		•••••	. 4 (3%)
	No						_ `
							,
Q10.9	Was the support or help you	ı received,	whilst in t	his prison,	helpful?		
	Did not have a problem/ did	not receive he	elþ	- 	-	•••••	. 124 (92%)
	Yes		·	•••••		•••••	. 8 (6%)
	No		•••••	•••••		•••••	. 3 (2%)
							,
		Section	II: Activit	ies			
QII.I	How easy or difficult is it to	_		g activities,	-	son?	
		Don't know	Very Easy	Easy	Neither	Difficult	Very difficult
	Prison job	10 (7%)	22 (16%)	39 (28%)	23 (16%)	23 (16%)	24 (17%)
	Vocational or skills training	13 (10%)	16 (12%)	38 (29%)	30 (23%)	19 (14%)	17 (13%)
	Education (including basic skills)	7 (5%)	21 (16%)	47 (36%)	24 (18%)	14 (11%)	17 (13%)
	Offending behaviour	36 (28%)	9 (7%)	17 (13%)	18 (14%)	15 (12%)	35 (27%)
	programmes	, ,	, ,	, ,	, ,	, ,	. ,
Q11.2	Are you currently involved i	n the follo	wing? (Plea	se tick all	that apply	to you.)	
	Not involved in any of these						23 (17%)
	Prison job						61 (45%)
	Vocational or skills training						39 (29%)
	Education (including basic s						57 (42%)
	Offending behaviour progra	•					14 (10%)
	5 1 0						` '

Q11.3	If you have been involved in any of the for help you on release?	ollowing, while in th	is prison, d	o you thin	k they will
		Not been involved	Yes	No	Don't know
	Prison job	18 (16%)	39 (34%)	34 (30%)	24 (21%)
	Prison job Vocational or skills training	12 (11%)	, ,	17 (15%)	24 (21%)
	Education (including basic skills)	10 (9%)	62 (54%) 65 (57%)	17 (13%)	21 (18%)
	Offending behaviour programmes	24 (26%)	28 (31%)	17 (17%)	22 (24%)
Q11.4	How often do you usually go to the libra				8 (6%)
	Never				3 (2%)
	Less than once a week				24 (17%)
	About once a week				91 (65%)
	More than once a week				15 (11%)
Q11.5	Does the library have a wide enough ran				
	Don't use it				12 (8%)
	Yes No				59 (42%) 71 (50%)
Q11.6	How many times do you usually go to th	e gym each week?			, ,
Q11.0	Don't want to go				24 (17%)
	0				14 (10%)
	1 to 2				36 (25%)
	3 to 5				50 (35%)
	More than 5				19 (13%)
Q11.7	How many times do you usually go outsi				
	Don't want to go				11 (8%)
	0				13 (9%)
	I to 2				40 (28%)
	3 to 5				39 (27%)
	More than 5		••••••		39 (27%)
Q11.8	How many times do you usually have ass Don't want to go				9 (6%)
	0				8 (6%)
	1 to 2				19 (14%)
	3 to 5				14 (10%)
	More than 5				90 (64%)
Q11.9	How many hours do you usually spend o	ut of your cell on a	weekday?	(Please inc	lude hours
	at education, at work etc.)				
	Less than 2 hours				7 (5%)
	2 to less than 4 hours				21 (15%)
	4 to less than 6 hours				29 (21%)
	6 to less than 8 hours				25 (18%)
	8 to less than 10 hours				28 (20%)
	10 hours or more				17 (12%)
	Don't know				13 (9%)

Section 12: Contact with family and friends

Q12.1	Have staff supported you and helped you to maintain contact with your family/friends in this prison?						
	Yes	48 (35%)					
	No Have you had any problems with sending or receiving mail (letters or parcels)?						
Q12.2							
-	Yes	52 (38%)					
	No	85 (62%)					
Q12.3	Have you had any problems getting access to the telephones?						
	Yes	38 (28%)					
	No	100 (72%)					
Q12.4	How easy or difficult is it for your family and friends to get here?	14 (120()					
	I don't get visits	` ,					
	Very easy	7 (5%)					
	Easy	15 (11%)					
	Neither	` ,					
	Difficult	` ,					
	Very difficult	56 (41%)					
	Don't know	3 (2%)					
	Section 13: Preparation for release						
Q13.1	Do you have a named offender manager (home probation officer) in the probati	on service?					
Q13.1	Not sentenced	1 (1%)					
	Yes	57 (41%)					
	No	81 (58%)					
		, ,					
Q13.2	What type of contact have you had with your offender manager since being in p (Please tick all that apply to you.)	rison?					
	Not sentenced/ NA	82 (59%)					
	No contact	, ,					
	Letter						
	Phone	, ,					
	Visit						
	VISIL	13 (11%)					
Q13.3	Do you have a named offender supervisor in this prison?	E2 /20%\					
	Yes	, ,					
	No	86 (62%)					
Q13.4	Do you have a sentence plan?	1 (100)					
	Not sentenced	` ,					
	Yes	, ,					
	No	86 (65%)					
Q13.5	How involved were you in the development of your sentence plan?						
Q13.5	How involved were you in the development of your sentence plan? Do not have a sentence plan/ not sentenced	87 (64%)					
Q13.5		, ,					
Q13.5	Do not have a sentence plan/ not sentenced	12 (9%)					
Q13.5	Do not have a sentence plan/ not sentenced Very involved	12 (9%) 16 (12%)					
Q13.5	Do not have a sentence plan/ not sentenced	12 (9%) 16 (12%) 8 (6%)					

Q13.6	Who is working with you to achieve your sentence plan targets? (Please tick all to you.)	that apply
	Do not have a sentence plan/ not sentenced	87 (65%)
	Nobody	, ,
	Offender supervisor	
	Offender manager	5 (4%)
	Named/ personal officer	I (I%)
	Staff from other departments	3 (2%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	Do not have a sentence plan/ not sentenced	
	Yes	` ,
	No	` ,
	Don't know	16 (12%)
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another	
	Do not have a sentence plan/ not sentenced	
	Yes	
	No	` ,
	Don't know	17 (13%)
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the com	•
	Do not have a sentence plan/ not sentenced	, ,
	Yes	` ,
	No	- (/
	Don't know	21 (15%)
Q13.10	Do you have a needs based custody plan?	
	Yes	, ,
	No	` ,
	Don't know	53 (40%)
Q13.11	Do you feel that any member of staff has helped you to prepare for your release	
	Yes	25 (19%)
	No	108 (81%)
Q13.12	Do you know of anyone in this prison who can help you with the following on re	lease?
	(Please tick all that apply to you.)	
	Do not need Yes	No
	help	/
	Employment 31 (25%) 20 (16%)	71 (58%)
	Accommodation 29 (26%) 12 (11%)	, ,
	Benefits 27 (24%) 14 (13%)	
	Finances 29 (26%) 11 (10%)	, ,
	Education 25 (22%) 28 (25%)	, ,
	Drugs and alcohol 35 (33%) 16 (15%)	56 (52%)
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?	1 (10()
	Not sentenced	l (l%)
	Yes	,
	No	63 (49%)



Prisoner survey responses HMP Huntercombe 2017

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.

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	Any percentage highlighted in green is significantly better	2017	Б
	Any percentage highlighted in blue is significantly worse	ombe	training
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	HMP Huntercombe	O
	Percentages which are not highlighted show there is no significant difference	НМР	Category prisons
Num	ber of completed questionnaires returned	155	6,587
SEC	TION 1: General information		
1.2	Are you under 21 years of age?	1%	2%
1.3	Are you sentenced?	99%	100%
1.3	Are you on recall?	3%	9%
1.4	Is your sentence less than 12 months?	7%	7%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	1%	8%
1.5	Are you a foreign national?	91%	10%
1.6	Do you understand spoken English?	93%	99%
1.7	Do you understand written English?	88%	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.)	57%	25%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	4%	5%
1.1	Are you Muslim?	33%	13%
1.11	Are you homosexual/gay or bisexual?	3%	4%
1.12	Do you consider yourself to have a disability?	16%	22%
1.13	Are you a veteran (ex-armed services)?	8%	6%
1.14	Is this your first time in prison?	81%	39%
1.15	Do you have any children under the age of 18?	53%	51%
SEC	TION 2: Transfers and escorts		
On y	our most recent journey here:		
2.1	Did you spend more than 2 hours in the van?	70%	46%
	For those who spent two or more hours in the escort van:		
2.2	Were you offered anything to eat or drink?	79%	74%
2.3	Were you offered a toilet break?	10%	8%
2.4	Was the van clean?	50%	60%
2.5	Did you feel safe?	65%	79%
2.6	Were you treated well/very well by the escort staff?	61%	73%
2.7	Before you arrived here were you told that you were coming here?	47%	60%
2.7	Before you arrived here did you receive any written information about coming here?	9%	13%
2.8	When you first arrived here did your property arrive at the same time as you?	73%	85%
			_

HMP Huntercombe 2017	HMP Huntercombe 2012
155	134
1%	1%
99%	99%
3%	0%
7%	4%
1%	3%
91%	85%
93%	92%
88%	89%
57%	71%
4%	4%
33%	25%
3%	2%
16%	13%
8%	7%
81%	78%
53%	65%
====	200/
70%	66%
79%	71%
10%	6%
50%	62%
65%	70%
61%	61%
47%	46%
9%	25%
73%	84%

	Any percentage highlighted in green is significantly better	017	
	Any percentage highlighted in blue is significantly worse	HMP Huntercombe 2017	aining
		tercol	C tr
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	Hun	Category prisons
	Percentages which are not highlighted show there is no significant difference	HM	Cato
SEC.	TION 3: Reception, first night and induction		
3.1	Were you in reception for less than 2 hours?	46%	53%
3.2	When you were searched in reception, was this carried out in a respectful way?	72%	85%
3.3	Were you treated well/very well in reception?	60%	76%
	When you first arrived:		
3.4	Did you have any problems?	62%	61%
3.4	Did you have any problems with loss of property?	23%	19%
3.4	Did you have any housing problems?	8%	13%
3.4	Did you have any problems contacting employers?	3%	2%
3.4	Did you have any problems contacting family?	21%	19%
3.4	Did you have any problems ensuring dependants were being looked after?	4%	2%
3.4	Did you have any money worries?	19%	13%
3.4	Did you have any problems with feeling depressed or suicidal?	20%	15%
3.4	Did you have any physical health problems?	10%	13%
3.4	Did you have any mental health problems?	13%	19%
3.4	Did you have any problems with needing protection from other prisoners?	5%	5%
3.4	Did you have problems accessing phone numbers?	15%	15%
	For those with problems:		
3.5	Did you receive any help/ support from staff in dealing with these problems?	30%	35%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	65%	75%
3.6	A shower?	34%	28%
3.6	A free telephone call?	68%	41%
3.6	Something to eat?	45%	57%
3.6	PIN phone credit?	37%	51%
3.6	Toiletries/ basic items?	65%	48%

HMP Huntercombe 2017	HMP Huntercombe 2012
46%	54%
72%	83%
60%	76%
62%	56%
23%	12%
8%	9%
3%	2%
21%	22%
4%	3%
19%	7%
20%	14%
10%	12%
13%	8%
5%	3%
15%	20%
30%	41%
65%	51%
34%	33%
68%	70%
45%	68%
37%	49%
65%	58%

Key	to tables		
	Any percentage highlighted in green is significantly better	2017	50
	Any percentage highlighted in blue is significantly worse	equio	C training
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	HMP Huntercombe 2017	
	Percentages which are not highlighted show there is no significant difference	H dWI	Category prisons
SEC	TION 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?	47%	53%
3.7	Someone from health services?	72%	69%
3.7	A Listener/Samaritans?	33%	33%
3.7	Prison shop/ canteen?	32%	25%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	54%	49%
3.8	Support was available for people feeling depressed or suicidal?	38%	39%
3.8	How to make routine requests?	47%	43%
3.8	Your entitlement to visits?	44%	39%
3.8	Health services?	63%	51%
3.8	The chaplaincy?	53%	48%
3.9	Did you feel safe on your first night here?	65%	80%
3.10	Have you been on an induction course?	97%	90%
	For those who have been on an induction course:		
3.11	Did the course cover everything you needed to know about the prison?	63%	59%
3.12	Did you receive an education (skills for life) assessment?	94%	84%
SEC	TION 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?	41%	43%
4.1	Attend legal visits?	39%	45%
4.1	Get bail information?	16%	15%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	30%	39%
4.3	Can you get legal books in the library?	45%	41%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	65%	66%
4.4	Are you normally able to have a shower every day?	93%	90%
4.4	Do you normally receive clean sheets every week?	29%	69%
4.4	Do you normally get cell cleaning materials every week?	69%	63%
4.4	Is your cell call bell normally answered within five minutes?	60%	33%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	69%	68%
4.4	Can you normally get your stored property, if you need to?	26%	22%
4.5	Is the food in this prison good/very good?	31%	31%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	43%	48%
4.7	Are you able to speak to a Listener at any time, if you want to?	50%	55%
4.8	Are your religious beliefs respected?	73%	51%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	65%	58%
	Is it easy/very easy to attend religious services?	72%	49%
7.10	no it oddy, for y oddy to dittorid foligiodd dolffiold:	- 2 70	73/0

For those who have made an application: 5.2 Do you feel applications are dealt with fairly? 5.3 Is it easy to make a complaint? 5.4 Se% 5.5 To those who have made a complaint: 5.4 Do you feel complaints are dealt with fairly? 5.5 Is it easy to make a complaint: 5.4 Do you feel complaints are dealt with fairly? 5.5 Have you ever been prevented from making a complaint when you wanted to? 5.6 Is it easy/very easy to see the Independent Monitoring Board? 5.7 Section 6: Incentives and earned privileges scheme 6.1 Do you feel you have been treated fairly in your experience of the IEP scheme? 6.2 Do the different levels of the IEP scheme encourage you to change your behaviour? 6.3 In the last six months have any members of staff physically restrained you (C&R)? 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? 5. Section 7: Relationships with staff 7.1 Do most staff, in this prison, treat you with respect? 7.2 Is there a member of staff, in this prison, that you can turn to for help if you have a problem? 7.3 Has a member of staff checked on you personally in the last week to see how you were getting on? 7.4 Do staff normally speak to you most of the time/all of the time during association? 7.5 Do you have a personal officer? 6.9% 62% For those with a personal officer?			_	
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SECTION 6: Incentives and earned privileges scheme 6.1 Do you feel you have been treated fairly in your experience of the IEP scheme? 6.2 Do the different levels of the IEP scheme encourage you to change your behaviour? 6.3 In the last six months have any members of staff physically restrained you (C&R)? 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? SECTION 7: Relationships with staff 7.1 Do most staff, in this prison, treat you with respect? 7.2 Is there a member of staff, in this prison, that you can turn to for help if you have a problem? 7.3 Has a member of staff checked on you personally in the last week to see how you were getting on? 7.4 Do staff normally speak to you most of the time/all of the time during association? 7.5 Do you have a personal officer? For those with a personal officer:	5.5	Have you ever been prevented from making a complaint when you wanted to?	26%	20%
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6.2 Do the different levels of the IEP scheme encourage you to change your behaviour? 6.3 In the last six months have any members of staff physically restrained you (C&R)? 7% 9% 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? SECTION 7: Relationships with staff 7.1 Do most staff, in this prison, treat you with respect? 7.2 Is there a member of staff, in this prison, that you can turn to for help if you have a problem? 7.3 Has a member of staff checked on you personally in the last week to see how you were getting on? 7.4 Do staff normally speak to you most of the time/all of the time during association? 7.5 Do you have a personal officer? 7.6 69% 62% For those with a personal officer:	SEC	TION 6: Incentives and earned privileges scheme		
6.3 In the last six months have any members of staff physically restrained you (C&R)? 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? SECTION 7: Relationships with staff 7.1 Do most staff, in this prison, treat you with respect? 7.2 Is there a member of staff, in this prison, that you can turn to for help if you have a problem? 7.3 Has a member of staff checked on you personally in the last week to see how you were getting on? 7.4 Do staff normally speak to you most of the time/all of the time during association? 7.5 Do you have a personal officer? 7.6 For those with a personal officer:	6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	47%	48%
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? SECTION 7: Relationships with staff 7.1 Do most staff, in this prison, treat you with respect? 7.2 Is there a member of staff, in this prison, that you can turn to for help if you have a problem? 7.3 Has a member of staff checked on you personally in the last week to see how you were getting on? 7.4 Do staff normally speak to you most of the time/all of the time during association? 7.5 Do you have a personal officer? 7.6 For those with a personal officer:	6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	46%	45%
you treated very well/ well by staff? SECTION 7: Relationships with staff 7.1 Do most staff, in this prison, treat you with respect? 7.2 Is there a member of staff, in this prison, that you can turn to for help if you have a problem? 7.3 Has a member of staff checked on you personally in the last week to see how you were getting on? 7.4 Do staff normally speak to you most of the time/all of the time during association? 7.5 Do you have a personal officer? 7.6 For those with a personal officer:	6.3	In the last six months have any members of staff physically restrained you (C&R)?	7%	9%
7.1 Do most staff, in this prison, treat you with respect? 7.2 Is there a member of staff, in this prison, that you can turn to for help if you have a problem? 7.3 Has a member of staff checked on you personally in the last week to see how you were getting on? 7.4 Do staff normally speak to you most of the time/all of the time during association? 7.5 Do you have a personal officer? 7.6 Por those with a personal officer:	6.4		42%	37%
7.2 Is there a member of staff, in this prison, that you can turn to for help if you have a problem? 7.3 Has a member of staff checked on you personally in the last week to see how you were getting on? 7.4 Do staff normally speak to you most of the time/all of the time during association? 7.5 Do you have a personal officer? 7.6 For those with a personal officer:	SEC	TION 7: Relationships with staff		
7.3 Has a member of staff checked on you personally in the last week to see how you were getting on? 7.4 Do staff normally speak to you most of the time/all of the time during association? 7.5 Do you have a personal officer? 7.6 For those with a personal officer:	7.1	Do most staff, in this prison, treat you with respect?	75%	79%
7.4 Do staff normally speak to you most of the time/all of the time during association? 22% 21% 7.5 Do you have a personal officer? For those with a personal officer:	7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	74%	73%
7.5 Do you have a personal officer? 69% 62% For those with a personal officer:	7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	31%	29%
For those with a personal officer:	7.4	Do staff normally speak to you most of the time/all of the time during association?	22%	21%
	7.5	Do you have a personal officer?	69%	62%
7.6 Do you think your personal officer is helpful/very helpful? 60% 62%		For those with a personal officer:		
	7.6	Do you think your personal officer is helpful/very helpful?	60%	62%

HMP Huntercombe 2017	HMP Huntercombe 2012
80%	80%
57%	51%
47%	47%
54%	65%
35%	28%
44%	39%
26%	15%
28%	33%
47%	54%
46%	32%
7%	5%
42%	36%
75%	75%
74%	81%
31%	37%
22%	23%
69%	86%
60%	67%

	Any percentage highlighted in green is significantly better	2017	
	Any percentage highlighted in blue is significantly worse	ombe 2	training
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	HMP Huntercombe 2017	y C
	Percentages which are not highlighted show there is no significant difference	нмь н	Category prisons
SEC	TION 8: Safety		
8.1	Have you ever felt unsafe here?	46%	39%
8.2	Do you feel unsafe now?	25%	17%
8.4	Have you been victimised by other prisoners here?	21%	28%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	6%	12%
8.5	Hit, kicked or assaulted you?	7%	8%
8.5	Sexually abused you?	1%	1%
8.5	Threatened or intimidated you?	6%	16%
8.5	Taken your canteen/property?	3%	8%
8.5	Victimised you because of medication?	2%	4%
8.5	Victimised you because of debt?	2%	5%
8.5	Victimised you because of drugs?	3%	5%
8.5	Victimised you because of your race or ethnic origin?	6%	4%
8.5	Victimised you because of your religion/religious beliefs?	6%	3%
8.5	Victimised you because of your nationality?	9%	3%
8.5	Victimised you because you were from a different part of the country?	2%	4%
8.5	Victimised you because you are from a Traveller community?	1%	1%
8.5	Victimised you because of your sexual orientation?	1%	2%
8.5	Victimised you because of your age?	1%	3%
8.5	Victimised you because you have a disability?	3%	3%
8.5	Victimised you because you were new here?	3%	5%
8.5	Victimised you because of your offence/crime?	2%	4%
8.5	Victimised you because of gang related issues?	2%	5%

HMP Huntercombe 2017	HMP Huntercombe 2012
46%	33%
25%	16%
21%	20%
6%	4%
7%	2%
1%	0%
6%	7%
3%	4%
2%	2%
2%	0%
3%	2%
6%	7%
6%	2%
9%	7%
2%	2%
1%	0%
1%	1%
1%	0%
3%	1%
3%	3%
2%	2%
2%	2%

	Any percentage highlighted in green is significantly better	2017	
	Any percentage highlighted in blue is significantly worse	equos	C training
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	HMP Huntercombe 2017	
	Percentages which are not highlighted show there is no significant difference	HMP F	Category prisons
SEC	TION 8: Safety continued		
8.6	Have you been victimised by staff here?	32%	28%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	9%	11%
8.7	Hit, kicked or assaulted you?	4%	4%
8.7	Sexually abused you?	0%	1%
8.7	Threatened or intimidated you?	11%	12%
8.7	Victimised you because of medication?	1%	4%
8.7	Victimised you because of debt?	1%	2%
8.7	Victimised you because of drugs?	0%	2%
8.7	Victimised you because of your race or ethnic origin?	8%	4%
8.7	Victimised you because of your religion/religious beliefs?	6%	3%
8.7	Victimised you because of your nationality?	9%	3%
8.7	Victimised you because you were from a different part of the country?	3%	3%
8.7	Victimised you because you are from a Traveller community?	1%	1%
8.7	Victimised you because of your sexual orientation?	0%	1%
8.7	Victimised you because of your age?	1%	2%
8.7	Victimised you because you have a disability?	2%	3%
8.7	Victimised you because you were new here?	4%	4%
8.7	Victimised you because of your offence/crime?	2%	4%
8.7	Victimised you because of gang related issues?	1%	2%
	For those who have been victimised by staff or other prisoners:		
8.8	Did you report any victimisation that you have experienced?	30%	40%

HMP Huntercombe 2017	HMP Huntercombe 2012
32%	30%
9%	5%
4%	2%
0%	1%
11%	8%
1%	4%
1%	0%
0%	2%
8%	9%
6%	3%
9%	8%
3%	2%
1%	0%
0%	0%
1%	1%
2%	0%
4%	2%
2%	4%
1%	2%
30%	40%

	Any percentage highlighted in green is significantly better	2017	
	Any percentage highlighted in blue is significantly worse	ompe	aining
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	HMP Huntercombe 2017	Category C training prisons
	Percentages which are not highlighted show there is no significant difference	HMP F	Categor
SEC	TION 9: Health services		
9.1	Is it easy/very easy to see the doctor?	31%	28%
9.1	Is it easy/very easy to see the nurse?	60%	49%
9.1	Is it easy/very easy to see the dentist?	13%	13%
	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?	55%	48%
9.2	The nurse?	66%	56%
9.2	The dentist?	42%	43%
9.3	The overall quality of health services?	54%	42%
9.4	Are you currently taking medication?	48%	50%
	For those currently taking medication:		
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	96%	83%
9.6	Do you have any emotional well being or mental health problems?	27%	35%
	For those who have problems:		
9.7	Are you being helped or supported by anyone in this prison?	56%	50%
SEC	TION 10: Drugs and alcohol		
10.1	Did you have a problem with drugs when you came into this prison?	10%	26%
10.2	Did you have a problem with alcohol when you came into this prison?	6%	16%
10.3	Is it easy/very easy to get illegal drugs in this prison?	24%	45%
10.4	Is it easy/very easy to get alcohol in this prison?	15%	26%
10.5	Have you developed a problem with drugs since you have been in this prison?	5%	11%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	5%	7%
	For those with drug or alcohol problems:		
10.7	Have you received any support or help with your drug problem while in this prison?	69%	61%
10.8	Have you received any support or help with your alcohol problem while in this prison?	67%	62%
	For those who have received help or support with their drug or alcohol problem:		
10.9	Was the support helpful?	74%	76%

HMP Huntercombe 2017	HMP Huntercombe 2012
31%	31%
60%	59%
13%	16%
55%	60%
66%	58%
42%	53%
54%	48%
48%	41%
96%	96%
27%	23%
56%	63%
10%	12%
6%	9%
24%	12%
15%	6%
5%	5%
5%	5%
69%	69%
67%	82%
74%	85%

Main comparator and comparator to last time

	Any percentage highlighted in green is significantly better	2017	0
	Any percentage highlighted in blue is significantly worse	equo	training
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	unterc	ပ
	Percentages which are not highlighted show there is no significant difference	HMP Huntercombe 2017	Category prisons
SEC	TION 11: Activities		
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	43%	48%
11.1	Vocational or skills training?	41%	42%
11.1	Education (including basic skills)?	52%	56%
11.1	Offending behaviour programmes?	20%	23%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	45%	59%
11.2	Vocational or skills training?	29%	16%
11.2	Education (including basic skills)?	42%	21%
11.2	Offending behaviour programmes?	10%	11%
11.3	Have you had a job while in this prison?	85%	84%
	For those who have had a prison job while in this prison:		
11.3	Do you feel the job will help you on release?	40%	43%
11.3	Have you been involved in vocational or skills training while in this prison?	90%	75%
	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?	61%	57%
11.3	Have you been involved in education while in this prison?	91%	79%
	For those who have been involved in education while in this prison:		
11.3	Do you feel the education will help you on release?	62%	57%
11.3	Have you been involved in offending behaviour programmes while in this prison?	74%	71%
	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?	42%	49%
11.4	Do you go to the library at least once a week?	75%	41%
11.5	Does the library have a wide enough range of materials to meet your needs?	42%	45%
11.6	Do you go to the gym three or more times a week?	48%	32%
11.7	Do you go outside for exercise three or more times a week?	55%	54%
11.8	Do you go on association more than five times each week?	64%	62%
11.9	Do you spend ten or more hours out of your cell on a weekday?	12%	17%
SEC	TION 12: Friends and family		
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	35%	33%
12.2	Have you had any problems with sending or receiving mail?	38%	43%
12.3	Have you had any problems getting access to the telephones?	28%	21%
12.4	Is it easy/ very easy for your friends and family to get here?	16%	28%

HMP Huntercombe 2017	HMP Huntercombe 2012
43%	35%
41%	40%
52%	52%
20%	20%
45%	50%
29%	26%
42%	46%
10%	6%
85%	91%
40%	40%
90%	86%
61%	67%
61% 91%	67% 94%
91%	94%
91%	94%
91%	94%
91%	94%
91% 62% 74%	94% 68% 80%
91% 62% 74%	94% 68% 80% 49%
91% 62% 74% 42% 75%	94% 68% 80% 49% 77%
91% 62% 74% 42% 75%	94% 68% 80% 49% 77% 22%
91% 62% 74% 42% 45% 48%	94% 68% 80% 49% 77% 22%
91% 62% 74% 42% 42% 48%	94% 68% 80% 49% 77% 22% 55%
91% 62% 74% 42% 75% 42% 64%	94% 68% 80% 49% 77% 22% 55% 43%
91% 62% 74% 42% 75% 42% 64%	94% 68% 80% 49% 77% 22% 55% 43%
91% 62% 74% 42% 42% 48% 55% 64% 12%	94% 68% 80% 49% 77% 22% 55% 43% 73%
91% 62% 74% 42% 42% 48% 55% 64% 12%	94% 68% 80% 49% 77% 22% 55% 43% 73% 14%

Main comparator and comparator to last time

	Any percentage highlighted in green is significantly better	2017	3
	Any percentage highlighted in blue is significantly worse	ошре	training
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	untero	C
	Percentages which are not highlighted show there is no significant difference	HMP Huntercombe 2017	Category prisons
SEC	TION 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?	41%	81%
	For those who are sentenced what type of contact have you had with your offender manager:		
13.2	No contact?	31%	36%
13.2	Contact by letter?	38%	33%
13.2	Contact by phone?	21%	26%
13.2	Contact by visit?	26%	31%
13.3	Do you have a named offender supervisor in this prison?	38%	75%
	For those who are sentenced:		
13.4	Do you have a sentence plan?	35%	62%
	For those with a sentence plan:		
13.5	Were you involved/very involved in the development of your plan?	57%	53%
	Who is working with you to achieve your sentence plan targets:		
13.6	Nobody?	70%	46%
13.6	Offender supervisor?	19%	38%
13.6	Offender manager?	10%	28%
13.6	Named/ personal officer?	2%	13%
13.6	Staff from other departments?	6%	15%
	For those with a sentence plan:		
13.7	Can you achieve any of your sentence plan targets in this prison?	37%	61%
13.8	Are there plans for you to achieve any of your targets in another prison?	27%	20%
13.9	Are there plans for you to achieve any of your targets in the community?	22%	29%
13.10	Do you have a needs based custody plan?	11%	6%
13.11	Do you feel that any member of staff has helped you to prepare for release?	19%	15%
	For those that need help do you know of anyone in this prison who can help you on release with the		
13.12	following: Employment?	22%	34%
13.12	Accommodation?	15%	36%
13.12	Benefits?	16%	38%
13.12	Finances?	13%	27%
13.12	Education?	31%	34%
13.12	Drugs and alcohol?	22%	42%
	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?	51%	54%

HMP Huntercombe 2017	HMP Huntercombe 2012
41%	72%
31%	49%
38%	24%
21%	17%
26%	24%
38%	75%
35%	69%
57%	66%
37.70	0070
70%	45%
19%	38%
10%	21%
2%	8%
6%	12%
37%	53%
27%	33%
22%	33%
11%	9%
19%	19%
22%	33%
15%	26%
16%	23%
13%	20%
31%	34%
22%	32%
51%	53%



Key question responses (ethnicity and religion) HMP Huntercombe 2017

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.

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	S
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	nd minc rs	prisoners
	Percentages which are not highlighted show there is no significant difference	Black and prisoners	White p
Numb	er of completed questionnaires returned	83	62
1.3	Are you sentenced?	100%	100%
1.5	Are you a foreign national?	87%	95%
1.6	Do you understand spoken English?	94%	94%
1.7	Do you understand written English?	89%	85%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)		
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	3%	5%
1.1	Are you Muslim?	49%	13%
1.12	Do you consider yourself to have a disability?	21%	8%
1.13	Are you a veteran (ex-armed services)?	5%	8%
1.14	Is this your first time in prison?	77%	84%
2.6	Were you treated well/very well by the escort staff?	66%	57%
2.7	Before you arrived here were you told that you were coming here?	49%	47%
3.2	When you were searched in reception, was this carried out in a respectful way?	73%	74%
3.3	Were you treated well/very well in reception?	59%	62%
3.4	Did you have any problems when you first arrived?	69%	53%
3.7	Did you have access to someone from health care when you first arrived here?	75%	69%
3.9	Did you feel safe on your first night here?	60%	71%
3.10	Have you been on an induction course?	99%	97%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	46%	36%

Muslim prisoners	Non-Muslim prisoners
49	100
100%	99%
92%	94%
94%	93%
85%	89%
83%	43%
4%	3%
19%	13%
4%	8%
76%	84%
57%	62%
42%	50%
67%	75%
56%	61%
59%	62%
67%	74%
63%	66%
100%	96%
51%	34%

Diversity analysis

	Any percentage highlighted in green is significantly better	jic	
	Any percentage highlighted in blue is significantly worse	rity ethr	
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	Black and minority ethnic prisoners	White prisoners
	Percentages which are not highlighted show there is no significant difference	Black and prisoners	White p
4.4	Are you normally offered enough clean, suitable clothes for the week?	64%	68%
4.4	Are you normally able to have a shower every day?	91%	97%
4.4	Is your cell call bell normally answered within five minutes?	55%	68%
4.5	Is the food in this prison good/very good?	31%	25%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	42%	45%
4.7	Are you able to speak to a Listener at any time, if you want to?	50%	51%
4.8	Do you feel your religious beliefs are respected?	70%	77%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	71%	53%
5.1	Is it easy to make an application?	77%	82%
5.3	Is it easy to make a complaint?	61%	44%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	44%	52%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	39%	57%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	3%	10%
7.1	Do most staff, in this prison, treat you with respect?	71%	78%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	73%	72%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	28%	15%
7.4	Do you have a personal officer?	71%	67%
8.1	Have you ever felt unsafe here?	45%	46%
8.2	Do you feel unsafe now?	25%	23%
8.3	Have you been victimised by other prisoners?	19%	23%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	6%	6%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	5%	6%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	8%	3%
8.5	Have you been victimised because of your nationality? (By prisoners)	6%	12%
8.5	Have you been victimised because you have a disability? (By prisoners)	6%	0%
	·		

Muslim prisoners	Non-Muslim prisoners
62%	68%
89%	95%
61%	60%
29%	30%
48%	42%
51%	49%
75%	71%
70%	60%
76%	81%
61%	50%
40%	48%
39%	47%
5%	6%
72%	76%
73%	75%
18%	24%
79%	65%
50%	45%
23%	26%
11%	26%
2%	8%
2%	6%
4%	5%
2%	11%
2%	3%

nic nic	
ority eth	Ø
und details	White prisoners
Black a	White p
41%	21%
14%	8%
? (By staff) 12%	5%
10%	0%
9%	10%
4%	0%
35%	26%
69%	51%
56%	37%
34%	14%
21%	28%
49%	41%
21%	38%
41%	41%
13%	8%
74%	78%
49%	48%
50%	63%
68%	61%
ducation, at 10%	14%
33%	41%
33%	25%
	## Section 14% 14% 14% 12% 10%

Muslim prisoners	Non-Muslim prisoners
39%	30%
13%	9%
11%	7%
16%	1%
11%	8%
2%	2%
21%	35%
64%	59%
58%	46%
25%	27%
23%	25%
48%	45%
18%	34%
36%	44%
2%	14%
75%	75%
58%	41%
48%	60%
67%	64%
4%	15%
29%	41%
26%	29%



Key question responses (disability) HMP Huntercombe 2017

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.

	Any percentage highlighted in green is significantly better	o have	selves
	Any percentage highlighted in blue is significantly worse	selves t	consider themselves a disability
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	Consider themselves to have a disability	consider the
	Percentages which are not highlighted show there is no significant difference	Consider that desire the desired the desir	Do not o
Numb	er of completed questionnaires returned	24	128
1.3	Are you sentenced?	96%	100%
1.5	Are you a foreign national?	91%	91%
1.6	Do you understand spoken English?	92%	94%
1.7	Do you understand written English?	96%	87%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	78%	53%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	4%
1.1	Are you Muslim?	41%	32%
1.12	Do you consider yourself to have a disability?		
1.13	Are you a veteran (ex-armed services)?	14%	7%
1.14	Is this your first time in prison?	79%	81%
2.6	Were you treated well/very well by the escort staff?	44%	65%
2.7	Before you arrived here were you told that you were coming here?	35%	50%
3.2	When you were searched in reception, was this carried out in a respectful way?	65%	74%
3.3	Were you treated well/very well in reception?	50%	63%
3.4	Did you have any problems when you first arrived?	87%	57%
3.7	Did you have access to someone from health care when you first arrived here?	78%	71%
3.9	Did you feel safe on your first night here?	32%	71%
3.10	Have you been on an induction course?	100%	97%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	33%	42%

Diversity Analysis

Key to	Key to tables			
	Any percentage highlighted in green is significantly better	o have	eives	
	Any percentage highlighted in blue is significantly worse	selves to	consider themselves a disability	
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	Consider themselves to have a disability	consider the	
	Percentages which are not highlighted show there is no significant difference	Consider t a disability	Do not c to have	
4.4	Are you normally offered enough clean, suitable clothes for the week?	46%	69%	
4.4	Are you normally able to have a shower every day?	86%	94%	
4.4	Is your cell call bell normally answered within five minutes?	57%	61%	
4.5	Is the food in this prison good/very good?	31%	31%	
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	48%	42%	
4.7	Are you able to speak to a Listener at any time, if you want to?	44%	52%	
4.8	Do you feel your religious beliefs are respected?	73%	72%	
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	61%	65%	
5.1	Is it easy to make an application?	59%	83%	
5.3	Is it easy to make a complaint?	50%	54%	
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	27%	49%	
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	39%	46%	
6.3	In the last six months have any members of staff physically restrained you (C&R)?	14%	6%	
7.1	Do most staff, in this prison, treat you with respect?	60%	79%	
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	66%	76%	
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	26%	21%	
7.4	Do you have a personal officer?	72%	69%	
8.1	Have you ever felt unsafe here?	68%	41%	
8.2	Do you feel unsafe now?	43%	21%	
8.3	Have you been victimised by other prisoners?	52%	16%	
8.5	Have you ever felt threatened or intimidated by other prisoners here?	17%	4%	
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	13%	4%	
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	17%	3%	
8.5	Have you been victimised because of your nationality? (By prisoners)	26%	6%	
8.5	Have you been victimised because of your age? (By prisoners)	4%	1%	
8.5	Have you been victimised because you have a disability? (By prisoners)	17%	1%	

rey it	tables		
	Any percentage highlighted in green is significantly better	o have	elves
	Any percentage highlighted in blue is significantly worse	Consider themselves to have a disability	consider themselves a disability
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	er them: ility	not consider th have a disability
	Percentages which are not highlighted show there is no significant difference	Consider tl a disability	Do not to have
8.6	Have you been victimised by a member of staff?	57%	28%
8.7	Have you ever felt threatened or intimidated by staff here?	19%	10%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	19%	6%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	9%	5%
8.7	Have you been victimised because of your nationality? (By staff)	14%	8%
8.7	Have you been victimised because of your age? (By staff)	0%	1%
8.7	Have you been victimised because you have a disability? (By staff)	9%	1%
9.1	Is it easy/very easy to see the doctor?	21%	33%
9.1	Is it easy/ very easy to see the nurse?	69%	59%
9.4	Are you currently taking medication?	75%	44%
9.6	Do you feel you have any emotional well being/mental health issues?	67%	20%
10.3	Is it easy/very easy to get illegal drugs in this prison?	22%	24%
11.2	Are you currently working in the prison?	56%	44%
11.2	Are you currently undertaking vocational or skills training?	37%	28%
11.2	Are you currently in education (including basic skills)?	37%	42%
11.2	Are you currently taking part in an offending behaviour programme?	25%	9%
11.4	Do you go to the library at least once a week?	74%	75%
11.6	Do you go to the gym three or more times a week?	37%	49%
11.7	Do you go outside for exercise three or more times a week?	45%	57%
11.8	On average, do you go on association more than five times each week?	56%	66%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	6%	13%
12.2	Have you had any problems sending or receiving mail?	25%	40%
12.3	Have you had any problems getting access to the telephones?	39%	26%