

Report on an unannounced inspection of

HMP Oakwood

by HM Chief Inspector of Prisons

26 February–9 March 2018

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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This publication is available for download at: <http://www.justiceinspectorates.gov.uk/hmiprisons/>

Printed and published by:
Her Majesty's Inspectorate of Prisons
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70 Petty France
London
SW1H 9EX
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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 Oakwood, managed by the private operator G4S, is a category C training, designated resettlement prison located near Wolverhampton. A modern facility, the prison opened in 2012 and this inspection was the third occasion that the Inspectorate has visited the prison. Holding 2,071 prisoners, Oakwood is one of the largest prisons in the country. All those held are adult male prisoners over the age of 21. Over half are serving sentences in excess of four years, and 400 more than 10 years. Approximately 150 men were serving indeterminate sentences or life and about 60% of men had been identified as representing a serious risk of harm. A quarter of the population were convicted sex offenders.

We found Oakwood to be an impressive institution; against all four of our tests of a healthy prison, we judged outcomes to be reasonably good or better. As such, the assessments we made were consistent with a story of steady and sustained improvement after what was a testing start six years ago, and this despite risks represented by the size of the population and inherent risks posed by those held.

Our judgement concerning safety in Oakwood was finely balanced but, overall, we assessed outcomes to be reasonably good, an improvement since our last inspection. Prisoners were received well into the prison, with a good focus on safety and meaningful support from peer workers. This latter point set an important tone and precedent for the prisoner experience going forward throughout the prison. It was undeniable that violence had increased at the prison, but to a level now commensurate with similar prisons, and in our survey prisoners reported raised levels of victimisation. Balanced against this, relatively few prisoners reported feeling unsafe and the prison's response to violence was robust and multi-layered. Actions were informed by good analysis and good interdepartmental coordination. The use of peer workers to support violence reduction was creative and extensive, although we emphasised, and the prison understood, that the need to ensure the most thorough governance of such schemes was vital. The prison promoted and encouraged an enabling environment which supported victims and provided prisoners with supported opportunities to behave responsibly.

The main threat to the stability of the prison was drugs. The use of new psychoactive substances (NPS) had peaked in 2017 and well over half of those prisoners surveyed suggested drugs were easily available in the prison. The prison's drug strategy required updating but actions to combat drug usage looked impressive and again involved the meaningful use of peer support. There were early signs that actions to reduce drug availability were beginning to be effective.

The use of segregation had decreased slightly at the prison and most stays were short. Living conditions on the unit were good and relationships supportive. In contrast, use of force had increased substantially and it was our view that staff did not always possess sufficient confidence in the de-escalation of incidents. This was a significant failing that required urgent attention. Since we last inspected, one prisoner had tragically taken their own life, although the prison was responding to the recommendations made by the Prisons and Probation Ombudsman (PPO) following their investigation. Self-harm incidents remained high, prompting a comprehensive strategy to reduce this which included reasonable access to Listener peer supporters. The assessment, care in custody and teamwork (ACCT) case management of those at risk, however, was poor and required urgent improvement.

We judged the area of respect to be 'good', our highest assessment, which was again an improvement since our last inspection, and this despite a very large number of prisoners now sharing cells. This followed a decision taken, we were told, to action a contractual clause that obligated the prison to take an additional 500 prisoners, and this took place shortly after our previous inspection. The implications and potential risks of this level of overcrowding are clear, but our findings with

respect to the general living conditions experienced by individuals and their access to basic amenities were very good, in some cases excellent, and contributed greatly to a positive sense of community. Staff-prisoner relationships were similarly very good, despite the inexperience of many and some inconsistencies, although yet again the extensive use of peer support arrangements assisted greatly not only the prisoners themselves but the staff also.

Prisoner consultation was excellent and widespread and was contributing greatly to general improvements and well-being. Applications and complaints were dealt with properly and supported by various prisoner advice arrangements. The promotion of equality was very good, with the needs of most with protected characteristics met reasonably well. Health care provision was mostly good, although substance misuse provision was mixed.

Most prisoners had very good access to activity and time out of cell. The leadership and management of learning and skills provision was judged by our Ofsted colleagues to be 'outstanding', with overall effectiveness 'good'. There were sufficient education or work places for all and good attendance, punctuality and behaviour among prisoners. The curriculum reflected a detailed needs analysis and offered a wide range of high-quality educational and vocational learning that supported potential employment. Teaching, learning and assessment, and achievements were mostly good and, in keeping with the rest of the prison, usefully supported by peer schemes.

Contact between prisoners and their offender supervisors was generally good although too many, including those who posed a risk of harm, did not have an up-to-date offender assessment system (OASys) assessment. Public protection arrangements required significant attention and improvement. Local arrangements were weak and engagement from community-based offender managers was sometimes poor, even in the lead-up to release. This meant that not all prisoners, even those posing a high risk, were supported by robust risk management plans to support their safe release into the community.

Similarly, too many of the prison's sex offenders were unsuitable for or unable to access treatment programmes, although programmes aimed at the general population were better. Pre-release and resettlement support was in high demand, with about 150 prisoners released each month, but was both useful and effective. As with so much at Oakwood, excellent peer-led initiatives supported those coming to the end of their sentence. Work to support family contact was outstanding.

This inspection of Oakwood was tremendously encouraging. The sustained improvement we have seen had much to do with the consistent, capable and courageous leadership we observed, principally from the director but also others including the Oakwood staff. Oakwood is not an easy prison to run and presents many risks. Some of the initiatives we have seen, notably the extensive use of peer support, can go badly wrong if they are not constantly attended to. That said, the empowerment of prisoners represented by such schemes had contributed greatly to a culture of decency and respect that was enabling prisoners to contribute and invest in the well-being of others as well as themselves.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

April 2018

Fact page

Task of the establishment

HMP Oakwood is a category C training, designated resettlement male adult prison.

Certified normal accommodation and operational capacity

Prisoners held at the time of inspection: 2,071

Certified normal capacity: 2,106

Operational capacity: 2,106

Notable features from this inspection

With a capacity of 2,106, Oakwood was the second largest prison in the UK.

There were over 200 new receptions and over 150 releases each month.

28.5% of the population were from a black and minority ethnic background.

Over 100 prisoners were engaged in 14 prisoner-led initiatives that contributed to the living experience at the prison.

265 prisoners were receiving active mental health support.

Over 60% of prisoners were serving four years or more.

580 prisoners had been convicted of sex offences.

Around 60% of prisoners had been assessed as presenting a high risk of harm to others.

Prison status (public or private) and key providers

Private; G4S

Physical health provider: Care UK

Mental health provider: Care UK

Substance misuse provider: Care UK

Learning and skills provider: Milton Keynes College

Community rehabilitation company (CRC): Staffordshire and West Midlands CRC

Escort contractor: GEOAmey and G4S

Region/Department

Midlands

Brief history

HMP Oakwood opened on 24 April 2012, as a category C male prison holding up to 1,605 prisoners. In 2017 it increased capacity to 2,106.

Short description of residential units

Ash: Vulnerable prisoner population

Beech: General population

Cedar: General population

Douglas: Lifer and long-term population

Elm: Drug support unit

Fir: Segregation unit

Ash, Beech and Cedar house blocks are made up of eight wings each, A–D upper and A–D lower, and include;

- Ash A wing lower – Enhanced wing
- Ash D wing lower – Lifers/long-term prisoners
- Ash A wing upper – Assisted supported living
- Ash B wing upper – Over-50s and assisted supported living
- Ash D wing upper – vulnerable prisoner induction

- Beech B wing lower – Willow
- Beech C wing lower - Family unit
- Beech D wing lower – Long-term prisoners
- Beech D wing upper – Induction

- Cedar A wing lowers – Enhanced wing
- Cedar B wing lower – over-40s/enhanced wing
- Cedar C wing lower – Chestnut

Name of director and date in post

John McLaughlin (May 2013)

Independent Monitoring Board chair

Graham Oliver

Date of last inspection

December 2014

About this inspection and report

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

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

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

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

Respect Prisoners are treated with respect for their human dignity.

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

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.

A4 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. There are four possible judgements: In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by 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.
- A8 All inspections of prisons are conducted jointly with Ofsted or Estyn (Wales), the Care Quality Commission, the General Pharmaceutical Council (GPhC) and HM Inspectorate of Probation. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

This report

- A9 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of and conditions for men in prisons (Version 5, 2017)*.¹ The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.
- A10 Details of the inspection team and the prison population profile can be found in the appendices.
- A11 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.²

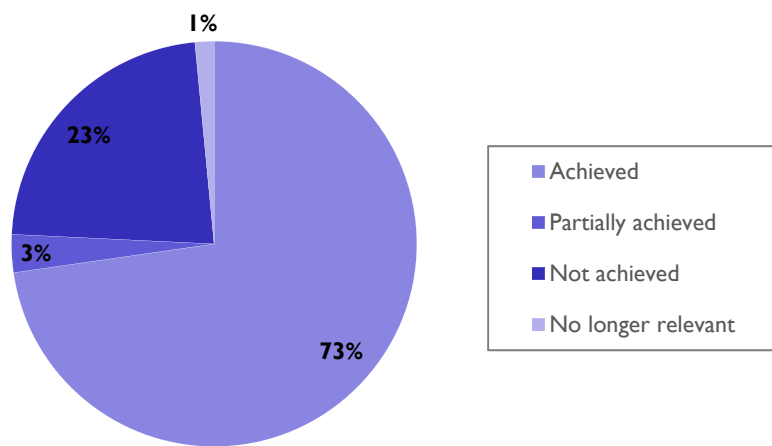
¹ <https://www.justiceinspectorates.gov.uk/hmiprison/our-expectations/prison-expectations/>

² 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

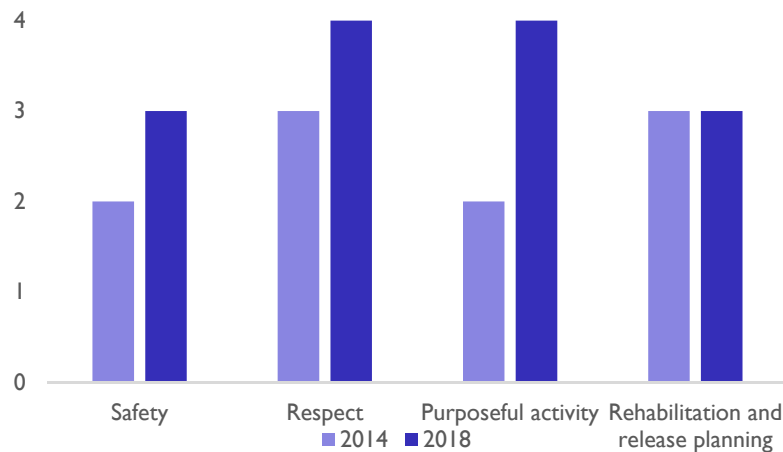
- S1 We last inspected HMP Oakwood in 2014 and made 68 recommendations overall. The prison fully accepted 53 of the recommendations and partially (or subject to resources) accepted nine (this included one main recommendation which did not fall under any of the HPA areas). It rejected six of the recommendations.
- S2 At this follow up inspection, we found that the prison had achieved 48 of those recommendations, partially achieved two recommendations and not achieved 15 recommendations. One recommendation was no longer relevant. Two recommendations (2.33 – Respect) and (3.50 – Purposeful Activity) were not followed up.

Figure 1: HMP Oakwood progress on recommendations from last inspection (n=66)



- S3 Since our last inspection, outcomes for prisoners improved for all three healthy prison areas, except for Rehabilitation and release planning, which remained reasonably good. Outcomes for prisoners were good for Respect and Purposeful Activity, and reasonably good for Safety.

Figure 2: HMP Oakwood healthy prison outcomes 2014 and 2018³



³ 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

S4 *Admissions and first night processes were good. Prisoners were supported and there was an appropriate focus on risk. Levels of violence had increased and were similar to those at other category C prisons. Few prisoners felt unsafe, but levels of victimisation by other prisoners were high. The prison's response to violence and antisocial behaviour was robust and the use of peer workers was creative. The level of use of force was high and there was too little evidence of de-escalation. The treatment and conditions of segregated prisoners had improved and were good. Despite a proactive and robust response to drug supply and demand, drugs (particularly new psychoactive drugs) were too easily available. The number of incidents of self-harm was high. Prisoners had access to support but the quality of case management was often poor. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S5 *At the last inspection in December 2014, we found that outcomes for prisoners in HMP Oakwood were not sufficiently good against this healthy prison test. We made 16 recommendations in the area of safety. At this inspection we found that 10 of the recommendations had been achieved, two had been partially achieved and four had not been achieved.*

S6 The admissions building was spacious, clean and bright, with comfortable holding rooms. Most prisoners said that they had been treated well by admissions staff, and we saw respectful interactions. There was an appropriate emphasis on checking the safety of new arrivals through private interviews with an induction officer and with health services staff. Good use was made of prisoner orderlies and mentors in admissions and on the induction wing, to provide information and to help new arrivals to settle in. First night cells were well prepared and clean. Induction started on the day after arrival and was comprehensive and well delivered, backed up by printed information and the support of prisoner induction mentors.

S7 In our survey, 15% of prisoners said that they currently felt unsafe, which was in line with our previous survey and the percentage at similar prisons. However, the results for our survey question on victimisation, both by prisoners and staff, were considerably worse. The number of recorded violent incidents was far higher than at the time of the previous inspection. The current level was broadly in line with that at similar prisons, but the level of assaults on staff was particularly high. About a quarter of all violent incidents were serious.

S8 The prison's response to the violence was robust and multi-layered, led by the director and informed by thorough and up-to-date analysis. The rise in violence reflected a surge in the use of new psychoactive substances (NPS),⁴ and the safer custody and security departments had appropriately strong links. There was extensive and creative use of peer workers to mediate, prevent violence and work with perpetrators and victims. The levels of prisoner engagement and the scope of the work were exceptional.

S9 Procedures for supporting prisoners under threat were reasonably good. Prisoners seeking protection on Ash unit were vetted and reviewed appropriately, and levels of violence on this house block had declined.

S10 The prison promoted and encouraged an enabling environment, which provided prisoners with opportunities to behave responsibly. The use of Chestnut and Willow wings to address poor and antisocial behaviour, including the use of peer mentors and a four-week

⁴ These generally refer to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vaporized and inhaled in e-cigarettes and other devices.

programme of interventions, was good practice. The incentives and earned privileges scheme was used well to address poor behaviour but not to encourage positive behaviour.

- S11 The number of adjudications had increased but remained lower than at similar prisons. The most frequent charges were for assault, drugs and unauthorised possession. Monitoring and oversight were regular and comprehensive.
- S12 The level of use of force had increased substantially and was much higher than at similar prisons. We were not confident that force was always used proportionately or as a last resort. While the analysis of incidents was good, governance was improving and complaints were taken seriously, not enough was being done to equip staff with the skills and confidence to de-escalate incidents.
- S13 The use of segregation had decreased slightly and was lower than at similar prisons. Living conditions and the regime on the unit had much improved and staff–prisoner relationships were strong.
- S14 The analysis of security-related intelligence was effective and gave rise to an appropriate level of intelligence-led searching and suspicion testing. Prison managers had identified their main threats as drugs, serious organised crime and staff corruption, and strenuous efforts were made to tackle them. The wide-ranging use of prisoner peer workers was impressive and welcomed but suitability assessments, particularly for those prisoners in influential roles, were not sufficiently rigorous.
- S15 In our survey, 53% of prisoners said that drugs were easily available in the prison. The use of NPS had peaked in 2017 and remained a substantial threat. The random mandatory drug testing positive rate over the previous six months (including NPS) was 17.9%. Although the drug supply reduction strategy was outdated, the committee met regularly and had developed an impressive set of actions. Early evidence suggested that these were starting to have an effect.
- S16 Since the previous inspection, there had been one self-inflicted death. There was a full action plan arising from Prisons and Probation Ombudsman recommendations, and this had been implemented effectively. The number of incidents of self-harm was high. There was a comprehensive strategy to reduce this and there was good analysis of information at safer prisons meetings, to direct action. Prisoners at risk of self-harm had access to a team of Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners). However, the use of assessment, care in custody and teamwork (ACCT) case management processes for prisoners at risk of suicide or self-harm remained poor. Most assessments were too brief, too many care maps did not plan for issues identified, attendance at reviews did not include an appropriate range of staff (including mental health staff) and most contact recorded was observational.

Respect

- S17 *Relationships between staff and prisoners were mostly caring and respectful, although some prisoners were frustrated by staff inexperience. Living conditions were exceptionally good and promoted a positive community atmosphere. Access to kit and equipment was good. Consultation arrangements were widespread and effective. Applications and complaints were well managed and supported by a variety of prisoner-led advice services. Diversity and faith arrangements were comprehensive and effective, and the needs of prisoners with protected characteristics were mostly met. Health and social care provision was mostly good. The newly introduced drug recovery unit provided excellent support but overall substance misuse provision required improvement.*
Outcomes for prisoners were good against this healthy prison test.
- S18 *At the last inspection in December 2014, we found that outcomes for prisoners in HMP Oakwood were reasonably good against this healthy prison test. We made 21 recommendations in the area of respect. At this inspection we found that 16 of the recommendations had been achieved and five had not been achieved.*
- S19 Most prisoners, and a similar number to that in other category C prisons, said that staff treated them respectfully and that they had a member of staff they could turn to for help. Wing staff demonstrated a good knowledge of the prisoners in their care. The interactions we observed were mostly helpful and supportive, although a large proportion of staff were inexperienced and prisoners were frustrated by their inability to deal with some of their issues, and inconsistent responses. A wide range of prisoner-led schemes supported staff in providing an excellent range of initiatives, such as conflict mediation, support and interventions for those on the basic regime and assistance in applying for home detention curfew.
- S20 Living conditions were very good. External areas were well kept and communal areas were clean, in good order and contributed positively to a sense of community. Cells were well maintained, with in-cell showers and telephones. However, too many single cells now held two people and were cramped, with insufficient furniture. Access to cleaning materials, clothing, bedding and cell equipment was well managed. The wing-based electronic kiosks were well used by prisoners to take personal responsibility for many aspects of their life at the establishment.
- S21 In our survey, few prisoners said that the food served was good. However, we found the food portions to be adequate, and the variety and quality reasonable. The self-catering facilities on Douglas unit, and microwaves and toasters on the other house units, were valued by prisoners. Prisoners were generally positive about the range of items available on the prison shop list.
- S22 Prisoner consultation arrangements were excellent and widespread, and led to clear improvements. A range of prisoner-led advice services was available, which enabled many issues to be dealt with informally. The application process was accessed mainly via the electronic kiosks and was well monitored to ensure timely responses. The number of complaints submitted was far lower than at comparator prisons. Monitoring and analysis were comprehensive, and action was taken quickly to deal with emerging issues.
- S23 Equality and diversity were well managed and the needs of prisoners with protected characteristics were mostly met. Data collection and analysis were good, with information monitored across the protected characteristics, and out-of-range areas were investigated. Discrimination incident report forms were investigated thoroughly, responses were generally good and quality assurance processes were sound. An impressive number and range of

prisoner focus groups had been delivered for all the protected characteristics. As a result, some areas for improvement had been identified and addressed. Additional support was offered through prisoner equality representatives. Trained peer carers were provided for those who required additional support with daily living, and prisoners were positive about the help they received. In our survey, black and minority ethnic prisoners, who comprised 29% of the population, reported more negatively about their treatment by staff. We found no evidence of discrimination but there was work to be done to understand their negative perceptions.

- S24 Faith provision was good. Chaplains were well integrated into the life of the prison, and in our survey most prisoners expressed satisfaction with the religious support they received. There were chaplains for all faiths, and a range of classes. Faith facilities were excellent and well maintained.
- S25 Health services were well led, with effective governance and partnership arrangements. In our survey, only a third of prisoners rated the overall quality of health services as good, but we found the range of primary care services to be appropriate and waiting times not excessive. A range of clinics was provided routinely to support prisoners with chronic health conditions. Social care arrangements and the delivery of agreed care packages were good.
- S26 Mental health support was good overall, with a skilled team offering a range of interventions. Prisoners identified as requiring hospital care under the Mental Health Act experienced inappropriate delays in being transferred.
- S27 The substance misuse service was stretched, with too few recovery workers available to meet the needs of the population. An excellent level of support was provided, mainly by peers, for the 80 residents on the newly introduced drug recovery unit, but there were too few interventions for those not located on this unit. There was a lack of integration between psychosocial service and the clinical treatment team. Opiate substitution therapy and treatment approaches were flexible, but too many prisoners were on a maintenance regime.
- S28 Some prisoners experienced delays in obtaining routine re-prescriptions of in-possession medication, which led to frustration and breaks in treatment. Medicine administration on the house blocks was managed safely but was extremely busy and protracted, and led to prisoner irritation.
- S29 Dental services had improved but prisoners waited too long for routine appointments.

Purposeful activity

S30 *The amount of time unlocked was good for most prisoners. Library and PE provision was good. The prison had a strong focus on the importance of learning in the rehabilitation of prisoners. The leadership and management of education and skills was outstanding. There were sufficient high-quality activity places and attendance was good. The quality of teaching, learning and assessment was good, and enhanced by well-qualified prisoner classroom assistants. The exceptionally wide range of peer-led initiatives equipped prisoners with excellent personal and social skills that helped them to contribute to prison life and to prepare for their own resettlement. Prisoners achieved very well. **Outcomes for prisoners were good against this healthy prison test.***

S31 *At the last inspection in December 2014, we found that outcomes for prisoners in HMP Oakwood were not sufficiently good against this healthy prison test. We made 21 recommendations in the area of purposeful activity. At this inspection we found that 19 of the recommendations had been achieved, one had been partially achieved and one was no longer relevant.*

S32 Most prisoners had full-time activity places and the amount of time unlocked for them was good, at up to 10 hours a day. The few who were not in activities had at least four hours a day out of their cell. In our spot checks, we found around 18% of prisoners locked up, which was too many, but all prisoners had some periods unlocked during the core day. A range of arts projects provided a creative outlet for prisoners.

S33 Although exercise periods were limited to 30 minutes a day, this was mitigated by the amount of time outside moving to activities across a large estate.

S34 Both the library and PE facilities were modern and impressive. The library was reasonably well used and stock was appropriate. In our survey, 41% of prisoners said that they attended the library weekly, and the number of visits had increased considerably. A range of activities promoted and supported literacy.

S35 With the increase in population, the prison had streamlined gym access and provided a range of wing-based exercise equipment. Prisoners could attend recreational gym up to four times a week, and a wide range of accredited courses was delivered.

S36 The leadership and management of education, skills and work activities were outstanding and senior leaders emphasised the importance of learning as a means of rehabilitation. Prison and college managers had worked together exceptionally well to tackle almost all of the weaknesses identified at the previous inspection. There were sufficient activity places for the population and attendance was good. Performance management arrangements, together with well-considered quality improvement planning, had secured much improved teaching and learning. Prison and college leaders had carried out a detailed curriculum needs analysis that had enabled the prison to offer a wide-ranging and high-quality vocational curriculum that prepared prisoners well for work.

S37 Jobcentre Plus, the community rehabilitation company (CRC) and the National Careers Service provided a good service to help prisoners to prepare for release.

S38 Teaching, learning and assessment in educational and vocational training were good. Learning support assistants and prisoner classroom assistants provided high-quality individual support during learning sessions. College teachers provided English and mathematics lessons for prisoners working in the prison's commercial workshops. A minority of teaching continued to require improvement, especially in English and mathematics.

- S39 The exceptionally wide range of peer-led initiatives equipped prisoners with excellent personal, social and vocational skills that helped them to contribute to prison life and to prepare for their own resettlement. In learning sessions, prisoners behaved well and were keen to attend, and their punctuality had improved considerably and was good.
- S40 Learners achieved well in most classroom-based and vocational subjects. Although overall achievements in English and mathematics had improved at the lowest levels, they continued to require further improvement at levels 1 and 2.

Rehabilitation and release planning

- S41 *Offender supervisor contact and management of prisoners were generally good and responsive. Basic public protection measures were sound but risk management planning for some higher-risk offenders due for release was poor. The range of offending behaviour programmes provided for mainstream prisoners was appropriate. Some sex offenders were not able to complete relevant offending behaviour interventions to reduce their risk or progress and were released without their offending behaviour needs being addressed. The demand for resettlement planning was high and prisoners were provided with good support. Children and families support was outstanding. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S42 *At the last inspection in December 2014, we found that outcomes for prisoners in HMP Oakwood were reasonably good against this healthy prison test. We made 10 recommendations in the area of resettlement. At this inspection, we found that four of the recommendations had been achieved and six had not been achieved.*

- S43 Work to help prisoners to maintain family ties was outstanding and represented good practice. An extensive range of extended family visits was offered for all prisoners, and facilities for visitors and visits were good. Parenting and family courses were available, with additional support through two family support workers and a visitors' 'buddy' scheme. The family intervention unit provided a positive environment, encouraging prisoners to maintain and strengthen relationships.
- S44 Many prisoners were serving a sentence of over four years and presented a high risk of harm to others. Just under a quarter had been convicted of sex offences. About 20% of prisoners did not have an initial offender assessment system (OASys) assessment, and half of those arriving at the establishment in the previous nine months had not had one.
- S45 Prisoners serving an indeterminate sentence were managed appropriately by probation officers. The frequency of contact with other offender supervisors was good and they were generally responsive to prisoners' requests for contact and help. Too many prisoners convicted of sex offences, who were not suitable or able to take part in accredited offending behaviour programmes, had limited alternative options available to enable them to demonstrate progression.
- S46 Far more prisoners than at the time of the previous inspection were being released on home detention curfew but timeliness was not formally monitored to identify problems.
- S47 For prisoners who presented a risk to the public, the identification of their contact restrictions was adequate and the use of mail and telephone monitoring was appropriate. However, pre-release risk management planning in many of the high-risk cases we looked at was far too limited (not helped by poor information exchange from some National Probation

Service offender managers), and often undertaken far too near release to be fully effective. The interdepartmental risk management team was not effective in managing risk.

- S48 Categorisation reviews were up to date and the process was applied appropriately. Some prisoners waited too long for a progressive move, with most delays caused by reasons beyond the prison's control.
- S49 The demand for resettlement support was high, with about 150 prisoners released each month. Resettlement planning by the CRC was proactive and the prisoner-run Resettlement and Advice Line and Peer Helpline (RALPH) was highly effective. Practical support in the days leading up to release represented good practice and the Oakwood Community Hub provided an excellent link to agencies and the outside world.
- S50 Support for prisoners with housing and finance and debt issues was good. The proportion of prisoners helped by the prison to secure suitable and sustainable accommodation for their release was not monitored sufficiently.
- S51 The prioritisation of places on the two accredited programmes delivered was appropriate but waiting list for the thinking skills programme had increased sharply and was too long. 'Building Better Relationships' was due to start shortly after the inspection and would provide a much-needed programme for prisoners convicted of domestic violence. The A to Z programme (a motivational and goal-setting programme) had also been piloted with some sex offenders. Owing to the lack of places on the sex offender programme elsewhere and the lack of suitable alternatives, many sex offenders were released without their offending behaviour being fully addressed.

Main concerns and recommendations

- S52 Concern: The use of force had increased substantially and was much higher than that at similar prisons. We were not confident that it was always used proportionately or as a last resort. De-escalation was not used sufficiently.

Recommendation: Staff should be equipped with the skills and confidence to de-escalate incidents, and incidents of use of force should be monitored and quality assured to ensure that de-escalation is used and that force is used only as a last resort.

- S53 Concern: The number of incidents of self-harm and the number of prisoners subject to ACCT procedures were high. The quality of ACCT documents was poor and we were not confident that the quality of care was always adequate or focused on the underlying issues.

Recommendation: The quality of care for prisoners at risk of suicide and self-harm, evidenced in written assessment, care in custody and teamwork (ACCT) processes, should be improved and should focus on the underlying causes of distress. (Repeated recommendation S59)

- S54 Concern: Engagement by some community-based offender managers with prison-based offender supervisors was poor, even during the lead-up to the release of prisoners presenting a high risk of serious harm to others, including those convicted of sex offences. As a result, the release of high-risk prisoners was not always supported by a robust and defensible risk management plan, developed and delivered in partnership with the prison over the final months of the custodial sentence.

Recommendation: The National Probation Service should work with the prison to ensure that all prisoners presenting a high risk of serious harm to others have a comprehensive and defensible risk management plan that is delivered well enough ahead of release.

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.

- I.1 Most prisoners had short journeys to the establishment, and new arrivals told us that they had been well treated by escort staff. The vans we inspected were clean.
- I.2 The admissions building was spacious, bright and clean. Holding rooms were reasonably comfortable, with some helpful information displayed.
- I.3 We saw new arrivals being treated respectfully and admission processes carried out efficiently. In our survey, 87% of respondents said that they had been treated well in admissions, and 85% that they had been searched in a respectful way. All new arrivals were offered an amnesty for any contraband they were carrying and given the opportunity to hand over any items before being subjected to a rub-down search and scan on the body orifice security scanner (BOSS) chair.
- I.4 In our survey, fewer prisoners than at comparator establishments said that they had remained in admissions for less than two hours but we observed their time being spent usefully. An induction officer interviewed new arrivals, with an appropriate emphasis on safety issues, and a health care interview was conducted, with both carried out in private.
- I.5 Admissions orderlies spent time with new arrivals, providing information about the prison, and prisoner representatives from the induction wing on Beech house block and from the education department visited them, to emphasise the working culture of the establishment.
- I.6 New arrivals went to the dedicated induction wing, where first night cells had been well prepared, were clean and contained all the necessary equipment. In our survey, 55% of respondents said that their cell on the first night had been clean, compared with 34% in comparator establishments. Induction orderlies spent time with new arrivals, answering their queries, ensuring that they had the equipment they needed in their cells and showing them how to use the electronic kiosks.
- I.7 In our survey, 79% of respondents said that they had felt safe on their first night. There was a formal recorded check by night staff on all newly arrived prisoners.
- I.8 Induction started on the day after arrival, with a well-delivered presentation from an induction orderly, overseen by an officer. The process was comprehensive and took place over three days, with contributions from relevant departments, including the library and the gym. Printed information about the prison was also provided in booklets and in displays around the induction wing.

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

- 1.9** In our survey, 15% of prisoners said that they currently felt unsafe, which was in line with similar prisons and the percentage at the time of the previous inspection. However, the results for our survey question on victimisation, both by prisoners and staff, were considerably worse. There had been a total of 258 violent incidents in the previous six months, which was far higher than in the same period at the time of the previous inspection. The current level of assaults on prisoners and fights was broadly in line with that similar prisons, but the level of assaults on staff was disproportionately high, and had recently peaked. About a quarter of all violent incidents were serious.
- 1.10** The prison's response to the violence was robust and multi-layered. Although they lacked a strategy document, there was a detailed, up-to-date action plan. The director chaired a monthly violence meeting and there were weekly multidisciplinary meetings to maintain momentum. Actions were informed by thorough and up-to-date analysis, which allowed managers to understand their problem areas and anticipate developing patterns. The rise in violence reflected a surge in the use of new psychoactive substances (NPS)⁵, and the safer custody and security departments had appropriately strong links (see section on security).
- 1.11** There was extensive and creative use of peer workers, which enabled many issues to be resolved informally. The Peace And Community Engagement (PACE) team helped to mediate and prevent violence, the Basic Intervention Group (BIG) worked with perpetrators, and members of the Cordial group supported socially isolated prisoners. Other peer-led initiatives across areas such as health care and prison-issue clothing supply helped to ease tensions. The levels of prisoner engagement and the scope of this work were exceptional.
- 1.12** The number of prisoners placed on antisocial behaviour monitoring had increased since the previous inspection, and perpetrators of violence were routinely demoted to the basic level of the incentives and earned privileges (IEP) regime (see below) and placed on report. Impressively, the prison had acquired its own intervention to address antisocial behaviour. 'Mindset' was delivered to a new cohort of prisoners every fortnight, and about 180 had completed the course in its first six months.
- 1.13** The IEP scheme was well understood by staff and prisoners, and there was a good system of reviews for both promotion and demotion. A points system was used, whereby prisoners could accumulate points depending on their compliance with the regime, their work ethic and for completing additional tasks; they could lose points for a range of poor behaviour. Prisoners told us that it was much easier to lose points than to accumulate them; our analysis supported this view and we found a clear disparity in the scale of points that could be gained and lost. While this system worked well to address poor behaviour, it often failed to promote good behaviour. Key differentials within the IEP system included enhanced spending capacity, more visits and access to the 'reward' wings as key incentives to progress within the scheme.

⁵ This generally refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vaporized and inhaled in e-cigarettes and other devices.

- I.14** The prison promoted and encouraged an enabling environment, which provided prisoners with opportunities to behave responsibly. Inevitably, not all prisoners subscribed to this, and the management of poor behaviour was better than we normally see. Two dedicated basic wings, 'Chestnut' on Beech and 'Willow' on Cedar house blocks, operated both by staff and the impressive BIG team (see above), provided a range of structured interventions to address poor and antisocial behaviour over a four-week period, such as one-to-one support, group work, healthy living sessions, and work parties both on and off the units, helping to maintain and improve the environment. There was evidence that this approach worked well, and far fewer prisoners who engaged on the programme subsequently returned to basic conditions. For the few who chose not to engage, the regime was minimal, with as little as one and a half hours unlocked each day. Wing staff monitored the behaviour of all those on the basic level of the IEP scheme, and daily recording in electronic case notes supported reviews, which were usually undertaken on time.
- I.15** Procedures for supporting prisoners under threat had improved. Prisoner support books were used routinely and the number of alternative wings available assisted relocation. Fewer prisoners from the main wings were now relocated onto Ash house block, the vulnerable prisoner unit. Applicants were appropriately vetted, reviewed and integrated within the population. Levels of violence on Ash house block had declined.

Recommendations

- I.16** **A violence reduction strategy should be developed which sets out the reasons for violence, the progress made and the work still to be done.**
- I.17** **The prison should investigate prisoners' negative perceptions of the incentives and earned privileges scheme and ensure that it provides equitable opportunities to progress and regress through the levels.**

Good practice

- I.18** *The joint peer- and staff-led interventions provided on Chestnut and Willow wings provided a range of structured interventions to manage poor behaviour.*

Adjudications

- I.19** The number of adjudications had increased, although remained lower than at similar prisons. The most frequent charges related to violence, drugs and unauthorised possession of items in cells.
- I.20** Regular analysis of a comprehensive set of data ensured that the prison was sighted on emerging trends and could identify hotspots of poor behaviour. Standardisation and monitoring meetings were regular and the deputy director quality assured the records of at least 10% of adjudications, with findings shared with all adjudicators.

Use of force

- I.21** The level of use of force had increased substantially and was very high – far higher than at similar prisons. About three-quarters of recent uses of force had been spontaneous.

- I.22** Quarterly analysis was thorough and, overall, governance was improving. All of the footage of planned interventions that we requested was available and dossiers were generally complete. However, given the large number of incidents and the evidence we saw in the video recordings and written records, we were not confident that force was always used proportionately or as a last resort (see main recommendation S52).
- I.23** Managers had recognised that staff were often too quick to use force, and had recruited additional staff to help to provide a consistent level of oversight and scrutiny. However, this had not yet had an effect, with levels of use of force peaking as recently as January 2018. There was evidence of complaints about use of force from prisoners being taken seriously, and managers had started challenging staff who routinely used force, although not enough was being done to equip staff with the skills and confidence to de-escalate incidents.
- I.24** Special accommodation had not been used in the previous six months, and staff did not carry batons.

Segregation

- I.25** The use of segregation had decreased slightly and was lower than at similar prisons. Most stays on the segregation unit were short. Living conditions and the regime on the unit had much improved, and it was calm, clean, bright and well ordered. Segregation staff had received appropriate training and their relationships with the prisoners and a helpful group of orderlies were strong. However, there was no formal process for assessing unlock procedures for those prisoners identified as presenting a particular risk to staff.
- I.26** The two exercise yards were bleak, although some gym equipment had been added. Prisoners were given the opportunity to exercise together (subject to a risk assessment) but did not have enough time in the open air, at only 30 minutes per day. However, there was a creative and flexible approach to delivering purposeful activity on the unit. An orderly undertook a range of activities with other prisoners, including individual fitness sessions and recreational activities. Special accommodation cells were used for indoor fitness and exercise.
- I.27** Prisoners who stayed on the unit for more than 28 days had care plans. There was evidence of regular visits from health services staff, who provided additional support to segregation staff, to help them to manage the most unwell men appropriately.
- I.28** About a third of prisoners leaving the segregation unit were transferred to other prisons. There were good reasons for some of these moves, such as re-categorisation, and some initial work had been done to analyse trends. However, quarterly governance was not yet sufficiently robust to provide assurance that prisoners were not being transferred when they could have been reintegrated into normal location at Oakwood.

Recommendations

- I.29** **Prisoners requiring multiple staff for unlocking should be subject to a formal risk assessment and regular review.**
- I.30** **Time in the open air for segregated prisoners should be individually risk assessed, to allow them to exercise together when this is appropriate.**

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.

- I.31** The number of intelligence reports submitted had increased and analysis was good. An effective monthly intelligence assessment informed the decisions taken by the security committee. There was an appropriate level of intelligence-led searching (around 90 cells each month) and around three-quarters of requested drug suspicion tests were completed, which was more than we typically see.
- I.32** Prison managers had identified their main threats as drugs, serious organised crime and staff corruption. There were gaps in the prison's overview of organised crime networks in the prison but this was improving, and the PACE peer worker scheme (see paragraph I.11) helped to dissuade some new arrivals from involving themselves in gang activities. There were strenuous efforts to tackle staff corruption, including a dedicated manager and an impressive level of staff searching. There were good systems to monitor extremism.
- I.33** Security was generally proportionate and the wide-ranging use of prisoner peer workers was impressive and welcomed. However, suitability assessments, particularly for those prisoners in influential roles with access around the prison, were not sufficiently rigorous or comprehensive to ensure that decision making was defensible, and did not include a contribution from offender supervisors.
- I.34** In our survey, 53% of prisoners said that drugs were easily available in the prison, and all indicators pointed to a serious problem with NPS. This had peaked in the middle of 2017, when there had been 150 emergency incidents involving prisoners under the influence of NPS in one month. Although the general trend was now downwards, there were still, on average, 50 such incidents a month and NPS remained a substantial threat.
- I.35** The average random mandatory drug testing (MDT) positive rate over the previous six months was 7%; however, when NPS were included this was much higher, at 17.9%. The rate for NPS alone had been as high as 25% in 2017.
- I.36** The drug supply reduction strategy was outdated but the drug strategy committee met regularly, was led by senior managers and had developed an impressive set of actions. There had been substantial investment in physical security, including netting. The photocopying of all incoming mail (to prevent the distribution of NPS-impregnated paper) for some house blocks was a labour intensive but broadly proportionate response to the risk posed by NPS. The introduction of the drug recovery unit was an important step forward in tackling demand (see paragraph 2.83). Early evidence, such as the number of emergencies and the MDT rate, suggested that these measures were starting to have an effect.
- I.37** The use of closed visits had been excessive recently and was not always related to illicit activity in the visits area. Managers had used this sanction as a response to prisoners found under the influence of drugs, and recently 71 prisoners had been placed on closed visits, although this had since reduced to 24 in the month of the inspection.

Recommendations

- I.38 Suitability assessments for peer workers should be comprehensive and rigorous, and include an offending behaviour assessment.**
- I.39 The prison should have an up-to-date drug supply reduction strategy to direct and support the supply reduction action plan.**
- I.40 Closed visits should only be used when there is evidence that a prisoner has abused visits arrangements. (Repeated recommendation I.45)**

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

- I.41** In the previous six months, there had been 463 acts of self-harm by 246 prisoners, which was high but similar to figures at the time of the previous inspection. The number of assessment, care in custody and teamwork (ACCT) case management books opened in this period had been 351, which was in line with that at similar establishments and had reduced slightly since the time of the previous inspection.
- I.42** Since the previous inspection, there had been one self-inflicted death. Recommendations from the Prisons and Probation Ombudsman (PPO) had been implemented effectively and kept under review. Practice had improved as a result, with one example being renewed briefing of staff about checking prisoners during unlock and roll checks, and this was monitored by managers.
- I.43** Incidents of serious self-harm were investigated, and improvements in practice had been appropriately identified in some cases.
- I.44** There was a comprehensive suicide and self-harm prevention strategy which provided clear guidance for staff. The bimonthly safer prisons meeting considered a wide range of information and provided good oversight of the suicide and self-harm prevention action plan, which included the PPO recommendations. The meeting was well attended by representatives from an appropriate range of prison departments.
- I.45** The quality of ACCT management remained poor. The purpose of the process seemed to be poorly understood by the staff involved and we were not convinced that it enhanced the care of individuals in distress. Assessments were mostly brief and did not provide confidence that all relevant issues had been identified. Care maps were usually not updated from reviews, and many had not included all the issues identified by the assessor. Nearly all the review minutes we examined showed that they had been attended only by residential staff, even when issues involving other departments, particularly health care, were being discussed. Mental health staff did not attend initial reviews to contribute to care maps, which was an omission. In one case we looked at where a mental health assessment had been an objective from the first review, it had taken six weeks for this to happen, and the ACCT process had not been effective in prioritising it. In only one of the cases examined did we find evidence of

good interaction in records of contact, with the rest containing mostly observational recording. Management checks seemed to concentrate on process issues and had not drawn attention to deficits in casework and planning (see main recommendation S53).

- I.46** At the time of the inspection, there were three prisoners subject to ACCT procedures on the segregation unit. The reasons for their location there had been fully reviewed and authorised by a senior manager.
- I.47** There were sufficient Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners), and they were supported by the local Samaritans group. Access to them was reasonable and every prisoner could contact the Samaritans using their in-cell telephone.
- I.48** Listeners told us that the number of callouts had fallen dramatically in recent months and there had been a corresponding fall in the number of telephone calls to the Samaritans. The reasons for this had not been investigated but Listeners speculated that support from other peer workers was meeting the need, thus reducing the escalation of issues to the point where they were needed.

Recommendation

- I.49** **The decrease in the number of referrals to Listeners should be investigated, to determine whether prisoners in need of a Listener are being denied access or are not aware of the service, and any remedial action identified should be taken.**

Protection of adults at risk⁶

- I.50** There was an adult safeguarding policy. Prison managers had been trained in identification and referral procedures but residential staff still did not have knowledge of the policy.
- I.51** The local cluster of prisons was represented on the safeguarding board by an area manager, and he met prison managers regularly, to facilitate communication with the board.
- I.52** There was a weekly complex cases meeting, driven by the health care department, which identified and planned for prisoners with social care and safeguarding needs.

Recommendation

- I.53** **Residential staff should be aware of adult safeguarding procedures and competent in identifying and referring prisoners who should be considered for an intervention.**

⁶ Safeguarding duties apply to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs); and
- is experiencing, or is at risk of, abuse or neglect; and
- 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 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** Most prisoners, and a similar number to that in similar prisons, said that staff treated them respectfully and that they had a member of staff they could turn to for help. Throughout the inspection, we observed that staff had a good knowledge of the prisoners in their care. This was underpinned by a consistent staffing group on the residential units, and a personal officer scheme that was applied universally and included regular and reasonably good-quality entries about current and ongoing issues being made in prisoner case notes.
- 2.2** Staff engaged well with prisoners, and the interactions we observed were mostly helpful and supportive. The authority of staff was usually enforced when necessary, and most prisoners had a clear understanding of behavioural boundaries. We observed some low-level poor behaviour going unchallenged, such as minor damage to cell equipment and non-compliance with the offensive display policy, but these occurrences were rare and were taken seriously and rectified by managers once brought to their attention.
- 2.3** As a result of a high staff turnover, there was a large proportion of relatively new and inexperienced staff who were either unable to deal with relatively minor issues or who gave inconsistent responses, which often led to some unnecessary frustrations.
- 2.4** An impressive range of prisoner-led initiatives contributed to the living experience of prisoners and assisted staff in providing support and interventions. In addition to the peer work in engaging prisoners on the basic regime and addressing violent and anti-social behaviour (see paragraph 1.12), peer workers helped staff in providing assistance to prisoners to: access suitable kit and cell equipment, understand custody-related issues, such as applying for home detention curfew, and understand Prison Service Instructions.
- 2.5** Peer worker roles were clearly defined, and they received appropriate training and had routine access to a useful range of qualifications. Regular consultation with prisoners involved in operating these schemes, and regular managerial oversight, ensured that all such initiatives operated appropriately.

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

- 2.6** Living conditions were very good overall. All cells had integral sanitation and in-cell telephones, and were clean, bright and well maintained. However, almost 1,000 prisoners lived in overcrowded conditions, in cells designed for one occupant. This caused some dissatisfaction and prisoners complained of insufficient privacy when using the telephone, showering or using the toilet; cramped conditions; and insufficient furniture.
- 2.7** The external areas, which were maintained by prisoners, were impressively clean and well kept, and contributed to the good sense of community we observed. Internal communal areas were also kept clean, bright and in good order by the efforts of wing cleaners (see Appendix IV).
- 2.8** Responses to cell call bells were prompt during the inspection but only 22% of respondents to our survey said that responses normally took place within five minutes. Despite having the facility to monitor responses, this was not taking place.
- 2.9** Almost all prisoners wore their own clothes and there were enough laundries on the wings to ensure regular access. There was sufficient clothing for the few who wore prison-issue clothing, and a system of weekly exchange. There was good access to cell equipment, bedding and cleaning materials, and wing staff were supported by prisoner peer workers in obtaining and distributing a regular supply.
- 2.10** Wing-based electronic kiosks enabled prisoners to take personal responsibility for many aspects of their life at the establishment, such as overseeing their finances, making prison shop orders, ordering meals, communicating with a wide range of departments/individuals across the prison to ask questions and receive answers electronically, booking visits and ordering additional telephone credit. The monitoring of these requests was excellent and showed that such requests were normally responded to within the 10-day target set by the prison.
- 2.11** Access to property was good, with prisoners using the electronic kiosks to raise requests. When approved, prisoners' property was taken directly to the wings to be issued.

Recommendation

- 2.12 Cell call bell response times should be monitored routinely, to ensure timely responses.**

Residential services

- 2.13** We considered the food served to be plentiful, and of adequate quality and variety, but some prisoners we spoke to complained about both its quality and quantity, and few prisoners in our survey said that it was good. The kitchen and wing serveries were clean, and mealtimes

well supervised by staff. Lunch and the evening meal were served too early, and earlier than the advertised time.

- 2.14** Prisoners on Douglas house block had access to full cooking facilities, which prisoners appreciated, and all wings had toasters and microwave ovens. Some prisoners could dine communally.
- 2.15** The range of products available on the prison shop list was extensive and included newspapers and magazines. Prisoners were positive about the shop, and in our survey 68% of respondents said that it sold what they needed. Prisoners could also order products through catalogues, although they were charged an administration fee for these orders.
- 2.16** Consultation with prisoners about the food and the shop was good, and changes were made as a result.

Recommendation

- 2.17** **Lunch should not be served before noon, and the evening meal not before 5pm.**

Prisoner consultation, applications and redress

- 2.18** Consultation arrangements were comprehensive, both at wing level and within the many prisoner-led initiatives, which involved regular monitoring and discussion meetings with prison managers. The wider prisoner council, known as the Sapphire group, was subdivided into sections to mirror the departmental structure of the establishment. Meetings were well minuted and issues were taken seriously, with many subsequent actions taken.
- 2.19** In our survey, most prisoners said that it was easy to make an application, and more respondents than at similar prisons said that they received a response within seven days. Applications were made using the electronic kiosks (see paragraph 2.10). Monitoring was effective and showed that responses were timely. A few applications remained on the paper-based system pending addition to the electronic system.
- 2.20** Complaint forms were freely available on all residential units, and in our survey considerably more prisoners than at similar prisons said that it was easy to make a complaint, and that these were answered within seven days. Prisoner wing representatives were available to give advice. If required. The number of complaints submitted had fallen considerably since the previous inspection and there were far fewer than we normally see. Monitoring was comprehensive and there was a robust system of quality assurance.
- 2.21** There was no legal services provision but prisoners had good access to legal texts and there was provision for them to use 'access to justice' equipment. Additionally, the prisoner-led 'Your Consultation Group' (YCG) provided assistance in accessing legal, regulatory and local policies, as well as providing informal advice to prisoners. Access to legal visits was good, with 24 private booths, which met need. Solicitors we spoke to told us that there was never a problem with arranging legal sessions with prisoners.

Good practice

- 2.22** *An impressive range of peer-led initiatives contributed to the living experience of prisoners and assisted staff in providing support and advice.*
- 2.23** *Applications were tracked and monitored electronically, which made the system easy for prisoners to use.*

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 characteristics⁷ 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

- 2.24** Equality and diversity were well managed. The written strategy was appropriate and was being implemented via a well-attended regular multidisciplinary meeting, chaired by the deputy director. The meeting considered a wide range of data to identify any potential discrimination, and there was evidence that the prison had identified and resolved some concerns.
- 2.25** Prisoner focus groups were run quarterly for each protected characteristic, as well as regular strategic meetings for each strand. An ongoing action plan was maintained and had led to improvements.
- 2.26** In the previous six months, 50 discrimination incident report forms (DIRFs) had been submitted, which was fewer than in the same period before the previous inspection and not excessive.
- 2.27** The timeliness and quality of responses to DIRFs were good. Quality assurance processes were thorough. Investigations were rigorous, and responses to complainants detailed and polite.
- 2.28** Seven prisoner equality representatives supported the equality team, particularly during induction, where they gathered data about each new arrival and informed them about equality and diversity provision in the prison. They were enthusiastic and understood the protected characteristics and the importance of inclusion and respect. They had all received training in equality and were a useful resource.
- 2.29** Several external organisations were engaged in the management of equality and diversity, including hearing and vision loss organisations, Birmingham and Wolverhampton College and SSAFA (the armed forces veterans' charity).

⁷ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

Protected characteristics

- 2.30** Black and minority ethnic prisoners comprised 29% of the population. Although we found no evidence of discrimination, in our survey fewer such prisoners than their white counterparts said that staff treated them respectfully.
- 2.31** Around 6% of the prison population were foreign nationals. There were two prisoners who were being held under immigration powers. Support for this group was good, with regular attendance by Home Office immigration staff, and independent advice was provided by the local Immigration Advice Service. Prisoners were often used to interpret for others, including for confidential matters, although there was evidence that professional confidential telephone interpreting services were used in some cases. Foreign national prisoners could have a free five-minute telephone call each month if they had not received a visit and could receive additional airmail letters in exchange for visiting orders and unused free letters.
- 2.32** In our survey, 34% of prisoners said that they had a disability, and the prison was aware of them all. All parts of the prison were accessible for prisoners using a wheelchair. Older prisoners and those with disabilities could have a peer carer, to help them with day-to-day tasks, and those we spoke to were positive about the support they received. The scheme was managed appropriately, and carers had formal training, including in safeguarding. They had an explicit job description and a compact. Personal emergency evacuation plans (PEEPs) were in place and were good but some staff, particularly night staff, were not aware of them.
- 2.33** Reasonable adjustments had been made for prisoners who needed them, and there was good cooperation between the prison and the health care provider to make sure that these were made promptly and that social care needs were met (see section on social care). Prisoners who were retired or unfit for work were not locked up during the working day. Older prisoners were well provided for, with age-specific activities and consultation with equality staff to address their needs.
- 2.34** At the time of the inspection, there was one transgender prisoner. She had an individual care plan and reported feeling supported by staff. The prison had also taken steps towards ensuring that prisoners of all sexual orientations were respected, and the equality team was aware of all prisoners who identified as gay or bisexual.

Recommendations

- 2.35** **The prison should explore the reasons behind the poor survey results from black and minority ethnic prisoners concerning respectful treatment by staff.**
- 2.36** **The reasons why, in our survey, prisoners with disabilities felt less safe than able-bodied prisoners should be explored.**
- 2.37** **All staff should be able to identify prisoners with a personal emergency evacuation plan and their particular needs.**

Faith and religion

- 2.38** There were chaplains for all of the faiths represented in the population. Faith facilities were excellent and faith groups had time and space allocated for worship. A programme of festivals was celebrated, for which the prison kitchen provided meals. Chaplains also provided a range of faith-based classes.

- 2.39** In our survey, most prisoners expressed satisfaction with the religious support they received and said that they could attend religious services if they wanted to. Prisoners were able to attend religious services on time, and the faith centre was accessible to all.
- 2.40** The chaplaincy team was well integrated into the prison regime and attended meetings across the prison. They were involved in segregation and assessment, care in custody and teamwork (ACCT) case management reviews. Chaplains visited all new arrivals and prisoners in segregation, in line with their statutory responsibilities. Good pastoral support was offered to prisoners and their families, especially during times of bereavement.
- 2.41** Project Unite, set up by the chaplaincy to provide peer mentors with experience in Muslim faith matters, was an excellent initiative and provided support to prisoners and staff of all faiths. The mentors mediated for misunderstandings between individuals and offered advice, information and guidance about the Muslim faith. One part of the project was Project Refrain, run by the Muslim chaplain, which was aimed at diverting prisoners away from extremism and radicalisation.

Good practice

- 2.42** *Project Unite provided an excellent way for all prisoners and staff to learn about and understand the Muslim faith, and support and meditation offered to prisoners and staff by the project was a worthwhile addition to faith provision.*

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.

- 2.43** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁸ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies.

Strategy, clinical governance and partnerships

- 2.44** The CQC found no breaches or concerns about regulations during the inspection.
- 2.45** NHS England commissioned Care UK to provide health services. The dental service was subcontracted to Time for Teeth, and the mental health and psychosocial substance misuse service to South Staffordshire and Shropshire NHS Foundation Trust's Inclusion service.
- 2.46** A full health needs analysis had been published in September 2017, and the mental health and substance misuse section had been refreshed in 2018. These reviews informed service delivery and identified areas where improvements were required.

⁸ CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

- 2.47** A local delivery board, attended by key stakeholders, met monthly, with commissioners attending quarterly. This forum discussed health care performance and was used to resolve any areas of concern.
- 2.48** The service was well led. Clinical governance arrangements were robust, with sound audit and oversight of practice. There was an effective incident-reporting system, with an emphasis on staff learning. A patient engagement coordinator organised patient forums on all wings, enabling effective consultation, and an innovative prisoner-led health advisory service (HAS) provided a telephone advice and signposting service.
- 2.49** At the time of the inspection, there were several nursing vacancies but regular agency staff supported the core team effectively, and an appointment to the lead GP role had recently been agreed. Training and professional development opportunities were good, although clinical supervision was inconsistent. Staff understood the principles of safeguarding and had received the correct level of training.
- 2.50** The patient records we sampled demonstrated effective clinical assessment and agreed interventions, and in the interactions we observed patients were treated with dignity and respect.
- 2.51** Clinical areas were modern, well maintained and clean. There were adequate supplies of personal protective equipment and cleaning materials.
- 2.52** Emergency medical bags and defibrillators were located in each house block and in the health centre. All health care practitioners were trained to intermediate life support level. In addition, paramedics were employed as first responders, which enabled service continuity by freeing up nurses and providing extra treatment options, such as suturing. All equipment was checked regularly and contained relevant items that were in date.
- 2.53** The patient engagement coordinator was proactive and looked to resolve concerns face to face, with dedicated clinics to facilitate this. Formal health care complaints triggered responses that were respectful, timely and addressed the issues raised.

Good practice

- 2.54** *The prisoner-led health advisory service offered practical and immediate support which was well received by prisoners.*
- 2.55** *The patient engagement coordinator's approach in responding to issues raised by prisoners through face-to-face clinics was constructive and effective, providing timely and sensitive resolution to concerns.*

Promoting health and well-being

- 2.56** There was a strategic approach to health promotion, with an agreed calendar of events used to raise awareness about a range of issues. Local health champions were identified and the HAS team provided information and support to the prison population, including support to stop smoking.
- 2.57** Prisoners could access a full range of health checks, immunisations and screening programmes to facilitate disease prevention. Sexual health clinics were run by a visiting specialist and patients could access barrier protection on request. There were arrangements

to gain and review consent to share medical information, and two recent outbreaks had demonstrated the prison's ability to deal with serious communicable diseases.

Primary care and inpatient services

- 2.58** The primary care staff had a good mix of relevant competencies, including advanced nursing practice skills, plus access to a range of visiting specialists. Nurses were available daily from 7am to 8pm, and up to 5pm at the weekend. A local GP practice provided out-of-hours emergency cover.
- 2.59** Initial health reception screening ensured that prisoners' health needs were identified, with specialist follow-up organised where necessary, but routine secondary screening was more sporadic. There was good health support for prisoners held on the segregation unit.
- 2.60** In our survey, only a third of prisoners rated the overall quality of health services as good, but we found provision to be effective, and staff skilled. Health care professionals provided a wide range of services on the house blocks, including initial triage, smoking cessation, wound care and the management of long-term conditions. The service was well received and we observed positive relationships between staff and prisoners. Other services, such as the GP, dentist and optician, operated from the main health centre.
- 2.61** Prisoners could apply for an appointment through the electronic kiosk system. The waiting time for a routine slot with an advanced nurse practitioner was less than one week, and for the GP was two weeks. Urgent appointments were ring fenced in every clinic, enabling same day care where necessary.
- 2.62** Waiting times for other services were acceptable. Care plans were created for long-term conditions such as diabetes and asthma, and patients received regular reviews. Visiting professionals provided other services, such as podiatry, physiotherapy, bowel screening and optometry.
- 2.63** Up to eight slots per day were available to facilitate external hospital appointments. Effective use was also made of telemedicine, to reduce escort requirements. Despite this, and a comprehensive, clinically led approach to managing appointments, too many cancellations occurred, leading to delays in prisoners attending necessary medical consultations.
- 2.64** Patient records were thorough and subject to a regular audit. The management of tasks requested by professionals was not sufficiently robust. Too many tasks were left open after completion, and some were allocated individually, rather than to a staff group, which meant that some important actions could be missed.
- 2.65** Pre-release assessments and gateway support into community services, including registration with a GP and take-out medication, were facilitated.

Recommendation

- 2.66** **Prisoners should have timely access to required external hospital appointments.**

Social care

- 2.67** Social care was commissioned by Staffordshire County Council (SCC) and provided by Advance Healthcare. A memorandum of understanding had not been formally agreed

between the prison, local authority and care provider. Despite this, the prison had good oversight of social care delivery and monitored the performance of the local authority and care provider in a monthly meeting.

- 2.68** There was a well-developed open referral process, with a good understanding of the Care Act among prison and Care UK staff. Assessments of social care referrals were not always carried out in a timely manner. However, this did not have an adverse impact on the delivery of the care required.
- 2.69** At the time of the inspection, four people were receiving social care. Prisoners could also self-refer. They were screened for potential social care needs on arrival at the prison, and pertinent information was provided during the induction process.
- 2.70** There were detailed care plans, which clearly described the support that prisoners required. These were reviewed regularly and prisoners were fully involved in planning and reviewing their own care.

Recommendation

- 2.71** **A memorandum of understanding, describing how social care will be delivered for prisoners, should be established formally between the prison, local authority and care provider.**

Mental health care

- 2.72** Inclusion, part of South Staffordshire & Shropshire NHS Foundation Trust, provided integrated mental health and psychosocial substance misuse services. A stepped care approach was delivered through a multidisciplinary team, made up of a psychologist and psychiatry, mental health nursing, social work and occupational therapy professionals, ensuring that an appropriate range of services was available, and these were delivered five days a week. The team was fully staffed, and management and supervision arrangements were appropriate.
- 2.73** All staff could make referrals and prisoners could also self-refer. A 'threshold assessment grid' was used to prioritise referrals. Urgent referrals were seen within two days and routine referrals waited an average of nine days for triage. Demand was heavy and at the time of the inspection the waiting list stood at 66 prisoners. Routine referrals and ongoing care arrangements were reviewed weekly at a single point of referral meeting and, following assessment, those who were accepted onto the caseload were assigned an appropriate case worker.
- 2.74** The active caseload of 265 patients consisted of 108 primary care cases, 105 requiring specialist secondary care and 27 patients with severe and enduring mental health problems who were managed under the care programme approach (CPA). Another 25 prisoners were currently undergoing assessment.
- 2.75** Work was undertaken through one-to-one interventions and group work, and included directed self-help and psychological interventions ranging from emotional regulation to trauma-based work. Record keeping on SystemOne (the electronic clinical record) was generally reasonable but we found that not all contacts were captured routinely. Patients with potential learning disabilities were assessed by a specialist consultant psychiatrist, supported by mental health nurses and the occupational therapist. Care planning was good

and CPA reviews now included attendance by the external community consultant psychiatrist.

- 2.76** Attendance figures for prison staff engaging in mental health awareness training were excellent. Patients under constant watch and those located on the segregation unit received good care, but attendance and contributions to ACCT reviews were inadequate and the team had not attended any recent safer custody meetings (see also paragraph 1.45). There was good liaison with community services for prisoners returning to the community.
- 2.77** In the previous 12 months, none of the three transfers to hospital under the Mental Health Act had taken place within the Department of Health's time frame of 14 days.

Recommendations

- 2.78 Requests for mental health practitioners to attend assessment, care in custody and teamwork (ACCT) reviews should be prioritised.**
- 2.79 Patients requiring a transfer to external mental health facilities should be transferred within the current transfer guidelines of 14 days.**

Substance misuse treatment⁹

- 2.80** The prison's drug strategy was out of date but there were regular meetings to monitor and review an agreed action plan.
- 2.81** Inclusion provided psychosocial support services through an integrated mental health and substance misuse team. Under this model, fewer recovery workers were available to meet the needs of an increased prison population, and currently only 286 prisoners were engaging with the service (13% of the population), which was far fewer than at the time of the previous inspection. New arrivals received harm reduction information during well-being screening, but prisoners testing positive for new psychoactive substances¹⁰ during their sentence received only an information leaflet, rather than face-to-face advice.
- 2.82** There were too few interventions to meet need. While we saw examples of good care planning, structured one-to-one sessions took place too infrequently and group work for the general prison population was limited to one session per week. Peer support was accessible only on Elm house block, although we welcomed plans for a house block-based service to increase the accessibility and frequency of contact.
- 2.83** Elm house block was the prison's designated drug recovery unit, where recovery workers delivered a structured group work programme. The unit accommodated 80 prisoners, which included the peer mentors, who provided an impressive range of services. Designated gym and education sessions took place, and a strong sense of community had been created to support prisoners in remaining drug free. Since the unit had opened, nine months earlier, 155 prisoners had completed the three-month programme, and a move-on unit was planned.
- 2.84** One specialist nurse led a small team which oversaw clinical substance misuse treatment for prisoners, supported by a recently appointed specialist GP. Resources were stretched and there was little capacity for wider collaboration and integrated working. Standard 13-week

⁹ 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).

¹⁰ These generally refer to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vaporized and inhaled in e-cigarettes and other devices.

reviews were undertaken but did not include psychosocial workers. At the time of the inspection, 232 men were receiving opiate substitution therapy. In the patient consultations we observed, treatment was flexible, safe and geared towards individual need. However, for a working prison, there were too many prisoners on a maintenance regime, and 62 of the prisoners receiving opiate substitution had no live contact with the psychosocial team.

- 2.85** Information sharing arrangements with the offender management unit were appropriate, and good links with community services facilitated continuity of support on release. Pre-release harm reduction information included overdose management.

Recommendations

- 2.86** Prisoners with drug and alcohol problems should have ready access to a greater range of psychosocial interventions and peer support, independent of location.
- 2.87** Closer collaborative working arrangements between the psychosocial and clinical treatment teams should be established, to ensure optimum outcomes for prisoners.

Medicines optimisation and pharmacy services

- 2.88** Medicines were supplied by Lloyds Pharmacy, which was located on-site. A Lloyd's pharmacist provided 1.5 hours a week patient consultation time, but this was insufficient to support older patients and those with longer-term conditions.
- 2.89** Medicines were administered and recorded appropriately by pharmacy technicians and nursing staff employed by Care UK. Around 55% of patients received their medicines in-possession, and risk assessments were recorded on SystemOne. Random cell checks were conducted to ensure compliance. Clinical governance arrangements ensured that the prescription of tradable medicines was monitored; this was on the increase, with approximately 9.7% of the prison population on two or more tradable medicines.
- 2.90** Wing-based supervised medicine administration was extremely busy and protracted, and we observed some understandable prisoner irritation with the process. Despite these challenges, arrangements were managed safely and afforded a degree of privacy. There was good rapport between officers, health services staff and prisoners. Identifications were checked and patients who did not attend for medication were followed up appropriately.
- 2.91** Prisoners had the facility to order their repeat medication via the electronic kiosks, but some prisoners experienced delays in obtaining routine re-prescriptions of in-possession medication, owing to poor organisation and prioritisation of this system, exacerbated by staffing shortages, which led to frustration and breaks in treatment. Additional wing-based stock had been introduced and prisoners could contact HAS, which helped to resolve problems and mitigate frustrations.
- 2.92** Although most medicines were stored adequately, the treatment rooms were exceptionally warm and heat-sensitive medicines had not been stored in accordance with requirements. The records we saw showed refrigerator temperatures outside the required range of 2–8°C, although this issue was resolved during the inspection.
- 2.93** A range of medical service operating policies were in place. The prison shop sold a small range of medicines that prisoners could buy for simple conditions. Patient group directions (to enable nurses to supply and administer prescription-only medicine) were used for

emergency medicines and vaccinations. A range of antibiotics and emergency medicines was available.

Recommendations

- 2.94 Pharmacy staffing should reflect patient need and include a dedicated pharmacist to provide enhanced governance and direct advice to patients.**
- 2.95 Prisoners should consistently receive their prescribed medication on time, without gaps in provision.**

Dental services and oral health

- 2.96** Dental services had improved. Time for Teeth provided a full range of NHS treatments, four days a week, with eight dental and eight therapist clinics per week. Oral health promotion was provided during appointments.
- 2.97** Some patients waited 12 weeks for non-urgent dental appointments, which was too long. The available clinic time was not utilised effectively, resulting in inequitable access to dental services and causing frustration among patients. The provider had produced an action plan which aimed to address this issue. Urgent appointments were available at every clinic.
- 2.98** The dental suite was fit for purpose, infection control practices were good and equipment was serviced at the required intervals. The decontamination of reusable equipment was carried out on-site, and staff followed an appropriate dirty-to-clean flow.

Recommendation

- 2.99 Prisoners should receive timely access to routine dental assessment and care.**

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 Nearly all prisoners had access to a single full-time activity or a combination of two-part time activities and were unlocked for up to 10 hours a day during the working week. This included two hours and forty-five minutes of association in the evening. The few prisoners without an activity were unlocked for a minimum of four hours a day, but some on the basic level of the incentives and earned privileges scheme had as little as 90 minutes a day out of their cell.
- 3.2 In our spot checks, we found an average of 18 % of prisoners locked in their cells, which was too many, but all prisoners had some periods unlocked during the core day. The regime was reliable and the only cancellation was for planned staff training one day a month.
- 3.3 Outdoor exercise periods were too short, at 30 minutes a day, but this was mitigated by the layout and size of the prison, which meant that most prisoners spent a large amount of time in the open air walking between activities and their residential unit.
- 3.4 A prisoner-led project provided tuition and access to materials for those who wanted to undertake arts and crafts projects in their cells and to sell their products for charity.
- 3.5 The prison library was open six days a week and all prisoners had a dedicated time for attendance. The number of library visits had increased by more than 45% since the previous inspection; 75% of prisoners were library members and in our survey 41% said that they visited the library weekly.
- 3.6 Library staff, provided by Staffordshire County Council, were supported by well-trained prisoner orderlies. The library was modern and spacious, with good study areas. The stock reflected the prison population, with materials for those with different levels of literacy; relevant to groups with protected characteristics; and in languages other than English. Library staff regularly checked population information, to adjust the stock; were responsive to requests from prisoners; and liaised with the education provider and health care department, to inform provision. An annual library survey was conducted, to understand the needs of prisoners. This had influenced the choice of stock and led to the development of satellite provision on Ash house block, to provide library resources to some older prisoners who lived there and found it difficult to get to the main library.
- 3.7 Literacy was well promoted through the Shannon Trust (which provides peer-mentored reading plan resources and training to prisons), promotion of the Six-Book Challenge (an initiative inviting individuals to select six books and record their reading in a diary) and provision of Storybook Dads (in which prisoners record stories for their children).
- 3.8 The gym was large and well equipped, with weight training and exercise rooms, an indoor sports hall and two all-weather pitches. Prisoners were given the opportunity to attend

recreational gym up to four times a week, and in our survey over 50% of prisoners said that they used the gym at least twice a week. Well-trained prisoner orderlies provided good support in the gym. With the increase in population, the prison had streamlined gym access and provided a range of wing-based exercise equipment. Representatives on the house blocks encouraged gym use and provided usage feedback to gym staff.

- 3.9** The range of sessions catered for all abilities, with over-50's sessions, remedial gym and charity events. There were good links with the health care department to provide sessions which met health needs, and with the offender management unit to record achievements of qualifications for resettlement plans.
- 3.10** An excellent range of courses was provided, including gym instructor to level 2, lifestyle management, well-being, health and safety, and accredited mentoring.

Good practice

- 3.11** *A prisoner-led project provided tuition and access to materials for those who wanted to undertake arts and crafts projects in their cells and to sell their products for charity.*

Education, skills and work activities (Ofsted)¹¹

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.¹²

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

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

Management of education, skills and work

- 3.13** The prison's senior leaders had worked hard to establish an open and consultative establishment that valued prisoners' feedback and actively promoted their participation in the life of the prison. Prison and college staff rightly commented on the positive changes in

¹¹ 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.

¹² In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

the culture of the establishment that the prison's director and his leadership team had nurtured. Prisoners were therefore motivated to use their time in custody productively, as demonstrated in the high achievement rates for all groups, regardless of their age or ethnicity, or any type of disability.

- 3.14** Excellent partnership working between the prison's head of learning and skills and the college's management team had resulted in considerable improvements in the range, volume and quality of purposeful activity. Prison and college leaders had dealt successfully with almost all of the areas for improvement identified at the previous inspection. They had improved the management and delivery of English and mathematics, which now included the provision of discrete teaching in these subjects in the commercial workshops. The education and vocational training provision provided by Milton Keynes College was good.
- 3.15** The management, organisation and efficiency of the prison's commercial workshops were outstanding. Prisoners were highly motivated and prison staff treated prisoners as valuable employees. Prisoners acted as shop floor workers, charge hands, supervisors and foremen, thereby duplicating a community working environment. Supervisors and foremen compiled and completed orders from commercial customers, scheduled delivery dates, provided quality control measures and ensured that finished products complied with the technical specifications supplied by the customer.
- 3.16** The curriculum met the needs of the population exceptionally well. Prison and college managers made good use of extensive demographic data on skills, vacancies and unemployment patterns in the areas to which prisoners were released. The curriculum offered was both wider than at the time of the previous inspection and better suited to the population. Prison managers had also increased the volume of distance learning provision, as well as of the number of advanced-level courses.
- 3.17** Performance management was rigorous. Since the previous inspection, college leaders had applied performance management measures that had resulted in the departure from the prison of 15 teachers for performance-related reasons. Managers used the results of classroom observations to help teachers to identify strengths and areas for improvement, and to support them to improve further their practice.
- 3.18** There were sufficient activity places for the population and almost all prisoners were allocated to full-time (sometimes a combination of part-time) purposeful activity. The allocation process was both efficient and swift. Attendance monitoring had resulted in considerably improved attendance and punctuality, which were now good. However, the scheduling of legal, medical and other appointments during the core day resulted in some prisoners choosing to return to their cells after their appointment, when they should have been attending activities.
- 3.19** Quality assurance and improvement arrangements were highly effective. The self-assessment report was an honest and accurate account of the establishment's main strengths and areas for improvement.
- 3.20** The coordination of education, training and employment services for prisoners approaching release was effective and this resulted in most prisoners receiving a good service. Prison managers held meetings with partners every month, to monitor performance and prisoner job outcomes, and plan events. Staff from Jobcentre Plus and the National Careers Service carried out mock interviews with prisoners close to their release date, to help to develop their confidence and work readiness. Around 50 prisoners who had worked towards vocational qualifications in plant operations and rail engineering had gained employment after their release.

- 3.21** At the time of the inspection, managers had closed the prison's virtual campus (internet access for prisoners to community education, training and employment opportunities) facility owing to technical difficulties with the server.
- 3.22** The quality of the National Careers Service provided by Prospects was good. Prisoners benefited from knowledgeable advisers, who identified prisoners' needs on admission and prioritised those who were due for release. Prospects staff worked closely with college managers to understand the education pathways available to prisoners and to provide accurate advice on the courses they could attend.

Recommendations

- 3.23** **Prisoners' attendance at appointments during the working day should be carefully monitored, to ensure that prisoners return to activities once their appointment is finished.**
- 3.24** **The technical difficulties with the virtual campus should be resolved, so that it can be used to help prisoners to find work after their release.**

Quality of provision

- 3.25** Teachers and instructors had high expectations of prisoners. They used creative and challenging teaching methods and resources to develop prisoners' interests in learning. Prisoners benefited from good resources and industry-standard training facilities. Instructors demonstrated good skills and industrial experience, which they used effectively to develop a wide range of practical tasks that motivated prisoners and prepared them for their next steps. Prisoners developed their knowledge, skills and understanding successfully; in workshops, they achieved standards comparable with those expected in industry.
- 3.26** Prisoners made good progress in lessons and in vocational training. They recorded their learning regularly in personal learning plans and were able to demonstrate accurately the progress they were making. Teachers and instructors used these plans to set individualised targets and monitor prisoners' achievements. Prisoners could identify easily what they had done well and what they needed to do to improve.
- 3.27** Learning support was highly effective in lessons and in vocational training. Staff identified prisoners' learning needs and abilities quickly. Additional support teachers worked skilfully with prisoners to develop personalised action plans and provide individual support to meet their needs. Records of the progress that prisoners made against their action plans were clear and showed that most prisoners made good progress towards independent learning.
- 3.28** Peer mentoring was outstanding. Mentors were well trained through the college's 'Work Skills' programme, and in lessons they set tasks that supported prisoners' skills development and complemented teaching and learning. As a result, prisoners developed good employability skills. Other prisoner mentors were responsible for delivering induction activities, developing course materials and ensuring that prisoners attended scheduled activities.
- 3.29** Most teachers and instructors reinforced English and mathematics competently in sessions, to help prisoners to improve their application of these skills. Most teachers were adept at correcting spelling, grammar and punctuation errors in prisoners' written work, so that they did not repeat these errors in future activities.

- 3.30** The quality of teaching in English and mathematics was not consistently effective. Managers had implemented a range of training and development support for teachers of these subjects, and early indications suggested that the quality of sessions was improving. However, it was too soon to assess the full impact.
- 3.31** Opportunities for prisoners to gain accredited vocational qualifications in prison industries were good and included rail engineering and track maintenance, plant operations and recycling. The prison offered an excellent range of qualifications up to level 3 in information, advice and guidance, learning support, music and self-employment. The number of prisoners studying distance learning and undergraduate level courses had increased sharply since the previous inspection.
- 3.32** Much of the work in the commercial workshops had a low skill content and did not provide opportunities for accreditation or higher-level skills development. Most workshops involved either light assembly of plastic plumbing components, or disassembly and recycling of electrical products. While these tasks provided purposeful activity, they did not develop prisoners' skills sufficiently, or provide opportunities for them to gain vocational qualifications.

Recommendations

- 3.33 Additional training and development support for teachers of English and mathematics should be provided, to ensure consistently effective provision in these subjects.**
- 3.34 Prisoners should be able to benefit from vocational qualifications and higher-level skills development opportunities during workshops activities.**

Personal development and behaviour

- 3.35** The extent to which the establishment was successful at developing prisoners' personal, social and employability skills was outstanding. The director, supported by his leadership team, had established an institution-wide ethos that placed individual responsibility, respect for others and active participation in the life of the prison at its centre. As a result, prisoners benefited from a regime that fully supported their rehabilitation and resettlement into the community.
- 3.36** The extensive network of prisoner peer mentor groups provided a valuable opportunity for prisoners to develop their confidence, manage their behaviour and support their peers. Peer mentors were proud of the difference they made to prison life and to other prisoners.
- 3.37** Prisoners enjoyed attending and participating in activities. In learning sessions, they demonstrated an enthusiasm to learn and motivation to achieve. Their behaviour was exemplary, both during learning and skills activities and when engaged in prison work, and their punctuality was good. They were respectful of their teachers, instructors and each other.

Outcomes and achievements

- 3.38** Achievement rates for most classroom-based and vocational qualifications had risen steadily for the previous three years and were now high, irrespective of prisoners' age or ethnicity. Outcomes were particularly high in barbering, painting and decorating, construction skills,

and rail engineering and track maintenance. The number of prisoners who stayed to the end of their studies on most courses was also high. All groups of prisoners developed vocational skills and achieved well, including those with special educational needs.

- 3.39** Achievement in English and mathematics had improved considerably, especially at entry levels. Achievements in these subjects at levels 1 and 2 had also improved but still required further improvement, as acknowledged in the self-assessment report.
- 3.40** Prisoners presented written work neatly. Standards of practical work in vocational training were as expected for the qualification and length of course. Prisoners in the commercial workshops worked purposefully, responded well to commercial targets and pressures, and cooperated with workplace supervisors and foremen. The high quality of finished products in the commercial workshops resulted in successful repeat orders and a useful income stream for the prison.

Recommendation

- 3.41 Prisoners' achievements in English and mathematics at levels 1 and 2 should be improved.**

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 Provision to enable prisoners to re-establish, maintain and develop relationships with their families was excellent and represented best practice.
- 4.2 Two family workers, one provided by the Help and Advice Line for Offenders' Wives (HALOW) and one by Barnardo's, offered individual support to prisoners and their families, alongside a 'buddy' scheme for new visitors. HALOW also ran the visitors centre and employed ex-prisoners and prisoners on release on temporary licence, to help families through the visits experience. A mock cell had been built in the well-appointed visitors centre, to help families to understand their loved ones' living experience.
- 4.3 The two visits halls were bright and well maintained, and staff provided a welcoming environment for families.
- 4.4 There was an extensive and well-thought-out range of family visits on offer to all prisoners (a total of 31 per year), and a homework club, toddlers' visits, baby bonding club and kids club were also offered. The prison was one of the first to offer a scout pack for prisoners' children, which was innovative and an additional way for prisoners to spend time with their children.
- 4.5 Work had been done in conjunction with the local police and secondary schools to provide learning opportunities for school mentors. This was in relation to the Mentors in Violence Prevention scheme, where students visit the prison and speak with prison mentors.
- 4.6 The family intervention unit on Beech house block was a supportive environment for prisoners wishing to maintain family ties through parenting and family courses and peer mentors.
- 4.7 In our survey, many prisoners said that they had problems with sending or receiving their mail. Mail was routinely photocopied in a response to the drugs problem (see also paragraph I.36), although we were satisfied that this did not result in delays.

Good practice

- 4.8** *The provision for prisoners to maintain their family ties was extensive, with an excellent range of visits and other activities.*

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.

- 4.9** The prison's population had increased since the previous inspection, from 1,600 to just over 2,000. About 60% were serving a custodial sentence of over four years and a similar proportion was managed by the National Probation Service as they were high-risk or multi-agency public protection arrangements (MAPPA) cases. Just under a quarter of the population had been convicted of sex offences.
- 4.10** The strategic management of rehabilitation and release planning was reasonably good overall. The strategy provided an overview of the resettlement pathways, and there was an action plan against which to monitor progress and a well-attended monthly committee meeting. However, offender management did not have a high enough profile in the strategy and too little use was made of needs analyses to inform provision. The strategy was not specific to the potentially different offending-related needs within the population.
- 4.11** At the time of the inspection, about 20% of prisoners did not have an initial offender assessment system (OASys) assessment, despite some having been in custody for several months. In the previous nine months, half of all prisoners arriving at Oakwood from local prisons had not had an OASys assessment and plan. To bridge this gap, prison-based offender supervisors made use of a locally designed sentence plan template, to ensure that prisoners had some knowledge of what they needed to do, and in our survey 81% of prisoners said that they knew what they had to do to achieve their targets.
- 4.12** Neither the National Probation Service nor prison-based offender supervisors reviewed OASys assessments either at regular interviews or following an important change in a prisoner's circumstances. This meant that the sentence plan was often out of date, included targets that were no longer relevant, or was missing other, more relevant targets.
- 4.13** The level of cross-deployment of G4S operational offender supervisors was not excessive. G4S offender supervisors managed a range of cases, including those assessed as high risk of harm and those convicted of sex offences. Although caseloads were fairly high, the level of contact with prisoners was good, and better than we often see. Access to offender management unit (OMU) staff was supported by regular wing surgeries and use of the electronic kiosks (see paragraph 2.10), and offender supervisors were responsive to prisoners' requests for contact and help.
- 4.14** Opportunities for prisoners to demonstrate progression were limited, particularly if they were unsuitable for accredited offending behaviour programmes (see paragraph 4.32). This was compounded by a lack of opportunity for one-to-one offence-focused work with offender supervisors.
- 4.15** Prisoners serving an indeterminate sentence (ISPs) were managed by seconded probation officers based in the OMU. They knew the prisoners on their caseload and had good levels of contact with them in the lead-up to parole hearings. A couple of specific residential house

blocks, such as Douglas, provided additional privileges for longer-term prisoners and ISPs, including gym facilities, freezers and cooking facilities, freedom of movement within the house block for a considerable part of the day and evening, and the encouragement to create a community environment. We spoke to several long-term prisoners living on this unit and they all spoke highly about the staff and regime there, and the encouragement for independent living. The prison also held ISP family days and promoted the role of ISP representatives on the house block.

- 4.16** The new national home detention curfew processes had been implemented successfully, resulting in far more prisoners being considered than at the time of the previous inspection. The proportion of applications approved had increased from about 60% to 95% and the timeliness of releases had improved. However, a couple of issues outside of the direct control of the prison continued to affect timeliness in some cases, including the huge increase in demand on accommodation places supplied by Stonham BASS (which provided accommodation and support services to people on bail or home detention curfew who did not have a suitable address in the community). Aggregated monitoring of the timeliness of releases was not undertaken routinely, so it was difficult to see the impact of ongoing obstacles to timely releases.

Recommendations

- 4.17** **The reducing reoffending strategy should set out the important role of offender management and be informed by comprehensive needs analyses which explore the specific needs of the wide range of prisoners held at the establishment.**
- 4.18** **Prisoners should not be transferred to Oakwood without an offender assessment system (OASys) assessment and sentence plan.**

Public protection

- 4.19** Prisoners were screened for public protection concerns on arrival at the establishment. Mail and telephone monitoring was used appropriately and reviewed at regular intervals. Applications for contact with children were managed in line with the public protection manual issued by Her Majesty's Prison and Probation Service (HMPPS) in 2016.
- 4.20** About 70 prisoners convicted of sex offences were due for release in the next three months and half of these had been assessed as presenting a serious risk of harm to others. We reviewed several cases, including some of these high-risk sex offenders, and found some shortfalls in the quality of risk management planning. Some of these deficits were not within the direct control of the OMU but of the community-based offender manager from the National Probation Service. For example, despite some attempts by offender supervisors to liaise with offender managers in the community, there was too little information exchange in the months leading up to release. In some cases, the community-based offender manager did not become involved in risk management planning until the last few weeks before release, which was far too late to be fully effective. Inevitably, this led to a lack of robust planning, with little time left to implement all the actions required to protect others from serious harm and engage the prisoner in their own risk management plan (see main recommendation S54).
- 4.21** In some cases, there was too little evidence of offender supervisors contacting the community-based offender manager in the last six months of the custodial sentence to discuss the ongoing risks and contribute to the development of a plan to manage them. Current arrangements within the prison did not meet the expectations set out in its own

public protection policy. For example, there was no strategic meeting to oversee the work of the interdepartmental risk management team (IRMT). Staff from functions across the prison were invited to attend the IRMT meeting, but over the previous three months the only attendees had been one administrative officer and one first-line manager from within the OMU, which undermined its main purposes of risk management planning and information exchange. Offender supervisors and probation officers were no longer invited to attend, which was another gap (see main recommendation S54).

- 4.22** The scope of the IRMT was also limited, focusing primarily on gathering information about licence conditions and the proposed release address, and this took place only about one month before the prisoner's release. There was an inadequate focus on wider risk management planning across the last six months of custody, including a lack of confirmation of the MAPPA management level (see main recommendation S54).
- 4.23** In cases where the National Probation Service offender manager was more engaged, the quality of risk management planning was better, including the use of MAPPA levels 2 and 3 where deemed appropriate.

Categorisation and transfers

- 4.24** Categorisation reviews were up to date and the process was applied appropriately, with final authorisation provided by the head of the OMU. Most decisions were defensible but some to award category D status had been made without an up-to-date OASys assessment, which was not good practice. We also saw some examples of prisoners being denied a progressive move to open conditions because they had not completed specific offence-focused work, such as a sex offender treatment programme, despite having been assessed as unsuitable for it (see also paragraph 4.32).
- 4.25** Over the previous three months, an average of 25 prisoners a month had moved to an open prison but some waited too long owing to the lack of places in specific open prisons and difficulty in getting transport from HMPPS.
- 4.26** Despite efforts within the OMU to transfer prisoners to category C prisons, it had proved difficult to move prisoners on to complete an accredited sex offender programme owing to the lack of places nationally.

Interventions

Expected outcomes:

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

- 4.27** The community rehabilitation company (CRC) team included a few case workers, and specialist advisers in housing and finance for the more complex cases. Accommodation and finance/debt support was proactive, and we saw evidence of positive outcomes for some prisoners.
- 4.28** Help was provided to terminate or maintain tenancies on arrival at the prison. Further help was given to accessing accommodation on release, although this was difficult in some areas due to the lack of available housing. The proportion of prisoners helped by the prison to secure suitable and sustainable accommodation for their release was not monitored well enough. Although the number of prisoners released homeless was low, CRC staff were concerned about the poor-quality and short-term accommodation provided to some.

- 4.29** A worker from Birmingham Settlement provided specialist financial support and a large number of debts had been suspended over recent months. Bank accounts had been opened for many prisoners over recent months, and they were also helped to set up benefit claims before release.
- 4.30** About 133 prisoners had attended the Chrysalis programme in the previous year. This aimed to improve thinking skills, develop self-confidence, set better priorities for life and improve employment prospects. In addition to this, in-cell victim awareness workbooks were widely used.
- 4.31** Two accredited offending behaviour programmes (the thinking skills programme (TSP) and Resolve) were delivered, providing 190 places a year, including some TSP places for sex offenders. The prioritisation of places was appropriate but the waiting list for TSP had increased sharply and was too long. 'Building Better Relationships' was due to start shortly after the inspection and would provide a much-needed programme for prisoners convicted of domestic violence. The A to Z programme (a motivational and goal-setting programme) had also been piloted with some sex offenders, particularly those whose level of denial was an obstacle to progression.
- 4.32** The establishment was not commissioned by HMPPS to deliver accredited programmes specifically designed for sex offenders. This meant that there was little opportunity for offence-focused work with these prisoners, so many were released without having done this important work. In addition, hardly any prisoners transferred to other prisons to do such a programme, and it was clear that a large proportion would have been unsuitable anyway (see also paragraph 4.24).

Recommendation

- 4.33** **A strategy should be developed for delivering specific offence-focused work to sex offenders, including improved access to accredited programmes and the provision of alternative opportunities for those assessed as unsuitable.**

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.

- 4.34** The demand for resettlement support was high, with about 150 releases each month. The Staffordshire and West Midlands CRC was well integrated into the prison and there was a wide range of partnerships working to support effective resettlement. CRC staff told us that contact with prisoners was not hindered by contractual limitations, and that they were able to work with prisoners with all levels and types of need.
- 4.35** Resettlement help on arrival was provided as needed, and prisoners due for release in the next 12 weeks attended a resettlement session, which normally involved peer workers. From the latter session, resettlement needs were identified and CRC case workers met individuals to address their issues and review their resettlement plan. Prisoners we spoke to confirmed that they found the service helpful and reassuring.
- 4.36** The Resettlement and Advice Line and Peer Helpline (RALPH) was a telephone helpline managed by prisoner peer workers. It was highly effective in promoting access to

resettlement help, alongside answering a range of other queries presented by prisoners, and was well used, dealing with about 215 queries a week in January 2018.

- 4.37** The Oakwood Community Hub was located just outside of the prison. It provided an excellent range of practical support to those being released and their families/ friends, including involvement from a range of partner organisations. It also provided facilities to enable prisoners to contact community-based agencies by telephone or to clarify travel arrangements for reporting to their offender manager. It was well used, with most prisoners choosing to go there for help on release.
- 4.38** A few days before release, prisoners attended a ‘through the gate’ group session held by the CRC, which provided an excellent opportunity for them to prepare for their release day and explore what would be expected of them under their licence conditions. They could also select items of clothing from the store located in the resettlement centre, to ensure that they had adequate and appropriate clothing.

Good practice

- 4.39** *A few days before release, prisoners attended a ‘through the gate’ group session which provided an excellent opportunity for them to prepare for their release day and explore what would be expected of them under their licence conditions.*

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 HMPPS

- 5.1** The National Probation Service should work with the prison to ensure that all prisoners presenting a high risk of serious harm to others have a comprehensive and defensible risk management plan that is delivered well enough ahead of release. (S54)

Main recommendations

To the governor

- 5.2** Staff should be equipped with the skills and confidence to de-escalate incidents, and incidents of use of force should be monitored and quality assured to ensure that de-escalation is used and that force is used only as a last resort. (S52)
- 5.3** The quality of care for prisoners at risk of suicide and self-harm, evidenced in written assessment, care in custody and teamwork (ACCT) processes, should be improved and should focus on the underlying causes of distress. (S53, repeated recommendation S59)

Recommendation

To HMPPS

Reducing risk, rehabilitation and progression

- 5.4** Prisoners should not be transferred to Oakwood without an offender assessment system (OASys) assessment and sentence plan. (4.18)

Recommendations

To the governor

Managing behaviour

- 5.5** A violence reduction strategy should be developed which sets out the reasons for violence, the progress made and the work still to be done. (1.16)
- 5.6** The prison should investigate prisoners' negative perceptions of the incentives and earned privileges scheme and ensure that it provides equitable opportunities to progress and regress through the levels. (1.17)
- 5.7** Prisoners requiring multiple staff for unlocking should be subject to a formal risk assessment and regular review. (1.29)
- 5.8** Time in the open air for segregated prisoners should be individually risk assessed, to allow them to exercise together when this is appropriate. (1.30)

Security

- 5.9** Suitability assessments for peer workers should be comprehensive and rigorous, and include an offending behaviour assessment. (1.38)
- 5.10** The prison should have an up-to-date drug supply reduction strategy to direct and support the supply reduction action plan. (1.39)
- 5.11** Closed visits should only be used when there is evidence that a prisoner has abused visits arrangements. (1.40, repeated recommendation 1.45)

Safeguarding

- 5.12** The decrease in the number of referrals to Listeners should be investigated, to determine whether prisoners in need of a Listener are being denied access or are not aware of the service, and any remedial action identified should be taken. (1.49)
- 5.13** Residential staff should be aware of adult safeguarding procedures and competent in identifying and referring prisoners who should be considered for an intervention. (1.53)

Daily life

- 5.14** Cell call bell response times should be monitored routinely, to ensure timely responses. (2.12)
- 5.15** Lunch should not be served before noon, and the evening meal not before 5pm. (2.17)

Equality, diversity and faith

- 5.16** The prison should explore the reasons behind the poor survey results from black and minority ethnic prisoners concerning respectful treatment by staff. (2.35)
- 5.17** The reasons why, in our survey, prisoners with disabilities felt less safe than able-bodied prisoners should be explored. (2.36)
- 5.18** All staff should be able to identify prisoners with a personal emergency evacuation plan and their particular needs. (2.37)

Health, well-being and social care

- 5.19** Prisoners should have timely access to required external hospital appointments. (2.66)
- 5.20** A memorandum of understanding, describing how social care will be delivered for prisoners, should be established formally between the prison, local authority and care provider. (2.71)
- 5.21** Requests for mental health practitioners to attend assessment, care in custody and teamwork (ACCT) reviews should be prioritised. (2.78)
- 5.22** Patients requiring a transfer to external mental health facilities should be transferred within the current transfer guidelines of 14 days. (2.79)
- 5.23** Prisoners with drug and alcohol problems should have ready access to a greater range of psychosocial interventions and peer support, independent of location. (2.86)

- 5.24** Closer collaborative working arrangements between the psychosocial and clinical treatment teams should be established, to ensure optimum outcomes for prisoners. (2.87)
- 5.25** Pharmacy staffing should reflect patient need and include a dedicated pharmacist to provide enhanced governance and direct advice to patients. (2.94)
- 5.26** Prisoners should consistently receive their prescribed medication on time, without gaps in provision. (2.95)
- 5.27** Prisoners should receive timely access to routine dental assessment and care. (2.99)

Education, skills and work activities

- 5.28** Prisoners' attendance at appointments during the working day should be carefully monitored, to ensure that prisoners return to activities once their appointment is finished. (3.23)
- 5.29** The technical difficulties with the virtual campus should be resolved, so that it can be used to help prisoners to find work after their release. (3.24)
- 5.30** Additional training and development support for teachers of English and mathematics should be provided, to ensure consistently effective provision in these subjects. (3.33)
- 5.31** Prisoners should be able to benefit from vocational qualifications and higher-level skills development opportunities during workshops activities. (3.34)
- 5.32** Prisoners' achievements in English and mathematics at levels 1 and 2 should be improved. (3.41)

Reducing risk, rehabilitation and progression

- 5.33** The reducing reoffending strategy should set out the important role of offender management and be informed by comprehensive needs analyses which explore the specific needs of the wide range of prisoners held at the establishment. (4.17)

Interventions

- 5.34** A strategy should be developed for delivering specific offence-focused work to sex offenders, including improved access to accredited programmes and the provision of alternative opportunities for those assessed as unsuitable. (4.33)

Examples of good practice

Managing behaviour

- 5.35** The joint peer- and staff-led interventions provided on Chestnut and Willow wings provided a range of structured interventions to manage poor behaviour. (1.18)

Daily life

- 5.36** An impressive range of peer-led initiatives contributed to the living experience of prisoners and assisted staff in providing support and advice. (2.22)

- 5.37** Applications were tracked and monitored electronically, which made the system easy for prisoners to use. (2.23)

Equality, diversity and faith

- 5.38** Project Unite provided an excellent way for all prisoners and staff to learn about and understand the Muslim faith, and support and meditation offered to prisoners and staff by the project was a worthwhile addition to faith provision. (2.42)

Health, well-being and social care

- 5.39** The prisoner-led health advisory service offered practical and immediate support which was well received by prisoners. (2.54)
- 5.40** The patient engagement coordinator's approach in responding to issues raised by prisoners through face-to-face clinics was a constructive and effective approach to providing timely and sensitive resolution to concerns. (2.55)

Time out of cell

- 5.41** A prisoner-led project provided tuition and access to materials for those who wanted to undertake arts and crafts projects in their cells and to sell their products for charity. (3.11)

Children and families and contact with the outside world

- 5.42** The provision for prisoners to maintain their family ties was extensive, with an excellent range of visits and other activities. (4.8)

Release planning

- 5.43** A few days before release, prisoners attended a 'through the gate' group session which provided an excellent opportunity for them to prepare for their release day and explore what would be expected of them under their licence conditions. (4.39)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy Chief Inspector
Alison Perry	Team leader
Paul Rowlands	Inspector
Sandra Fieldhouse	Inspector
Jonathan Tickner	Inspector
Karen Dillon	Inspector
Andrew Rooke	Inspector
Keith Humphries	Inspector
Joe Simpson	Researcher
Helen Ranns	Researcher
Patricia Taflan	Researcher
Emily Spilman	Researcher
Steve Eley	Lead health and social care inspector
Sigrid Engelen	Health and social care inspector
Noor Mohamed	Pharmacist
Matt Tedstone	Care Quality Commission inspector
Aimee Everett	Care Quality Commission inspector
Jai Sharda	Ofsted inspector
Steve Oliver-Watts	Ofsted inspector
Suzanne Wainwright	Ofsted inspector

Appendix II: Progress on recommendations from the last report

The following is a summary of the main findings from the last report and a list of all the recommendations made, organised under the four tests of a healthy prison. The reference numbers at the end of each recommendation refer to the paragraph location in the previous report. If a recommendation has been repeated in the main report, its new paragraph number is also provided. 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, reception (admissions) and first night processes were good. Prisoners were supported and there was an appropriate focus on risk. Levels of violence had reduced and most prisoners felt safe, although less so on Ash wing. Levels of victimisation by other prisoners were high. Understanding and management of safety issues had improved and the use of prisoners to provide mentoring and mediation was impressive. Levels of self-harm were relatively high and the quality of assessment, care in custody and teamwork (ACCT) documents was poor. Security arrangements were mostly proportionate. Despite a robust supply reduction strategy, illicit drugs were easily available. The levels of use of force and of segregation were high. We were not assured that force was always used as a last resort. Substance misuse services were very good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

Main recommendations

There should be a review undertaken and published of the difficulties Oakwood and other recently opened prisons experienced after they opened; and the lessons learned factored into plans for the opening of other new establishments. (S57)

Achieved

Only prisoners requiring the segregation and protection of a vulnerable prisoner wing should be located on Ash wing and their allocation should be subject to review. Bullying and intimidation should be addressed and action should be taken to make the wing safer. (S58)

Achieved

The quality of care for prisoners at risk of suicide and self-harm, evidenced in written assessment, care in custody and teamwork (ACCT) processes, should be improved and should focus on the underlying causes of distress. (S59)

Not achieved (recommendation repeated, S53)

Incidents of use of force should be monitored and quality assured to ensure that de-escalation is employed and that force is only used as a last resort. All complaints about excessive force should be thoroughly investigated. (S60)

Partially achieved

Recommendations

All induction cells should be clean and well decorated before being occupied. (1.13)

Achieved

The quality of antisocial behaviour books and support plans should be improved, to challenge poor behaviour and support victims. (1.22)

Achieved

The exceptional circumstances to approve the location of prisoners on ACCT documents on the segregation unit should be better evidenced in assessments. (1.30)

Achieved

Local safeguarding adults processes should be developed further and wing staff should be more aware of the procedures. (1.35)

Not achieved

Prisoners should only be strip-searched when there is specific intelligence to suggest that it is necessary. (1.44)

Achieved

Closed visits should only be used when there is evidence that a prisoner has abused visits arrangements. (1.45)

Not achieved (recommendation repeated, 1.40)

The regime for those on the basic regime should be improved to include the opportunity for at least one hour in the open air and access to association. (1.51)

Not achieved

There should be a quality assurance process for adjudications which results in learning for all staff involved in adjudications. (1.56)

Achieved

The prison should investigate the reasons for the high rates of segregation, the volume of transfers out of the segregation unit and poor prisoner perceptions about the unit, and take step to improve outcomes. (1.66)

Partially achieved

Staff working in the segregation unit should receive additional training and support to help them care for challenging prisoners. (1.67)

Achieved

Management oversight of the segregation unit should be improved and staff should not refuse prisoners access to telephones, exercise or any other regime element without the recorded authority of a first-line manager. (1.68)

Achieved

The prison should consider creating a drug-free area better to support prisoners choosing abstinence. (1.75)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

*At the last inspection, in 2014, the quality of communal and residential accommodation was very high. Access to clean clothes and toiletry items had improved and was adequate. The applications system was supported by an effective prisoner-run helpline. Staff–prisoner relationships had developed well and were good. The management of equality and diversity had been strengthened and was now reasonable, but the perceptions of black and minority ethnic and Muslim prisoners were more negative than the population as a whole, and there was not enough specific consultation with these groups. The number of complaints submitted had reduced considerably but too many were not investigated adequately. Health services had improved substantially and were reasonable but prisoner perceptions remained very negative. There was insufficient mental health provision. Food and shop arrangements were satisfactory. **Outcomes for prisoners were reasonably good against this healthy prison test.***

Main recommendation

Regular consultation arrangements with black and minority ethnic prisoners, Muslims and prisoners with a disability should be put in place and action taken to improve the perceptions and outcomes for these groups. (S61)

Achieved

Recommendations

The applications system should be improved with a tracking system and quality assurance. (2.8, repeated recommendation 2.12)

Achieved

Prisoner council representatives should be provided with T-shirts to identify them and which promote their role. (2.14)

Achieved

Community organisations should be involved in helping to develop equality and diversity practice. (2.21)

Achieved

Paid carers should receive training for their role and the carer scheme should have better oversight from staff. (2.32)

Achieved

Older prisoners and those with disabilities who are not attending work and are unlocked during the day should be provided with recreational activity. (2.33)

Achieved

The prison should ensure that all prisoners who wish to attend services can do so, and on time, subject to a risk assessment. (2.39, repeated recommendation 2.48)

Achieved

All formal complaints from prisoners, including complaints about staff, should be fully investigated and provide a comprehensive response that answers all the issues raised. (2.43)

Achieved

Legal mail opened in error should be fully recorded in one central log. (2.47)

Achieved

The delivery of legal mail to prisoners should not be delayed. (2.48)

Achieved

Health services staff should be able to communicate easily with prisoners via the custody management system and be able to document directly into P-Nomis prisoner records. (2.66)

Achieved

Prisoners should have timely access to required external hospital appointments. (2.67)

Not achieved

Prisoners should consistently receive their prescribed medication on time, without gaps in provision, and effective communication between health services and Lloyds staff should support this. (2.75)

Not achieved

Suitable documented risk assessments should be carried out for all in-possession medication. (2.76)

Achieved

Prisoners should be able to collect their medication in private, with adequate confidentiality. (2.77)

Achieved

Prisoners should be able to access simple medication easily and safely when the health care department is closed. (2.78)

Achieved

All prisoners should have access to routine NHS-equivalent dental care, regardless of time left in prison. (2.84)

Achieved

Prisoners should have timely access to a full range of care-planned support, including multidisciplinary care programme approach reviews. (2.90)

Achieved

Patients requiring transfer to external mental health facilities should be transferred within Department of Health timeframe guidelines. (2.91)

Not achieved

Prisoners should be able to dine communally. (2.97)

Not achieved

Prisoners should not be charged an administration fee when they make catalogue purchases. (2.102)

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, the amount of time out of cell for most was good. Learning and skills provision had improved but was still a work in progress. The number of activity places had increased and most prisoners were engaged in full- or part-time activity, although the quality of much of the available work was mundane. Prisoner peer support roles provided good opportunities but their supervision was inadequate. Standards of teaching and learning were too variable and not enough was good. Levels of progress and educational and vocational achievements also required improvement. The quality of gym and library resources was good but they were underused. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

Main recommendation

The number of high-quality work places should be increased. Standards of teaching and learning and the level of achievements should be improved. (S62)

Achieved

Recommendations

All prisoners should have access to at least one hour's exercise each day. (3.5, repeated recommendation 3.4)

Not achieved

The prison should evaluate the qualitative aspects of the learning, skills and work provision more extensively from day to day and during self-assessment to identify successful and unsuccessful practice and how to improve it. (3.15)

Achieved

The pay structure in education should be equitable with that in other purposeful activity areas. (3.16, repeated recommendation 3.18)

Achieved

All teaching staff should be trained in, and confident about, promoting equality and diversity during learning sessions. (3.17)

Achieved

All purposeful activity in workshops should be thoroughly risk assessed and the use of personal protective equipment fully enforced. (3.18)

Achieved

The curriculum should be expanded further to include a greater proportion of level 3 courses. (3.23)

Achieved

A greater range of vocational training places for vulnerable prisoners should be provided. (3.24)

Achieved

Prisoners with mentoring and coordination roles should receive appropriate training and accreditation and should be supervised effectively. (3.25)

Achieved

Functional mathematics and employability should be included seamlessly in a wide range of education and vocational training courses. (3.34)

Achieved

The prison should review and improve the use of individual learning plans and ensure that all prisoners are set short-, medium- and long-term targets that they understand, work towards, achieve and value. (3.35)

Achieved

The education and training provider should improve the quality of verbal and written feedback to prisoners to ensure that they understand how to progress and improve. (3.36)

Achieved

The additional learning support provision should be integrated better and used more effectively to promote and support learning in classroom sessions. (3.37)

Achieved

Initial advice and guidance should ensure that prisoners understand better each course's requirements and potential benefits, to promote their involvement in the appropriate learning activities. (3.38)

Achieved

The number of prisoners who progress between successive levels of learning and along structured learning pathways should be increased significantly. (3.44)

Achieved

Prisoners' attendance at all learning sessions should be improved further. (3.45)

Achieved

The library service should produce and analyse comprehensive datasets on prisoner visits and lending to identify trends and improvement actions. (3.49)

Achieved

Library service staff should promote the library more effectively and more widely to increase prisoners' access to, and usage of, the facility. (3.50)

Achieved

The prison should increase the size of the gym so that a much greater percentage of the prison population can use it. (3.57)

Achieved

The prison should plan and carry out formal observations of teaching and learning for all PE staff who teach training courses. (3.58)

Achieved

Links between 'Second Chance' and the National Careers Service should be created, to maximise resettlement opportunities and to avoid unnecessary duplication of effort. (3.59)

No longer relevant

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 strategic management of resettlement had been strengthened and was good. The backlog of prisoner assessments remained but offender management, and contact with prisoners, had improved. The quality of assessments was adequate but sentence planning was underdeveloped. Too many home detention curfew assessments were late. Public protection arrangements were mostly sound but engagement from offender managers was weak. Reintegration planning was very good. Most pathway work was effective but education, training and employment provision needed improvement. **Outcomes for prisoners were reasonably good against this healthy prison test.***

Main recommendation

Communication from community offender managers before release should be improved to enable more effective pre-release planning, particularly for high-risk prisoners. (4.21)

Not achieved

Recommendations

All prisoners should have an offender assessment system (OASys) assessment and sentence plan. (4.15)

Not achieved

The prison should initiate a strategic relationship with local Probation Services to address issues of planning and communication. (4.16)

Not achieved

HDC decisions should be made before a prisoner reaches his eligibility date. (4.17)

Not achieved

Subject to appropriate risk assessments, the good initiative to liaise with an open prison should be continued, to provide regular events for prisoners about living in open conditions. (4.29)

Not achieved

A full programme of employment, training and education courses should be developed and tailored to prisoners' needs before their release. (4.39)

Achieved

The virtual campus should be used to provide job search opportunities. (4.40)

Not achieved

National Careers Service staff should be competent in the best use of the virtual campus facility. (4.41)

Achieved

Managers should investigate the need for additional visits capacity at weekends. (4.55)

Achieved

Access to enhanced family visit days should be extended to all prisoners. (4.56)

Achieved

Appendix III: Prison population profile

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

Status	18–20-year-olds	21 and over	%
Sentenced		1953	94.3
Recall		115	5.6
Convicted unsentenced			
Remand			
Civil prisoners			
Detainees		1	0.1
Total		2069	100

Sentence	18–20-year-olds	21 and over	%
Unsentenced			
Less than six months			
six months to less than 12 months		61	2.9
12 months to less than 2 years		198	9.6
2 years to less than 4 years		555	26.8
4 years to less than 10 years		837	40.4
10 years and over (not life)		274	13.2
ISPP (indeterminate sentence for public protection)		39	1.9
Life		105	7
Total		2069	100

Age	Number of prisoners	%
Please state minimum age here: 21		
Under 21 years		
21 years to 29 years	637	30.8
30 years to 39 years	663	32
40 years to 49 years	411	19.9
50 years to 59 years	199	9.6
60 years to 69 years	104	5
70 plus years	55	2.7
Please state maximum age here: 89		
Total	2069	100

Nationality	18–20-year-olds	21 and over	%
British		1949	94.2
Foreign nationals		117	5.7
Not Stated		3	.1
Total		2069	100

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced			
Uncategorised sentenced			
Category A			
Category B			
Category C		2005	96.9
Category D		63	3
Other		1	1
Total		2069	100

Ethnicity	18–20-year-olds	21 and over	%
White			
British		1396	67.5
Irish		14	0.7
Gypsy/Irish Traveller		25	1.2
Other white		46	2.2
		1,481	71.5
Mixed			
White and black Caribbean		87	4.2
White and black African		6	0.2
White and Asian		11	0.5
Other mixed		11	0.5
		115	5.5
Asian or Asian British			
Indian		54	2.6
Pakistani		146	7
Bangladeshi		13	0.62
Chinese		1	0.1
Other Asian		30	1.44
		244	11.7
Black or black British			
Caribbean		140	6.7
African		43	2
Other black		29	1.5
		212	10.2
Other ethnic group			
Arab		3	0.14
Other ethnic group		9	0.43
		12	0.57
Not stated			
Total		2069	100

Religion	18–20-year-olds	21 and over	%
Baptist		1	0.04
Church of England		311	15
Roman Catholic		239	11.5
Other Christian denominations		312	15
Muslim		327	15.8
Sikh		26	1.25
Hindu		7	0.33
Buddhist		40	1.9
Jewish		12	0.57
Other		67	3.23
No religion		720	34.79
Total		2069	100

Sentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month			201	9.7
1 month to 3 months			427	20.6
3 months to six months			431	20.8
six months to 1 year			519	25.1
1 year to 2 years			366	17.7
2 years to 4 years			98	4.7
4 years or more			25	1.2
Total			2067	100

Sentenced prisoners only

	18–20-year-olds	21 and over	%
Foreign nationals detained post sentence expiry		2	0.1
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions).			
Total		2	0.1

Appendix IV: Photographs

The wide range of prisoner-led initiatives.



A typical single cell that had been 'doubled' to hold two prisoners.



The impressive and well-maintained external areas.



The main entrance at the front of the prison.



A typical exceptionally clean and tidy landing



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.¹³

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.¹⁴ 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.¹⁵ 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 26 February 2018, the prisoner population at HMP Oakwood was 2,071. Using the sampling method described above, questionnaires were distributed to 238 prisoners. We received a total of 206 completed questionnaires, a response rate of 87%. This included one questionnaire completed via face-to-face interview. Nine prisoners declined to participate in the survey and 23 questionnaires were either not returned at all, or returned blank.

¹³ Qualitative analysis of these written comments is undertaken by HMI Prisons researchers and used by inspectors.

¹⁴ 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments).

¹⁵ 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/hmiprison/about-our-inspections/>

Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for HMP Oakwood. For the comparator analyses, each question was reformulated into a binary 'yes/no' format and affirmative responses compared.¹⁶ Missing responses have been excluded from all analyses.

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 Oakwood 2018 compared with those from other HMIP surveys¹⁷

- Survey responses from HMP Oakwood in 2018 compared with survey responses from the most recent inspection at all other category C training prisons.
- Survey responses from HMP Oakwood in 2018 compared with survey responses from other local prisons inspected since September 2017.
- Survey responses from HMP Oakwood in 2018 compared with survey responses from HMP Oakwood in 2014.

Comparisons between different residential locations within HMP Oakwood 2018

- Responses of prisoners on the vulnerable prisoner unit (Ash wing) compared with those from the rest of the establishment.

Comparisons between sub-populations of prisoners within HMP Oakwood 2018¹⁸

- White prisoners' responses compared with those of prisoners from black or 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.
- Responses of prisoners aged 25 and under compared with those over 25.

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group.¹⁹

In the comparator analyses, statistically significant differences are indicated by shading.²⁰ 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.

¹⁶ Using the Chi-square test (or Fisher's exact test if there are fewer than five responses in a group).

¹⁷ 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.

¹⁸ These analyses are carried out on summary data from selected survey questions only.

¹⁹ A minimum of 10 responses which must also represent at least 10% of the total response.

²⁰ 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

Background information

I.1	What wing or house block are you currently living on?	
	House block A	68 (33%)
	House block B.....	63 (31%)
	House block C.....	55 (27%)
	House block D.....	9 (4%)
	House block E.....	8 (4%)
	Segregation unit.....	3 (1%)
I.2	How old are you?	
	Under 21	0 (0%)
	21 - 25.....	28 (14%)
	26 - 29.....	30 (15%)
	30 - 39.....	73 (36%)
	40 - 49.....	40 (20%)
	50 - 59.....	16 (8%)
	60 - 69.....	12 (6%)
	70 or over	5 (2%)
I.3	What is your ethnic group?	
	White - English/ Welsh/ Scottish/ Northern Irish/ British	136 (67%)
	White - Irish.....	3 (1%)
	White - Gypsy or Irish Traveller.....	2 (1%)
	White - any other White background	5 (2%)
	Mixed - White and Black Caribbean.....	13 (6%)
	Mixed - White and Black African	0 (0%)
	Mixed - White and Asian.....	2 (1%)
	Mixed - any other Mixed ethnic background	0 (0%)
	Asian/ Asian British - Indian.....	4 (2%)
	Asian/ Asian British - Pakistani.....	17 (8%)
	Asian/ Asian British - Bangladeshi.....	1 (0%)
	Asian/ Asian British - Chinese.....	1 (0%)
	Asian - any other Asian Background	1 (0%)
	Black/ Black British - Caribbean.....	11 (5%)
	Black/ Black British - African	4 (2%)
	Black - any other Black/ African/ Caribbean background.....	2 (1%)
	Arab.....	1 (0%)
	Any other ethnic group	1 (0%)
I.4	How long have you been in this prison?	
	Less than 6 months.....	56 (28%)
	6 months or more	142 (72%)
I.5	Are you currently serving a sentence?	
	Yes	183 (91%)
	Yes - on recall.....	18 (9%)
	No - on remand or awaiting sentence.....	0 (0%)
	No - immigration detainee.....	1 (0%)

1.6	How long is your sentence?	
	Less than 6 months.....	2 (1%)
	6 months to less than 1 year.....	14 (7%)
	1 year to less than 4 years.....	66 (33%)
	4 years to less than 10 years.....	81 (40%)
	10 years or more.....	22 (11%)
	IPP (indeterminate sentence for public protection).....	4 (2%)
	Life.....	11 (5%)
	Not currently serving a sentence.....	1 (0%)

Arrival and reception

2.1	Were you given up-to-date information about this prison before you came here?	
	Yes.....	39 (19%)
	No.....	154 (77%)
	Don't remember.....	8 (4%)
2.2	When you arrived at this prison, how long did you spend in reception?	
	Less than 2 hours.....	73 (36%)
	2 hours or more.....	115 (57%)
	Don't remember.....	13 (6%)
2.3	When you were searched in reception, was this done in a respectful way?	
	Yes.....	167 (85%)
	No.....	17 (9%)
	Don't remember.....	13 (7%)
2.4	Overall, how were you treated in reception?	
	Very well.....	52 (26%)
	Quite well.....	122 (61%)
	Quite badly.....	15 (7%)
	Very badly.....	5 (2%)
	Don't remember.....	7 (3%)
2.5	When you first arrived here, did you have any of the following problems?	
	Problems getting phone numbers.....	61 (31%)
	Contacting family.....	41 (21%)
	Arranging care for children or other dependants.....	5 (3%)
	Contacting employers.....	7 (4%)
	Money worries.....	41 (21%)
	Housing worries.....	24 (12%)
	Feeling depressed.....	62 (31%)
	Feeling suicidal.....	17 (9%)
	Other mental health problems.....	49 (25%)
	Physical health problems.....	27 (14%)
	Drug or alcohol problems (e.g. withdrawal).....	25 (13%)
	Problems getting medication.....	59 (30%)
	Needing protection from other prisoners.....	13 (7%)
	Lost or delayed property.....	33 (17%)
	Other problems.....	21 (11%)
	Did not have any problems.....	52 (26%)
2.6	Did staff help you to deal with these problems when you first arrived?	
	Yes.....	42 (21%)
	No.....	103 (52%)
	Did not have any problems when I first arrived.....	52 (26%)

First night and induction

3.1	Before you were locked up on your first night here, were you offered any of the following things?			
	Tobacco or nicotine replacement.....			134 (67%)
	Toiletries / other basic items			128 (64%)
	A shower.....			119 (60%)
	A free phone call			135 (68%)
	Something to eat			163 (82%)
	The chance to see someone from health care.....			125 (63%)
	The chance to talk to a Listener or Samaritans.....			61 (31%)
	Support from another prisoner (e.g. Insider or buddy).....			58 (29%)
	Wasn't offered any of these things			9 (5%)
3.2	On your first night in this prison, how clean or dirty was your cell?			
	Very clean			20 (10%)
	Quite clean			90 (45%)
	Quite dirty			54 (27%)
	Very dirty			35 (17%)
	Don't remember			2 (1%)
3.3	Did you feel safe on your first night here?			
	Yes			158 (79%)
	No.....			38 (19%)
	Don't remember			4 (2%)
3.4	In your first few days here, did you get:			
		Yes	No	Don't remember
	Access to the prison shop / canteen?	97 (49%)	91 (46%)	10 (5%)
	Free PIN phone credit?	79 (41%)	100 (52%)	12 (6%)
	Numbers put on your PIN phone?	101 (55%)	72 (39%)	12 (6%)
3.5	Did your induction cover everything you needed to know about this prison?			
	Yes			112 (57%)
	No.....			80 (40%)
	Have not had an induction.....			6 (3%)

On the wing

4.1	Are you in a cell on your own?		
	Yes		113 (56%)
	No, I'm in a shared cell or dormitory.....		88 (44%)
4.2	Is your cell call bell normally answered within 5 minutes?		
	Yes		43 (22%)
	No.....		137 (70%)
	Don't know.....		16 (8%)
	Don't have a cell call bell.....		1 (1%)

4.3	Please answer the following questions about the wing or house block you are currently living on:			
		Yes	No	Don't know
	Do you normally have enough clean, suitable clothes for the week?	153 (76%)	48 (24%)	1 (0%)
	Can you shower every day?	196 (98%)	2 (1%)	1 (1%)
	Do you have clean sheets every week?	144 (73%)	51 (26%)	3 (2%)
	Do you get cell cleaning materials every week?	99 (49%)	99 (49%)	3 (1%)
	Is it normally quiet enough for you to relax or sleep at night?	140 (70%)	58 (29%)	3 (1%)
	Can you get your stored property if you need it?	50 (25%)	84 (42%)	64 (32%)

4.4	Normally, how clean or dirty are the communal / shared areas of your wing or house block (landings, stairs, wing showers etc.)?		
	Very clean		44 (22%)
	Quite clean		119 (59%)
	Quite dirty		30 (15%)
	Very dirty		10 (5%)

Food and canteen

5.1	What is the quality of food like in this prison?		
	Very good.....		0 (0%)
	Quite good.....		57 (28%)
	Quite bad		79 (39%)
	Very bad		65 (32%)
5.2	Do you get enough to eat at mealtimes?		
	Always.....		11 (5%)
	Most of the time.....		32 (16%)
	Some of the time.....		85 (42%)
	Never		76 (37%)
5.3	Does the shop / canteen sell the things that you need?		
	Yes		137 (68%)
	No.....		59 (29%)
	Don't know.....		6 (3%)

Relationships with staff

6.1	Do most staff here treat you with respect?		
	Yes		149 (74%)
	No.....		53 (26%)
6.2	Are there any staff here you could turn to if you had a problem?		
	Yes		144 (72%)
	No.....		57 (28%)
6.3	In the last week, has any member of staff talked to you about how you are getting on?		
	Yes		57 (28%)
	No.....		147 (72%)

6.4	How helpful is your personal or named officer?	
	Very helpful.....	31 (16%)
	Quite helpful.....	43 (22%)
	Not very helpful.....	21 (11%)
	Not at all helpful.....	32 (16%)
	Don't know.....	26 (13%)
	Don't have a personal / named officer	44 (22%)
6.5	How often do you see prison governors, directors or senior managers talking to prisoners?	
	Regularly.....	27 (14%)
	Sometimes.....	35 (18%)
	Hardly ever.....	128 (65%)
	Don't know.....	7 (4%)
6.6	Do you feel that you are treated as an individual in this prison?	
	Yes.....	84 (43%)
	No.....	113 (57%)
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	
	Yes, and things sometimes change.....	33 (16%)
	Yes, but things don't change.....	67 (33%)
	No.....	78 (39%)
	Don't know.....	24 (12%)

Faith

7.1	What is your religion?	
	No religion.....	69 (34%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	73 (36%)
	Buddhist.....	5 (2%)
	Hindu.....	1 (0%)
	Jewish.....	2 (1%)
	Muslim.....	35 (17%)
	Sikh.....	1 (0%)
	Other	15 (7%)
7.2	Are your religious beliefs respected here?	
	Yes.....	94 (46%)
	No.....	28 (14%)
	Don't know.....	12 (6%)
	Not applicable (no religion).....	69 (34%)
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	
	Yes.....	103 (51%)
	No.....	12 (6%)
	Don't know.....	18 (9%)
	Not applicable (no religion).....	69 (34%)
7.4	Are you able to attend religious services, if you want to?	
	Yes.....	120 (59%)
	No.....	10 (5%)
	Don't know.....	4 (2%)
	Not applicable (no religion).....	69 (34%)

Contact with family and friends

8.1	Have staff here encouraged you to keep in touch with your family / friends?	
	Yes	64 (31%)
	No	140 (69%)
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	115 (56%)
	No	89 (44%)
8.3	Are you able to use a phone every day (if you have credit)?	
	Yes	198 (98%)
	No	5 (2%)
8.4	How easy or difficult is it for your family and friends to get here?	
	Very easy	26 (13%)
	Quite easy	66 (32%)
	Quite difficult	54 (26%)
	Very difficult	45 (22%)
	Don't know	13 (6%)
8.5	How often do you have visits from family or friends?	
	More than once a week	7 (3%)
	About once a week	39 (19%)
	Less than once a week	102 (51%)
	Not applicable (don't get visits)	53 (26%)
8.6	Do visits usually start and finish on time?	
	Yes	95 (66%)
	No	48 (34%)
8.7	Are your visitors usually treated respectfully by staff?	
	Yes	106 (75%)
	No	36 (25%)

Time out of cell

9.1	Do you know what the unlock and lock-up times are supposed to be here (or roll check times if you are in an open prison)?	
	Yes, and these times are usually kept to	127 (63%)
	Yes, but these times are not usually kept to	62 (31%)
	No	12 (6%)
9.2	How long do you usually spend out of your cell on a typical weekday (including time spent at education, work etc.)?	
	Less than 2 hours	24 (12%)
	2 to 6 hours	46 (24%)
	6 to 10 hours	76 (39%)
	10 hours or more	38 (19%)
	Don't know	11 (6%)
9.3	How long do you usually spend out of your cell on a typical Saturday or Sunday?	
	Less than 2 hours	27 (13%)
	2 to 6 hours	74 (37%)
	6 to 10 hours	84 (42%)
	10 hours or more	5 (2%)
	Don't know	11 (5%)

9.4	How many days in a typical week do you have time to do domestics (shower, clean cell, use the wing phones etc.)?		
	None	4 (2%)	
	1 or 2	24 (12%)	
	3 to 5.....	25 (12%)	
	More than 5.....	131 (65%)	
	Don't know.....	17 (8%)	
9.5	How many days in a typical week do you get association, if you want it?		
	None	7 (3%)	
	1 or 2	6 (3%)	
	3 to 5.....	14 (7%)	
	More than 5.....	164 (81%)	
	Don't know.....	11 (5%)	
9.6	How many days in a typical week could you go outside for exercise, if you wanted to?		
	None	4 (2%)	
	1 or 2	9 (4%)	
	3 to 5.....	21 (10%)	
	More than 5.....	157 (78%)	
	Don't know.....	11 (5%)	
9.7	Typically, how often do you go to the gym?		
	Twice a week or more	107 (52%)	
	About once a week.....	23 (11%)	
	Less than once a week.....	12 (6%)	
	Never	62 (30%)	
9.8	Typically, how often do you go to the library?		
	Twice a week or more	6 (3%)	
	About once a week.....	83 (41%)	
	Less than once a week.....	33 (16%)	
	Never	82 (40%)	
9.9	Does the library have a wide enough range of materials to meet your needs?		
	Yes	62 (32%)	
	No.....	52 (27%)	
	Don't use the library	82 (42%)	

Applications, complaints and legal rights

10.1	Is it easy for you to make an application?		
	Yes.....	155 (77%)	
	No.....	37 (18%)	
	Don't know.....	9 (4%)	
10.2	If you have made any applications here, please answer the questions below:		
		Yes	No
			Not made any applications
	Are applications usually dealt with fairly?	95 (49%)	76 (39%)
	Are applications usually dealt with within 7 days?	93 (50%)	71 (38%)
			23 (12%)
			23 (12%)

10.3	Is it easy for you to make a complaint?				
	Yes			146 (72%)	
	No			38 (19%)	
	Don't know			18 (9%)	
10.4	If you have made any complaints here, please answer the questions below:				
		Yes	No	Not made any complaints	
	Are complaints usually dealt with fairly?	54 (28%)	85 (44%)	55 (28%)	
	Are complaints usually dealt with within 7 days?	52 (29%)	75 (41%)	55 (30%)	
10.5	Have you ever been prevented from making a complaint here when you wanted to?				
	Yes			34 (18%)	
	No			127 (65%)	
	Not wanted to make a complaint			33 (17%)	
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 or legal representative?	91 (46%)	36 (18%)	44 (22%)	27 (14%)
	Attend legal visits?	110 (58%)	21 (11%)	38 (20%)	22 (12%)
	Get bail information?	20 (11%)	29 (15%)	67 (36%)	72 (38%)
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?				
	Yes				90 (46%)
	No				65 (33%)
	Not had any legal letters				41 (21%)

Health care

11.1	How easy or difficult is it to see the following people?	Very easy	Quite easy	Quite difficult	Very difficult	Don't know
	Doctor	0 (0%)	25 (12%)	76 (38%)	88 (44%)	13 (6%)
	Nurse	15 (8%)	75 (38%)	60 (30%)	36 (18%)	12 (6%)
	Dentist	2 (1%)	23 (11%)	55 (27%)	92 (46%)	29 (14%)
	Mental health workers	0 (0%)	17 (9%)	35 (18%)	72 (36%)	74 (37%)
11.2	What do you think of the quality of the health service from the following people?	Very good	Quite good	Quite bad	Very bad	Don't know
	Doctor	9 (5%)	62 (31%)	46 (23%)	42 (21%)	41 (21%)
	Nurse	26 (13%)	79 (40%)	41 (21%)	26 (13%)	26 (13%)
	Dentist	17 (9%)	45 (23%)	34 (17%)	37 (19%)	66 (33%)
	Mental health workers	8 (4%)	25 (13%)	23 (12%)	38 (19%)	102 (52%)
11.3	Do you have any mental health problems?					
	Yes					87 (43%)
	No					115 (57%)
11.4	Have you been helped with your mental health problems in this prison?					
	Yes					26 (13%)
	No					59 (30%)
	Don't have any mental health problems					115 (58%)

11.5	What do you think of the overall quality of the health services here?	
	Very good.....	9 (5%)
	Quite good.....	57 (29%)
	Quite bad	57 (29%)
	Very bad	54 (27%)
	Don't know.....	22 (11%)

Other support needs

12.1	Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?	
	Yes	68 (34%)
	No.....	134 (66%)
12.2	If you have a disability, are you getting the support you need?	
	Yes	22 (11%)
	No.....	42 (21%)
	Don't have a disability	134 (68%)
12.3	Have you been on an ACCT in this prison?	
	Yes	27 (14%)
	No.....	170 (86%)
12.4	If you have been on an ACCT in this prison, did you feel cared for by staff?	
	Yes	14 (7%)
	No.....	11 (6%)
	Have not been on an ACCT in this prison.....	170 (87%)
12.5	How easy or difficult is it for you to speak to a Listener, if you need to?	
	Very easy	25 (13%)
	Quite easy	51 (26%)
	Quite difficult	11 (6%)
	Very difficult	10 (5%)
	Don't know.....	97 (49%)
	No Listeners at this prison	2 (1%)

Alcohol and drugs

13.1	Did you have an alcohol problem when you came into this prison?	
	Yes	25 (13%)
	No.....	175 (88%)
13.2	Have you been helped with your alcohol problem in this prison?	
	Yes	8 (4%)
	No.....	14 (7%)
	Did not / do not have an alcohol problem	175 (89%)
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	49 (25%)
	No.....	150 (75%)
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	28 (14%)
	No.....	170 (86%)

13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	19 (10%)
	No	180 (90%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	30 (15%)
	No	26 (13%)
	Did not / do not have a drug problem.....	138 (71%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy	77 (39%)
	Quite easy	28 (14%)
	Quite difficult	1 (1%)
	Very difficult	6 (3%)
	Don't know.....	86 (43%)
13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy	22 (11%)
	Quite easy	30 (15%)
	Quite difficult	16 (8%)
	Very difficult	17 (9%)
	Don't know.....	114 (57%)

Safety

14.1	Have you ever felt unsafe here?	
	Yes	80 (40%)
	No	120 (60%)
14.2	Do you feel unsafe now?	
	Yes	30 (15%)
	No	167 (85%)
14.3	Have you experienced any of the following types of bullying / victimisation from other prisoners here? (Please tick all that apply to you.)	
	Verbal abuse	73 (39%)
	Threats or intimidation.....	56 (30%)
	Physical assault.....	26 (14%)
	Sexual assault.....	5 (3%)
	Theft of canteen or property.....	43 (23%)
	Other bullying / victimisation	32 (17%)
	Not experienced any of these from prisoners here.....	93 (49%)
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	
	Yes	80 (43%)
	No	107 (57%)

14.5	Have you experienced any of the following types of bullying / victimisation from staff here? (Please tick all that apply to you.)	
	Verbal abuse	57 (32%)
	Threats or intimidation.....	42 (23%)
	Physical assault.....	13 (7%)
	Sexual assault.....	3 (2%)
	Theft of canteen or property.....	11 (6%)
	Other bullying / victimisation	26 (14%)
	Not experienced any of these from staff here.....	104 (58%)

14.6	If you were being bullied / victimised by staff here, would you report it?	
	Yes	104 (55%)
	No.....	84 (45%)

Behaviour management

15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	
	Yes	100 (51%)
	No.....	82 (42%)
	Don't know what the incentives / rewards are	15 (8%)

15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	
	Yes	82 (42%)
	No.....	86 (44%)
	Don't know.....	23 (12%)
	Don't know what this is	4 (2%)

15.3	Have you been physically restrained by staff in this prison in the last 6 months?	
	Yes	12 (6%)
	No.....	187 (94%)

15.4	If you have been restrained by staff in this prison in the last 6 months, did anyone come and talk to you about it afterwards?	
	Yes	4 (2%)
	No.....	7 (4%)
	Don't remember	0 (0%)
	Not been restrained here in last 6 months	187 (94%)

15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	
	Yes	14 (7%)
	No.....	184 (93%)

15.6	If you have spent one or more nights in the segregation unit in this prison in the last 6 months please answer the questions below:		
		Yes	No
	Were you treated well by segregation staff?	9 (64%)	5 (36%)
	Could you shower every day?	14 (100%)	0 (0%)
	Could you go outside for exercise every day?	12 (86%)	2 (14%)
	Could you use the phone every day (if you had credit)?	11 (79%)	3 (21%)

Education, skills and work**16.1 Is it easy or difficult to get into the following activities in this prison?**

	Easy	Difficult	Don't know	Not available here
Education	124 (66%)	42 (22%)	22 (12%)	1 (1%)
Vocational or skills training	88 (48%)	62 (34%)	34 (18%)	1 (1%)
Prison job	103 (56%)	62 (34%)	20 (11%)	0 (0%)
Voluntary work outside of the prison	10 (6%)	43 (24%)	76 (43%)	48 (27%)
Paid work outside of the prison	10 (6%)	42 (24%)	72 (41%)	53 (30%)

16.2 If you have done any of these activities while in this prison, do you think they will help you on release?

	Yes, will help	No, won't help	Not done this
Education	109 (58%)	50 (27%)	29 (15%)
Vocational or skills training	99 (54%)	33 (18%)	52 (28%)
Prison job	66 (36%)	84 (45%)	35 (19%)
Voluntary work outside of the prison	29 (16%)	19 (11%)	131 (73%)
Paid work outside of the prison	27 (15%)	21 (12%)	130 (73%)

16.3 Do staff encourage you to attend education, training or work?

Yes	124 (63%)
No.....	69 (35%)
Not applicable (e.g. if you are retired, sick or on remand)	3 (2%)

Planning and progression**17.1 Do you have a custody plan? (This may be called a sentence plan or resettlement plan.)**

Yes	145 (74%)
No.....	51 (26%)

17.2 Do you understand what you need to do to achieve the objectives or targets in your custody plan?

Yes	114 (81%)
No.....	18 (13%)
Don't know what my objectives or targets are.....	9 (6%)

17.3 Are staff here supporting you to achieve your objectives or targets?

Yes	66 (46%)
No.....	67 (47%)
Don't know what my objectives or targets are.....	9 (6%)

17.4 If you have done any of the following things in this prison, did they help you to achieve your objectives or targets?

	Yes, this helped	No, this didn't help	Not done /don't know
Offending behaviour programmes	51 (37%)	17 (12%)	70 (51%)
Other programmes	41 (31%)	17 (13%)	76 (57%)
One to one work	26 (20%)	13 (10%)	92 (70%)
Being on a specialist unit	14 (11%)	11 (8%)	105 (81%)
ROTL - day or overnight release	5 (4%)	9 (7%)	115 (89%)

Preparation for release

18.1	Do you expect to be released in the next 3 months?			
	Yes		58 (30%)	
	No		129 (66%)	
	Don't know		9 (5%)	
18.2	How close is this prison to your home area or intended release address?			
	Very near		5 (9%)	
	Quite near		24 (41%)	
	Quite far		14 (24%)	
	Very far		15 (26%)	
18.3	Is anybody helping you to prepare for your release (e.g. a home probation officer, responsible officer, case worker)?			
	Yes		33 (57%)	
	No		25 (43%)	
18.4	Are you getting help to sort out the following things for when you are released?			
		Yes, I'm getting help with this	No, but I need help with this	No, and I don't need help with this
	Finding accommodation	13 (22%)	19 (33%)	26 (45%)
	Getting employment	4 (7%)	28 (50%)	24 (43%)
	Setting up education or training	3 (5%)	25 (45%)	27 (49%)
	Arranging benefits	8 (14%)	30 (54%)	18 (32%)
	Sorting out finances	6 (11%)	27 (47%)	24 (42%)
	Support for drug or alcohol problems	13 (24%)	12 (22%)	30 (55%)
	Health / mental health support	6 (11%)	23 (41%)	27 (48%)
	Social care support	4 (7%)	16 (29%)	36 (64%)
	Getting back in touch with family or friends	8 (14%)	11 (20%)	37 (66%)

More about you

19.1	Do you have children under the age of 18?	
	Yes	117 (59%)
	No	80 (41%)
19.2	Are you a UK / British citizen?	
	Yes	190 (96%)
	No	7 (4%)
19.3	Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?	
	Yes	2 (1%)
	No	196 (99%)
19.4	Have you ever been in the armed services (e.g. army, navy, air force)?	
	Yes	9 (5%)
	No	188 (95%)
19.5	What is your gender?	
	Male	197 (100%)
	Female	0 (0%)
	Non-binary	0 (0%)
	Other	0 (0%)

19.6	How would you describe your sexual orientation?	
	Straight / heterosexual.....	188 (96%)
	Gay / lesbian / homosexual.....	4 (2%)
	Bisexual.....	2 (1%)
	Other.....	2 (1%)
19.7	Do you identify as transgender or transsexual?	
	Yes.....	2 (1%)
	No.....	189 (99%)

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.....	10 (5%)
	Less likely to offend.....	129 (67%)
	Made no difference.....	54 (28%)

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2.5	When you first arrived, did you have any problems?	n=199	74%	64%	74%	72%	74%	51%
2.5	Did you have problems with:							
	- Getting phone numbers?	n=199	31%	17%	31%	28%	31%	13%
	- Contacting family?	n=199	21%	20%	21%	30%	21%	13%
	- Arranging care for children or other dependents?	n=199	3%		3%	1%	3%	
	- Contacting employers?	n=199	4%	2%	4%	2%	4%	2%
	- Money worries?	n=199	21%	14%	21%	16%	21%	9%
	- Housing worries?	n=199	12%	13%	12%	14%	12%	8%
	- Feeling depressed?	n=199	31%		31%	29%	31%	
	- Feeling suicidal?	n=199	9%		9%	8%	9%	
	- Other mental health problems?	n=199	25%		25%	22%	25%	
	- Physical health problems	n=199	14%	14%	14%	14%	14%	16%
	- Drugs or alcohol (e.g. withdrawal)?	n=199	13%		13%	14%	13%	
	- Getting medication?	n=199	30%		30%	23%	30%	
	- Needing protection from other prisoners?	n=199	7%	5%	7%	5%	7%	5%
	- Lost or delayed property?	n=199	17%	20%	17%	19%	17%	15%
	<i>For those who had any problems when they first arrived:</i>							
2.6	Did staff help you to deal with these problems?	n=145	29%	36%	29%	35%	29%	29%
FIRST NIGHT AND INDUCTION								
3.1	Before you were locked up on your first night, were you offered:							
	- Tobacco or nicotine replacement?	n=200	67%	68%	67%	73%	67%	75%
	- Toiletries / other basic items?	n=200	64%	50%	64%	50%	64%	51%
	- A shower?	n=200	60%	29%	60%	42%	60%	40%
	- A free phone call?	n=200	68%	39%	68%	40%	68%	65%
	- Something to eat?	n=200	82%	58%	82%	76%	82%	67%
	- The chance to see someone from health care?	n=200	63%	69%	63%	59%	63%	70%
	- The chance to talk to a Listener or Samaritans?	n=200	31%	34%	31%	30%	31%	42%
	- Support from another prisoner (e.g. Insider or buddy)?	n=200	29%		29%	24%	29%	
	- None of these?	n=200	5%		5%	4%	5%	
3.2	On your first night in this prison, was your cell very / quite clean?	n=201	55%		55%	34%	55%	
3.3	Did you feel safe on your first night here?	n=200	79%	79%	79%	77%	79%	83%
3.4	In your first few days here, did you get?							
	- Access to the prison shop / canteen?	n=198	49%	26%	49%	31%	49%	28%
	- Free PIN phone credit?	n=191	41%		41%	45%	41%	
	- Numbers put on your PIN phone?	n=185	55%		55%	46%	55%	
3.5	Have you had an induction at this prison?	n=198	97%	91%	97%	93%	97%	87%
	<i>For those who have had an induction:</i>							
3.5	Did your induction cover everything you needed to know about this prison?	n=192	58%		58%	57%	58%	

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ON THE WING						
4.1	Are you in a cell on your own?	n=201	56%		56%	
4.2	Is your cell call bell normally answered within 5 minutes?	n=197	22%	34%	22%	34%
4.3	On the wing or houseblock you currently live on:					
	- Do you normally have enough clean, suitable clothes for the week?	n=202	76%	68%	76%	68%
	- Can you shower every day?	n=199	99%	87%	99%	99%
	- Do you have clean sheets every week?	n=198	73%	67%	73%	51%
	- Do you get cell cleaning materials every week?	n=201	49%	64%	49%	31%
	- Is it normally quiet enough for you to relax or sleep at night?	n=201	70%	69%	70%	66%
	- Can you get your stored property if you need it?	n=198	25%	24%	25%	21%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	n=203	80%		80%	
FOOD AND CANTEEN						
5.1	Is the quality of the food in this prison very / quite good?	n=201	28%		28%	
5.2	Do you get enough to eat at meal-times always / most of the time?	n=204	21%		21%	
5.3	Does the shop / canteen sell the things that you need?	n=202	68%	52%	68%	49%
RELATIONSHIPS WITH STAFF						
6.1	Do most staff here treat you with respect?	n=202	74%	77%	74%	79%
6.2	Are there any staff here you could turn to if you had a problem?	n=201	72%	72%	72%	70%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	n=204	28%	29%	28%	40%
6.4	Do you have a personal officer?	n=197	78%		78%	
For those who have a personal officer:						
6.4	Is your personal or named officer very / quite helpful?	n=153	48%		48%	
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	n=197	14%		14%	
6.6	Do you feel that you are treated as an individual in this prison?	n=197	43%		43%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	n=202	50%		50%	
	If so, do things sometimes change?	n=100	33%		33%	
FAITH						
7.1	Do you have a religion?	n=201	66%	70%	66%	68%
For those who have a religion:						
7.2	Are your religious beliefs respected here?	n=134	70%		70%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	n=133	77%		77%	
7.4	Are you able to attend religious services, if you want to?	n=134	90%		90%	

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CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	n=204	31%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	n=204	56%
8.3	Are you able to use a phone every day (if you have credit)?	n=203	98%
8.4	Is it very / quite easy for your family and friends to get here?	n=204	45%
8.5	Do you get visits from family/friends once a week or more?	n=201	23%
<i>For those who get visits:</i>			
8.6	Do visits usually start and finish on time?	n=143	66%
8.7	Are your visitors usually treated respectfully by staff?	n=142	75%
TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=201	94%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
9.1	Are these times usually kept to?	n=189	67%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	n=195	12%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	n=195	20%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=201	13%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=201	3%
9.4	Do you have time to do domestics more than 5 days in a typical week?	n=201	65%
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=202	81%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=202	78%
9.7	Do you typically go to the gym twice a week or more?	n=204	53%
9.8	Do you typically go to the library twice a week or more?	n=204	3%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	n=114	54%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	n=201	77%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	n=171	56%
	Are applications usually dealt with within 7 days?	n=164	57%
10.3	Is it easy for you to make a complaint?	n=202	72%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	n=139	39%
	Are complaints usually dealt with within 7 days?	n=127	41%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=161	21%

31%	28%
56%	57%
98%	93%
45%	38%
23%	16%
66%	60%
75%	78%
94%	93%
67%	53%
12%	21%
20%	8%
13%	15%
3%	2%
65%	57%
81%	67%
78%	66%
53%	51%
3%	19%
54%	60%
77%	76%
56%	54%
57%	37%
72%	62%
39%	30%
41%	24%
21%	27%

31%	
56%	40%
98%	
45%	
23%	
66%	
75%	
94%	
67%	
12%	12%
20%	21%
13%	
3%	
65%	
81%	
78%	
53%	
3%	3%
54%	57%
77%	75%
56%	48%
57%	35%
72%	65%
39%	29%
41%	31%
21%	

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<i>For those who need it, is it easy to:</i>							
10.6	Communicate with your solicitor or legal representative?	n=171	53%		53%	38%	53%
	Attend legal visits?	n=169	65%		65%	49%	65%
	Get bail information?	n=116	17%		17%	17%	17%
<i>For those who have had legal letters:</i>							
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=155	58%	50%	58%	54%	58%
HEALTH CARE							
11.1	Is it very / quite easy to see:						
	- Doctor?	n=202	12%		12%	34%	12%
	- Nurse?	n=198	46%		46%	55%	46%
	- Dentist?	n=201	12%		12%	15%	12%
11.2	Do you think the quality of the health service is very / quite good from:						
	- Doctor?	n=200	36%		36%	44%	36%
	- Nurse?	n=198	53%		53%	56%	53%
	- Dentist?	n=199	31%		31%	30%	31%
11.3	Do you have any mental health problems?	n=202	43%		43%	45%	43%
<i>For those who have mental health problems:</i>							
11.4	Have you been helped with your mental health problems in this prison?	n=85	31%		31%	42%	31%
11.5	Do you think the overall quality of the health services here is very / quite good?	n=199	33%		33%	42%	33%
OTHER SUPPORT NEEDS							
12.1	Do you consider yourself to have a disability?	n=202	34%	25%	34%	37%	34%
<i>For those who have a disability:</i>							
12.2	Are you getting the support you need?	n=64	34%		34%	29%	34%
12.3	Have you been on an ACCT in this prison?	n=197	14%		14%	15%	14%
<i>For those who have been on an ACCT:</i>							
12.4	Did you feel cared for by staff?	n=25	56%		56%	40%	56%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=196	39%		39%	48%	39%
ALCOHOL AND DRUGS							
13.1	Did you have an alcohol problem when you came into this prison?	n=200	13%	16%	13%	16%	13%
<i>For those who had / have an alcohol problem:</i>							
13.2	Have you been helped with your alcohol problem in this prison?	n=22	36%	61%	36%	51%	36%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=199	25%	25%	25%	31%	25%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=198	14%	12%	14%	18%	14%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=199	10%		10%	13%	10%
<i>For those who had / have a drug problem:</i>							
13.6	Have you been helped with your drug problem in this prison?	n=56	54%	60%	54%	45%	54%
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=198	53%		53%	50%	53%

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13.8	Is it very / quite easy to get alcohol in this prison?	<i>n</i> =199	26%		26%	35%	26%	
SAFETY								
14.1	Have you ever felt unsafe here?	<i>n</i> =200	40%	41%	40%	39%	40%	39%
14.2	Do you feel unsafe now?	<i>n</i> =197	15%	18%	15%	19%	15%	13%
14.3	Have you experienced any of the following from other prisoners here:							
	- Verbal abuse?	<i>n</i> =188	39%		39%	32%	39%	
	- Threats or intimidation?	<i>n</i> =188	30%		30%	28%	30%	
	- Physical assault?	<i>n</i> =188	14%		14%	15%	14%	
	- Sexual assault?	<i>n</i> =188	3%		3%	2%	3%	
	- Theft of canteen or property?	<i>n</i> =188	23%		23%	22%	23%	
	- Other bullying / victimisation?	<i>n</i> =188	17%		17%	16%	17%	
	- Not experienced any of these from prisoners here	<i>n</i> =188	50%	70%	50%	58%	50%	69%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<i>n</i> =187	43%		43%	35%	43%	
14.5	Have you experienced any of the following from staff here:							
	- Verbal abuse?	<i>n</i> =180	32%		32%	29%	32%	
	- Threats or intimidation?	<i>n</i> =180	23%		23%	21%	23%	
	- Physical assault?	<i>n</i> =180	7%		7%	8%	7%	
	- Sexual assault?	<i>n</i> =180	2%		2%	2%	2%	
	- Theft of canteen or property?	<i>n</i> =180	6%		6%	6%	6%	
	- Other bullying / victimisation?	<i>n</i> =180	14%		14%	14%	14%	
	- Not experienced any of these from staff here	<i>n</i> =180	58%	71%	58%	60%	58%	76%
14.6	If you were being bullied / victimised by staff here, would you report it?	<i>n</i> =188	55%		55%	50%	55%	
BEHAVIOUR MANAGEMENT								
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<i>n</i> =197	51%		51%	39%	51%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<i>n</i> =195	42%		42%	39%	42%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<i>n</i> =199	6%	9%	6%	10%	6%	10%
<i>For those who have been restrained in the last 6 months:</i>								
15.4	Did anyone come and talk to you about it afterwards?	<i>n</i> =11	36%		36%	11%	36%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	<i>n</i> =198	7%	15%	7%	8%	7%	26%
<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>								
15.6	Were you treated well by segregation staff?	<i>n</i> =14	64%		64%	68%	64%	
	Could you shower every day?	<i>n</i> =14	100%		100%	75%	100%	
	Could you go outside for exercise every day?	<i>n</i> =14	86%		86%	82%	86%	
	Could you use the phone every day (if you had credit)?	<i>n</i> =14	79%		79%	75%	79%	

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* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

n=number of valid responses to question (HMP Oakwood 2018)

HMP Oakwood 2018	All other category C training prisons	HMP Oakwood 2018	All other category C training prisons surveyed since September 2017	HMP Oakwood 2018	HMP Oakwood 2014
206	6,510	206	869	206	204

EDUCATION, SKILLS AND WORK						
16.1	In this prison, is it easy to get into the following activities:					
	- Education?	n=189	66%		66%	60%
	- Vocational or skills training?	n=185	48%		48%	41%
	- Prison job?	n=185	56%		56%	47%
	- Voluntary work outside of the prison?	n=177	6%		6%	4%
16.2	- Paid work outside of the prison?	n=177	6%		6%	3%
	In this prison, have you done the following activities:					
	- Education?	n=188	85%	80%	85%	77%
	- Vocational or skills training?	n=184	72%	75%	72%	67%
	- Prison job?	n=185	81%	84%	81%	78%
- Voluntary work outside of the prison?	n=179	27%		27%	31%	
- Paid work outside of the prison?	n=178	27%		27%	30%	
<i>For those who have done the following activities, do you think they will help you on release:</i>						
	- Education?	n=159	69%	57%	69%	60%
	- Vocational or skills training?	n=132	75%	58%	75%	60%
	- Prison job?	n=150	44%	43%	44%	37%
	- Voluntary work outside of the prison?	n=48	60%		60%	
	- Paid work outside of the prison?	n=48	56%		56%	
16.3	Do staff encourage you to attend education, training or work?	n=193	64%		64%	62%
PLANNING AND PROGRESSION						
17.1	Do you have a custody plan?	n=196	74%		74%	
<i>For those who have a custody plan:</i>						
17.2	Do you understand what you need to do to achieve your objectives or targets?	n=141	81%		81%	85%
17.3	Are staff helping you to achieve your objectives or targets?	n=142	47%		47%	47%
17.4	In this prison, have you done:					
	- Offending behaviour programmes?	n=138	49%		49%	45%
	- Other programmes?	n=134	43%		43%	39%
	- One to one work?	n=131	30%		30%	34%
	- Been on a specialist unit?	n=130	19%		19%	15%
- ROTL - day or overnight release?	n=129	11%		11%	10%	
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>						
	- Offending behaviour programmes?	n=68	75%		75%	69%
	- Other programmes?	n=58	71%		71%	65%
	- One to one work?	n=39	67%		67%	69%
	- Being on a specialist unit?	n=25	56%		56%	46%
	- ROTL - day or overnight release?	n=14	36%		36%	36%

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Number of completed questionnaires returned

HMP Oakwood 2018	All other category C training prisons	HMP Oakwood 2018	All other category C training prisons surveyed since September 2017	HMP Oakwood 2018	HMP Oakwood 2014
206	6,510	206	869	206	204

n=number of valid responses to question (HMP Oakwood 2018)

PREPARATION FOR RELEASE							
18.1	Do you expect to be released in the next 3 months?	n=196	30%		30%	24%	30%
<i>For those who expect to be released in the next 3 months:</i>							
18.2	Is this prison very / quite near to your home area or intended release address?	n=58	50%		50%	40%	50%
18.3	Is anybody helping you to prepare for your release?	n=58	57%		57%	59%	57%
18.4	Do you need help to sort out the following for when you are released:						
	- Finding accommodation?	n=58	55%		55%	60%	55%
	- Getting employment?	n=56	57%		57%	58%	57%
	- Setting up education or training?	n=55	51%		51%	44%	51%
	- Arranging benefits?	n=56	68%		68%	62%	68%
	- Sorting out finances?	n=57	58%		58%	51%	58%
	- Support for drug or alcohol problems?	n=55	46%		46%	41%	46%
	- Health / mental Health support?	n=56	52%		52%	49%	52%
	- Social care support?	n=56	36%		36%	37%	36%
	- Getting back in touch with family or friends?	n=56	34%		34%	40%	34%
18.4	Are you getting help to sort out the following for when you are released, if you need it:						
	- Finding accommodation?	n=32	41%		41%	33%	41%
	- Getting employment?	n=32	13%		13%	20%	13%
	- Setting up education or training?	n=28	11%		11%	30%	11%
	- Arranging benefits?	n=38	21%		21%	27%	21%
	- Sorting out finances?	n=33	18%		18%	23%	18%
	- Support for drug or alcohol problems?	n=25	52%		52%	45%	52%
	- Health / mental Health support?	n=29	21%		21%	31%	21%
	- Social care support?	n=20	20%		20%	25%	20%
	- Getting back in touch with family or friends?	n=19	42%		42%	32%	42%
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?	n=193	67%		67%	50%	67%

HMP Oakwood 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

- 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:

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
58	146	35	166

DEMOGRAPHICS 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?	3%	21%	3%	19%
1.3	Are you from a minority ethnic group?	-	-	94%	14%
7.1	Are you Muslim?	58%	1%	-	-
11.3	Do you have any mental health problems?	31%	48%	29%	47%
12.1	Do you consider yourself to have a disability?	22%	39%	23%	36%
19.2	Are you a foreign national?	5%	3%	6%	3%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	1%	0%	1%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	70%	90%	80%	86%
2.4	Overall, were you treated very / quite well in reception?	75%	90%	81%	88%
2.5	When you first arrived, did you have any problems?	75%	73%	78%	73%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	20%	33%	24%	29%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	73%	81%	79%	79%
3.5	Have you had an induction at this prison?	98%	97%	97%	97%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	48%	62%	53%	59%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	14%	24%	18%	21%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	70%	78%	74%	76%
	- Can you shower every day?	100%	98%	100%	98%
	- Do you have clean sheets every week?	69%	74%	67%	73%
	- Do you get cell cleaning materials every week?	34%	55%	35%	52%
	- Is it normally quiet enough for you to relax or sleep at night?	67%	71%	62%	71%
4.3	- Can you get your stored property if you need it?	18%	28%	18%	28%

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Number of completed questionnaires returned

Black and minority ethnic	White
58	146

Muslim	Non-Muslim
35	166

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	10%	26%
5.3	Does the shop / canteen sell the things that you need?	53%	73%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	54%	81%
6.2	Are there any staff here you could turn to if you had a problem?	51%	80%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	19%	32%
6.6	Do you feel that you are treated as an individual in this prison?	27%	48%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	71%	70%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	87%	71%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	16%	38%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	60%	55%
8.3	Are you able to use a phone every day (if you have credit)?	98%	97%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	66%	79%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	11%	13%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	15%	21%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	43%	60%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	70%	80%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	40%	62%
10.3	Is it easy for you to make a complaint?	57%	79%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	16%	47%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	26%	20%

9%	22%
60%	69%
56%	77%
56%	76%
26%	29%
38%	43%
79%	69%
91%	73%
17%	35%
59%	56%
100%	97%
63%	78%
12%	13%
9%	22%
53%	53%
68%	79%
40%	59%
62%	75%
17%	44%
23%	21%

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Number of completed questionnaires returned

Black and minority ethnic	White
58	146

Muslim	Non-Muslim
35	166

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	7%	15%
	- Nurse?	34%	50%
	- Dentist?	4%	16%
	- Mental health workers?	5%	10%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	11%	36%
11.5	Do you think the overall quality of the health services here is very / quite good?	21%	39%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	17%	39%
SAFETY			
14.1	Have you ever felt unsafe here?	42%	40%
14.2	Do you feel unsafe now?	20%	14%
14.3	Not experienced bullying / victimisation by other prisoners	46%	51%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	35%	47%
14.5	Not experienced bullying / victimisation by members of staff	36%	66%
14.6	If you were being bullied / victimised by staff here, would you report it?	51%	58%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	46%	53%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	15%	53%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	9%	5%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	9%	7%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	51%	70%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	79%	72%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	24%	57%
PREPARATION FOR RELEASE			
<i>For those who expect to be released in the next 3 months:</i>			
18.3	Is anybody helping you to prepare for your release?	43%	61%
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?	61%	69%

3%	13%
32%	48%
6%	14%
6%	9%
20%	31%
14%	36%
0%	38%
38%	41%
21%	15%
47%	51%
31%	46%
39%	62%
48%	58%
49%	51%
16%	48%
12%	5%
12%	6%
58%	66%
85%	73%
31%	51%
38%	60%
55%	70%

HMP Oakwood 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

- responses of prisoners with mental health problems are compared with those of prisoners who do not have mental health problems
- disabled prisoners' responses are compared with those of prisoners who do not have a disability

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

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Number of completed questionnaires returned

Mental health problems	No mental health problems
87	115

Have a disability	Do not have a disability
68	134

DEMOGRAPHICS 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?	9%	22%	19%	15%
1.3	Are you from a minority ethnic group?	21%	35%	19%	34%
7.1	Are you Muslim?	12%	22%	12%	21%
11.3	Do you have any mental health problems?			77%	26%
12.1	Do you consider yourself to have a disability?	60%	14%		
19.2	Are you a foreign national?	1%	5%	2%	5%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	2%	0%	2%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	86%	85%	80%	88%
2.4	Overall, were you treated very / quite well in reception?	85%	88%	84%	88%
2.5	When you first arrived, did you have any problems?	85%	65%	90%	66%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	26%	32%	30%	29%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	74%	84%	78%	81%
3.5	Have you had an induction at this prison?	95%	98%	97%	97%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	52%	63%	52%	62%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	24%	21%	25%	21%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	74%	78%	71%	79%
	- Can you shower every day?	99%	98%	99%	99%
	- Do you have clean sheets every week?	72%	74%	71%	74%
	- Do you get cell cleaning materials every week?	49%	50%	54%	47%
	- Is it normally quiet enough for you to relax or sleep at night?	64%	75%	69%	72%
	- Can you get your stored property if you need it?	24%	27%	20%	29%

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Number of completed questionnaires returned

Mental health problems	No mental health problems
87	115

Have a disability	Do not have a disability
68	134

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	20%	23%	22%	21%
5.3	Does the shop / canteen sell the things that you need?	69%	67%	67%	68%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	72%	74%	72%	74%
6.2	Are there any staff here you could turn to if you had a problem?	69%	74%	72%	72%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	33%	24%	37%	23%
6.6	Do you feel that you are treated as an individual in this prison?	33%	50%	42%	42%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	63%	79%	76%	68%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	67%	88%	73%	81%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	29%	34%	32%	32%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	64%	49%	62%	53%
8.3	Are you able to use a phone every day (if you have credit)?	98%	97%	96%	99%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	69%	77%	67%	77%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	13%	10%	14%	10%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	16%	23%	15%	22%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	57%	53%	64%	51%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	75%	79%	75%	79%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	58%	54%	54%	57%
10.3	Is it easy for you to make a complaint?	71%	74%	72%	73%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	41%	38%	46%	35%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	24%	17%	31%	15%

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Number of completed questionnaires returned

Mental health problems	No mental health problems
87	115

Have a disability	Do not have a disability
68	134

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	14%	11%
	- Nurse?	50%	42%
	- Dentist?	14%	12%
	- Mental health workers?	12%	6%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	31%	
11.5	Do you think the overall quality of the health services here is very / quite good?	32%	34%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	31%	47%
SAFETY			
14.1	Have you ever felt unsafe here?	59%	25%
14.2	Do you feel unsafe now?	26%	7%
14.3	Not experienced bullying / victimisation by other prisoners	30%	65%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	36%	48%
14.5	Not experienced bullying / victimisation by members of staff	49%	65%
14.6	If you were being bullied / victimised by staff here, would you report it?	50%	59%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	42%	58%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	42%	42%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	8%	4%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	8%	6%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	66%	63%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	73%	75%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	45%	48%
PREPARATION FOR RELEASE			
<i>For those who expect to be released in the next 3 months:</i>			
18.3	Is anybody helping you to prepare for your release?	59%	54%
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?	66%	68%

10%	14%
52%	43%
12%	13%
9%	8%
34%	26%
33%	33%
34%	
56%	32%
25%	10%
29%	60%
48%	40%
52%	61%
53%	57%
49%	52%
49%	39%
9%	5%
9%	6%
70%	62%
71%	76%
44%	47%
66%	48%
70%	66%

HMP Oakwood 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

- responses of prisoners aged 25 and under are compared with those of prisoners over 25
- responses of prisoners aged 50 and over are compared with those of prisoners under 50

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

Shading is used to indicate statistical significance*, as follows:

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Number of completed questionnaires returned

	25 and under	Over 25		50 and over	Under 50
	28	176		33	171

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.3	Are you from a minority ethnic group?	39%	27%	6%	33%
7.1	Are you Muslim?	21%	17%	3%	20%
11.3	Do you have any mental health problems?	46%	42%	24%	46%
12.1	Do you consider yourself to have a disability?	29%	35%	39%	33%
19.2	Are you a foreign national?	0%	4%	6%	3%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	4%	1%	0%	1%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	76%	87%	88%	85%
2.4	Overall, were you treated very / quite well in reception?	70%	90%	94%	86%
2.5	When you first arrived, did you have any problems?	75%	74%	67%	75%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	29%	29%	32%	29%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	74%	80%	91%	77%
3.5	Have you had an induction at this prison?	100%	97%	100%	96%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	61%	58%	66%	57%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	8%	24%	30%	20%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	79%	75%	88%	73%
	- Can you shower every day?	96%	99%	100%	98%
	- Do you have clean sheets every week?	69%	73%	88%	70%
	- Do you get cell cleaning materials every week?	36%	51%	76%	44%
	- Is it normally quiet enough for you to relax or sleep at night?	71%	69%	79%	68%
	- Can you get your stored property if you need it?	21%	26%	39%	23%

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Number of completed questionnaires returned

25 and under	Over 25
28	176

50 and over	Under 50
33	171

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	4%	24%
5.3	Does the shop / canteen sell the things that you need?	68%	68%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	57%	76%
6.2	Are there any staff here you could turn to if you had a problem?	62%	73%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	14%	30%
6.6	Do you feel that you are treated as an individual in this prison?	32%	44%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	67%	71%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	89%	76%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	21%	33%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	64%	55%
8.3	Are you able to use a phone every day (if you have credit)?	96%	98%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	80%	74%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	12%	12%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	12%	21%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	53%	55%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	82%	77%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	50%	57%
10.3	Is it easy for you to make a complaint?	71%	73%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	25%	41%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	22%	21%

42%	17%
82%	65%
91%	70%
88%	69%
36%	26%
61%	39%
90%	67%
95%	75%
42%	29%
36%	60%
97%	98%
91%	71%
7%	14%
23%	19%
45%	56%
85%	76%
71%	53%
85%	70%
67%	36%
0%	24%

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Number of completed questionnaires returned

	25 and under	Over 25
	28	176

	50 and over	Under 50
	33	171

HEALTH CARE		
11.1	Is it very / quite easy to see:	
	- Doctor?	11% 13%
	- Nurse?	37% 47%
	- Dentist?	11% 13%
	- Mental health workers?	4% 9%
<i>For those who have mental health problems:</i>		
11.4	Have you been helped with your mental health problems in this prison?	15% 34%
11.5	Do you think the overall quality of the health services here is very / quite good?	21% 35%
OTHER SUPPORT NEEDS		
<i>For those who have a disability:</i>		
12.2	Are you getting the support you need?	38% 34%
SAFETY		
14.1	Have you ever felt unsafe here?	43% 40%
14.2	Do you feel unsafe now?	14% 16%
14.3	Not experienced bullying / victimisation by other prisoners	56% 49%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	32% 45%
14.5	Not experienced bullying / victimisation by members of staff	52% 59%
14.6	If you were being bullied / victimised by staff here, would you report it?	27% 60%
BEHAVIOUR MANAGEMENT		
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	52% 51%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	30% 44%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	4% 6%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	11% 7%
EDUCATION, SKILLS AND WORK		
16.3	Do staff encourage you to attend education, training or work?	79% 62%
PLANNING AND PROGRESSION		
17.1	Do you have a custody plan?	79% 73%
<i>For those who have a custody plan:</i>		
17.3	Are staff helping you to achieve your objectives or targets?	41% 48%
PREPARATION FOR RELEASE		
<i>For those who expect to be released in the next 3 months:</i>		
18.3	Is anybody helping you to prepare for your release?	40% 60%
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?	69% 66%

	9% 13%	
	56% 44%	
	12% 13%	
	3% 10%	
	50% 29%	
	42% 32%	
	58% 29%	
	33% 42%	
	9% 17%	
	47% 50%	
	69% 38%	
	75% 54%	
	70% 52%	
	58% 50%	
	63% 38%	
	0% 7%	
	0% 9%	
	69% 64%	
	58% 77%	
	61% 45%	
	55% 57%	
	69% 66%	

HMP Oakwood 2018

Comparison of survey responses from different residential locations

In this table responses from prisoners on the vulnerable prisoner unit (Ash wing) are compared with those from the rest of the establishment.

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Vulnerable prisoners unit (Ash wing)	Rest of the establishment
68	135

Number of completed questionnaires returned

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	0%
	Are you 25 years of age or younger?	6%	17%
	Are you 50 years of age or older?	32%	8%
	Are you 70 years of age or older?	7%	0%
1.3	Are you from a minority ethnic group?	18%	35%
1.4	Have you been in this prison for less than 6 months?	24%	31%
1.5	Are you currently serving a sentence?	100%	99%
	Are you on recall?	6%	10%
1.6	Is your sentence less than 12 months?	7%	9%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	6%	0%
7.1	Are you Muslim?	9%	22%
11.3	Do you have any mental health problems?	42%	43%
12.1	Do you consider yourself to have a disability?	40%	30%
19.1	Do you have any children under the age of 18?	54%	62%
19.2	Are you a foreign national?	6%	2%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	2%
19.4	Have you ever been in the armed services?	9%	2%
19.5	Is your gender female or non-binary?	0%	0%
19.6	Are you homosexual, bisexual or other sexual orientation?	9%	2%
19.7	Do you identify as transgender or transsexual?	0%	2%

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Vulnerable prisoners unit (Ash wing)	
Rest of the establishment	
Number of completed questionnaires returned	68 135

ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	16%	20%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	34%	37%
2.3	When you were searched in reception, was this done in a respectful way?	82%	86%
2.4	Overall, were you treated very / quite well in reception?	91%	84%
2.5	When you first arrived, did you have any problems?	77%	73%
2.5	Did you have problems with:		
	- Getting phone numbers?	24%	34%
	- Contacting family?	18%	22%
	- Arranging care for children or other dependents?	3%	2%
	- Contacting employers?	0%	5%
	- Money worries?	15%	23%
	- Housing worries?	9%	13%
	- Feeling depressed?	32%	31%
	- Feeling suicidal?	7%	9%
	- Other mental health problems?	29%	22%
	- Physical health problems?	10%	15%
	- Drugs or alcohol (e.g. withdrawal)?	4%	17%
	- Getting medication?	32%	28%
	- Needing protection from other prisoners?	6%	6%
	- Lost or delayed property?	13%	19%
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	33%	26%
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	56%	72%
	- Toiletries / other basic items?	59%	66%
	- A shower?	56%	61%
	- A free phone call?	59%	71%
	- Something to eat?	78%	83%
	- The chance to see someone from health care?	57%	64%
	- The chance to talk to a Listener or Samaritans?	27%	32%
	- Support from another prisoner (e.g. Insider or buddy)?	25%	30%
	- None of these?	6%	4%
3.2	On your first night in this prison, was your cell very / quite clean?	60%	52%

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Vulnerable prisoners unit (Ash wing)	Rest of the establishment
68	135

Number of completed questionnaires returned

3.3	Did you feel safe on your first night here?	79%	79%
3.4	In your first few days here, did you get?		
	- Access to the prison shop / canteen?	56%	45%
	- Free PIN phone credit?	41%	42%
	- Numbers put on your PIN phone?	70%	47%
3.5	Have you had an induction at this prison?	99%	96%
<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	56%	59%
ON THE WING			
4.1	Are you in a cell on your own?	48%	60%
4.2	Is your cell call bell normally answered within 5 minutes?	27%	19%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	82%	73%
	- Can you shower every day?	100%	98%
	- Do you have clean sheets every week?	84%	67%
	- Do you get cell cleaning materials every week?	81%	33%
	- Is it normally quiet enough for you to relax or sleep at night?	76%	67%
	- Can you get your stored property if you need it?	28%	24%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	79%	80%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	36%	25%
5.2	Do you get enough to eat at meal-times always / most of the time?	29%	17%
5.3	Does the shop / canteen sell the things that you need?	74%	64%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	82%	69%
6.2	Are there any staff here you could turn to if you had a problem?	79%	67%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	35%	23%
6.4	Do you have a personal officer?	82%	76%
<i>For those who have a personal officer:</i>			
6.4	Is your personal or named officer very / quite helpful?	56%	43%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	16%	11%
6.6	Do you feel that you are treated as an individual in this prison?	50%	38%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	54%	47%
	If so, do things sometimes change?	30%	34%

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Vulnerable prisoners unit (Ash wing)	Rest of the establishment
68	135

Number of completed questionnaires returned

FAITH			
7.1	Do you have a religion?	64%	68%
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	72%	69%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	76%	78%
7.4	Are you able to attend religious services, if you want to?	88%	90%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	34%	29%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	49%	61%
8.3	Are you able to use a phone every day (if you have credit)?	97%	98%
8.4	Is it very / quite easy for your family and friends to get here?	32%	53%
8.5	Do you get visits from family/friends once a week or more?	21%	24%
<i>For those who get visits:</i>			
8.6	Do visits usually start and finish on time?	71%	64%
8.7	Are your visitors usually treated respectfully by staff?	78%	73%
TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	99%	92%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
9.1	Are these times usually kept to?	77%	61%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	10%	13%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	14%	22%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	15%	12%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	2%	3%
9.4	Do you have time to do domestics more than 5 days in a typical week?	73%	61%
9.5	Do you get association more than 5 days in a typical week, if you want it?	93%	76%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	88%	73%
9.7	Do you typically go to the gym twice a week or more?	40%	60%
9.8	Do you typically go to the library twice a week or more?	3%	2%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	56%	52%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	75%	78%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	55%	56%
	Are applications usually dealt with within 7 days?	59%	55%

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Vulnerable prisoners unit (Ash wing)	Rest of the establishment
68	135

Number of completed questionnaires returned

10.3	Is it easy for you to make a complaint?	81%	67%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	45%	35%
	Are complaints usually dealt with within 7 days?	39%	42%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	17%	23%
<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	51%	54%
	Attend legal visits?	58%	69%
	Get bail information?	15%	19%
<i>For those who have had legal letters:</i>			
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	47%	64%
HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	10%	14%
	- Nurse?	52%	43%
	- Dentist?	14%	12%
	- Mental health workers?	6%	9%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	42%	32%
	- Nurse?	62%	48%
	- Dentist?	39%	28%
	- Mental health workers?	14%	18%
11.3	Do you have any mental health problems?	42%	43%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	44%	23%
11.5	Do you think the overall quality of the health services here is very / quite good?	37%	31%
OTHER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	40%	30%
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	46%	22%
12.3	Have you been on an ACCT in this prison?	20%	10%
<i>For those who have been on an ACCT:</i>			
12.4	Did you feel cared for by staff?	62%	46%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	40%	38%

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Vulnerable prisoners unit (Ash wing)	Rest of the establishment
68	135

Number of completed questionnaires returned

ALCOHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	8%	15%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	40%	31%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	13%	31%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	6%	19%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	5%	11%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	40%	57%
13.7	Is it very / quite easy to get illicit drugs in this prison?	46%	56%
13.8	Is it very / quite easy to get alcohol in this prison?	12%	33%
SAFETY			
14.1	Have you ever felt unsafe here?	42%	38%
14.2	Do you feel unsafe now?	13%	16%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	52%	32%
	- Threats or intimidation?	38%	24%
	- Physical assault?	15%	13%
	- Sexual assault?	8%	0%
	- Theft of canteen or property?	24%	21%
	- Other bullying / victimisation?	24%	13%
	- Not experienced any of these from prisoners here	35%	58%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	62%	33%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	27%	34%
	- Threats or intimidation?	25%	22%
	- Physical assault?	6%	7%
	- Sexual assault?	2%	2%
	- Theft of canteen or property?	3%	7%
	- Other bullying / victimisation?	16%	13%
	- Not experienced any of these from staff here	60%	57%
14.6	If you were being bullied / victimised by staff here, would you report it?	67%	50%

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Vulnerable prisoners unit (Ash wing)	Rest of the establishment
68	135

Number of completed questionnaires returned

BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	47%	53%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	52%	37%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	3%	6%
<i>For those who have been restrained in the last 6 months:</i>			
15.4	Did anyone come and talk to you about it afterwards?	50%	25%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	8%	5%
<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>			
15.6	Were you treated well by segregation staff?	80%	57%
	Could you shower every day?	100%	100%
	Could you go outside for exercise every day?	100%	71%
	Could you use the phone every day (if you had credit)?	100%	71%
EDUCATION, SKILLS AND WORK			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	77%	60%
	- Vocational or skills training?	61%	41%
	- Prison job?	61%	53%
	- Voluntary work outside of the prison?	7%	5%
	- Paid work outside of the prison?	5%	6%
16.2	In this prison, have you done the following activities:		
	- Education?	92%	81%
	- Vocational or skills training?	76%	70%
	- Prison job?	78%	82%
	- Voluntary work outside of the prison?	24%	28%
	- Paid work outside of the prison?	23%	28%
<i>For those who have done the following activities, do you think they will help you on release:</i>			
	- Education?	63%	72%
	- Vocational or skills training?	66%	80%
	- Prison job?	38%	47%
	- Voluntary work outside of the prison?	53%	63%
	- Paid work outside of the prison?	50%	56%
16.3	Do staff encourage you to attend education, training or work?	67%	62%

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
	Grey shading indicates that we have no valid data for this question

* less than 1% probability that the difference is due to chance

Vulnerable prisoners unit (Ash wing)	Rest of the establishment
68	135

Number of completed questionnaires returned

PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	73%	74%
<i>For those who have a custody plan:</i>			
17.2	Do you understand what you need to do to achieve your objectives or targets?	67%	88%
17.3	Are staff helping you to achieve your objectives or targets?	44%	47%
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	36%	55%
	- Other programmes?	35%	47%
	- One to one work?	19%	35%
	- Been on a specialist unit?	14%	21%
	- ROTL - day or overnight release?	3%	15%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>			
	- Offending behaviour programmes?	81%	73%
	- Other programmes?	80%	67%
	- One to one work?	88%	60%
	- Being on a specialist unit?	67%	50%
	- ROTL - day or overnight release?	0%	39%
PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	32%	29%
<i>For those who expect to be released in the next 3 months:</i>			
18.2	Is this prison very / quite near to your home area or intended release address?	62%	43%
18.3	Is anybody helping you to prepare for your release?	67%	51%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	57%	54%
	- Getting employment?	50%	61%
	- Setting up education or training?	45%	54%
	- Arranging benefits?	58%	73%
	- Sorting out finances?	48%	64%
	- Support for drug or alcohol problems?	25%	57%
	- Health / mental Health support?	43%	57%
	- Social care support?	25%	42%
	- Getting back in touch with family or friends?	19%	43%

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Vulnerable prisoners unit (Ash wing)	Rest of the establishment
68	135

Number of completed questionnaires returned

18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	33%	45%
	- Getting employment?	10%	14%
	- Setting up education or training?	22%	5%
	- Arranging benefits?	27%	19%
	- Sorting out finances?	20%	17%
	- Support for drug or alcohol problems?	40%	55%
	- Health / mental Health support?	33%	15%
	- Social care support?	40%	13%
	- Getting back in touch with family or friends?	50%	40%
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?	67%	67%