Report on an unannounced inspection of

# **HMP Spring Hill**

by HM Chief Inspector of Prisons

4-15 December 2017

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





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#### Glossary of terms

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

# Introduction

HMP Spring Hill is an open prison in Buckinghamshire holding over 300 category D prisoners. Most men were coming towards the end of long sentences, and one of the prison's main aims was to test their readiness for release and help prepare them for this step. To this end, prisoners were allowed more freedom to make their own day-to-day decisions and, critically – subject to risk assessment – were given opportunities for release on temporary licence (ROTL). Although at our last inspection in May 2014 we had found that the prison was doing some good work, its performance had been adversely affected by tragic events resulting from a prisoner reoffending in 2013 while in the community on ROTL. It was therefore heartening that at the present inspection the prison had made progress in many of the areas we looked at, although there remained a number of important issues to address.

The number of absconds had increased. An analysis done by the prison showed that the majority of absconds involved indeterminate-sentenced prisoners (ISPs) who were fairly new to living in open conditions after having spent many years in closed conditions. Some action was being taken to address this but more needed to be done to ensure these men were more supported during their first few months, to help them settle in and live confidently in open conditions.

Communal and external areas were clean and prisoners were able to move freely around the pleasant grounds. Some of the residential units were dilapidated and in need of significant refurbishment or rebuilding. While the prison attempted to mitigate these problems with temporary fixes, the conditions in a few units were unacceptable. More generally, the heating system was inadequate and the hot water supply unreliable. The solutions to these deficits were not in the gift of the local management team, and the prison needed significant capital funding to resolve them. Equality and diversity work was reasonably good overall, although more work was needed to provide sufficient additional support to those with some protected characteristics. Complaints were now reasonably well managed and health care provision was strong. However, prisoners continued to be less positive about the quality of staff-prisoner relationships than we usually see in open prisons. The reasons for this were complex but managers had taken proactive steps to improve the approach of some staff, and these efforts needed to be further improved and maintained.

Education, skills and work provision had improved since our last inspection and prison leaders had provided a real impetus to developing a wide range of useful partnerships, particularly with employers, some of whom now saw the prison as a source of reliable and effective employees. ROTL was being used extensively to this end, and the day-to-day management of placements was good. Prisoners who were not eligible for ROTL were encouraged to attend activities within the prison and there were sufficient places for all of them to do something. However, more needed to be done to motivate those who still needed to improve their functional skills to engage in education before moving on to other activities.

Children and families work had improved, and prisoners were generally well supported in maintaining contact with their children, families and friends; ROTL was, again, used well in this regard. Most offender management support was appropriate and nearly all prisoners had up-to-date offender assessment system (OASys) assessments which reflected their move to open conditions. Public protection work was generally good, and ROTL assessments were adequate. However, the ROTL board process needed to be more robust and not merely rubber-stamp recommendations made by these assessments. There was a good focus on supporting prisoners to prepare for release, and an appropriate range of practical assistance was offered.

The prison benefited from clear leadership, a motivated management team and a clear plan around how they wanted to improve the prison further. Some significant challenges remained, and it was encouraging that the governor understood and accepted the need for further work to focus on these areas. In terms of the conditions of the residential units, the prison needed external assistance to bring these up to an acceptable standard. In the key area of helping prisoners to prepare for release,

the prison was doing better than previously, but needed to ensure that all supporting processes for ROTL were robust and provided sufficient reassurance. Nevertheless, this was an encouraging inspection overall, with outcomes for prisoners improving in two of our healthy prison tests and outcomes at least reasonably good or better in all four.

#### Peter Clarke CVO OBE QPM

**HM** Chief Inspector of Prisons

January 2018

# Fact page

#### Task of the establishment

HMP Spring Hill is an adult male category D open establishment with a resettlement function.

#### Certified normal accommodation and operational capacity

Prisoners held at the time of inspection: 332

Certified normal capacity: 335 Operational capacity: 335

#### Notable features from this inspection

Most prisoners were serving sentences over four years.

36 men were serving life sentences and 19 were serving indeterminate sentences for pubic protection.

Forty-four per cent of the population were of a black and minority ethnic background.

Spring Hill was being assessed by the Royal College of Psychiatrists for 'Enabling Environments' accreditation'.

Release on temporary licence was very well used to promote links with family and friends and to find work or promote other opportunities in preparation for release.

#### Prison status (public or private) and key providers

**Public** 

Primary care provider: Care UK

Secondary care, mental health services: Barnet, Enfield and Haringey Mental Health NHS Trust Psychosocial substance misuse services: Inclusion (South Staffordshire and Shropshire Healthcare

NHS Foundation Trust)

Learning and skills provider: Milton Keynes College

Community rehabilitation company (CRC): Thames Valley CRC

Escort contractor: GEOAmey

#### Region

London and Thames Valley

#### **Brief history**

The establishment, opened in 1953, is the oldest of the open prisons. It forms part of a two-establishment cluster with HMP Grendon.

#### Short description of residential units

Accommodation in 13 huts. Nine huts (J to S) hold 22 prisoners each in shared accommodation, with a few single rooms. All huts have a communal lounge, kitchen, showers and separate toilets.

Three single-room huts (X, Y and Z) each contain 40 rooms and have a communal lounge/games room, laundry, shower and toilet facilities.

<sup>&</sup>lt;sup>1</sup> An 'Enabling Environment' accreditation is a quality mark awarded by the Royal College of Psychiatrists to places that can demonstrate they are achieving an outstanding level of best practice in creating and sustaining a positive and effective social environment.

T hut is a 16-bed dedicated unit for prisoners with substance misuse support needs.

#### Name of governor

Jamie Bennett

### **Independent Monitoring Board chair**

Rob Wandrak

#### Date of last inspection

6-15 May 2014

# About this inspection and report

- Al Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, secure training centres, immigration detention facilities, police and court custody and military detention.
- All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies known as the National Preventive Mechanism (NPM) which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.
- All Inspectorate of Prisons reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this inspectorate's thematic review *Suicide is everyone's concern*, published in 1999. The tests are:

**Safety** Prisoners, particularly the most vulnerable, are held safely.

**Respect** Prisoners are treated with respect for their human dignity.

**Purposeful activity** Prisoners are able, and expected, to engage in activity that is

likely to benefit them.

Rehabilitation and release planning

Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release into the community.

- 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 Her Majesty's 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 Other than in exceptional circumstances, all our inspections are unannounced and include a follow up of recommendations from the previous inspection.
- All inspections of prisons are conducted jointly with Ofsted or Estyn (Wales), the Care Quality Commission, the General Pharmaceutical Council (GPhC) and HM Inspectorate of Probation. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

# This report

- A9 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our Expectations. Criteria for assessing the treatment of and conditions for men in prisons (Version 5, 2017).<sup>2</sup> 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.
- All Details of the inspection team and the prison population profile can be found in the appendices.
- All Findings from the survey of prisoners and a detailed description of the survey methodology can be found in the final appendix of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.<sup>3</sup>

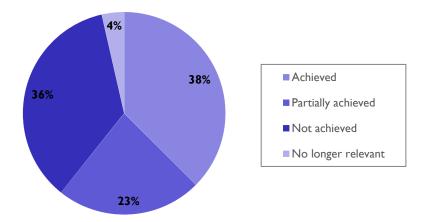
<sup>&</sup>lt;sup>2</sup> https://www.justiceinspectorates.gov.uk/hmiprisons/our-expectations/prison-expectations/

<sup>&</sup>lt;sup>3</sup> 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**

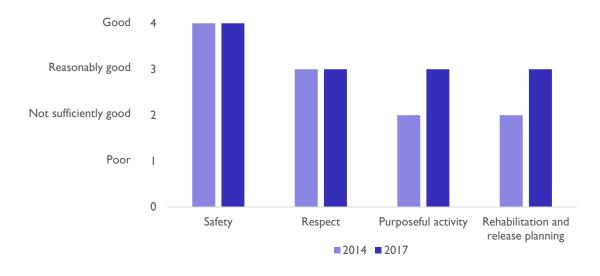
- SI We last inspected HMP Spring Hill in 2014 and made 56 recommendations overall. The prison fully accepted 52 of the recommendations and partially (or subject to resources) accepted two. It rejected two of the recommendations.
- At this follow up inspection we found that the prison had achieved 21 of those recommendations, partially achieved 13 recommendations and not achieved 20 recommendations. Two recommendations were no longer relevant.

Figure 1: HMP Spring Hill progress on recommendations from last inspection (n=56)



Since our last inspection, outcomes for prisoners stayed the same in Safety and Respect and improved in Purposeful activity and Rehabilitation and Release Planning. Outcomes were reasonably good in each health prison area, except for Safety, where outcomes were good.

Figure 2: HMP Spring Hill healthy prison outcomes 2014 and 20174



<sup>&</sup>lt;sup>4</sup> Please note that the criteria assessed under each healthy prison area were amended in September 2017. Healthy prison outcomes reflect the expectations in place at the time of each inspection.

# Safety

- Reception procedures were good and induction was comprehensive, but ongoing support for prisoners in their first few months in open conditions required improvement. Few prisoners felt unsafe. Levels of recorded violence were very low and the few incidents that had occurred had been well managed. There had been an increase in the number of absconds but analysis had led to some good work to try to address and reduce this. Security arrangements were proportionate and there was a focused drug supply reduction action plan. The few men at risk of self-harm were managed well. Outcomes for prisoners were good against this healthy prison test.
- At the last inspection in December 2014 we found that outcomes for prisoners in Spring Hill were good against this healthy prison test. We made eight recommendations in the area of safety. At this inspection we found that five of the recommendations had been achieved and three had not been achieved.
- In our survey, fewer prisoners than at comparator prisons had received information about the prison before their arrival. Reception procedures were efficient, and in our survey almost all prisoners said reception staff had treated them well.
- The induction orderly provided excellent support to new prisoners, and oversight of his work had improved. Almost all prisoners said that they had felt safe on their first night at the establishment, and designated induction staff knew who the new arrivals were, but there were no enhanced first night checks for new arrivals. Despite negative survey results about induction, prisoners we spoke to who had undertaken this programme said that it had covered everything they needed to know.
- S8 We were concerned that some prisoners did not receive enough ongoing support during their first few months in open conditions, in order to keep them occupied and engaged with their progression.
- Very few prisoners said that they had ever felt unsafe at the establishment, and acts of violence were rare. Although levels of victimisation had increased, these were low level and largely restricted to verbal abuse. There was good support for victims of antisocial behaviour. Most prisoners were motivated to behave well and progress to release on temporary licence (ROTL).
- The number of adjudications had fallen and was lower than at other open prisons. However, there was no regular managerial scrutiny of adjudications, and analysis of data had started only recently. Adjudication records were completed reasonably well and included a review of the prisoner's IEP level and suitability for ROTL where appropriate.
- Use of force by staff was rare, with full restraint being used only once in the previous year. Three other incidents had been managed well. Records were completed to a reasonably good standard and evidenced a good focus on de-escalation.
- The number of absconds, had increased over the previous year. Analysis by the prison showed that most had involved indeterminate-sentenced prisoners (ISPs) who were in their first few months in open conditions. An investigation into these had taken place and some action had been taken which aimed to provide better support to ISPs.
- Security arrangements were proportionate. Few prisoners were returned to closed conditions and processes to make these decisions were sound. Intelligence gathering was good and analysis thorough, and security objectives were updated regularly as a result.

- Without a perimeter fence, the key risks within the prison included the availability of mobile phones, drugs, alcohol and other contraband. A large amount of contraband had been seized in the previous year.
- There was a focused drug supply reduction policy, supported by an action plan to monitor effectiveness. Mandatory drug testing (MDT) procedures were sound, with tests spread out across the month. The average MDT positive rate for the previous six months was just below 7%, which was similar to that at other open prisons. Random alcohol breath testing was undertaken regularly across the site and on return from ROTL, which was a good response to this key threat.
- There had been no deaths in custody since the last inspection and no recorded incidents of self-harm in the previous six months. Six assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm had been opened in the previous six months, and the quality of the documentation was reasonably good. Most prisoners in crisis had received appropriate support, enabling them to remain in open conditions. The safer custody policy was comprehensive and the monthly meeting was well attended, including prisoner representatives. There were sufficient Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners), and their availability was promoted.
- The prison was not represented at the local safeguarding adults board. There was a good safeguarding adults policy and we saw evidence of prisoners in need receiving effective multidisciplinary support from within the prison.

### Respect

- Measures to improve staff—prisoner relationships were encouraging but needed to be further developed. Communal and outside areas were clean but residential huts were dilapidated and some had decayed to an unacceptable degree. Although broken kitchen equipment was having an impact on the quality of the food provided, over half of the prisoners in our survey said that the food provided was good. Consultation with prisoners was reasonably good but trends in complaints were not monitored. The strategic management of equality and diversity was strong but support for some prisoners with protected characteristics was inconsistent. Faith provision was very strong. Health services were good overall. Outcomes for prisoners were reasonably good against this healthy prison test.
- At the last inspection in December 2014 we found that outcomes for prisoners in Spring Hill were reasonably good against this healthy prison test. We made 21 recommendations in the area of respect. At this inspection we found that five of the recommendations had been achieved, five had been partially achieved, 10 had not been achieved and one was no longer relevant.
- In our survey, considerably fewer prisoners than at other open prisons said that staff treated them respectfully, that there was a member of staff they could turn to for help and that staff had checked on them recently. Some prisoners we spoke to said that some prison staff could be rude and dismissive. The prison had taken some steps to try to improve relationships. For example, prisoners and staff had worked together to apply for 'Enabling Environment' accreditation, which was a laudable aspiration. However, despite the work undertaken so far, more work was needed to improve day-to-day relationships.
- Outside areas were pleasant and communal areas on the residential huts were clean.

  However, these huts were dilapidated and in constant need of repair. Some had declined

- dramatically; for example, on Y and Z huts the fabric had decayed to an unacceptable degree and conditions were disrespectful. Many huts had inadequate heating and an unreliable hot water supply. Some shower areas had been refurbished but others remained damp and mouldy. Despite the prison's proactive approach to managing the maintenance contract, too many necessary repairs and improvements were left for too long.
- Prisoners had good access each week to clean clothes and room cleaning materials.

  However, new prison clothing was reserved for men at HMP Grendon, leaving those at Spring Hill with old, recycled items, which was a potentially divisive approach.
- In our survey, a little over half of the prisoners said that the food provided was good. However, broken essential equipment in the main kitchen made it difficult to deliver high-quality food consistently. Self-catering facilities were too limited for those living in open conditions. The prison shop list had expanded since the previous inspection but prices were too high for the very low levels of pay.
- S23 Regular community council meetings focused sensibly on prioritising issues, and produced some clear outcomes for prisoners. Applications were not monitored to check responses or their timeliness.
- The number of complaints submitted had almost doubled since the previous inspection. Most responses to complaints were adequate but some were curt. There was no regular analysis to monitor trends over time and address persistent areas of complaint. Complaints about staff needed more attention to identify potential patterns.
- The legal visits area was in a poor state of repair and the video-link facilities were inaccessible to some prisoners with physical disabilities.
- The equality policy was comprehensive. The quarterly diversity and equality meetings, chaired by the governor, included prisoner representatives and functioned well. Equality data were scrutinised, anomalies were investigated thoroughly and some clear improvements had been made as a result. There were forums for each of the protected characteristics but they were not well attended, although staff were trying to address this with creative ideas, such as film nights.
- The number of discrimination incident report forms submitted was higher than at the time of the previous inspection but still relatively low. The standard of investigations was generally good. There were two prisoner equality representatives but they had insufficient support and direction from staff to be fully effective.
- S28 In our survey, prisoners from a black and minority ethnic background reported mostly similar experiences to their white counterparts. However, many black and minority ethnic prisoners we spoke to were dissatisfied about some aspects of their treatment, particularly in relation to preparation for release.
- S29 Prisoners from a Gypsy, Roma, Traveller community reported positively about their experience at the establishment. Although there were no formal support arrangements, they had developed an effective informal support network.
- The prison did not consistently identify and meet the needs of prisoners with disabilities.

  One vulnerable man with a visual impairment was not being supported well enough.

  Although he was receiving input from various departments, this was not well coordinated and there was no formal, trained 'buddy' scheme to support him in his day-to-day life.

- Our survey results were positive in relation to faith and religion. Almost all prisoners who expressed a view said that their religious beliefs were respected and that they could attend religious services if they wanted to. There was an active, broad-based chaplaincy, which had recently been expanded to include those representing pagan and spiritualist beliefs. Faith facilities were good, and men with disabilities who were unable to get to the upstairs chapel at Spring Hill could now attend services at HMP Grendon.
- There was a constructive working relationship between the health services team and the prison, and governance was sound. Health screening for newly arrived prisoners was effective, with appropriate referral to other services, including mental health. Access to a nurse, GP and other primary care services was good. Prisoners with long-term conditions and complex health needs were managed appropriately.
- Potential social care needs were identified through effective partnership working with the local authority. There had been delays in completing some social care adaptations.
- There was early identification of prisoners with mental health needs, and suitable interventions were provided. Those with severe and enduring mental health needs were suitably linked with their local community mental health teams before their release.
- All prisoners were offered the opportunity to engage with substance misuse support services. Peer mentors met them on arrival and provided useful induction information and advice. The drug-free unit (T hut) provided good support and the Diamond Centre daily drop-in session was welcoming and supportive. One-to-one interventions and group work were relevant and focused on harm minimisation and planning for release. Arrangements for prisoners with substance misuse problems who were due for release were sound.
- The management of medicines was reasonable.

# Purposeful activity

- The regime was delivered reliably and prisoners could spend a large amount of time out of their rooms. Access to the library and the gym was reasonably good overall. The leadership and management of education, learning and skills were good, but there were a number of challenging areas for further development. Partnership working was developing and attendance at activities had improved. Attainment of qualifications had improved overall. Release on temporary licence was well used, with some excellent work placements in the community, which often led to employment.

  Outcomes for prisoners were reasonably good against this healthy prison test.
- At the last inspection in December 2014 we found that outcomes for prisoners in Spring Hill were not sufficiently good against this healthy prison test. We made 15 recommendations in the area of purposeful activity. At this inspection we found that five of the recommendations had been achieved, five had been partially achieved and five had not been achieved.
- Prisoners were not locked in their rooms, and had an impressive amount of free access around the site for most of the day. The regime generally ran to time. Recreation facilities were well used and the central association area was a popular addition. The creative use of performing arts and competitions provided some positive opportunities for those who chose to be involved.

- Most prisoners could access the gym at least once a week but ongoing heating problems and staff shortages had led to some cancellations of sessions, especially at weekends. Remedial gym and sessions for older prisoners were poorly attended.
- The library was mainly used as a resource for DVDs rather than for its book stock. Support for reading was limited. In our survey, more prisoners than at comparator prisons and at the time of the previous inspection said that they could visit the library twice a week or more, but opening times were unpredictable and there had been a reduction in the number of sessions.
- The prison's self-assessment of learning and skills provision was thorough and evaluative. Leadership and management were now good, and the need for ongoing improvements had been recognised and acted on. Performance data were used well to monitor many aspects of effectiveness, and further work was being done to evaluate the impact of the provision.
- S43 ROTL was used increasingly well, leading to employment, and the day-to-day management of placements was good. Employment and training opportunities had improved through effective partnership working, including a growing number of links with employers. Most employers regarded the prison as a source of reliable and effective employees.
- There were sufficient activity places but the rates of pay were low. Too many prisoners with level I skills in English and mathematics were highly resistant to engaging in education, particularly attending functional skills classes.
- National Careers Service staff provided each prisoner with good advice and guidance on their plans, working closely with the prison, community rehabilitation company (CRC) and education department. Access to and use of the virtual campus (internet access for prisoners to community education, training and employment opportunities) for job search were good.
- Data on the number of prisoners entering employment, education or training after release were unreliable.
- Most education and training staff used a wide range of effective teaching strategies to inspire and challenge prisoners. Most teachers assessed prisoners' progress and standards of work carefully, and planned learning well. Most prisoners valued the vocational training and skills they had gained. However, in a minority of sessions, teachers and trainers did not use questioning well to confirm that each prisoner had understood and learned what they had been taught. Almost all prisoners we interviewed said that mixed-ability functional skills classes were not effective at ensuring equality of learning. The number of interruptions to learning sessions (for example, by prisoners' visits to the health centre or the gym) and the level of unauthorised absences had reduced but were still too frequent.
- Teachers treated prisoners with respect, and prisoners worked well with each other. The conduct and behaviour of prisoners were good, and most took pride in their work. Most prisoners recognised and valued the practical skills they were developing in paid employment, but a minority in community work were unclear about how it could benefit them. Prisoners' attendance at education and vocational training sessions was high. Too many prisoners were reluctant to engage in further education or vocational training because they did not see the value of the activities available.
- Prisoners' attainment of qualifications had improved markedly but were not high enough on all courses. The number of prisoners being withdrawn from courses had reduced substantially. Entry-level learners in English identified the good progress they had made compared with their starting points. Prisoners' standards of work in education and vocational training was to the expected standards.

### Rehabilitation and release planning

- The overall visits experience had improved and was mostly positive. Most prisoners were serving long sentences and could benefit from the impressive range of ROTL opportunities. There was an appropriate focus on ROTL and other release processes, but the lack of oversight provided by the ROTL board was concerning. Most offender assessment system (OASys) assessments were up to date but some were of poor quality. Public protection work was reasonably good. Work to prepare prisoners for release was good. Outcomes for prisoners were reasonably good against this healthy prison test.
- At the last inspection in December 2014 we found that outcomes for prisoners in Spring Hill were not sufficiently good against this healthy prison test. We made 12 recommendations in the area of resettlement. At this inspection we found that six of the recommendations had been achieved, three had been partially achieved, two had not been achieved and one were no longer relevant.
- Friday social visit sessions had been introduced in response to increased demand. Facilities for visitors arriving at the prison had improved, and the results of a visitors survey were positive. The only location large enough to hold visits was the dining hall, which was not an ideal environment. However, prisoners and their visitors appreciated the indoor and outdoor children's play areas and the opportunity to buy hot food. There were no relationship or parenting courses, but a part-time family worker was being appointed to fulfil part of this function. Prisoners could now keep in touch with their friends and families using email, and this was widely used. ROTL was used well to promote family ties.
- Most prisoners were serving sentences of four years or more, and about 15% were serving an indeterminate sentence. Almost 20% had been assessed as presenting a high risk of harm to others.
- There were good efforts to coordinate rehabilitation services. The well-attended resettlement meeting had coherent action plans but the work of the offender management unit (OMU) did not have a sufficiently high profile.
- Immediate resettlement needs were identified on arrival. Most prisoners had an offender assessment system (OASys) review within 12 weeks of their arrival.
- S56 OMU work was appropriately focused on ROTL and release processes, but this left little capacity for supporting other forms of progression or engagement. However, a daily drop-in session provided prisoners with regular access to staff in the OMU.
- The quality of OASys assessments for higher-risk prisoners was good, and offender management work was reasonable overall. However, some OASys assessments were of poorer quality, failing to identify or analyse risks fully. Most prisoners were involved in the sentence planning process and generally understood their targets.
- There had been over 14,400 ROTL events in the previous six months, and the range of work placements was excellent. Although we had no major concerns about individual prisoners who were released on ROTL, the ROTL risk board was not sufficiently robust and did not provide adequate evidence to support decisions to approve temporary release.
- Public protection work was reasonably good. However, the interdepartmental risk management team meeting did not have a clear enough focus on the management of those posing the highest risk of harm to others on release.

- The number of prisoners serving an indeterminate sentence had halved since the previous inspection. Many of those we spoke to had felt particularly unsupported during their first few months at the prison. Although there was a renewed focus on providing them with more support, this was not yet well embedded or effective.
- Some prisoners could access a short resettlement programme through the CRC. The CRC provided some housing support but many prisoners returned to their own accommodation, or that of family or friends. Of 155 releases in the previous six months, only one prisoner had been released homeless. Although many prisoners had an address immediately on release, not enough was known about their longer-term housing outcomes. Finance, benefit and debt work was strong. There was good access to banking services, debt advice and a benefits adviser. Prisoners could also complete a money management course.
- Resettlement plans were thorough and evidenced actions being completed. The discharge board was effective in monitoring the work that was still required, and this was followed up by the CRC. Release processes were effective and included a checklist to help prisoners to follow up any outstanding actions and finalise practical arrangements.

#### Main concerns and recommendations

- S63 Concern: The residential huts were dilapidated and in constant need of repair. Some had declined dramatically. For example, on Y and Z huts the fabric had decayed to an unacceptable degree and conditions were disrespectful. Many huts had inadequate heating and an unreliable hot water supply.
  - Recommendation: Urgent and long-term investment should be made to replace the dilapidated residential units and ensure that all facilities are in good working order.
- S64 Concern: ROTL risk assessment boards were not sufficiently multidisciplinary and did not provide adequate evidence of robust, defensible decision making or accountability by senior managers when considering the release of higher-risk prisoners on ROTL.
  - Recommendation: Release on temporary licence risk assessment boards for higher-risk prisoners should be multidisciplinary and include the expertise of a senior probation officer. The decision to release higher-risk men temporarily should be fully evidenced, including defensible and robust decision making by senior managers.

# Section 1. Safety

Prisoners, particularly the most vulnerable, are held safely.

### Early days in custody

#### **Expected outcomes:**

Prisoners transferring to and from the prison are safe and treated decently. On arrival prisoners are safe and treated with respect. Risks are identified and addressed at reception. Prisoners are supported on their first night. Induction is comprehensive.

- 1.1 The prison received on average eight new prisoners each week. In our survey, fewer prisoners than at comparator prisons (18% versus 30%) said that they had received information about the prison before their arrival. However, an information booklet was given to new prisoners on reception; this included a range of information about expectations, rules, routines and entitlements.
- 1.2 The reception area was small but the process was efficient. In our survey, 84% of respondents said that reception staff had treated them well or very well. Property was processed immediately, and prisoners were given a free telephone call on arrival. Although our survey responses about access to health services on arrival were far worse than at comparator prisons, all new receptions saw health services staff for an initial screening in reception, and had a full health care assessment the following day. An immediate safety screening was completed in reception, to assess risks such as the mood of the new arrival or whether there might be any self-harm concerns.
- 1.3 A prisoner induction orderly greeted all new arrivals, to offer immediate support, and assistance with relevant paperwork. The orderly also led a tour of the prison and escorted new arrivals to their room on the induction hut. Oversight of the orderlies, by designated staff working in the population management unit, had improved and was appropriate, and prisoners spoke highly of the support they received from them. They had job descriptions, and the induction orderly met the population management staff regularly, to update them on new arrivals and the progress they had made with their induction.
- 1.4 There was a dedicated induction hut but all rooms were shared, which was difficult for some prisoners who had spent several years in a single cell while in closed conditions.
- Prisoners saw a Listener (a prisoner trained by the Samaritans to provide confidential emotional support to fellow prisoners), and also a prisoner safer custody representative, within 24 hours of arrival. Although there were no enhanced first night checks for new arrivals, in our survey 91% of prisoners said that they had felt safe on their first night at the establishment.
- 1.6 A new induction programme had been introduced. It was comprehensive and included sessions about key areas of the prison, including support and resettlement services as well as one-to-one appointments with the activities hub, National Careers Service and education department. This was a one-week rolling programme that started on the day after arrival. The induction orderly maintained attendance lists, to ensure that all new arrivals attended all sessions. Although, in our survey, only 59% of prisoners said that the induction programme covered everything they needed to know about the prison, those we spoke to who had experienced it were more positive. However, we were concerned that some prisoners, particularly indeterminate-sentenced prisoners (ISPs), did not receive enough ongoing

support during their first few months at the establishment, in order to reduce the number of absconds by helping them to settle into open conditions after many years in closed conditions, and keep them occupied and engaged in their progression while waiting to be assessed for release on temporary licence (ROTL) (see paragraph 4.26).

#### Recommendation

1.7 Prisoners, including ISPs, should be given more proactive support from staff during their first few months in open conditions, to enable them to settle in and be engaged with their progression while awaiting the outcome of their ROTL risk assessment.

# Managing behaviour

#### **Expected outcomes:**

Prisoners live in a safe, well ordered and motivational environment where their positive behaviour is promoted and rewarded. Unacceptable conduct is dealt with in an objective, fair, proportionate and consistent manner.

#### Encouraging positive behaviour

- Violent incidents were rare and there had been just one recorded assault in the previous six months. Very few prisoners said that they had ever felt unsafe at the establishment. However, our survey results indicated that levels of victimisation had increased since the previous inspection and were higher than at similar prisons. Discussions with prisoners suggested that this was likely to be experienced in the early days at the prison, often in relation to being new or from a different part of the country, and constituted low-level verbal abuse.
- 1.9 The comprehensive violence reduction strategy was well understood by all and embedded.

  Responses to antisocial behaviour were appropriate, and there was reasonably good support for victims, including mediation, enhanced supervision and monitoring.
- 1.10 The prisoner violence reduction representatives had a good understanding of their role, which involved giving support to other prisoners, including the resolution of low-level conflict. They had regular meetings with the safer custody officer and were represented at the safer custody meeting.
- 1.11 There was a local incentives and earned privileges (IEP) scheme which was well understood by prisoners and staff. Almost all prisoners arrived with enhanced regime status, and could expect to remain there. The key differentials between the different regime levels included the amount that could be spent in the prison shop, the opportunity for additional visits, and access to the use of personal DVD players. However, the IEP scheme was largely incidental as most prisoners understood the need for good behaviour, in order to remain in open conditions and progress to ROTL.

#### Adjudications

1.12 The use of formal adjudications had reduced and was lower than we normally see in open prisons. The records we examined showed that hearings were conducted fairly and that prisoners took an active part in proceedings. Adjudicators ensured that prisoners

- understood each stage of the process and routinely offered them the opportunity to seek legal advice and ask for witnesses to attend, if necessary.
- **1.13** All adjudications included a review of the prisoner's IEP level to determine if a demotion was appropriate and also suitability for ROTL where relevant.
- 1.14 There was no formal quality assurance of adjudications, and little available information to enable in-depth analysis of hotspots of poor behaviour. A standardisation meeting had recently been reintroduced and had started to collate data and review adjudication tariffs.

#### Use of force

Use of force by staff was rare; there had been none in the previous six months and only one use of restraint techniques in the previous year. Written records of this and three other minor incidents over this period were good and accounts from officers demonstrated that de-escalation techniques were used well. The management and monitoring arrangements for the use of force were good and a committee met quarterly to oversee processes and review any incidents.

### Segregation

1.16 There was no segregation unit, and the prison continued to manage well without one.

# Security

#### **Expected outcomes:**

Security and good order are maintained through an attention to physical and procedural matters, including effective security intelligence and positive staff-prisoner relationships. Prisoners are safe from exposure to substance misuse and effective drug supply reduction measures are in place.

- 1.17 The prison was well sighted on the key risks to the prison, which mainly comprised contraband such as drugs, alcohol and mobile phones. Responses to these threats were proportionate. The extensive open perimeter posed an obvious security problem, with considerable opportunities for parcel drops and for prisoners to go out of bounds. Patrols and random room checks during the night were undertaken to mitigate some of this risk.
- 1.18 Over the previous year, there had been an increase in the number of prisoners absconding. Analysis showed that most had involved indeterminate-sentenced prisoners who were in their first few months in open conditions. The prison had explored this, including follow-up interviews with absconders, a review of their early days at the establishment and also an impressive 'prisoner in crisis' review board, to which staff could refer prisoners who were having difficulties with living in open conditions (see paragraph 1.6 and recommendation 1.7).
- 1.19 An impressive flow of security information was analysed efficiently. Regular security meetings reviewed these data and produced objectives for the coming month. These objectives were reviewed regularly, to monitor outcomes and ensure that they remained valid.
- **1.20** A biweekly meeting between security, offender management and residential managers reviewed prisoners who were emerging as concerns. Actions from these meetings sought to reduce these concerns; although this resulted rightly in a return to closed conditions for

- some prisoners, most others responded to local interventions, and every attempt was made to support them in remaining in open conditions.
- 1.21 There was an up-to-date and well-focused drug supply reduction strategy and an accompanying action plan, which was monitored at the monthly drug strategy meeting. Mandatory drug testing (MDT) procedures were sound, with tests spread across the month, including at weekends. Random drug testing targets were met routinely but not all requested suspicion tests were completed, owing to a lack of available staff. The positive rate for suspicion testing was relatively high, which evidenced good-quality intelligence. The random mandatory drug testing positive rate for the previous six months was just below 7%, which, although higher than at the time of the previous inspection, was similar to that at other open prisons, and reflected a switch from new psychoactive substances (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) to more traditional drugs such as cannabis.
- 1.22 The trading of medications had been identified as an issue, and in-possession medication checks had been introduced for the prisoners considered to be involved. Random alcohol breath testing was undertaken regularly across the site and also on some prisoners returning from ROTL. A steroid awareness training package had been delivered to prisoners following an increase in intelligence concerning the use of these drugs.

1.23 All requested suspicion drug tests should be completed.

# Safeguarding

#### **Expected outcomes:**

The prison provides a safe environment which reduces the risk of self-harm and suicide. Prisoners at risk of self-harm or suicide are identified and given appropriate care and support. All vulnerable adults are identified, protected from harm and neglect and receive effective care and support.

#### Suicide and self-harm prevention

- 1.24 There had been no deaths in custody since the previous inspection. Levels of self-harm were very low; in the previous six months, no incidents had been recorded and only six assessment, care in custody and teamwork (ACCT) case management documents had been opened, involving five prisoners. The prison had taken steps to manage those on an ACCT while they remained in open conditions where possible, and this had resulted in only two prisoners being returned to closed conditions in this period.
- 1.25 ACCT documents addressed triggers and were appropriately quality assured. The reviews we observed were multidisciplinary and conducted sensitively, signposting prisoners to support.
- 1.26 The safer custody policy was comprehensive and set out specific roles for different groups of staff. A safer custody meeting was held monthly, with good attendance from key areas and prisoner representation from Listeners. This meeting looked at all available data and monitored a continuous improvement plan.

- 1.27 There was an up-to-date rolling safer custody training programme for staff. Staff we met carried anti-ligature knives and understood the emergency code procedure. The visitors centre advertised contact numbers, so that family and friends could contact the safer custody team directly to share any concerns they had about prisoners at the establishment.
- 1.28 At the time of the inspection there were 12 Listeners, who were well supported by the Samaritans. There was a Listener suite but there was no central log of its use or of the number of formal Listener call-outs, although take-up of these services was considered low. Most of the work undertaken by Listeners was through informal contacts around the prison. The safer custody team was planning a Listener awareness day, to try to raise the profile of the scheme.

#### Protection of adults at risk<sup>5</sup>

- 1.29 There was a good safeguarding adults policy, which set out how referrals would be managed. The safer custody team managed adult safeguarding referrals, and two had been received in the previous six months. Multidisciplinary support meetings, with input from health services staff, had taken place to provide a care plan and support for the prisoners involved.
- **1.30** The prison was not represented at the local safeguarding adults board but there were appropriate links with the local authority (see section on health, well-being and social care).

#### Recommendation

1.31 The prison should be represented at the local safeguarding adults board.

<sup>&</sup>lt;sup>5</sup> Safeguarding duties apply to an adult who:

<sup>•</sup> has needs for care and support (whether or not the local authority is meeting any of those needs); and

<sup>•</sup> is experiencing, or is at risk of, abuse or neglect; and

<sup>•</sup> as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse and neglect (Care Act 2014).

Section 1. Safety	
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# Section 2. Respect

Prisoners are treated with respect for their human dignity.

### Staff-prisoner relationships

#### **Expected outcomes:**

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

- 2.1 In our survey, considerably fewer prisoners than at other open prisons said that staff treated them respectfully (56% versus 83%), that there was a member of staff they could turn to if they had a problem (66% versus 82%) and that a member of staff had checked on them in the last week (24% versus 37%). There was no difference in the responses to these survey questions between prisoners who were accessing release on temporary licence (ROTL) and those who were not.
- 2.2 Some prisoners we spoke to said that some prison staff could be rude and dismissive but the interactions we saw during the inspection were, on the whole, polite and positive. The redesign of the centre office (where prisoners went to seek help from staff, raise any queries and receive advice and guidance), which included removal of the hatch, had made it more welcoming and accessible and staff based in there were responsive to prisoners' requests.
- 2.3 In response to a recommendation in our previous report, the prison had taken steps to try to improve relationships. For example, initiatives such as the 'bake off', involving staff and prisoners, and cleanest hut competitions were good ways to promote community spirit. Most significantly, prisoners and staff had worked together to apply for 'Enabling Environment' accreditation, awarded by the Royal College of Psychiatrists. This required the prison to meet specific standards for openness, empowerment, involvement, belonging and communication. The outcome of this accreditation application was not known at the time of this inspection but it was a laudable aspiration. Despite this, prisoner perceptions of day-to-day relationships with staff were slow to change and were more negative than we normally see in open prisons. The reasons for this remained unclear and more needed to be done to explore and address the reasons behind this.

#### Recommendation

2.4 The prison should continue their initiatives to improve staff-prisoner relationships and ensure that all aspects of daily life reflect an enabling environment ethos.

# Daily life

#### **Expected outcomes:**

Prisoners live in a clean and decent environment and are aware of the rules and routines of the prison. They are provided with essential basic services, are consulted regularly and can apply for additional services and assistance. The complaints and redress processes are efficient and fair.

#### Living conditions

- 2.5 Outside areas were pleasant and the communal areas on the residential huts were kept as clean as possible. However, the residential huts were dilapidated and in constant need of repair. Some buildings had declined dramatically; for example, on Y and Z huts the fabric had decayed to an unacceptable degree, with large chunks of cladding fallen away. Prisoners lived in the rooms adjacent to the damage, and corridors on these units were particularly cold (see main recommendation S63). Living conditions, generally, were disrespectful (see Appendix III).
- 2.6 Many huts had inadequate heating and an unreliable hot water supply. Many windows had no handles and could not be closed to keep out draughts. Some shower areas had been refurbished but others remained damp and mouldy. Despite the prison's proactive approach to managing the maintenance contract, too many necessary repairs and improvements were left for too long, causing considerable frustration to prisoners and staff (see main recommendation S63).
- 2.7 Prisoners could access their stored property every two months in order to exchange their own items of clothing, which was an improvement since our last inspection. They had good access each week to room cleaning materials and generally made the best of their rooms. Personal clothing could be washed weekly at the prison laundry, and bedding and any prisonissue kit could be swapped once a week at the stores.
- 2.8 However, new prison clothing and boots were reserved for men at neighbouring HMP Grendon, leaving those at Spring Hill with old, recycled items. This was a potentially divisive approach and did not help to improve prisoners' perceptions of the prison (see also paragraph 2.2). This practice was stopped during the inspection, after we alerted senior managers to our concerns.

#### Residential services

- 2.9 Prisoners had mixed views about the quality of the food provided. In our survey, 51% of prisoners said that it was good. Essential pieces of kitchen equipment had been broken for long periods, limiting the catering manager's ability to deliver consistently high-quality food and a reliably diverse menu. High costs were incurred by having to rent equipment in the interim.
- **2.10** Those working in the kitchen could not achieve formal vocational qualifications.
- 2.11 Prisoners could get breakfast from the dining hall. This included the option to make toast but there were too few toasters. Lunch and dinner were served on time. The dining hall queue was orderly and there was enough space for men to dine together. Those returning late from ROTL had the option of collecting a frozen ready-meal and microwaving it in their hut, or bringing food back in with them.

- 2.12 Prisoners were dissatisfied with the meal options at weekends. The dining hall doubled as the visits hall (see also paragraph 4.3), which meant that on visits afternoons, which took place mainly at the weekend (see section on children and families and contact with the outside world), it was unavailable to prisoners for dinner. On these days, they were issued with a cold dinner pack to last them until the following morning, and prisoners we spoke to said it was inadequate.
- **2.13** Self-catering facilities were too limited for an open prison, comprising only microwave ovens, boiling water and a small refrigerator in each hut.
- 2.14 The prison shop list had expanded since the previous inspection but prices were too high for the low levels of pay earned by prisoners. Prisoners could order from a wide range of catalogues, but there was an administration fee for each order, which had a disproportionate impact on those on the lowest wages.

- 2.15 Prisoners working in the kitchen should be able to achieve formal vocational qualifications. (Repeated recommendation 2.92)
- 2.16 Self-catering facilities should be extended, to help prepare prisoners for resettlement. (Repeated recommendation 2.91)

#### Prisoner consultation, applications and redress

- 2.17 Consultation arrangements with prisoners were generally sound, and the community council met monthly. These meetings were focused sensibly on the five most important issues identified by prisoners, which ensured clarity and produced some clear outcomes. However, the meetings tended to be dominated and run by staff, with insufficient input from prisoners.
- 2.18 Application and complaint forms were available from the residential office. Although a triplicate system was used for applications, once these were logged they were not subsequently monitored to check the quality or timeliness of responses.
- 2.19 The number of complaints submitted had almost doubled since the previous inspection, and was now at the level we typically see at open prisons. Most responses to complaints were adequate but some were too curt. Analysis of complaints was much too basic and there was no reliable measure of timeliness. There was no regular analysis to monitor trends over time and no mechanism to identify and address persistent areas of complaint. There had been a small number of complaints about staff and confidential access complaints. Monitoring of these needed more attention to identify recurring themes.
- 2.20 There was little requirement for legal services among a population nearing release, and, in line with HM Prison and Probation Service policy, there was no longer a dedicated legal services officer.
- **2.21** Video-link facilities were well used for proceeds of crime hearings and sentence planning meetings. These facilities were located in an attic space, which was inaccessible to prisoners with mobility problems.
- 2.22 The legal visits area, located in a portacabin, was in a poor state of repair; the front door was so dilapidated that it could not be locked (see Appendix III). We were told that solicitors and prisoners could meet elsewhere but these options lacked privacy.

- 2.23 Applications should be monitored, to ensure timely responses.
- 2.24 Complaints analysis should monitor trends across time and identify clear actions to address recurring problems.
- 2.25 The legal visits area should be fit for purpose.

# Equality, diversity and faith

#### **Expected outcomes:**

There is a clear approach to promoting equality of opportunity, eliminating unlawful discrimination and fostering good relationships. The distinct needs of prisoners with particular protected characteristics and any other minority characteristics are recognised and addressed. Prisoners are able to practise their religion. The chaplaincy plays a full part in prison life and contributes to prisoners' overall care, support and rehabilitation.

#### Strategic management

- 2.26 The equality policy was comprehensive and up to date. The quarterly diversity and equality committee meeting was chaired by the governor and attended by heads of department, as well as prisoner equality representatives. Records indicated that constructive discussions took place, and the committee appeared to function well.
- 2.27 Relevant data were scrutinised at the committee, and anomalies were investigated thoroughly. This task was made unnecessarily difficult for staff because the centrally processed data provided to the prison were combined with those for adjacent HMP Grendon, so had to be disaggregated on every occasion.
- 2.28 Recently, it had been identified that black prisoners were overrepresented in adjudications and that prisoners with disabilities were making disproportionately high numbers of complaints. Examination of these matters had led to the suggestion of introducing staff training on unconscious bias, and to a message being issued to staff, highlighting the importance of responding sensitively to prisoners with a high expressed need who made multiple complaints.
- 2.29 Discussion forums were scheduled to cover each of the protected characteristics every fortnight, but attendance was poor and at some meetings no one had turned up at all. Staff were trying to improve engagement with prisoners at these forums by showing films which might trigger discussion. This had recently resulted in a successful event helping to raise awareness and understanding about transgender issues.
- **2.30** There were two prisoner equality representatives but they had received no training or formal support for their role and felt limited about what they could achieve.
- **2.31** Although higher than at the time of the previous inspection, the number of discrimination incident report forms submitted was relatively low, with 11 over the previous six months. In most cases, the standard of investigation carried out was good.

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

2.32 Equality representatives should receive training and structured support to assist them in carrying out their role.

#### Protected characteristics

- 2.33 In our survey, prisoners from a black and minority ethnic background reported mostly similar experiences to their white counterparts. However, many black and minority ethnic men we spoke to said that they were dissatisfied with their treatment in general, and in particular in relation to resettlement. This was reflected in our survey, where only 39% of black and minority ethnic prisoners, compared with 67% of white prisoners, said that they had been helped to progress.
- 2.34 By contrast, prisoners from a Gypsy, Roma, Traveller community reported positively about their experience at the establishment. Apart from some additional educational input, they received no specialist support, but this group of prisoners had developed their own informal support network and seemed to flourish in the open prison setting.
- 2.35 At the time of the inspection, there were six prisoners with some form of disability who had personal evacuation plans. These documents contained detailed and helpful information, and were displayed centrally, where staff had access to them. Suitable adaptations to rooms had been made for some of these individuals. However, the prison did not consistently identify and meet all of the needs of prisoners with disabilities. We found one vulnerable man with a serious visual impairment who was not being properly cared for. During a period of icy weather, he had had great difficulty simply moving around the prison grounds. Although he was receiving input from various departments, the support was not coordinated. There was currently no formal, trained 'buddy' scheme, which would have been of great benefit to this individual (see also paragraph 2.79).
- **2.36** There was no formal support available for gay or bisexual prisoners.

#### Recommendations

- 2.37 The negative perceptions expressed by black and minority ethnic prisoners should be investigated, to establish if there are underlying reasons for them.
- 2.38 Disabled men should have access to practical support such as a buddy scheme which supports them in their day-to-day life at the prison.

#### Faith and religion

- 2.39 Prisoners' spiritual needs were well met, and in our survey, 78% of respondents said that their religious beliefs were respected and 94% that they could attend religious services if they wanted to.
- **2.40** Despite longstanding difficulties in appointing a permanent Roman Catholic chaplain, there was an active broad-based chaplaincy. The team had recently been extended to include input from those representing pagan and spiritualist beliefs.
- **2.41** All prisoners were seen by a chaplain shortly after their admission, issued with an information leaflet and advised about what the chaplaincy could provide.

- 2.42 Chaplains usually attended all of the main committee meetings held at the prison. Recently, they had begun to help prisoners with their resettlement needs and had been asked to make contributions to sentence plans.
- 2.43 The faith facilities were good. The mosque was purpose built and the multi-faith area had been refurbished. All prisoners had access to the well-tended Buddha grove. Agreement had recently been reached to allow prisoners with mobility problems who were unable to attend the upstairs chapel to attend services at HMP Grendon.
- **2.44** There was a weekly drop-in session in the chapel, and prisoners could use the other facilities for meditation, or simply as somewhere peaceful to spend time.
- **2.45** The chaplaincy published a varied programme of faith-based events and worked closely with the catering department to promote all the major religious festivals.

# Health, well-being and social care

#### **Expected outcomes:**

Patients are cared for by services that assess and meet their health, social care and substance use needs and promote continuity of care on release. The standard of provision is similar to that which patients could expect to receive elsewhere in the community.

2.46 The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)<sup>7</sup> and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies.

#### Strategy, clinical governance and partnerships

- **2.47** The CQC found no breaches of the relevant regulations.
- **2.48** NHS England South Central commissioned Care UK to provide health and substance misuse services. Integrated governance structures were embedded and effective.
- **2.49** A Buckinghamshire Cluster Health and Social Care Partnership Board provided strategic and effective oversight to a positive working relationship between the prison and health services provider.
- 2.50 Clinical leadership was clear and visible, and staff demonstrated positive engagement with prisoners. A mental health and SMS dual-qualified nurse (RMN) provided both primary mental health and substance misuse experience. The mental health team leader provided learning disabilities expertise.
- **2.5 I** Management and clinical supervision were well managed, with all staff receiving clear and regular supervision. Staff were mainly up to date with mandatory training requirements.
- 2.52 Clinical record entries were sufficiently detailed and supported clinical care appropriately. Templates were well used. Consent to information sharing was sought routinely at reception screening.

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

- **2.53** We observed thoughtful and polite interactions between health services staff and patients, with good attention to privacy and confidentiality.
- 2.54 Incident management was sound, with all the health care services encouraged to report concerns. Approximately 38 incidents had been reported in the previous year, with good analysis, follow-up and shared learning.
- 2.55 The health care complaints process had improved, with accessible forms, suitable confidentiality and responses that addressed issues and accepted responsibility. The system distinguished between concerns that were easily resolved and more complex complaints. Where feasible, a senior health professional met complainants and there was good evidence of learning from some of the most challenging of these. There had been approximately 30 formal complaints in the previous year. Prisoners could also seek advice from an independent advocacy service.
- **2.56** Staff had a good awareness of safeguarding needs; there had been two instances of concerns shared with the prison which did not meet the threshold for referral to the local authority.
- 2.57 Some clinical rooms did not meet infection control requirements fully, with short basin taps and floors that were not suitably sealed. An infection control audit had been conducted in November 2017, with evidence of actions taken to address key issues.
- **2.58** Some medical equipment did not display evidence of required checks and servicing; this was resolved during the inspection.
- **2.59** Emergency equipment was checked regularly, and all staff were in date with resuscitation skills training.

#### Promoting health and well-being

- 2.60 The health care waiting area was small but welcoming, with a wide range of health information literature. Some leaflets had been adapted for prisoners with reading difficulties, and there were plans to expand this further. A recognised diabetes education programme had been delivered, to help prisoners with this condition to manage it better. Several health events had been held, aligned with national campaigns.
- **2.61** Immunisations were targeted appropriately, and sexual health advice and condoms were available. Access to smoking cessation support was reasonable, with nicotine inhalators offered.
- 2.62 We found some gaps in reporting on screening, immunisations and vaccinations, although adherence to national screening targets and recording were improving. A programme to conduct NHS health checks had started but not all prisoners had received an invitation yet.
- **2.63** There was no health forum, and health services representation was not always consistent at the prisoner community council. Plans to train and introduce prisoner health representatives were under way.
- **2.64** There was a suitable range of policies and protocols, including a suitably localised policy on communicable disease outbreak.

2.65 There should be a regular structured opportunity for prisoners to voice their views and inform health services through a dedicated forum or consistent health representation at the prison community council.

#### Primary care and inpatient services

- **2.66** We observed good and supportive engagement between health services staff and patients, and effective inter-professional working relationships.
- **2.67** Prisoners could make written or telephone applications for appointments, including nurse triage, but the telephone line was poorly advertised.
- 2.68 Nurses provided daily clinics and treatment between 7.30am and 4.30pm from Monday to Friday, and until 7pm on Wednesdays. They provided clinic sessions on Saturdays and Sundays between 8am and 9.15am, and 4pm and 4.30pm. An additional nurse-led clinic on Sundays enabled full-time workers to access health services.
- 2.69 Access to GPs was good, with an additional early evening GP clinic on Wednesdays between 5pm and 6.30pm. Out-of-hours cover was provided by NHS 111 emergency services between 6.30pm and 8am.
- **2.70** Waiting times for routine GP appointments were short, and there was good access to urgent appointments.
- 2.71 All new arrivals received an initial and secondary health screening to identify immediate concerns, and appropriate follow-up referrals to the GP or other services.
- 2.72 An appropriate range of primary care services was available, along with visiting specialists including a physiotherapist, podiatrist and optician. Waiting times were short and mostly equivalent to those in the community. Nurse-led clinics were used to monitor prisoners with long-term health conditions, although a lead for asthma and chronic obstructive pulmonary disease was yet to be identified.
- **2.73** Non-attendance rates were generally low, and there were systematic processes to encourage attendance.
- 2.74 We did not see a palliative care policy, however, prisoners with end-stage palliative care needs were referred for compassionate release or transferred to closed conditions.
- **2.75** Before release, prisoners received advice, a discharge summary and an appropriate supply of medicine.

#### Social care

- **2.76** Potential social care needs were identified through effective partnership working with the local authority. There had been delays of up to three months in social care assessments following referral by the prison.
- 2.77 Four prisoners had been referred for local authority assessment during 2017, with none meeting the threshold for a social care package at the time of the inspection. A few men had been confirmed as needing additional equipment to aid personal care and mobility.

- **2.78** Following assessment, there had been long delays in prisoners receiving the required support. One man was still waiting for essential equipment to be installed three months after the social worker's recommendation.
- 2.79 The prison had plans to create a formal referral pathway to clarify staff responsibilities regarding social care needs. A specific buddy scheme was being developed to train prisoners as independent living assistants to support others with low-level social care needs.

2.80 A memorandum of understanding and information sharing agreement should be established between the prison and Buckinghamshire County Council. A formal social care referral pathway should be developed, to ensure that prisoners with such needs are identified promptly and accurately, and that their needs are addressed.

#### Mental health care

- **2.81** Mental health needs were identified initially through the reception screening, self-referrals or referrals by primary health or prison staff. Prisoners identified as needing this support were assessed within one week.
- 2.82 A primary mental health nurse provided support to those with mild to moderate problems, including anxiety and depression. Care plans were agreed with patients, and they were supported by an appropriate range of individual and group work.
- 2.83 Prisoners with severe and enduring mental health needs were cared for by a small secondary mental health team working across both prison sites. There was regular input from a psychiatrist.
- 2.84 In our survey, there was an indication that some prisoners were dissatisfied with the quality of the care they had received but those we spoke to were complimentary about it.
- 2.85 The needs of the seven men looked after on the care programme approach (CPA; mental health services for individuals diagnosed with a mental illness) were managed effectively; clinical records demonstrated regular risk assessments and multidisciplinary input into CPA reviews.
- 2.86 A combined total caseload of 26 patients were receiving support at the time of the inspection. There was no evidence of overt unmet needs. However, there was a lack of therapeutic and life skills interventions from psychology or occupational therapy for this population of individuals being prepared for reintegration into the community, with many having spent several years in closed conditions.
- 2.87 There were effective weekly multidisciplinary team meetings to discuss complex cases and allocate new referrals. There were effective links with the wider prison, including offender management and safer custody staff.
- 2.88 There were plans to provide mental health and learning disability awareness training for prison staff. A recent event to promote mental health awareness among prisoners had been well attended. A wide range of self-help material was also available, including a well-produced booklet which provided self-directed activities and useful mental well-being information.

- **2.89** The lack of administrative support for the team had a negative impact on their clinical capacity.
- 2.90 There had been no transfers to hospital under the Mental Health Act in the previous year. One prisoner had been returned to closed conditions for assessment following an appropriate multidisciplinary decision. For those being released, there were effective links with community mental health teams.

2.91 Prisoners should have access to therapeutic and life skills interventions that are informed by psychology and/or occupational therapy expertise, to prepare them for reintegration into the community.

#### Substance misuse treatment<sup>8</sup>

- 2.92 The Inclusion team was well integrated into both wider health care and prison meetings, including drug strategy, security and safer custody. The small team provided an excellent recovery- and rehabilitation-focused service to approximately 73 prisoners, with 52 on the active caseload. However, there had been no recent needs analysis.
- **2.93** Prisoners rarely arrived at the prison on opiate substitution. There was one prisoner on a methadone reduction programme, and his clinical needs were managed appropriately.
- **2.94** All prisoners arriving at the prison had a helpful induction session with peer mentors, facilitated by a worker; this explained the ethos of the prison, and what prisoners could expect from the service, and they were all offered the opportunity to engage with the service.
- 2.95 The three peer mentors had undergone a formal selection and training process, and provided prisoners with support and understanding. A new training programme was due to run in January 2018, with six applications already made.
- 2.96 The Diamond Centre provided a welcoming, supportive environment, with helpful colocation of the mental health practitioners. Prisoners could access workers both via planned appointments and on a daily drop-in basis during the working week. Most contact was on an individual basis, with group work focused on relapse prevention, alcohol awareness, awareness of psychoactive substances, and relaxation and acupuncture. An initial assessment and care plan informed the choice of interventions to meet individual needs.
- 2.97 Several successful awareness raising events had been held, including a recent event targeted on steroids, using an ex-prisoner who was able to share his experience of using these drugs and the associated health risks.
- **2.98** T unit, the drug-free recovery unit, provided a positive environment for prisoners committed to staying drug free, and the weekly unit meetings supported and challenged thinking and behaviour appropriately.
- 2.99 Paper records were reasonable but the lack of access to SystmOne (the electronic clinical record) meant that health professionals and substance misuse workers were not able easily to share information on risk and progress.

<sup>&</sup>lt;sup>8</sup> In the previous report substance misuse treatment was included within safety, while reintegration planning for drugs and alcohol came under rehabilitation and release planning (previously resettlement).

- **2.100** All prisoners with substance use problems were seen before release. Arrangements for them were sound, with a good focus on relapse prevention and harm minimisation. Good links were made with external rehabilitation programmes, including securing post-release residential placements.
- **2.101** There was no overdose management training or use of naloxone (an opiate reversal agent) to help prisoners who might relapse after release.

2.102 Substance misuse workers should have access to SystmOne, to provide a unified view of the patient and enable all practitioners easily to share information on risk and progress.

#### Good practice

**2.103** The use of an ex-prisoner to share his experience of the risks of abusing steroids was helpful to dissuade men from using these drugs.

#### Medicines optimisation and pharmacy services

- 2.104 A national retail pharmacy service supplied individually labelled medicines and stock supplies, including controlled drugs. Medicines were usually available on the day following receipt of the prescription. There had been some serious dispensing errors, such as the wrong medicines being supplied and medication being incorrectly labelled, and there had also been errors in the dosette box (individual dose capsules within a box and labelled by the day/time). These errors had been investigated appropriately and addressed both with patients and the supplier. Nurses were now alert to this and checked the medicines dispensed before issuing them.
- 2.105 Prescribing was sound, and informed by an agreed formulary (a list of medications used to inform prescribing). When antipsychotic medication (specialist mental health medicine) was required, individually agreed arrangements were made for GPs to prescribe this. There was little prescribing of abusable medicines, and efforts were made to identify clinically inappropriate prescriptions for prisoners on arrival.
- **2.106** Most prisoners could keep their own medicines in-possession, underpinned by a sound risk assessment of both the individual and the medicines. Not all men had lockable cupboards, although those in single rooms could secure their rooms.
- 2.107 Medicine administration took place twice daily, including for controlled (scheduled) medicines, and was safe and confidential, with nurses providing good individualised advice. Dosette boxes were used to support prisoners on multiple medicines and/or with memory difficulties.
- 2.108 Nurses could provide a wide range of over-the-counter medicines, authorised under a 'homely remedies' policy. There were a few patient group directions (which enable nurses to supply and administer prescription-only medicine) and one patient-specific direction for the 'flu vaccine, but not all nurses had been signed off to use them.
- **2.109** We observed good use of joint spot checks of prisoners' medicines by health services and prison staff, to identify inappropriate use or trading of medicines.

- **2.110** Prisoners going out on ROTL or home leave were given suitable supplies of their prescribed medicines.
- **2.111** The pharmacy room was too small to accommodate stored medicines comfortably and provide nurses with a suitable preparation and administration environment. It was difficult to maintain a suitable ambient temperature owing to the lack of ventilation.
- 2.112 The storage and organisation of medicines was generally reasonable but there were large quantities of individual medicines held in a limited storage space. Some medicines had been dispensed more than three months previously. They were all still within their expiry dates, and there was reasonable justification for holding some medicines, but others should have been destroyed; this was done during the inspection.
- **2.113** A pharmacy technician visited quarterly, which was not often enough to support good medicines stock control. A pharmacist visited twice a year, to perform medicines audits; there were no medicines use reviews and prisoners had no access to pharmacy advice.
- **2.114** There were regular checks, including recalibration of refrigerator temperatures and suitable action for out-of-range readings.

2.115 The pharmacy room should provide adequate space to store medicines safely and enable nurses to prepare medicines appropriately. There should be sufficient oversight by pharmacy staff, to ensure effective and positive stock management and provide pharmacy advice.

#### Dental services and oral health

- **2.116** The dental surgery was based at HMP Grendon, with one weekly session allocated for patients from Spring Hill, although they were also able to attend for emergency appointments.
- **2.117** Concerns around equipment safety management identified during the Grendon inspection earlier in 2017 had been addressed, including the repair of the dentist chair to comply with infection prevention standards.
- 2.118 In our survey, over a quarter of respondents expressed dissatisfaction with access to dental services, but we found access to be reasonable. At the time of the inspection, there was a wait of approximately six weeks for a routine appointment, with treatment planned around the likely length of stay at the establishment.
- **2.119** Oral health advice was given during appointments, and the dental team had a noticeboard in the Spring Hill health care waiting room, with additional promotional work undertaken during national events three times a year.

## Section 3. Purposeful activity

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

#### Time out of cell

#### **Expected outcomes:**

All prisoners have sufficient time out of cell and are encouraged to engage in activities which support their rehabilitation.

- **3.1** Prisoners were never locked in their rooms, had their own privacy keys and had relatively free access around the camp until 10pm.
- 3.2 The regime was well publicised and ran to time, and almost all prisoners were employed full time either at external work placements or within the prison.
- 3.3 Opportunities to engage in additional activities, such as performing arts and occasional interhut competitions, were developing well. The recreation areas in the huts were comfortable and the relatively new central association games area was appreciated and well used.
- There was a wide range of PE facilities, both indoor and outdoor, but longstanding heating problems and staff shortages had led to some cancellations of sessions, especially at weekends. With the focus on employment during the day, evening and weekend sessions were popular with prisoners. In our survey almost 70% of prisoners said that they could access the gym each week. However, long-standing heating problems and staff shortages had caused some cancellations of sessions, especially at weekends.
- 3.5 PE links to the health care department were reasonable and around 30 prisoners had been identified as requiring additional support sessions, but these and some sessions for older prisoners were poorly attended. There were no active links to community groups, and the training courses in gym instructing, personal training and football association coaching that had been in place at the time of the previous inspection were no longer available.
- 3.6 Most prisoners we spoke to said that access to the library was reasonably good, and in our survey more prisoners than at comparator prisons and at the time of the previous inspection said that they could visit twice a week or more. The library was scheduled to be open for 22 hours a week, which included one evening and one weekend session. However, actual opening times were less than this, for example, in the week before the inspection it was only open for 13 hours.
- 3.7 The range of books stocked was reasonable and catered for a wide range of abilities. A reference section was available to support vocational training and there was also provision for ordering specialist books from the local library service. A wide range of legal texts and Prison Service Instructions was also available. There were computers available for prisoners to use to practise driving theory tests and to work toward construction site certification.
- 3.8 There was a large collection of DVDs and video games available for hire, and a recent survey indicated that these were the primary reason for attendance at the library. Support for those with poor literacy skills was freely available from prisoners trained by the Shannon Trust. Other activities to promote literacy consisted solely of the Six-Book Challenge (an initiative

inviting individuals to select six books and record their reading in a diary) as the previously run book club was no longer in operation.

#### Recommendation

3.9 The gym should provide opportunities to achieve employment-related qualifications.

## Education, skills and work activities (Ofsted)9

#### **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.<sup>10</sup>

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

Overall effectiveness of learning and skills and work: Good

Achievements of prisoners engaged in learning and skills and work: Good

Quality of learning and skills and work provision, including the quality of teaching, training, learning and assessment:

Good

Personal development and behaviour:

Good

Leadership and management of learning and skills and work:

Good

#### Management of education, skills and work

- 3.11 The effectiveness of the leadership and management of education, skills and work activities had improved to good since the previous inspection. Managers had carried out insightful, evaluative and useful self-assessment. Their action planning for and implementation of quality improvement strategies were increasingly effective.
- 3.12 Leaders and managers used a wide range of performance management data well to monitor the effectiveness of many aspects of provision. However, they were only in the early stages of gathering reliable data to judge how well prisoners were developing their employability and personal skills, and identifying the number of prisoners entering employment, training or education on release as a result of the purposeful activities offered at the establishment.
- 3.13 Release on temporary licence (ROTL) opportunities were very good and varied. At the time of the inspection, around 60 prisoners were going out each weekday to unpaid voluntary

<sup>9</sup> This part of the inspection is conducted by Ofsted inspectors using Ofsted's common inspection framework. This ensures that prisons are held accountable to the same standard of performance as further education colleges in the community.

<sup>&</sup>lt;sup>10</sup> In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

sector work and 40 to full-time employment. Prison leaders had greatly improved prisoners' chances of gaining full-time employment or training on release by developing close and productive relationships with a growing number of employers in the region. Most employers valued working with the prison because it provided them with a source of reliable and effective employees. Most prisoners developed good work skills and were effective employees in their placements. A few prisoners had gained promotion during their placement and a growing number were gaining jobs with these employers after release.

- 3.14 The quality of the education and vocational training provision provided by Milton Keynes College was good. Prison and college managers had made sure that the number of activity places, including for ROTL, was sufficient to provide each prisoner with some form of daily activity. The pay rate for all onsite activities was equitable, but too low. The allocation arrangements were fair.
- 3.15 The range of activities available to prisoners who remained onsite was adequate, but too narrow for an open prison, comprising mainly entry-level to level 2 functional skills courses in English, mathematics, and information communications technology, and construction crafts. Too many prisoners we interviewed had completed similar or identical courses at other prisons. One level 3 qualification had been offered in the previous few months, with more planned to start from 2018, including three new PE qualifications.
- 3.16 Prisoners had good access to Open University and other distance learning programmes. Around 25 prisoners followed a wide range of academic and practical courses. The prison provided good resources and administrative support for prisoners following distance learning programmes. Learner's access to and use of the virtual campus (internet access for prisoners to community education, training and employment opportunities) for job search were good.
- 3.17 Prison managers had implemented strategies which had markedly improved prisoners' attendance at education and training sessions. They had also reduced the number of interruptions to learning sessions (for example, by prisoners' visits to the health care department or the gym) and of unauthorised absences, but the numbers of interruptions and absences were still too high.
- 3.18 The quality of the National Careers Service (NCS) advice was good. Advisers worked closely with the prison, community rehabilitation company (CRC) and education department to provide useful and varied employment and training-related support to prisoners up to release. However, the datasets produced by NCS and CRC managers on the proportion of prisoners entering employment, education or training on release were contradictory and unreliable.
- 3.19 During the inspection, education managers could not confirm that there was sufficient provision for the large minority of prisoners at the establishment assessed as having the lowest entry-level English and mathematics skills.
- 3.20 Almost all of the prisoners we interviewed with level I skills in English and mathematics did not want to engage in higher-level functional skills classes. The prison used sanctions against prisoners for non-attendance at education or skills sessions but these too often simply annoyed prisoners rather than motivated them. The prison recognised that its sanctions policy focused too much on punishment, and too little on incentives.

#### Recommendations

- 3.21 Data on the proportion of prisoners entering employment, training or education following release from the establishment should be reliable.
- 3.22 A curriculum review should be completed, to ensure that the provision of activities meets the needs of all prisoners.
- 3.23 Leaders and managers should devise and implement programmes and incentives that encourage most prisoners to engage in and appreciate the benefits of education, skills and work activities.

#### Quality of provision

- 3.24 Prisoners' induction to education, skills and work took place soon after arrival, and was comprehensive. The initial assessment of prisoners' English and mathematics skills during induction was too often inaccurate.
- 3.25 Teaching and training staff were well qualified and experienced in their subject areas. Most prisoners valued the vocational training and skills they gained, and hoped to get jobs in the vocational subjects they were studying.
- 3.26 Prisoners gained useful work experience through their ROTL placements. Most employers treated prisoners as full employees, and supported them to gain qualifications or attend work-related training sessions.
- 3.27 Most teachers and trainers used a wide range of effective teaching strategies to inspire and challenge prisoners, helping them to make good progress and develop useful skills. Teachers and tutors used detailed information about prisoners' support needs well.
- 3.28 Most teachers and trainers in classrooms and workshops assessed prisoners' progress and standards of work carefully and planned further learning well. Peer mentoring by trained prisoners in education and vocational sessions was only at an early stage, but was already proving effective.
- 3.29 Teaching, training and assessment were mostly good, but there were some areas for improvement. For example, not enough sessions featured clearly differentiated tasks that fully developed each prisoner's learning. Most prisoners' individual learning plans (ILPs) shaped and guided their learning, but a few ILPs were too vague. In a small minority of sessions, teachers and trainers did not use questioning well to confirm that each prisoner had understood and learned what they had been taught. Almost all the prisoners we interviewed said that mixed-ability functional skills classes were not effective at ensuring equality of learning.
- 3.30 Managers of community work placements, and the prisoners assigned to these, were only in the early stages of completing initial skills audits, to plan, agree and evaluate the skills that could be developed at the placement.

#### Recommendation

3.31 Leaders and managers should improve the quality of teaching, training and assessment, so that they are effective in all sessions.

#### Personal development and behaviour

- 3.32 Teachers, trainers and prisoners treated each other with respect. Prisoners worked collaboratively in training and learning sessions, helping and supporting their peers well. The conduct and behaviour of prisoners in sessions were good and most took pride in their work.
- **3.33** Most prisoners recognised the practical skills they were developing in paid employment and were clear on how they could use them to retrain or gain employment. A small minority of prisoners in community work were unclear about its purpose and how it could benefit them personally and professionally.
- **3.34** Prisoners' attendance at education and vocational training sessions was very good. A small minority of prisoners did not return punctually after mid-lesson breaks.
- **3.35** Effective and impartial careers guidance and advice supported prisoners well to help them to make informed choices about their next steps. Those moving to employment welcomed the support they received from prison staff to help them gain these jobs.
- **3.36** Too many prisoners were reluctant to engage in education or vocational training because they did not value the activities available personally, or in relation to their current profession or intended career plans.

#### Outcomes and achievements

- 3.37 Prisoners' attainment of qualifications was high overall, and had improved markedly since the previous inspection, particularly on level I courses. However, attainment was still not high enough on all the courses offered at level 2.
- **3.38** Effective management actions had reduced considerably the number of prisoners withdrawn from courses after starting them; the retention of prisoners on qualification-based courses was now excellent.
- 3.39 The small number of prisoners taking an entry-level course in English could identify clearly the good progress they had made compared with their starting points.
- **3.40** Prisoners' standards of work in education and vocational training generally matched the expected levels required of the qualifications they were taking.

#### Recommendation

3.41 Leaders and managers should ensure that all prisoners doing community work are clear about its purpose and how any employability and personal skills gained can be used as stepping stones to future employment.

Section 3. Purposeful activity	
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# Section 4. Rehabilitation and release planning

Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release back into the community.

#### Children and families and contact with the outside world

#### **Expected outcomes:**

The prison supports prisoners' contact with their families and friends. Programmes aimed at developing parenting and relationship skills are facilitated by the prison. Prisoners not receiving visits are supported in other ways to establish or maintain family support.

- 4.1 The national improved release on temporary licence (ROTL) procedures meant that risk assessments were more in-depth for higher-risk men. This inevitably meant that they took longer to complete, meaning that some men remained at the prison for more months before being granted ROTL. As a consequence of not accessing ROTL, the demand on visit sessions at the prison had increased. In response to this, Friday visit sessions had been introduced in addition to the new family days.
- 4.2 Visiting arrangements were good. The facilities for visitors had been improved since the previous inspection, and visitors could now use the comfortable, modern visitor centre at HMP Grendon, which was next door. The results of a recent survey of visitors' views were positive, with most respondents saying that the booking process was efficient, that visits started on time and that staff treated them well.
- 4.3 The only location within the prison that was large enough to hold visits was the dining hall, which was not ideal, but prisoners and their visitors appreciated the internal and external children's play areas, along with the opportunity to buy and share hot food there.
- 4.4 There were no relationship or parenting courses, but funding had recently been secured to employ a part-time family worker, and it was intended that strengthening links between prisoners and their families would be a central part of this function. The visits coordinator played an active part in overseeing the conduct of visits. She was present at each visit session and was available to provide family members and friends with advice and guidance.
- **4.5** Since the previous inspection, the facility for prisoners to keep in touch with their friends and families using email had been introduced, and was widely used.
- **4.6** In our survey, 97% of prisoners said that they could access a telephone daily, if they had credit.

## Reducing risk, rehabilitation and progression

#### **Expected outcomes:**

Planning for a prisoner's release starts on their arrival at the prison. Each prisoner has an allocated case manager and a custody plan designed to address their specific needs, manage risk of harm and reduce the risk of reoffending.

- 4.7 Most prisoners were serving sentences of four years or more, and around 15% were serving an indeterminate sentence. Almost 20% of men had been assessed as presenting a high risk of harm to others.
- 4.8 The reducing reoffending, offender management and ROTL policies were clear and up to date. Rehabilitation services were led through the monthly resettlement meeting, which was well attended. While this was mostly effective, with good action planning, the work of the offender management unit (OMU) did not have a sufficiently high profile in these meetings.
- 4.9 The community rehabilitation company (CRC) (Thames Valley CRC, owned by MTC Novo) was flexible in the way it delivered its 'through-the-gate' provision, and its services were meeting the needs of the population. Immediate resettlement needs were identified on arrival; the CRC carried out induction interviews with all prisoners, and any urgent action was taken.
- **4.10** The focus of the prison's work was on ROTL applications and risk assessments, which were essential to prepare prisoners, particularly those serving long sentences, for successful release.
- 4.11 There had been a drive to increase the number of ROTL placements, and the activities team had sourced some impressive opportunities for prisoners (see also paragraph 3.13). This had resulted in an increased workload for the OMU team as they had to risk assess more prisoners for these. More needed to be done to ensure that the activities department and the OMU worked well together, and to understand the pressures placed on each department and manage ROTL applications well, including the involvement of activities staff in the ROTL risk board.
- 4.12 Many prisoners told us that they had not received information about the prison before their arrival (see also paragraph 1.1), most specifically about how quickly they would be able to apply for ROTL. It was challenging for staff to manage prisoners' expectations about the timescales for this, and more needed to be done to ensure prisoners' expectations were realistic and in line with national policy.
- **4.13** At the time of the inspection, the OMU had four probation offender supervisors and three officer offender supervisors, and was short of the benchmark allocation by two posts. The senior team (two part-time senior probation officers, a custodial manager and the head of the unit) also managed HMP Grendon.
- 4.14 Cases were allocated appropriately, with higher-risk prisoners being managed by probation officer offender supervisors. While caseloads had reduced since the previous inspection, resources were still tight and OMU work was appropriately focused on risk assessments, ROTL and release processes, such as parole and home detention curfew, which were essential to prepare prisoners, particularly those serving long sentences, for successful release. These processes were complex and time intensive, and left offender supervisors with little capacity to focus on other forms of progression or engagement.

- 4.15 Offender assessment system (OASys) assessments were reviewed within 12 weeks of arrival at the establishment, to assess changes in circumstances and risk. Few assessments were out of date and there were effective systems for ensuring that these were completed.
- 4.16 The quality of OASys assessments in high-risk cases was good. However, we had concerns about some of the other cases we inspected, in which risks had not been identified or assessed correctly. All offender supervisors, probation and prison officers alike, received regular supervision of their case work from the senior probation officers, although daily contact between the two teams would have made better use of the probation team's expertise.
- 4.17 Prisoners were involved in and understood their sentence plans. In our survey, 83% of respondents said that they had a plan, and 92% of these understood their targets. Before meeting their offender supervisors, prisoners asked staff from various departments in the prison for input into their sentence plan, which would then form part of their targets. Sentence planning targets were generally appropriate, although some were too generic.
- 4.18 Contact logs were not kept and the department did not use P-Nomis (electronic case notes), so it was difficult to assess the amount of engagement with prisoners. A few higher-risk prisoners were being managed under the enhanced behaviour monitoring process, whereby a psychologist worked with them and prison staff to monitor and assess offence-related risks more effectively. In these cases, contact was regular and well recorded.
- 4.19 The offender supervisors we spoke to knew most of the prisoners they were working with well, despite the lack of recording of ongoing contact. Some prisoners had clearly received a lot of assistance with sentence progression, and spoke highly of their offender supervisors; however, some, particularly those waiting for ROTL placements, were more negative. In our survey, only 54% of respondents said that staff were helping them to achieve their objectives or targets. However, The OMU ran a daily drop-in session, which gave prisoners good access to the team, including case administrators and managers. There was good use of a prisoner OMU orderly, who also fielded queries.
- 4.20 There had been over 14,400 ROTL events in the previous six months, which was impressive. Offender supervisors completed risk assessments and sought information from community offender managers, in order to make a recommendation to the ROTL risk board. However, the risk board was not multidisciplinary, did not involve the senior probation officer and was rarely attended by the prisoners. It was process driven and there was insufficient analysis of risk and explanation of the decisions made. Although we had no major concerns about individual prisoners who were released on ROTL, the process was not robust enough to be defensible (see main recommendation S64).
- **4.21** Prisoners who were undertaking ROTL were extremely positive about their experience of it, and were motivated and enthusiastic about the opportunities that it was providing. In our survey, 91% of those who had been on ROTL said that it was helping them to achieve their targets.
- 4.22 Home detention curfew decisions were generally timely. In the few cases we found where decisions had been late, this had been due to prisoners being received at the establishment too close to their release eligibility date, or to problems with accessing suitable accommodation. Decisions were not risk averse and appeared appropriate, but explanations had not been recorded in sufficient detail.
- 4.23 Public protection arrangements were reasonably good. Cases were assessed on arrival and the initial risk assessment flagged any concerns. The case administrators updated the Violent and Sex Offender Register appropriately when prisoners were released on ROTL. The interdepartmental risk management team (IDRMT) meeting was not attended by all relevant

departments and had insufficient focus on prisoners posing the highest risk of harm. The prison was reviewing the IDRMT meeting at the time of the inspection and had already begun taking steps to make it more effective.

- 4.24 There were good processes to share risk information for prisoners being released. We reviewed the most recent six multi-agency public protection arrangements (MAPPA) F forms completed at the establishment. They were of a high standard, with good analysis of the relevant issues, and appropriately countersigned.
- 4.25 The number of prisoners serving an indeterminate sentence (52) had halved since the previous inspection. The prison had increased its focus on these prisoners following the recent increase in absconds (see paragraph 1.18). Two focus groups had been held with this group, to try to understand their concerns. Following these, the prison was planning to change S hut into a lifer unit. It was hoped that this would be a stable and supportive environment for these prisoners. Six men had been appointed as lifer representatives/mentors but they did not yet have a job description and their role was not embedded.
- 4.26 There was insufficient support for life-sentenced prisoners and those serving an indeterminate sentence for public protection in their first few months at the establishment (see recommendation 1.7). Some indeterminate-sentenced prisoners who had moved from closed conditions were not eligible to start ROTL for a long period, and they needed more support from staff to stay motivated and engaged during the months leading up to gaining approval for ROTL.
- **4.27** Parole paperwork was well managed and timely, although hearings were sometimes delayed for reasons outside of the prison's control. Prisoners going through parole received good support from their offender supervisors.

#### Recommendations

- 4.28 The offender management unit (OMU) should have a higher profile within the resettlement meeting.
- 4.29 Activities and OMU staff should coordinate their work, so that release on temporary licence applications are processed more effectively.
- 4.30 OMU staff should use P-Nomis to record contact with prisoners.
- 4.3 I There should be a clear strategy for working with life-sentenced prisoners and those serving an indeterminate sentence for public protection.

#### **Interventions**

#### **Expected outcomes:**

Prisoners are able to access interventions designed to promote successful rehabilitation.

4.32 The prison was not resourced to run offending behaviour programmes as most prisoners had completed these before arriving at the establishment, but the prison had enabled three prisoners in the last year to complete a programme in the community while out on ROTL. The OMU did not have sufficient resources to conduct much offending-related work on a one-to-one basis, which could have reinforced learning from previous programmes.

- 4.33 The chaplaincy ran the Sycamore Tree victim awareness programme three times a year. The prison had also sourced some funding to run a programme with Leap Confronting Conflict that aimed to support prisoners to avoid conflict in the community. Some events about restorative justice had been run, and a few prisoners had participated in restorative justice conferences, supported by the OMU.
- 4.34 The CRC could provide assistance with obtaining accommodation and men on ROTL could access services in the community to help them secure an address for their final release. They could also access a course run by Crisis that explained their rights and responsibilities as a tenant. On release, many prisoners returned to their own accommodation, or that of family or friends. Higher-risk men were often released to approved premises. In the previous six months, of the I 55 prisoners discharged, only one had been released homeless. While most had an address immediately on release, the sustainability of this was not known.
- 4.35 The finance, benefit and debt pathway was stronger than we usually see. There was good access to banking services, with the CRC being able to arrange for 25 accounts to be opened per month with Barclays. Prisoners on ROTL could also access a back account through a local HSBC. The CRC could make referrals for credit checks, access debt packs and debt advice, and facilitate access to telephones to call creditors. A benefits adviser attended the prison once a week. There were good links with the local Citizens Advice, which also provided a two-day money management course for prisoners.
- 4.36 Ixion (a European Social Fund project) provided additional advice and assistance to around 30 prisoners, including an employment readiness course and access to funding for prisoners' training on release.
- 4.37 CRC staff asked prisoners about any previous experiences of victimisation or abuse and could refer them to appropriate organisations. Their data showed that few men had disclosed these experiences. The CRC and offender management team were aware of the needs and entitlements of care leavers and could link prisoners to support on release.

## Release planning

#### **Expected outcomes:**

The specific reintegration needs of individual prisoners are met through an individual multi-agency plan to maximise the likelihood of successful reintegration into the community.

- 4.38 Immediate resettlement needs were assessed during induction. Prisoners from the London and Thames Valley CRC areas had access to a short resettlement programme called Getting It Right, which provided advice and help with a range of resettlement issues, such as housing and employment, and could be tailored to the needs of the individual.
- 4.39 Prisoners were involved in the development of their resettlement plans, which were completed by the CRC 12 weeks before release. These were thorough, including information from the OASys review and P-Nomis records where appropriate, and were much better than we usually see. In our survey, 68% of respondents who were being discharged in the next three months said that they were receiving help in preparing for release.
- 4.40 Resettlement plans identified actions, and the people and departments responsible for them, and there was evidence of them being reviewed and completed. Prisoners had good access to CRC staff through an appointment and drop-in system. There were good links with the community offender managers who were responsible for managing the prisoner on release,

- and prisoners received copies of the resettlement plans. The CRC had links with local mentoring organisations but few prisoners asked to be put in contact with them.
- 4.41 The multidisciplinary discharge board met monthly and reviewed the progress of the prisoners being released in the next three months. A comprehensive spreadsheet was completed by all the relevant departments and coordinated by the CRC. This identified progress made and any resettlement needs still outstanding, which were subsequently followed up.
- 4.42 In the last few days before release, prisoners undertook the 'paper chase'. This involved taking a checklist around the prison to various departments, asking staff to sign to confirm that there was no preparation work for release still outstanding. This was an effective way of finalising practical arrangements for release and checking that prisoners had returned library books and other prison property. This was checked before release by CRC staff.
- 4.43 Arrangements for discharge were appropriate. Prisoners received their money and property, and assistance in organising travel arrangements. OMU staff explained the licence conditions, and prisoners had another opportunity to ask questions about these with a supervising officer before release.

#### Good practice

**4.44** The discharge board and spreadsheet, and the 'paper chase' were effective ways of ensuring that resettlement needs were identified and that action was taken. The flexible approach between the community rehabilitation company and the prison demonstrated excellent partnership work.

# Section 5. Summary of recommendations and good practice

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

#### Main recommendation

To the governor

**5.1** Release on temporary licence risk assessment boards for higher-risk prisoners should be multidisciplinary and include the expertise of a senior probation officer. The decision to release higher-risk men temporarily should be fully evidenced, including defensible and robust decision making by senior managers. (S64)

#### Main recommendation

To HMPPS

**5.2** Urgent and long-term investment should be made to replace the dilapidated residential units and ensure that all facilities are in good working order. (S63)

#### Recommendations

Early days in custody

Prisoners, including ISPs, should be given more proactive support from staff during their first few months in open conditions, to enable them to settle in and be engaged with their progression while awaiting the outcome of their ROTL risk assessment. (1.7)

#### Security

**5.4** All requested suspicion drug tests should be completed. (1.23)

#### Safeguarding

**5.5** The prison should be represented at the local safeguarding adults board. (1.31)

#### Staff-prisoner relationships

The prison should continue their initiatives to improve staff–prisoner relationships and ensure that all aspects of daily life reflect an enabling environment ethos. (2.4)

#### Daily life

Prisoners working in the kitchen should be able to achieve formal vocational qualifications. (2.15, repeated recommendation 2.92)

- **5.8** Self-catering facilities should be extended, to help prepare prisoners for resettlement. (2.16, repeated recommendation 2.91)
- **5.9** Applications should be monitored, to ensure timely responses. (2.23)
- **5.10** Complaints analysis should monitor trends across time and identify clear actions to address recurring problems. (2.24)
- **5.11** The legal visits area should be fit for purpose. (2.25)

#### Equality, diversity and faith

- **5.12** Equality representatives should receive training and structured support to assist them in carrying out their role. (2.32)
- 5.13 The negative perceptions expressed by black and minority ethnic prisoners should be investigated, to establish if there are underlying reasons for them. (2.37)
- **5.14** Disabled men should have access to practical support such as a buddy scheme which supports them in their day-to-day life at the prison. (2.38)

#### Health, well-being and social care

- There should be a regular structured opportunity for prisoners to voice their views and inform health services through a dedicated forum or consistent health representation at the prison community council. (2.65)
- **5.16** A memorandum of understanding and information sharing agreement should be established between the prison and Buckinghamshire County Council. A formal social care referral pathway should be developed, to ensure that prisoners with such needs are identified promptly and accurately, and that their needs are addressed. (2.80)
- 5.17 Prisoners should have access to therapeutic and life skills interventions that are informed by psychology and/or occupational therapy expertise, to prepare them for reintegration into the community. (2.91)
- 5.18 Substance misuse workers should have access to SystmOne, to provide a unified view of the patient and enable all practitioners easily to share information on risk and progress. (2.102)
- 5.19 The pharmacy room should provide adequate space to store medicines safely and enable nurses to prepare medicines appropriately. There should be sufficient oversight by pharmacy staff, to ensure effective and positive stock management and provide pharmacy advice.

  (2.115)

#### Time out of cell

**5.20** The gym should provide opportunities to achieve employment-related qualifications. (3.9)

#### Education, skills and work activities

5.21 Data on the proportion of prisoners entering employment, training or education following release from the establishment should be reliable. (3.21)

- **5.22** A curriculum review should be completed, to ensure that the provision of activities meets the needs of all prisoners. (3.22)
- **5.23** Leaders and managers should devise and implement programmes and incentives that encourage most prisoners to engage in and appreciate the benefits of education, skills and work activities. (3.23)
- **5.24** Leaders and managers should improve the quality of teaching, training and assessment, so that they are effective in all sessions. (3.31)
- 5.25 Leaders and managers should ensure that all prisoners doing community work are clear about its purpose and how any employability and personal skills gained can be used as stepping stones to future employment. (3.41)

#### Reducing risk, rehabilitation and progression

- **5.26** The offender management unit (OMU) should have a higher profile within the resettlement meeting. (4.28)
- **5.27** Activities and OMU staff should coordinate their work, so that release on temporary licence applications are processed more effectively. (4.29)
- **5.28** OMU staff should use P-Nomis to record contact with prisoners. (4.30)
- **5.29** There should be a clear strategy for working with life-sentenced prisoners and those serving an indeterminate sentence for public protection. (4.31)

## Examples of good practice

#### Health, well-being and social care

5.30 The use of an ex-prisoner to share his experience of the risks of abusing steroids was helpful to dissuade men from using these drugs. (2.103)

#### Release planning

**5.31** The discharge board and spreadsheet, and the 'paper chase' were effective ways of ensuring that resettlement needs were identified and that action was taken. The flexible approach between the community rehabilitation company and the prison demonstrated excellent partnership work. (4.44)

Section 5. Summary of recommendations and good practice	
8 · · · · · · · · · · · · · · · · · · ·	

## Section 6. Appendices

## Appendix I: Inspection team

Sean Sullivan Team leader Sandra Fieldhouse Team leader Francesca Cooney Inspector Ian Macfadyen Inspector Paul Rowlands Inspector Jonathan Tickner Inspector Caroline Wright Inspector Anna Fenton Researcher Tamara al Janabi Researcher Helen Ranns Researcher Beth Wilson Researcher

Nicola Rabjohns

Lead health and social care inspector

Tim Byrom

Care Quality Commission inspector

Care Quality Commission inspector

Nick Crombie Ofsted inspector
Kate Hill Ofsted inspector
Andy Fitt Ofsted inspector

Paddy Doyle Offender management inspector

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## 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. The recommendations in the main body of the report are based on the fifth edition of Expectations, but those below are based on the fourth edition. Their order may therefore differ slightly from the main report.

### Safety

#### Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2014, prisoners were negative about safety in our survey but we found a safe prison. Levels of violence were very low but factors that contributed to making prisoners feel unsafe included uncertainties about their day-to-day life in the prison, and the availability of synthetic drugs. Prisoner peer workers played an important role in welcoming new arrivals' but their role needed more support and supervision by staff. There had been one self-inflicted death since our last inspection but support for prisoners in self-harm crisis was appropriate. Security arrangements were broadly proportionate and disciplinary procedures managed well. Substance misuse services were very good]. Outcomes for prisoners were good against this healthy prison test.

#### Recommendations

New arrivals should be given a comprehensive assessment of risk and vulnerability on their first night, and receive enhanced checks by staff. (1.10)

#### Not achieved

There should be improved oversight of the role and responsibilities of the induction orderly, with advice and support readily available. (1.11)

#### **A**chieved

The safer custody team should regularly seek and respond to prisoners' views of their safety. (1.19) **Achieved** 

All staff should carry anti-ligature knives and have up-to-date training in assessment, care in custody and teamwork (ACCT) and safer custody procedures. (1.24)

#### **Achieved**

The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (1.29)

#### Not achieved

The prison should take a more strategic approach to tackling specific security issues, including the availability of drugs and mobile telephones, improve the analysis of security information, and develop a better relationship with the local police. (1.39)

#### **Achieved**

The prison should explore and address the reasons for the increase in absconds. (1.40)

#### **Achieved**

The mandatory drug testing programme should be adequately resourced to undertake the required level of testing without gaps in provision. (1.41)

Not achieved

## Respect

#### Prisoners are treated with respect for their human dignity.

At the last inspection, in 2014, the prison grounds were pleasant but residential accommodation was old, tired and required refurbishment. Much of the uniformed staff engagement with prisoners was distant and we observed some who were disrespectful, but prisoners viewed many specialist staff positively. The prison council was a positive initiative but required a higher profile and more support. Administrative aspects of equality and diversity work were sound but there was no consultation with minority groups. Prisoners had little confidence in the complaints system. Health services were very good. The quality and quantity of the food were good, as was consultation about catering and the prison shop. Outcomes for prisoners were reasonably good against this healthy prison test.

#### Main recommendation

Relationships between prisoners and staff, particularly uniformed staff, should be improved and be more respectful, and prisoners should have consistent access to a named member of staff if required. (S35)

#### Not achieved

#### Recommendations

Showers in a poor condition should be refurbished to an acceptable standard. (2.11)

#### Partially achieved

Responses to applications should be informative, courteous and timely. (2.12)

#### Not achieved

The gathering and analysis of equality data should be improved and kept up to date to ensure that the prison has an accurate understanding of, and can address, any variation in the treatment of different groups. (2.28)

#### Achieved

There should be needs analyses of prisoners from all protected characteristic groups during their induction and ongoing updates, including multidisciplinary care plans where appropriate. (2.29)

#### Not achieved

There should be regular support structures for prisoners from each protected characteristic group. (2.30)

#### Partially achieved

All prisoners and staff should be aware of how to use discrimination incident report forms appropriately, the forms should be readily accessible to prisoners, and the prison should actively promote and publicise the system. (2.31)

#### Partially achieved

The prison should ensure that its key facilities are accessible to prisoners with limited mobility, and work with such prisoners to assess and address their needs. (2.39)

#### Partially achieved

There should be improved visibility of and adequate access to a chaplain and Muslim chaplain at Spring Hill. (2.44)

#### **A**chieved

The prison should build confidence in the complaints system by addressing prisoners' perceptions of repercussions if they make complaints, and should improve the quality of responses. (2.49)

#### Partially achieved

All clinical areas should be fully compliant with infection control guidelines, including adequate cleaning arrangements. (2.63)

#### Not achieved

There should be sufficient officers trained to respond to medical emergencies, and all staff should know how to access emergency equipment. (2.64)

#### **A**chieved

Older prisoners should have access to the relevant community screening programme. (2.65) **Not achieved** 

Prisoners should have access to pharmacist-led counselling sessions, clinics and medication use reviews. (2.76)

#### Not achieved

Nurses should be able to supply an appropriate range of over-the-counter and prescribed medications to avoid unnecessary prisoner consultations with the GP. (2.77)

#### **A**chieved

All controlled drugs registers should comply with current legal requirements. (2.78) **Not achieved** 

Prisoners should have access to a full range of mental health support, including clinical psychology services. (2.86)

#### No longer relevant

Self-catering facilities should be extended to help prepare prisoners for resettlement. (2.91) **Not achieved** (recommendation repeated, 2.16)

Prisoners working in the kitchen should be able to achieve formal vocational qualifications. (2.92) **Not achieved** (recommendation repeated, 2.15)

All prisoners, including new arrivals, should have weekly access to the prison shop. (2.96) **Achieved** 

There should be no administration charge for catalogue orders. (2.97)

#### Not achieved

## Purposeful activity

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

At the last inspection, in 2014, prisoners were unlocked all day and had much free time, but recreational activities were limited. The prison did not have a clear approach to ensure that educational and vocational provision supported the resettlement agenda. There was no evaluation of the impact of activities across the prison. Although there were sufficient activity places, some prisoners were underemployed and there was too little focus on development of employability skills. The range of training was generally adequate, and training and coaching were good. The library service was good. The gym offered good opportunities for recreational PE and vocational courses. Outcomes for prisoners were not sufficiently good against this healthy prison test.

#### Main recommendation

The prison should develop a cohesive approach for developing, delivering and evaluating its provision of learning and skills and work activities that is centred on its role to support prisoner resettlement and reduce reoffending. (S36)

#### Partially achieved

#### Recommendations

The range of spare time recreational activities should meet prisoners' needs. (3.4)

#### Not achieved

The prison should improve its analysis and use of data to evaluate its provision of purposeful activities and enhance prisoners' opportunities to progress to employment and training on release. (3.12)

#### Partially achieved

All prisoners in work activities and on external placements should receive constructive feedback on their progress in developing the skills and attitudes they need to enhance their employability on release. (3.13)

#### Not achieved

The prison should clarify the roles and responsibilities of the offender learning and skills contractors in providing initial information and advice so that prisoners can make informed choices about their training and development in the prison and outside. (3.14)

#### **A**chieved

All prisoners allocated to work activities and community placements should have sufficient purposeful work to occupy them fully, with opportunities to work towards qualifications, where relevant. (3.19)

#### **A**chieved

The prison should provide sufficient opportunities for prisoners to work towards qualifications at level 3. (3.20)

#### **A**chieved

There should be sufficient English and maths provision to enable prisoners to improve their skills, including in vocational and work-related contexts if they need to transfer to community placements before they have completed the qualification. (3.21)

#### Partially achieved

Prisoners' appointments for other activities should be managed to minimise disruptions to their training and education. (3.22)

#### Partially achieved

The prison should make full use of the virtual campus. (3.28)

#### **A**chieved

The college should ensure that peer mentors are fully supported to carry out their role during learning sessions. (3.29)

#### Partially achieved

Good punctuality should be promoted and reinforced throughout learning and skills and work as a pivotal employability skill. (3.33)

#### **A**chieved

Library orderlies should be able to achieve an appropriate vocational qualification. (3.38)

#### Not achieved

There should be a wider range of PE courses, especially above level 2, and suitable classroom facilities for the teaching of theory. (3.43)

#### Not achieved

The prison should extend its links with employers and local community groups to enable prisoners to enhance their coaching and training PE skills. (3.44)

#### Not 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 2014, the reducing reoffending policy no longer reflected current practice following a revision of procedures to manage release on temporary licence (ROTL). Offender management arrangements were good but the recent changes had stretched resources and affected outcomes for prisoners, causing considerable frustration. Prisoners complained of a lack of communication concerning ROTL but we found ROTL procedures to be substantially improved, and now better integrated with what were sound public protection arrangements. With the exception of education, training and employment, resettlement pathway provision was generally good. The quality of some community placements was weak. Outcomes for prisoners were not sufficiently good against this healthy prison test.

#### Main recommendations

The prison should ensure that there are sufficient staff resources to undertake the revised procedures for assessing and managing prisoners released on temporary licence. This will ensure ROTL is used effectively to help resettlement and better protect the public. (S37)

#### Partially achieved

The prison should ensure that external placements available under release on temporary licence are suitable to support prisoners' preparation for employment on release. (S38)

#### **A**chieved

#### Recommendations

The prison should update the policies underpinning its resettlement function to reflect revised practice in relation to release on temporary licence and public protection arrangements. The prison should also include more guidance on comprehensive information sharing protocols. (4.7)

#### **A**chieved

Prisoners' resettlement needs identified through questionnaires at induction should be shared with their offender supervisor and resettlement pathway providers. (4.8)

#### **A**chieved

The establishment should ensure that prisons sending prisoners to Spring Hill should give them upto-date information about ROTL arrangements, and should update the prison's website to reflect current practice. (4.22)

#### Not achieved

All staff working with a prisoner should make contributions to his sentence planning and risk management, either in person or writing. (4.23)

#### Partially achieved

The prison should ensure that VISOR (violent and sex offender register) is updated appropriately regarding ROTL information where relevant. (4.27)

#### **A**chieved

There should be a clear protocol, agreed at area level, covering the prisoners who can be transferred to Spring Hill, and prisoners with outstanding offending behaviour needs should only be sent in exceptional circumstances. (4.29)

#### No longer relevant

The work of the National Careers Service to identify prisoners' plans for training or employment on release, and related training needs while still in prison, should be fully integrated into that of the allocations team and the OMU. (4.41)

#### **Achieved**

All prisoners should have access to up-to-date job search facilities that support their plans for resettlement. (4.42)

#### Partially achieved

The prison should provide advice and guidance to prisoners seeking to enter self-employment on release and, where required, offer relevant training and support. (4.43)

#### **A**chieved

The prison should assess the need for provision under the children and families pathway to help prisoners maintain family ties, and address any identified shortfalls. (4.52)

#### Not achieved

## Appendix III: Photographs

Outside the legal visits portacabin



Outside Z hut



ection 6 – Appendix III: Photographs	
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## Appendix IV: 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	332	100
Recall	0	0	0
Convicted unsentenced	0	0	0
Remand	0	0	0
Civil prisoners	0	0	0
Detainees	0	0	0
Total	0	0	0

0

Sentence	18-20-year-olds	21 and over	%
Unsentenced	0	0	0
Less than six months	0	0	0
six months to less than 12 months	0	0	0
12 months to less than 2 years	0	7	2.1
2 years to less than 4 years	0	42	12.7
4 years to less than 10 years	0	188	56.7
10 years and over (not life)	0	40	12
ISPP (indeterminate sentence for public protection)	0	19	5.7
Life	0	36	10.9
Total	0	332	100

Age	Number of prisoners	%
Under 21 years	0	0
21 years to 29 years	73	22
30 years to 39 years	129	38.9
40 years to 49 years	74	22.3
50 years to 59 years	47	14.2
60 years to 69 years	6	1.8
70 plus years	3	0.8
Total	332	100

Nationality	18-20-year-olds	21 and over	%
British	0	326	98.2
Foreign nationals	0	6	1.8
Total	0	332	100

Security category	18-20-year-olds	21 and over	%
Uncategorised unsentenced	0	0	0
Uncategorised sentenced	0	0	0
Category A	0	0	0
Category B	0	0	0
Category C	0	0	0
Category D	0	332	100
Other	0	0	0
Total	0	332	100

Ethnicity	18-20-year-olds	21 and over	%
White			
British	0	159	47
Irish	0	9	2.8
Gypsy/Irish Traveller	0	8	2.5
Other white	0	16	4.9
Mixed			
White and black Caribbean	0	13	4.0
White and black African	0	1	0.3
White and Asian	0	1	0.3
Other mixed	0	4	1.2
Asian or Asian British			
Indian	0	17	5.2
Pakistani	0	20	6.1
Bangladeshi	0	4	1.2
Chinese	0	1	0.3
Other Asian	0	8	2.5
Black or black British			
Caribbean	0	33	10.1
African	0	14	4.3
Other black	0	9	2.8
Other ethnic group			
Arab	0	0	0
Other ethnic group	0	2	0.6
Not stated	0	13	3.9
Total	0	332	100

Religion	18-20-year-olds	21 and over	%
Baptist	0	0	0
Church of England	0	44	13
Roman Catholic	0	55	17
Other Christian denominations	0	40	12
Muslim	0	74	22.2
Sikh	0	4	1.2
Hindu	0	5	1.5
Buddhist	0	6	1.8
Jewish	0	2	0.6
Other	0	14	4.21
No religion	0	88	26.5
Total	0	332	100

Other demographics	18-20-year-olds	21 and over	%
Veteran (ex-armed services)	0	0	0
Total	0	0	0

Sentenced prisoners only

Length of stay	18-20-year-	18-20-year-olds		21 and over	
	Number	%	Number	%	
Less than I month	0	0	29	9.0	
I month to 3 months	0	0	58	18.1	
3 months to six months	0	0	74	23.1	
six months to I year	0	0	96	28.0	
I year to 2 years	0	0	70	20.2	
2 years to 4 years	0	0	5	1.6	
4 years or more	0	0	0	0	
Total	0	0	321	100	

**Sentenced prisoners only** 

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

Main offence	18-20-year-olds	21 and over	%
Violence against the person	0	105	32.71
Sexual offences	0	0	0
Burglary	0	П	3.42
Robbery	0	20	6.23
Theft and handling	0	17	5.29
Fraud and forgery	0	24	7.47
Drugs offences	0	124	37.07
Other offences	0	29	7.78
Civil offences	0	0	0
Offence not recorded /holding	0	0	0
warrant			
Total	0	332	100

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## Appendix V: Prisoner survey methodology and results

## Prisoner survey methodology

A representative survey of prisoners is carried out at the start of every inspection, the results of which contribute to the evidence base for the inspection.

HM Inspectorate of Prisons (HMI Prisons) researchers have developed a self-completion questionnaire to support HMI Prisons' *Expectations*. The questionnaire consists of structured questions covering the prisoner 'journey' from reception to release, together with demographic and background questions which enable us to compare responses from different sub-groups of the prisoner population. There are also three open questions at the end of the questionnaire which allow prisoners to express, in their own words, what they find most positive and negative about the prison.<sup>11</sup>

The questionnaire is available in 14 languages and can also be administered via a telephone translation service if necessary.

The questionnaire was revised during 2016–17, in consultation with both inspectors and prisoners. The current version has been in use since September 2017.

#### Sampling

On the day of the survey a stratified random sample is drawn by HMI Prisons researchers from a P-NOMIS prisoner population printout ordered by cell location. Using a robust statistical formula, HMI Prisons researchers calculate the minimum sample size required to ensure that the survey findings can be generalised to the entire population of the establishment.<sup>12</sup> In smaller establishments we may offer a questionnaire to the entire population.

#### Distributing and collecting questionnaires

HMI Prisons researchers distribute and collect the questionnaires in person. So that prisoners can give their informed consent to participate, the purpose of the survey is explained and assurances are given about confidentiality and anonymity. Prisoners are made aware that participation in the survey is voluntary; refusals are noted but not replaced within the sample. Those who agree to participate are provided with a sealable envelope for their completed questionnaire and told when we will be returning to collect it. We make arrangements to administer the questionnaire via a face-to-face interview for respondents who disclose literacy difficulties.

#### Survey response

At the time of the survey on 4 December 2017, the prisoner population at HMP Spring Hill was 321. Using the sampling method described above, questionnaires were distributed to 193 prisoners. We received a total of 156 completed questionnaires, a response rate of 81%. This included two questionnaires completed via face-to-face interview. Three prisoners declined to participate in the survey and 34 questionnaires were either not returned at all, or returned blank.

<sup>11</sup> Qualitative analysis of these written comments is undertaken by HMI Prisons researchers and used by inspectors.

<sup>&</sup>lt;sup>12</sup> 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments).

<sup>13</sup> For further information about the ethical principles which underpin our survey methodology, please see Ethical principles for research activities which can be downloaded from HMI Prisons' website http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/

### Survey results and analyses

Over the following pages, we present the full survey results followed by various comparative analyses for HMP Spring Hill. For the comparator analyses, each question was reformulated into a binary 'yes/no' format and affirmative responses compared.<sup>14</sup> Missing responses have been excluded from all analyses and for some questions, responses from a sub-group of the sample are reported (as indicated in the data).

#### **Full survey results**

A full breakdown of responses is provided for every question. Percentages have been rounded and therefore may not add up to 100%.

#### Responses from HMP Spring Hill 2017 compared with those from other HMIP surveys<sup>15</sup>

- Survey responses from HMP Spring Hill in 2017 compared with survey responses from the most recent inspection at all other open prisons.
- Survey responses from HMP Spring Hill in 2017 compared with survey responses from HMP Spring Hill in 2014.

#### Comparisons between different residential locations within HMP Spring Hill 2017

• Responses of prisoners on units with single cells (X, Y and Z) compared with those from the rest of the establishment.

#### Comparisons between sub-populations of prisoners within HMP Spring Hill 2017<sup>16</sup>

- White prisoners' responses compared with those of prisoners from black and minority ethnic groups.
- Muslim prisoners' responses compared with those of non-Muslim prisoners.
- Disabled prisoners' responses compared with those who do not have a disability.
- Responses of prisoners with mental health problems compared with those who do not have mental health problems.
- Responses of prisoners aged 50 and over compared with those under 50.

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group.<sup>17</sup>

In the comparator analyses, statistically significant <sup>18</sup> differences are indicated by shading. Results that are significantly more positive are indicated by green shading and results that are significantly more negative are indicated by blue shading. Orange shading has been used to show a statistically significant difference in demographic or other background details. If there is no shading, any difference between the two results is not statistically significant and may have occurred by chance. Grey shading indicates that there is no valid comparative data for that question.

Filtered questions are indented and preceded by an explanation in italics of how the filter has been applied. In the comparator analyses, percentages for filtered questions refer to the number of respondents filtered to that question. For all other questions, percentages refer to the total number of valid responses to the question.

Using the Chi-square test (or Fisher's exact test if there are fewer than five responses in a group).

These analyses are carried out on summary data from all survey questions. As we have been using a new version of the questionnaire since September 2017, we do not yet have full comparator data for all questions.

These analyses are carried out on summary data from selected survey questions only.

 $<sup>^{\</sup>rm 17}$  A minimum of 10 responses which must also represent at least 10% of the total response.

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. In order to appropriately adjust p-values in light of multiple testing, p<0.01 is considered statistically significant for all comparisons undertaken. This means there is only a 1% likelihood that the difference is due to chance.

## Survey summary

.1	What wing or houseblock are you currently living on?	
	J	10 (6%)
	K	13 (8%)
	L	9 (6%)
	M	12 (8%)
	N	12 (8%)
	P	12 (8%)
	Q	11 (7%)
	R	10 (6%)
	S	9 (6%)
	Т	9 (6%)
	X	13 (8%)
	Υ	19 (12%
	Z	17 (11%
.2	How old are you?	
, <b>Z</b>	How old are you?  Under 21	0 (0%)
	21 - 25	9 (6%)
	26 - 29	16 (10%
	30 - 39	63 (41%
	40 - 49	36 (23%
	50 - 59	28 (18%
	60 - 69	2 (1%)
	70 or over	I (I%)
		. (173)
.3	What is your ethnic group?	/
	White - English/ Welsh/ Scottish/ Northern Irish/ British	79 (52%
	White - Irish	3 (2%)
	White - Gypsy or Irish Traveller	5 (3%)
	White - any other White background	2 (1%)
	Mixed - White and Black Caribbean	8 (5%)
	Mixed - White and Black African	I (I%)
	Mixed - White and Asian	3 (2%)
	Mixed - any other Mixed ethnic background	2 (1%)
	Asian/ Asian British - Indian	4 (3%)
	Asian/ Asian British - Pakistani	14 (9%)
	Asian/ Asian British - Bangladeshi	3 (2%)
	Asian/ Asian British - Chinese	I (I%)
	Asian - any other Asian Background	2 (1%)
	Black/ Black British - Caribbean	16 (119
	Black/ Black British - African	4 (3%)
	Black - any other Black/ African/ Caribbean background	0 (0%)
	Arab	l (l%)
	Any other ethnic group	4 (3%)
.4	How long have you been in this prison?	
· T	Less than 6 months	57 (37%
	6 months or more	96 (63%

1.5	Are you currently serving a sentence?	
	Yes	152 (98%)
	Yes - on recall	3 (2%)
	No - on remand or awaiting sentence	0 (0%)
	No - immigration detainee	0 (0%)
1.6	How long is your sentence?	
	Less than 6 months	0 (0%)
	6 months to less than I year	I (I%)
	I year to less than 4 years	22 (14%)
	4 years to less than 10 years	94 (61%)
	10 years or more	13 (8%)
	IPP (indeterminate sentence for public protection)	9 (6%)
	Life Not currently serving a sentence	16 (10%) 0 (0%)
		0 (0/0)
Arriva	l and reception	
2.1	Were you given up-to-date information about this prison before you came her	
	Yes	28 (18%)
	No	114 (74%)
	Don't remember	12 (8%)
2.2	When you arrived at this prison, how long did you spend in reception?	
	Less than 2 hours	129 (84%)
	2 hours or more	16 (10%)
	Don't remember	8 (5%)
2.3	When you were searched in reception, was this done in a respectful way?	
	Yes	119 (79%)
	No	18 (12%)
	Don't remember	13 (9%)
2.4	Overall, how were you treated in reception?	
	Very well	50 (32%)
	Quite well	80 (52%)
	Quite badly	14 (9%) <sup>°</sup>
	Very badly	9 (6%)
	Don't remember	I (I%)
2.5	When you first arrived here, did you have any of the following problems?	
	Problems getting phone numbers	32 (21%)
	Contacting family	38 (25%)
	Arranging care for children or other dependants	I (I%)
	Contacting employers	8 (5%)
	Money worries	19 (13%)
	Housing worries	12 (8%)
	Feeling depressed	25 (17%)
	Feeling suicidal	l (l̂%)
	Other mental health problems	12 (8%)
	Physical health problems	18 (12%)
	Drug or alcohol problems (e.g. withdrawal)	3 (2%)
	Problems getting medication	14 (9%)
	Needing protection from other prisoners	I (I%)
	Lost or delayed property	27 (18%)
	Other problems	14 (9%)
	Did not have any problems	62 (41%)

2.6	Did staff help you to deal with these problems when you firs	t arrived?		
	Yes			29 (19%)
	No			59 (39%)
	Did not have any problems when I first arrived	•••••		62 (41%)
First nig	ght and induction			
3.1	Before you were locked up on your first night here, were you things?	u offered a	ny of the fo	ollowing
	Tobacco or nicotine replacement	•••••		84 (56%)
	Toiletries / other basic items			58 (39%)
	A shower			79 (53%)
	A free phone call	•••••		78 (52%)
	Something to eat	•••••		102 (68%)
	The chance to see someone from health care			60 (40%)
	The chance to talk to a Listener or Samaritans			34 (23%)
	Support from another prisoner (e.g. Insider or buddy)			31 (21%)
	Wasn't offered any of these things			16 (11%)
3.2	On your first night in this prison, how clean or dirty was you	r cell?		
	Very clean			14 (9%)
	Quite clean	•••••		81 (52%)
	Quite dirty	•••••		34 (22%)
	Very dirty			22 (14%)
	Don't remember			4 (3%)
				, ,
3.3	Did you feel safe on your first night here? Yes			138 (91%)
	No			136 (71%)
	Don't remember			I (I%)
	Don't remember	••••••	•••	1 (1/6)
3.4	In your first few days here, did you get:			
		Yes	No	Don't remember
	Access to the prison shop / canteen?	35 (23%)	109 (73%)	5 (3%)
	Free PIN phone credit?		97 (67%)	
	Numbers put on your PIN phone?	70 (50%)	63 (45%)	7 (5%)
3.5	Did your induction cover everything you needed to know ab	out this pri	son?	
	Yes			91 (59%)
	No			63 (41%)
	Have not had an induction			0 (0%)
On the	wing			
	•			
<b>4.</b> I	Are you in a cell on your own? Yes			59 (38%)
	No, I'm in a shared cell or dormitory	•••••		97 (62%)
4.2	Is your cell call bell normally answered within 5 minutes?			
	Yes			I (I%)
	No	•••••		4 (3%)
	Don't know	•••••		2 (1%)
	Don't have a cell call bell	•••••		144 (95%)
				•

		Yes	No	Don't kno
	Do you normally have enough clean, suitable clothes for the week?	122 (81%)	27 (18%)	2 (1%)
	Can you shower every day?	151 (97%)	4 (3%)	0 (0%)
	Do you have clean sheets every week?	124 (82%)	24 (16%)	3 (2%)
	Do you get cell cleaning materials every week?	115 (76%)	35 (23%)	2 (1%)
	Is it normally quiet enough for you to relax or sleep at night?	110 (72%)	41 (27%)	2 (1%)
	Can you get your stored property if you need it?	62 (41%)	59 (39%)	31 (20%)
4.4	Normally, how clean or dirty are the communal / shared ar	eas of your	wing or h	ouseblock
	(landings, stairs, wing showers etc.)?			
	Very clean		•	35 (23%)
	Quite clean		•	71 (46%)
	Quite dirty		•	28 (18%)
	Very dirty			20 (13%)
Food a	nd canteen			
5. I	What is the quality of food like in this prison?			
	Very good			12 (8%)
	Quite good			65 (43%)
	Quite bad			46 (30%)
	Very bad			29 (19%)
5.2	Do you get enough to eat at mealtimes?			
	Always			33 (21%)
	Most of the time		•	56 (36%)
	Some of the time		•	45 (29%)
	Never			21 (14%)
5.3	Does the shop / canteen sell the things that you need?			
	Yes			82 (54%)
	No			67 (44%)
	Don't know			4 (3%)
Relatio	onships with staff			
6. I	Do most staff here treat you with respect?			
0.1	•			05 (540()
J. 1	Yes		_	85 (56%)

No.....

Yes.....

No.....

In the last week, has any member of staff talked to you about how you are getting on?

6.3

102 (66%)

52 (34%)

37 (24%)

117 (76%)

Very helpful	6.4	How helpful is your personal or named officer?	
Quice helpful.			16 (10%)
Not very helpful			, ,
Not at all helpful		·	, ,
Don't know			
Don't have a personal / named officer   12 (8%)			, ,
How often do you see prison governors, directors or senior managers talking to prisoners?   Regularly			` ,
Regularly   Sometimes   57 (17%)   Sometimes   59 (38%)   6.6   Do you feel that you are treated as an individual in this prison?   Yes   70 (48%)   No   77 (52%)   70 (48%)   No   70 (48%)   No		Don't have a personal / hamed officer	12 (0%)
Sometimes	6.5		•
Hardly ever		Regularly	, ,
Don't know		Sometimes	59 (38%)
6.6 Do you feel that you are treated as an individual in this prison?  Yes		Hardly ever	64 (41%)
Yes		Don't know	5 (3%)
No	6.6	Do you feel that you are treated as an individual in this prison?	
Are prisoners here consulted about things like food, canteen, health care or wing issues?   Yes, and things sometimes change		Yes	70 (48%)
Yes, and things sometimes change		No	77 (52%)
Yes, and things sometimes change	6.7	Are prisoners here consulted about things like food, canteen, health care or win	ισ issues?
Yes, but things don't change	0.7	· · · · · · · · · · · · · · · · · · ·	_
No.		<u> </u>	` ,
Don't know			, ,
Paith			` ,
7.1 What is your religion?  No religion		Don't know	30 (20%)
No religion	Faith		
No religion	7.1	What is your religion?	
Christian (including Church of England, Catholic, Protestant and all other Christian denominations)   2 (1%)   3 (2%)   4 (1%)   4 (29	***		44 (29%)
denominations   Buddhist   2 (1%)   Hindu   3 (2%)   Jewish   1 (1%)   Muslim   32 (21%)   Sikh   2 (1%)   Sikh   2 (1%)   Other   2 (1%)   Other   2 (1%)   Other   2 (1%)   Other   17 (11%)   Not applicable (no religion)   44 (29%)   Other   76 (50%)   No   17 (11%)   Not applicable (no religion)   11 (7%)   On't know   21 (16%)   No   11 (7%)   Not applicable (no religion)   22 (14%)   Not applicable (no religion)   22 (14%)   Not applicable (no religion)   34 (29%)   On't know   22 (14%)   Not applicable (no religion)   34 (29%)   On't know   34 (29%)   On't know		Christian (including Church of England Catholic Protestant and all other Christian	` ,
Buddhist   2 (1%)   Hindu   3 (2%)   Jewish   1 (1%)   Muslim   32 (21%)   Sikh   2 (1%)   Other   3 (1%)			07 (11/6)
Hindu		,	2 (1%)
Jewish			, ,
Muslim       32 (21%)         Sikh       2 (1%)         Other       2 (1%)         7.2       Are your religious beliefs respected here?         Yes       85 (56%)         No       7 (5%)         Don't know       17 (11%)         Not applicable (no religion)       44 (29%)         7.3       Are you able to speak to a Chaplain of your faith in private, if you want to?         Yes       76 (50%)         No       11 (7%)         Don't know       22 (14%)         Not applicable (no religion)       44 (29%)         7.4       Are you able to attend religious services, if you want to?         Yes       102 (67%)			, ,
Sikh		•	
7.2       Are your religious beliefs respected here?         Yes       85 (56%)         No       7 (5%)         Don't know       17 (11%)         Not applicable (no religion)       44 (29%)         7.3       Are you able to speak to a Chaplain of your faith in private, if you want to?       76 (50%)         Yes       76 (50%)         No       11 (7%)         Don't know       22 (14%)         Not applicable (no religion)       44 (29%)         7.4       Are you able to attend religious services, if you want to?       102 (67%)			
7.2 Are your religious beliefs respected here?  Yes			
Yes		Other	2 (1%)
Yes	7.2	Are your religious beliefs respected here?	
No			85 (56%)
Don't know		No	, ,
Not applicable (no religion)		Don't know	
Yes			
Yes	7 3	Are you able to speak to a Chaplain of your faith in private, if you want to?	
No	7.5		76 (50%)
Don't know			` ,
Not applicable (no religion)			` ,
7.4 Are you able to attend religious services, if you want to?  Yes			` '
Yes			(= , , ,
	7.4	· · · · · · · · · · · · · · · · · · ·	100 (470/)
No			, ,
B. I.I.			
Don't know			
Not applicable (no religion)		Not applicable (no religion)	<del>44</del> (29%)

Contact	with family and friends	
8.1	Have staff here encouraged you to keep in touch with your family / friends?	
	Yes	61 (40%)
	No	93 (60%)
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	28 (18%)
	No	125 (82%)
8.3	Are you able to use a phone every day (if you have credit)?	
	Yes	150 (97%)
	No	4 (3%)
8.4	How easy or difficult is it for your family and friends to get here?	
	Very easy	13 (9%)
	Quite easy	62 (41%)
	Quite difficult	44 (29%)
	Very difficult	31 (20%)
	Don't know	2 (1%)
8.5	How often do you have visits from family or friends?	
	More than once a week	1 (1%)
	About once a week	38 (26%)
	Less than once a week	64 (43%)
	Not applicable (don't get visits)	46 (31%)
8.6	Do visits usually start and finish on time?	74 (720()
	Yes	74 (73%)
	No	27 (27%)
8.7	Are your visitors usually treated respectfully by staff?	70 (010()
	Yes	79 (81%)
	No	19 (19%)
Time ou	t of cell	
9.1	Do you know what the unlock and lock-up times are supposed to be here (or rol	l check
	times if you are in an open prison)?	
	Yes, and these times are usually kept to	129 (87%)
	Yes, but these times are not usually kept to	14 (9%)
	No	5 (3%)
9.2	How long do you usually spend out of your cell on a typical weekday (including t	ime spent
	at education, work etc.)?	
	Less than 2 hours	5 (3%)
	2 to 6 hours	15 (10%)
	6 to 10 hours	33 (23%)
	10 hours or more	87 (60%)
	Don't know	6 (4%)
9.3	How long do you usually spend out of your cell on a typical Saturday or Sunday?	11 (22)
	Less than 2 hours	11 (8%)
	2 to 6 hours	35 (24%)
	6 to 10 hours	25 (17%)
	10 hours or more	68 (47%)
	Don't know	6 (4%)

9.4	How many days in a typical week do you have time to do	domestics (sl	nower cle	an cell use
7.7	the wing phones etc.)?	domestics (si	iowei, cie	an cen, use
	None			0 (0%)
	I or 2			10 (7%)
	3 to 5			12 (8%)
	More than 5			120 (83%)
	Don't know			2 (1%)
0.5	The same death of the first set of the same factors	•		
9.5	How many days in a typical week do you get association,	-		0 (09/)
	None			0 (0%)
	1 or 2			2 (1%)
	More than 5			l (1%) l35 (92%)
	Don't know			8 (5%)
	Don't know	••••••		0 (3%)
9.6	How many days in a typical week could you go outside fo	r exercise, if y	ou wante	d to?
	None	-		l (I%)
	I or 2			6 (4%)
	3 to 5			5 (3%)
	More than 5			127 (89%)
	Don't know			4 (3%)
9.7	Typically, how often do you go to the gym?			
7.1	Typically, how often do you go to the gym?  Twice a week or more			88 (60%)
	About once a week			13 (9%)
	Less than once a week			10 (7%)
	Never			35 (24%)
	rvevei		•	33 (24%)
9.8	Typically, how often do you go to the library?			
	Twice a week or more		•	65 (44%)
	About once a week			34 (23%)
	Less than once a week			31 (21%)
	Never		•	17 (12%)
0 0	Does the library have a wide enough range of materials t	o moot vous n	oods?	
9.9	Does the library have a wide enough range of materials t	-		92 (63%)
	No			36 (25%)
	Don't use the library			17 (12%)
	Don't use the northy		•	17 (12/0)
<b>A</b> pplicat	ions, complaints and legal rights			
10.1				
10.1	Is it easy for you to make an application?			122 (029/)
	Yes			122 (82%)
	No Don't know			19 (13%) 8 (5%)
	Don't know		•	0 (3%)
10.2	If you have made any applications here, please answer th	e questions be	elow:	
		Yes	No	Not made
				any
				applications
	Are applications usually dealt with fairly?	89 (61%)	48 (33%)	8 (6%)
	Are applications usually dealt with within 7 days?	79 (57%)	52 (37%)	8 (6%)

10.3	Is it easy for you to make a compl	aint?				
	Yes				•••	85 (57%)
	No	•••••			•••	31 (21%)
	Don't know					34 (23%)
						(,
10.4	If you have made any complaints h	nere, please ar	nswer the q			
				Yes	No	Not made
						any
	Are complaints usually dealt with	fairly)		21 (15%)	44 (32%)	complaints
	Are complaints usually dealt with			,	, ,	` ,
	Are complaints usually dealt with	within 7 days?		17 (12%)	47 (34%)	74 (54%)
10.5	Have you ever been prevented fro					
						24 (17%)
	No					68 (47%)
	Not wanted to make a complaint	•••••	•••••••••••	•••••	•••	53 (37%)
10.6	In this prison, is it easy or difficult	for you to				
	•	-	Easy	Difficult	Don't know	Don't need
			•			this
	Communicate with your solicitor representative?	or legal	75 (50%)	19 (13%)	25 (17%)	30 (20%)
	Attend legal visits?		63 (44%)	7 (5%)	35 (24%)	38 (27%)
	Get bail information?		18 (13%)	11 (8%)		
	Get ban innormation.		10 (1370)	11 (070)	11 (2770)	75 (5170)
10.7	Have staff here ever opened letter were not present?	rs from your s	olicitor or l	egal repre	sentative w	hen you
	Yes				•••	47 (31%)
	No				•••	53 (35%)
	Not had any legal letters		•••••	•••••	<b></b>	50 (33%)
Health	caro					
Health	Care					
11.1	How easy or difficult is it to see th	e following pe	ople?			
		Very easy	Quite easy		Very difficult	Don't know
				difficult		
	Doctor	36 (24%)	73 (49%)	26 (17%)	7 (5%)	8 (5%)
	Nurse	55 (38%)			2 (1%)	7 (5%)
	Dentist	11 (7%)	28 (19%)	40 (27%)	38 (26%)	30 (20%)
	Mental health workers	17 (12%)	23 (16%)	13 (9%)	10 (7%)	81 (56%)
11.2	What do you think of the guality	of the bealth -	omico from	the fellow	ing people?	
11.4	What do you think of the quality of		Quite good			
	Darton	, •	_		•	Don't know
	Doctor	26 (17%)		` ,		` '
	Nurse		69 (47%)			` '
	Dentist	13 (9%)	28 (19%)	25 (1/%)		61 (41%)
	Mental health workers	9 (6%)	17 (12%)	5 (3%)	11 (8%)	103 (71%)
11.3	Do you have any mental health pr	oblems?				
	Yes					32 (21%)
	No					118 (79%)
						` '
11.4	Have you been helped with your n			-		
	Yes					14 (9%)
	No					18 (12%)
	Don't have any mental health pro	blems				118 (79%)

11.5	What do you think of the overall quality of the health services here?	
	Very good	20 (14%)
	Quite good	72 (49%)
	Quite bad	31 (21%)
	Very bad	17 (12%)
	Don't know	7 (5%)
Other	support needs	
Other	support needs	
12.1	Do you consider yourself to have a disability (long-term physical, mental or l that affect your day-to-day life)?	_
	Yes	31 (21%)
	No	119 (79%)
12.2	If you have a disability, are you getting the support you need?	<b>a</b> (400)
	Yes	9 (6%)
	No	19 (13%)
	Don't have a disability	119 (81%)
12.3	Have you been on an ACCT in this prison?	
1 2.3	Yes	3 (2%)
	No	137 (98%)
12.4	If you have been an an ACCT in this price of did you feel and for her staff.	
12.4	If you have been on an ACCT in this prison, did you feel cared for by staff?  Yes	I (I%)
	No	2 (1%)
	Have not been on an ACCT in this prison	137 (98%)
	Have not been on an ACC1 in this prison	137 (76%)
12.5	How easy or difficult is it for you to speak to a Listener, if you need to?	
	Very easy	35 (24%)
	Quite easy	26 (18%)
	Quite difficult	2 (1%)
	Very difficult	5 (3%)
	Don't know	76 (52%)
	No Listeners at this prison	3 (2%)
Alcoho	ol and drugs	
13.1	Did you have an alcohol problem when you came into this prison?	
13.1	Yes	12 (8%)
	No	138 (92%)
13.2	Have you been helped with your alcohol problem in this prison?	
13.2	Yes	9 (6%)
	No	3 (2%)
	Did not / do not have an alcohol problem	138 (92%)
	·	, ,
13.3	Did you have a drug problem when you came into this prison (including illicit medication not prescribed to you)?	_
	Yes	12 (8%)
	No	136 (92%)
13.4	Have you developed a problem with illicit drugs since you have been in this p	
13.4	Have you developed a problem with illicit drugs since you have been in this p Yes	5 (3%) 142 (97%)

	have been in this prison? Yes	4 (3%)
	No	143 (97%)
13.6	Have you been helped with your drug problem in this prison (including illicit medication not prescribed to you)?	drugs and
	Yes	11 (8%)
	No	3 (2%)
	Did not / do not have a drug problem	131 (90%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy	39 (26%)
	Quite easy	18 (12%)
	Quite difficult	I (I%)
	Very difficult	4 (3%)
	Don't know	86 (58%)
13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy	32 (22%)
	Quite easy	20 (14%)
	Quite difficult	3 (2%)
	Very difficult	4 (3%)
	Don't know	89 (60%)
Safety		
14.1	Have you ever felt unsafe here?	
	Yes	29 (19%)
	No	121 (81%)
14.2	Do you feel unsafe now?	
	Yes	13 (9%)
	No	137 (91%)
	Have you experienced any of the following types of bullying / victimisation fr prisoners here? (Please tick all that apply to you.)	om other
14.3	- II <i>I I I</i>	21 (15%)
14.3	Verbal abuse	- 1 (10/0)
14.3	Verbal abuse Threats or intimidation	, ,
14.3		17 (12%) 5 (4%)
14.3	Threats or intimidation	17 (12%)
14.3	Threats or intimidationPhysical assault	17 (12%) 5 (4%)
14.3	Threats or intimidationPhysical assaultSexual assault	17 (12%) 5 (4%) 3 (2%) 16 (11%)
14.3	Threats or intimidationPhysical assaultSexual assaultTheft of canteen or property	17 (12%) 5 (4%) 3 (2%) 16 (11%) 12 (9%)
	Threats or intimidation Physical assault Sexual assault Theft of canteen or property Other bullying / victimisation	17 (12%) 5 (4%) 3 (2%) 16 (11%) 12 (9%) 101 (72%)
14.3	Threats or intimidation	17 (12%) 5 (4%) 3 (2%) 16 (11%) 12 (9%) 101 (72%)

14.5	Have you experienced any of the following types of bullying / victimisati (Please tick all that apply to you.)	on from s	
	Verbal abuse		32 (22%)
	Threats or intimidation		26 (18%)
	Physical assault		4 (3%)
	Sexual assault		5 (3%)
	Theft of canteen or property		7 (5%)
	Other bullying / victimisation		30 (21%)
	Not experienced any of these from staff here		94 (65%)
14.6	If you were being bullied / victimised by staff here, would you report it?		7/ /539/\
	Yes No		76 (53%) 68 (47%)
Behavio	our management		
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encou	rage you	to behave
	well?		40 (400)
	Yes		60 (42%)
	No		53 (37%)
	Don't know what the incentives / rewards are		30 (21%)
15.2	Do you feel you have been treated fairly in the behaviour management this prison?	scheme (	e.g. IEP) in
	Yes		69 (46%)
	No		40 (27%)
	Don't know		31 (21%)
	Don't know what this is		9 (6%)
15.3	Have you been physically restrained by staff in this prison in the last 6 m	nonths?	
	Yes		6 (4%)
	No		143 (96%)
15.4	If you have been restrained by staff in this prison in the last 6 months, d talk to you about it afterwards?	id anyone	come and
	Yes		0 (0%)
	No		2 (1%)
	Don't remember		I (I%)
	Not been restrained here in last 6 months		147 (98%)
15.5	Have you spent one or more nights in the segregation unit in this prisor months?	ı in the la	st 6
	Yes		0 (0%)
	No		149 (100%)
15.6	If you have spent one or more nights in the segregation unit in this priso months please answer the questions below:	on in the l	last 6
		Yes	No
	Were you treated well by segregation staff?	0 (0%)	0 (0%)
	Could you shower every day?	0 (0%)	0 (0%)
	Could you go outside for exercise every day?	0 (0%)	0 (0%)
	Could you use the phone every day (if you had credit)?	0 (0%)	0 (0%)
		` /	` /

<b>-</b> 1			
Education, s	KIIIS AI	าต v	vork

	Is it easy or difficult to get into the following	activities in thi	s prison?		
	, 5	Easy	Difficult	Don't know	Not
		•			available
					here
	Education	117 (78%)	15 (10%)	18 (12%)	0 (0%)
	Vocational or skills training	70 (47%)	46 (31%)		I (I%)
	Prison job	120 (81%)	20 (14%)	8 (5%)	0 (0%)
	Voluntary work outside of the prison	41 (28%)	55 (37%)	49 (33%)	2 (1%)
	Paid work outside of the prison	13 (9%)	85 (57%)	48 (32%)	2 (1%)
16.2	If you have done any of these activities while on release?	in this prison, o	do you thii	nk they will	help you
			Yes, will	No, won't	Not done
			help	help	this
	Education		68 (49%)	51 (37%)	19 (14%)
	Vocational or skills training		76 (53%)	29 (20%)	38 (27%)
	Prison job		37 (27%)	92 (67%)	8 (6%)
	Voluntary work outside of the prison		34 (25%)	44 (32%)	58 (43%)
	Paid work outside of the prison		58 (42%)	9 (7%)	70 (51%)
1.4.5	<b>5</b>				
16.3	Do staff encourage you to attend education,	_			IOI /709/\
	Yes				101 (70%)
	No				41 (28%)
	Not applicable (e.g. if you are retired, sick or	on remand)	•••••	•••	2 (1%)
Planning	g and progression				
				_	
17.1	Do you have a custody plan? (This may be ca		•		• •
	Yes				124 (83%)
	No		••••••	···	26 (17%)
17.2	Do you understand what you need to do to a				
	Custody plan/	ichieve the obje	ctives or t	argets in yo	our
	custody plan?	·			
	Yes				113 (92%)
	Yes No				113 (92%) 6 (5%)
	Yes				113 (92%)
17.3	Yes No Don't know what my objectives or targets are	 2			113 (92%) 6 (5%)
17.3	Yes No	r objectives or	targets?		113 (92%) 6 (5%) 4 (3%)
17.3	Yes  No  Don't know what my objectives or targets are  Are staff here supporting you to achieve you	r objectives or	targets?		113 (92%) 6 (5%) 4 (3%) 64 (54%)
17.3	Yes  No  Don't know what my objectives or targets are  Are staff here supporting you to achieve you  Yes	r objectives or	targets?		113 (92%) 6 (5%) 4 (3%)
17.3	Yes	r objectives or	targets?		113 (92%) 6 (5%) 4 (3%) 64 (54%) 50 (42%) 4 (3%)
	Yes	r objectives or	targets?		113 (92%) 6 (5%) 4 (3%) 64 (54%) 50 (42%) 4 (3%) nieve your
	Yes	r objectives or	targets?  d they hel  Yes, this		113 (92%) 6 (5%) 4 (3%) 64 (54%) 50 (42%) 4 (3%) nieve your
	Yes	r objectives or	targets?		113 (92%) 6 (5%) 4 (3%) 64 (54%) 50 (42%) 4 (3%) nieve your Not done /Don't
	Yes	r objectives or	d they hel  Yes, this helped		113 (92%) 6 (5%) 4 (3%) 64 (54%) 50 (42%) 4 (3%) hieve your Not done /Don't know
	Yes	r objectives or	targets?  d they hel  Yes, this helped  38 (36%)		113 (92%) 6 (5%) 4 (3%) 64 (54%) 50 (42%) 4 (3%) nieve your Not done /Don't know 50 (47%)
	Yes	r objectives or	targets?  d they hel  Yes, this helped  38 (36%) 26 (25%)		113 (92%) 6 (5%) 4 (3%)  64 (54%) 50 (42%) 4 (3%)  nieve your  Not done /Don't know 50 (47%) 56 (55%)
	Yes	r objectives or	targets?  d they hel  Yes, this helped  38 (36%) 26 (25%) 26 (25%)		113 (92%) 6 (5%) 4 (3%)  64 (54%) 50 (42%) 4 (3%)  nieve your  Not done /Don't know 50 (47%) 56 (55%) 63 (62%)
	Yes	r objectives or	targets?  d they hel  Yes, this helped  38 (36%) 26 (25%) 26 (25%) 9 (9%)		113 (92%) 6 (5%) 4 (3%)  64 (54%) 50 (42%) 4 (3%)  nieve your  Not done /Don't know 50 (47%) 56 (55%) 63 (62%) 77 (77%)
	Yes	r objectives or	targets?  d they hel  Yes, this helped  38 (36%) 26 (25%) 26 (25%)		113 (92%) 6 (5%) 4 (3%)  64 (54%) 50 (42%) 4 (3%)  nieve your  Not done /Don't know 50 (47%) 56 (55%) 63 (62%)

Prepar	ation for release			
18.1	Do you expect to be released in the next 3 months?			
	Yes			35 (24%)
	No			107 (72%)
	Don't know			6 (4%)
18.2	How close is this prison to your home area or intended			
	Very near			3 (9%)
	Quite near			16 (46%)
	Quite far			12 (34%)
	Very far			4 (11%)
18.3	Is anybody helping you to prepare for your release (e.g. responsible officer, case worker)?	-		
	Yes		••	23 (68%)
	No			11 (32%)
18.4	Are you getting help to sort out the following things for	when you are	released?	
	, , , , , , , , , , , , , , , , , , , ,	Yes, I'm	No, but I	No, and I
		getting help	need help	don't need
		with this	with this	help with
				this
	Finding accommodation	4 (12%)	13 (38%)	17 (50%)
	Getting employment	3 (9%)	14 (41%)	17 (50%)
	Setting up education or training	2 (6%)	10 (32%)	19 (61%)
	Arranging benefits	4 (12%)	11 (32%)	19 (56%)
	Sorting out finances	3 (9%)	10 (30%)	, ,
	Support for drug or alcohol problems	5 (16%)	I (3%)	, ,
	Health / mental health support	2 (7%)	2 (7%)	, ,
	Social care support	2 (6%)	4 (13%)	, ,
	Getting back in touch with family or friends	I (3%)	4 (13%)	26 (84%)
More a	bout you			
19.1	Do you have children under the age of 18?			
	Yes	•••••	••	84 (57%)
	No			63 (43%)
19.2	Ara you a LIK / British sitizan?			
17.4	Are you a UK / British citizen? Yes			145 (99%)
	No			I (I%)
				(175)
19.3	Are you from a traveller community (e.g. Gypsy, Roma,		r)?	7 (50/)
	Yes No			7 (5%) 139 (95%)
	INO	•••••		137 (73%)
19.4	Have you ever been in the armed services (e.g. army, na	avy, air force)?		
	Yes			10 (7%)
	No			136 (93%)
19.5	What is your gender?			
	Male		•••••	145 (99%)
	Female			0 (0%)
	Non-binary			2 (1%)
	Other		•••••	0 (0%)

19.6	How would	you describe	your sexual	orientation?
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Straight / heterosexual	142 (97%)
Gay / lesbian / homosexual	3 (2%)
Bisexual	2 (1%)
Other	0 (0%)

### 19.7 Do you identify as transgender or transsexual?

Yes	3 (2%)
No	143 (98%)

### Final questions about this prison

### 20.1 Do you think your experiences in this prison have made you more or less likely to offend in the future?

More likely to offend	4 (3%)
Less likely to offend	86 (59%)
Made no difference	55 (38%)

### **HMP Springhill 2017**

### Survey responses compared with those from other HMIP surveys of open prisons and with those from the previous survey

In this table summary statistics from HMP Springhill 2017 are compared with the following HMIP survey data:

- Summary statistics from most recent surveys of all other open prisons (14 prisons). Please note that we do not have comparable data for the new questions introduced in September 2017.
- Summary statistics from HMP Springhill in 2017 are compared with those from HMP Springhill in 2014. Please note that we do not have comparable data for the new questions introduced in September 2017.

Shadi	ng is used to indicate statistical significance*, as follows:				
	Green shading shows results that are significantly more positive than the comparator				
	Blue shading shows results that are significantly more negative than the comparator		SI		
	Orange shading shows significant differences in demographics and background information	1 2017	prisor	2017	2014
	No shading means that differences are not significant and may have occurred by chance	inghill	open	inghill	inghill
	Grey shading indicates that we have no valid data for this question	P Spri	other	P Spri	P Spri
	* less than 1% probability that the difference is due to chance	ЫΗ	₹	Σ	Σ
	Number of completed questionnaires returned	156	1,989	156	153

DEM	OGRAPHICS AND OTHER BACKGROUND INFORMATION		
1.2	Are you under 21 years of age? n=155	0%	1%
	Are you 25 years of age or younger? n=155	6%	
	Are you 50 years of age or older? n=155	20%	24%
	Are you 70 years of age or older? n=155	1%	2%
1.3	Are you from a minority ethnic group? $n=152$	41%	25%
1.4	Have you been in this prison for less than 6 months? n=153	37%	
1.5	Are you currently serving a sentence? n=155	100%	
	Are you on recall? n=155	2%	2%
1.6	Is your sentence less than 12 months? n=155	1%	2%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)? $n=155$	6%	12%
7.1	Are you Muslim? n=153	21%	13%
11.3	Do you have any mental health problems? n=150	21%	
12.1	Do you consider yourself to have a disability? $n=150$	21%	13%
19.1	Do you have any children under the age of 18? n=/47	57%	49%
19.2	Are you a foreign national? n=146	1%	2%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller) n=146	5%	2%
19.4	Have you ever been in the armed services? $n=146$	7%	7%
19.5	Is your gender female or non-binary? n=147	1%	
19.6	Are you homosexual, bisexual or other sexual orientation? n=147	3%	3%
19.7	Do you identify as transgender or transsexual? n=146	2%	
ARRI	VAL AND RECEPTION		
2.1	Were you given up-to-date information about this prison before you came here? $n=154$	18%	30%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception? $n=153$	84%	78%
2.3	When you were searched in reception, was this done in a respectful way? $n=150$	79%	87%
2.4	Overall, were you treated very / quite well in reception? $n=154$	84%	

_	
156	153
0%	1%
6%	
20%	15%
1%	1%
41%	42%
37%	
100%	
2%	4%
1%	2%
6%	19%
21%	18%
21%	
21%	8%
57%	55%
1%	4%
5%	5%
7%	2%
1%	
3%	1%
2%	
18%	21%
84%	82%
79%	91%

	n=number of valid responses to question (HMP Springhill 2017)	150	1,787
2.5	When you first arrived, did you have any problems?  n=150	59%	40%
2.5	Did you have problems with:		
	- Getting phone numbers? n=150	21%	9%
	- Contacting family? n=150	25%	9%
	- Arranging care for children or other dependents? n=150	1%	
	- Contacting employers? n=150	5%	2%
	- Money worries? n=150	13%	9%
	- Housing worries? n=150	8%	8%
	- Feeling depressed? n=150	17%	
	- Feeling suicidal? n=150	1%	
	- Other mental health problems? n=150	8%	
	- Physical health problems n=150	12%	9%
	- Drugs or alcohol (e.g. withdrawal)? n=150	2%	
	- Getting medication? n=150	9%	
	- Needing protection from other prisoners? n=150	1%	1%
	- Lost or delayed property? n=150	18%	11%
	For those who had any problems when they first arrived:		
2.6	Did staff help you to deal with these problems?	33%	49%
FIRS	F NIGHT AND INDUCTION		
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement? n=149	56%	56%
	- Toiletries / other basic items? n=149	39%	45%
	- A shower?	53%	40%
	- A free phone call? n=149	52%	37%
	- Something to eat? n=149	69%	53%
	- The chance to see someone from health care? n=149	41%	74%
	- The chance to talk to a Listener or Samaritans? n=149	24%	43%
	- Support from another prisoner (e.g. Insider or buddy)? n=149	21%	
	- None of these? n=149	11%	
3.2	On your first night in this prison, was your cell very / quite clean? $n=155$	61%	
3.3	Did you feel safe on your first night here? $n=152$	91%	92%
3.4	In your first few days here, did you get?		
	- Access to the prison shop / canteen? n=149	24%	33%
	- Free PIN phone credit? n=145	29%	
	- Numbers put on your PIN phone? n=140	50%	
3.5	Have you had an induction at this prison? $n=154$	100%	95%
	For those who have had an induction:		
3.5	Did your induction cover everything you needed to know about this prison? $n=154$	59%	

156	HMP Springhill 2017
153	HMP Springhill 2014

156	153
59%	49%
21%	25%
25%	17%
1%	
5%	3%
13%	11%
8%	7%
17%	
1%	
8%	
12%	6%
2%	
9%	
1%	0%
18%	7%
33%	44%
56%	62%
39%	39%
53%	49%
52%	80%
69%	58%
41%	62%
24%	48%
21%	
11%	
61%	
91%	92%
24%	34%
29%	
50%	
50% 100%	98%

	n=number of valid responses to question (HMP	Springhill 2017)		
ON	THE WING			
4.1	Are you in a cell on your own?	n=156	38%	
4.2	Is your cell call bell normally answered within 5 minutes?	n=151	1%	
4.3	On the wing or houseblock you currently live on:			
	- Do you normally have enough clean, suitable clothes for the week?	n=151	81%	
	- Can you shower every day?	n=155	97%	98%
	- Do you have clean sheets every week?	n=151	82%	67%
	- Do you get cell cleaning materials every week?	n=152	76%	62%
	- Is it normally quiet enough for you to relax or sleep at night?	n=153	72%	79%
	- Can you get your stored property if you need it?	n=152	41%	47%
4.4	Are the communal / shared areas of your wing or houseblook normally very / quite clean?	n=154	69%	
FOO	D AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	n=152	51%	
5.2	Do you get enough to eat at meal-times always / most of the time?	n=155	57%	
5.3	Does the shop / canteen sell the things that you need?	n=153	54%	60%
REL/	ATIONSHIPS WITH STAFF			ı
6.1	Do most staff here treat you with respect?	n=153	56%	83%
6.2	Are there any staff here you could turn to if you had a problem?	n=154	66%	82%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	n=154	24%	37%
6.4	Do you have a personal officer?	n=153	92%	
	For those who have a personal officer:			
6.4	ls your personal or named officer very / quite helpful?	n=141	41%	
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	n=155	17%	
6.6	Do you feel that you are treated as an individual in this prison?	n=147	48%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	n=153	53%	
	If so, do things sometimes change?	n=81	30%	
FAIT	н			
7.1	Do you have a religion?	n=153	71%	71%
	For those who have a religion:			L
7.2	Are your religious beliefs respected here?	n=109	78%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	n=109	70%	
7.4	Are you able to attend religious services, if you want to?	n=109	94%	
	I .		l	

156	HMP Springhill 2017
153	HMP Springhill 2014

38%	
1%	
81%	
97%	98%
82%	75%
76%	87%
72%	74%
41%	31%
69%	
51%	
57%	
54%	45%
56%	64%
66%	58%
24%	15%
92%	
41%	
17%	
48%	
53%	
30%	
71%	75%
78%	
70%	
94%	

	in-number of valid responses to question (111411 Springhill 2017)	I	
CON	TACT WITH FAMILY AND FRIENDS		
8.1	Have staff here encouraged you to keep in touch with your family / friends? $n=154$	40%	
8.2	Have you had any problems with sending or receiving mail (letters or parcels)? $n=153$	18%	19%
8.3	Are you able to use a phone every day (if you have credit)? $n=154$	97%	
8.4	Is it very / quite easy for your family and friends to get here? $n=152$	49%	
8.5	Do you get visits from family/friends once a week or more? n=149	26%	
	For those who get visits:		
8.6	Do visits usually start and finish on time? $n=101$	73%	
8.7	Are your visitors usually treated respectfully by staff? n=98	81%	
TIME	OUT OF CELL		
9.1	Do you know what the unlock and lock-up times are supposed to be here? $n=148$	97%	
	For those who know what the unlock and lock-up times are supposed to be:		
9. i	Are these times usually kept to? $n=143$	90%	
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday? n=146	3%	2%
	Do you usually spend 10 hours or more out of your cell on a typical weekday? n=146	60%	57%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday? n=145	8%	
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday? n=145	47%	
9.4	Do you have time to do domestics more than 5 days in a typical week? $n=144$	83%	
9.5	Do you get association more than 5 days in a typical week, if you want it? n=146	93%	
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to? n=143	89%	
9.7	Do you typically go to the gym twice a week or more? n=146	60%	
9.8	Do you typically go to the library twice a week or more? $n=147$	44%	32%
	For those who use the library:		
9.9	Does the library have a wide enough range of materials to meet your needs? $n=128$	72%	75%
APPL	ICATIONS, COMPLAINTS AND LEGAL RIGHTS		
10.1	Is it easy for you to make an application? $n=149$	82%	87%
	For those who have made an application:		
10.2	Are applications usually dealt with fairly? n=137	65%	74%
	Are applications usually dealt with within 7 days? n=131	60%	63%
10.3	Is it easy for you to make a complaint? $n=150$	57%	53%
	For those who have made a complaint:		
10.4	Are complaints usually dealt with fairly? n=65	32%	39%
	Are complaints usually dealt with within 7 days? n=64	27%	42%
10.5	Have you ever been prevented from making a complaint here when you wanted to? $n=92$	26%	

HMP Springhill 2017	HMP Springhill 2014
156	153

40%	
18%	18%
97%	
49%	
26%	
73%	
81%	
97%	
90%	
3%	1%
60%	61%
8%	
47%	
83%	
93%	
89%	
60%	
44%	14%
72%	64%
	ı
82%	71%
/ F0/	F/0/
65%	56%
60%	51%
57%	43%
32%	20%
27%	22%
26%	22/0
40%	

	n=number of valid responses to question (HMP Spr For those who need it, is it easy to:	inghill 2017)	1	
10.6	Communicate with your solicitor or legal representative?	n=119	63%	
	Attend legal visits?	n=105	60%	
	Get bail information?	n=70	26%	
	For those who have had legal letters:			
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=100	47%	34%
HEA	LTH CARE			
11.1	Is it very / quite easy to see:			
	- Doctor?	n=150	73%	
	- Nurse?	n=146	83%	
	- Dentist?	n=147	27%	
	- Mental health workers?	n=144	28%	
11.2	Do you think the quality of the health service is very / quite good from:			
	- Doctor?	n=149	54%	
	- Nurse?	n=147	76%	
	- Dentist?	n=148	28%	
	- Mental health workers?	n=145	18%	
11.3	Do you have any mental health problems?	n=150	21%	
	For those who have mental health problems:			
11.4	Have you been helped with your mental health problems in this prison?	n=32	44%	
11.5	Do you think the overall quality of the health services here is very / quite good?	n=147	63%	
отн	ER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	n=150	21%	13%
	For those who have a disability:			l
12.2	Are you getting the support you need?	n=28	32%	
12.3	Have you been on an ACCT in this prison?	n=140	2%	
	For those who have been on an ACCT:			
12.4	Did you feel cared for by staff?	n=3	33%	
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=147	42%	
ALC	OHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	n=150	8%	10%
	For those who had / have an alcohol problem:			
13.2	Have you been helped with your alcohol problem in this prison?	n=12	75%	84%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=148	8%	10%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=147	3%	2%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=147	3%	
	For those who had / have a drug problem:			
13.6	Have you been helped with your drug problem in this prison?	n=14	79%	83%
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=148	39%	
13.8	Is it very / quite easy to get alcohol in this prison?	n=148	35%	

156	HMP Springhill 2017
153	HMP Springhill 2014

63%	
60%	
26%	
47%	40%
73%	
83%	
27%	
28%	
54%	
76%	
28%	
18%	
21%	
44%	
63%	
21%	8%
32%	
J 4 /0	
2%	
2%	
2% 33% 42%	
33%	10%
2% 33% 42%	10%
2% 33% 42%	<u> </u>
2% 33% 42% 8%	86%
2% 33% 42% 8% 75% 8%	86%
2% 33% 42% 8% 75% 8% 3%	86% 7% 2%
2% 33% 42% 8% 75% 8% 3% 79%	86%
2% 33% 42% 8% 75% 8% 3% 3%	86% 7% 2%

	n=number of valid responses to question (HMP Sp	ririgilili 2017)		
SAFE	тү			1
14.1	Have you ever felt unsafe here?	n=150	19%	19%
14.2	Do you feel unsafe now?	n=150	9%	6%
14.3	Have you experienced any of the following from other prisoners here:			
	- Verbal abuse?	n=141	15%	
	- Threats or intimidation?	n=141	12%	
	- Physical assault?	n=141	4%	
	- Sexual assault?	n=141	2%	
	- Theft of canteen or property?	n=141	11%	
	- Other bullying / victimisation?	n=141	9%	
	- Not experienced any of these from prisoners here	n=141	72%	85%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	n=143	34%	
14.5	Have you experienced any of the following from staff here:			
	- Verbal abuse?	n=145	22%	
	- Threats or intimidation?	n=145	17%	
	- Physical assault?	n=145	3%	
	- Sexual assault?	n=145	3%	
	- Theft of canteen or property?	n=145	5%	
	- Other bullying / victimisation?	n=145	21%	
	- Not experienced any of these from staff here	n=145	64%	81%
14.6	If you were being bullied / victimised by staff here, would you report it?	n=144	53%	
BEHA	AVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	n=143	42%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	n=149	46%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	n=149	4%	
	For those who have been restrained in the last 6 months:			
15.4	Did anyone come and talk to you about it afterwards?	n=3	0%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	n=149	0%	

HMP Springhill 2017	HMP Springhill 2014
HMP Spr	HMP Spr
156	153

19%	24%
9%	12%
15%	
12%	
4%	
2%	
11%	
9%	
72%	85%
34%	
22%	
17%	
3%	
3%	
5%	
21%	
64%	64%
53%	
42%	
46%	
4%	
0%	
0%	

	n=number of valid responses to question (HMP Springhill 2017	_	
EDUC	CATION, SKILLS AND WORK		
16.1	In this prison, is it easy to get into the following activities:		
	- Education? n=150	78%	
	- Vocational or skills training? $n=149$	47%	
	- Prison job?	81%	
	- Voluntary work outside of the prison? $n=147$	28%	
	- Paid work outside of the prison? n=148	9%	
16.2	In this prison, have you done the following activities:		
	- Education? n=138	86%	85%
•	- Vocational or skills training? n=143	73%	82%
	- <b>Prison job?</b>	94%	94%
	- Voluntary work outside of the prison? n=136	57%	
Ī	- Paid work outside of the prison?	49%	
	For those who have done the following activities, do you think they will help you on release:		
	- Education? n=119	57%	61%
	- Vocational or skills training?	72%	63%
•	- Prison job? n=129	29%	45%
•	- Voluntary work outside of the prison? n=78	44%	
•	- Paid work outside of the prison? n=67	87%	
16.3	Do staff encourage you to attend education, training or work?	71%	
PLAN	INING AND PROGRESSION		
17.1	Do you have a custody plan? n=150	83%	
	For those who have a custody plan:		
17.2	Do you understand what you need to do to achieve your objectives or targets? $n=123$	92%	
17.3	Are staff helping you to achieve your objectives or targets? $n=1/8$	54%	
17.4	In this prison, have you done:		
	- Offending behaviour programmes? n=107	53%	
	- Other programmes? n=102	45%	
	- One to one work? n=102	38%	
	- Been on a specialist unit? n=100	23%	
	- ROTL - day or overnight release?	71%	
•	For those who have done the following, did they help you to achieve your objectives or targets:		
	- Offending behaviour programmes? n=57	67%	
	- Other programmes? n=46	57%	
•	- One to one work? n=39	67%	
•	- Being on a specialist unit? n=23	39%	
	- ROTL - day or overnight release? n=84	91%	

78%	
47%	
81%	
28%	
9%	
86%	88%
73%	88%
94%	97%
57%	
49%	
57%	66%
72%	66%
29%	31%
44%	
87%	
71%	
83%	
92%	
54%	
53%	
45%	
38%	
23%	
71%	
67%	
57%	
67%	
39%	
91%	

	n=number of valid responses to question (HMP	Springiiii 2017)	1	
PREP	ARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	n=148	24%	
	For those who expect to be released in the next 3 months:			
18.2	Is this prison very / quite near to your home area or intended release address?	n=35	54%	
18.3	Is anybody helping you to prepare for your release?	n=34	68%	
18.4	Do you need help to sort out the following for when you are released:			
	- Finding accommodation?	n=34	50%	
	- Getting employment?	n=34	50%	
	- Setting up education or training?	n=31	39%	
	- Arranging benefits?	n=34	44%	
	- Sorting out finances?	n=33	39%	
	- Support for drug or alcohol problems?	n=31	19%	
	- Health / mental Health support?	n=29	14%	
	- Social care support?	n=32	19%	
	- Getting back in touch with family or friends?	n=31	16%	
18.4	Are you getting help to sort out the following for when you are released, if you need it:			
	- Finding accommodation?	n=17	24%	
	- Getting employment?	n=17	18%	
	- Setting up education or training?	n=12	17%	
	- Arranging benefits?	n=15	27%	
	- Sorting out finances?	n=13	23%	
	- Support for drug or alcohol problems?	n=6	83%	
	- Health / mental Health support?	n=4	50%	
	- Social care support?	n=6	33%	
	- Getting back in touch with family or friends?	n=5	20%	
FINA	L QUESTION ABOUT THIS PRISON			
20.I	Do you think your experiences in this prison have made you less likely to offend in the future?	n=145	59%	

	4
HMP Springhill 2017	HMP Springhill 2014
156	153

24%	
54%	
68%	
50%	
50%	
39%	
44%	
39%	
19%	
14%	
19%	
16%	
24%	
18%	
17%	
27%	
23%	
83%	
50%	
33%	
20%	
59%	

### **HMP Springhill 2017**

### Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

- Can you get your stored property if you need it?

- Responses of prisoners from black and minority ethnic groups are compared with those of white prisoners
- Muslim prisoners' responses are compared with those of non-Muslim prisoners

Please note that these analyses are based on summary data from selected survey questions only.

### Shading is used to indicate statistical significance\*, as follows: Green shading shows results that are significantly more positive than the comparator Black and minority ethnic Blue shading shows results that are significantly more negative than the comparator Orange shading shows significant differences in demographics and background information No shading means that differences are not significant and may have occurred by chance Non-Muslim Grey shading indicates that we have no valid data for this question White \* less than 1% probability that the difference is due to chance Number of completed questionnaires returned 63 89 121 **DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION** 1.2 Are you under 21 years of age? 0% 0% 0% 16% 23% 6% 24% Are you 50 years of age or older? 90% 29% 1.3 Are you from a minority ethnic group? 7.1 44% 3% Are you Muslim? 11.3 Do you have any mental health problems? 19% 24% 24% 20% 22% 31% 18% 12.1 Do you consider yourself to have a disability? 20% 19.2 Are you a foreign national? 0% ۱% 0% ۱% Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller) **7**% 0% 6% ARRIVAL AND RECEPTION 2.3 When you were searched in reception, was this done in a respectful way? 74% 83% 83% 76% 91% 75% 87% 2.4 Overall, were you treated very / quite well in reception? 2.5 When you first arrived, did you have any problems? 57% 60% 53% 61% For those who had any problems when they first arrived: 26% 39% 13% 38% 2.6 Did staff help you to deal with these problems? FIRST NIGHT AND INDUCTION 3.3 Did you feel safe on your first night here? 87% 94% 90% 92% 3.5 100% 100% 100% 100% Have you had an induction at this prison? For those who have had an induction: 62% 56% 60% 3.5 Did your induction cover everything you needed to know about this prison? 4.2 Is your cell call bell normally answered within 5 minutes? 2% 0% 0% 1% 4.3 On the wing or houseblock you currently live on: - Do you normally have enough clean, suitable clothes for the week? 72% 87% 77% 81% 94% 100% 94% 98% - Can you shower every day? - Do you have clean sheets every week? 76% 87% 77% 83% 85% **79**% - Do you get cell cleaning materials every week? 66% 63% - Is it normally quiet enough for you to relax or sleep at night? 64% 77% 69% 73%

37%

46%

44%

39%

Shadi	ng is used to indicate statistical significance*, as follows:		
	Green shading shows results that are significantly more positive than the comparator		
	Blue shading shows results that are significantly more negative than the comparator	ethnic	
	Orange shading shows significant differences in demographics and background information	minority 6	
	No shading means that differences are not significant and may have occurred by chance		
	Grey shading indicates that we have no valid data for this question	ck and	White
	* less than 1% probability that the difference is due to chance	Blac	₹
	Number of completed questionnaires returned	63	89

	Number of completed questionnaires returned	63	89
FOO	D AND CANTEEN		
5.2	Do you get enough to eat at meal-times always / most of the time?	48%	65%
5.3	Does the shop / canteen sell the things that you need?	41%	64%
RELA	TIONSHIPS WITH STAFF		
6.1	Do most staff here treat you with respect?	45%	62%
6.2	Are there any staff here you could turn to if you had a problem?	61%	72%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	21%	27%
6.6	Do you feel that you are treated as an individual in this prison?	44%	52%
FAIT	Н		
	For those who have a religion:		
7.2	Are your religious beliefs respected here?	73%	82%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	69%	70%
CON	TACT WITH FAMILY AND FRIENDS		
8.1	Have staff here encouraged you to keep in touch with your family / friends?	36%	44%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	23%	15%
8.3	Are you able to use a phone every day (if you have credit)?	97%	98%
	For those who get visits:		
8.7	Are your visitors usually treated respectfully by staff?	73%	87%
TIME	OUT OF CELL		
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	7%	1%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	52%	66%
	For those who use the library:		
9.9	Does the library have a wide enough range of materials to meet your needs?	68%	74%
APPL	ICATIONS, COMPLAINTS AND LEGAL RIGHTS		
10.1	Is it easy for you to make an application?	77%	85%
	For those who have made an application:		
10.2	Are applications usually dealt with fairly?	54%	72%
10.3	Is it easy for you to make a complaint?	53%	60%
	For those who have made a complaint:		
10.4	Are complaints usually dealt with fairly?	20%	41%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	29%	22%

Eilsum 32	milsum-noN
	T
44%	61%
56%	53%
	_
53%	56%
53%	70%
28%	23%
43%	49%
75%	79%
72%	68%
44%	39%
22%	17%
91%	99%
80%	81%
	1
7%	3%
42%	64%
	74%
65%	74%
90%	80%
48%	69%
48%	58%
	1 - 2,0
17%	38%
40%	20%

Shading is used to indicate statistical significance*, as follows:	
Green shading shows results that are significantly more positive than the comparator	
Blue shading shows results that are significantly more negative than the comparator	ethnic
Orange shading shows significant differences in demographics and background information	minority 6
No shading means that differences are not significant and may have occurred by chance	n an
Grey shading indicates that we have no valid data for this question	Mack and
* less than 1% probability that the difference is due to chance	Black
Number of completed questionnaires	returned 63 89

Muslim	Non-Muslim
32	121
69%	73%
74%	85%
22%	27%
21%	29%
29%	46%
50%	66%
13%	42%
21%	18%
10%	8%
83%	69%
36%	33%
45%	70%
57%	52%
25%	47%
38%	49%
14%	2%
0%	0%
66%	73%
86%	82%
3301	/00/
33%	60%
83%	64%
48%	63%

HEAL	.TH CARE		
11.1	Is it very / quite easy to see:		
	- Doctor?	75%	72%
	- Nurse?	79%	86%
	- Dentist?	21%	31%
	- Mental health workers?	23%	32%
	For those who have mental health problems:		
11.4	Have you been helped with your mental health problems in this prison?	36%	48%
11.5	Do you think the overall quality of the health services here is very / quite good?	55%	68%
отн	ER SUPPORT NEEDS		
	For those who have a disability:		
12.2	Are you getting the support you need?	10%	44%
SAFE	тү		
14.1	Have you ever felt unsafe here?	20%	18%
14.2	Do you feel unsafe now?	14%	6%
14.3	Not experienced bullying / victimisation by other prisoners	74%	70%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	36%	35%
14.5	Not experienced bullying / victimisation by members of staff	51%	74%
14.6	If you were being bullied / victimised by staff here, would you report it?	61%	49%
BEHA	AVIOUR MANAGEMENT		
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	30%	51%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	34%	56%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	7%	2%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	0%	0%
EDU	CATION, SKILLS AND WORK		
16.3	Do staff encourage you to attend education, training or work?	72%	74%
PLAN	INING AND PROGRESSION		
17.1	Do you have a custody plan?	83%	83%
	For those who have a custody plan:		
17.3	Are staff helping you to achieve your objectives or targets?	39%	67%
PREP	ARATION FOR RELEASE		
	For those who expect to be released in the next 3 months:		
18.3	Is anybody helping you to prepare for your release?	62%	70%
FINA	L QUESTION ABOUT THIS PRISON		
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	56%	64%

### **HMP Springhill 2017**

### Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

- Disabled prisoners' responses are compared with those of prisoners who do not have a disability
- Responses of prisoners with mental health problems are compared with those of prisoners who do not have mental health problems Please note that these analyses are based on summary data from selected survey questions only.

				_		
Shadir	ng is used to indicate statistical significance*, as follows:					
	Green shading shows results that are significantly more positive than the comparator					su
	Blue shading shows results that are significantly more negative than the comparator		lity		sms	oblen
	Orange shading shows significant differences in demographics and background information	<u>ج</u>	a disability		Mental health problems	No mental health problems
	No shading means that differences are not significant and may have occurred by chance	a disability	ave a		ealth	al hea
	Grey shading indicates that we have no valid data for this question	e a di	not have		ital he	ment
	* less than 1% probability that the difference is due to chance	Have	ů		Σer	Ŷ
	Number of completed questionnaires returned	31	119		32	118
DEM	OGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	0%	0%		0%	0%
	Are you 50 years of age or older?	23%	20%		16%	22%
1.3	Are you from a minority ethnic group?	39%	41%		34%	42%
7.1	Are you Muslim?	30%	17%		23%	19%
11.3	Do you have any mental health problems?	52%	13%			
12.1	Do you consider yourself to have a disability?				50%	13%
19.2	Are you a foreign national?	0%	1%		0%	1%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	13%	3%		9%	4%
ARRI	VAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	80%	80%		84%	79%
2.4	Overall, were you treated very / quite well in reception?	74%	86%		81%	85%
2.5	When you first arrived, did you have any problems?	87%	54%		84%	55%
	For those who had any problems when they first arrived:					
2.6	Did staff help you to deal with these problems?	27%	36%		31%	34%
FIRS	NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	83%	92%		87%	91%
3.5	Have you had an induction at this prison?	100%	100%		100%	1009
	For those who have had an induction:					
3.5	Did your induction cover everything you needed to know about this prison?	45%	62%		38%	64%
ON T	HE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	0%	1%		3%	0%
4.3	On the wing or houseblock you currently live on:					
	- Do you normally have enough clean, suitable clothes for the week?	83%	80%	] [	74%	83%
	- Can you shower every day?	94%	98%		94%	98%
	- Do you have clean sheets every week?	90%	80%		78%	83%
	- Do you get cell cleaning materials every week?	63%	79%		70%	77%
		FF0/	740/	1	400/	700

- Is it normally quiet enough for you to relax or sleep at night?

- Can you get your stored property if you need it?

**78**%

44%

28%

**55%** 

76% 47%

5	Shadin	g is used to indicate statistical significance*, as follows:		
		Green shading shows results that are significantly more positive than the comparator		
		Blue shading shows results that are significantly more negative than the comparator		lity
		Orange shading shows significant differences in demographics and background information	7	disability
Ī		No shading means that differences are not significant and may have occurred by chance	disability	ave a
		Grey shading indicates that we have no valid data for this question	ea	not h
		* less than 1% probability that the difference is due to chance	Наv	D°
		Number of completed questionnaires returned	31	119

Mental health problems	No mental health problems
32	118
41%	61%
55%	51%
JJ/6	J 1 /0
42%	58%
56%	69%
19%	26%
21%	53%
68%	79%
63%	70%
25%	44%
26%	17%
94%	98%
73%	82%
3%	4%
52%	62%
66%	75%
78%	83%
61%	66%
61%	55%
27%	34%
35%	24%

FOOD AND CANTEEN				
5.2	Do you get enough to eat at meal-times always / most of the time?	48%	59%	
5.3	Does the shop / canteen sell the things that you need?	61%	50%	
RELA	TIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	52%	56%	
6.2	Are there any staff here you could turn to if you had a problem?	65%	66%	
6.3	In the last week, has any member of staff talked to you about how you are getting on?	16%	27%	
6.6	Do you feel that you are treated as an individual in this prison?	36%	50%	
FAIT	H			
	For those who have a religion:			
7.2	Are your religious beliefs respected here?	75%	78%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	67%	70%	
CON	TACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	42%	40%	
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	42%	13%	
8.3	Are you able to use a phone every day (if you have credit)?	94%	98%	
	For those who get visits:			
8.7	Are your visitors usually treated respectfully by staff?	85%	79%	
TIME	OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	7%	3%	
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	50%	63%	
	For those who use the library:			
9.9	Does the library have a wide enough range of materials to meet your needs?	72%	73%	
APPL	ICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	74%	84%	
	For those who have made an application:			
10.2	Are applications usually dealt with fairly?	50%	69%	
10.3	Is it easy for you to make a complaint?	47%	59%	
	For those who have made a complaint:			
10.4	Are complaints usually dealt with fairly?	31%	33%	
10.5	Have you ever been prevented from making a complaint here when you wanted to?	43%	21%	

Shad	ing is used to indicate statistical significance*, as follows:		
	Green shading shows results that are significantly more positive than the comparator		
	Blue shading shows results that are significantly more negative than the comparator		lity
	Orange shading shows significant differences in demographics and background information	<u>.</u>	disability
	No shading means that differences are not significant and may have occurred by chance	isability	have a
	Grey shading indicates that we have no valid data for this question	re a di	not h
	* less than 1% probability that the difference is due to chance	Have	ů
	Number of completed questionnaires returned	31	119

Have a disability	Do not have a disability		Mental health problems	No mental health problems
31	119		32	118
		<u> </u>		
71%	73%		56%	77%
84%	83%		68%	87%
19%	28%		22%	28%
32%	27%		48%	
44%	44%		44%	
50%	66%		52%	66%
32%			15%	47%
36%	15%		31%	16%
23%	5%		16%	7%
74%	71%		61%	75%
42%	32%		41%	32%

HEAL	.TH CARE		
11.1	Is it very / quite easy to see:		ı
	- Doctor?	71%	73%
	- Nurse?	84%	83%
	- Dentist?	19%	28%
	- Mental health workers?	32%	27%
	For those who have mental health problems:		ı
11.4	Have you been helped with your mental health problems in this prison?	44%	44%
11.5	Do you think the overall quality of the health services here is very / quite good?	50%	66%
отн	ER SUPPORT NEEDS		
	For those who have a disability:		
12.2	Are you getting the support you need?	32%	
SAFE	тү		
14.1	Have you ever felt unsafe here?	36%	15%
14.2	Do you feel unsafe now?	23%	5%
14.3	Not experienced bullying / victimisation by other prisoners	74%	71%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	42%	32%
14.5	Not experienced bullying / victimisation by members of staff	52%	68%
14.6	If you were being bullied / victimised by staff here, would you report it?	55%	52%
BEH/	AVIOUR MANAGEMENT		I
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	39%	43%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	36%	49%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	10%	3%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	0%	0%
EDU	CATION, SKILLS AND WORK		
16.3	Do staff encourage you to attend education, training or work?	70%	71%
PLAN	INING AND PROGRESSION		
17.1	Do you have a custody plan?	81%	83%
	For those who have a custody plan:		l
17.3	Are staff helping you to achieve your objectives or targets?	29%	60%
PREP	ARATION FOR RELEASE		
	For those who expect to be released in the next 3 months:	1	
18.3	Is anybody helping you to prepare for your release?	71%	67%
FINA	L QUESTION ABOUT THIS PRISON		
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	62%	59%

56%	77%
68%	87%
22%	28%
48%	
44%	
52%	66%
	1
15%	47%
31%	16%
16%	7%
61%	75%
41%	32%
53%	67%
41%	56%
32%	45%
	400/
38%	49%
38% 9%	3%
9%	3%
9%	3%
9%	3%
9% 0% 69%	3%
9% 0% 69%	3% 0% 72%
9% 0% 69%	3% 0% 72%
9% 0% 69% 81%	3% 0% 72% 83%
9% 0% 69% 81%	3% 0% 72% 83% 60%
9% 0% 69% 81%	3% 0% 72% 83%
9% 0% 69% 81%	3% 0% 72% 83% 60%

### HMP Springhill 2017 Comparison of survey responses between sub-populations of prisoners

In this table responses of prisoners aged 50 and over are compared with those of prisoners under 50 Please note that this analysis is based on summary data from selected survey questions only.

Shadir	g is used to indicate statistical significance*, as follows:		
	Green shading shows results that are significantly more positive than the comparator		
	Blue shading shows results that are significantly more negative than the comparator		
	Orange shading shows significant differences in demographics and background information		
	No shading means that differences are not significant and may have occurred by chance	/er	
	Grey shading indicates that we have no valid data for this question	o put	Ĭ.
	* less than 1% probability that the difference is due to chance	20 8	Under
	Number of completed questionnaires returned	31	124

DEM	OGRAPHICS AND OTHER BACKGROUND INFORMATION		
1.3	Are you from a minority ethnic group?	33%	43%
7.1	Are you Muslim?	7%	25%
11.3	'	16%	23%
-	Do you have any mental health problems?		
12.1	Do you consider yourself to have a disability?	23%	20%
19.2	Are you a foreign national?	3%	0%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	6%
ARRI	VAL AND RECEPTION		
2.3	When you were searched in reception, was this done in a respectful way?	86%	78%
2.4	Overall, were you treated very / quite well in reception?	87%	84%
2.5	When you first arrived, did you have any problems?	67%	56%
	For those who had any problems when they first arrived:		
2.6	Did staff help you to deal with these problems?	43%	30%
FIRS	NIGHT AND INDUCTION		
3.3	Did you feel safe on your first night here?	93%	90%
3.5	Have you had an induction at this prison?	100%	100%
	For those who have had an induction:		
3.5	Did your induction cover everything you needed to know about this prison?	71%	57%
ON T	HE WING		
4.2	Is your cell call bell normally answered within 5 minutes?	0%	1%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	87%	79%
	- Can you shower every day?	100%	97%
	- Do you have clean sheets every week?	90%	80%
	- Do you get cell cleaning materials every week?	80%	74%
	- Is it normally quiet enough for you to relax or sleep at night?	72%	72%
	- Can you get your stored property if you need it?	43%	41%

Shad	ng is used to indicate statistical significance*, as follows:		
	Green shading shows results that are significantly more positive than the comparator		
	Blue shading shows results that are significantly more negative than the comparator		
	Orange shading shows significant differences in demographics and background information		
	No shading means that differences are not significant and may have occurred by chance	over	
	Grey shading indicates that we have no valid data for this question	and o	Under 50
	* less than 1% probability that the difference is due to chance	20 2	Š
	Number of completed questionnaires returned	31	124

FOO	D AND CANTEEN		
5.2	Do you get enough to eat at meal-times always / most of the time?	58%	58%
5.3	Does the shop / canteen sell the things that you need?	57%	53%
RELA	TIONSHIPS WITH STAFF		•
6.1	Do most staff here treat you with respect?	68%	53%
6.2	Are there any staff here you could turn to if you had a problem?	68%	66%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	29%	23%
6.6	Do you feel that you are treated as an individual in this prison?	52%	47%
FAIT	н		
	For those who have a religion:		
7.2	Are your religious beliefs respected here?	82%	77%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	64%	71%
CON	TACT WITH FAMILY AND FRIENDS		
8.1	Have staff here encouraged you to keep in touch with your family / friends?	45%	39%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	20%	18%
8.3	Are you able to use a phone every day (if you have credit)?	100%	97%
	For those who get visits:		
8.7	Are your visitors usually treated respectfully by staff?	95%	78%
TIME	OUT OF CELL		
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	3%	3%
	Do you usually spend I0 hours or more out of your cell on a typical weekday?	45%	63%
	For those who use the library:		
9.9	Does the library have a wide enough range of materials to meet your needs?	70%	72%
APPL	ICATIONS, COMPLAINTS AND LEGAL RIGHTS		
10.1	Is it easy for you to make an application?	77%	83%
	For those who have made an application:		
10.2	Are applications usually dealt with fairly?	70%	63%
10.3	Is it easy for you to make a complaint?	55%	58%
	For those who have made a complaint:		-
10.4	Are complaints usually dealt with fairly?	54%	27%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	5%	31%

	Shading is used to indicate statistical significance*, as follows:			
		Green shading shows results that are significantly more positive than the comparator		
		Blue shading shows results that are significantly more negative than the comparator		
		Orange shading shows significant differences in demographics and background information		
		No shading means that differences are not significant and may have occurred by chance	ver	
		Grey shading indicates that we have no valid data for this question	o put	der 50
,		* less than 1% probability that the difference is due to chance	20 2	Under
		Number of completed questionnaires returned	31	124

HEAL	TH CARE		
11.1	Is it very / quite easy to see:		
	- Doctor?	87%	69%
	- Nurse?	90%	81%
	- Dentist?	26%	27%
=	- Mental health workers?	30%	28%
	For those who have mental health problems:		
11.4	Have you been helped with your mental health problems in this prison?	40%	44%
11.5	Do you think the overall quality of the health services here is very / quite good?	70%	61%
ОТНЕ	R SUPPORT NEEDS		
	For those who have a disability:		
12.2	Are you getting the support you need?	43%	29%
SAFE	гү		
14.1	Have you ever felt unsafe here?	10%	22%
14.2	Do you feel unsafe now?	3%	10%
14.3	Not experienced bullying / victimisation by other prisoners	71%	72%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	37%	34%
14.5	Not experienced bullying / victimisation by members of staff	87%	58%
14.6	If you were being bullied / victimised by staff here, would you report it?	55%	53%
ВЕНА	VIOUR MANAGEMENT		
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	52%	40%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	55%	44%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	3%	4%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	0%	0%
EDUC	ATION, SKILLS AND WORK		
16.3	Do staff encourage you to attend education, training or work?	68%	72%
PLAN	NING AND PROGRESSION		
17.1	Do you have a custody plan?	81%	83%
	For those who have a custody plan:		
17.3	Are staff helping you to achieve your objectives or targets?	64%	53%
PREP	ARATION FOR RELEASE		
	For those who expect to be released in the next 3 months:		
18.3	Is anybody helping you to prepare for your release?	50%	70%
FINAL	. QUESTION ABOUT THIS PRISON		
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	72%	57%

### HMP Springhill 2017 Comparison of survey responses from different residential locations

In this table responses from prisoners on units with single cells (X, Y and Z) are compared with those from the rest of the establishment.

Shadir	g is used to indicate statistical significance*, as follows:	(Z	
	Green shading shows results that are significantly more positive than the comparator	Y and	
	Blue shading shows results that are significantly more negative than the comparator	×	nent
	Orange shading shows significant differences in demographics and background information	le cells	establishm
	No shading means that differences are not significant and may have occurred by chance	h single	_
	Grey shading indicates that we have no valid data for this question	ts with	t of the
	* less than 1% probability that the difference is due to chance	Units	Res
	Number of completed questionnaires returned	49	107

DEM	OGRAPHICS AND OTHER BACKGROUND INFORMATION		
1.2	Are you under 21 years of age?	0%	0%
	Are you 25 years of age or younger?	6%	6%
	Are you 50 years of age or older?	33%	14%
	Are you 70 years of age or older?	2%	0%
1.3	Are you from a minority ethnic group?	33%	46%
1.4	Have you been in this prison for less than 6 months?	13%	49%
1.5	Are you currently serving a sentence?	100%	100%
	Are you on recall?	4%	1%
1.6	Is your sentence less than 12 months?	0%	1%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	6%	6%
7.1	Are you Muslim?	8%	27%
11.3	Do you have any mental health problems?	19%	23%
12.1	Do you consider yourself to have a disability?	19%	22%
19.1	Do you have any children under the age of 18?	47%	62%
19.2	Are you a foreign national?	0%	1%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	2%	6%
19.4	Have you ever been in the armed services?	9%	6%
19.5	Is your gender female or non-binary?	0%	2%
19.6	Are you homosexual, bisexual or other sexual orientation?	0%	5%
19.7	Do you identify as transgender or transsexual?	0%	3%

Shadir	ng is used to indicate statistical significance*, as follows:	Ñ		1
	Green shading shows results that are significantly more positive than the comparator	f and		
	Blue shading shows results that are significantly more negative than the comparator	, ,	nent	
	Orange shading shows significant differences in demographics and background information	le cells	tablishr	
	No shading means that differences are not significant and may have occurred by chance	h single	e es	
	Grey shading indicates that we have no valid data for this question	ts with	t of th	
	* less than 1% probability that the difference is due to chance	Units	Resi	
	Number of completed questionnaires returned	49	107	

ARREVA NO RECEPTION         2.1       Were you given up-to-date information about this prison before you came here?       1.4%       20%         2.2       When you arrived at this prison, did you spend less than 2 hours in reception?       86%       84%         2.3       When you were searched in reception, was this done in a respectful way?       74%       82%         2.4       Overall, were you treated very / quite well in reception?       86%       84%         2.5       When you first arrived, did you have any problems?       80%       85%         2.5       Did you have problems with:       700       18%       18%         2.6       Contacting family?       33%       18%				
2.2   When you arrived at this prison, did you spend less than 2 hours in reception?   86%   84%   84%   82%   84%   8	ARRI	VAL AND RECEPTION		
2.3   When you were searched in reception, was this done in a respectful way?   74%   82%     2.4   Overall, were you treated very / quite well in reception?   86%   84%     2.5   When you first arrived, did you have any problems?   60%   58%     2.5   Did you have problems with:	2.1	Were you given up-to-date information about this prison before you came here?	14%	20%
2.4   Overall, were you treated very / quite well in reception?   86%   84%	2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	86%	84%
2.5   When you first arrived, did you have any problems?	2.3	When you were searched in reception, was this done in a respectful way?	74%	82%
Did you have problems with:	2.4	Overall, were you treated very / quite well in reception?	86%	84%
- Getting phone numbers? - Contacting family? - Contacting family? - Arranging care for children or other dependents? - Contacting employers? - Money worries? - Money worries? - Housing worries? - Feeling depressed? - Feeling depressed? - Feeling suicidal? - Other mental health problems? - Physical health problems? - Physical health problems? - Drugs or alcohol (e.g. withdrawal)? - Cetting medication? - Needing protection from other prisoners? - Lost or delayed property? - Cost or delayed property? - To those who had any problems when they first arrived:  2.6 - Did staff help you to deal with these problems? - To those who had ony problems when they first night, were you offered: - Toiletries / other basic items? - A shower? - A shower? - A free phone call? - Something to eat? - The chance to see someone from health care? - The chance to talk to a Listener or Samaritans? - Support from another prisoner (e.g. Insider or buddy)? - None of these? - 7% 13%	2.5	When you first arrived, did you have any problems?	60%	58%
- Contacting family? - Arranging care for children or other dependents? - Contacting employers? - Money worries? - Money worries? - Housing worries? - Feeling depressed? - Feeling suicidal? - Other mental health problems? - Physical health problems? - Physical health problems? - Physical health problems? - Other mental health problems? - Physical health problems? - Other mental health problems? - Physical health problems? - Seeting medication? - Needing protection from other prisoners? - Lost or delayed property? - Lost or delayed property? - Lost or delayed property? - Sort for those who had any problems when they first arrived:  2.6 Did staff help you to deal with these problems? - To idea or nicotine replacement? - To acco or nicotine replacement? - To acco or nicotine replacement? - A shower? - A shower? - A shower? - A free phone call? - Something to eat? - The chance to see someone from health care? - The chance to see someone from health care? - The chance to talk to a Listener or Samaritans? - Support from another prisoner (e.g. Insider or buddy)? - None of these? - 7% 13%	2.5	Did you have problems with:		
- Arranging care for children or other dependents? - Contacting employers? - Money worries? - Money worries? - Housing worries? - Feeling depressed? - Feeling depressed? - Feeling suicidal? - Other mental health problems? - Physical health problems? - Physical health problems? - Physical health problems? - Origon or alcohol (e.g. withdrawal)? - Getting medication? - Needing protection from other prisoners? - Lost or delayed property? - Torithose who had any problems when they first arrived: - To desample of the pyou to deal with these problems? - Tolletries / other basic items? - A shower? - A shower? - A shower? - A shower? - A free phone call? - Something to eat? - The chance to see someone from health care? - The chance to see someone from health care? - The chance to talk to a Listener or Samaritans? - Support from another prisoner (e.g. Insider or buddy)? - None of these? - 7% 13%		- Getting phone numbers?	38%	14%
- Contacting employers? - Money worries? - Money worries? - Housing worries? - Feeling depressed? - Feeling depressed? - Feeling suicidal? - Other mental health problems? - Physical health problems? - Physical health problems? - Physical health problems? - Physical health problems? - Other mental health problems? - Physical health problems? - Seetting medication? - Needing protection from other prisoners? - Needing protection from other prisoners? - Lost or delayed property? - Lost or delayed property? - Lost or delayed property? - Something by out odeal with these problems? - Toribose who had any problems when they first arrived: - Toribose who had any problems when they first arrived: - Tobacco or nicotine replacement? - Tobacco or nicotine replacement? - Tobacco or nicotine replacement? - A shower? - A shower? - A shower? - A shower? - Something to eat? - The chance to see someone from health care? - The chance to see someone from health care? - The chance to see someone from health care? - The chance to talk to a Listener or Samaritans? - Support from another prisoner (e.g. Insider or buddy)? - None of these? - Tone of the		- Contacting family?	35%	21%
- Money worries? - Housing worries? - Housing worries? - Feeling depressed? - Feeling depressed? - Feeling suicidal? - Other mental health problems? - Physical health problems? - Physical health problems? - Physical health problems? - Orbital health problems? - Physical health problems? - Physical health problems? - Seetting medication? - Needing protection from other prisoners? - Needing protection from other prisoners? - Lost or delayed property? - Lost or delayed property? - Lost or delayed property? - Something how to deal with these problems? - To those who had any problems when they first arrived: - To back on a dany problems when they first arrived: - Tobacco or nicotine replacement? - Tobacco or nicotine replacement? - Tobacco or nicotine replacement? - A shower? - A shower? - A shower? - A shower? - Something to eat? - Something to eat? - The chance to see someone from health care? - The chance to see someone from health care? - The chance to see someone from health care? - The chance to talk to a Listener or Samaritans? - Support from another prisoner (e.g. Insider or buddy)? - None of these? - 7% 13%		- Arranging care for children or other dependents?	0%	1%
- Housing worries? - Feeling depressed? - Feeling suicidal? - Other mental health problems? - Physical health problems? - Physical health problems? - Physical health problems? - Drugs or alcohol (e.g. withdrawal)? - Getting medication? - Needing protection from other prisoners? - Lost or delayed property? - Lost or delayed property? - Lost or delayed property? - Did staff help you to deal with these problems? - Did staff help you to deal with these problems? - Toiletries / other basic items? - A shower? - A shower? - A shower? - Something to eat? - The chance to see someone from health care? - The chance to talk to a Listener or Samaritans? - Support from another prisoner (e.g. Insider or buddy)? - None of these? - 7% 13%		- Contacting employers?	4%	6%
- Feeling depressed? - Feeling suicidal? - Feeling suicidal? - Other mental health problems? - Physical health problems? - Physical health problems? - Physical health problems? - Drugs or alcohol (e.g. withdrawal)? - Getting medication? - Needing protection from other prisoners? - Lost or delayed property? - Lost or delayed property? - Lost or delayed property? - Did staff help you to deal with these problems? - Did staff help you to deal with these problems? - Tobacco or nicotine replacement? - Tobacco or nicotine replacement? - A shower? - A shower? - A free phone call? - Something to eat? - The chance to see someone from health care? - The chance to see someone from health care? - The chance to talk to a Listener or Samaritans? - Support from another prisoner (e.g. Insider or buddy)? - None of these? - Time thance of these? - Time chance of these? - Time chance of these? - The chance of the chance o		- Money worries?	13%	13%
- Feeling suicidal? - Other mental health problems? - Other mental health problems? - Physical health problems? - Drugs or alcohol (e.g. withdrawal)? - Getting medication? - Needing protection from other prisoners? - Lost or delayed property? - Lost or delayed property? - Lost or delayed property? - Did staff help you to deal with these problems?  First night and induction  3.1  Before you were locked up on your first night, were you offered: - Tobacco or nicotine replacement? - A shower? - A free phone call? - Something to eat? - The chance to see someone from health care? - The chance to talk to a Listener or Samaritans? - Support from another prisoner (e.g. Insider or buddy)? - None of these? - 7% 13%		- Housing worries?	6%	9%
- Other mental health problems?		- Feeling depressed?	17%	17%
- Physical health problems? - Drugs or alcohol (e.g. withdrawal)? - Getting medication? - Needing protection from other prisoners? - Lost or delayed property? - Lost or delayed property? - Lost or delayed property? - Did staff help you to deal with these problems?  For those who had any problems when they first arrived:  2.6 Did staff help you to deal with these problems?  FIRST NIGHT AND INDUCTION  3.1 Before you were locked up on your first night, were you offered: - Tobacco or nicotine replacement? - Toiletries / other basic items? - A shower? - A free phone call? - Something to eat? - The chance to see someone from health care? - The chance to talk to a Listener or Samaritans? - Support from another prisoner (e.g. Insider or buddy)? - None of these?  7% 13%		- Feeling suicidal?	0%	1%
- Drugs or alcohol (e.g. withdrawal)? - Getting medication? - Needing protection from other prisoners? - Lost or delayed property? - Lost or delayed property? - Lost or delayed property? - Did staff help you to deal with these problems? - Did staff help you to deal with these problems? - Tobacco or nicotine replacement? - Tobacco or nicotine replacement? - A shower? - A shower? - A free phone call? - Something to eat? - The chance to see someone from health care? - The chance to see someone from health care? - Support from another prisoner (e.g. Insider or buddy)? - None of these? - None of these? - Something to eat? - None of these? - None of these?		- Other mental health problems?	4%	10%
- Getting medication? - Needing protection from other prisoners? - Lost or delayed property? - Lost or delayed property?  23% 16%  For those who had any problems when they first arrived:  2.6 Did staff help you to deal with these problems?  24% 37%  FIRST NIGHT AND INDUCTION  3.1 Before you were locked up on your first night, were you offered: - Tobacco or nicotine replacement? - Toiletries / other basic items? - A shower? - A shower? - A free phone call? - Something to eat? - The chance to see someone from health care? - The chance to see someone from health care? - The chance to talk to a Listener or Samaritans? - Support from another prisoner (e.g. Insider or buddy)? - None of these?  7% 13%		- Physical health problems?	15%	11%
- Needing protection from other prisoners? - Lost or delayed property?  23% 16%  For those who had any problems when they first arrived:  2.6 Did staff help you to deal with these problems?  24% 37%  FIRST NIGHT AND INDUCTION  3.1 Before you were locked up on your first night, were you offered:  - Tobacco or nicotine replacement? - Toiletries / other basic items?  - A shower?  - A free phone call? - Something to eat?  - The chance to see someone from health care? - The chance to talk to a Listener or Samaritans? - Support from another prisoner (e.g. Insider or buddy)? - None of these?  - None of these?  37% 16% - 13%		- Drugs or alcohol (e.g. withdrawal)?	2%	2%
- Lost or delayed property?  - Lost or delayed property?  - For those who had any problems when they first arrived:  2.6		- Getting medication?	8%	10%
For those who had any problems when they first arrived:   2.6		- Needing protection from other prisoners?	0%	1%
2.6 Did staff help you to deal with these problems?       24% 37%         FIRST NIGHT AND INDUCTION         3.1 Before you were locked up on your first night, were you offered:		- Lost or delayed property?	23%	16%
Before you were locked up on your first night, were you offered:   - Tobacco or nicotine replacement?		For those who had any problems when they first arrived:		
Before you were locked up on your first night, were you offered:   - Tobacco or nicotine replacement?	2.6	Did staff help you to deal with these problems?	24%	37%
- Tobacco or nicotine replacement? 57% 56%  - Toiletries / other basic items? 37% 40%  - A shower? 54% 52%  - A free phone call? 54% 52%  - Something to eat? 72% 67%  - The chance to see someone from health care? 48% 38%  - The chance to talk to a Listener or Samaritans? 24% 23%  - Support from another prisoner (e.g. Insider or buddy)? 24% 19%  - None of these? 7% 13%	FIRS	F NIGHT AND INDUCTION		
- Toiletries / other basic items? 37% 40%  - A shower? 54% 52%  - A free phone call? 54% 52%  - Something to eat? 72% 67%  - The chance to see someone from health care? 48% 38%  - The chance to talk to a Listener or Samaritans? 24% 23%  - Support from another prisoner (e.g. Insider or buddy)? 24% 19%  - None of these? 7% 13%	3.1	Before you were locked up on your first night, were you offered:		
- A shower? 54% 52%  - A free phone call? 54% 52%  - Something to eat? 72% 67%  - The chance to see someone from health care? 48% 38%  - The chance to talk to a Listener or Samaritans? 24% 23%  - Support from another prisoner (e.g. Insider or buddy)? 24% 19%  - None of these? 7% 13%		- Tobacco or nicotine replacement?	57%	56%
- A free phone call? 54% 52% - Something to eat? 72% 67% - The chance to see someone from health care? 48% 38% - The chance to talk to a Listener or Samaritans? 24% 23% - Support from another prisoner (e.g. Insider or buddy)? 24% 19% - None of these? 7% 13%		- Toiletries / other basic items?	37%	40%
- Something to eat?  - The chance to see someone from health care?  - The chance to see someone from health care?  - The chance to talk to a Listener or Samaritans?  - Support from another prisoner (e.g. Insider or buddy)?  - None of these?  7% 13%		- A shower?	54%	52%
- The chance to see someone from health care?  - The chance to talk to a Listener or Samaritans?  - Support from another prisoner (e.g. Insider or buddy)?  - None of these?  - None of these?  - The chance to see someone from health care?  - 48% 38%  - 24% 23%  - 19%  - 13%		- A free phone call?	54%	52%
- The chance to talk to a Listener or Samaritans?  24% 23%  - Support from another prisoner (e.g. Insider or buddy)?  24% 19%  - None of these?  7% 13%		- Something to eat?	72%	67%
- Support from another prisoner (e.g. Insider or buddy)?  - None of these?  24% 19%  13%		- The chance to see someone from health care?	48%	38%
- None of these? 7% 13%		- The chance to talk to a Listener or Samaritans?	24%	23%
		- Support from another prisoner (e.g. Insider or buddy)?	24%	19%
3.2 On your first night in this prison, was your cell very / quite clean? 55% 64%		- None of these?	7%	13%
	3.2	On your first night in this prison, was your cell very / quite clean?	55%	64%

Shadii	ng is used to indicate statistical significance*, as follows:	Z)	
	Green shading shows results that are significantly more positive than the comparator	Yand	
	Blue shading shows results that are significantly more negative than the comparator	×	ment
	Orange shading shows significant differences in demographics and background information	je cells	establishment
	No shading means that differences are not significant and may have occurred by chance	th single	the est
	Grey shading indicates that we have no valid data for this question	ts with	t of t
	* less than 1% probability that the difference is due to chance	Units	Res
	Number of completed questionnaires returned	49	107

	·		
3.3	Did you feel safe on your first night here?	90%	91%
3.4	In your first few days here, did you get?		
	- Access to the prison shop / canteen?	23%	24%
	- Free PIN phone credit?	33%	27%
	- Numbers put on your PIN phone?	37%	56%
3.5	Have you had an induction at this prison?	100%	100%
	For those who have had an induction:		
3.5	Did your induction cover everything you needed to know about this prison?	59%	59%
ONT	THE WING		
4.1	Are you in a cell on your own?	92%	13%
4.2	Is your cell call bell normally answered within 5 minutes?	0%	1%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	87%	78%
	- Can you shower every day?	100%	96%
	- Do you have clean sheets every week?	87%	80%
	- Do you get cell cleaning materials every week?	77%	75%
	- Is it normally quiet enough for you to relax or sleep at night?	80%	68%
	- Can you get your stored property if you need it?	44%	40%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	60%	73%
FOO	D AND CANTEEN		
5.1	Is the quality of the food in this prison very / quite good?	35%	58%
5.2	Do you get enough to eat at meal-times always / most of the time?	48%	62%
5.3	Does the shop / canteen sell the things that you need?	55%	53%
RELA	TIONSHIPS WITH STAFF		
6.1	Do most staff here treat you with respect?	51%	58%
6.2	Are there any staff here you could turn to if you had a problem?	65%	67%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	29%	22%
6.4	Do you have a personal officer?	92%	92%
	For those who have a personal officer:		•
6.4	Is your personal or named officer very / quite helpful?	39%	42%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	15%	19%
6.6	Do you feel that you are treated as an individual in this prison?	41%	51%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	58%	51%
	If so, do things sometimes change?	25%	32%

Shadin	g is used to indicate statistical significance*, as follows:	Z)	
	Green shading shows results that are significantly more positive than the comparator	Y and	
	Blue shading shows results that are significantly more negative than the comparator	s (X, `	ment
	Orange shading shows significant differences in demographics and background information	je cells	establishment
	No shading means that differences are not significant and may have occurred by chance	ith singl	the est
	Grey shading indicates that we have no valid data for this question	its wit	of
	* less than 1% probability that the difference is due to chance	Un	Rest
	Number of completed questionnaires returned	49	107

	·		
FAIT	н		
7.1	Do you have a religion?	71%	71%
	For those who have a religion:		l
7.2	Are your religious beliefs respected here?	76%	79%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	67%	71%
7.4	Are you able to attend religious services, if you want to?	97%	92%
CON	TACT WITH FAMILY AND FRIENDS		
8.1	Have staff here encouraged you to keep in touch with your family / friends?	33%	43%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	23%	16%
8.3	Are you able to use a phone every day (if you have credit)?	98%	97%
8.4	Is it very / quite easy for your family and friends to get here?	49%	50%
8.5	Do you get visits from family/friends once a week or more?	9%	33%
	For those who get visits:		
8.6	Do visits usually start and finish on time?	68%	75%
8.7	Are your visitors usually treated respectfully by staff?	72%	84%
TIME	TIME OUT OF CELL		
9.1	Do you know what the unlock and lock-up times are supposed to be here?	100%	95%
	For those who know what the unlock and lock-up times are supposed to be:		
9.1	Are these times usually kept to?	83%	94%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	0%	5%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	56%	61%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	9%	7%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	38%	51%
9.4	Do you have time to do domestics more than 5 days in a typical week?	91%	80%
9.5	Do you get association more than 5 days in a typical week, if you want it?	94%	92%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	89%	89%
9.7	Do you typically go to the gym twice a week or more?	67%	57%
9.8	Do you typically go to the library twice a week or more?	48%	43%
	For those who use the library:		
9.9	Does the library have a wide enough range of materials to meet your needs?	83%	67%
APPI	LICATIONS, COMPLAINTS AND LEGAL RIGHTS		
10.1	Is it easy for you to make an application?	77%	84%
	For those who have made an application:		
10.2	Are applications usually dealt with fairly?	57%	69%
	Are applications usually dealt with within 7 days?	64%	59%

Shadi	ng is used to indicate statistical significance*, as follows:	Z)	
	Green shading shows results that are significantly more positive than the comparator	Y and	
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	Number of completed questionnaires returned	49	107

10.3	Is it easy for you to make a complaint?	44%	63%
	For those who have made a complaint:		
10.4	Are complaints usually dealt with fairly?	26%	35%
	Are complaints usually dealt with within 7 days?	16%	31%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	33%	23%
	For those who need it, is it easy to:		
10.6	Communicate with your solicitor or legal representative?	62%	63%
	Attend legal visits?	53%	63%
	Get bail information?	6%	32%
	For those who have had legal letters:		
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	59%	41%
HEA	LTH CARE		
11.1	Is it very / quite easy to see:		
	- Doctor?	73%	73%
	- Nurse?	85%	82%
	- Dentist?	25%	27%
	- Mental health workers?	27%	28%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	55%	54%
	- Nurse?	77%	75%
	- Dentist?	27%	28%
	- Mental health workers?	13%	20%
11.3	Do you have any mental health problems?	19%	23%
	For those who have mental health problems:		
11.4	Have you been helped with your mental health problems in this prison?	22%	52%
11.5	Do you think the overall quality of the health services here is very / quite good?	64%	62%
отн	ER SUPPORT NEEDS		
12.1	Do you consider yourself to have a disability?	19%	22%
	For those who have a disability:		
12.2	Are you getting the support you need?	33%	32%
12.3	Have you been on an ACCT in this prison?	0%	3%
	For those who have been on an ACCT:		
12.4	Did you feel cared for by staff?		33%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	43%	41%

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ALC	DHOL AND DRUGS		
13.1	Did you have an alcohol problem when you came into this prison?	8%	8%
	For those who had / have an alcohol problem:		
13.2	Have you been helped with your alcohol problem in this prison?	100%	63%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	11%	7%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	2%	4%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	0%	4%
	For those who had / have a drug problem:		
13.6	Have you been helped with your drug problem in this prison?	100%	63%
13.7	Is it very / quite easy to get illicit drugs in this prison?	43%	37%
13.8	Is it very / quite easy to get alcohol in this prison?	40%	33%
SAFE	тү		
14.1	Have you ever felt unsafe here?	23%	18%
14.2	Do you feel unsafe now?	4%	11%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	21%	12%
	- Threats or intimidation?	14%	11%
	- Physical assault?	5%	3%
	- Sexual assault?	0%	3%
	- Theft of canteen or property?	14%	10%
	- Other bullying / victimisation?	12%	7%
	- Not experienced any of these from prisoners here	64%	75%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	16%	43%
14.5	Have you experienced any of the following from staff here:		1
	- Verbal abuse?	23%	22%
	- Threats or intimidation?	19%	17%
	- Physical assault?	2%	3%
	- Sexual assault?	0%	5%
	- Theft of canteen or property?	5%	5%
	- Other bullying / victimisation?	26%	19%
	- Not experienced any of these from staff here	65%	64%
14.6	If you were being bullied / victimised by staff here, would you report it?	44%	57%

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BEHA	AVIOUR MANAGEMENT		
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	37%	44%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	43%	48%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	0%	6%
	For those who have been restrained in the last 6 months:		
15.4	Did anyone come and talk to you about it afterwards?		0%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	0%	0%
EDU	CATION, SKILLS AND WORK		
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	81%	77%
	- Vocational or skills training?	43%	49%
	- Prison job?	87%	78%
	- Voluntary work outside of the prison?	41%	22%
	- Paid work outside of the prison?	9%	9%
16.2	In this prison, have you done the following activities:		
	- Education?	93%	94%
	- Vocational or skills training?	87%	67%
	- Prison job?	98%	93%
	- Voluntary work outside of the prison?	79%	48%
	- Paid work outside of the prison?	58%	45%
	For those who have done the following activities, do you think they will help you on release:		
	- Education?	42%	64%
	- Vocational or skills training?	62%	79%
	- Prison job?	20%	33%
	- Voluntary work outside of the prison?	46%	42%
	- Paid work outside of the prison?	80%	91%
16.3	Do staff encourage you to attend education, training or work?	64%	74%

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PLAN	NNING AND PROGRESSION		
17.1	Do you have a custody plan?	88%	80%
	For those who have a custody plan:		ı
17.2	Do you understand what you need to do to achieve your objectives or targets?	93%	91%
17.3	Are staff helping you to achieve your objectives or targets?	51%	56%
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	50%	55%
	- Other programmes?	49%	44%
	- One to one work?	25%	44%
	- Been on a specialist unit?	16%	26%
	- ROTL - day or overnight release?	93%	59%
	For those who have done the following, did they help you to achieve your objectives or targets:		1
	- Offending behaviour programmes?	71%	65%
1	- Other programmes?	50%	60%
	- One to one work?	38%	74%
	- Being on a specialist unit?	20%	44%
	- ROTL - day or overnight release?	84%	96%
PREF	PARATION FOR RELEASE		
18.1	Do you expect to be released in the next 3 months?	38%	17%
	For those who expect to be released in the next 3 months:		
18.2	Is this prison very / quite near to your home area or intended release address?	56%	53%
18.3	Is anybody helping you to prepare for your release?	53%	82%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	59%	41%
	- Getting employment?	53%	47%
	- Setting up education or training?	57%	24%
	- Arranging benefits?	53%	35%
	- Sorting out finances?	44%	35%
	- Support for drug or alcohol problems?	14%	24%
	- Health / mental Health support?	8%	19%
	- Social care support?	27%	12%
	- Getting back in touch with family or friends?	7%	24%
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18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	20%	29%
	- Getting employment?	11%	25%
	- Setting up education or training?	13%	25%
	- Arranging benefits?	11%	50%
	- Sorting out finances?	0%	50%
	- Support for drug or alcohol problems?	50%	100%
	- Health / mental Health support?	100%	33%
	- Social care support?	50%	0%
	- Getting back in touch with family or friends?	0%	25%
FINAL	QUESTION ABOUT THIS PRISON		
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	62%	58%