

Report on an unannounced inspection of

HMP Dovegate

by HM Chief Inspector of Prisons

22 May–8 June 2017

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Victory House
6th floor
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WC2B 6EX
England

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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 Dovegate is a modern, privately managed institution operated by Serco. Built in 2001, it has a self-contained therapeutic community (TC) and a separate training role for category B prisoners, although it also has a small local prison function for about 130 prisoners. Of 858 men in total held, over three-quarters are serving sentences well in excess of four years. Half are serving upwards of 10 years to life. This inspection concerns only the training and local prison functions as the TC will be inspected separately.

When we last inspected Dovegate in early 2015, we found an establishment that was in managerial transition and was in many respects struggling to maintain stability and ensure good outcomes for a challenging population of experienced and often violent offenders. At the time we expressed some optimism about the potential for progress and our hope that improvement could be achieved. Unfortunately, that optimism was misplaced and it would seem the prison has experienced a number of difficult years since.

Our findings at this inspection in many ways mirrored our findings in 2015. A newly appointed director seemed to be getting to grips with the problems the prison faced and improvements were beginning to gain momentum, although it remained early days. Our healthy prison scores reflected this assessment and remained similar to last time and disappointing overall.

Of key concern was the fact that the prison was still not safe enough. New arrivals were well received and helped to settle, but levels of violence remained too high despite some recent improvement over the last year. About a fifth of assaults were also serious in nature so it was little surprise that in our survey about a quarter of prisoners told us they felt unsafe. Encouragingly, the prison seemed to be putting in place meaningful strategies to reduce this problem, with some emergent evidence suggesting they were beginning to be effective.

There had been one self-inflicted death since our last inspection and self-harm in general was high. Again, the prison's response to this problem was encouraging, with case management getting better and those at risk telling us they felt supported.

The prison was having to contend with a number of physical and operational security challenges, and in general was doing so appropriately. The key operational challenges included confronting organised criminality, mobile phones and drugs. Improvements to the management of intelligence were evident and interventions were beginning to be effective. Despite this, drug testing, the views of prisoners and contraband finds indicated the availability of illicit substances, including brewed alcohol and new psychoactive substances (NPS), was considerable and the prison needed to have a more coordinated response to reducing drug supply. Substance misuse interventions to help reduce demand were, in contrast, excellent.

Use of force was also high and often required the use of full restraint. Supervision and arrangements to ensure meaningful accountability were weak, with management oversight only recently prioritised. Use of segregation was similarly high and outcomes were not good enough. We also heard a number of concerns from prisoners about mistreatment in segregation. These accusations, we were told, were being investigated by managers but accountability in general for segregation needed immediate improvement and is the subject of one of our main recommendations.

We found Dovegate to be a generally respectful prison. Living conditions were good for most and most prisoners felt respected by staff, although supervision needed to be better and there was evidence that some staff struggled to set boundaries on behaviour. The promotion of equality and diversity was limited, with some evidence of more negative perceptions amongst minority groups, but health care provision had improved and was very good. The chaplaincy was also very supportive of the prison's work and prisoners were generally appreciative of the food.

A significant number of prisoners were engaged in full-time work or training and had a reasonable amount of time out of cell, although we still found over a quarter of prisoners locked up during the working day. There was, however, an overall shortfall of activity places, leaving 160 prisoners unemployed and 133 occupied on a part-time basis. The range of education on offer was good and prisoners had opportunities to progress, but the quality of teaching was inconsistent and improvements to quality were relatively recent. Those engaged in learning achieved well and behaviour, punctuality and attendance were all good.

Most sentenced prisoners presented a serious risk of harm to others and offender supervisor contact was fairly frequent, with many encounters focused on risk reduction and sentence progression. However, risk management planning for the release of some high-risk prisoners was not good enough. Assessment and planning for resettlement was poor, with not enough done to address basic needs. Work to support family ties was an exception: it had improved and was providing good outcomes.

Overall we remain positive about Dovegate's future. The prison was well led and staff seemed to be growing in confidence. Meaningful work was being undertaken to address weaknesses and some early successes were evident. We left the prison with a number of recommendations which we trust will assist the process of improvement.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

July 2017

Fact page

Task of the establishment

HMP Dovegate is a category B training prison for men, with an additional small local prison function.

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

Private (Serco Justice and Immigration)

Region/Department

West

Number held

858

Certified normal accommodation

860

Operational capacity

933

Date of last full inspection

5 – 16 January 2015

Brief history

HMP Dovegate opened in 2001. In September 2009, new accommodation opened to increase capacity, with half of the 260 new spaces dedicated to local prisoners.

Short description of residential units

House blocks 1 and 2 each hold 300 prisoners on five wings per unit. House block 3 was built in 2009 as an expansion project, with four wings holding 260 prisoners, with up to 130 remand places. House block 2 accommodates vulnerable prisoners on H wing and an older population on K wing. House block 3 manages those on remand and those serving short sentences, as well as providing first night accommodation and substance misuse support.

Name of director

John Hewitson

Escort contractor

GeoAmey

Health service provider

Care UK

Learning and skills providers

Serco

Independent Monitoring Board chair

John Haley

Community rehabilitation company (CRC)

Staffordshire and West Midlands CRC, owned by the Reducing Reoffending Partnership.

About this inspection and report

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

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

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

Safety	prisoners, particularly the most vulnerable, are held safely
Respect	prisoners are treated with respect for their human dignity
Purposeful activity	prisoners are able, and expected, to engage in activity that is likely to benefit them
Resettlement	prisoners are prepared for their release into the community and effectively helped to reduce the likelihood of reoffending.

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

- **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.
- A8 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 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.
- A11 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

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

- S1 *Early days and induction processes were generally good and prisoners were well supported by peer mentors. Levels of violence remained too high but were reducing from a peak in 2016. Levels of self-harm were relatively high but processes to support prisoners at risk of self-harm were improving. Drugs, particularly spice, were readily available and the planning and coordination of supply reduction was inadequate. The number of adjudications, use of force and levels of segregation had increased sharply and were high. Managerial oversight of these areas was weak. Substance misuse services were mostly good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S2 *At the last inspection in 2015 we found that outcomes for prisoners in HMP Dovegate were not sufficiently good against this healthy prison test. We made 19 recommendations in the area of safety. At this follow-up inspection we found that eight of the recommendations had been achieved, one had been partially achieved and 10 had not been achieved.*
- S3 Reception processes were efficient. Initial interviews with prisoners were comprehensive and focused well on safety issues but some were not undertaken in private.
- S4 Most prisoners moved relatively swiftly to the first night wing. Cells on the wing were reasonably clean and had integral showers but there was a shortage of some essential equipment such as kettles, telephones and televisions. A team of well-trained Insiders (prisoners who introduce new arrivals to prison life) greeted all new arrivals and provided valuable advice before they were locked up for the night. There were additional hourly safety checks for all new prisoners during their first night.
- S5 The new induction programme was comprehensive and well delivered by the Insiders. An excellent tracking system included follow-ups from the Insiders at both seven and 21 days, to offer continued support.
- S6 Just under a quarter of prisoners felt unsafe at the time of the inspection, which was similar to the comparator and to the figure at the time of the previous inspection. Fewer prisoners than in similar prisons felt victimised by other prisoners. After peaking in 2016, the number of violent incidents had returned to a level slightly lower than at the time of the previous inspection, which was encouraging, but it was higher than at similar establishments and too many incidents (about 20%) were serious.
- S7 Analysis of violent behaviour had begun to improve and there was a renewed focus on understanding the location and reasons for the violence. The prison had a reasonably good and achievable action plan and strategy but there was still much to do to make the prison safer. Investigations into bullying were not sufficiently robust. Management plans had been introduced to challenge bullies and support victims but these were underdeveloped and not embedded in practice. Violence reduction peer workers were effective, offering mediation, visiting new arrivals and assisting with weapon amnesties.
- S8 There had been one self-inflicted death since the previous inspection. Prisons and Probation Ombudsman recommendations had been implemented but there was no ongoing system to ensure that improvements were sustained. Serious incidents of self-harm were reviewed, to identify any learning points. Levels of self-harm were much higher than at similar prisons,

although a small number of prisoners accounted for over a third of recent incidents. Prisoners we spoke to who were subject to assessment, care in custody and teamwork (ACCT) case management for those at risk of suicide or self-harm told us that they felt supported. The quality of ACCT case management had recently improved, with a new system of robust quality assurance in place.

- S9 There were no formal safeguarding procedures to protect prisoners at risk of abuse. The prison did not attend the local safeguarding adults board and no staff had been trained to identify risks.
- S10 Since the previous inspection, there had been a serious breach of physical security and an escape via the visits hall but in both instances the prison had responded appropriately to review and tighten procedures. Some security procedures, such as the routine full searching of all new arrivals, handcuffing of prisoners on and off escort vans and the use of closed visits without supporting trafficking-related intelligence, were disproportionate.
- S11 Managers were well sighted on their key security threats, which were drugs, mobile phones and organised crime group (OCG) activities. The security team worked effectively with the police and had good oversight of the large number of OCG members.
- S12 The management of intelligence reports had improved in recent months and it was now efficiently collated and analysed. However, the communication of security objectives to wing staff and information sharing with other departments were inadequate.
- S13 Drug testing, finds and our survey indicated that alcohol and drugs, particularly 'spice', a new psychoactive substance (new 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), were too readily available. In our survey, almost half of all prisoners said that drugs were easily obtained, which was far higher than in similar prisons. A range of interventions had been implemented to reduce drug availability, with some success, but there was too little joint working across the prison and no action plan to coordinate and drive supply reduction activity.
- S14 A new incentives and earned privileges policy was about to be introduced as the previous scheme had not been used effectively to manage poor behaviour or promote good behaviour.
- S15 The number of adjudications had increased sharply but there was no regular effective adjudication standardisation meeting to provide quality assurance.
- S16 Although levels of violence had stabilised, the number of recorded uses of force had increased substantially, and was high. Most incidents were unplanned and involved the use of full restraint. Managerial oversight had only recently been prioritised and was too limited. Data were not properly analysed and areas of potential concern were not investigated. Few planned interventions were recorded and footage was not routinely reviewed by managers. We were not assured that all uses of special accommodation had been justified.
- S17 The use of segregation had increased substantially and was high, although the average length of stay was short. The regime offered few activities, and segregation reviews were not always meaningful. An unusually large number of prisoners expressed concerns to us about alleged assaults and mistreatment by segregation staff, and in our survey respondents were far more negative about their treatment than in similar prisons. Allegations of abuse were being investigated by managers, but opportunities to provide oversight through the use of body-worn cameras had been missed. There was no regular effective monitoring meeting to

consider the steep rise in segregation, investigate the frequent use of force on the unit or provide robust governance.

- S18 For prisoners with substance misuse issues, the psychosocial team delivered an excellent range of one-to-one and group-based interventions. Good practice included counselling and an in-cell telephone hotline to the drugs team. First night prescribing for prisoners requiring opiate substitution therapy was not available but all other aspects of clinical treatment for prisoners with substance misuse issues were good, including the supervision of controlled drugs administration.

Respect

S19 *Living conditions were generally good and enhanced by in-cell telephones. Relationships between staff and prisoners were mostly good but staff sometimes struggled to maintain effective boundaries on prisoners' behaviour. Work to address equality and diversity was underdeveloped, and in our survey prisoners from some minority groups reported less favourable treatment than others, and in some cases needs were not met. Faith provision was good. Complaints were well managed. Health provision was very good. The quality of the food provided, and prison shop arrangements were good. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S20 *At the last inspection in 2015 we found that outcomes for prisoners in HMP Dovegate were reasonably good against this healthy prison test. We made 19 recommendations in the area of respect.² At this follow-up inspection we found that 11 of the recommendations had been achieved, one had been partially achieved and seven had not been achieved.*

- S21 Living conditions were generally good. The external areas and grounds were clean and most residential units were in good condition. Some prisoners had in-cell showers but communal showers lacked privacy. Some single cells held two prisoners and were far too cramped, with inadequately screened toilets.
- S22 Access to prison-issue clothing and laundry facilities was good. All prisoners had in-cell telephones, which helped them to maintain family contact, and the electronic kiosks, located on each wing, enabled them to manage some of their daily prison life. Applications, submitted via the kiosks, were mostly responded to on time but there were no quality assurance processes.
- S23 In our survey, most prisoners, but fewer than at the time of the previous inspection, said that staff treated them respectfully and we saw mostly friendly interactions. We saw some staff challenging poor behaviour well, but inexperienced staff and a low staff presence on the wings meant that staff sometimes struggled to set and maintain effective boundaries on behaviour. Wing staff had a good knowledge of the prisoners in their care and this was reflected in electronic case notes.
- S24 Equality and diversity arrangements were underdeveloped. The quarterly diversity meeting had reasonable attendance but actions were not always completed. A limited amount of information on equality was collected. It was out of date and not sufficiently well analysed to identify any potential disadvantage experienced by some groups, to inform effective action. Discrimination incident forms (DIRFs) were not freely available on all wings or well

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

publicised. Investigations and subsequent replies to DIRFs were reasonable, although a backlog of responses had resulted in a number of concerns remaining unanswered for over two months.

- S25 In our survey, the substantial number of black and minority ethnic and Muslim prisoners reported far less favourably than white and non-Muslim prisoners about their treatment across a range of areas. Beyond some limited forums, there was little consultation with them to identify their concerns or needs.
- S26 Work for foreign national prisoners was well developed and supported by a detailed needs-based strategy.
- S27 The needs of prisoners with disabilities were not always met. Good use was made of prisoner carers, but prison staff had too little knowledge of day-to-day care or evacuation planning. Older prisoners had little dedicated support or consultation.
- S28 Faith provision was good. The chaplaincy was well integrated into the prison and provided valued support for many prisoners. Faith-based mentoring projects provided good support for prisoners on release.
- S29 The number of complaints submitted by prisoners had increased. Analyses of patterns and trends were presented at a monthly assurance meeting, and this had led to some areas of concern being identified for improvement. Most responses were timely and informative.
- S30 Health care provision had improved and was very good. The range of clinics was impressive, and prisoners with lifelong conditions and complex needs were identified and monitored well. Prisoners' consultation arrangements and health care complaints management were effective. The failure to attend rate had reduced and waiting times were generally acceptable.
- S31 The amount of time spent in the health centre was excessive before and after appointments, due to limited availability of escort staff, and waiting rooms were poor. On the inpatient unit, the lack of officers often undermined opportunities for therapy, and nursing staff access to prisoners was delayed as they did not carry cell keys. Pharmacy services had improved, with some good practices, and dental services were very good. The integrated mental health team provided an impressive service. Good arrangements for the social care of prisoners had been established and the packages of care in place were appropriate.
- S32 In our survey, prisoners were relatively positive about the quality of the food provided, and we also found it to be good. Serveries were clean but not always adequately supervised. The inspection took place during Ramadan, and provision for this festival was good. Prisoners could make their first full prison shop order within 24 hours of arrival, which reduced the potential for debt, and then twice weekly thereafter.

Purposeful activity

S33 *For most prisoners, the amount of time out of cell was good but the substantial number of unemployed prisoners had too little time unlocked. The leadership and management of learning and skills and work required improvement. Provision was being enhanced but quality assurance and performance management were weak. There were too few activity places for the population and too many prisoners were unemployed or had only part-time employment. The quality of teaching and learning was too inconsistent. Good use was made of qualified prisoner learning support assistants. Prisoners achieved well on most courses but pass rates were not good enough in some key areas. The library service and PE provision were reasonably good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S34 *At the last inspection in 2015 we found that outcomes for prisoners in HMP Dovegate were not sufficiently good against this healthy prison test. We made 12 recommendations in the area of purposeful activity. At this follow-up inspection we found that nine of the recommendations had been achieved, one had been partially achieved and two had not been achieved.*

S35 Prisoners who worked full time had a reasonable amount of time out of cell each day, at nearly 10 hours; those who were not working had less than four hours a day.

S36 During our spot checks, we found 27% of prisoners locked up during the day, which was less than at the previous inspection but still too high. The daily regime was predictable and usually ran to time.

S37 In learning and skills and work activities, managers had begun to implement changes, to address the areas for improvement noted in the previous inspection report, but it was too early to judge their effectiveness. Good partnership working with training providers enhanced the provision and delivered accreditation up to level 3 in vocational areas.

S38 Quality monitoring and reporting systems were weak. The quality improvement group had only recently reconvened after a 17-month gap. Observation of teaching was undertaken but the results were not collated to enable managers to identify common areas for improvement. Performance management and the development of teaching staff required improvement. The quality of teaching had improved since the previous inspection but weaknesses remained. Analysis of data was poor. Managers did not routinely use data to monitor provision and identify areas for improvement.

S39 There were too few activity places for the population, leaving around 160 men fully unemployed, and another 133 occupied only part-time. However, an efficient allocation process ensured that only about 30 of the longer-term prisoners were fully unemployed, although many had jobs on the wings, which did not usually involve working a full day.

S40 The range of education and vocational training opportunities was good, and there were good opportunities to work towards higher-level qualifications in industries. There was good access to distance learning and Open University courses but study facilities for these learners were limited. Activity allocation processes had recently improved and were good.

S41 The quality of teaching and learning was inconsistent and required improvement overall. There was good purposeful activity in industry workshops, with some prisoners achieving industry standards and gaining useful manufacturing industry experience, supervision and quality assurance skills. Standards of work in most workplaces and vocational training workshops were good.

- S42 Qualified prisoner learning support assistants made a good contribution to learning in education classes. However, their deployment was not always well planned by teachers. Additional learning needs were identified appropriately but many teachers failed to take account of these in planning their lessons.
- S43 Prisoners' behaviour during learning sessions and at work was generally good. Most learners enjoyed their learning, developed confidence in carrying out their work, and made good progress. Training opportunities for mentors were good. Punctuality and attendance were good in education classes, and very good in vocational classes and industries. Prisoners in industries did not have their employability skills recognised or recorded.
- S44 Prisoners achieved well on most courses but pass rates required improvement in some key areas, particularly in level 1 mathematics, and information and communications technology. There were high drop-out rates on some education courses and vocational training. The standard of learners' work met the expected level for their course.
- S45 The library was a good facility, centrally located and sufficiently well stocked. Attendance was low during the week but the library was open all day on Saturdays, and more prisoners attended then. Various activities were provided to encourage reader development, including a weekly book club and Storybook Dads (in which prisoners record stories for their children).
- S46 PE facilities were good. Careful timetabling ensured that the gym was accessible and well used, although the cross-deployment of staff at weekends caused the cancellation of some PE provision. Accredited courses had been recently reintroduced.

Resettlement

S47 *Most prisoners presented a significant risk of harm to others, and offender supervisors had frequent contact with many prisoners and an adequate focus on progression and risk reduction. Risk management planning for the release of some high-risk prisoners was inadequate. The assessment and planning for resettlement were poor. Prisoners were given too little help to address their finance and debt issues, or find accommodation or employment on release. Family support had improved and was good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S48 *At the last inspection in 2015 we found that outcomes for prisoners in HMP Dovegate 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 three of the recommendations had been achieved, one had been partially achieved and five had not been achieved.*

- S49 The prison held a complex mix of prisoners. Most were serving very long sentences, with a substantial portion serving indeterminate sentences. In addition, there was a small proportion of prisoners on remand or serving a very short sentence. Despite such a diverse population, the offending-related needs had not been analysed thoroughly enough.
- S50 Most sentenced prisoners presented a significant risk of harm to others requiring robust risk management and effective release planning. Too many, mainly higher-risk, prisoners did not have an up-to-date offender assessment system (OASys) assessment and sentence plan. Offender supervisor contact was fairly frequent, and better than we often see. In many cases, there was an adequate focus on sentence progression and risk reduction but in other high-

risk cases there were significant gaps. Categorisation and prisoner transfers were managed well overall.

- S51 Public protection restrictions and applications for contact with children were managed appropriately. In most of the high-risk cases we looked at, there was too little evidence of risk management planning for release, which included a lack of clarity about the multi-agency public protection arrangements (MAPPA) management level. The inter-departmental risk management team meeting was limited in scope and did not routinely review high risk of harm cases due for release, and therefore was unable to contribute to a risk management plan and ensure that issues were escalated.
- S52 The demand for resettlement services was fairly high, with about 45 releases a month. The community rehabilitation company provision was poor; for example, the quality of resettlement planning was inadequate and not all prisoners received a formal review of their resettlement plan before release. Peer workers were involved in the identification of personal resettlement problems, which was inappropriate.
- S53 Housing advice and support on release were limited, particularly for those from outside the local area. The full extent of prisoners being released without settled and sustainable accommodation was unknown.
- S54 Support for prisoners to find employment or training on release was poor. There was no careers service provision or pre-release course. Some limited help with CV preparation was provided. The number of prisoners released without work or training was not monitored.
- S55 Pre-release health care arrangements were effective, and liaison with external agencies for patients with serious mental health disorders was particularly good. Prisoners with substance misuse issues were supported well on release, with good links with local community-based support agencies and some attending the prison to meet prisoners before release.
- S56 Too little support was provided for those with finance and debt problems but prisoners could open bank accounts before release.
- S57 The focus on family support had improved, and was good. Regular family days were supplemented by other initiatives, including the use of the Acorn suite to provide a number of support mechanisms for families and children. Access to visits was adequate, although the visitors centre was in need of refurbishment. Visits sessions were terminated if prisoners needed to use the toilet, which was unacceptable.
- S58 The range of accredited offending behaviour programmes was appropriate and well used but prisoners assessed as unsuitable for these had little alternative opportunity to address their offending behaviour. The psychology team provided a valuable range of assessment, advice and support, alongside some awareness training for staff.

Main concerns and recommendations

S59 Concern: Levels of violence were high and incidents were often serious. A reasonable violence reduction strategy and action plan were in place but these were not yet making the prison safe enough.

Recommendation: The focus on violence and drug supply reduction should continue with a thorough analysis of violent incidents. The current violence and drug reduction plans should be developed further. Outcomes should be reviewed and evaluated and, where necessary, actions should be adapted to ensure maximum impact.

S60 Concern: Levels of segregation and the use of force were very high and had increased substantially. There was no effective monitoring of these areas and insufficient managerial oversight to provide assurance that usage was justified and proportionate.

Recommendation: Levels of segregation and use of force should be monitored and managerial oversight improved to provide robust governance and assurance.

S61 Concern: There were too few activity places for the population, leaving a substantial number of prisoners unemployed or with only part-time employment. Too many prisoners were employed in low-skilled wing work which did not fully occupy them.

Recommendation: The number of purposeful activity places should be increased, to enable all prisoners to engage in education, skills or work activities that are of a good standard and promote personal development and employability.

S62 Concern: Too many prisoners who presented a high risk of harm to others were released without an adequate risk management plan.

Recommendation: In partnership with outside agencies, comprehensive risk management plans should be developed for all high-risk prisoners due for release.

S63 Concern: Prisoners' resettlement needs were not adequately assessed, planned for or reviewed before release, and they had too little help in addressing finance and debt issues and finding accommodation and employment on release.

Recommendation: The quality of prisoners' resettlement plans should be improved, and all prisoners should have their needs reviewed before release. All prisoners should have access to good-quality help to address their finance and debt problems and find sustainable accommodation and employment on release.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

- I.1 Most journeys from courts or prisons within the nearby area were relatively short but prisoners had long waits in court before being brought to the prison.
- I.2 The escort vehicles we inspected were clean and well equipped, and most prisoners said that they were treated well by escorting staff.
- I.3 In our survey, only 73% of prisoners said that all their property had arrived with them, which was far worse than at similar prisons and than at the time of the previous inspection. Many prisoners complained to us about their property being lost in transit or not arriving for several months.
- I.4 Video facilities were well used to facilitate court hearings, inter-prison contact and offender management interviews.

Recommendation

- I.5 **Prisoners' property should arrive with them or within a reasonable period after their arrival.** (Repeated recommendation I.3)

Early days in custody

Expected outcomes:

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

- I.6 All prisoners were handcuffed and strip-searched while being taken from escort vehicles to the reception area, without such measures being informed by a risk assessment (see paragraph I.39 and recommendation I.47). The reception area was poorly designed and cramped. The small holding rooms were clean but bare, with little information available to new prisoners.
- I.7 Reception processes were efficient. Most prisoners spent around two hours in reception, and the majority said that they were treated well there. Vulnerable prisoners were much more negative than others about their reception experience, mainly because they were left in holding rooms for long periods until all other prisoners had left the reception area.
- I.8 Interactions in reception were friendly and processes were managed well, with an appropriate focus on the safety and well-being of prisoners. However, some interviews lacked privacy and were held at the front desk, in full sight and hearing of others in reception, including prisoners.

- I.9** All newly arrived prisoners were offered a free five-minute telephone call, a reception pack (a grocery pack which usually contains basic food and drink items such as tea, milk, sugar and sweets) and/or, due to the impending smoking ban due to start the following month, a nicotine replacement pack.
- I.10** Prisoner orderlies worked in reception; they were generally unsupervised and had relatively free access to most areas, which potentially compromised security and confidentiality. A Listener (a prisoner trained by the Samaritans to provide confidential emotional support to fellow prisoners) was identified to meet all new receptions, but this did not always happen.
- I.11** M wing had been recently designated as the first night unit and new arrivals were met there by an impressive and well-trained team of Insiders (prisoners who introduce new arrivals to prison life), who helped them to settle in to the unit and provided a useful range of information before they were locked up for their first night.
- I.12** Cells on the first night wing were reasonably clean, although some had extensive graffiti on walls and doors. They all had in-cell showers but there was a shortage of some equipment, such as televisions, telephones and kettles, and some mattresses were in poor condition.
- I.13** Additional first night safety checks were provided hourly to those who were new to the prison, and we were satisfied that there was a sufficient focus on their potential vulnerabilities. A follow-up interview was undertaken by wing managers on the morning after arrival; however, while we saw this happening during the inspection, few records we looked at verified that this had taken place for everyone.
- I.14** The induction programme had been reviewed. It was comprehensive, started on the next working day after arrival, and was well delivered by the Insiders. Completions were well tracked and prisoners had further interviews with the Insiders after seven and 21 days, which was good practice and offered continued support.

Recommendations

- I.15** **Reception interviews should be conducted in private.**
- I.16** **Orderlies should be closely supervised while in reception.** (Repeated recommendation I.13)
- I.17** **All first night cells should be free of graffiti and fully equipped.**

Good practice

- I.18** *The follow-up support interviews by trained Insiders at seven and 21 days after arrival provided additional support and guidance to new prisoners.*

Bullying and violence reduction

Expected outcomes:

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

- I.19** In our survey, 22% of prisoners said that they currently felt unsafe, which was similar to the figure at comparable prisons and to that at the time of the previous inspection. Fewer prisoners than elsewhere (32% versus 37%) said that they had been victimised by other prisoners.
- I.20** After peaking in the summer of 2016, the number of violent incidents had returned to a level slightly lower than at the time of the previous inspection (94 in the six months to May 2017 against 103 in a similar period before the previous inspection); while this was encouraging, this number was higher than at similar establishments. Too many incidents (about 20%) were serious and the number of assaults on staff had increased substantially since the previous inspection. However, very few prisoners formally sought protection on the segregation unit or self-isolated on the wings.
- I.21** The staffing level in the safer custody team had recently increased, and monthly analysis of violent behaviour had begun to improve. There was a good, renewed focus on understanding the location and reasons for the violence.
- I.22** The violence reduction strategy identified causal factors, including use of ‘spice’ (a new psychoactive drug (NPS); new 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), lack of staff supervision (see also paragraph 2.13) and the lack of activity places for prisoners (see section on purposeful activity). There was also a new, reasonably good and achievable action plan but there was still much to do to make the prison safer. For example, body-worn video cameras were not routinely worn by staff to de-escalate violence (see main recommendation S59).
- I.23** Five violence reduction peer workers were used effectively to address low-level disputes on the wings, visit new arrivals and facilitate weapon amnesties. All identified bullies and victims were seen by either safer custody staff or a peer worker. However, investigations into bullying were not sufficiently robust. Management plans had been recently introduced to challenge bullies and support victims. These showed promise but were underdeveloped and not embedded in practice. Wing staff were not yet engaged with the process and goals were often too generic (see main recommendation S59).
- I.24** The weekly Safer Dovegate meeting provided a promising multidisciplinary forum to review violent incidents and discuss perpetrators and victims. However, information sharing between the safer custody, security and substance misuse teams needed improvement.
- I.25** H wing held sex offenders and other vulnerable prisoners who were unable to cope elsewhere. A small number of prisoners seeking protection also lived on K wing but could access the H wing regime.

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.

- I.26 There had been one self-inflicted death since the previous inspection, and the prison had responded well to the recommendations from the Prisons and Probation Ombudsman. However, there was still no system to ensure that improvements were sustained.
- I.27 Levels of self-harm were much higher than at similar prisons, although a small proportion of prisoners accounted for over a third of incidents in the previous six months. There had been six serious incidents of self-harm in the previous six months and all had been investigated, to identify any trends and learning points.
- I.28 There was a good understanding of risk factors, such as being returned to closed conditions, arrival in custody for the first time or following sentence. Information about these and other risk factors were displayed in staff areas across the prison.
- I.29 At the time of the inspection, there were 16 prisoners subject to assessment, care in custody and teamwork (ACCT) case management procedures, and all of those we spoke to felt supported. They appreciated the regular daily support from a member of the safer custody team, who offered encouragement to take part in the regime and provided distraction material where appropriate.
- I.30 The monthly safer custody meeting was well attended and focused on a wide range of data, in order to understand and address patterns of self-harm. Recently introduced, robust quality assurance had led to improvements in the quality of ACCT case management, including attendance at reviews, improved care plans and better-quality documentation, although night-time entries were repetitive and predictable.
- I.31 There was a strong team of around 20 Listeners, who met the safer custody team and the Samaritans regularly. There were no care suites, so Listener call-outs were held in cells.
- I.32 Gated cells used for prisoners requiring constant supervision were located on the segregation and health care units. Most uses had been relatively short and records demonstrated that the prison had cared well for some troubled and prolific self-harmers.

Recommendations

- I.33 **Action plans developed following death in custody investigations and serious near-fatal incidents of self-harm should be reviewed periodically to ensure that changes in practice and lessons learned are sustained over time.** (Repeated recommendation I.29)
- I.34 **Listeners should be able to meet prisoners in crisis in an appropriately furnished and supportive environment.**

Good practice

- I.35** *The prison-wide publication of factors associated with the potential for increased self-harm promoted staff awareness and reminded them to be alert to individual circumstances.*

Safeguarding (protection of adults at risk)

Expected outcomes:

The prison promotes the welfare of prisoners, particularly adults at risk, and protects them from all kinds of harm and neglect.³

- I.36** There were no formal safeguarding procedures to protect prisoners at risk of abuse or neglect, and there was no published local safeguarding policy.
- I.37** No one from the prison attended the local safeguarding adults board. Staff we spoke to were not aware of who they would contact for advice, referral or assessment, and none had received specific training.

Recommendation

- I.38 Comprehensive adult safeguarding procedures should be introduced and embedded across the prison, and the prison should be represented on the local safeguarding adults board.**

Security

Expected outcomes:

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

- I.39** Some security procedures were disproportionate, including the handcuffing of prisoners on and off escort vehicles and the routine full searching of all new arrivals (see also paragraph I.6). In 2015, there had been an escape via the visits hall and earlier in 2017 there had been a serious breach of physical security; in both instances, responses had been appropriate, aimed at reviewing and tightening procedures.
- I.40** Managers had undertaken a useful strategic threat assessment and were well sighted on their key threats, which were drugs, mobile phones and organised crime group (OCG) activities. There was a good monthly intelligence report to senior managers. However, the monthly security committee, the forum for sharing emerging threats with other departments, was poorly attended and sometimes did not take place. The communication of security objectives to wing staff was inadequate.

³ We define an adult at risk as a vulnerable person aged 18 years or over, 'who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'. 'No secrets' definition (Department of Health 2000).

- I.41** Following a backlog in 2016, the management of intelligence reports had improved and these were now efficiently collated and analysed. A total of 3,646 intelligence reports had been submitted in the previous six months, which was higher than we see at similar prisons and than at the time of the previous inspection. There had been recent efforts to raise staff awareness but some areas were still providing too little intelligence. A substantial number of intelligence-led searches were completed.
- I.42** The security team worked well with the two police liaison officers based on site, so had good oversight of the large number of gang and OCG members and were able to target their disruption efforts effectively. Staff corruption was addressed robustly.
- I.43** The head of security was well sighted on prisoners who presented a risk of extremism or radicalisation and the prison's Muslim chaplain took a proactive role.
- I.44** Most closed visits were not supported by intelligence related to trafficking, and the list of banned visitors was extensive, dating back several years and in need of review.
- I.45** Managers had recently taken useful actions to reduce the levels of drug availability, with some success, but the evidence suggested that spice, other drugs and alcohol were still too readily available. In our survey, 48% of prisoners said that it was easy to get drugs at the prison, and 21% that they had developed a drug problem while there, both of which figures were far higher than at similar prisons. The random mandatory drug testing (MDT) positive rate for the six months to April 2017 was 11.1%, which was above the target of 9%. In the same period, 18% had tested positive for spice (which is excluded from the MDT rate). Suspicion testing was conducted regularly. There had been 140 tests in the same six-month period, with a positive rate of 70.7%. Finds of illicitly brewed alcohol and associated paraphernalia (92 separate finds in the previous six months) indicated high levels of availability.
- I.46** A new supply reduction committee had been introduced in April 2017 but had met only once at the time of the inspection. There was too little joint working between the security department and the drugs team, and no action plan to coordinate and drive supply reduction activity.

Recommendations

- I.47** **Prisoners in reception should only be strip-searched following an individual risk assessment and prisoners should not be routinely handcuffed between reception and escort vehicles.**
- I.48** **The prison should implement a prison-wide, coordinated and action-planned approach to reduce the supply of illicit drugs.**

Incentives and earned privileges

Expected outcomes:

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

- I.49** At the time of the inspection, a new IEP policy was about to be introduced as the previous scheme had not been used effectively to manage poor behaviour or promote good behaviour, and had been inappropriately used to address some serious poor behaviour (see paragraph I.52 and recommendation I.54).
- I.50** Our survey results on the scheme were fairly positive. A similar number of prisoners to that at comparator prisons and at the time of the previous inspection said that they had been treated fairly under the IEP scheme. However, black and minority ethnic prisoners were more negative than their white counterparts about their treatment under the scheme, which needed exploring and addressing (see also section on equality and diversity).

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

- I.51** The number of adjudications had increased sharply since the previous inspection, from 532 to 1,737 in the six months before each inspection, and this was reflected in the high use of segregation as punishment (see below). The adjudications process was sometimes used inappropriately to deal with low-level poor behaviour that could have been managed in other ways.
- I.52** The large number of adjudications was not always manageable and, in order to alleviate the pressure on managers, IEP penalties were inappropriately awarded for serious charges that should have been dealt with by adjudication. In addition, many adjudications (about 20% between January and March 2017), were not proceeded with or were dismissed.
- I.53** There was no regular, effective adjudication standardisation meeting to provide quality assurance, consider timeliness or ensure a consistent approach to punishments.

Recommendation

- I.54 A consistent and appropriate response to poor behaviour and punishments should be introduced.**

The use of force

- I.55** Although levels of violence had stabilised, the number of recorded uses of force had increased substantially, and was high. Most incidents were unplanned and involved the use of full restraints. Despite this increase, managerial oversight had only recently been prioritised and was too limited. For example, the use of force committee had recently restarted but was poorly attended and data were not analysed sufficiently. Areas of potential concern, such as the segregation unit (where about 15% of events occurred), had not been robustly investigated (see below).
- I.56** Few planned interventions were recorded and footage was not routinely reviewed by managers. Only two of the seven recordings that we requested were available, and even these had not been recorded as a single continuous incident and were therefore not a transparent version of events. Body-worn video cameras had been introduced but staff did not routinely wear or use them (see also paragraph 2.13). As a result of the lack of governance, we were not assured that high levels of use of force were justified or proportionate (see main recommendation S60).
- I.57** Earlier in the year, batons had been introduced but so far there had been no recorded use of them. Special accommodation had been used eight times in the six months to May 2017. Recording was often weak and managers did not always record whether such prisoners were subject to ACCT monitoring or had had their clothing removed. We were not assured that the use of special accommodation had been justified on all occasions.

Segregation

- I.58** The use of segregation had increased substantially and was much higher than in similar prisons. Use was split fairly evenly between those segregated to maintain the good order of the prison, those located on the unit pending an adjudication and those punished with a period of cellular confinement, with few prisoners formally segregated for their own protection. The average length of stay on the unit was short, at around four to five days, with the longest stay being approximately 42 days, although this was atypical.
- I.59** The regime on the unit offered few activities. There was a small box of books available but no radios. Cells were shabby, with much of the flooring missing, and the communal shower was dirty and smelly. Prisoners could associate during exercise, subject to a risk assessment, although the yards were bare and caged.
- I.60** Segregation reviews were not always meaningful, too often lacking targets. Staff were supposed to use the generic management plans recently introduced across the prison (see paragraph 1.23) to manage long stayers and assist reintegration, but we saw few examples of these in practice (see main recommendation S60).
- I.61** Throughout the inspection, an unusually large number of prisoners expressed concerns to us about alleged assaults and mistreatment by segregation staff. This was reflected in our survey, in which only 23% of respondents said that they had been treated well on the unit, against the 38% comparator. Managers had recently begun to investigate some allegations of abuse, but the opportunity to provide reassurance through the use of body-worn cameras had been missed (see above and also paragraph 2.13). There was no regular effective monitoring meeting to consider the steep rise in segregation, investigate the frequent use of force on the unit or provide robust governance (see main recommendation S60).

Substance misuse

Expected outcomes:

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

- I.62** Integrated clinical and psychosocial services were delivered by Care UK, known locally as the integrated substance misuse team (ISMT). These services had improved considerably since the previous inspection, although the drug strategy was out of date.
- I.63** The integration of clinical and psychosocial services was very good, due in part to the co-location of the teams, but also to the strength of team relationships and effective leadership. The ISMT was also well integrated with some other key departments in the prison, including physical and mental health services teams, the pharmacy and the gym, but links with the security department were weak.
- I.64** The psychosocial team delivered an excellent range of one-to-one and group-based interventions, covering harm reduction and recovery-based approaches. Prisoners undergoing detoxification could access a special 'Kick-Start' gym-based programme, assisted by peer supporters.
- I.65** The ISMT included a fully qualified and accredited counsellor who provided sessions with prisoners to explore the issues underlying their substance use. The team also provided an NPS awareness course (for prisoners who had tested positive these drugs), sleep hygiene groups (to help prisoners to tackle sleeplessness without using illicit substances), as well as further information and support, including acupuncture, mindfulness and a course on managing anxiety. Prisoners could contact the ISMT using their in-cell telephone if they needed support. Those we spoke to said that this had helped them to deal with their immediate urges and cravings, preventing relapses back into drug use.
- I.66** Prisoners were screened in reception for substance use issues but most opiate users were only given symptomatic relief for their first night, rather than being initiated on opiate substitutes. However, these prisoners were located on the stabilisation unit from their first night, and levels of support were good. Initiation onto opiate substitution therapy was started on the following morning, after a comprehensive assessment.
- I.67** At the time of the inspection, a total of 80 prisoners (9.3% of the population) were receiving opiate substitution treatment. Of these, 70 (87.5% of those in treatment) were on maintenance doses and 10 on reducing doses. Many of those on maintenance doses were on remand or short sentences, which was appropriate.
- I.68** The administration of controlled drugs was well supervised, and prisoners we spoke to were satisfied with the treatment they received from the ISMT.

Recommendation

- I.69** **Prisoners arriving at the prison with opiate dependency should have access to first night prescribing of opiate substitutes and not just symptomatic relief.**

Good practice

- I.70** *The integrated substance misuse team (ISMT) included a fully qualified and accredited counsellor who provided sessions with prisoners to explore the issues underlying their substance use.*
- I.71** *Sleep hygiene groups helped prisoners to tackle sleeplessness without using illicit substances.*
- I.72** *Prisoners could contact the ISMT using their in-cell telephone, free of charge, if they needed support.*
- I.73** *Prisoners who had tested positive for using new psychoactive substances (NPS) could attend the ISMT-run NPS awareness course.*

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 Living conditions were generally good. The external areas and grounds were clean and litter free. Exercise yards were well equipped with exercise equipment and benches.
- 2.2 There were three house blocks, with a total of 14 wings. Most residential units were in good condition and communal areas were generally clean. Prisoners had daily access to showers, although the communal showers on house blocks 1 and 2 lacked privacy. Most cells were single occupancy and they all had a telephone (for outgoing calls only), which prisoners spoke positively about, especially in maintaining contact with their children and families. Wing laundry facilities were good and microwave ovens and exercise equipment were available on most wings and were well used.
- 2.3 On H wing, which accommodated vulnerable prisoners, 21 cells (fewer than at the time of the previous inspection) designed for one person were used as double cells, which meant that the prisoners housed in them had severely cramped conditions. The in-cell toilet areas lacked privacy, so some prisoners used bedding as a makeshift privacy screen.
- 2.4 More prisoners than at similar prisons and at the time of the previous inspection (66% versus 60% and 49%, respectively) said that they were able to access cell cleaning materials every week. Almost three-quarters said that they could access enough clean, suitable clothes for the week, which was better than at comparator prisons. Prisoners' access to their stored property was not always reliable and many prisoners complained to us about this.
- 2.5 In our survey, only 24% of respondents said that their cell bells were answered within five minutes, compared with 36% at similar prisons. Cell bells were not audible or visible on the wings, and staff had to be told by the central office that these had been activated. Some house blocks could reset cell bells remotely and spoke to prisoners through the intercom. Prisoners complained that their calls were ignored or dismissed. There was no quality assurance or oversight of call bell responses.
- 2.6 Prisoners had access to electronic kiosks, located on each wing, which enabled them to manage some of their daily prison life, including checking their finance accounts, booking visits, and making applications. The applications process mostly worked well but there was no oversight of the timeliness or quality of responses.
- 2.7 The prisoner advice telephone line (PAL) was a useful source of advice and guidance. It was accessed through a free telephone number, and was managed by prisoner peer workers. They provided advice on a wide range of issues, as well as providing information on who to contact about particular problems. This service was impressive but was only open during the core working day, which limited access by those in full-time activity.

Recommendations

- 2.8 Cells designed for single occupancy should not be used for shared occupancy.** (Repeated recommendation 2.11)
- 2.9 Prisoners should have timely and reliable access to their property.**
- 2.10 Residential managers should routinely monitor delays in cell call alarms being reset and be assured that urgent calls receive a prompt response.** (Repeated recommendation 2.13)

Good practice

- 2.11** *The use of the prisoner-run prisoner advice telephone line (PAL) (accessed through a free telephone number) provided a useful source of advice and guidance, and information on who to contact about particular problems.*

Staff-prisoner relationships

Expected outcomes:

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

- 2.12** In our survey, 79% of prisoners said that staff treated them respectfully, although this was lower than at the time of the previous inspection (86%). Most prisoners (72%) said that there was a member of staff they could turn to if they had a problem but few (27%) said that a member of staff had checked on them in the previous week to see how they were getting on.
- 2.13** We saw mostly friendly and professional interactions during the inspection and saw some staff appropriately challenging poor behaviour. However, we also saw some inexperienced staff allowing poor behaviour to continue and struggling to set effective boundaries on behaviour, and this was compounded by a low staff presence on the wings. For example, large groups of prisoners congregated in cells and some staff failed to stop prisoners stealing food from the serveries. Staff did not always use their body-worn cameras (despite wearing them) to assist in early de-escalation of inappropriate or threatening prisoner behaviour.
- 2.14** The personal officer scheme had been recently implemented but many prisoners did not know who their personal officer was. However, it was clear from electronic case records that wing staff had a good knowledge of the prisoners in their care and regularly made meaningful entries relating to their demeanour and behaviour.
- 2.15** There were consultation meetings between prisoners and staff to discuss and influence prison life. However, the minutes did not evidence enough meaningful changes or discussions, and prisoners told us that the meetings were ineffective.

Recommendation

- 2.16 Consistent and confident staff–prisoner relationships should be embedded which set clear expectations on behaviour.**

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 characteristic⁴ 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

- 2.17** Equality and diversity arrangements were underdeveloped and, in some areas, had deteriorated since the previous inspection.
- 2.18** Despite a full-time equality lead in post and designated leads for each of the protected characteristics, the quality of the work was too variable. A local equality policy covered all key aspects but the content was relatively limited and not informed by a current needs analysis. With the exception of foreign nationals, there were no supporting policy documents for prisoners with protected characteristics.
- 2.19** The diversity, equality and action team (DEAT) meeting took place quarterly, chaired by the director. Attendance was reasonable, although a number of the actions listed in the minutes had not been addressed, some for over six months, and several had been removed before completion. There had been no recent survey of prisoners, visitors or staff to assess current need and, while there was an equality action plan, it did not reflect all of the current key priorities for the DEAT.
- 2.20** A limited amount of information was collected and discussed at the DEAT. The data were over-reliant on the HM Prison and Probation Service (HMPPS) monitoring tool (which provided only limited and out-of-date data) and there was insufficient gathering of local information to analyse trends or address concerns. This resulted in the establishment not being sighted on the potential disadvantage, or poor perceptions, of some minority groups, to inform effective action.
- 2.21** In the previous six months, 40 discrimination incident report forms (DIRFs) had been submitted. DIRFs were not well publicised and were not freely available on all wings. Investigations and subsequent replies to DIRFs were reasonable, although a backlog of responses had built up and a number of complaints had remained unanswered for over two months. The DEAT provided some quality assurance of replies and the director signed off all completed DIRFs. However, there was no provision for external scrutiny or other assurance checks.
- 2.22** There was a good number of prisoner equality representatives, and they were well used. They were given a job description and allocated a particular protective characteristic strand. They had also received some equality awareness training, which prisoners spoke about positively. Monthly meetings for representatives took place to provide further support. A few prisoners were able to attend the DEAT, although representatives told us that there were frustrations that some had not been permitted to attend, despite repeated requests.

⁴ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

Recommendation

- 2.23** **Timely and comprehensive equality data should be analysed regularly, to ensure that the needs of minority groups are clearly identified and appropriate action planned as a result.**

Protected characteristics

- 2.24** Planned monthly support forums for prisoners with protected characteristics did not take place and there was little consistent consultation or support for any of these groups, with the exception of foreign nationals. Meetings were sometimes cancelled at short notice and in most cases they were not sufficiently productive, in terms of outcomes.
- 2.25** Approximately 30% of the prison population were from a black and minority ethnic background, and 19% were Muslim. Both of these groups reported more negatively than their counterparts across a range of indicators in our survey. Some cultural celebrations had taken place but were mostly limited to Black History Month, and there had been little external support or celebration so far in 2017.
- 2.26** The forum for black and minority ethnic prisoners had recently been expanded to encompass those from a Gypsy, Romany or Traveller background. It was reasonably well attended, although had no formal agenda or terms of reference to provide structure, and there was little evidence of action points being completed. Data for the different ethnic backgrounds of prisoners were presented at the meeting but there was no evidence of discussion about these.
- 2.27** A 'religion and belief' meeting had been established and was attended by a small number of prisoner representatives, although not all faiths were represented. Discussion was mostly limited to upcoming faith festivals, and was unsighted on some of the negative perceptions of Muslim prisoners identified in our survey (see above).
- 2.28** Foreign national prisoners made up just over 9% of the population. Support for them was well developed, with 10 prisoner representatives and a regular support forum. A detailed strategy had been produced, based on evidence from a needs assessment and focus groups with foreign national prisoners. The prison made good use of approved professional interpreting services. Home office immigration enforcement officers held surgeries every six weeks and a range of information was easily accessible.
- 2.29** In our survey, 21% of prisoners declared themselves to have a disability. The equality manager had developed a useful database for those with disabilities, and the equality department developed personal emergency evacuation plans (PEEPs) for them. Each PEEP was supported by a more in-depth assessment and care plan. However, the management of this process was poor, and these prisoners' needs were not always met. For example, most staff we spoke to were unaware of who these prisoners were and did not know about a care plan to identify the further support that was required. In addition, some PEEPs were incomplete.
- 2.30** Good use was made of paid prisoner carers known as 'Helping Hands', who assisted with practical support such as collecting meals and helping with cell cleaning. Two prisoners located on the main house blocks (and two inpatients) needed social care support and were receiving this from qualified care workers at least twice daily (see also paragraph 2.89). We came across a number of cases where prisoners with disabilities had requested aids to help with their mobility but this had not been dealt with. This included a replacement wheelchair request that had been ongoing for two years. More positively, the establishment was working

towards accreditation with the National Autism Society, and there had been some training and a promotion week to raise staff awareness.

- 2.31** Prisoners aged 50 or over accounted for 12% of the population. Provision for older prisoners was weak, with little dedicated support or consultation. They were mostly housed together on K wing. With the exception of a 'silver readers' weekly library allocation and some limited gym provision, there were no specific initiatives for older prisoners. There was an age forum but it did not meet regularly.
- 2.32** Forums to support gay, bisexual and transgender prisoners had recently been combined under the lifestyles forum, which had met once. Peer support workers were in place but promotion of their work was weak. At the time of the inspection, there was one transgender prisoner living as a woman. She had received some good support, although residential staff had not yet received training or guidance about the individual care of transgender prisoners.

Recommendations

- 2.33 All minority groups should be systematically identified, supported and consulted, to ensure that their needs are assessed and met. Negative perceptions should be understood and any unequal treatment addressed.**
- 2.34 Individual care plans for prisoners with disabilities should be drawn up jointly by equality and health services staff, and should be accessible and appropriately communicated to all staff.**
- 2.35 The prison should ensure all disabled prisoners have prompt access to mobility aids.** (Repeated recommendation 2.30)

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.

- 2.36** Faith provision was good. The chaplaincy was led by a full-time managing chaplain, supported by full-time Muslim and Roman Catholic chaplains. The team was further supplemented by a number of sessional chaplains. All faiths were catered for, with the exception of the Rastafarian religion, as a result of recruitment issues; however, the managing chaplain provided oversight and support groups for the small number of Rastafarian prisoners.
- 2.37** All new prisoners were seen within 24 hours of arrival and were provided with information on the role of the chaplaincy and the services on offer. A needs analysis was undertaken to ensure that the provision was appropriate.
- 2.38** There was good prisoner attendance across all services and events held. Each faith was allocated a morning or afternoon session each week to attend the faith centre, in addition to the faith service provision.
- 2.39** The chaplaincy was well integrated into daily prison life and were involved in a number of key meetings and initiatives across a range of areas, including pastoral care. There were links

with the community and prisoners received good pastoral support on release which included mentoring and the provision of discharge packs.

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.

- 2.40** The number of complaints submitted by prisoners had risen to an average of 320 complaints each month for the previous six months. These were dealt with promptly and the number of interim responses had been reduced.
- 2.41** Most responses were polite and dealt with the issues involved but we found that many of the complaints could have been avoided if staff had dealt with the prisoner's initial request. Most complaints were related to property (see paragraph 2.4 and recommendation 2.9).
- 2.42** Complaints data were discussed at a monthly assurance meeting that identified patterns and trends, and this had resulted in the director identifying some areas requiring improvement.

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.

- 2.43** There was limited information available on legal services provision during induction, and prisoners requiring assistance were signposted to their offender supervisor. For remand prisoners, basic advice was provided and bail accommodation was secured for those needing it.
- 2.44** There was sufficient provision of rooms for legal visits, and prisoners could speak to their legal advisers in private before court proceedings, via video-link.
- 2.45** Prisoners could access a wide range of legal texts from the library, and a number of other useful publications and Prison Service Instructions on request.

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.

2.46 The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁵ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies.

Governance arrangements

2.47 The CQC found no breaches of the relevant regulations.

2.48 NHS England commissioned Care UK to provide health services, and Care UK coordinated the work of all health and substance misuse workers; governance was therefore efficient, although the health needs assessment had not been refreshed since 2015.

2.49 Health services had improved, and 42% of prisoners in our survey rated their overall quality as good, against only 31% at similar prisons and at the time of the previous inspection.

2.50 Governance data and patient consultation informed service delivery. Patient consultation was well developed via monthly surveys, service user groups, focus groups related to identified problems, and feedback from health champions.

2.51 Care UK managers provided strong and visible leadership to a motivated multi-professional team. The team had sufficient staff to provide 24-hour nursing care, seven days a week. Staff members had a rich skills mix and were up to date with mandatory training and clinical supervision.

2.52 Health services staff were clearly identifiable. They knew their patients, and we observed good-natured relationships with them. There was a wide range of Care UK policies, including those on communicable disease management and safeguarding. Information governance and the use of SystmOne (electronic case notes) were sound.

2.53 New arrivals received satisfactory written information on health services. Most services were provided from an expanded health centre, and the overall non-attendance rate, at 6.6%, had improved. However, patients told us about, and we observed, poor access to the health centre due to an insufficiency of escort staff. Patients spent up to two hours in stark waiting rooms sitting on hard metal-slatted seats before and after appointments.

2.54 Clinical and consultation rooms in reception and the health centre were fit for purpose, although the rooms used for mental health and substance misuse consultations were unwelcoming. Wing-based health services rooms did not comply with infection control standards.

2.55 All health department rooms had appropriate emergency equipment, which was regularly checked. An impressive 63% of custodial staff had received first-aid and defibrillator training.

⁵ 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>.

However, no officer had access to the defibrillators and many did not know where they were located, which could have delayed an appropriate emergency response.

- 2.56** The care of older prisoners was good, with the advanced nurse practitioner (ANP) providing well-man clinics and leading on community health screening programmes such as for abdominal aortic aneurysm and bowel cancer.
- 2.57** The health complaints system maintained medical confidentiality. Around 45 such complaints a month had been received in the previous three months, and complainants were offered face-to-face meetings to discuss their concerns. Written responses to complaints were prompt, courteous and focused on the issues of concern. A trial weekly ‘concerns’ drop-in clinic was planned to start on each wing, which was a good innovation.
- 2.58** There was a prison-wide approach to well-being. Relevant departments contributed to health promotion days, based on national public health themes such as ‘Recovery Street’ (a health promotion event) and healthy eating initiatives. The 12 prisoner health champions were very visible and a powerful force for promoting well-being via physical health monitoring, peer information giving, and encouragement. Two health champions were also smoking cessation practitioners, and two members of staff had been assigned to prepare for the prison smoking ban that was due to start in July 2017. Prisoners were being incentivised to stop smoking. Time for Teeth dental staff promoted oral hygiene.
- 2.59** Prisoners had good access to an appropriate range of immunisations, including MMR and meningitis C. Barrier protection was discreetly available.

Recommendation

- 2.60** **Custodial staff should have direct access to well-maintained and checked automated external defibrillators.** (Repeated recommendation 2.57)

Good practice

- 2.61** *The 12 prisoner health champions promoted well-being via physical health monitoring, peer information giving, and encouragement.*

Delivery of care (physical health)

- 2.62** The primary care staff had a high skills mix, including nursing, advanced nursing practice, independent prescribing, and the services of GPs and a range of visiting specialists. Nurses were available from 7.30am to 9pm each day; they were available to patients on the wings and provided an appropriate range of clinics in the health centre.
- 2.63** Nurses saw all new prisoners for an initial assessment in reception. Appropriate follow-up referrals were made. Secondary health screens were completed within three days. On the wings, prisoners requested health service appointments using the electronic kiosks (see paragraph 2.6).
- 2.64** An appropriate range of primary care services was available. Prisoners had daily access to emergency appointments and satisfactory out-of-hours provision. They could book into triage clinics (for immediate health assessment, without an appointment) on each house block or the ‘walk-in’ clinic in the health centre every day.

- 2.65** The ANP assessed all prisoners requesting a GP appointment. The waiting time to see a GP was three weeks, which was too long. However, urgent appointments were available on the same day, and the ANP and pharmacist were available to prescribe. GPs were available out of hours but nurses managed most situations. Waiting times for other services were equivalent or better than those experienced in the community. We did not see care plans for some short-term conditions, such as wound care, but this was rectified during the inspection.
- 2.66** A relevant range of clinics was offered by visiting specialists in hepatology, optometry, sexual medicine and others. Prisoners with lifelong conditions and complex needs were identified and monitored effectively, with clinical reviews of conditions such as asthma and diabetes at appropriate intervals. Patients with diabetes also had access to separate clinics for foot checks and eye screening. Care plans were maintained on SystmOne and subject to regular audit. The list of ongoing tasks for the GPs on SystmOne was too long.
- 2.67** External hospital appointments were well managed. Although 4.2% of appointments had been cancelled owing to a lack of escorts in April and May 2017, this was better than at the time of the previous inspection. In addition, the number of people waiting over 18 weeks for a routine appointment or two weeks for an urgent appointment had reduced. However, administrative staff did not chase referrals that had not been responded to, creating a risk of avoidable delays. Care UK had started a discussion with the prison to increase the number of escort slots available each day because of the increased number of referrals being made, which was appropriate. Pressure on escorts was mitigated to some extent by the increased use of telemedicine and visiting specialists, which reduced the need to send people to hospital.
- 2.68** There were clear clinical criteria for admission to the 11-bed inpatient unit. This was well managed by a senior mental health team leader. A registered nurse was on duty 24 hours a day, and communications with custodial officers were good. Most patients on the unit had enduring mental health needs. As a result of their risk profiles, it was not possible to allow them to have full association together but the patients we spoke to were positive about the support they received. Although education and library staff visited the unit regularly, it was not possible to offer a full therapeutic programme because of the lack of officers to unlock patients to attend activities, and nursing staff access to prisoners was delayed as they did not carry cell keys. Curtailment of therapeutic activities occurred on a daily basis.

Recommendations

- 2.69** **Inpatients should have regular access to therapeutic activities.**
- 2.70** **Nurses should have keys to enable unfettered access to their patients.**

Pharmacy

- 2.71** There had been considerable improvements in pharmacy provision since the previous inspection. For example, an independent prescriber pharmacist was on-site for 30 hours a week. Patients were able to see the pharmacist every Wednesday and there were regular medicine use reviews to optimise treatments.
- 2.72** Three pharmacy technicians ensured that medicines supply, stock control and storage were efficient. The storage of medicines in the main pharmacy was adequate, although the room was accessible to all. There were good reconciliation procedures in the main pharmacy but not all staff diligently recorded when they had used stock medicines.

- 2.73** The management of in-possession and tradable medicines was excellent. In-possession risk assessments were up to date and accessible on SystmOne during drug administration, enabling checks on compliance and safety as soon as patients' files were opened. Only 1% of the prison population received tradable medicines, which demonstrated close scrutiny. Spot checks of compliance were undertaken, although not often, as a result of staffing shortages.
- 2.74** See-to-take medicines were administered twice a day, except for methadone, which was administered at noon. Sleeping tablets were given at 5pm, which was much too early. However, on the inpatient unit, medicines were administered as prescribed, including night sedation.
- 2.75** A wide range of patient group directions (which enable nurses to supply and administer prescription-only medication) and medicines were available, to enable nurses to treat minor ailments and administer more potent medicines without the need for patients to see a doctor. A formal 'special sick' policy (for immediate health treatment without an appointment) was in place but not used.
- 2.76** A clinical governance and medicines management meeting was held monthly and the pharmacist attended these meetings regularly. Standard operating procedures were in place and there was evidence that staff had seen them.

Recommendation

- 2.77** **Patients should receive medications at the times prescribed.**

Good practice

- 2.78** *The on-screen display of in-possession risk assessments for every patient during medicine administration enabled checks on compliance and safety as soon as the patients' files were opened.*

Dentistry

- 2.79** Care UK contracted Time for Teeth to provide the dental service, which was very good. They also provided emergency and out-of-hours cover, which enabled continuity of care.
- 2.80** The dentist and therapist had access to appropriate training and supervision. They offered a full range of NHS treatments every day, and a sensible approach was taken to managing the treatment of remanded persons. Patients waited five to six weeks for non-urgent dental appointments to see the dentist but urgent appointments were available at the next clinic.
- 2.81** The dental suite was fit for purpose, infection control practices were good, and equipment was serviced at the required intervals. The decontamination of reusable equipment was carried out on-site, and staff followed an appropriate dirty-to-clean flow.

Delivery of care (mental health)

- 2.82** In our survey, 24% of prisoners said that they had had emotional or mental health problems on arrival at the prison. Mental health services were impressive, commissioned by Care UK and provided by South Staffordshire and Shropshire Healthcare NHS Foundation Trust (SSSFT). The SSSFT team had a rich skills mix which included mental health and learning disability nursing, occupational therapy, psychiatry and psychology. Staff were well trained

and supervised. Working relationships between prison and mental health staff were effective and an impressive 70% of custodial staff had received mental health awareness training since 2015.

- 2.83** Prisoners were screened for mental health issues at reception and appropriate referrals were made. There was an open referral system from the wings and every referral was seen within three days. At the time of the inspection, the team was supporting 120 patients with mild-to-moderate and severe and enduring needs, with around 50% subject to the care programme approach. There were many therapeutic options, including brief and solution-based therapies, dual diagnosis combined care, cognitive approaches and trauma-based complex case work. However, there was no counselling service available to prisoners with emotional or mental health problems. Care planning was very good.
- 2.84** Only two patients had been transferred to external mental health service in the previous six months, one of whom had waited longer than the 14-day transfer target.

Recommendations

- 2.85 Professional counselling services should be available to prisoners with emotional needs.**
- 2.86 Patients requiring transfer to hospital under the Mental Health Act should be assessed promptly and transferred within the current transfer guideline.**
(Repeated recommendation 2.85)

Social care

- 2.87** Social care was commissioned by Staffordshire County Council (SCC) and provided by Advance Healthcare. An information sharing agreement was in place between the prison and SCC. However, the agreement did not include Care UK or Advance Healthcare. There was a well-developed referral process, and referrals were dealt with in a timely manner.
- 2.88** Advance Healthcare provided an in-depth package of training to their staff and also regular supervision and support. Staff we spoke to felt well supported.
- 2.89** At the time of the inspection, four people were receiving social care. Prisoners were screened for potential social care needs on arrival at the prison and good information was provided during the induction process. Prisoners could self-refer to SCC, or Care UK would make referrals. There were detailed care plans, which clearly described the support that prisoners required. Care plans were reviewed quarterly, although this was done more often if the client's needs changed. Care UK staff had access to the care plans and had occasionally provided people with personal care assistance.

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.

- 2.90** In our survey, 40% of prisoners said that the food was good or very good, which was far better than at comparator prisons (29%) and at the time of the previous inspection (34%). The food we tasted was good.
- 2.91** The main kitchen was clean and well ordered. Prisoners working in the kitchens were awarded a level 2 food hygiene accreditation at the end of the course. Wing serveries were clean but food trolleys had large amounts of ingrained grease and needed deep cleaning. Servery workers did not wear the appropriate clothing or footwear.
- 2.92** Staff did not always adequately supervise or confidently challenge poor prisoner behaviour in servery queues (see also paragraph 2.13). We saw prisoners helping themselves to food in the servery area and responding aggressively if challenged. We also saw some servery workers distributing food to prisoners at the servery doors, ahead of prisoners in the queue and in the presence of staff.
- 2.93** The inspection took place during Ramadan. There was good provision for this festival and prisoners reported very positively on it.

Purchases

Expected outcomes:

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

- 2.94** Prisoners could make their first full prison shop order within 24 hours of arrival, which reduced the potential for debt, and then twice weekly thereafter via the electronic kiosks located on the wings. A range of catalogues was also available.
- 2.95** Regular consultation took place via the prisoner council meeting, which was attended by the shop manager. We found the range of goods available to be comparable with that at other prisons; it included fresh fruit and bakery products, although in our survey black and minority ethnic and Muslim prisoners were more negative than their respective counterparts about the range of products available.

Good practice

- 2.96** *Prisoners could place orders from the prison shop twice a week, and within 24 hours of arrival, which reduced the potential for debt.*

Section 3. Purposeful activity

Time out of cell

Expected outcomes:

All prisoners are actively encouraged to engage in activities available during unlock and the prison offers a timetable of regular and varied activities.⁶

- 3.1** Prisoners who worked full time had a reasonable amount of time out of cell each day, at nearly 10 hours a day during the week. Those who were not in purposeful activities had less than four hours a day out of their cell. In our spot checks during the working day, we found 27% of prisoners locked up, which, although less than at the previous inspection, was still too high.
- 3.2** The regime schedule was displayed on all the wings and it was delivered reliably, with association and unlock taking place on time. In our survey, more prisoners than at similar prisons said that they were able to take part in association more than five times a week, and a similar number said that they regularly had outside exercise. Vulnerable prisoners were no longer subjected to abuse during exercise.

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.

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

Overall effectiveness of learning and skills and work:	<i>Requires improvement</i>
<i>Achievements of prisoners engaged in learning and skills and work:</i>	<i>Requires improvement</i>
<i>Quality of learning and skills and work provision, including the quality of teaching, training, learning and assessment:</i>	<i>Requires improvement</i>
<i>Personal development and behaviour:</i>	<i>Requires improvement</i>
<i>Leadership and management of learning and skills and work:</i>	<i>Requires improvement</i>

⁶ Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities to take showers or make telephone calls.

⁷ Ofsted is the Office for Standards in Education, Children's Services and Skills. It reports directly to the UK Parliament and is independent and impartial. It (inter alia) inspects and regulates services that provide education and skills for all ages, including those in custody. For information on Ofsted's inspection framework, please visit: <http://www.ofsted.gov.uk>.

Management of learning and skills and work

- 3.4** Managers had begun to implement changes, to address the areas for improvement noted in the previous inspection report. This included the development of a learning and skills strategy, and a new pay policy which reduced the differential between work and education. The curriculum had been revised to simplify timetables and increase the uptake of English and mathematics courses by learners whose attainment was below level 1. Progress in addressing these issues had been slow, and the changes had not been in place for long enough to affect most prisoners' experience.
- 3.5** Partnership working was good. The prison worked well with vocational training subcontractors, to enable prisoners working in industry to gain vocational qualifications, including accreditation up to level 3. Regular team meetings and bulletins ensured that staff were well informed about recent changes, and prisoner forums enabled good information exchange.
- 3.6** Procedures for managing prisoners' attendance at activities were rigorous and attendance was good. However, links with offender supervisors required improvement as sentence plans did not always include learning and skills targets.
- 3.7** Quality monitoring and reporting systems were weak. The quality improvement group (QIG) had only recently reconvened after 17 months and was not yet effective. Teaching observations were undertaken but the results were not analysed to identify common areas for improvement. The self-assessment report gave a generally accurate account of the provision but its production did not sufficiently involve teachers and tutors, which reduced its effectiveness in promoting improvements.
- 3.8** Analysis of data was poor. Managers did not routinely use data to monitor provision and identify areas for improvement, and they had too little oversight of learners' progress and achievement. They did not analyse achievement data to show performance at different course levels, and there was no analysis of learners' progression rates, or of achievement by different groups of learners.
- 3.9** Performance management and the development of teaching staff required improvement. The quality of teaching had improved since the previous inspection but progress had been slow and significant weaknesses remained. Managers observed teaching and carried out performance reviews with teachers but the results of these processes were not sufficiently analysed to identify weaknesses and take action to improve them.

Recommendations

- 3.10** **The learning and skills quality manual should be implemented, to provide a clear structure for reporting on all aspects of provision and driving forward further improvement.**
- 3.11** **The use of data should be improved, to analyse the performance of different learner groups and develop actions to address any underperformance identified.**

Provision of activities

- 3.12** There were too few activity places for the population. During the inspection, around 160 prisoners were unemployed and another 133 were occupied only part-time. However, an efficient allocation process ensured that only about 30 of the longer-term prisoners were

fully unemployed, although many had jobs on the wings, which did not usually involve working a full day (see main recommendation S61).

- 3.13** The range of education and vocational training opportunities had increased, and was good. The education curriculum included art, drama, business studies and history. Access to distance learning and Open University courses was good but study facilities were limited. Subcontracted training companies provided good opportunities to work towards higher-level qualifications in industries. However, the painting workshop was closed at the time of the inspection, and the brickwork training facility had been out of use for several months. There were no accreditation opportunities in horticulture or the laundry.
- 3.14** Steps had been taken recently to improve the activity allocation process, which was now good. All prisoners received a prison induction, including an assessment of English and mathematics skills, before attending an allocation board. This board was well conducted, enabling each prisoner to contribute to their activity allocation and to raise other concerns which might affect their learning, such as health and drug misuse issues. These were noted and learners were referred to the appropriate agencies.

Recommendation

- 3.15 Accreditation opportunities should be provided for prisoners working in horticulture and the laundry.**

Quality of provision

- 3.16** High-quality purposeful activity was provided in industry workshops. Learners worked hard to produce large volumes of high-quality work, particularly in the lighting unit assembly workshop, where a long-standing contract with an employer had recently been extended and production increased. There were good opportunities to gain higher-level qualifications in a range of subjects and there was good promotion of the value of English and mathematics for future employment.
- 3.17** Standards of work were good in vocational training, particularly in the barbering salon, kitchens and carpentry workshop. Tutors successfully supported learners' skill development in English and mathematics – for example, in stock control, production targets and calculating percentages.
- 3.18** Teaching in education classes required improvement. Although some teaching was good, in too many cases learners failed to make good progress. The better classes – for example, art, business enterprise and English – were well planned and structured to meet learners' individual needs. There was good use of questioning and discussion to maintain interest and help learners to understand the subject through their own experience. In a successful English class, learners discussed the use of persuasive language in leaflets before designing their own. In a mathematics class, the teacher helped learners to understand fractions by using general election data.
- 3.19** In the poorer classes, teachers relied too much on worksheets and practice papers, and did not use a range of activities and resources to stimulate and challenge learners to make progress according to their potential. There was little use of the new electronic whiteboards, to engage learners and increase their understanding of the use of computer technology. Feedback on learners' written work did not always give them the information they needed to improve. In most classes, teachers missed opportunities to prepare learners for resettlement through the promotion of equality and diversity and British values.

- 3.20** All learners had an individual learning plan (ILP) but the quality of these required improvement. In some mathematics and English classes, teachers did not make use of diagnostic assessments, to set clear targets for learners. Most ILPs did not target or record personal development skills such as communication and team working, vital for learners' resettlement and sustained employment. In industries, ILPs often simply listed the units of the qualification as targets, instead of making clear the skills that learners would be developing as they completed the units. Learners with additional needs were identified but teachers did not always take account of their requirements in planning lessons.
- 3.21** Qualified prisoner learning support assistants (LSAs) often made a good contribution to learning in education classes, providing one-to-one support to learners and assisting teachers. For example, one LSA used his computer skills to devise an interactive mathematics assessment, which learners enjoyed using while being helped to identify the areas in which they needed further practice. However, the deployment of LSAs was not always well planned by teachers.
- 3.22** Most teaching environments were bright and attractive, with good wall displays, although one of the art rooms was too small and lacked essential facilities.

Recommendations

- 3.23** **Staff development for teachers should focus on meeting the needs of all learners, to ensure that they make progress to their potential, by increasing the range of methods employed by teachers and the use of interactive learning technology.**
- 3.24** **Quality monitoring of individual learning plans should be established, to focus on the setting of targets for personal development skills and ensure that learners understand the steps needed to achieve the targets set.**
- 3.25** **Managers should ensure that teachers and trainers take note of the identified additional learning needs of their learners when planning their classes, so that learners can make progress according to their potential.**

Personal development and behaviour

- 3.26** Not enough was done to recognise and record employability skills in classes and workshops. Prisoners' behaviour during learning sessions and at work was generally good. Most learners valued their learning, developed confidence in carrying out their work and made good progress. In art and craft lessons, they talked enthusiastically about their work and were proud of their entries for the current Koestler exhibition. They showed respect for others' views and ideas.
- 3.27** In industrial workshops and vocational training, learners developed employability skills such as team work, supervision and quality control, as well as achieving qualifications recognised in industry. In business enterprise, several learners said that the course had built on their existing business knowledge and skills, which they would apply on release. However, prisoners in industries did not have their employability skills recognised or recorded.
- 3.28** There were several qualified peer mentors, who supported learners well, furthering the harmonious atmosphere in education and training. Mentors had good opportunities to gain accreditations, such as the Award in Education and Training, and Information, Advice and Guidance awards at level 3.

- 3.29** Punctuality and attendance were good in education classes, and very good in vocational classes and industries. The prison had well-developed procedures for managing absences and encouraging attendance. However, classes suffered minor disruptions as a result of learners leaving to attend other appointments – for example, to attend the barbering shop.
- 3.30** The provision to prepare prisoners for release was inadequate. Prisoners did not receive sufficient guidance on job and training opportunities, or how to apply for them (see also paragraph 4.33).

Recommendations

- 3.31** **A framework for the development and recording of learners' personal employability skills should be provided.**
- 3.32** **Pre-release activities should be improved, to prepare learners and help them to succeed in the job market.**

Good practice

- 3.33** *Prisoner peer mentors in education had the opportunity to gain accreditations, such as the Award in Education and Training, and Information, Advice and Guidance awards at level 3.*

Education and vocational achievements

- 3.34** In education classes, the standard of learners' work met the expected level for their course. Most made good progress from their starting points and many progressed onto further learning. There were high success rates in some areas, including art, business enterprise, English, barbering and industrial cleaning. However, pass rates required improvement in some key areas, particularly in level 1 mathematics, and information and communications technology. There were also high drop-out rates on some education courses (for example, history) and in vocational training.
- 3.35** There had been a decline in the success rates on some qualifications in industry workshops. In recent months, the number of learners completing qualifications had fallen to below the 85% agreed by the prison and its subcontractors. Some work had been undertaken to prepare learners better for study, and subcontractors were working more closely with prison managers to evaluate the likelihood of learners staying on a programme and achieving, although it was too early to see the full impact of these initiatives.
- 3.36** The standard of work in carpentry was very good, with learners demonstrating good hand and tool skills, many working towards level 3 industry-recognised qualifications.

Recommendations

- 3.37** **Prisoners' success rates in level 1 mathematics and information and communications technology should be improved.**
- 3.38** **The number of prisoners failing to stay on their programme and complete their qualifications should be reduced.**

Library

- 3.39** The library was an attractive facility in the learning resource centre, which was centrally located in the prison.
- 3.40** Sufficient stock was held, and was well labelled and displayed. It included a range of foreign language texts, and 'quick reads' for learners with lower levels of reading ability. Provision of legal documents and books was very good, with up-to-date copies available. The library also lent music CDs, DVDs and talking books.
- 3.41** The library timetable included half-hour slots for most activity workshops and classes, so access for those attending these activities was good. Education tutors liaised with learning resource centre staff, to arrange resource-based learning activities for their library sessions. Attendance from the wings varied, with low numbers during the week, when movement to the library from some wings was often cancelled. However, the library was open all day on Saturdays, and more prisoners attended then. Some library outreach to the inpatient and segregation units was provided.
- 3.42** Various activities were provided to encourage reader development, including a weekly book club and Storybook Dads (in which prisoners record stories for their children). The library supported the 'Turning Pages' reading scheme to help prisoners learn to read, which had around 30 mentors and a similar number of learners.

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.

- 3.43** Gym provision was good. Careful timetabling ensured that all prisoners, including those in full-time work and education, were able to access fitness activities. There were close working relationships with health services staff, to provide support for prisoners with health issues, who were given dedicated sessions. Gym ambassadors worked well with prisoners on the wings to encourage gym use, and health care ambassadors promoted the value of exercise in improving overall health and well-being.
- 3.44** Managers had addressed the recommendations from the previous inspection. Data on gym usage had been collected and analysed, and users of the gym surveyed to gather their views on how the facility could be improved.
- 3.45** PE staff were well qualified and acted as good role models. The gym was well resourced, with a wide range of aerobic machines, weights and free exercise areas. A large sports hall was available, in which prisoners could play badminton, short tennis and basketball, and an outside artificial turf area housed two five-a-side football pitches. Classes were sometimes cancelled, mostly at weekends, owing to staffing issues, when instructors were needed to work as officers on the wings.
- 3.46** The provision of qualifications in the gym was relatively new. While there were plans to offer level 1 qualifications in health and fitness, and level 2 in personal training, only the pre-level 1 course in health and fitness was offered.

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 prison held a complex mix of prisoners. About 70% of prisoners were serving very long sentences, with a substantial proportion serving indeterminate sentences. In addition to the long-term population, there was a small proportion of prisoners on remand or serving a very short sentence.
- 4.2 Despite such a diverse population, there was too little analysis of the offending-related needs, so the prison was unsighted on the potential differences in the services required. Some evidence was collected through exit surveys completed by prisoners on their release but little other evidence was gathered. For example, offender assessment system (OASys) data had not been used and no recent prison-wide surveys had been undertaken.
- 4.3 There was a reasonably good reducing reoffending strategy. It covered all the main resettlement functions and also included offender management. Action plans for most functions were clear and detailed. Weaknesses in the role of offender supervisors were not covered in any meaningful way and there were no actions identified to further develop this side of the work.
- 4.4 Oversight of the strategy and action plans was reasonably good. A policy group met quarterly but recent attendance had been limited. However, this weakness was mitigated by a monthly resettlement pathway meeting, which was well attended and provided adequate accountability and oversight of progress made against the action plans.
- 4.5 The Staffordshire and West Midlands community rehabilitation company (CRC), owned by the Reducing Reoffending Partnership, delivered the core resettlement services package. However, we found considerable weaknesses in the provision (see sections on reintegration planning and resettlement pathways).

Recommendation

- 4.6 **A comprehensive analysis of the resettlement needs of the population should be undertaken and used to develop provision for the diverse range of prisoners held at the establishment.**

Offender management and planning

Expected outcomes:

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

- 4.7** The overall quality of offender management was reasonably good. Most sentenced prisoners presented a significant risk of harm to others (see paragraph 4.1), requiring robust risk management and effective release planning.
- 4.8** At the time of the inspection, 145 prisoners did not have an up-to-date OASys assessment and sentence plan, which was slightly more than at the time of the previous inspection. Almost all (123) of these were higher-risk prisoners, and therefore the responsibility of the National Probation Service
- 4.9** In most of the cases with an up-to-date sentence plan, there had been reasonably good involvement of the prisoner and the offender manager in its development. In our survey, 65% of those with a sentence plan said that they had been involved in its development, against the 50% comparator. Far more prisoners than elsewhere said that their offender manager was helping them to achieve their sentence plan targets (41% versus 27%).
- 4.10** Offender management unit (OMU) staff worked well together. Case administration was managed effectively and there was good oversight of the work. Uniformed offender supervisors were not operational officers, so there was no cross-deployment to other duties. They were supported by three probation officers, who managed many of the higher-risk and indeterminate-sentenced prisoners. Staffing on the unit was supplemented by two caseworkers in the throughcare team, who provided some offender management work, such as completing Basic Custody Screening Tool (BCST) 1, and acting as a point of contact for prisoners on remand.
- 4.11** In the high-risk cases we reviewed, offender supervisor contact was fairly frequent, which was better than we usually see in similar prisons. When we looked at the quality of contact by offender supervisors, we found a variable picture. In some cases, there was a good focus on sentence progression and risk reduction, including a clear focus on motivation and engagement. However, in other high-risk cases there was too little focus on challenging the prisoner or progressing the sentence plan, with contact tending to be mainly informal; this was particularly the case for prisoners who were more difficult to engage, such as sex offenders in denial.
- 4.12** Many prisoners eligible for home detention curfew (HDC) did not apply for an assessment of their suitability, and we were not sure why this was the case. It was clear, however, that many of those who did apply either had too little time left to serve or were transferred before completion of the assessment. This meant that few prisoners were released on HDC, with only eight in the previous six months.

Recommendations

- 4.13 All high-risk and long-term prisoners should have an up-to-date offender assessment system (OASys) and sentence plan.**
- 4.14 Offender supervisor contact with prisoners should be of consistently good quality, to ensure that all higher-risk prisoners receive meaningful support which is clearly aimed at sentence progression and risk reduction.**
- 4.15 The reasons why so few prisoners apply for a home detention curfew assessment should be explored and action taken to increase the number.**

Public protection

- 4.16** Public protection restrictions and applications for contact with children were managed appropriately. Mail and telephone monitoring were used in relevant cases, with 35 prisoners subject to these restrictions at the time of the inspection. Reviews were held regularly and the restrictions were removed at the earliest opportunity.
- 4.17** Pre-release risk management planning was poor in most of the high-risk cases we reviewed. There was too little evidence that the offender supervisor regularly passed on risk information to the offender manager in the community. This, in turn, led to the offender manager not reviewing the case well enough ahead of release or considering the level of management needed under multi-agency public protection arrangements (MAPPA). The offender supervisor was too often unaware of the MAPPA management level assigned to a case, even when release was imminent, and too little was done to confirm this with the offender manager (see main recommendation S62).
- 4.18** The risk management plans for some high-risk prisoners due for release during the inspection or shortly afterwards were unclear. In one high risk of harm case, the prisoner was released with no fixed address, and there was little evidence of detailed risk management plans having been discussed in the months leading up to release (see main recommendation S62).
- 4.19** This was further compounded by the limited scope of the inter-departmental risk management (IDRM) meeting, which did not routinely review high risk of harm cases due for release, and therefore was unable to contribute to a risk management plan and ensure that issues were escalated. The current IDRM meeting therefore missed opportunities to provide much-needed oversight of high-risk cases.

Categorisation

- 4.20** Initial categorisation work was prompt and recategorisation reviews were managed appropriately, supported by high-quality reports from the offender supervisor. Prisoners had limited involvement in the process, although there were plans to improve this with the introduction of a board which the prisoner would attend.
- 4.21** Once awarded category D status, most prisoners moved on reasonably quickly, and a substantial number (about 80) of category C prisoners moved on each month. Some category B prisoners, including sex offenders who were not suitable for the sex offender treatment programme, stayed at the establishment for too long owing to the lack of prison places nationally. However, not enough was done to ensure that offender supervisors were proactive in prioritising the transfer of these prisoners and engaging them in a progression

plan or other structured work aimed at changing their attitudes and thinking (see paragraph 4.11 and recommendation 4.14).

Indeterminate sentence prisoners

- 4.22** There were 263 indeterminate-sentenced prisoners (ISPs) at the time of the inspection, comprising 207 serving a life sentence and 56 serving an indeterminate sentence for public protection (IPP).
- 4.23** Prisoners on remand were allocated to a caseworker in the throughcare team as a point of contact but were not seen individually to explore concerns about the implications of a potential indeterminate sentence.
- 4.24** ISPs were seen by an offender supervisor within 14 days of sentence and had a planning meeting with their offender manager within three months. A monthly forum was held for ISP representatives, which looked useful and was well attended.
- 4.25** There was little other provision and no specific needs analysis to evidence the provision required for this group. ISP family days had ended. These prisoners could attend the generic family days, and 45 had attended in the previous year, but it was not clear if this met demand.

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.

- 4.26** The demand for resettlement services was fairly high, with about 45 releases a month, including some high-risk prisoners. However, the CRC provision was poor, with long-term staff shortages making it difficult to deliver all aspects of the contract (see main recommendation S63).
- 4.27** BCST 1 assessments were completed by the throughcare caseworkers for all newly sentenced and remand prisoners. Owing to staff shortages in the CRC, some of the interviews for BCST 2 resettlement plans were completed by prisoner peer workers; this was inappropriate, given the potential access this would have given to interviewees' personal information. Resettlement plans based on information gathered by the peer workers were not individualised enough; as a result, referrals were made to support agencies based on little analysis of the actual resettlement problem or personal situation.
- 4.28** We found too many prisoners within 12 weeks of release who had not had their resettlement plan reviewed. We were told that this was because of staff shortages in the CRC.

Accommodation

- 4.29** Housing advice and support on release were limited. The prison's data, gained from exit surveys, showed that half of those being released with an accommodation problem did not feel that they had been helped.

- 4.30** A CRC caseworker attended the prison part-time to support prisoners with more complex housing problems but demand was high and outweighed provision. The CRC caseworker and the CRC manager tried to help when they could, and had some useful local contacts, but they were frustrated by the lack of time they could devote to this. Their knowledge and access to housing providers outside of the local area was limited and they had not had any specific training on giving housing advice.
- 4.31** A session aimed at supporting prisoners with housing problems ('Finding a Home, Keeping a Home') had not yet run. However, the chaplaincy worked hard to help some prisoners to find accommodation through faith-based charities in the community.
- 4.32** The full extent of prisoners being released without settled and sustainable accommodation was unknown. Data collection was basic, relying on the prisoner's declaration of his accommodation status on release, which was not validated at a later stage (see main recommendation S63).

Education, training and employment

- 4.33** Support for prisoners to find employment or training on release was poor. The contracted provider (Ingeus) was not attending the prison, despite repeated requests by prison managers for this to happen as a matter of priority. There was no careers service provision or pre-release course, and no access to the virtual campus (internet access for prisoners to community education, training and employment opportunities). Some limited help with CV preparation was provided. Evidence of outcomes for prisoners in relation to their education, training and employment and accommodation status following release was not collated, so it was difficult to evidence effectiveness (see main recommendation S63).
- 4.34** Prisoners were invited to attend an interview with Jobcentre Plus about four weeks before their release. This dealt mainly with benefit claims and issues.
- 4.35** Jobcentre Plus had been working with the education department to provide a weekly job club but this was not operating at the time of the inspection.

Health care

- 4.36** Pre-release health care arrangements were effective. Patients were seen seven days before release. Take-home medication, letters to GPs and harm minimisation advice were given as necessary, and those without a GP were helped to find one.
- 4.37** Community liaison for patients with serious mental health disorders and subject to the care programme approach was unusually good. Palliative care arrangements were effective.

Drugs and alcohol

- 4.38** The integrated substance misuse team had good links with local community-based support agencies, with some attending the prison to meet prisoners before release.
- 4.39** Prisoners with a history of opiate use were offered training in the use of naloxone (an opiate overdose antidote), and a kit containing the antidote was given to them on release.

Finance, benefit and debt

- 4.40 As with the accommodation and education, training and employment pathways, support for finance, benefit and debt was too limited. A debt adviser from Birmingham Settlement (a debt advice agency) attended the prison three days a month and worked with a small number of prisoners during each visit.
- 4.41 Birmingham Settlement was able to provide a range of help, including tenancy advice, debt support and bankruptcy advice, but there was a large backlog of work and as a result some prisoners were not seen before their release or transfer (see main recommendation S63).
- 4.42 Bank accounts could be opened before release but staff were unable to tell us the number of successful applications.

Children, families and contact with the outside world

- 4.43 Provision to encourage and maintain contact with children and families had improved. The proactive family intervention coordinator was supported by a family worker and had assisted in the development of a wide range of courses and support groups for parenting.
- 4.44 A 'Me 'n' My Dad' workshop ran quarterly and helped prisoners and families to understand what it was like to be a parent while in custody. Prisoners who completed this pathway could access a 'dads' club', which provided a range of activities, including making gifts for their children.
- 4.45 A variety of themed family days covered a wide range of needs, and included partners and friends as well as children. For example, there were advanced plans for a family day aimed at supporting foreign national prisoners.
- 4.46 The family provision was underpinned by the use of the Acorn suite to support prisoners and families. This was an excellent resource, providing a separate room within the main visits hall that had been decorated and furnished to provide relaxing facilities. The room was used for a number of initiatives, including baby bonding, visits that involved social services, contact or mediation visits, visits for children with special needs, as well as use by the chaplaincy for bereavement support.
- 4.47 Visits were available daily, started promptly and lasted for up to two hours, but the session was terminated if the prisoner needed to use the toilet, which was unacceptable.
- 4.48 The external visitors centre was poorly equipped, in need of redecoration and lacked information for visitors. The visits room was reasonable and visitors could buy hot and cold snacks from the refreshment bar.

Recommendation

- 4.49 **Prisoners should be allowed to use the toilet facilities without ending their visits session.**

Attitudes, thinking and behaviour

- 4.50** The range of accredited offending behaviour programmes (the thinking skills programme, Building Better Relationships, RESOLVE (a cognitive-behavioural intervention) and the Self-Change Programme) was relevant to the population. The programmes were well managed and an ongoing analysis of the population ensured that programme places were used well.
- 4.51** There was little offending behaviour work available for those assessed as unsuitable for accredited programmes. An anger management module had been introduced by the CRC but had only been delivered once at the time of the inspection. There was no specific provision to raise victim awareness, other than an in-cell workbook, which was not well used.
- 4.52** The psychology team was proactive and involved in a wide range of activities across the prison. They provided a valuable range of assessments, including progression planning for IPP prisoners who were over-tariff. They also provided advice and support to others, alongside delivering awareness training for staff, such as stress and anxiety management and motivational interviewing.

Recommendation

- 4.53** **The need for a specific victim awareness course should be assessed and an appropriate course provided if required.** (Repeated recommendation 4.59)

Additional resettlement services

- 4.54** A Veterans in Custody support scheme was in place and managed proactively by a lead officer. Monthly meetings ensured ongoing support, and a wide range of help was available for those being released, including help for their families, such as grants for basic household items.

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 recommendations

To the director

- 5.1** The focus on violence and drug supply reduction should continue with a thorough analysis of violent incidents. The current violence and drug reduction plans should be developed further. Outcomes should be reviewed and evaluated and, where necessary, actions should be adapted to ensure maximum impact. (S59)
- 5.2** Levels of segregation and use of force should be monitored and managerial oversight improved to provide robust governance and assurance. (S60)
- 5.3** The number of purposeful activity places should be increased, to enable all prisoners to engage in education, skills or work activities that are of a good standard and promote personal development and employability. (S61)
- 5.4** In partnership with outside agencies, comprehensive risk management plans should be developed for all high-risk prisoners due for release. (S62)
- 5.5** The quality of prisoners' resettlement plans should be improved, and all prisoners should have their needs reviewed before release. All prisoners should have access to good-quality help to address their finance and debt problems and find sustainable accommodation and employment on release. (S63)

Recommendation

To HMPPS

Offender management and planning

- 5.6** All high-risk and long-term prisoners should have an up-to-date offender assessment system (OASys) and sentence plan. (4.13)

Recommendations

To the director

Courts, escort and transfers

- 5.7** Prisoners' property should arrive with them or within a reasonable period after their arrival. (1.5, repeated recommendation 1.3)

Early days in custody

- 5.8** Reception interviews should be conducted in private. (1.15)

- 5.9** Orderlies should be closely supervised while in reception. (1.16, repeated recommendation 1.13)
- 5.10** All first night cells should be free of graffiti and fully equipped. (1.17)

Self-harm and suicide

- 5.11** Action plans developed following death in custody investigations and serious near-fatal incidents of self-harm should be reviewed periodically to ensure that changes in practice and lessons learned are sustained over time. (1.33, repeated recommendation 1.29)
- 5.12** Listeners should be able to meet prisoners in crisis in an appropriately furnished and supportive environment. (1.34)

Safeguarding

- 5.13** Comprehensive adult safeguarding procedures should be introduced and embedded across the prison, and the prison should be represented on the local safeguarding adults board. (1.38)

Security

- 5.14** Prisoners in reception should only be strip-searched following an individual risk assessment and prisoners should not be routinely handcuffed between reception and escort vehicles. (1.47)
- 5.15** The prison should implement a prison-wide, coordinated and action-planned approach to reduce the supply of illicit drugs. (1.48)

Discipline

- 5.16** A consistent and appropriate response to poor behaviour and punishments should be introduced. (1.54)

Substance misuse

- 5.17** Prisoners arriving at the prison with opiate dependency should have access to first night prescribing of opiate substitutes and not just symptomatic relief. (1.69)

Residential units

- 5.18** Cells designed for single occupancy should not be used for shared occupancy. (2.8, repeated recommendation 2.11)
- 5.19** Prisoners should have timely and reliable access to their property. (2.9)
- 5.20** Residential managers should routinely monitor delays in cell call alarms being re-set and be assured that urgent calls receive a prompt response. (2.10, repeated recommendation 2.13)

Staff-prisoner relationships

- 5.21** Consistent and confident staff-prisoner relationships should be embedded which set clear expectations on behaviour. (2.16)

Equality and diversity

- 5.22** Timely and comprehensive equality data should be analysed regularly, to ensure that the needs of minority groups are clearly identified and appropriate action planned as a result. (2.23)
- 5.23** All minority groups should be systematically identified, supported and consulted, to ensure that their needs are assessed and met. Negative perceptions should be understood and any unequal treatment addressed. (2.33)
- 5.24** Individual care plans for prisoners with disabilities should be drawn up jointly by equality and health services staff, and should be accessible and appropriately communicated to all staff. (2.34)
- 5.25** The prison should ensure all disabled prisoners have prompt access to mobility aids. (2.35, repeated recommendation 2.30)

Health services

- 5.26** Custodial staff should have direct access to well-maintained and checked automated external defibrillators. (2.60, repeated recommendation 2.57)
- 5.27** Inpatients should have regular access to therapeutic activities. (2.69)
- 5.28** Nurses should have keys to enable unfettered access to their patients. (2.70)
- 5.29** Patients should receive medications at the times prescribed. (2.77)
- 5.30** Professional counselling services should be available to prisoners with emotional needs. (2.85)
- 5.31** Patients requiring transfer to hospital under the Mental Health Act should be assessed promptly and transferred within the current transfer guideline. (2.86, repeated recommendation 2.85)

Learning and skills and work activities

- 5.32** The learning and skills quality manual should be implemented, to provide a clear structure for reporting on all aspects of provision and driving forward further improvement. (3.10)
- 5.33** The use of data should be improved, to analyse the performance of different learner groups and develop actions to address any underperformance identified. (3.11)
- 5.34** Accreditation opportunities should be provided for prisoners working in horticulture and the laundry. (3.15)
- 5.35** Staff development for teachers should focus on meeting the needs of all learners, to ensure that they make progress to their potential, by increasing the range of methods employed by teachers and the use of interactive learning technology. (3.23)
- 5.36** Quality monitoring of individual learning plans should be established, to focus on the setting of targets for personal development skills and ensure that learners understand the steps needed to achieve the targets set. (3.24)

- 5.37** Managers should ensure that teachers and trainers take note of the identified additional learning needs of their learners when planning their classes, so that learners can make progress according to their potential. (3.25)
- 5.38** A framework for the development and recording of learners' personal employability skills should be provided. (3.31)
- 5.39** Pre-release activities should be improved, to prepare learners and help them to succeed in the job market. (3.32)
- 5.40** Prisoners' success rates in level 1 mathematics and information and communications technology should be improved. (3.37)
- 5.41** The number of prisoners failing to stay on their programme and complete their qualifications should be reduced. (3.38)

Strategic management of resettlement

- 5.42** A comprehensive analysis of the resettlement needs of the population should be undertaken and used to develop provision for the diverse range of prisoners held at the establishment. (4.6)

Offender management and planning

- 5.43** Offender supervisor contact with prisoners should be of consistently good quality, to ensure that all higher-risk prisoners receive meaningful support which is clearly aimed at sentence progression and risk reduction. (4.14)
- 5.44** The reasons why so few prisoners apply for a home detention curfew assessment should be explored and action taken to increase the number. (4.15)

Reintegration planning

- 5.45** Prisoners should be allowed to use the toilet facilities without ending their visits session. (4.49)
- 5.46** The need for a specific victim awareness course should be assessed and an appropriate course provided if required. (4.53, repeated recommendation 4.59)

Examples of good practice

Early days in custody

- 5.47** The follow-up support interviews by trained Insiders at seven and 21 days after arrival provided additional support and guidance to new prisoners. (1.18)

Self-harm and suicide

- 5.48** The prison-wide publication of factors associated with the potential for increased self-harm promoted staff awareness and reminded them to be alert to individual circumstances. (1.35)

Substance misuse

- 5.49** The integrated substance misuse team (ISMT) included a fully qualified and accredited counsellor who provided sessions with prisoners to explore the issues underlying their substance use. (1.70)
- 5.50** Sleep hygiene groups helped prisoners to tackle sleeplessness without using illicit substances. (1.71)
- 5.51** Prisoners could contact the ISMT using their in-cell telephone, free of charge, if they needed support. (1.72)
- 5.52** Prisoners who had tested positive for using new psychoactive substances (NPS) could attend the ISMT-run NPS awareness course. (1.73)

Residential units

- 5.53** The use of the prisoner-run prisoner advice telephone line (PAL) (accessed through a free telephone number) provided a useful source of advice and guidance, and information on who to contact about particular problems. (2.11)

Health services

- 5.54** The 12 prisoner health champions promoted well-being via physical health monitoring, peer information giving, and encouragement. (2.61)
- 5.55** The on-screen display of in-possession risk assessments for every patient during medicine administration enabled checks on compliance and safety as soon as the patients' files were opened. (2.78)

Purchases

- 5.56** Prisoners could place orders from the prison shop twice a week, and within 24 hours of arrival, which reduced the potential for debt. (2.96)

Learning and skills and work activities

- 5.57** Prisoner peer mentors in education had the opportunity to gain accreditations, such as the Award in Education and Training, and Information, Advice and Guidance awards at level 3. (3.33)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy Chief Inspector
Alison Perry	Team leader
Sandra Fieldhouse	Inspector
Paul Rowlands	Inspector
Maneer Afsar	Inspector
Ian Dickens	Inspector
Jonathan Tickner	Inspector
Emma Seymour	Researcher
Ellis Cowling	Researcher
Helen Ranns	Researcher
Anna Fenton	Researcher
Alissa Redmond	Researcher
Paul Roberts	Substance misuse inspector
Paul Tarbuck	Lead health services inspector
Mohammed Noor	Pharmacist
Matthew Tedstone	Care Quality Commission inspector
Stephen Oliver-Watts	Ofsted inspector
Mary Devane	Ofsted inspector
David Baber	Ofsted inspector
Keith Humphreys	Offender management inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2015, journeys were generally short but many prisoners complained that not all their property arrived with them. Processes during prisoners' early days in custody needed improvement. Too many prisoners told us they felt unsafe and victimised, but survey results were similar to the previous full inspection. The level of violence was high and many incidents were serious. Staffing levels in the units did not reassure prisoners. There was insufficient follow-up of recommendations arising from previous deaths in custody, but care for prisoners vulnerable to self-harm was good, although too many were held in segregation. Formal structures to support adult safeguarding were being developed. Security arrangements were vigorous but generally proportionate. Drugs were widely available. The incentives and earned privileges (IEP) scheme required improvement. The number of adjudications was high but processes were well managed. Force was used frequently and governance needed to improve. The segregation regime was poor but relationships were good. Clinical management of prisoners with substance misuse problems needed to be better. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

A review of the specific function of each unit should be conducted to ensure newly arrived prisoners are located where they can best be supported, and arrangements to ensure their wellbeing are appropriate. (S42)

Achieved

The prison should develop an effective strategy to address the underlying reasons for violence between prisoners and ensure that the location of those who need to be kept apart does not impact negatively on other prisoners. (S43)

Achieved

Monitoring and quality assurance procedures for use of force should be developed to ensure that all incidents, including planned interventions, are reviewed promptly and that force is used proportionately and as a last resort. Reports should accurately reflect in sufficient detail what happened. (S44)

Not achieved

Recommendations

Prisoners' property should arrive with them on transfer or within a reasonable period after their arrival. (I.3)

Not achieved (recommendation repeated, I.5)

Prisoners should receive sufficient notice of planned transfers subject to well-evidenced security considerations. (1.4)

Achieved

Procedures should be expedited and new arrivals should not be held in reception for extended periods. (1.11)

Achieved

Prisoners in reception should only be strip-searched and required to squat following an individual risk assessment. (1.12)

Not achieved

Orderlies should be closely supervised while in reception. (1.13)

Not achieved (recommendation repeated, 1.16)

Staffing levels on residential wings should be adequate to reassure prisoners about their safety. (1.21)

Not achieved

Action plans developed following death in custody investigations and serious near-fatal incidents of self-harm should be reviewed periodically to ensure that changes in practice and lessons learned from these incidents are sustained. (1.29)

Not achieved (recommendation repeated, 1.33)

Prisoners subject to ACCT procedures should not be held in segregation unless an assessment shows it is the only appropriate place for them. (1.30)

Achieved

The governor should support the developing links with adult social services and the safeguarding adults board and ensure a whole-prison approach to safeguarding is promoted through the CAPS meetings. (1.37)

Not achieved

Applications for the enhanced regime should be considered promptly and prisoners promoted if appropriate. (1.49)

Achieved

Reviews should consider all the available information about a prisoner and should be fully recorded. Targets should reflect prisoners' individual circumstances. (1.50)

Achieved

Prison managers should monitor the progress of adjudications and take action to ensure they are carried out within a reasonable time. (1.53)

Not achieved

The use of special accommodation should be properly documented. (1.57)

Not achieved

The regime for those held in segregation should be improved, and reintegration planning should be undertaken for all prisoners in the unit. (1.64)

Not achieved

Prisoners should have consistent access to group-work interventions that meet identified needs, and the prison should ensure they can be delivered safely and in a suitable environment. (1.71)

Achieved

The clinical management of prisoners who are dependent on drugs and alcohol should be improved by providing first night treatment and ensuring prompt admission to the stabilisation unit. (1.72)

Partially achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2015, living conditions were generally good but prisoners were frustrated about their lack of access to some amenities. Staff–prisoner relationships were respectful, although prisoners complained about difficulties in getting hold of staff on wings. Monitoring of equality and diversity outcomes was inadequate but some good individual support was provided. The management of complaints was reasonable and offender managers directed prisoners to legal services. Prisoners were negative about health care, although the picture overall was improving. The inpatient unit had improved. In our survey, prisoners were more positive about the quality of the food than those at similar prisons. Canteen arrangements were reasonable overall. Outcomes for prisoners were reasonably good against this healthy prison test.

Recommendations

Cells designed for single use should not be used for shared occupancy. (2.11)

Not achieved (recommendation repeated, 2.8)

The ordering, storage and issue of basic hygiene and cleaning materials should be reviewed to ensure that they are consistently available to prisoners. (2.12)

Not achieved

Residential managers should routinely monitor delays in cell call alarms being re-set and be assured that urgent calls receive a prompt response. (2.13)

Not achieved (recommendation repeated, 2.10)

A nominated member of staff should make regular checks on the wellbeing of prisoners for whom they are responsible, and record this on P-Nomis. (2.16)

Achieved

The prison should introduce effective equality monitoring and equality impact assessments for all protected characteristics. (2.24)

Not achieved

The prison should ensure all disabled prisoners have prompt access to mobility aids. (2.30)

Not achieved (recommendation repeated, 2.35)

The non-attendance rates for all clinics should be reduced to under 12% and prisoners should not have excessive waits before and after their clinic appointments. (2.55)

Partially achieved

There should be sufficient clinical rooms for the population and all clinical areas should be fully compliant with current infection control standards. (2.56)

Achieved

Custodial staff should have easy direct access to well-maintained and checked automatic external defibrillators. (2.57)

Not achieved (recommendation repeated, 2.60)

A designated senior health lead staff member should develop health services for older prisoners and those with disabilities, which should include prompt access to all relevant community screening programmes. (2.58)

Achieved

Prisoners should be able to complain about health services through a confidential system and all responses to complaints should address all the issues raised. (2.59)

Achieved

A prison health promotion action group should oversee a systematic programme of health promotion, which should include community equivalent access to hepatitis C identification, management and treatment. (2.60)

Achieved

Prisoners should have prompt access to GP services, including first night assessment and confidential nurse assessment clinics provided by trained staff who can provide appropriate treatment using evidence-based triage algorithms. (2.67)

Achieved

Prisoners should have timely access to external hospital appointments. (2.68)

Achieved

A pharmacist should attend the prison regularly to provide governance assurance on medication and regular clinics for prisoners, and all pharmacy staff should be appropriately trained. (2.74)

Achieved

All medicines, including controlled drugs, should be prescribed, ordered and stored in line with current professional standards and administered according to the recommended dosage regime to ensure effective patient care. (2.75)

Achieved

A wider range of medicines should be available for health professionals to administer without a prescription when clinically appropriate, underpinned by current out-of-hours and special sick policies. (2.76)

Achieved

Mental health provision should include specialist abuse counselling and formal dual diagnosis services. (2.84)

Achieved

Patients requiring a transfer under the Mental Health Act should be assessed promptly and transferred within the current transfer guidelines. (2.85)

Not achieved (recommendation repeated, 2.86)

Purposeful activity

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

At the last inspection, in 2015, fully employed prisoners had a good amount of time out of their cells, but too many others were locked up during the working day. Some aspects of the management of learning and skills needed to be improved, including attendance, which was poor. Sufficient activity places were available and the range of courses was good. However, teaching was variable and achievements in many areas needed to be better. The library was adequate and the gym offered some good opportunities. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

The prison should review the scheduling and duration of lessons as well as the equipment used in the classroom and consider alternatives that better meet learners' needs. (S45)

Achieved

Recommendations

A reasonable amount of time out of cell should be available for all prisoners. (3.4)

Achieved

Vulnerable prisoners should be able to access outside exercise free of abuse from other prisoners. (3.5)

Achieved

The prison should strengthen its observation of the teaching and learning process and ensure that observers focus on the quality of learning. (3.12)

Achieved

The prison should review the pay disparity between prisoners who are in employment and those who attend education. (3.13)

Achieved

Education data should be analysed and used to improve the quality of the provision. (3.14)

Not achieved

The prison should take swift action to ensure that all prisoners attend the activities to which they are allocated. (3.18)

Achieved

Managers should ensure that maths and English are promoted more effectively within vocational subjects. (3.25)

Partially achieved

The prison should identify the reasons for poor outcomes on many courses and take effective improvement actions. (3.28)

Not achieved

The prison should update its fiction and non-fiction provision and include more easy-read material for those wanting to improve their English language skills. (3.32)

Achieved

The prison should promote health and wellbeing and increase the proportion of prisoners who regularly use the PE facilities. (3.38)

Achieved

The PE department should make better use of data to monitor the use of the facilities and evaluate the take-up by different groups of prisoners. (3.39)

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 2015, there was a good understanding of the resettlement needs of the population. Offender management arrangements were mixed; most case work needed to be better, but offender supervisors provided good ongoing support. Public protection arrangements were good. Support for indeterminate sentence prisoners was good. Resettlement reintegration work was good and prisoners' needs were assessed on arrival and again pre-release. Some good reducing reoffending pathway support was provided, although visits needed attention. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

Work to help prisoners develop and maintain positive relationships with their families should be developed and extended. Visit arrangement should be improved. (S46)

Achieved

Recommendations

Processes should be developed to identify and address offender managers' lack of involvement in assessment and sentence planning. (4.18)

Achieved

Quality assurance and performance management procedures should be improved to ensure that all case work is of a sufficient standard. (4.19)

Not achieved

Sentence planning objectives should be clear, specific and measurable. (4.20)

Partially achieved

The system of ascertaining, reviewing and recording MAPPA management levels pre-release should be systematised. (4.27)

Not achieved

All resettlement housing workers should receive adequate training. (4.42)

Not achieved

Virtual campus or its equivalent should be available and well used. (4.44)

Not achieved

Prisoners should be supplied with at least seven days' medication on release or have continuous prescribing arranged prior to release to ensure continuity of care. (4.46)

Achieved

The need for a specific victim awareness course should be assessed and an appropriate course provided if required. (4.59)

Not achieved (recommendation repeated, 4.53)

Appendix III: Prison population profile

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

Status	18–20-year-olds	21 and over	%
Sentenced	0	686	80
Recall	0	64	7.5
Convicted unsentenced	0	28	3.3
Remand	0	78	9.1
Civil prisoners	0	0	0
Detainees	0	2	0.2
Total	0	858	100

Sentence	18–20-year-olds	21 and over	%
Unsentenced	0	113	13.2
Less than six months	0	23	2.7
six months to less than 12 months	0	3	0.3
12 months to less than 2 years	0	14	1.6
2 years to less than 4 years	0	40	4.7
4 years to less than 10 years	0	110	12.8
10 years and over (not life)	0	292	34.0
ISPP (indeterminate sentence for public protection)	0	56	6.5
Life	0	207	24.1
Total	0	858	100

Age	Number of prisoners	%
Please state minimum age here:	21	
Under 21 years	0	
21 years to 29 years	306	35.7
30 years to 39 years	315	36.7
40 years to 49 years	141	16.4
50 years to 59 years	65	7.6
60 years to 69 years	19	2.2
70 plus years	12	1.4
Please state maximum age here:	82	
Total		100

Nationality	18–20-year-olds	21 and over	%
British	0	780	90.9
Foreign nationals	0	74	8.6
Not stated		4	0.5
Total	0	858	100

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced	0	111	12.9
Uncategorised sentenced	0	0	0
Category A	0	0	0
Category B	0	593	69.1
Category C	0	128	14.9
Category D	0	25	2.9
Other	0	1	0.1
Total	0	858	100

Ethnicity	18–20-year-olds	21 and over	%
White			
British	0	557	64.9
Irish	0	2	0.2
Gypsy/Irish Traveller	0	4	0.5
Other white	0	30	3.5
Mixed			
White and black Caribbean	0	29	3.4
White and black African	0	2	0.2
White and Asian	0	5	0.6
Other mixed	0	10	1.2
Asian or Asian British			
Indian	0	22	2.6
Pakistani	0	41	4.8
Bangladeshi	0	7	0.8
Chinese	0	1	0.1
Other Asian	0	13	1.5
Black or black British			
Caribbean	0	80	9.3
African	0	20	2.3
Other black	0	21	2.4
Other ethnic group			
Arab	0	0	0
Other ethnic group	0	10	1.2
Not stated	0	4	0.5
Total	0	858	100

Religion	18–20-year-olds	21 and over	%
Baptist	0	1	0.1
Church of England	0	130	15.2
Roman Catholic	0	167	19.5
Other Christian denominations	0	110	12.8
Muslim	0	164	19.1
Sikh	0	12	1.4
Hindu	0	1	0.1
Buddhist	0	12	1.4
Jewish	0	4	0.5
Other	0	14	1.6
No religion	0	243	27.7
Total	0	858	100

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

Sentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	0	0	72	8.4
1 month to 3 months	0	0	86	10
3 months to six months	0	0	111	12.9
six months to 1 year	0	0	112	13.1
1 year to 2 years	0	0	171	19.9
2 years to 4 years	0	0	151	17.6
4 years or more	0	0	39	4.5
Other			3	
Total	0	0	745	86.4

Sentenced prisoners only

	18–20-year-olds	21 and over	%
Foreign nationals detained post sentence expiry	0	0	0
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions).	0	0	0
Total	0	0	0

Unsentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	0	0	42	4.9
1 month to 3 months	0	0	41	4.8
3 months to six months	0	0	15	1.7
six months to 1 year	0	0	10	1.2
1 year to 2 years	0	0	4	0.5
2 years to 4 years	0	0	0	0
4 years or more	0	0	1	0.1
Total	0	0	113	13.2

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

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 establishment⁸. Respondents were then randomly selected from a P-Nomis prisoner population printout using a stratified systematic sampling method. We also ensured that the proportion of black and minority ethnic prisoners in the sample reflected the proportion in the prison as a whole.

Distributing and collecting questionnaires

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

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

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

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

Survey response

At the time of the survey on 22 May 2017 the prisoner population at HMP Dovegate was 860. Using the method described above, questionnaires were distributed to a sample of 216 prisoners.

We received a total of 175 completed questionnaires, a response rate of 81%. This included two questionnaires completed via interview. Seventeen respondents refused to complete a questionnaire and 24 questionnaires were not returned.

⁸ 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.

Wing/Unit	Number of completed survey returns
A	13
B	7
C	12
D	10
E	14
F	10
G	13
H	18
J	9
K	11
L	13
M	14
N	14
P	10
Health care	3
Segregation unit	4

Presentation of survey results and analyses

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

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 differences⁹ 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 Dovegate in 2017 compared with responses from prisoners surveyed in all other category B training prisons. This comparator is based on all responses from prisoner surveys carried out in six category B training prisons since April 2014.
- The current survey responses from HMP Dovegate in 2017 compared with the responses of prisoners surveyed at HMP Dovegate in 2015.

⁹ 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.

- 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.
- A comparison within the 2017 survey between those who are aged 50 and over and those under 50.
- A comparison within the 2017 survey between the responses of prisoners on H wing (vulnerable prisoner unit) and the rest of the establishment.
- A comparison within the 2017 survey between the responses of prisoners on L, N and P wings and the rest of the establishment.

Survey summary

Section I: About you

QI.1	What wing or houseblock are you currently living on? See survey methodology.	
QI.2	How old are you?	
	Under 21	1 (1%)
	21 - 29.....	66 (38%)
	30 - 39.....	52 (30%)
	40 - 49.....	31 (18%)
	50 - 59.....	15 (9%)
	60 - 69.....	5 (3%)
	70 and over.....	3 (2%)
QI.3	Are you sentenced?	
	Yes.....	147 (84%)
	Yes - on recall.....	11 (6%)
	No - awaiting trial.....	9 (5%)
	No - awaiting sentence.....	8 (5%)
	No - awaiting deportation.....	0 (0%)
QI.4	How long is your sentence?	
	Not sentenced.....	17 (10%)
	Less than 6 months.....	6 (3%)
	6 months to less than 1 year.....	6 (3%)
	1 year to less than 2 years.....	5 (3%)
	2 years to less than 4 years.....	8 (5%)
	4 years to less than 10 years.....	16 (9%)
	10 years or more.....	68 (39%)
	IPP (indeterminate sentence for public protection).....	12 (7%)
	Life.....	37 (21%)
QI.5	Are you a foreign national (i.e. do not have UK citizenship)?	
	Yes.....	10 (6%)
	No.....	162 (94%)
QI.6	Do you understand spoken English?	
	Yes.....	173 (99%)
	No.....	1 (1%)
QI.7	Do you understand written English?	
	Yes.....	172 (99%)
	No.....	2 (1%)

Q1.8	What is your ethnic origin?		
	White - British (English/ Welsh/ Scottish/ Northern Irish)	109 (64%)	Asian or Asian British - Chinese 0 (0%)
	White - Irish	3 (2%)	Asian or Asian British - other 1 (1%)
	White - other	9 (5%)	Mixed race - white and black Caribbean. 9 (5%)
	Black or black British - Caribbean	14 (8%)	Mixed race - white and black African 1 (1%)
	Black or black British - African.....	6 (4%)	Mixed race - white and Asian 1 (1%)
	Black or black British - other.....	1 (1%)	Mixed race - other..... 1 (1%)
	Asian or Asian British - Indian.....	3 (2%)	Arab..... 2 (1%)
	Asian or Asian British - Pakistani	7 (4%)	Other ethnic group
	Asian or Asian British - Bangladeshi.....	2 (1%)	2 (1%)
Q1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?		
	Yes		2 (1%)
	No.....		165 (99%)
Q1.10	What is your religion?		
	None.....	43 (25%)	Hindu..... 0 (0%)
	Church of England	46 (27%)	Jewish..... 1 (1%)
	Catholic	34 (20%)	Muslim..... 22 (13%)
	Protestant.....	3 (2%)	Sikh
	Other Christian denomination	12 (7%)	3 (2%)
	Buddhist	3 (2%)	Other
			5 (3%)
Q1.11	How would you describe your sexual orientation?		
	Heterosexual/ Straight		167 (98%)
	Homosexual/Gay.....		1 (1%)
	Bisexual.....		2 (1%)
Q1.12	Do you consider yourself to have a disability (i.e. do you need help with any long term physical, mental or learning needs)?		
	Yes		37 (21%)
	No.....		136 (79%)
Q1.13	Are you a veteran (ex- armed services)?		
	Yes		10 (6%)
	No.....		161 (94%)
Q1.14	Is this your first time in prison?		
	Yes		50 (29%)
	No.....		122 (71%)
Q1.15	Do you have children under the age of 18?		
	Yes		73 (42%)
	No.....		99 (58%)

Section 2: Courts, transfers and escorts

Q2.1	On your most recent journey here, how long did you spend in the van?		
	Less than 2 hours		85 (49%)
	2 hours or longer		75 (44%)
	Don't remember		12 (7%)

Q2.2	On your most recent journey here, were you offered anything to eat or drink?	
	<i>My journey was less than two hours</i>	85 (49%)
	<i>Yes</i>	56 (32%)
	<i>No</i>	25 (14%)
	<i>Don't remember</i>	7 (4%)
Q2.3	On your most recent journey here, were you offered a toilet break?	
	<i>My journey was less than two hours</i>	85 (50%)
	<i>Yes</i>	7 (4%)
	<i>No</i>	72 (42%)
	<i>Don't remember</i>	7 (4%)
Q2.4	On your most recent journey here, was the van clean?	
	<i>Yes</i>	89 (51%)
	<i>No</i>	66 (38%)
	<i>Don't remember</i>	18 (10%)
Q2.5	On your most recent journey here, did you feel safe?	
	<i>Yes</i>	127 (74%)
	<i>No</i>	39 (23%)
	<i>Don't remember</i>	5 (3%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	<i>Very well</i>	46 (27%)
	<i>Well</i>	75 (43%)
	<i>Neither</i>	36 (21%)
	<i>Badly</i>	10 (6%)
	<i>Very badly</i>	1 (1%)
	<i>Don't remember</i>	5 (3%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)	
	<i>Yes, someone told me</i>	128 (74%)
	<i>Yes, I received written information</i>	6 (3%)
	<i>No, I was not told anything</i>	37 (21%)
	<i>Don't remember</i>	6 (3%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	<i>Yes</i>	124 (73%)
	<i>No</i>	41 (24%)
	<i>Don't remember</i>	4 (2%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?	
	<i>Less than 2 hours</i>	72 (42%)
	<i>2 hours or longer</i>	81 (48%)
	<i>Don't remember</i>	17 (10%)
Q3.2	When you were searched, was this carried out in a respectful way?	
	<i>Yes</i>	129 (76%)
	<i>No</i>	34 (20%)
	<i>Don't remember</i>	7 (4%)

Q3.3	Overall, how were you treated in reception?		
	Very well.....	30 (18%)	
	Well.....	91 (53%)	
	Neither.....	28 (16%)	
	Badly.....	10 (6%)	
	Very badly.....	8 (5%)	
	Don't remember.....	4 (2%)	
Q3.4	Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)		
	Loss of property.....	50 (30%)	Physical health.....
	Housing problems.....	17 (10%)	Mental health.....
	Contacting employers.....	3 (2%)	Needing protection from other prisoners
	Contacting family.....	44 (27%)	Getting phone numbers.....
	Childcare.....	3 (2%)	Other.....
	Money worries.....	24 (15%)	Did not have any problems.....
	Feeling depressed or suicidal.....	22 (13%)	
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?		
	Yes.....	35 (21%)	
	No.....	83 (51%)	
	Did not have any problems.....	45 (28%)	
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)		
	Tobacco.....	106 (63%)	
	A shower.....	55 (33%)	
	A free telephone call.....	135 (81%)	
	Something to eat.....	108 (65%)	
	PIN phone credit.....	80 (48%)	
	Toiletries/ basic items.....	91 (54%)	
	Did not receive anything.....	7 (4%)	
Q3.7	When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)		
	Chaplain.....	77 (48%)	
	Someone from health services.....	111 (69%)	
	A Listener/Samaritans.....	47 (29%)	
	Prison shop/ canteen.....	45 (28%)	
	Did not have access to any of these.....	27 (17%)	
Q3.8	When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)		
	What was going to happen to you.....	77 (47%)	
	What support was available for people feeling depressed or suicidal.....	61 (37%)	
	How to make routine requests (applications).....	67 (41%)	
	Your entitlement to visits.....	56 (34%)	
	Health services.....	69 (42%)	
	Chaplaincy.....	65 (40%)	
	Not offered any information.....	55 (34%)	
Q3.9	Did you feel safe on your first night here?		
	Yes.....	122 (71%)	
	No.....	42 (25%)	
	Don't remember.....	7 (4%)	

Q3.10	How soon after you arrived here did you go on an induction course?	
	<i>Have not been on an induction course</i>	5 (3%)
	<i>Within the first week</i>	72 (42%)
	<i>More than a week</i>	80 (47%)
	<i>Don't remember</i>	14 (8%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	<i>Have not been on an induction course</i>	5 (3%)
	<i>Yes</i>	99 (60%)
	<i>No</i>	48 (29%)
	<i>Don't remember</i>	14 (8%)
Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	<i>Did not receive an assessment</i>	15 (9%)
	<i>Within the first week</i>	38 (23%)
	<i>More than a week</i>	99 (59%)
	<i>Don't remember</i>	16 (10%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is it to.....						
		<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>	<i>N/A</i>
	<i>Communicate with your solicitor or legal representative?</i>	28 (17%)	48 (30%)	21 (13%)	23 (14%)	19 (12%)	23 (14%)
	<i>Attend legal visits?</i>	28 (19%)	50 (33%)	29 (19%)	10 (7%)	5 (3%)	28 (19%)
	<i>Get bail information?</i>	9 (7%)	8 (6%)	33 (25%)	11 (8%)	14 (11%)	58 (44%)
Q4.2	Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?						
	<i>Not had any letters</i>					23 (14%)	
	<i>Yes</i>					77 (46%)	
	<i>No</i>					66 (40%)	
Q4.3	Can you get legal books in the library?						
	<i>Yes</i>					72 (43%)	
	<i>No</i>					12 (7%)	
	<i>Don't know</i>					82 (49%)	
Q4.4	Please answer the following questions about the wing/unit you are currently living on:						
		<i>Yes</i>	<i>No</i>	<i>Don't know</i>			
	<i>Do you normally have enough clean, suitable clothes for the week?</i>	121 (73%)	39 (23%)	6 (4%)			
	<i>Are you normally able to have a shower every day?</i>	162 (96%)	5 (3%)	2 (1%)			
	<i>Do you normally receive clean sheets every week?</i>	66 (40%)	87 (53%)	10 (6%)			
	<i>Do you normally get cell cleaning materials every week?</i>	112 (66%)	51 (30%)	6 (4%)			
	<i>Is your cell call bell normally answered within five minutes?</i>	41 (24%)	98 (58%)	31 (18%)			
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	111 (69%)	46 (28%)	5 (3%)			
	<i>If you need to, can you normally get your stored property?</i>	43 (26%)	87 (53%)	34 (21%)			

Q4.5	What is the food like here?		
	Very good.....	11 (6%)	
	Good.....	58 (34%)	
	Neither.....	55 (32%)	
	Bad.....	36 (21%)	
	Very bad.....	12 (7%)	
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.....	3 (2%)	
	Yes.....	65 (38%)	
	No.....	102 (60%)	
Q4.7	Can you speak to a Listener at any time, if you want to?		
	Yes.....	86 (50%)	
	No.....	25 (15%)	
	Don't know.....	60 (35%)	
Q4.8	Are your religious beliefs respected?		
	Yes.....	81 (49%)	
	No.....	24 (14%)	
	Don't know/ N/A.....	61 (37%)	
Q4.9	Are you able to speak to a Chaplain of your faith in private if you want to?		
	Yes.....	94 (56%)	
	No.....	15 (9%)	
	Don't know/ N/A.....	59 (35%)	
Q4.10	How easy or difficult is it for you to attend religious services?		
	I don't want to attend.....	27 (16%)	
	Very easy.....	47 (28%)	
	Easy.....	47 (28%)	
	Neither.....	8 (5%)	
	Difficult.....	8 (5%)	
	Very difficult.....	1 (1%)	
	Don't know.....	30 (18%)	

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?			
	Yes.....	136 (80%)		
	No.....	24 (14%)		
	Don't know.....	10 (6%)		
Q5.2	Please answer the following questions about applications. (If you have not made an application please tick the 'not made one' option.)			
		<i>Not made one</i>	Yes	No
	Are applications dealt with fairly?	21 (13%)	71 (44%)	70 (43%)
	Are applications dealt with quickly (within seven days)?	21 (14%)	62 (40%)	71 (46%)
Q5.3	Is it easy to make a complaint?			
	Yes.....	117 (70%)		
	No.....	24 (14%)		
	Don't know.....	25 (15%)		

Q5.4 Please answer the following questions about complaints. (If you have not made a complaint please tick the 'not made one' option.)

	Not made one	Yes	No
Are complaints dealt with fairly?	41 (25%)	33 (20%)	87 (54%)
Are complaints dealt with quickly (within seven days)?	41 (25%)	31 (19%)	89 (55%)

Q5.5 Have you ever been prevented from making a complaint when you wanted to?

Yes	41 (25%)
No.....	125 (75%)

Q5.6 How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?

Don't know who they are.....	40 (25%)
Very easy.....	19 (12%)
Easy.....	27 (17%)
Neither.....	35 (22%)
Difficult.....	26 (16%)
Very difficult.....	13 (8%)

Section 6: Incentive and earned privileges scheme**Q6.1 Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels.)**

Don't know what the IEP scheme is	7 (4%)
Yes	85 (52%)
No	55 (33%)
Don't know	18 (11%)

Q6.2 Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels.)

Don't know what the IEP scheme is	7 (4%)
Yes	85 (52%)
No.....	63 (38%)
Don't know	9 (5%)

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

Yes	27 (17%)
No.....	131 (83%)

Q6.4 If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?

I have not been to segregation in the last 6 months	97 (61%)
Very well.....	7 (4%)
Well.....	7 (4%)
Neither.....	11 (7%)
Badly.....	6 (4%)
Very badly.....	30 (19%)

Section 7: Relationships with staff**Q7.1 Do most staff treat you with respect?**

Yes	129 (79%)
No.....	35 (21%)

Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	Yes	118 (72%)
	No.....	46 (28%)
Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	45 (27%)
	No.....	122 (73%)
Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	10 (6%)
	<i>Never</i>	23 (14%)
	<i>Rarely</i>	46 (27%)
	<i>Some of the time</i>	50 (30%)
	<i>Most of the time</i>	25 (15%)
	<i>All of the time</i>	15 (9%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	79 (48%)
	<i>In the first week</i>	27 (17%)
	<i>More than a week</i>	29 (18%)
	<i>Don't remember</i>	28 (17%)
Q7.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	79 (49%)
	<i>Very helpful</i>	18 (11%)
	<i>Helpful</i>	23 (14%)
	<i>Neither</i>	19 (12%)
	<i>Not very helpful</i>	7 (4%)
	<i>Not at all helpful</i>	14 (9%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?			
	Yes	95 (57%)		
	No.....	72 (43%)		
Q8.2	Do you feel unsafe now?			
	Yes	35 (22%)		
	No.....	124 (78%)		
Q8.3	In which areas have you felt unsafe? (Please tick all that apply to you.)			
	<i>Never felt unsafe</i>	72 (45%)	<i>At meal times</i>	9 (6%)
	<i>Everywhere</i>	21 (13%)	<i>At health services</i>	16 (10%)
	<i>Segregation unit</i>	31 (19%)	<i>Visits area</i>	13 (8%)
	<i>Association areas</i>	26 (16%)	<i>In wing showers</i>	12 (8%)
	<i>Reception area</i>	10 (6%)	<i>In gym showers</i>	7 (4%)
	<i>At the gym</i>	19 (12%)	<i>In corridors/stairwells</i>	9 (6%)
	<i>In an exercise yard</i>	13 (8%)	<i>On your landing/wing</i>	19 (12%)
	<i>At work</i>	13 (8%)	<i>In your cell</i>	20 (13%)
	<i>During movement</i>	32 (20%)	<i>At religious services</i>	10 (6%)
	<i>At education</i>	14 (9%)		

Q8.4	Have you been victimised by other prisoners here?	
	Yes	52 (32%)
	No.....	113 (68%)
Q8.5	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)	
	<i>Insulting remarks (about you or your family or friends)</i>	21 (13%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	17 (10%)
	<i>Sexual abuse</i>	4 (2%)
	<i>Feeling threatened or intimidated</i>	33 (20%)
	<i>Having your canteen/property taken</i>	11 (7%)
	<i>Medication</i>	5 (3%)
	<i>Debt</i>	9 (5%)
	<i>Drugs</i>	8 (5%)
	<i>Your race or ethnic origin</i>	4 (2%)
	<i>Your religion/religious beliefs</i>	8 (5%)
	<i>Your nationality</i>	4 (2%)
	<i>You are from a different part of the country than others</i>	7 (4%)
	<i>You are from a traveller community</i>	2 (1%)
	<i>Your sexual orientation</i>	2 (1%)
	<i>Your age</i>	5 (3%)
	<i>You have a disability</i>	6 (4%)
	<i>You were new here</i>	12 (7%)
	<i>Your offence/ crime</i>	12 (7%)
	<i>Gang related issues</i>	13 (8%)
Q8.6	Have you been victimised by staff here?	
	Yes	62 (37%)
	No.....	105 (63%)
Q8.7	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)	
	<i>Insulting remarks (about you or your family or friends)</i>	18 (11%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	17 (10%)
	<i>Sexual abuse</i>	2 (1%)
	<i>Feeling threatened or intimidated</i>	30 (18%)
	<i>Medication</i>	9 (5%)
	<i>Debt</i>	3 (2%)
	<i>Drugs</i>	2 (1%)
	<i>Your race or ethnic origin</i>	16 (10%)
	<i>Your religion/religious beliefs</i>	9 (5%)
	<i>Your nationality</i>	6 (4%)
	<i>You are from a different part of the country than others</i>	7 (4%)
	<i>You are from a traveller community</i>	1 (1%)
	<i>Your sexual orientation</i>	3 (2%)
	<i>Your age</i>	3 (2%)
	<i>You have a disability</i>	6 (4%)
	<i>You were new here</i>	11 (7%)
	<i>Your offence/ crime</i>	15 (9%)
	<i>Gang related issues</i>	4 (2%)
Q8.8	If you have been victimised by prisoners or staff, did you report it?	
	<i>Not been victimised</i>	76 (49%)
	<i>Yes</i>	33 (21%)
	<i>No</i>	47 (30%)

Section 9: Health services

Q9.1	How easy or difficult is it to see the following people?						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	The doctor	14 (9%)	10 (6%)	23 (14%)	19 (12%)	61 (37%)	36 (22%)
	The nurse	12 (7%)	19 (12%)	54 (33%)	23 (14%)	35 (22%)	19 (12%)
	The dentist	20 (13%)	8 (5%)	22 (14%)	19 (12%)	51 (32%)	40 (25%)
Q9.2	What do you think of the quality of the health service from the following people?						
		<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
	The doctor	28 (17%)	19 (11%)	38 (23%)	24 (14%)	42 (25%)	17 (10%)
	The nurse	19 (12%)	29 (18%)	42 (26%)	27 (16%)	36 (22%)	11 (7%)
	The dentist	34 (22%)	22 (14%)	43 (27%)	28 (18%)	21 (13%)	10 (6%)
Q9.3	What do you think of the overall quality of the health services here?						
	<i>Not been</i>						8 (5%)
	<i>Very good</i>						20 (12%)
	<i>Good</i>						45 (28%)
	<i>Neither</i>						19 (12%)
	<i>Bad</i>						38 (23%)
	<i>Very bad</i>						32 (20%)
Q9.4	Are you currently taking medication?						
	Yes						81 (49%)
	No.....						85 (51%)
Q9.5	If you are taking medication, are you allowed to keep some/ all of it in your own cell?						
	<i>Not taking medication</i>						85 (51%)
	<i>Yes, all my meds</i>						32 (19%)
	<i>Yes, some of my meds</i>						18 (11%)
	<i>No</i>						32 (19%)
Q9.6	Do you have any emotional or mental health problems?						
	Yes						65 (39%)
	No.....						102 (61%)
Q9.7	Are you being helped/ supported by anyone in this prison (e.g. a psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff)?						
	<i>Do not have any emotional or mental health problems</i>						102 (62%)
	Yes						25 (15%)
	No.....						38 (23%)

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?	
	Yes	47 (28%)
	No.....	118 (72%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	Yes	33 (20%)
	No.....	133 (80%)

Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	Very easy.....	51 (31%)
	Easy.....	28 (17%)
	Neither.....	11 (7%)
	Difficult.....	5 (3%)
	Very difficult.....	8 (5%)
	Don't know.....	62 (38%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy.....	28 (17%)
	Easy.....	20 (12%)
	Neither.....	16 (10%)
	Difficult.....	15 (9%)
	Very difficult.....	13 (8%)
	Don't know.....	73 (44%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes.....	34 (21%)
	No.....	131 (79%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes.....	16 (10%)
	No.....	150 (90%)
Q10.7	Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?	
	Did not / do not have a drug problem.....	104 (65%)
	Yes.....	31 (19%)
	No.....	24 (15%)
Q10.8	Have you received any support or help (for example substance misuse teams) for your alcohol problem, whilst in this prison?	
	Did not / do not have an alcohol problem.....	133 (83%)
	Yes.....	16 (10%)
	No.....	11 (7%)
Q10.9	Was the support or help you received, whilst in this prison, helpful?	
	Did not have a problem/ did not receive help.....	120 (79%)
	Yes.....	22 (14%)
	No.....	10 (7%)

Section 11: Activities

Q11.1	How easy or difficult is it to get into the following activities, in this prison?						
		<i>Don't know</i>	<i>Very Easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	Prison job	14 (9%)	9 (5%)	38 (23%)	21 (13%)	48 (29%)	34 (21%)
	Vocational or skills training	29 (19%)	7 (4%)	39 (25%)	31 (20%)	23 (15%)	27 (17%)
	Education (including basic skills)	18 (12%)	14 (9%)	54 (35%)	30 (19%)	22 (14%)	17 (11%)
	Offending behaviour programmes	36 (23%)	8 (5%)	31 (20%)	29 (19%)	25 (16%)	27 (17%)

Q11.2	Are you currently involved in the following? (Please tick all that apply to you.)				
	<i>Not involved in any of these</i>				42 (26%)
	Prison job				81 (50%)
	Vocational or skills training.....				26 (16%)
	Education (including basic skills).....				42 (26%)
	Offending behaviour programmes				19 (12%)
Q11.3	If you have been involved in any of the following, while in this prison, do you think they will help you on release?				
		<i>Not been involved</i>	<i>Yes</i>	<i>No</i>	<i>Don't know</i>
	Prison job	33 (24%)	37 (27%)	46 (33%)	23 (17%)
	Vocational or skills training	38 (29%)	43 (33%)	29 (22%)	20 (15%)
	Education (including basic skills)	35 (25%)	54 (39%)	34 (24%)	16 (12%)
	Offending behaviour programmes	38 (30%)	38 (30%)	27 (21%)	23 (18%)
Q11.4	How often do you usually go to the library?				
	<i>Don't want to go</i>				28 (17%)
	<i>Never</i>				30 (19%)
	<i>Less than once a week</i>				47 (29%)
	<i>About once a week</i>				48 (30%)
	<i>More than once a week</i>				8 (5%)
Q11.5	Does the library have a wide enough range of materials to meet your needs?				
	<i>Don't use it</i>				42 (26%)
	<i>Yes</i>				46 (28%)
	<i>No</i>				75 (46%)
Q11.6	How many times do you usually go to the gym each week?				
	<i>Don't want to go</i>				31 (19%)
	<i>0</i>				36 (22%)
	<i>1 to 2</i>				28 (17%)
	<i>3 to 5</i>				66 (40%)
	<i>More than 5</i>				3 (2%)
Q11.7	How many times do you usually go outside for exercise each week?				
	<i>Don't want to go</i>				10 (6%)
	<i>0</i>				18 (11%)
	<i>1 to 2</i>				70 (43%)
	<i>3 to 5</i>				31 (19%)
	<i>More than 5</i>				33 (20%)
Q11.8	How many times do you usually have association each week?				
	<i>Don't want to go</i>				5 (3%)
	<i>0</i>				5 (3%)
	<i>1 to 2</i>				5 (3%)
	<i>3 to 5</i>				24 (15%)
	<i>More than 5</i>				123 (76%)

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

<i>Less than 2 hours</i>	13 (8%)
<i>2 to less than 4 hours</i>	33 (21%)
<i>4 to less than 6 hours</i>	22 (14%)
<i>6 to less than 8 hours</i>	29 (18%)
<i>8 to less than 10 hours</i>	25 (16%)
<i>10 hours or more</i>	21 (13%)
<i>Don't know</i>	15 (9%)

Section 12: Contact with family and friends**Q12.1 Have staff supported you and helped you to maintain contact with your family/friends while in this prison?**

<i>Yes</i>	63 (39%)
<i>No</i>	100 (61%)

Q12.2 Have you had any problems with sending or receiving mail (letters or parcels)?

<i>Yes</i>	78 (48%)
<i>No</i>	84 (52%)

Q12.3 Have you had any problems getting access to the telephones?

<i>Yes</i>	18 (11%)
<i>No</i>	146 (89%)

Q12.4 How easy or difficult is it for your family and friends to get here?

<i>I don't get visits</i>	20 (12%)
<i>Very easy</i>	11 (7%)
<i>Easy</i>	30 (18%)
<i>Neither</i>	24 (15%)
<i>Difficult</i>	30 (18%)
<i>Very difficult</i>	45 (28%)
<i>Don't know</i>	3 (2%)

Section 13: Preparation for release**Q13.1 Do you have a named offender manager (home probation officer) in the probation service?**

<i>Not sentenced</i>	17 (11%)
<i>Yes</i>	130 (81%)
<i>No</i>	14 (9%)

Q13.2 What type of contact have you had with your offender manager since being in prison? (Please tick all that apply to you.)

<i>Not sentenced/ NA</i>	31 (19%)
<i>No contact</i>	34 (21%)
<i>Letter</i>	38 (24%)
<i>Phone</i>	35 (22%)
<i>Visit</i>	54 (34%)

Q13.3 Do you have a named offender supervisor in this prison?

<i>Yes</i>	141 (88%)
<i>No</i>	19 (12%)

Q13.4	Do you have a sentence plan?	
	<i>Not sentenced</i>	17 (11%)
	<i>Yes</i>	99 (63%)
	<i>No</i>	42 (27%)
Q13.5	How involved were you in the development of your sentence plan?	
	<i>Do not have a sentence plan/ not sentenced</i>	59 (37%)
	<i>Very involved</i>	28 (18%)
	<i>Involved</i>	36 (23%)
	<i>Neither</i>	9 (6%)
	<i>Not very involved</i>	18 (11%)
	<i>Not at all involved</i>	8 (5%)
Q13.6	Who is working with you to achieve your sentence plan targets? (Please tick all that apply to you.)	
	<i>Do not have a sentence plan/ not sentenced</i>	59 (38%)
	<i>Nobody</i>	26 (17%)
	<i>Offender supervisor</i>	54 (35%)
	<i>Offender manager</i>	40 (26%)
	<i>Named/ personal officer</i>	10 (6%)
	<i>Staff from other departments</i>	15 (10%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	<i>Do not have a sentence plan/ not sentenced</i>	59 (37%)
	<i>Yes</i>	73 (46%)
	<i>No</i>	16 (10%)
	<i>Don't know</i>	12 (8%)
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?	
	<i>Do not have a sentence plan/ not sentenced</i>	59 (37%)
	<i>Yes</i>	30 (19%)
	<i>No</i>	42 (26%)
	<i>Don't know</i>	28 (18%)
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?	
	<i>Do not have a sentence plan/ not sentenced</i>	59 (37%)
	<i>Yes</i>	21 (13%)
	<i>No</i>	48 (30%)
	<i>Don't know</i>	32 (20%)
Q13.10	Do you have a needs based custody plan?	
	<i>Yes</i>	6 (4%)
	<i>No</i>	71 (44%)
	<i>Don't know</i>	83 (52%)
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?	
	<i>Yes</i>	31 (19%)
	<i>No</i>	128 (81%)

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

	<i>Do not need help</i>	Yes	No
Employment	33 (22%)	29 (20%)	85 (58%)
Accommodation	29 (20%)	31 (22%)	83 (58%)
Benefits	30 (21%)	33 (23%)	80 (56%)
Finances	28 (20%)	25 (18%)	87 (62%)
Education	30 (21%)	29 (21%)	81 (58%)
Drugs and alcohol	36 (26%)	34 (24%)	70 (50%)

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

<i>Not sentenced</i>	17 (11%)
Yes	75 (49%)
No.....	62 (40%)

Main comparator and comparator to last time



Prisoner survey responses HMP Dovegate 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.

Key to tables

		HMP Dovegate 2017	Category B Training Prisons Comparator	HMP Dovegate 2017	HMP Dovegate 2015
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		175	1,258	175	176
SECTION 1: General information					
1.2	Are you under 21 years of age?	1%	0%	1%	0%
1.3	Are you sentenced?	90%	100%	90%	83%
1.3	Are you on recall?	6%	4%	6%	7%
1.4	Is your sentence less than 12 months?	7%	0%	7%	5%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	7%	12%	7%	5%
1.5	Are you a foreign national?	6%	12%	6%	6%
1.6	Do you understand spoken English?	99%	99%	99%	98%
1.7	Do you understand written English?	99%	98%	99%	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.)	29%	29%	29%	31%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	1%	3%	1%	1%
1.1	Are you Muslim?	13%	14%	13%	14%
1.11	Are you homosexual/gay or bisexual?	2%	6%	2%	1%
1.12	Do you consider yourself to have a disability?	21%	27%	21%	24%
1.13	Are you a veteran (ex-armed services)?	6%	6%	6%	6%
1.14	Is this your first time in prison?	29%	45%	29%	30%
1.15	Do you have any children under the age of 18?	42%	46%	42%	63%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	44%	69%	44%	34%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	64%	72%	64%	61%
2.3	Were you offered a toilet break?	8%	11%	8%	14%
2.4	Was the van clean?	52%	61%	52%	63%
2.5	Did you feel safe?	74%	74%	74%	83%
2.6	Were you treated well/very well by the escort staff?	70%	69%	70%	71%
2.7	Before you arrived here were you told that you were coming here?	74%	62%	74%	76%
2.7	Before you arrived here did you receive any written information about coming here?	3%	13%	3%	3%
2.8	When you first arrived here did your property arrive at the same time as you?	73%	80%	73%	80%

Main comparator and comparator to last time

Key to tables

		HMP Dovegate 2017	Category B Training Prisons Comparator	HMP Dovegate 2017	HMP Dovegate 2015
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	42%	49%	42%	53%
3.2	When you were searched in reception, was this carried out in a respectful way?	76%	82%	76%	84%
3.3	Were you treated well/very well in reception?	71%	74%	71%	72%
	When you first arrived:				
3.4	Did you have any problems?	73%	62%	73%	66%
3.4	Did you have any problems with loss of property?	30%	23%	30%	20%
3.4	Did you have any housing problems?	10%	5%	10%	9%
3.4	Did you have any problems contacting employers?	2%	1%	2%	2%
3.4	Did you have any problems contacting family?	27%	19%	27%	13%
3.4	Did you have any problems ensuring dependants were being looked after?	2%	1%	2%	1%
3.4	Did you have any money worries?	15%	12%	15%	16%
3.4	Did you have any problems with feeling depressed or suicidal?	13%	17%	13%	14%
3.4	Did you have any physical health problems?	11%	14%	11%	16%
3.4	Did you have any mental health problems?	24%	19%	24%	22%
3.4	Did you have any problems with needing protection from other prisoners?	5%	6%	5%	7%
3.4	Did you have problems accessing phone numbers?	30%	17%	30%	24%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	30%	35%	30%	36%
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	63%	81%	63%	81%
3.6	A shower?	33%	29%	33%	29%
3.6	A free telephone call?	81%	34%	81%	88%
3.6	Something to eat?	65%	56%	65%	67%
3.6	PIN phone credit?	48%	39%	48%	60%
3.6	Toiletries/ basic items?	55%	51%	55%	59%

Key to tables

Main comparator and comparator to last time

	Any percentage highlighted in green is significantly better	HMP Dovegate 2017	Category B Training Prisons Comparator	HMP Dovegate 2017	HMP Dovegate 2015
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 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?	48%	44%	48%	49%
3.7	Someone from health services?	69%	61%	69%	71%
3.7	A Listener/Samaritans?	29%	32%	29%	32%
3.7	Prison shop/ canteen?	28%	24%	28%	33%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	47%	48%	47%	51%
3.8	Support was available for people feeling depressed or suicidal?	37%	35%	37%	41%
3.8	How to make routine requests?	41%	38%	41%	43%
3.8	Your entitlement to visits?	34%	33%	34%	41%
3.8	Health services?	42%	45%	42%	49%
3.8	The chaplaincy?	40%	40%	40%	40%
3.9	Did you feel safe on your first night here?	71%	76%	71%	81%
3.10	Have you been on an induction course?	97%	88%	97%	91%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	62%	63%	62%	74%
3.12	Did you receive an education (skills for life) assessment?	91%	84%	91%	89%
SECTION 4: Legal rights and respectful custody					
	In terms of your legal rights, is it easy/very easy to:				
4.1	Communicate with your solicitor or legal representative?	47%	49%	47%	66%
4.1	Attend legal visits?	52%	45%	52%	62%
4.1	Get bail information?	13%	9%	13%	22%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	46%	51%	46%	45%
4.3	Can you get legal books in the library?	43%	45%	43%	50%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	73%	67%	73%	68%
4.4	Are you normally able to have a shower every day?	96%	90%	96%	99%
4.4	Do you normally receive clean sheets every week?	41%	54%	41%	43%
4.4	Do you normally get cell cleaning materials every week?	66%	60%	66%	49%
4.4	Is your cell call bell normally answered within five minutes?	24%	36%	24%	30%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	69%	64%	69%	67%
4.4	Can you normally get your stored property, if you need to?	26%	23%	26%	26%
4.5	Is the food in this prison good/very good?	40%	29%	40%	34%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	38%	48%	38%	38%
4.7	Are you able to speak to a Listener at any time, if you want to?	50%	55%	50%	50%
4.8	Are your religious beliefs respected?	49%	50%	49%	50%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	56%	55%	56%	52%
4.10	Is it easy/very easy to attend religious services?	56%	51%	56%	47%

Main comparator and comparator to last time

Key to tables

Any percentage highlighted in green is significantly better	HMP Dovegate 2017	Category B Training Prisons Comparator	HMP Dovegate 2017	HMP Dovegate 2015
Any percentage highlighted in blue is significantly worse				
Any percentage highlighted in orange shows a significant difference in prisoners' background details				
Percentages which are not highlighted show there is no significant difference				
SECTION 5: Applications and complaints				
5.1 Is it easy to make an application?	80%	78%	80%	76%
For those who have made an application:				
5.2 Do you feel applications are dealt with fairly?	50%	46%	50%	54%
5.2 Do you feel applications are dealt with quickly (within seven days)?	47%	28%	47%	44%
5.3 Is it easy to make a complaint?	70%	61%	70%	67%
For those who have made a complaint:				
5.4 Do you feel complaints are dealt with fairly?	28%	26%	28%	30%
5.4 Do you feel complaints are dealt with quickly (within seven days)?	26%	21%	26%	22%
5.5 Have you ever been prevented from making a complaint when you wanted to?	25%	23%	25%	21%
5.6 Is it easy/very easy to see the Independent Monitoring Board?	29%	23%	29%	28%
SECTION 6: Incentives and earned privileges scheme				
6.1 Do you feel you have been treated fairly in your experience of the IEP scheme?	52%	48%	52%	48%
6.2 Do the different levels of the IEP scheme encourage you to change your behaviour?	52%	44%	52%	41%
6.3 In the last six months have any members of staff physically restrained you (C&R)?	17%	10%	17%	13%
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?	23%	38%	23%	32%
SECTION 7: Relationships with staff				
7.1 Do most staff, in this prison, treat you with respect?	79%	80%	79%	86%
7.2 Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	72%	71%	72%	70%
7.3 Has a member of staff checked on you personally in the last week to see how you were getting on?	27%	27%	27%	30%
7.4 Do staff normally speak to you most of the time/all of the time during association?	24%	21%	24%	26%
7.5 Do you have a personal officer?	52%	66%	52%	53%
For those with a personal officer:				
7.6 Do you think your personal officer is helpful/very helpful?	51%	60%	51%	51%

Main comparator and comparator to last time

Key to tables

		HMP Dovegate 2017	Category B Training Prisons Comparator	HMP Dovegate 2017	HMP Dovegate 2015
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	57%	49%	57%	47%
8.2	Do you feel unsafe now?	22%	26%	22%	19%
8.4	Have you been victimised by other prisoners here?	32%	37%	32%	31%
Since you have been here, have other prisoners:					
8.5	Made insulting remarks about you, your family or friends?	13%	16%	13%	12%
8.5	Hit, kicked or assaulted you?	10%	14%	10%	10%
8.5	Sexually abused you?	3%	3%	3%	1%
8.5	Threatened or intimidated you?	20%	24%	20%	16%
8.5	Taken your canteen/property?	7%	10%	7%	7%
8.5	Victimised you because of medication?	3%	6%	3%	6%
8.5	Victimised you because of debt?	5%	5%	5%	5%
8.5	Victimised you because of drugs?	5%	5%	5%	7%
8.5	Victimised you because of your race or ethnic origin?	3%	7%	3%	4%
8.5	Victimised you because of your religion/religious beliefs?	5%	7%	5%	4%
8.5	Victimised you because of your nationality?	3%	6%	3%	3%
8.5	Victimised you because you were from a different part of the country?	4%	7%	4%	5%
8.5	Victimised you because you are from a Traveller community?	1%	1%	1%	1%
8.5	Victimised you because of your sexual orientation?	1%	3%	1%	1%
8.5	Victimised you because of your age?	3%	3%	3%	1%
8.5	Victimised you because you have a disability?	4%	5%	4%	4%
8.5	Victimised you because you were new here?	7%	6%	7%	7%
8.5	Victimised you because of your offence/crime?	7%	7%	7%	5%
8.5	Victimised you because of gang related issues?	8%	6%	8%	5%

Main comparator and comparator to last time

Key to tables

		HMP Dovegate 2017	Category B Training Prisons Comparator	HMP Dovegate 2017	HMP Dovegate 2015
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	37%	36%	37%	31%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	11%	14%	11%	10%
8.7	Hit, kicked or assaulted you?	10%	7%	10%	4%
8.7	Sexually abused you?	1%	2%	1%	0%
8.7	Threatened or intimidated you?	18%	16%	18%	12%
8.7	Victimised you because of medication?	5%	5%	5%	5%
8.7	Victimised you because of debt?	2%	1%	2%	3%
8.7	Victimised you because of drugs?	1%	2%	1%	5%
8.7	Victimised you because of your race or ethnic origin?	10%	6%	10%	3%
8.7	Victimised you because of your religion/religious beliefs?	5%	6%	5%	3%
8.7	Victimised you because of your nationality?	4%	4%	4%	3%
8.7	Victimised you because you were from a different part of the country?	4%	4%	4%	3%
8.7	Victimised you because you are from a Traveller community?	1%	1%	1%	0%
8.7	Victimised you because of your sexual orientation?	2%	2%	2%	1%
8.7	Victimised you because of your age?	2%	2%	2%	1%
8.7	Victimised you because you have a disability?	4%	5%	4%	2%
8.7	Victimised you because you were new here?	7%	4%	7%	4%
8.7	Victimised you because of your offence/crime?	9%	6%	9%	5%
8.7	Victimised you because of gang related issues?	2%	2%	2%	3%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	41%	48%	41%	34%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP Dovegate 2017	Category B Training Prisons Comparator	HMP Dovegate 2017	HMP Dovegate 2015
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	20%	25%	20%	23%
9.1	Is it easy/very easy to see the nurse?	45%	44%	45%	44%
9.1	Is it easy/very easy to see the dentist?	19%	17%	19%	18%
	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?	41%	39%	41%	31%
9.2	The nurse?	49%	48%	49%	38%
9.2	The dentist?	52%	43%	52%	46%
9.3	The overall quality of health services?	42%	31%	42%	31%
9.4	Are you currently taking medication?	49%	55%	49%	49%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	61%	85%	61%	51%
9.6	Do you have any emotional well being or mental health problems?	39%	37%	39%	42%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	40%	45%	40%	43%
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	29%	18%	29%	31%
10.2	Did you have a problem with alcohol when you came into this prison?	20%	14%	20%	26%
10.3	Is it easy/very easy to get illegal drugs in this prison?	48%	38%	48%	41%
10.4	Is it easy/very easy to get alcohol in this prison?	29%	29%	29%	30%
10.5	Have you developed a problem with drugs since you have been in this prison?	21%	10%	21%	18%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	10%	8%	10%	13%
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	56%	58%	56%	64%
10.8	Have you received any support or help with your alcohol problem while in this prison?	59%	63%	59%	62%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	69%	75%	69%	63%

Main comparator and comparator to last time

Key to tables

		HMP Dovegate 2017	Category B Training Prisons Comparator	HMP Dovegate 2017	HMP Dovegate 2015
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 11: Activities					
Is it very easy/ easy to get into the following activities:					
11.1	A prison job?	29%	37%	29%	32%
11.1	Vocational or skills training?	30%	31%	30%	36%
11.1	Education (including basic skills)?	44%	51%	44%	50%
11.1	Offending behaviour programmes?	25%	26%	25%	26%
Are you currently involved in any of the following activities:					
11.2	A prison job?	50%	70%	50%	57%
11.2	Vocational or skills training?	16%	10%	16%	10%
11.2	Education (including basic skills)?	26%	26%	26%	31%
11.2	Offending behaviour programmes?	12%	17%	12%	13%
11.3	Have you had a job while in this prison?	76%	90%	76%	78%
For those who have had a prison job while in this prison:					
11.3	Do you feel the job will help you on release?	35%	41%	35%	45%
11.3	Have you been involved in vocational or skills training while in this prison?	71%	77%	71%	66%
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?	47%	50%	47%	54%
11.3	Have you been involved in education while in this prison?	75%	87%	75%	78%
For those who have been involved in education while in this prison:					
11.3	Do you feel the education will help you on release?	52%	58%	52%	58%
11.3	Have you been involved in offending behaviour programmes while in this prison?	70%	77%	70%	66%
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?	43%	49%	43%	45%
11.4	Do you go to the library at least once a week?	35%	42%	35%	44%
11.5	Does the library have a wide enough range of materials to meet your needs?	28%	44%	28%	34%
11.6	Do you go to the gym three or more times a week?	42%	37%	42%	37%
11.7	Do you go outside for exercise three or more times a week?	40%	44%	40%	39%
11.8	Do you go on association more than five times each week?	76%	64%	76%	78%
11.9	Do you spend ten or more hours out of your cell on a weekday?	13%	17%	13%	15%
SECTION 12: Friends and family					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	39%	32%	39%	36%
12.2	Have you had any problems with sending or receiving mail?	48%	49%	48%	44%
12.3	Have you had any problems getting access to the telephones?	11%	17%	11%	7%
12.4	Is it easy/ very easy for your friends and family to get here?	25%	16%	25%	35%

Main comparator and comparator to last time

Key to tables

		HMP Dovegate 2017	Category B Training Prisons Comparator	HMP Dovegate 2017	HMP Dovegate 2015
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 13: Preparation for release					
For those who are sentenced:					
13.1	Do you have a named offender manager (home probation officer) in the probation service?	90%	86%	90%	83%
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	27%	29%	27%	33%
13.2	Contact by letter?	30%	33%	30%	26%
13.2	Contact by phone?	27%	35%	27%	27%
13.2	Contact by visit?	42%	32%	42%	42%
13.3	Do you have a named offender supervisor in this prison?	88%	79%	88%	86%
For those who are sentenced:					
13.4	Do you have a sentence plan?	70%	78%	70%	61%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	65%	50%	65%	72%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	27%	40%	27%	28%
13.6	Offender supervisor?	56%	42%	56%	57%
13.6	Offender manager?	41%	27%	41%	34%
13.6	Named/ personal officer?	10%	16%	10%	13%
13.6	Staff from other departments?	16%	17%	16%	22%
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	72%	62%	72%	71%
13.8	Are there plans for you to achieve any of your targets in another prison?	30%	28%	30%	32%
13.9	Are there plans for you to achieve any of your targets in the community?	21%	18%	21%	26%
13.10	Do you have a needs based custody plan?	4%	6%	4%	7%
13.11	Do you feel that any member of staff has helped you to prepare for release?	20%	13%	20%	12%
For those that need help do you know of anyone in this prison who can help you on release with the following:					
13.12	Employment?	25%	17%	25%	21%
13.12	Accommodation?	27%	17%	27%	21%
13.12	Benefits?	29%	17%	29%	25%
13.12	Finances?	22%	13%	22%	22%
13.12	Education?	26%	20%	26%	21%
13.12	Drugs and alcohol?	33%	26%	33%	32%
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?	55%	57%	55%	50%

Diversity analysis



Key question responses (ethnicity and religion) HMP Dovegate 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.

Key to tables

		Black and minority ethnic prisoners	White prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		50	121	22	150
1.3	Are you sentenced?	90%	90%	86%	91%
1.5	Are you a foreign national?	14%	2%	19%	3%
1.6	Do you understand spoken English?	100%	99%	100%	99%
1.7	Do you understand written English?	100%	99%	100%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			95%	20%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	2%	0%	1%
1.1	Are you Muslim?	42%	1%		
1.12	Do you consider yourself to have a disability?	18%	22%	14%	23%
1.13	Are you a veteran (ex-armed services)?	2%	7%	5%	6%
1.14	Is this your first time in prison?	31%	29%	36%	28%
2.6	Were you treated well/very well by the escort staff?	64%	73%	69%	71%
2.7	Before you arrived here were you told that you were coming here?	74%	74%	55%	77%
3.2	When you were searched in reception, was this carried out in a respectful way?	63%	81%	62%	78%
3.3	Were you treated well/very well in reception?	68%	73%	64%	72%
3.4	Did you have any problems when you first arrived?	77%	70%	86%	70%
3.7	Did you have access to someone from health care when you first arrived here?	61%	71%	57%	70%
3.9	Did you feel safe on your first night here?	69%	72%	59%	74%
3.10	Have you been on an induction course?	98%	97%	100%	97%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	47%	46%	45%	47%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	63%	77%	57%	75%
4.4	Are you normally able to have a shower every day?	98%	96%	95%	96%
4.4	Is your cell call bell normally answered within five minutes?	16%	27%	0%	28%
4.5	Is the food in this prison good/very good?	41%	40%	48%	39%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	26%	42%	23%	40%
4.7	Are you able to speak to a Listener at any time, if you want to?	33%	56%	23%	54%
4.8	Do you feel your religious beliefs are respected?	45%	50%	50%	49%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	49%	59%	48%	57%
5.1	Is it easy to make an application?	74%	82%	72%	82%
5.3	Is it easy to make a complaint?	62%	73%	55%	72%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	31%	61%	30%	55%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	41%	56%	43%	53%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	19%	16%	19%	16%
7.1	Do most staff, in this prison, treat you with respect?	69%	83%	65%	81%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	54%	80%	52%	75%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	16%	27%	19%	25%
7.4	Do you have a personal officer?	55%	49%	72%	49%
8.1	Have you ever felt unsafe here?	60%	56%	85%	53%
8.2	Do you feel unsafe now?	28%	20%	35%	20%
8.3	Have you been victimised by other prisoners?	14%	39%	19%	33%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	8%	25%	10%	21%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	6%	0%	10%	1%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	4%	5%	5%	4%
8.5	Have you been victimised because of your nationality? (By prisoners)	6%	0%	10%	1%
8.5	Have you been victimised because you have a disability? (By prisoners)	2%	5%	0%	4%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.6	Have you been victimised by a member of staff?	50%	31%	72%	31%
8.7	Have you ever felt threatened or intimidated by staff here?	20%	17%	33%	15%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	26%	2%	43%	4%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	16%	1%	33%	1%
8.7	Have you been victimised because of your nationality? (By staff)	8%	1%	15%	1%
8.7	Have you been victimised because you have a disability? (By staff)	4%	4%	5%	4%
9.1	Is it easy/very easy to see the doctor?	17%	22%	20%	21%
9.1	Is it easy/ very easy to see the nurse?	44%	45%	45%	45%
9.4	Are you currently taking medication?	31%	55%	38%	50%
9.6	Do you feel you have any emotional well being/mental health issues?	30%	43%	33%	39%
10.3	Is it easy/very easy to get illegal drugs in this prison?	43%	51%	40%	50%
11.2	Are you currently working in the prison?	42%	54%	37%	51%
11.2	Are you currently undertaking vocational or skills training?	21%	14%	27%	15%
11.2	Are you currently in education (including basic skills)?	34%	22%	27%	26%
11.2	Are you currently taking part in an offending behaviour programme?	12%	11%	11%	12%
11.4	Do you go to the library at least once a week?	47%	29%	53%	32%
11.6	Do you go to the gym three or more times a week?	65%	33%	55%	41%
11.7	Do you go outside for exercise three or more times a week?	36%	41%	37%	41%
11.8	On average, do you go on association more than five times each week?	81%	75%	78%	76%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	9%	15%	6%	14%
12.2	Have you had any problems sending or receiving mail?	56%	45%	50%	47%
12.3	Have you had any problems getting access to the telephones?	15%	10%	27%	9%

Diversity Analysis



Key question responses (disability, age over 50) HMP Dovegate 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.

Key to tables

		Consider themselves to have a disability		Do not consider themselves to have a disability	
				Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		37	136	23	150
1.3	Are you sentenced?	92%	90%	91%	90%
1.5	Are you a foreign national?	3%	5%	0%	6%
1.6	Do you understand spoken English?	100%	99%	100%	99%
1.7	Do you understand written English?	97%	100%	100%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	25%	30%	15%	32%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	2%	0%	1%
1.1	Are you Muslim?	8%	14%	4%	14%
1.12	Do you consider yourself to have a disability?			39%	19%
1.13	Are you a veteran (ex-armed services)?	11%	4%	26%	3%
1.14	Is this your first time in prison?	16%	33%	43%	27%
2.6	Were you treated well/very well by the escort staff?	70%	70%	74%	69%
2.7	Before you arrived here were you told that you were coming here?	81%	72%	74%	74%
3.2	When you were searched in reception, was this carried out in a respectful way?	72%	78%	91%	73%
3.3	Were you treated well/very well in reception?	67%	72%	82%	69%
3.4	Did you have any problems when you first arrived?	92%	67%	73%	73%
3.7	Did you have access to someone from health care when you first arrived here?	76%	66%	81%	66%
3.9	Did you feel safe on your first night here?	58%	75%	55%	74%
3.10	Have you been on an induction course?	94%	98%	100%	97%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	37%	50%	52%	46%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	66%	75%	90%	70%
4.4	Are you normally able to have a shower every day?	95%	96%	87%	97%
4.4	Is your cell call bell normally answered within five minutes?	32%	22%	26%	23%
4.5	Is the food in this prison good/very good?	36%	41%	35%	41%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	45%	37%	61%	34%
4.7	Are you able to speak to a Listener at any time, if you want to?	51%	50%	61%	49%
4.8	Do you feel your religious beliefs are respected?	49%	48%	45%	49%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	57%	55%	52%	57%
5.1	Is it easy to make an application?	81%	80%	78%	80%
5.3	Is it easy to make a complaint?	70%	71%	74%	70%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	50%	52%	64%	49%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	53%	52%	62%	50%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	20%	15%	14%	18%
7.1	Do most staff, in this prison, treat you with respect?	83%	78%	95%	76%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	77%	71%	95%	68%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	31%	22%	43%	21%
7.4	Do you have a personal officer?	43%	54%	64%	49%
8.1	Have you ever felt unsafe here?	58%	57%	55%	57%
8.2	Do you feel unsafe now?	26%	21%	9%	24%
8.3	Have you been victimised by other prisoners?	40%	30%	32%	31%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	26%	19%	23%	19%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	3%	0%	3%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	9%	4%	5%	5%
8.5	Have you been victimised because of your nationality? (By prisoners)	0%	3%	0%	3%
8.5	Have you been victimised because of your age? (By prisoners)	6%	2%	5%	3%
8.5	Have you been victimised because you have a disability? (By prisoners)	15%	1%	5%	4%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.6	Have you been victimised by a member of staff?	45%	35%	19%	40%
8.7	Have you ever felt threatened or intimidated by staff here?	25%	16%	9%	19%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	9%	9%	0%	11%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	3%	6%	0%	6%
8.7	Have you been victimised because of your nationality? (By staff)	0%	5%	0%	4%
8.7	Have you been victimised because of your age? (By staff)	0%	2%	0%	2%
8.7	Have you been victimised because you have a disability? (By staff)	6%	3%	0%	4%
9.1	Is it easy/very easy to see the doctor?	20%	21%	28%	19%
9.1	Is it easy/ very easy to see the nurse?	52%	44%	52%	44%
9.4	Are you currently taking medication?	77%	42%	73%	44%
9.6	Do you feel you have any emotional well being/mental health issues?	75%	29%	32%	40%
10.3	Is it easy/very easy to get illegal drugs in this prison?	50%	48%	50%	48%
11.2	Are you currently working in the prison?	25%	58%	55%	49%
11.2	Are you currently undertaking vocational or skills training?	17%	16%	19%	16%
11.2	Are you currently in education (including basic skills)?	31%	23%	23%	26%
11.2	Are you currently taking part in an offending behaviour programme?	11%	12%	9%	12%
11.4	Do you go to the library at least once a week?	40%	33%	28%	36%
11.6	Do you go to the gym three or more times a week?	20%	48%	14%	47%
11.7	Do you go outside for exercise three or more times a week?	26%	43%	43%	39%
11.8	On average, do you go on association more than five times each week?	82%	74%	75%	76%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	0%	17%	10%	13%
12.2	Have you had any problems sending or receiving mail?	51%	47%	32%	51%
12.3	Have you had any problems getting access to the telephones?	26%	7%	5%	12%



Prisoner survey responses HMP Dovegate 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.

Key to tables

	Any percentage highlighted in green is significantly better	H Wing (VP Wing)	A, B, C, D, E, F, G, J, K, L, M, N and P Wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		18	150
SECTION 1: General information			
1.2	Are you under 21 years of age?	0%	1%
1.3	Are you sentenced?	94%	90%
1.3	Are you on recall?	6%	6%
1.4	Is your sentence less than 12 months?	11%	6%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	6%	6%
1.5	Are you a foreign national?	0%	6%
1.6	Do you understand spoken English?	94%	100%
1.7	Do you understand written English?	100%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	0%	34%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	1%
1.1	Are you Muslim?	0%	15%
1.11	Are you homosexual/gay or bisexual?	6%	1%
1.12	Do you consider yourself to have a disability?	23%	20%
1.13	Are you a veteran (ex-armed services)?	6%	6%
1.14	Is this your first time in prison?	61%	25%
1.15	Do you have any children under the age of 18?	30%	45%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	28%	44%
2.5	Did you feel safe?	61%	77%
2.6	Were you treated well/very well by the escort staff?	56%	71%
2.7	Before you arrived here were you told that you were coming here?	67%	74%
2.8	When you first arrived here did your property arrive at the same time as you?	94%	70%

Key to tables

	Any percentage highlighted in green is significantly better	H Wing (VP Wing)	A, B, C, D, E, F, G, J, K, L, M, N and P Wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	28%	42%
3.2	When you were searched in reception, was this carried out in a respectful way?	72%	75%
3.3	Were you treated well/very well in reception?	44%	73%
	When you first arrived:		
3.4	Did you have any problems?	83%	71%
3.4	Did you have any problems with loss of property?	11%	34%
3.4	Did you have any housing problems?	33%	7%
3.4	Did you have any problems contacting employers?	11%	1%
3.4	Did you have any problems contacting family?	39%	26%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	2%
3.4	Did you have any money worries?	23%	13%
3.4	Did you have any problems with feeling depressed or suicidal?	39%	9%
3.4	Did you have any physical health problems?	17%	10%
3.4	Did you have any mental health problems?	28%	23%
3.4	Did you have any problems with needing protection from other prisoners?	33%	1%
3.4	Did you have problems accessing phone numbers?	23%	31%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	56%	65%
3.6	A shower?	6%	37%
3.6	A free telephone call?	89%	80%
3.6	Something to eat?	56%	66%
3.6	PIN phone credit?	39%	51%
3.6	Toiletries/ basic items?	67%	54%

Key to tables

	Any percentage highlighted in green is significantly better	H Wing (VP Wing)	A, B, C, D, E, F, G, J, K, L, M, N and P Wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 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?	39%	50%
3.7	Someone from health services?	72%	69%
3.7	A Listener/Samaritans?	23%	29%
3.7	Prison shop/ canteen?	23%	28%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	24%	50%
3.8	Support was available for people feeling depressed or suicidal?	24%	38%
3.8	How to make routine requests?	24%	43%
3.8	Your entitlement to visits?	18%	36%
3.8	Health services?	24%	44%
3.8	The chaplaincy?	24%	42%
3.9	Did you feel safe on your first night here?	23%	78%
3.10	Have you been on an induction course?	100%	97%
3.12	Did you receive an education (skills for life) assessment?	83%	93%
SECTION 4: Legal rights and respectful custody			
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	41%	48%
4.1	Attend legal visits?	37%	53%
4.1	Get bail information?	18%	12%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	39%	48%
4.3	Can you get legal books in the library?	23%	46%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	82%	71%
4.4	Are you normally able to have a shower every day?	88%	97%
4.4	Do you normally receive clean sheets every week?	50%	39%
4.4	Do you normally get cell cleaning materials every week?	59%	65%
4.4	Is your cell call bell normally answered within five minutes?	17%	25%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	67%	70%
4.4	Can you normally get your stored property, if you need to?	18%	26%
4.5	Is the food in this prison good/very good?	28%	42%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	56%	34%
4.7	Are you able to speak to a Listener at any time, if you want to?	67%	48%
4.8	Are your religious beliefs are respected?	44%	50%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	50%	56%
4.10	Is it easy/very easy to attend religious services?	35%	59%

Key to tables

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	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	78%	81%
5.3	Is it easy to make a complaint?	72%	71%
5.5	Have you ever been prevented from making a complaint when you wanted to?	23%	26%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	23%	30%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	72%	49%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	72%	48%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	0%	19%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	78%	78%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	89%	69%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	23%	27%
7.4	Do staff normally speak to you most of the time/all of the time during association?	28%	24%
7.5	Do you have a personal officer?	72%	49%

Key to tables

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	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	83%	53%
8.2	Do you feel unsafe now?	24%	21%
8.4	Have you been victimised by other prisoners here?	72%	26%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	44%	9%
8.5	Hit, kicked or assaulted you?	11%	11%
8.5	Sexually abused you?	11%	2%
8.5	Threatened or intimidated you?	61%	14%
8.5	Taken your canteen/property?	0%	7%
8.5	Victimised you because of medication?	0%	4%
8.5	Victimised you because of debt?	0%	6%
8.5	Victimised you because of drugs?	0%	6%
8.5	Victimised you because of your race or ethnic origin?	0%	3%
8.5	Victimised you because of your religion/religious beliefs?	11%	4%
8.5	Victimised you because of your nationality?	0%	3%
8.5	Victimised you because you were from a different part of the country?	6%	4%
8.5	Victimised you because you are from a traveller community?	0%	1%
8.5	Victimised you because of your sexual orientation?	6%	0%
8.5	Victimised you because of your age?	6%	3%
8.5	Victimised you because you have a disability?	17%	2%
8.5	Victimised you because you were new here?	28%	5%
8.5	Victimised you because of your offence/crime?	23%	4%
8.5	Victimised you because of gang related issues?	11%	8%

Key to tables

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	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	39%	37%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	11%	11%
8.7	Hit, kicked or assaulted you?	6%	11%
8.7	Sexually abused you?	0%	1%
8.7	Threatened or intimidated you?	17%	17%
8.7	Victimised you because of medication?	0%	6%
8.7	Victimised you because of debt?	0%	2%
8.7	Victimised you because of drugs?	0%	1%
8.7	Victimised you because of your race or ethnic origin?	0%	11%
8.7	Victimised you because of your religion/religious beliefs?	0%	6%
8.7	Victimised you because of your nationality?	0%	4%
8.7	Victimised you because you were from a different part of the country?	6%	4%
8.7	Victimised you because you are from a traveller community?	0%	1%
8.7	Victimised you because of your sexual orientation?	0%	1%
8.7	Victimised you because of your age?	0%	2%
8.7	Victimised you because you have a disability?	0%	4%
8.7	Victimised you because you were new here?	11%	6%
8.7	Victimised you because of your offence/crime?	17%	6%
8.7	Victimised you because of gang related issues?	0%	3%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	18%	19%
9.1	Is it easy/very easy to see the nurse?	30%	45%
9.1	Is it easy/very easy to see the dentist?	18%	20%
9.4	Are you currently taking medication?	78%	45%
9.6	Do you have any emotional well being or mental health problems?	50%	35%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	11%	31%
10.2	Did you have a problem with alcohol when you came into this prison?	23%	19%
10.3	Is it easy/very easy to get illegal drugs in this prison?	44%	49%
10.4	Is it easy/very easy to get alcohol in this prison?	6%	31%
10.5	Have you developed a problem with drugs since you have been in this prison?	11%	21%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	6%	11%

Key to tables

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	Percentages which are not highlighted show there is no significant difference		
SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	81%	24%
11.1	Vocational or skills training?	18%	33%
11.1	Education (including basic skills)?	59%	43%
11.1	Offending Behaviour Programmes?	18%	27%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	88%	46%
11.2	Vocational or skills training?	24%	16%
11.2	Education (including basic skills)?	47%	24%
11.2	Offending Behaviour Programmes?	18%	12%
11.4	Do you go to the library at least once a week?	6%	38%
11.5	Does the library have a wide enough range of materials to meet your needs?	28%	28%
11.6	Do you go to the gym three or more times a week?	18%	47%
11.7	Do you go outside for exercise three or more times a week?	33%	40%
11.8	Do you go on association more than five times each week?	76%	78%
11.9	Do you spend ten or more hours out of your cell on a weekday?	6%	15%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	44%	37%
12.2	Have you had any problems with sending or receiving mail?	50%	47%
12.3	Have you had any problems getting access to the telephones?	0%	12%
12.4	Is it easy/ very easy for your friends and family to get here?	44%	23%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	94%	87%
13.10	Do you have a needs based custody plan?	6%	4%
13.11	Do you feel that any member of staff has helped you to prepare for release?	23%	19%



Prisoner survey responses HMP Dovegate 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.

Key to tables

	Any percentage highlighted in green is significantly better	L, N and P Wings	A, B, C, D, E, F, G, H, J, K and M Wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		37	131
SECTION 1: General information			
1.2	Are you under 21 years of age?	3%	0%
1.3	Are you sentenced?	73%	96%
1.3	Are you on recall?	3%	7%
1.4	Is your sentence less than 12 months?	14%	5%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	3%	7%
1.5	Are you a foreign national?	3%	6%
1.6	Do you understand spoken English?	100%	99%
1.7	Do you understand written English?	100%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	27%	31%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	1%
1.1	Are you Muslim?	11%	14%
1.11	Are you homosexual/gay or bisexual?	0%	2%
1.12	Do you consider yourself to have a disability?	30%	18%
1.13	Are you a veteran (ex-armed services)?	0%	8%
1.14	Is this your first time in prison?	16%	32%
1.15	Do you have any children under the age of 18?	41%	44%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	24%	48%
2.5	Did you feel safe?	76%	75%
2.6	Were you treated well/very well by the escort staff?	76%	68%
2.7	Before you arrived here were you told that you were coming here?	70%	74%
2.8	When you first arrived here did your property arrive at the same time as you?	55%	78%

Key to tables

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	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	50%	38%
3.2	When you were searched in reception, was this carried out in a respectful way?	80%	74%
3.3	Were you treated well/very well in reception?	78%	68%
	When you first arrived:		
3.4	Did you have any problems?	80%	70%
3.4	Did you have any problems with loss of property?	40%	29%
3.4	Did you have any housing problems?	17%	8%
3.4	Did you have any problems contacting employers?	0%	3%
3.4	Did you have any problems contacting family?	23%	28%
3.4	Did you have any problems ensuring dependants were being looked after?	3%	2%
3.4	Did you have any money worries?	12%	15%
3.4	Did you have any problems with feeling depressed or suicidal?	15%	12%
3.4	Did you have any physical health problems?	6%	12%
3.4	Did you have any mental health problems?	37%	20%
3.4	Did you have any problems with needing protection from other prisoners?	0%	6%
3.4	Did you have problems accessing phone numbers?	23%	32%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	77%	60%
3.6	A shower?	52%	28%
3.6	A free telephone call?	77%	82%
3.6	Something to eat?	80%	61%
3.6	PIN phone credit?	57%	47%
3.6	Toiletries/ basic items?	63%	54%

Key to tables

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	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 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?	56%	47%
3.7	Someone from health services?	65%	71%
3.7	A Listener/Samaritans?	35%	26%
3.7	Prison shop/ canteen?	41%	24%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	52%	46%
3.8	Support was available for people feeling depressed or suicidal?	49%	33%
3.8	How to make routine requests?	43%	40%
3.8	Your entitlement to visits?	49%	30%
3.8	Health services?	52%	39%
3.8	The chaplaincy?	54%	36%
3.9	Did you feel safe on your first night here?	86%	68%
3.10	Have you been on an induction course?	92%	98%
3.12	Did you receive an education (skills for life) assessment?	86%	94%
SECTION 4: Legal rights and respectful custody			
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	53%	45%
4.1	Attend legal visits?	70%	46%
4.1	Get bail information?	18%	11%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	47%	46%
4.3	Can you get legal books in the library?	39%	45%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	66%	74%
4.4	Are you normally able to have a shower every day?	97%	95%
4.4	Do you normally receive clean sheets every week?	31%	43%
4.4	Do you normally get cell cleaning materials every week?	75%	62%
4.4	Is your cell call bell normally answered within five minutes?	50%	17%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	59%	73%
4.4	Can you normally get your stored property, if you need to?	35%	23%
4.5	Is the food in this prison good/very good?	57%	35%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	49%	33%
4.7	Are you able to speak to a Listener at any time, if you want to?	52%	50%
4.8	Are your religious beliefs are respected?	62%	45%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	55%	55%
4.10	Is it easy/very easy to attend religious services?	67%	53%

Key to tables

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	Percentages which are not highlighted show there is no significant difference		
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	86%	79%
5.3	Is it easy to make a complaint?	70%	72%
5.5	Have you ever been prevented from making a complaint when you wanted to?	26%	25%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	31%	29%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	56%	50%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	53%	50%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	15%	17%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	83%	77%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	65%	73%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	31%	26%
7.4	Do staff normally speak to you most of the time/all of the time during association?	15%	27%
7.5	Do you have a personal officer?	38%	55%

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SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	52%	58%
8.2	Do you feel unsafe now?	22%	21%
8.4	Have you been victimised by other prisoners here?	31%	31%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	9%	14%
8.5	Hit, kicked or assaulted you?	12%	11%
8.5	Sexually abused you?	0%	3%
8.5	Threatened or intimidated you?	23%	19%
8.5	Taken your canteen/property?	15%	4%
8.5	Victimised you because of medication?	3%	3%
8.5	Victimised you because of debt?	6%	6%
8.5	Victimised you because of drugs?	0%	7%
8.5	Victimised you because of your race or ethnic origin?	0%	3%
8.5	Victimised you because of your religion/religious beliefs?	0%	6%
8.5	Victimised you because of your nationality?	0%	3%
8.5	Victimised you because you were from a different part of the country?	9%	3%
8.5	Victimised you because you are from a traveller community?	0%	1%
8.5	Victimised you because of your sexual orientation?	0%	1%
8.5	Victimised you because of your age?	0%	4%
8.5	Victimised you because you have a disability?	0%	5%
8.5	Victimised you because you were new here?	9%	7%
8.5	Victimised you because of your offence/crime?	0%	7%
8.5	Victimised you because of gang related issues?	6%	9%

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SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	26%	40%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	3%	13%
8.7	Hit, kicked or assaulted you?	9%	10%
8.7	Sexually abused you?	0%	2%
8.7	Threatened or intimidated you?	9%	19%
8.7	Victimised you because of medication?	6%	6%
8.7	Victimised you because of debt?	6%	1%
8.7	Victimised you because of drugs?	6%	0%
8.7	Victimised you because of your race or ethnic origin?	12%	10%
8.7	Victimised you because of your religion/religious beliefs?	3%	6%
8.7	Victimised you because of your nationality?	3%	4%
8.7	Victimised you because you were from a different part of the country?	6%	4%
8.7	Victimised you because you are from a traveller community?	3%	0%
8.7	Victimised you because of your sexual orientation?	3%	1%
8.7	Victimised you because of your age?	3%	2%
8.7	Victimised you because you have a disability?	9%	2%
8.7	Victimised you because you were new here?	3%	8%
8.7	Victimised you because of your offence/crime?	6%	8%
8.7	Victimised you because of gang related issues?	3%	2%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	20%	19%
9.1	Is it easy/very easy to see the nurse?	50%	42%
9.1	Is it easy/very easy to see the dentist?	18%	20%
9.4	Are you currently taking medication?	46%	49%
9.6	Do you have any emotional well being or mental health problems?	53%	33%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	49%	23%
10.2	Did you have a problem with alcohol when you came into this prison?	31%	16%
10.3	Is it easy/very easy to get illegal drugs in this prison?	34%	52%
10.4	Is it easy/very easy to get alcohol in this prison?	26%	29%
10.5	Have you developed a problem with drugs since you have been in this prison?	20%	20%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	9%	11%

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SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	17%	34%
11.1	Vocational or skills training?	24%	33%
11.1	Education (including basic skills)?	38%	47%
11.1	Offending Behaviour Programmes?	24%	27%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	40%	54%
11.2	Vocational or skills training?	6%	20%
11.2	Education (including basic skills)?	15%	29%
11.2	Offending Behaviour Programmes?	9%	13%
11.4	Do you go to the library at least once a week?	18%	39%
11.5	Does the library have a wide enough range of materials to meet your needs?	16%	31%
11.6	Do you go to the gym three or more times a week?	31%	48%
11.7	Do you go outside for exercise three or more times a week?	38%	40%
11.8	Do you go on association more than five times each week?	85%	75%
11.9	Do you spend ten or more hours out of your cell on a weekday?	15%	14%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	41%	37%
12.2	Have you had any problems with sending or receiving mail?	41%	50%
12.3	Have you had any problems getting access to the telephones?	9%	11%
12.4	Is it easy/ very easy for your friends and family to get here?	27%	25%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	75%	91%
13.10	Do you have a needs based custody plan?	9%	3%
13.11	Do you feel that any member of staff has helped you to prepare for release?	26%	18%