

Report on an unannounced inspection of

HMP & YOI Chelmsford

by HM Chief Inspector of Prisons

21 May–7 June 2018

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



Crown copyright 2018

This publication, excluding logos, is licensed under the terms of the Open Government Licence v3.0 except where otherwise stated. To view this licence, visit nationalarchives.gov.uk/doc/open-government-licence/version/3 or write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk.

Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

Any enquiries regarding this publication should be sent to us at the address below or:
hmiprisons.enquiries@hmiprisons.gsi.gov.uk

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

Printed and published by:
Her Majesty's Inspectorate of Prisons
3rd floor
10 South Colonnade
Canary Wharf
London
E14 4PU
England

Contents

Introduction	5
Fact page	7
About this inspection and report	9
Summary	11
Section 1. Safety	21
Section 2. Respect	29
Section 3. Purposeful activity	41
Section 4. Rehabilitation and release planning	47
Section 5. Summary of recommendations and good practice	53
Section 6. Appendices	55
Appendix I: Inspection team	55
Appendix II: Progress on recommendations from the last report	57
Appendix III: Photographs	65
Appendix IV: Prison population profile	73
Appendix V: Prisoner survey methodology and results	77

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 Chelmsford, a medium-sized local prison, held just under 700 men at the time of this inspection. The population mainly consisted of adult men who were either remanded by the courts or were awaiting or serving a prison sentence. The prison also held over 70 young adults. The layout of the prison was unusual, comprising older buildings dating back to the 1830s as well as modern accommodation. At our last inspection in 2016, we reported that progress had stalled and that outcomes had deteriorated, which led to the prison being rated as not sufficiently good in all four of our healthy prison tests. Any optimism we had in 2016 was not borne out at this inspection, where some outcomes had deteriorated markedly.

We had significant concerns about the safety of the establishment. Levels of violence were far too high and not enough had been done to ensure the underlying causes were understood or addressed. Until recently the prison's strategy relied almost exclusively on punishing poor behaviour when it occurred. There were early signs that a more proactive approach was being adopted, and some enthusiastic safer custody staff wanted to make a difference. This new focus needed to be maintained and developed.

Much of the violence was related to the supply and use of illicit drugs, and the positive drug testing rate was among the highest we have seen at over 40%. There was a focus on reducing the supply of illicit drugs and providing drug users with support, but these challenges remained significant. The level of finds was consistently high: in a single month, the prison had seized 28 drug packages, 44 mobile phones and 18 parcels that had been thrown over the perimeter wall. The estimated value in the prison of the items seized during that month alone was in excess of £15,000.

Perhaps the most worrying issue was how men who were at risk of suicide and self-harm were managed. There had been 16 self-inflicted deaths over the previous eight years, and four since the last inspection. However, too many recommendations from the Prisons and Probation Ombudsman (PPO) had not been implemented. Levels of self-harm and the use of constant watch were very high, and the care provided was often not good enough. Many staff had become very risk adverse, which meant these procedures were often overused, which in turn risked masking the needs of particularly vulnerable men. The almost complete lack of a broad strategic response to these issues was a concern. Sadly, we were notified of yet another self-inflicted death at the prison a few weeks after our inspection.

The accommodation was very mixed. The older wings were in a poor state, cleanliness was not good enough and there was too much graffiti. Problems with the failed Carillion contract and subsequent facilities management arrangements had not helped, and we were told over 3,000 maintenance jobs were still outstanding. There were shortages of many items, and prisoners were frustrated because they could not obtain timely answers to legitimate questions or complaints. In contrast, relationships were decent, and the atmosphere on wings was generally calm and respectful. Most prisoners said they had a member of staff they could turn to if they had a problem.

Many staff were new and it was positive that the prison had plans to provide them with greater levels of mentoring and training. Some important aspects of health care provision needed attention; while we felt this area had improved since the previous inspection, leadership needed to be stronger, permanent staffing levels required improvement and complaints management was poor. Waiting times for some aspects of primary care were too long and mental health services were stretched. However, inpatient care had improved considerably, the needs of those with acute problems were well met and substance misuse support was generally good.

The prison did not have sufficient staff to deliver the advertised regime, and nearly all of the prisoners were negatively affected by restrictions to prisoners' time out of cell. Over 40% of those who did not attend activities were usually locked up every day for 21 to 22 hours. Ofsted noted a

more strategic approach was developing to improve the education, skills and work provision, but there remained a significant shortfall in the amount of purposeful activity on offer. Attendance and punctuality were poor, too much teaching and learning was not good enough and opportunities to accredit and recognise skills development were being missed. Mentors, however, were used well, and the results of those who completed activities were generally good.

Outcomes in rehabilitation and release planning were by far the strongest at this inspection. Work to promote contact with children and families was sound. Nearly all men had an up-to-date offender assessment system (OASys) assessment and offender management for higher-risk men was good. Public protection work was generally appropriate and most men progressed to other prisons promptly and efficiently. There were some weaknesses in work with low- to medium-risk men and release planning processes but, overall, we considered outcomes reasonably good.

The findings of this inspection, particularly the increase in the level of violence, the number of self-inflicted deaths, the ready availability of drugs and the unacceptably poor living conditions endured by many prisoners, were such that I seriously considered invoking the Urgent Notification protocol for HMP Chelmsford. I had significant concerns about the treatment and conditions of those detained in the prison. However, there were also a number of other relevant factors to take into account when considering whether to invoke the protocol, one of which was the Inspectorate's confidence in the prison's capacity for change and improvement.

The previous governor had left and an acting governor was in post. She enjoyed the confidence and support of her staff and was receiving invaluable support from the recently appointed prison group director, which was reassuring. The support included removing 50 prisoners from the prison, which was an important first step. The senior management team had also been strengthened, and the supervision of officers on the wings was being improved. Mentoring and support for the large number of new staff was being introduced. Plans were in place to improve the prison, and their implementation was being addressed sensibly, pragmatically and realistically.

As long as the leadership of the prison remains consistent, and vital regional-level HM Prison and Probation Service (HMPPS) support continues, there is no reason why the very serious problems afflicting the prison cannot be addressed. Leadership at both local and regional level readily acknowledged the gravity of the issues facing the jail, and HMPPS had already placed the prison in 'special measures'. I therefore concluded that on this occasion I had sufficient confidence in the ability of the prison to improve that I would not invoke the Urgent Notification protocol. To help prison managers to address the key issues that caused us most concern, I have decided on this occasion to make only a small number of relatively high level main recommendations and am hopeful that, if progress can be made in these areas, we will find the prison much improved on our next visit.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

July 2018

Fact page

Task of the establishment

HMP and YOI Chelmsford is a category B local and resettlement prison for adult and young adult men.

Certified normal accommodation and operational capacity

Prisoners held at the time of inspection: 689

Baseline certified normal capacity: 549

In-use certified normal capacity: 750

Operational capacity: 720 (temporarily during building work)

Notable features from this inspection

Assaults had increased significantly, particularly those carried out by prisoners against staff.

Drugs and the linked supply of mobile phones were major issues, and in one month shortly before our inspection the estimated prison value of finds amounted to over £15,000.

The positive drug testing rate was among the highest in the prison estate at 42.6%.

There had been 16 self-inflicted deaths in the previous eight years, and a further death a few weeks after this inspection, and levels of self-harm were very high.

Problems with facilities management contracts had led to a huge backlog of maintenance jobs.

Many staff were relatively new in post and lacked the confidence and skills to deal with prisoners.

Some physical conditions were poor and prisoners did not have sufficient opportunities to exert any influence on their everyday lives.

Staffing issues had a negative effect on the time men spent out of their cells and on access to purposeful activities.

Offender management work with high risk men was generally strong.

HM Prison and Probation Service had placed the prison under 'special measures' and there were some encouraging early signs that this was helpful.

Prison status and key providers

Public

Physical and mental health provider: Essex Partnership University NHS Foundation Trust (EPUT)

Substance misuse provider: EPUT (clinical services) and Phoenix Futures (psychosocial support)

Learning and skills provider: People Plus

Community rehabilitation company (CRC): Essex CRC (Sodexo)

Escort contractor: Serco

Prison group

Hertfordshire, Essex and Suffolk

Brief history

HMP and YOI Chelmsford was built in the 1830s. Two new residential units were added in 1996 (E and F wings), and a third unit (G wing) was opened in 2006. The prison serves local courts and holds those who are sentenced, on remand or on trial. Adults, young adults and some foreign national prisoners are held in the prison.

Short description of residential units

The older part of the establishment had four wings, A, B, C and D, running off a central hub. The segregation unit was on A wing and vulnerable prisoners had separate accommodation on D wing. The newer part of the prison had a 12-bed, 24-hour health care unit (known as the extra care unit). The integrated drug treatment system was available on E wing. F wing was the first night and induction unit and G wing held a mixed population, including enhanced prisoners.

Name of governor and date in post

Penny Bartlett (temporary), 21 May 2018

Independent Monitoring Board chair

Joe Hayden

Date of last inspection

4–15 April 2016

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

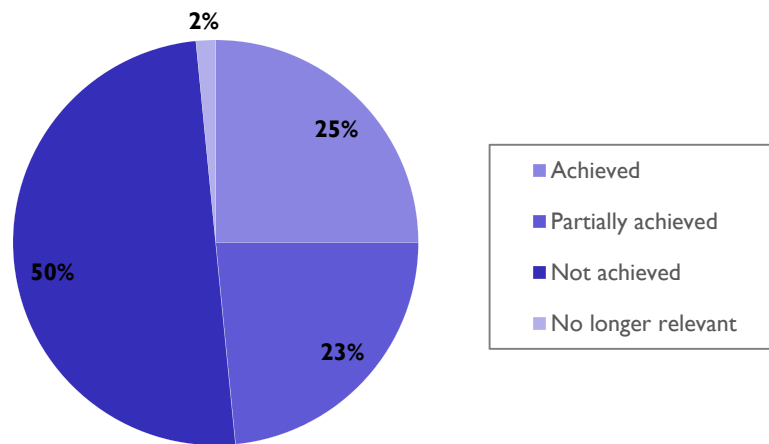
¹ <https://www.justiceinspectorates.gov.uk/hmiprisons/our-expectations/prison-expectations/>

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

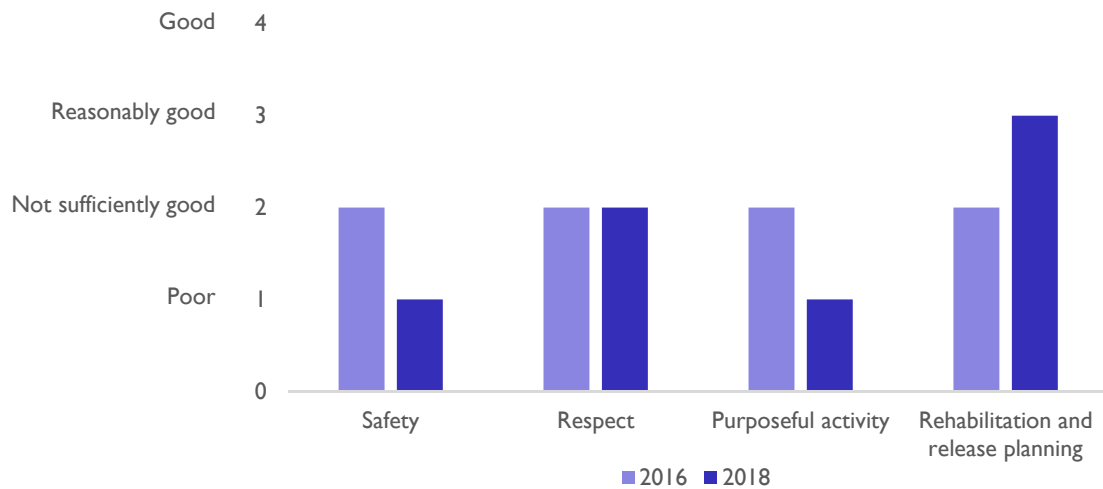
- S1 We last inspected HMP Chelmsford in 2016 and made 64 recommendations overall. The prison fully accepted 57 of the recommendations and partially (or subject to resources) accepted five. It rejected two of the recommendations.
- S2 At this follow up inspection we found that the prison had achieved 16 of those recommendations, partially achieved 15 recommendations and not achieved 32 recommendations. One recommendation was no longer relevant.

Figure 1: HMP Chelmsford progress on recommendations from last inspection (n=64).



- S3 Since our last inspection outcomes for prisoners changed in all healthy prison areas apart from Respect, which remained the same. Outcomes were poor in Safety and Purposeful activity, not sufficiently good in Respect and reasonably good in Rehabilitation and release planning.

Figure 2: HMP Chelmsford healthy prison outcomes 2016 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 *Support during prisoners' early days at the prison was adequate. Levels of violence were very high and not enough was being done to address the underlying causes. The number of adjudications was high. Force was used very frequently. The segregation environment was poor, but staff-prisoner relationships were good. Security arrangements were generally appropriate and focused on the challenges, but drug use was very high. There had been many self-inflicted deaths over recent years, and some serious issues were recurring. Levels of self-harm were extremely high, as was the use of constant supervision. Not enough was being done to provide appropriate support. Adult safeguarding arrangements were reasonably well developed. **Outcomes for prisoners were poor against this healthy prison test.***

S5 *At the last inspection in 2016 we found that outcomes for prisoners in Chelmsford were not sufficiently good against this healthy prison test. We made 12 recommendations in the area of safety.⁴ At this inspection we found that three of the recommendations had been achieved and nine had not been achieved.*

S6 Overall, support during prisoners' early days was adequate. Reception processes were underdeveloped. No useful information was available while prisoners waited and interviews were not held in private. The needs of non-English speakers were not routinely identified. Arrival at the first night centre was handled well and prisoners had good access to peer workers. A good, private safety interview took place. In our survey, more prisoners than at other local prisons felt safe on their first night. Some men did not receive hot food or have access to a shower before being locked in poorly prepared first night cells, but new arrivals were monitored overnight. Arrangements at the first night centre were disorganised and offered very little time out of cell. Induction was poorly thought through, peer workers were not adequately overseen and attendance was not monitored. The needs of non-English speakers were not routinely identified.

S7 There had been a significant increase in recorded assaults against staff and prisoners since our last inspection and rates were higher than at similar prisons. Until recently violence reduction work had been under-resourced and paid insufficient attention. The strategic management of violence had just started to improve. Investigations following violent incidents were frequently delayed, took too long to complete and limited follow-up action was taken. Systems for managing perpetrators of violence and bullying were limited and staff relied too much on formal disciplinary procedures and applying the basic status of the incentives and earned privileges (IEP) scheme. However, some promising initiatives were being introduced. Support for victims was adequate. Vulnerable prisoners on F wing felt safe but could not access a full regime. The IEP scheme was not yet sufficiently effective in promoting good behaviour or managing poor behaviour. There was some evidence of staff focusing on positive as well as negative behaviour in entries on P-Nomis (the Prison Service IT system), although management checks did not take place frequently enough.

S8 The number of adjudications had increased significantly since our last inspection and was comparatively high. Some cases could have been more appropriately dealt with through the IEP system, although the hearings and paperwork we reviewed suggested the process was fair. The number of adjourned adjudications was high and had the potential to become unmanageable.

⁴ This included recommendations about substance misuse treatment, which in our updated Expectations (Version 5, 2017) now appear under the healthy prison area of respect.

- S9 Force had been used on 420 occasions in the previous six months, more than double at our last inspection and comparatively high. Although most paperwork had been completed, it did not sufficiently justify all incidents. Body-worn video cameras were used appropriately. The use of special accommodation had increased since our last inspection and was initially justifiable, but some prisoners spent too long in these conditions. Monthly operational governance and scrutiny meetings examined a wide range of information and data, including some use of force paperwork. Too little action was implemented, however, and not all recordings of planned interventions were routinely viewed or scrutinised.
- S10 The use of segregation had increased since our last inspection but remained comparatively low. The average length of stay was relatively short. The condition of the segregation unit was poor. Holding rooms contained graffiti, the special accommodation cells were poor and the segregation exercise yard was littered with rubbish and clothing. The regime remained limited but was generally delivered reliably. Relationships between segregation staff and prisoners were good and we observed staff manage some challenging behaviour in a calm and considered manner. We saw a few cases where care planning and reintegration work was being undertaken, although they remained rudimentary.
- S11 Procedural security arrangements were mostly proportionate. Weaknesses in physical security contributed significantly to the risks the establishment faced. The prison held a large number of men who were connected to organised crime gangs and they were responsible for much of the supply of illicit items. The flow of intelligence was good – it was analysed swiftly and security priorities were aligned to the threats of violence, drugs and associated debt. Survey results, finds and positive drug test results all indicated that drugs were easily available. Over 40% of all prisoners said it was easy to obtain illegal drugs and, while comparable with similar prisons, the positive drug testing rate of 42.6% (combined random and synthetic cannabinoids⁵) was among the highest in England and Wales according to HM Prison and Probation Service (HMPPS) data on national mandatory drug testing results. The prison had committed to address the problem and a bi-weekly supply reduction meeting to identify risks and review action, chaired by the governor, had been prioritised.
- S12 Levels of self-harm had increased dramatically across three successive inspections and were very high. There had been 16 self-inflicted deaths in the previous eight years, four in the two years since we last visited. The response to these trends had been inadequate. The prevention of suicide and self-harm had not been prioritised sufficiently and the safer custody team had no strategy or action plan to reduce levels of self-harm. Some deficiencies repeatedly highlighted by the Prisons and Probation Ombudsman (PPO) had not been addressed. Staff lacked the experience and confidence to support men with the highest levels of crisis and the number of assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm was consistently high and unmanageable. Some ACCT entries were not made immediately after the interaction with the prisoner and care maps were not used effectively to support prisoners. The prison planned to introduce training to address some of these deficits. Constant supervision was used too often – it was unmanageably high and arrangements were unsafe. There were not enough Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners). The prison focused well on adult safeguarding issues and work was developing.

⁵ 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.

Respect

S13 *Staff-prisoner relationships were generally respectful, and the key worker initiative was welcome. Most men had a member of staff to support them. Many staff were new and needed more mentoring to develop their confidence and skills. Cleanliness was poor and graffiti widespread. The older living accommodation was particularly poor and many routine maintenance jobs had not been completed. Men faced many frustrations in their everyday lives. Consultation with prisoners was underdeveloped and the applications and complaints processes needed urgent attention. Equality and diversity work were also underdeveloped, but those with protected characteristics were mainly concerned about the same issues as other men. Faith provision was strong. Important aspects of health care leadership and care required improvement. Substance misuse support now met most men's needs. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S14 *At the last inspection in 2016 we found that outcomes for prisoners in Chelmsford were not sufficiently good against this healthy prison test. We made 26 recommendations in the area of respect. At this inspection we found that four of the recommendations had been achieved, nine had been partially achieved and 13 had not been achieved.*

S15 We were told that over 70% of operational staff had less than two years' experience and plans were in place to provide them with better mentoring and support. In our survey, prisoners were generally positive about staff. Three quarters of respondents in our survey said most staff treated them with respect and almost four out of five said there were staff they could turn to if they had a problem. Our own observations found most staff interacted reasonably well with prisoners but that professional boundaries were not always clearly defined. The introduction of key workers was positive and work undertaken so far reinforced contact between staff and prisoners. However, the scheme was not sufficiently integrated into the prison's resettlement and rehabilitation work.

S16 There was a considerable contrast between the new and the old parts of the prison. In the old part, many external areas were dirty, strewn with rubbish and poorly maintained. Much of prisoners' accommodation was also poor. Many cells were in a poor state of repair and lacked basic furniture. Although the grounds, communal areas and accommodation on the newer wings were better, we still saw many rooms with graffiti, inappropriate pictures and missing furniture. There was a shortage of some key amenities, including pillows, mattresses, sheets and kettles. The shortages were exacerbated by delays in the completion of many general maintenance tasks, including those affecting central laundry facilities and washing machines on wings, which often broke down. While cell call bell responses were monitored, no analysis was undertaken. Alarm bells often did not receive a response for very long periods. Managers were aware of these, and other, shortfalls and had put in place plans to address them. However, many staff we observed appeared to have become inured to the conditions and some inexperienced staff could not compare them with those elsewhere in the prison estate.

S17 The food was reasonably varied. Nevertheless, only 36% of prisoners in our survey said the food was good or very good. Serveries were not supervised well enough. Many prisoners complained about variations in portion sizes and in our survey 39% of prisoners said they never got enough food. Most prisoners told us the prison shop sold what they needed, although new arrivals still had to wait almost two weeks for a first order to be delivered. They could access interim supplies, however.

S18 No prisoner consultation council was running at the time of the inspection. However, several forums were planned on wings, where specific concerns could be discussed. Although a

triplicate application system had been introduced, there were often considerable delays in responses. Many prisoners told us they made multiple applications for the same service and were frustrated because they failed to get answers to their enquiries. There were similar problems with complaints. We reviewed a random selection of complaints from the previous six months and found the standard of responses in many cases to be poor and often unhelpful. In the previous six months, 24% of all complaints submitted had been through the confidential access process (for complaints about staff or those that are particularly sensitive or personal), reflecting a lack of confidence in the complaints system. On average, 21% of responses each month were late. Although no dedicated officers were on hand to help prisoners with legal queries, information was available through the offender management unit (OMU). Prisoners had good access to legal visits and video conferencing.

- S19 A quarterly equality meeting identified action that needed to be taken, but the prison often failed to implement it. Other than basic information identified during the reception screening, no meaningful analysis of data was carried out to identify if any minority groups were disadvantaged. The number of discrimination incident reporting forms (DIRFs) submitted, although similar to the previous inspection remained relatively low and the process was not widely promoted. However, investigations of those that were submitted were reasonably detailed and good internal quality assurance was conducted. Apart from regular consultation for prisoners from a Gypsy and Traveller background, opportunities to work with prisoners with protected characteristics were limited and required improvement. Nevertheless, men with protected characteristics we surveyed and spoke to were generally concerned about the same issues as other men at Chelmsford.
- S20 The establishment had not had a full-time managing chaplain in place for over 12 months due to delays in the recruitment process, which had placed a strain on the chaplaincy department. Nevertheless, the chaplaincy was visible, accessible and well-integrated into the prison. Access to worship was good and a range of spiritual activities was available. The use of free phone access to the chaplaincy provided prisoners with further support.
- S21 Health provision had improved since the last inspection, but several key areas remained poor. Significant staffing shortages at every grade adversely affected service delivery and leadership. Some aspects of governance had improved, but patient consultation was underdeveloped and complaint management was poor. Smoking cessation services were excellent. Waiting times for some primary care services were too long, exacerbated by high non-attendance rates at appointments and insufficient clinical rooms. Care in the much-improved inpatient unit was good. Mental health services were very stretched partly due to the large number of ACCT reviews and staffing shortages. Overall the service was too reactive and the range of support was inadequate. Men waiting to be moved from the prison under the Mental Health Act continued to experience delays in being transferred. The substance misuse service had improved and was good, but only newly arrived prisoners on E wing received overnight stabilisation checks, which created risks. Some aspects of medicines management were unsafe.
- S22 Despite improvements, some aspects of medicines management remained inadequate. The dental provision was good. Prisoners being released or transferred received all necessary medication, but pre-release arrangements for primary and mental health care were inadequate. However, pre-release arrangements for those seeking to access substance misuse treatment services were excellent.

Purposeful activity

S23 *Time out of cell was severely restricted because of ongoing staffing issues. Many men had very limited time out of cell and extended periods of lock-up, which added to their frustrations. The library and gym were reasonably good. Ofsted found education, skills and work required improvement. There remained insufficient activity places, and attendance and punctuality were poor. Too much teaching and learning needed to improve but mentors were well used. More activities needed to be accredited. Outcomes were good if men completed an activity, but many did not. **Outcomes for prisoners were poor against this healthy prison test.***

S24 *At the last inspection in 2016 we found that outcomes for prisoners in Chelmsford were not sufficiently good against this healthy prison test. We made 13 recommendations in the area of purposeful activity. At this inspection we found that five of the recommendations had been achieved, two had been partially achieved and six had not been achieved.*

S25 Our roll checks found 35% of prisoners locked in cells. The maximum time out of cell was just over seven hours for those attending work, but many men had less than this. Time out of cell for most, was nearly always limited to just over two hours per day with long periods between unlocking. The use of a split regime ensured that more prisoners could go to activities or access association. Although regular, exercise periods were too short, lasting only 30 minutes. An evening association period had been introduced for some enhanced prisoners.

S26 Most prisoners could visit the library at least once a week and a large number of men (65%) were registered and used the facilities regularly. The library was well equipped with a wide range of books and ran several initiatives to encourage family and community involvement. The physical education (PE) facilities were impressive, although staff shortages meant classes were predominantly recreational and access to accredited vocational training had only recently restarted.

S27 Most of the weaknesses identified in the education, skills and work provision at the last inspection remained. There were not enough activity spaces for the population. In a typical session, 318 prisoners were allocated to activities and 225 attended. Around 300 prisoners were not involved in activities. Good data provided managers with an accurate account of performance, allocation and attendance levels. However, attendance was poor, at 60%. Wing staff did not do enough to encourage prisoners to attend activities or apply appropriate sanctions against prisoners who refused to work. The learning and skills plan set appropriate objectives, based on a needs analysis. However, most elements of the plan had not been implemented. The self-assessment report was generally accurate but was too positive about the quality of teaching. In most work areas, men could not gain a vocational qualification to accredit their skills.

S28 The resettlement centre was suitable for induction and pre-release activities and all relevant agencies were present. Some prisoners were provided with good support, including access to vocational training, such as through the construction skills certification scheme after release. A pre-release course offered prisoners help to draw up a curriculum vitae and develop job search skills. However, the course was poorly attended. Data on outcomes for prisoners after release were incomplete.

S29 Teaching in education required improvement. Some teachers planned interesting, topical sessions that stimulated prisoners' interest, but too many lacked variety and did not address men's individual needs. Staff did not use individual learning plans effectively to set targets tailored to each prisoner, and in some cases, marking did not include comments on how the

prisoner could improve. Equality and diversity were promoted through themed events and sessions focusing on, for example, Black History Month, LGBT Week and Holocaust Survival Day. Some workshops and work areas provided highly effective individual support and helped prisoners develop vocational skills, for example, in the Prisons Information Communication Technology Academy (PICTA) and the kitchen, as well as in construction and wire-stripping workshops. However, no vocational qualifications were offered in prison workshops. Resources in the PICTA workshop were good – it had modern, internally networked PCs with relevant software and text books. Outreach from the education department helped prisoners in vocational training workshops develop their maths skills.

- S30 Attendance and punctuality were poor. Prisoners' personal development and employability skills gained in vocational workshops and industries were not recorded sufficiently. Most prisoners related well to teachers and behaved respectfully, but in some education classes prisoners used bad language and behaved poorly without being challenged. Twelve mentors worked in the prison. They were well trained and generally supported prisoners in activities effectively. In addition, the Shannon Trust reading scheme was well developed. The Firebreak initiative supported a small number of prisoners well to develop self-assurance and become involved in education.
- S31 Pass rates for those who completed their courses were good. In maths and English, and in the PICTA workshop, results were very good. The standard of work in most workshops, and in art was good. Standards in cleaning, waste recycling and the laundry were satisfactory. Outcomes for learners with additional learning needs were good. Non-completion rates were too high on some courses, including construction, painting and decorating, and English and maths at level 1.

Rehabilitation and release planning

S32 *Children and families provision was reasonably good. The strategic focus on supporting rehabilitation was developing. Nearly all men had an up-to-date offender assessment system (OASys) report and good offender management work was being undertaken with high risk men. Support for medium and low risk men was adequate. Public protection arrangements were generally appropriate but the inter-departmental risk management team (IDRMT) needed to be embedded. Most men progressed quickly to other prisons and the home detention curfew (HDC) process had improved. A reasonable range of resettlement interventions were offered, although they needed to be better coordinated. Weaknesses in release planning processes meant not all men were properly assessed. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S33 *At the last inspection in 2016 we found that outcomes for prisoners in Chelmsford were not sufficiently good against this healthy prison test. We made 13 recommendations in the area of resettlement.⁶ At this inspection we found that four of the recommendations had been achieved, four had been partially achieved, four had not been achieved and one was no longer relevant.*

- S34 Overall prisoners were reasonably positively about the support they received to help them maintain contact with their families and friends. Access to in-cell phones were particularly appreciated. An appropriate range of provision included children's visits, parenting courses and Storybook Dads (which enables prisoners to record a story for their children to listen to at home). Further family visits, library sessions for children and community-based support for families were also available. Although prisoners complained about visits starting late we found

⁶ This included recommendations about reintegration planning for drugs and alcohol and reintegration issues for education, skills and work, which in our updated Expectations (Version 5, 2017) now appear under the healthy prison areas of respect and purposeful activity respectively.

little evidence to support this. The visits hall was large and bright and good crèche and tea bar facilities were available.

- S35 The strategic management of rehabilitation services was underdeveloped and services were not fully integrated. Nearly everyone eligible had an up-to-date OASys report. OASys reports were reasonably good, but sentence plan targets were too generic. Work with low and medium risk prisoners was generally adequate but they had too little contact with offender supervisors. Risk management planning for release and contact with the probation teams were good. Work with high risk men was good. Contact between these prisoners and offender supervisors was good, as were OASys reports. HDC processes were well managed, but the lack of Bail and Accommodation Support Service (BASS) accommodation meant some men were not released on their eligibility date. Public protection work was developing but was not yet sufficiently robust. Initial screening processes and monitoring arrangements were generally good. IDRMT meetings had lapsed until the week of the inspection and while we found no cases that caused concern, this was a risk. Multi-agency public protection arrangement (MAPPA) processes started too late. Initial categorisation and reviews took place promptly. Reviews were reasonably detailed and decisions were justified. Most men were transferred to other prisons as part of their progression within a reasonable time.
- S36 There were some good unaccredited interventions, but not all places were taken up. Men received support to retain their tenancies on reception. About 30% of men were released with no fixed address. Some good housing case work was undertaken, but not everyone with a housing need was sufficiently followed up. The finance, benefit and debt pathway was reasonably good, and staff from Jobcentre Plus were based at the prison. Social justice charity Nacro also provided some support and there was a budgeting course. The specialist money advice service had been withdrawn.
- S37 Many men did not have an initial resettlement assessment. Community rehabilitation company (CRC) resettlement plans were not detailed enough and not all men's risks or needs were identified. Processes for reviewing men's resettlement needs before release were too variable and some men were not contacted in time to provide them with adequate support. Discharge processes were reasonable. Some 'meet-at-the-gate' support was available for local men with additional needs.

Main concerns and recommendations

- S38 Concern: Levels of violence were very high and had been increasing since at least 2016. They were significantly higher than those we usually see in similar prisons. The strategic management of violence had been weak until recently, but had started to improve. However, investigations were not good enough and there was an over-reliance on disciplinary processes and the IEP scheme to manage poor behaviour. The reasons for poor behaviour were not understood and the prison did not work sufficiently with perpetrators.

Recommendation: Managers should work proactively to reduce levels of violence and develop and embed a range of initiatives to address the problem.

- S39 Concern: Survey results, finds and positive test results all indicated that drugs were easily available. Over 40% of all prisoners said it was easy to obtain illegal drugs and the positive drug testing rate of 42.6% (combined random and synthetic cannabinoids was among the highest in England and Wales according to HMPPS data). The prison held a large number of men connected to organised crime gangs, who were responsible for much of the supply of illicit items, including drugs and mobile phones. Managers had taken sensible steps to address these threats, but they were not enough – the perimeter remained very vulnerable and it seemed that the drug supply was fuelling levels of violence.

Recommendation: Managers should invest in staff, processes, resources and technology to help reduce the drug supply into the prison.

- S40 Concern: Levels of self-harm were very high. There had been 16 self-inflicted deaths in the previous eight years, four in the two years since we last visited. The response to these trends had been inadequate. The prevention of suicide and self-harm had not been prioritised sufficiently and the safer custody team had no strategy or action plan to reduce levels of self-harm. Some deficiencies repeatedly highlighted by the PPO had not been addressed. ACCT documents were not good enough and the number was unmanageable. Staff lacked the experience and confidence to support men most in crisis and insufficient Listeners were in place. The level of constant supervision was unmanageably high and arrangements were unsafe. Cell emergency bells often went unanswered for considerable periods of time.

Recommendation: Managers should improve the care staff provide to men who were at risk of self-harm and there should be a better focus on the issues raised by the PPO in relation to deaths in custody.

- S41 Concern: The prison was overcrowded. Some areas of the prison were dirty, graffiti was widespread and many cells had broken or missing furniture and unscreened toilets without lids. The offensive displays policy was not being adhered to. Many maintenance tasks were outstanding, which exacerbated prisoners' poor conditions. There was a shortage of some key amenities, including pillows, mattresses, sheets and kettles.

Recommendation: Managers should ensure prisoners are held in clean and respectful living conditions.

- S42 Concern: Prisoners were frustrated by their inability to get basic queries or requests dealt with. Consultation arrangements were underdeveloped, the application process did not work effectively and complaints were poorly managed.

Recommendation: Managers should ensure there are clear and effective processes so prisoners can be consulted, make requests and resolve issues.

- S43 Concern: Some important aspects of health provision were poor, including incident reviews and complaints management, exacerbated by health staffing shortages. Many prisoners waited too long for primary care services and mental health provision did not meet the population's needs. Some aspects of medications management were unsafe and pre-release planning for primary and mental health services was poor. Partnership working between health and prison managers needed to be stronger to drive improvements.

Recommendation: Robust governance structures, including consistent and competent health staff, effective leadership and improved partnership working between the prison and health providers, should ensure health provision consistently meets the needs of prisoners.

S44 Concern: The maximum time out of cell available was just over seven hours, but most men had much less than this. Most men were not engaged in activities and usually spent just two hours a day out of their cells. There were also often very long periods between unlocking. In this context, outside exercise was particularly important, and exercise periods took place regularly, they were too short.

Recommendation: Time out of cell should be improved and adhere to the published regime.

Recommendation: Men should have at least an hour's exercise outside every day.

S45 Concern: There were still too few activity places and the amount of purposeful activity men had at the prison was not being maximised. Not all the places that were available were being used, and attendance and punctuality were not good enough. Prisoners who were vulnerable because of their offence had a particularly poor experience. Not enough activities were accredited and prisoners' progress and skills development were not sufficiently recognised.

Recommendation: Managers should ensure that there are sufficient activity places and that attendance, accreditation and the recognition of prisoners' progress are improved.

S46 Concern: The rehabilitation needs of many men were not assessed on arrival and in some cases, staff were not proactive enough about meeting them. Offender management support for low and medium risk men was underdeveloped and meaningful contact limited. Referral processes and information sharing across agencies and departments were not sufficient to ensure men received the support they needed to progress to other prisons and on release.

Recommendation: Managers should ensure that men have their resettlement needs assessed on arrival and prior to release, and that offender management arrangements meet the needs of all eligible groups.

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 Overall, support during prisoners' early days was adequate. Some escort vehicle staff handed in their anti-ligature knife at the prison entrance, which meant they could not intervene if a prisoner was attempting to harm himself while still in the van outside reception. Prisoners were handcuffed for the short distance from the escort vehicle to the prison corridor, a temporary arrangement that had been risk assessed.
- I.2 Reception processes were underdeveloped. Staff were friendly, but prisoners waited in bare holding rooms where there were no leaflets or posters. Orderlies provided them with a hot drink, but there were no Insiders (prisoners who introduce new arrivals to prison life) or Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) to welcome or support men. Interviews with prison and health care staff did not take place in private. Prisoners spent about two hours in reception.
- I.3 New arrivals were taken to a holding room on F wing, the first night centre, where they had good access to Insiders and a Listener. They saw a GP and had a good, well-structured and private safety interview with an officer. In our survey, more prisoners than at other local prisons said they felt safe on their first night.
- I.4 Most prisoners arrived on F wing in the early evening. Those arriving after 5pm missed dinner and could only have a cold snack instead. Those reaching the wing after 7pm could not have a shower before being locked up for the night. First night cells were bleak and poorly prepared – they did not have a pillow, kettle, a lockable cabinet or an in-cell phone. New arrivals were checked regularly overnight.
- I.5 Arrangements at the first night centre were disorganised and had to accommodate prisoners who were vulnerable because of their offence. We found men who had been on F wing since arriving two or three months earlier because there was not enough space in the vulnerable prisoner unit. The two different populations on the wing meant prisoners had very little time out of cell – only 90 minutes a day in some cases. B wing staff visited F wing to run first night and induction processes. There were plans to relocate the first night centre to B wing, nearer reception, which promised to resolve some of the problems in the early days' process.
- I.6 Induction was supposed to take place over two days after a prisoner's arrival. Insiders delivered a presentation, which was too detailed, poorly thought through and contained too much jargon. An officer attended but oversight was weak and he failed to challenge inappropriate remarks that peer workers made. Staff had developed a recording system to monitor attendance but had stopped using it. Over the two days, prisoners were meant to visit the library and the resettlement centre, but attendance at these sessions was patchy.

- I.7** Non-English speakers' needs were not routinely identified on arrival. We saw staff in reception and at the first night centre attempting to communicate with a prisoner who spoke hardly any English. Another prisoner who spoke the man's language provided assistance, but he could not disclose any safety concerns confidentially. First night staff did not know how to access the telephone interpreting service. The next day, the same prisoner was taken to the induction presentation, which he could not understand.

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

- I.8** Violence had increased significantly and was higher than we usually see at similar prisons. During the six months prior to the inspection, 225 assaults on staff and prisoners and 66 fights had taken place, compared with 135 and 65 respectively at the previous inspection. The number of assaults on staff – 119 in the previous six months – was a particular concern. In our survey, 21% of prisoners said they felt unsafe at the time of our inspection and 47% said they had felt unsafe at some time.
- I.9** Until recently violence reduction work had been under-resourced and it was only now that strategic oversight was beginning to improve. The prison had a 'confronting conflict' violence reduction strategy, which was being integrated alongside the new national HM Prison and Probation Service (HMPPS) behaviour management policy.
- I.10** Joint working with the security department remained underdeveloped and investigations into violent incidents were frequently delayed and took too long to complete in some cases, and follow-up action was limited. The department had investigated five unexplained injury incidents in the previous six months, but believed there had been more that they had been unaware of.
- I.11** It appeared that much of the violence stemmed from illicit drug use, the transition to a smoke-free prison, bullying and associated debt. We also believed that poor time out of cell, prisoners' frustrations about important aspects of daily life such as accessing property, getting basic issues resolved and a new and inexperienced staffing group contributed to the high levels of recorded violence (see paragraphs 2.12, 2.19 and 3.1).
- I.12** Monthly safer custody meetings took place and, while a reasonable amount of data was gathered and discussed, not all key stakeholders attended, some action continually rolled on to subsequent meetings and insufficient updates were provided. The bi-weekly complex needs meetings were useful and generally well attended, except for staff from the security department. Follow-up action did not adequately cover all presenting risks and was not broad enough. However regular updates on progress were provided.
- I.13** There were three conflict resolution prisoner peer representatives during our inspection and more were being trained. They were enthusiastic and felt well supported but their work was not promoted well enough. Prisoner consultation took place, including through a survey, but the number returned was low or did not consistently represent all wings. More work was required to understand why prisoners did not respond in greater numbers and why more prisoners on some wings than others returned their survey questionnaire.

- I.14** Measures for managing violence were not sufficient. Although local policies encouraged staff to set individual targets and tailor support, staff relied too much on charging perpetrators or those suspected of being involved in violence under prison discipline rules and placing them on the basic regime of the incentives and earned privileges (IEP) scheme (see paragraph I.17), rather than dealing with problems before they escalated. Violence reduction staff saw victims and provided them with a sufficient level of support. Tailored follow-up visits were also organised when required. (See main recommendation S38.)
- I.15** Some promising initiatives were being implemented to challenge risks, including training staff in conflict resolution, one-to-one work with the most difficult prisoners and the formation of a debt committee. They were, however, too recently established for their impact to be assessed.
- I.16** Prisoners who were vulnerable because of their offence and at risk for other reasons were accommodated on D wing, with A and F wings providing overspill capacity. While most said they felt safe, those on F wing (15 at the time of our inspection) had a poor regime and could not attend activities that were not on the wing, such as work, education or the gym. However, there were plans to change the use of the accommodation, which would potentially eliminate this issue.
- I.17** The IEP policy had been reviewed, but the scheme was not being used effectively. It offered few incentives to promote positive behaviour, although the prison had introduced evening association for enhanced prisoners during the inspection. The basic regime was used extensively to remove privileges from men who had been involved in a single serious incident. However, the scheme was not used to challenge or manage, for example, convicted prisoners refusing to attend work.
- I.18** During the inspection, 20% of prisoners were on the enhanced level of the scheme, 8% were on the basic level and the remainder were on standard or entry levels. Electronic case notes we examined contained positive and negative comments on prisoners' behaviour. However, prisoners told us they were not always informed when a negative entry had been made. This perception was corroborated by senior managers verbally and in recorded correspondence to prisoners, noting this poor practice as 'an area of development'. There were insufficient case entries relating to IEP reviews and targets set were generic. Management checks were infrequent in the records we examined.

Adjudications

- I.19** There had been 1,603 adjudications during the previous six months, which was comparatively high and significantly more than at our previous inspection. Many adjudication charges related to antisocial behaviour and unauthorised items. There were two adjudication holding rooms. The only toilet available for prisoners was on the landing – it was soiled and in poor condition.
- I.20** The records of adjudications we examined demonstrated that prisoners had enough time to prepare cases and could seek legal assistance, and adjudicators undertook adequate levels of enquiry. Some adjudications, however, were for minor offences that could have been dealt with through the IEP scheme. During the inspection, 136 adjudications had been adjourned and a number did not proceed because of lengthy delays between hearings – some were for serious offences, including fights and assaults. The large number of adjudications could become unmanageable and undermine the adjudication process's effectiveness.
- I.21** Adjudication standardisation was discussed at monthly segregation monitoring meetings. We looked at the minutes of four meetings and although they considered a reasonably wide

range of data, they did not sufficiently analyse them to ensure the process remained fair and supported discipline within the establishment. Adjudications had not been quality assured in recent months.

Use of force

- I.22** Records indicated that force had been used on 420 occasions in the previous six months, double the number at our previous inspection and higher than we usually see in similar prisons. Most use of force documentation we reviewed was complete and all information was recorded on a spreadsheet. The paperwork was varied – some provided a good level of information, while others were minimal and failed adequately to justify using force.
- I.23** Body-worn video cameras were used appropriately to record spontaneous incidents of force. However, they were also used during planned incidents, when hand-held video cameras would have enabled them to record better footage. Recordings of planned incidents involving force were not routinely examined and we had some concerns about some practices we saw, which we shared with managers. They included poor initial briefings, the role of supervising officers and some staff's unnecessary use of fire retardant hoods, which resembled balaclavas.
- I.24** Batons had been drawn on three occasions in the previous six months. Paperwork we examined adequately justified their use in two cases, but not in the third case, where batons could potentially have been avoided. We discussed the case with managers, who acknowledged greater scrutiny was required of all incidents involving batons.
- I.25** Special accommodation had increased since our last inspection – it had been used 16 times in the previous six months. In most cases, it was used appropriately and records were more accurate than we expected. However, some records did not justify the continued use of special accommodation based on the prisoners' behaviour. The average time spent in special accommodation was 12 hours, which was high.
- I.26** A monthly operational governance meeting looked at segregation, adjudication and use of force data. Attendees were not always listed in meeting minutes that we reviewed, insufficient action was implemented and updates on previous action were limited. The monthly use of force review board meetings examined 10% of monthly use of force incidents, but not enough was being done to address the poor quality of paperwork we saw.

Segregation

- I.27** The segregation unit had been used on 167 occasions during the previous six months, comparatively low but a slight increase since our last inspection. Most periods in segregation were relatively short – the longest resident during our inspection had been there since April 2018. All prisoners were strip-searched on arrival, regardless of their individual circumstances.
- I.28** The condition of the segregation unit was poor. Holding rooms contained graffiti, the two special accommodation cells were poor and the exercise yard, although not in use, was littered with rubbish and clothing. Cells were of a reasonable standard, although some had graffiti and soiled toilets.
- I.29** The daily regime was limited but delivered consistently. It gave prisoners access to a shower, phones and exercise, but they could not attend activities that were not on the wing. Most prisoners spent nearly all day locked in their cells with little to do.

- I.30** Relationships between segregation staff and prisoners were good and we observed staff manage some challenging behaviour in a calm and considered manner. Prisoners we spoke to were positive about how unit staff treated them and in our survey 73% of those who had been segregated said they were treated well.
- I.31** Thirty-six prisoners on an assessment, care in custody and teamwork (ACCT) case management document for prisoners at risk of suicide or self-harm had been held in the segregation unit between December 2017 and May 2018. Documentation explaining the justification for keeping a prisoner on an ACCT document in the segregation unit had been completed although they varied in quality. Segregation paperwork was completed, but targets for prisoners were generic and did not address their needs or issues. Similarly, while we saw some evidence of care planning and reintegration work, it remained largely superficial and rudimentary.

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.32** Most aspects of procedural security were generally proportionate. However, there were significant weaknesses in the prison's physical security, which exacerbated risks. For example, the public had unrestricted access to the perimeter and during the inspection prison staff apprehended a member of the public who was throwing illicit items into the prison from trees nearby.
- I.33** The prison held many potentially high risk prisoners, including those from organised crime groups who were responsible for much of the drug supply, distribution of illicit items and associated debt, as well as violence within the prison.
- I.34** The security team was aware of the security threats the prison faced. A large amount of intelligence was gathered from across the prison and over 5,000 intelligence logs had been received in the six months prior to the inspection. The flow of intelligence was good and while we were satisfied that all intelligence was dealt with promptly, many intelligence reports (IRs) were duplicated and had contributed to a significant backlog of IRs, which was impinging on other work security analysts could have been doing to address risks.
- I.35** The prison had begun to manage and present intelligence through the HMPPS local tactical assessment (LTA), which it was piloting. The LTA was a document that was used to divide intelligence into subject areas such as escapes, drugs and violence. The subject areas were analysed to identify risks and gaps in the current intelligence flow. This ensured that security priorities were aligned to the key threats of violence, drugs and associated debt. The LTA was then presented at the monthly security meeting, although attendance by representatives outside security was limited and we could not establish if action was always promptly acted on.
- I.36** Staff from departments outside the substance misuse team did not attend a monthly drug strategy meeting regularly. However, a bi-weekly supply reduction meeting to address risks, chaired by the governor, was well attended and we found evidence of action being implemented.

- I.37** Links with external agencies, such as the local police and the eastern regional special operations unit were good. The governor also held meetings with local police commanders to address the external threats the prison faced. This had resulted in several initiatives to reduce the supply of illicit items. For example, local police had devised a system for upskilling inexperienced staff in collating finds and gathering evidence. The police and HMPPS had also conducted assessments of the perimeter to identify where improvements could be made. Funding had been provided for several areas, including the introduction of additional search and patrol dogs, CCTV upgrades and enhancements in known hotspots. Prison managers were aware of corruption issues and two staff had been prosecuted for trafficking illegal items.
- I.38** Despite the introduction of the LTA, links with external agencies and regular meetings to reduce demand and disrupt the supply, drugs and illicit items were still too easily available. In a single month, the prison had seized 28 drug packages and 44 mobile phones during searches, and 18 parcels that had been thrown over the perimeter wall. Other finds of mobile phone-related items, heroin, cocaine and other drugs were also discovered. The estimated value of the items seized during that month alone was more than £15,000.
- I.39** Over 40% of all prisoners said it was easy to get illegal drugs and while comparable to similar prisons, the random mandatory drug testing (MDT) rate was 31.5%. When combined with synthetic cannabinoids⁷ the rate was 42.6% both of which were among the highest in England and Wales, according to HMPPS data on MDT results. MDTs focused predominantly on the HMPPS performance target, which meant the prison had too few resources left to undertake frequent or suspicion testing programmes. (See main recommendation S39.)

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.40** Levels of self-harm had increased dramatically across three successive inspections and were comparatively very high. In the six months to April 2018, 431 recorded incidents of self-harm had taken place, compared with 279 over a similar period before the 2016 inspection. This represented an increase of 55%. There had been 16 self-inflicted deaths in the previous eight years. Four had occurred in the two years since we last visited.
- I.41** The response to these trends had been inadequate. Senior managers had not sufficiently prioritised the prevention of suicide and self-harm. Some deficiencies repeatedly highlighted by the Prisons and Probation Ombudsman had not been addressed. The safer custody team had no strategy or action plan for reducing levels of self-harm and were not well enough resourced. A safer custody officer was meant to assist with self-harm and suicide prevention, but the role was filled by a different member of staff every day, often someone with no experience, and they were often redeployed to wing duties. Consequently, incidents of self-harm were not routinely investigated.

⁷ 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.42** However, a manager had conducted a thorough investigation of a near-fatal incident. Monthly safer custody meetings were informed by reasonably good analysis and prisoners of concern were discussed at a well-structured fortnightly complex needs meeting.
- I.43** Some staff lacked the experience and confidence to support men in crisis, and consequently the number of men subject to ACCT procedures was consistently high and unmanageable – 515 in the previous six months. On the first day of our inspection, 47 prisoners were subject to ACCT monitoring, and staff struggled to cope. On one wing alone, we saw them trying to support 14 men simultaneously. Staff recorded some ACCT entries hours after having seen a prisoner but deliberately and wrongly gave the impression they had been made immediately. Many ACCT documents were disorganised and some were coming apart and care maps were not used effectively enough to support prisoners. Details about prisoners' triggers were poorly completed and the information recorded was unhelpful. However, health care staff were present at most case reviews. Safer custody staff also planned to put in place training for new officers to address some of these deficits. (See main recommendation S40.)
- I.44** Constant supervision was used far too frequently. It was unmanageable and arrangements were unsafe. Agency health care staff with hardly any prison experience observed prisoners through cell door hatches. They sometimes fell asleep, did not carry keys for immediate intervention and did not always have the ACCT document with them at the cell door.
- I.45** Only seven Listeners were in post, which was not enough to cope with prisoners' evident needs. Some wings had none and the only Listener on F wing struggled to meet every new arrival. Listener suites were functional. The prison had a good safer custody hotline, which was efficiently managed and well-used. Prisoners could call the Samaritans from their in-cell phone, but calls were cut off after eight minutes and they were charged a small amount for the call, which the prison planned to address. Prisoners could ask to use the cordless phone from the wing office as an alternative.

Protection of adults at risk⁸

- I.46** The prison was aware of adult safeguarding issues and work was developing well. A manager was responsible for this area and a relevant policy was in place. Although nobody from the prison had attended the local safeguarding adults board for about a year, links had recently been renewed. There was no training for staff and no systematic way of identifying men with safeguarding needs on their first night. However, the prison had a clear referrals process for any staff to raise concerns. In the previous few months, staff had begun to identify prisoners at risk of abuse and neglect – their cases were thoroughly investigated by the safer custody team. We saw some appropriate action and care for these vulnerable men.

⁸ 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 Many operational staff were relatively inexperienced; we were told that 70% had been in the Prison Service for less than two years. However, the prison planned to introduce a mentoring programme to develop their skills and confidence.
- 2.2 Prisoners were generally positive about relationships with staff. In our survey three quarters said staff treated them with respect, over a third said a member of staff had talked to them during the preceding week to see how they were getting on and almost 80% said there was a member of staff they could turn to if they had a problem.
- 2.3 Our own observations largely supported this and we found most staff interacted well with prisoners. Some newer staff were hesitant on occasion, which could undermine prisoners' confidence, but we believed this would improve with experience. The boundary between familiarity and professional distance was not always clear and we noticed that some staff, who developed a good rapport with men, might have found it difficult to exert their authority when necessary.
- 2.4 The prison had introduced key workers and interactions between staff and prisoners had been reinforced as a result. However, the role needed to be better integrated into rehabilitation and resettlement work.

Daily life

Expected outcomes:

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

Living conditions

- 2.5 There were two distinct sides to the prison. Much of the old prison, consisting of A to D wings, was in poor condition. Many of the communal areas were dirty, strewn with rubbish and, in some cases, had old clothing and sheets hanging on wire. The newer part of the prison, incorporating E, F and G wings, was well laid out, brighter and, in most communal areas and grounds, much cleaner.
- 2.6 These differences were also, in part at least, reflected in the cellular accommodation. Many older cells were in a poor state of repair, had broken or missing furniture, as well as unscreened toilets without lids. Showers on B and C wings particularly were also dirty and in

a poor state. Despite its similar age, cells on D wing were, generally, maintained to a higher standard.

- 2.7** Some cells on the newer side of the prison were also poor and many lacked toilet seats and screening and some basic furniture. Across both sides of the prison many cell walls had graffiti and, in some cases, inappropriate pictures. These problems were exacerbated by a large backlog of maintenance jobs across the prison which was related to problems with the Carillion contract, which the new contractor was struggling to resolve.
- 2.8** Overcrowding was also an issue – in the newer accommodation approximately 30% of men were held in cells designed for one, but in the older part the figure was over 80%.
- 2.9** The prison had begun to take some action to rectify problems. A refurbishment programme was in place and a survey had been undertaken to identify and prioritise the worst accommodation. However, some staff appeared to have become inured to many of the problems and others who had little experience could not compare conditions at Chelmsford prison with those elsewhere in the prison estate. (See main recommendation S41.)
- 2.10** Across the prison there was a shortage of some basic amenities. Pillows, sheets, mattresses and kettles were all in short supply and some items from central stores had taken over six weeks to be delivered. The central laundry at the prison had been out of action for six months and some washing facilities on wings were inadequate, could not meet the demand and frequently broke down. (See main recommendation S41.)
- 2.11** Although the prison had a system for recording cell emergency bells and delays in responses, bells were not monitored. From checks we undertook, it was not unusual for bells to ring for half an hour before receiving a response. During our inspection, we observed many bells going unanswered for extended periods. (See main recommendation S40.)
- 2.12** Many prisoners complained about access to or delays in obtaining their stored property. Families could send property in immediately after a prisoner had arrived, but in many cases, it was extremely expensive to do so. There were also unnecessary delays before property was dealt with after it had arrived. We saw some property take more than three weeks to be sorted out and passed on to prisoners.

Residential services

- 2.13** The prison's food was reasonably varied and consisted of a four-week menu cycle. Fortnightly consultations were held with prisoner wing representatives. Nevertheless, in our survey, only 36% of men said the food at Chelmsford was good or very good.
- 2.14** The kitchen was struggling with the demand and we were told that equipment broke down regularly, although staff and prisoners could still obtain meals at the proper times.
- 2.15** Supervision at serveries and on wings was inadequate. Equipment was not always maintained to a high standard and we saw a man serve food without wearing appropriate clothes or gloves. There were also often problems with portion control. We were told that food often ran out and in our survey 39% of men said they never got enough food.
- 2.16** Other than enhanced level prisoners on G wing, prisoners could not eat out of their cell. Given the levels of overcrowding and the prevalence of unscreened toilets, this was inappropriate.

- 2.17** Most prisoners in our survey said the shop sold what they needed. New arrivals still had no access to a full order for up to almost a fortnight, although interim arrangements were in place to provide phone credit and vaping facilities. The prison no longer charged an administration fee for catalogue orders.

Prisoner consultation, applications and redress

- 2.18** The prisoner council had not met since September 2017 and there were no wing representatives during the inspection. Apart from a catering forum, no formal consultation with prisoners was undertaken. Wing focus groups were being organised to discuss key issues identified by managers, but they were not necessarily the issues that prisoners thought were important. (See main recommendation S42.)
- 2.19** Application forms were widely available on wings, but confidence in their effectiveness was low. Less than 25% of prisoners said they usually received a response within seven days. Although a triplicate system ensured a record was retained, the prison had no quality assurance process to monitor the system's effectiveness. Many prisoners were frustrated about being unable to have their queries answered, often after multiple applications. (See main recommendation S42.)
- 2.20** The number of complaints had increased by a third in the six months prior to the inspection, compared with the six months before that. However, almost a quarter were confidential access complaints (complaints about staff or those that are particularly sensitive or personal). This appeared to reflect prisoners' frustrations about being unable to obtain answers to their questions or complaints easily. Our own analysis reinforced this. Many responses we saw were unhelpful or did not respond to the complaint and the prison's own analysis showed in over 20% of cases, staff took longer than the target of one week to respond. (See main recommendation S42.)
- 2.21** There was no formal legal support for prisoners, although the offender management unit (OMU) offered information about local solicitors. A good range of legal material was available in the library and access to legal visits and video conferencing was good.

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 characteristics⁹ 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

- 2.22** Deficiencies in the management and monitoring of equality were yet to be fully addressed. Equality was not sufficiently promoted across the prison apart from during education and in the library (see paragraphs 3.6 and 3.27). The governor was aware of the shortcomings and had appointed a manager to focus on equality and diversity and implement a local improvement plan.

⁹ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

- 2.23** A reasonably comprehensive strategy was in place and had been reviewed in 2017. Specific policies focused on younger and older men as well as transgender prisoners. Each of these policies contained several objectives, but there was no detail about how they would be achieved and most were not implemented consistently across the establishment.
- 2.24** A quarterly equality meeting was chaired by the deputy governor and attendance was reasonable and included some prisoner representation, although equality representatives were no longer used. However, the action highlighted was not always implemented and was often on the agenda for several consecutive meetings. The prison identified basic information on protected characteristics during reception screenings, and some local data on a limited number of areas, such as age and ethnicity, were presented to the equality meeting. Despite this, there was no meaningful analysis of this data to identify if any minority groups were disadvantaged. No equality impact assessments had been conducted since 2016.
- 2.25** Prisoners from a Gypsy, Romany and Traveller background continued to receive good support, coordinated by the chaplaincy (see paragraph 2.36), but there were no regular focus groups or support forums for other prisoners with protected characteristics.
- 2.26** The number of discrimination incident reporting forms (DIRFs) submitted between November 2017 and April 2018 was low at just 12, although this was similar to the previous inspection. The prison did not promote DIRFs across the prison effectively and forms were not widely available. Although some submissions did not receive a prompt response, we did find that investigations had improved and several responses were reasonably detailed and offered the prisoner an apology. No external scrutiny of completed investigations had been undertaken, but the governor provided good quality assurance.

Protected characteristics

- 2.27** New arrivals with protected characteristics were identified during reception screenings, but not always in private (see paragraph 1.2) and the information was not routinely passed onto relevant departments or used to inform the prison's strategy or support systems.
- 2.28** During the inspection, 25% of the population were from a black or minority ethnic background. Conversations with these men and the survey results revealed that their perceptions were generally similar to those from a white background. In our survey, black and minority ethnic prisoners were only more negative than their white counterparts about complaints being dealt with fairly. There had been no specific support forums for this group until March 2018 when prisoners from just two wings attended a separate forum. The meeting discussed concerns, such as food and activity allocations. While prisoners welcomed the forum, they did not necessarily focus on the men's needs and had not influenced the prison's strategy. No further meeting had taken place up to the time of the inspection.
- 2.29** The proportion of foreign national prisoners was similar to the previous inspection – 11%. Work with foreign national prisoners was underdeveloped. However, a member of the Home Office immigration team was on site for at least three days a week and worked closely with the OMU to offer support and advice to prisoners, particularly those at risk of deportation. The library also had a range of material and newspapers in the main languages spoken at the prison. Although records indicated that translation services had been used, we observed staff struggling to communicate with an Albanian man during the reception process, without making use of interpretation services (see paragraph 1.7). The public protection unit had compiled a list of foreign national prisoners who spoke English and who could be used to provide interpretation when the matter was not confidential, but very few staff we spoke to were aware of it.

- 2.30** Many prisoners with disabilities received good support and in our survey, they reported comparable treatment to those who did not have a disability. There was some evidence of diligent care planning for prisoners with more complex needs (see paragraph 2.56) but prison staff were not always aware of care plans. The prison had several adapted mobility cells and prisoner buddies'¹⁰ support for one man was appropriately limited to cleaning his cell and collecting meals. Personal emergency evacuation plans were in place, but not all staff could find them or identify the men who might have required support.
- 2.31** The prison had links with a charity to support gay, bisexual and transgender prisoners. However, other than in education sessions and the library (see paragraphs 3.6 and 3.27), little was done to encourage prisoners to be open about their sexuality or seek support.
- 2.32** Younger prisoners who responded to our survey were more negative about being victimised and were more likely to be subject to the use of force. Consultation forums for younger prisoners had been planned for several months but had not taken place. An age-appropriate gym session was available for older prisoners, and retired prisoners were not routinely locked in their cells.

Faith and religion

- 2.33** In our survey, 79% of prisoners said their religious beliefs were respected, which was better than in comparator prisons (65%). Despite a named person being appointed, the prison had not had a full-time managing chaplain for over 12 months because of a delay in the recruitment process. As a result, the chaplaincy department and its small number of full-time and sessional staff were under additional strain. Despite this, access to worship was good and the chaplaincy not only continued to be visible and offer a full range of provision, but had also improved several aspects of its key work, remaining integrated into all aspects of prison life.
- 2.34** A daily duty chaplain visited all new arrivals within 24 hours and provided comprehensive information about the department's support. They also visited key areas, such as the segregation unit and health care department, as well as residential units.
- 2.35** An appropriately equipped multi-faith room was used for all religious services and for a range of religious groups focusing on faith and pastoral issues. Attendance at services and prisoners' wanting to change their religion were monitored appropriately to identify any concerns and ensure that prisoners' needs were met. Religious festivals were promoted and celebrated and the kitchen often provided food and refreshments.
- 2.36** Links with the community were well embedded and representatives from several faith groups attended services regularly, and charity workers provided regular sessions on debt advice. The chaplaincy also continued to coordinate regular support forums for Gypsy, Romany and Traveller prisoners, which were well attended and included visits from representatives of Traveller organisations.
- 2.37** The team also offered prisoners one-to-one support to help them work through personal issues. The support was supplemented by a Freephone hotline number that prisoners could call and leave a message asking for support. The line was well used.

¹⁰ 'Buddies' are prisoners who provide practical day-to-day support for those with disabilities.

Good practice

- 2.38** *The Freephone hotline that all prisoners could call enabled the chaplaincy to deal with men's individual problems, potentially preventing issues from escalating.*

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.

- 2.39** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)¹¹ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. CQC took enforcement action in the form of a warning notice, served to the provider on 30 July 2018 under section 29 of the Health and Social Care Act 2008. The regulatory breaches will be followed up with the health care provider.

Strategy, clinical governance and partnerships

- 2.40** Essex Partnership University NHS Foundation Trust (EPUT) became the prime provider in May 2017. It inherited a poor service and had made improvements, but several key areas still remained poor. Partnership working with prison staff had improved, but further developments were required to ensure the service was delivered consistently and the high non-attendance rate tackled. Appropriate regular contract review and governance meetings addressed all the main issues. A recently completed health needs analysis contained significant gaps and was under review.
- 2.41** Prisoner consultation was generally weak, except in substance misuse and dentistry where it was good. A patient feedback questionnaire had been introduced, but there was no health care forum. Incidents were reported, but 28 of the 152 reports submitted over the previous six months were awaiting review by a manager, which meant lessons could not be learned promptly. Lessons learned from deaths in custody informed service delivery, but information from other incidents and complaints was not systematically shared with staff and did not drive service improvements. (See main recommendation S43.)
- 2.42** Significant staffing shortages at every grade adversely affected service delivery, including the leadership of health care. Locum staff filled most posts, many were regular and were well integrated into the team. However, a high staff turnover destabilised the service and services were compromised because some nurses did not have keys and there were gaps in the team's skills and experience. Most health care staff received regular supervision and had adequate inductions. Permanent staff had satisfactory access to appraisals and training. (See main recommendation S43.)
- 2.43** The clinical records we examined were mostly satisfactory, but care planning was underdeveloped. Prisoners' consent to share information was sought on reception and was well documented.

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

- 2.44** Most services were provided at the main health centre, but a shortage of clinical rooms restricted service delivery and waiting rooms were stark. Most wing-based rooms were used for medication administration only and were generally poor. The prison planned to refurbish wing facilities to provide wing-based care. EPUT had implemented robust action to address the deficits in infection control identified in a recent audit and cleanliness had improved.
- 2.45** All health staff were trained in intermediate life support and had easy access to appropriate, well maintained and regularly checked equipment.
- 2.46** EPUT's complaint system was not appropriately adapted to the prison and was poorly advertised. Health complaint forms were not easily accessible, although the problem was addressed during the inspection when we raised it. Not all complaints were recorded, staff took too long to respond and responses were verbal. There was little evidence of complaints being investigated and details were inappropriately logged in prisoners' clinical records. Patients were not always told how to escalate their complaint. (See main recommendation S43.)

Promoting health and well-being

- 2.47** Systematic health promotion activities did not take place, although some leaflets and one-to-one support were provided. Prisoners had satisfactory access to national disease screening programmes. Sexual health services, blood borne virus testing and hepatitis vaccinations were available again after a long gap and a large backlog was being addressed. The clinical substance misuse team had consistently provided hepatitis vaccinations to their clients, which offset deficiencies in primary care (see paragraph 2.52). Barrier protection was not readily available and prisoners did not receive any health promotion information prior to their release from prison.
- 2.48** The prison became smoke-free in January 2018. Smoking cessation services were very well resourced and gave prisoners excellent access to community-equivalent support.

Primary care and inpatient services

- 2.49** A registered nurse assessed all new arrivals in reception and made appropriate onward referrals. Clinical records we examined demonstrated that delays in receiving or reviewing prisoners' medical records from the community sometimes created breaks in prescribing, although generally the situation was improving. A health care services leaflet was available, but only in English. Most secondary health assessments were timely, but we were advised many were completed through cell doors as prisoners could not be unlocked and screenings were not sufficiently comprehensive.
- 2.50** Prisoners requested services through a confidential application system. The range of primary care services was satisfactory, but waiting times for the GP and optician were about three and 11 weeks respectively, which was too long. Extremely high non-attendance rates extended waiting times further and we found men who had waited more than eight weeks to see a GP. Reasons for non-attendance included not being unlocked, men declining to attend due to long waits in the health care department before appointments and vulnerable prisoners regularly missing their appointments when clinics overran. (See main recommendation S43.)
- 2.51** The prison was covered by the community GP out-of-hours' service. Same day nurse and GP appointments and wing-based support were available.

- 2.52** A senior nurse took the lead on sexual health and life-long conditions management. Clinics ran regularly but did not yet meet the level of need. Systems for identifying and supporting patients with complex health needs were adequate, but not all health staff knew who had a supported living plan and plans were not consistently followed or reviewed. The health care manager addressed the issue during the inspection in response to our concerns. Staff from EPUT's palliative care services attended when required.
- 2.53** Skilled officers and nurses provided good care for up to 12 patients in the much improved inpatient unit. Admission was for clinical reasons and the regime was therapeutic. Patients we spoke to were positive about the care they received. Officers were well briefed, but there were no shared care plans and they did not attend the weekly inpatient review meeting.
- 2.54** Referrals to hospital were prompt and the process was managed well. Two routine external health escorts took place every day, but they could be increased to four for X-ray appointments. About 10% of the appointments cancelled in the previous three months were due to insufficient prison escorts. Some men experienced delays accessing services due to long hospital waiting lists and cancellations.
- 2.55** Prisoners received seven days' medication and a list of their medication on release, but had no face-to-face review and did not receive a discharge summary, which meant continuity of care could have been adversely affected. (See main recommendation S43.)

Social care

- 2.56** There was no memorandum of understanding between EPUT, Essex County Council, the prison and other key stakeholders. The council contracted the prison substance misuse team Phoenix Futures to complete most social care assessments and a council social worker completed the more complex ones. Social care services were well promoted throughout the prison. Most assessments, including those carried out by the occupational therapist, took place promptly. Prisoners with autism received a personalised autism passport, which explained what they needed to manage in the prison environment. Prisoners had good access to mobility and health aids as a supply was kept onsite, although there were delays when adaptations to the environment were required.
- 2.57** Only two referrals since our last inspection had led to social care package arrangements and nobody was receiving care during the inspection. The prison did not have an agreed social care provider, but agency support workers had been used to provide social care when necessary.

Good practice

- 2.58** *Phoenix Futures kept a supply of equipment onsite, including shower and toilet seats, which ensured prisoners had prompt access to them.*

Mental health care

- 2.59** In our survey 52% of prisoners said they had a mental health problem, 34% of whom reported that they had received help.
- 2.60** No clear mental health treatment pathway was available and services were fragmented and largely reactive. The team attended all first assessment, care in custody and teamwork

(ACCT) case management reviews for prisoners at risk of suicide or self-harm, those on constant watch and on the mental health caseload. This required significant resources because of the large number. Additionally, mental health nurses consistently covered staffing gaps in primary care, including medication administration, segregation rounds and reception screening. Casework and assessments were slotted in around ACCT reviews and primary care activities and often failed to meet patients' needs.

- 2.61** There were no psychological, counselling or group support services. A new service providing psychological interventions for those with mild to moderate mental health needs was starting in the following few months. Access to psychiatry was very good, which partly offset risks and enabled acutely unwell men to benefit from prompt intervention.
- 2.62** There was an open referral system. A daily allocation meeting attended by the substance misuse team reviewed referrals and determined priorities, but only prisoners accepted for assessment were informed of the outcome. Waiting times were not monitored and patients could wait weeks for a nurse to assess them. The team was supporting 77 patients during the inspection. Generic care plans outlined what interventions were expected, but they were rarely offered. The care programme approach for men with severe and enduring mental illness was not used. Patients needing hospital care under the Mental Health Act often faced lengthy delays before being transferred. (See main recommendation S43.)
- 2.63** Mental health care staff mainly liaised with specialist teams over the phone to facilitate support for prisoners who were released into the community, which created risks of miscommunication.

Substance misuse treatment¹²

- 2.64** In our survey, 21% of prisoners said they had an alcohol problem on arrival and 35% a drug problem, 57% and 55% of whom respectively reported receiving help.
- 2.65** Regular well attended committee meetings supported the implementation of the prison's substance misuse strategy. EPUT provided clinical substance misuse treatment services and Phoenix Futures delivered psychosocial support. The teams were integrated well and worked effectively with other prison departments and health care staff.
- 2.66** New arrivals with substance misuse problems received prompt assessment and appropriate first night prescribing. Most were then located in the drug recovery unit (E wing) where they received overnight observation during the stabilisation phase, but in May 2018, seven patients were located elsewhere and were not observed, which created risks. About 90 to 100 prisoners were prescribed opiate substitution treatment at any time and about 60% were on reducing regimes. Forty-six men had completed alcohol detoxification in the previous six months. Prescribing was flexible and in accordance with national guidance. Patients received regular prescribing and treatment reviews.
- 2.67** The psychosocial team supported 29% of the population during our inspection. A wide range of low to medium intensity one-to-one and group treatment options were available. Personalised care plans were completed. Prisoners' feedback informed service delivery and an effective confidential complaints system was in place. Prisoners had good access to mutual aid support, including Alcoholics Anonymous and prisoner peer mentors.

¹² In the previous report substance misuse treatment was included within safety, while reintegration planning for drugs and alcohol came under rehabilitation and release planning (previously resettlement).

- 2.68** Seamless through-the-gate work was undertaken with prisoners who lived in Essex, and the team communicated well with drug services further afield. Training to use naloxone (a drug to manage a substance misuse overdose) and supplies were available.

Medicines optimisation and pharmacy services

- 2.69** The in-house pharmacy dispensed medication promptly, but there were sometimes prescribing delays for new arrivals (see paragraph 2.1). Most medicines were issued as individual named patient supplies. Medicines were stored securely but were not consistently stored correctly, for example we observed loose strips of medicines and stock prescription medicines interspersed with non-prescription medicines. Uncollected named patient medicines were regularly retained as stock on the wings rather than being returned to the pharmacy, which was poor practice. Room temperatures during hot weather were often too high for safe storage in some rooms, including the main pharmacy. Medicine refrigerators were monitored well. Pharmacy staff checked the expiry dates on medicines regularly, but we found one specialist item, that was significantly out-of-date, when it was supplied to the prison. The pharmacy arranged an urgent replacement when we highlighted this. (See main recommendation S43.)
- 2.70** A new lead pharmacist was implementing an improvement plan, which included developing comprehensive new standard operating procedures and a competency framework for medicines administration. Prisoners could speak to pharmacy staff for advice about medicines, but there were no pharmacy-led clinics.
- 2.71** A new in-possession policy was being developed and risk assessments were completed promptly. Prisoners did not have secure in-cell storage. Some men had tradeable medication in their possession and the number of prisoners prescribed a tradeable antidepressant (mirtazapine) was very high (17% of population), but there were plans to address the problem. (See main recommendation S39.) New prescribing guidance was being developed to replace the previous provider's formulary (list of medications used to inform prescribing).
- 2.72** Medicines were administered by pharmacy technicians and nurses four times a day and prisoners could receive sedative medicines late in the evening, although the gap between some administration periods was too short. During the inspection, all daytime medication on A and B wings was administered door-to-door and staff decanted medicines into bottles and bags and carried it to the wings without the prescription, which was unsafe. Night time door-to-door administration, however, was safe and individual bags of medication were dispensed by the pharmacy and carried with the prescription.
- 2.73** The hatches at most wing administration points were too small to allow health staff to observe medication administration adequately and officers' supervision of medication administration queues was inconsistent, creating opportunities for diversion and bullying. (See main recommendation S43.)
- 2.74** Health staff could administer a reasonable range of medicines without a prescription in line with locally agreed policies, but the policies and the items being issued needed to be reviewed.

Dental services and oral health

- 2.75** The dental health provider provided the full range of NHS equivalent treatments through four clinics a week. During the inspection, prisoners waited about eight weeks for a routine appointment, but some waited longer (see paragraph 2.50). Follow-up appointments were

completed promptly. Those with urgent needs were prioritised appropriately. Interactions we observed were excellent and comprehensive records were completed. Oral health promotion was provided during dentistry sessions. Men who did not have time to complete their treatment in prison received a copy of their treatment plan and their X-rays.

- 2.76** The dental suite and governance systems were appropriate. Decontamination facilities were not connected to the suite, but appropriate systems offset the risks. Most equipment was regularly maintained and serviced, except for the chair, but this was being addressed.

Good practice

- 2.77** *Providing prisoners approaching release with copies of their dental treatment plans and dental X-rays supported continuity of care on release.*

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 Shortfalls in staffing meant the prison operated a split regime that rotated over a two-week block. While it ensured that prisoners could now have a predictable regime, prisoners' time out of their cells remained very limited. Our roll checks found too many prisoners (35%) locked in their cells during the working day.
- 3.2 A prisoner could spend a maximum of just over seven hours out of their cells if they were in work, but many men had much less than this. For most, time out of cell was as little as two hours per day with prolonged periods between being unlocked. The prison had introduced some limited access to physical education (PE) and association for a small number of prisoners on the enhanced regime during the inspection, but it had not been embedded or extended to weekends.
- 3.3 In our survey, 51% of prisoners said they spent less than two hours out of their cell during the weekday and 73% said they were unlocked for less than two hours at weekends, both of which were significantly higher than in similar prisons. Access to the open air for most prisoners was just 30 minutes a day, often coinciding with other association opportunities, which meant some prisoners had to choose between exercise, association or other activities, such as visiting the library (see paragraph 3.5). (See main recommendation S44.)
- 3.4 The library remained well-run and welcoming. Two knowledgeable library staff, supported by committed prison orderlies, ran the library. It had a good stock of books to suit the population's needs and a range of non-fiction and fiction books were readily available. Resources in foreign languages were also available and there was an up-to-date stock of legal textbooks and guidance. Prisoners could also use computer facilities. Staff had access to an efficient inter-library loan system and if items were not available within the region, they often bought them locally from their small budget.
- 3.5 Access to the library was reasonable and sessions were built into the temporary regime. All prisoners could attend at least once a week and additional slots were built into association times (see paragraph 3.3) which meant that many men could visit it four times a week. However, limited association time for those who did not work or attend activities, potentially affected attendance. Library staff had worked hard to address the problem and active members had increased from 40% to 65% of the population in the previous 12 months.
- 3.6 Library staff strove to promote equality and diversity in association with education managers and there had been several events to celebrate Black History Month, raise awareness of gay and bisexual prisoners and promote understanding of the Holocaust.
- 3.7 Literacy and reading were promoted through a range of initiatives, such as creative writing workshops and the Turning Pages scheme, a reading programme created by the Shannon

Trust and delivered by peer mentors. Family contact was enhanced by Storybook Dads (a scheme that helps prisoners to record a story for their children to listen to at home) and family storytelling days, where children could meet their parents in the library and read stories (see also paragraph 4.3). A number of authors had also visited the library to speak to prisoners.

- 3.8** The range of physical education (PE) facilities remained very good. There was an extensive sports hall, a well-equipped cardiovascular and weights room, a high quality outdoor synthetic all-weather pitch and a spacious classroom for course work. All equipment was well maintained.
- 3.9** The PE induction was prompt and embedded into a weekly timetable. Arrangements for ensuring prisoners were fit enough to participate were appropriate and prisoner participation questionnaires were retained for all attendees. Health care professionals made referrals for prisoners with specific needs so they could receive remedial PE. Substance misuse staff also referred men so they could participate in a healthy living course that was delivered by enthusiastic staff and well received by prisoners.
- 3.10** The PE timetable allowed most prisoners to participate in gym sessions at least twice a week, although a lack of staff meant classes were predominantly recreational. Prison statistics indicated that weekly prisoner participation levels averaged 61%. Although attendance data were collated, they needed to analyse participation rates further to ensure the programme attracted as many men as possible.
- 3.11** Community links with Chelsea Football Club remained in place and limited vocational training had been reintroduced. This was supported by plans to extend accredited learning once the gym was fully staffed.

Education, skills and work activities (Ofsted)¹³

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 education, skills and work provision is of a good standard and is effective in meeting the needs of all prisoners.¹⁴

3.12 *Ofsted made the following assessments about the education, skills and work provision:*

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

Management of education, skills and work

- 3.13** Severe restrictions in the prison regime had led to greatly reduced learning and skills provision in the year before the inspection, but all areas were now operating again. However, most of the weaknesses identified at the last inspection had not been addressed. There were not enough activity spaces for the population. In a typical session, less than half of the prisoners were allocated an activity place, and around 300 prisoners had no activity. (See main recommendation S45.)
- 3.14** Attendance at activities was poor and only around 60% of prisoners attended their allocated activity. Although managers had accurate data about allocation and attendance rates, they had not taken any action to tackle poor attendance. Residential staff did not encourage prisoners to attend or apply sanctions against the significant number of prisoners who refused to work (see paragraph 1.17). Staff in residential units could not account for prisoners' absences in many cases. Pay rates were fair, and did not put those who chose to attend education at a disadvantage.
- 3.15** Managers had conducted an analysis of the population's needs, and developed appropriate plans to improve the provision. While some changes had been introduced, most had yet to be implemented. However, new curriculum elements, including additional information and communications technology (ICT) provision and virtual reality training in the construction workshop, were about to be introduced.
- 3.16** The education and training provision provided by People Plus required improvement. Managers regularly observed teaching, but their assessment was not rigorous enough and as a result, teaching and learning had not improved sufficiently since the last inspection.

¹³ 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.

¹⁴ In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

- 3.17** In prison work areas, prisoners gained a range of useful skills, but had few opportunities to gain vocational qualifications. (See main recommendation S45.) Work was not used well to prepare men for employment after release. Managers did not sufficiently monitor the provision in these areas.
- 3.18** There was insufficient provision for vulnerable prisoners. Despite a slight increase in the number of course hours since the last inspection, they had far fewer opportunities than other prisoners. The range of courses available was limited to English and maths. The only workplaces they could attend were the laundry and an industrial cleaning course that ran once a quarter.
- 3.19** The prison did not have enough contact with employers to inform curriculum developments, or to offer employment opportunities to prisoners after their release. However, managers were beginning to develop links with a few employers, and a small number of prisoners had gained employment after release through these contacts. Resettlement staff helped a small number of prisoners to enrol on construction industry training soon after release.
- 3.20** The resettlement centre was suitable for induction and pre-release activities. Agencies in the centre jointly ran a pre-release course to help prisoners hoping to find work after their release. It included use of the virtual campus (prisoner access to community education, training and employment opportunities via the internet) and covered topics such as CVs and disclosure letters. However, the course did not take enough account of individuals' previous knowledge and specific needs, and attendance was poor. The prison did not have data on how many prisoners obtained employment after they were released.

Quality of provision

- 3.21** Teaching in education required improvement. Too many teachers did not provide tasks or activities that interested prisoners or enabled them to make good progress. Resources, such as handouts and electronic presentations, were often dull. As a result, some prisoners became disengaged and reluctant to participate. Too often, prisoners completed the same work at the same level and more able prisoners were not challenged enough to make the progress of which they were capable.
- 3.22** Not enough teachers used questioning techniques effectively to improve prisoners' understanding, and check that all class members had understood what was being taught. They often posed questions to the whole class and allowed more confident prisoners to dominate at the expense of others. As a result, some prisoners made slow progress. However, on the first aid course delivered in the gym, the teacher used questioning particularly well to stimulate learning and check prisoners' understanding.
- 3.23** Some marking was poor and did not give prisoners enough information on how to improve. Too much of teachers' feedback was cursory and sometimes had not been completed. As a result, some prisoners were unsure whether their written work was correct or not. In practical subjects, teachers provided effective verbal feedback that helped prisoners to understand the skills they were developing.
- 3.24** All prisoners had individual learning plans (ILPs), but teachers did not use them effectively to help men progress or record what they had learned. Targets were often generic, and in many cases no targets were set. Learning were not reviewed often enough and learners made slower than expected progress. Similarly, in workshops and industry, instructors did not use ILPs to help prisoners to develop or record their employment skills.

- 3.25** Where teaching was more effective, sessions were interesting and topical. For example, in two lessons teachers referred to the Grenfell Tower fire disaster to encourage prisoners to participate in constructive debate that enabled them to develop their English speaking and listening skills, including broadening their use of adjectives.
- 3.26** Teachers effectively identified prisoners who had additional learning needs. An additional support tutor provided coaching, which helped these prisoners participate fully in lessons and make good progress. In some cases, mentors were used well to support individuals in class.
- 3.27** Teachers promoted equality and diversity well, developing lessons around themed events such as Black History Month, LGBT Week and Holocaust Survival Day. For example, some classes during LGTB Week focused on the achievements of Alan Turing and Oscar Wilde. However, managers did not evaluate the impact of this learning, or assess how effective it was in building prisoners' understanding of these topics.
- 3.28** In the construction, cleaning and Prisons Information Communication Technology Academy (PICTA) workshops, prisoners benefited from high quality software and learning resources and good support. As a result, they made good progress. However, in the packing workshop and in wing work, prisoners carried out repetitive and mundane tasks and did not develop vocational skills. Although prisoners developed good skills in workshops, such as the wire-stripping or re-cycling and laundry workshops, no qualifications were on offer. In the prison kitchen, prisoners developed good skills and hygiene practices, but no accredited training was available apart from a single basic food hygiene certificate. (See main recommendation S45.)
- 3.29** In vocational training workshops, a weekly maths and English class helped prisoners improve their skills by applying them in a work context. For example, in the cleaning course, prisoners used ratios, volume and area within the cleaning industry. Men could apply these skills in their practical work. However, this outreach provision was not available in other prison work areas.

Personal development and behaviour

- 3.30** Punctuality and attendance were poor. In many education lessons attendance was very low. In some workshops, prisoners did not begin work until long after the official start time. Poor punctuality was too readily accepted by teachers and instructors.
- 3.31** Prisoners in work areas developed useful skills, such as team working, awareness of health and safety, and working to deadlines. Orderlies supervised the work effectively, ensuring that tasks were completed on time and to the required standard. Men worked cooperatively, supporting each other and sharing tasks. However, instructors did not recognise or encourage prisoners to develop their employment skills, reducing the provision's effectiveness in helping prisoners to prepare for employment on release.
- 3.32** Most prisoners behaved respectfully in learning and work activities. They felt safe, and related well to teachers and each other. In many areas, they were well motivated and recognised the progress they were making. However, in a very small number of cases, staff did not challenge prisoners' disruptive behaviour or bad language, which adversely affected the learning of others.
- 3.33** Twelve mentors were qualified through an on-the-job training programme, which helped them to develop new skills. Mentors were well motivated and provided good learning support. For example, in an English lesson, the peer mentor worked effectively with a

reluctant learner, enabling him to participate fully in class discussions. Mentors also supported prisoners in the accommodation units to develop basic literacy skills through the Shannon Trust literacy scheme (see paragraph 3.7).

- 3.34** A small number of prisoners who were reluctant to participate in activities attended the Firebreak course, which provided basic firefighting and safety skills and was organised by Essex Fire Service. The course developed confidence and team-working skills, and helped some to progress to education or work activities.

Outcomes and achievements

- 3.35** Prisoners who completed education courses often made very good progress, particularly in English and maths. In art, vibrant displays in the art classroom encouraged prisoners to strive for high standards, and the work was very good. Men were proud of their achievements.
- 3.36** Most prisoners studying at the PICTA workshops produced accurate work, often starting out with low levels of knowledge and skill, and made very good progress. Prisoners' work was very good in the construction training workshop. In industrial workplaces, such as the kitchen and the wire-stripping workshop, prisoners worked to appropriate industry standards.
- 3.37** Achievement rates for those completing their courses were high, and there were no significant differences between those of different ethnic groups. Most learners with additional learning needs made good progress in their qualifications.
- 3.38** Non-completion rates were generally appropriate for a local prison with a high proportion of short stay prisoners. However, they were too high on some courses, including construction, painting and decorating, and English and maths at level 1.

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 Prisoners were generally positive about contact with their children and families and the support they received from the prison. About 70% of those whose home area was known came from Essex and about half of respondents in our survey said it was very or quite easy for their visitors to get to the prison.
- 4.2 In-cell phones had been introduced on all but A wing and for many prisoners we spoke to, phone contact with their family kept them motivated, especially given how much time they spent in their cells. In our survey, 88% compared with only 77% in comparable prisons said they could use a phone every day if they had credit.
- 4.3 The Ormiston Trust, a charity working with families, provided a good range of support. A parenting course was delivered four times a year and there had been an increase in the number of family and children's days. The library also provided a range of support. Along with the Storybook Dads scheme, storytelling sessions were run regularly during school holidays and there were plans to extend them to include toddlers. (See also paragraph 3.7.)
- 4.4 The visitors' centre, also staffed by Ormiston Trust workers, provided families and friends, particularly those visiting the prison for the first time, with a good level of support. There were also good community support networks in place for families struggling with the impact of a family member in custody.
- 4.5 Visits were available on Saturday mornings and every afternoon except Friday. In our survey, most prisoners said visits often started late but we found no evidence to support this. The visits hall was large and bright and had new tables and seating. Three different types of seating were available depending on prisoners' incentives and earned privileges (IEP) level. The prison had a good, well equipped, children's play area, staffed by Ormiston Trust staff or volunteers, and a tea bar provided a good range of snacks and drinks although many prisoners, and visitors complained that it was quite expensive.

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.

- 4.6** The strategic management of rehabilitation services was underdeveloped. Although there was a dedicated resettlement centre, which served as a hub for some agencies and prison services, resettlement work was not fully integrated. Essex Community Rehabilitation Company (CRC) owned by Sodexo, contracted resettlement support charity Nacro to provide 'through-the-gate' services. Working relationships between staff on the ground were friendly, but services were not fully coordinated. Referral routes and information-sharing processes were not embedded across the prison, which meant that men's needs were sometimes not identified or met.
- 4.7** The reducing reoffending strategy was reasonable and up to date, and it included a description of all relevant departments' work. The reducing reoffending meeting was held regularly, and although well attended, CRC or offender management unit (OMU) staff were not always present. The OMU did not have a high enough profile across the prison and not all residential staff understood what it did. It was hoped that the training and roll out of key workers (see paragraph 2.4), and a new model to help prison officers develop so they could become prison offender managers, would promote a greater understanding of OMU processes.
- 4.8** At the time of the inspection, around 35% of the prison's population had been sentenced to a year or more and were eligible for an offender assessment system (OASys) report and sentence plan. In our survey, 25% of men told us they had a sentence plan, 89% of whom told us they understood what they needed to do to achieve their targets or objectives.
- 4.9** Offender management had improved since our last inspection. The backlog of OASys reports had been cleared and processes for managing review and release processes were generally good. The senior probation officer now supervised all casework, which was beginning to show positive results. Although the OMU was divided into three teams, covering offender supervisor, public protection and custody functions, the work was well integrated and there was effective communication and team work. The team had frequent informal meetings to discuss concerns and had introduced a process for proactively working with men who were on an assessment, care in custody and teamwork (ACCT) case management document for prisoners at risk of suicide or self-harm, or on violence reduction measures, which supported the work of the prison.
- 4.10** Work with men assessed as presenting a low or medium risk was generally adequate. Most medium and low risk men serving over a year had an up-to-date OASys report. They were reasonably good and management oversight processes had begun to show an improvement. In many cases, there was too little connection between sentence plan targets and prisoners' needs and risks identified in OASys reports.
- 4.11** There were too few prison officer offender supervisors. During the inspection only four out of the allocated 14 prison officer positions were in post and they were sometimes redeployed, which severely limited the time they could spend on offender management work. Reports would be drawn up to cover key stages in a prisoner's sentence and the team responded to applications from prisoners, but there was not enough time for more proactive offender management work and overall, offender supervisors had too little contact with prisoners.

- 4.12** About 155 men were assessed as high or very high risk of harm. They were managed by probation officer offender supervisors. Their work was of a good standard. We found evidence of good contact with prisoners and many men spoke highly of their offender supervisor. OASys reports were good. Almost all the high-risk cases we reviewed had an up-to-date risk management plan and measures in place to protect the public, named adults and children. Contact between offender supervisors and probation staff in the community was good and information about licence conditions was shared.
- 4.13** Although there was no formal policy on managing sex offenders, the OMU worked with staff from other prisons with specialist provision who had visited Chelmsford prison to discuss cases and decide which men they could work with. The initiative had helped some men to progress.
- 4.14** Newly sentenced lifers were seen promptly by their offender supervisor who would explain the implications of the sentence to them. Very few life-sentenced prisoners went through parole at the prison but processes were sound. The psychology team was always involved in lifer and indeterminate sentence for public protection cases, contributing to multi-agency lifer risk assessment panels and sentence plans. About 11% of men had been recalled. Processes for notifying men of their reasons for being recalled and delivering recall packs were efficient.
- 4.15** Home detention curfew (HDC) arrangements were well managed and applications were processed promptly. In the six months before our inspection, 191 had been released on HDC, which was far higher than the 17 at our previous inspection. Accessing Bail and Accommodation Support Service (BASS) accommodation was problematic and we calculated that 15 men had not been released when they were eligible because they could not be housed. During the inspection, 13 applicants were waiting for BASS accommodation and it appeared unlikely that suitable places in the local area would be found.

Public protection

- 4.16** Public protection work was developing but was not yet sufficiently robust. Initial screening processes for identifying any risks were good and concerns were flagged on P-Nomis (the Prison Service IT system). Letters and phone calls were monitored well and coordination between the security department, the OMU and the censor's office was effective. During the inspection, 77 men were being monitored for harassment reasons and 35 under child protection measures.
- 4.17** The inter-departmental risk management team (IDRMT) meeting had lapsed and had not met since our last inspection. It had just been reconvened, but the terms of reference were out of date, attendance at the initial meeting we observed was too low and other departments did not yet routinely share relevant information with the OMU. The IDRMT did not routinely review release arrangements for high risk of harm prisoners, and information exchange with the community offender manager, including multi-agency public protection agency (MAPP) management level reviews, did not take place early enough. The small number of MAPP F information-sharing forms (used by responsible agencies to exchange information about MAPP nominals) we reviewed were good and effectively analysed information from across the prison. All forms were completed by probation staff and countersigned by the senior probation officer.

Categorisation

- 4.18** Initial categorisation decisions were undertaken promptly. Reviews were timely and reasonably detailed, and decisions were justified. Offender supervisors incorporated information from notes on P-Nomis and security in their reports and decisions, but wing staff did not contribute regularly. Authorisations were appropriately signed off.
- 4.19** Very few men returned to the prison for local release, but two-thirds of the population were from Essex. Men serving less than a year were not usually moved to other prisons. About 60 men were transferred as part of a progressive move every month. This was a reasonable number, but the process for identifying men waiting for transfers needed to be reviewed to ensure all eligible men were progressed swiftly. About 25 men had been at the prison for over a year. The system for men on hold in the prison, either for medical reasons or because they were working in jobs essential for the running of the prison, needed clarifying. HM Prison and Probation Service had placed the prison under special measures. This meant the population was being reduced by 50 and transfers had to be arranged.

Interventions

Expected outcomes:

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

- 4.20** The prison was not resourced to deliver accredited programmes, but some innovative interventions were running. The Choices course, developed by Essex CRC, helped men understand the impact of violence in relationships and develop skills to enable them to change. Resettlement and Care of Older Ex-offenders and Prisoners (RECOOP) ran an informative and practical life skills and pre-release course Transitions, aimed at men over 50. The Firebreak course (see paragraph 3.33) promoted team-building and elements of restorative justice (programmes where offenders consider the consequences of their offending). Places on these courses were not always fully occupied, however.
- 4.21** The regional psychology team also regularly worked with individual men who were not eligible for other services, who were particularly complex, or were difficult to progress. Links between the OMU and the psychology team were strong. In addition, a limited amount of restorative justice work was available, in which three men had participated.
- 4.22** Nacro assessed prisoners' housing needs following reception and supported men to retain tenancies where possible. Some good housing case work was undertaken, but not all men with housing needs were sufficiently followed up. Caseloads were high and timescales prior to release could be very short. Monitoring data on the number of men released with accommodation had improved since our last inspection and it was now accurately collated. About 30% of men were released with no fixed address. The health care team had previously provided men with reports to support their applications for emergency and temporary housing. This practice had lapsed at the time of the inspection, but Nacro staff had secured an agreement with the health care team to reintroduce this initiative. Some men who were homeless on release had appointments with housing providers arranged and might have obtained accommodation, but we were unable to obtain data on prisoners' post-release accommodation.
- 4.23** Work to support men with their finance, benefit and debt needs was reasonably strong. Two Jobcentre Plus workers were based at the prison – they were accessible and had implemented very good local arrangements to help streamline applications for universal credit. Nacro ran fortnightly money advice clinics and could refer men to telephone debt counselling for detailed advice. Sixty-two men had opened bank accounts through Nacro in

the six months prior to the inspection. Nacro also supported men by freezing debts and court fines and cancelling direct debits. Christians Against Poverty ran a monthly money management course and provided those who had completed the course with one-to-one money advice. More specialist bespoke money advice for individuals with significant finance-related problems was no longer offered at the prison.

- 4.24** Nacro workers asked men if they had experienced abuse or victimisation at their assessment. Very few men disclosed these experiences and those who did were referred to specialist organisations. Staff did not have sufficient knowledge to identify victims of human trafficking.

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.

- 4.25** About 110 men were released every month and the need for resettlement services was high. In our survey, only 43% of men being released in the following three months told us they were receiving help to prepare for their release. They needed the most help with accommodation (67%) and finance (52%) and 22% said they were receiving help to secure housing, while 18% said they were getting support with their finances.
- 4.26** Due to staffing shortages in the OMU, residential staff in the first night unit were responsible for implementing the first part of the basic custody screening tool. They did not always do so, however, and we found that in the six months before the inspection, 43% of new arrivals had not been screened, which meant their resettlement needs were not assessed on arrival. This had an ongoing impact on Nacro staff, who could not access the second part of the tool on the electronic system without the first having been completed. Nacro completed the second part for all men on paper and an average of 180 resettlement plans a month were drawn up (see main recommendation S46).
- 4.27** Resettlement plans were not detailed and did not routinely identify or assess all areas of risk. However, the information was collated and shared with responsible officers in the community prior to release. Information from other departments and services, including substance misuse and mental health services, were not shared with CRC staff routinely so they could include it in resettlement plans. CRC caseloads were high and resettlement officers did not have sufficient time to collate or follow up all prisoners' identified needs. Links between departments in the prison were not strong enough for this to happen systematically. Despite high caseloads, Nacro staff knew their cases well and men were positive about the support they received.
- 4.28** Nacro had systems for reviewing men at 12 weeks, four weeks and seven days before their release, to finalise arrangements. However, many men serving shorter sentences, or on remand did not easily fall into these time frames and some who were reluctant to work with staff or who did not attend appointments were not followed up. Information about men who were being released sooner than expected because of court or early release processes was not shared routinely, which meant Nacro could not follow up their resettlement needs before release.
- 4.29** Discharge processes were reasonable. Arrangements for men to access money, property and travel warrants were efficient. However, they could not easily have their clothes washed

before they were released and there was nowhere to charge mobile phones. Men received verbal information about the location of the nearest train station, but maps were not readily available. Licence and curfew arrangements were explained clearly and thoroughly.

- 4.30** The positive 'meet at the gate' support provided by the CRC ensured local men with additional needs could be met on release and supported at appointments in the community.

Section 5. Summary of recommendations and good practice

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

Main recommendations

To the governor

- 5.1** Managers should work proactively to reduce levels of violence and develop and embed a range of initiatives to address the problem. (S38)
- 5.2** Managers should invest in staff, processes, resources and technology to help reduce the drug supply into the prison. (S39)
- 5.3** Managers should improve the care staff provide to men who were at risk of self-harm and there should be a better focus on the issues raised by the PPO in relation to deaths in custody. (S40)
- 5.4** Managers should ensure prisoners are held in clean and respectful living conditions. (S41)
- 5.5** Managers should ensure there are clear and effective processes so prisoners can be consulted, make requests and resolve issues. (S42)
- 5.6** Robust governance structures, including consistent and competent health staff, effective leadership and improved partnership working between the prison and health providers, should ensure health provision consistently meets the needs of prisoners. (S43)
- 5.7** Time out of cell should be improved and adhere to the published regime. (S44)
- 5.8** Men should have at least an hour's exercise outside every day. (S44)
- 5.9** Managers should ensure that there are sufficient activity places and that attendance, accreditation and the recognition of prisoners' progress are improved. (S45)
- 5.10** Managers should ensure that men have their resettlement needs assessed on arrival and prior to release, and that offender management arrangements meet the needs of all eligible groups. (S46)

Examples of good practice

- 5.11** The Freephone hotline that all prisoners could call enabled the chaplaincy to deal with men's individual problems, potentially preventing issues from escalating. (2.38)
- 5.12** Phoenix Futures kept a supply of equipment onsite, including shower and toilet seats, which ensured prisoners had prompt access to them. (2.58)
- 5.13** Providing prisoners approaching release with copies of their dental treatment plans and dental X-rays supported continuity of care on release. (2.77)

Section 6. Appendices

Appendix I: Inspection team

Peter Clarke	Chief inspector
Sean Sullivan	Team leader
Francesca Cooney	Inspector
Ian Dickens	Inspector
Keith McInnis	Inspector
Kam Sarai	Inspector
Jonathan Tickner	Inspector
Natalie-Anne Hall	Researcher
Helen Ranns	Researcher
Joe Simmonds	Researcher
Beth Wilson	Researcher
Majella Pearce	Lead health and social care inspector
Steve Eley	Health and social care inspector
Peter Gibbs	Pharmacist
Jan Fooks-Bale	Care Quality Commission inspector
Dayni Johnson	Care Quality Commission inspector
Andy Fitt	Ofsted inspector
Steve Oliver-Watts	Ofsted inspector
Allan Shaw	Ofsted inspector
Keith Humphreys	Offender management inspector

Appendix II: Progress on recommendations from the last report

The following is a summary of the main findings from the last report and a list of all the recommendations made, organised under the four tests of a healthy prison. The reference numbers at the end of each recommendation refer to the paragraph location in the previous report. If a recommendation has been repeated in the main report, its new paragraph number is also provided. 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 2016, reception, first night and induction processes were mostly good, with a suitable focus on vulnerability, but not all first night cells were properly equipped. Peer supporters provided valuable information and support. Levels of violence had increased sharply. Measures to manage and reduce violence were poorly coordinated but most prisoners felt safe. Levels of self-harm were high but support for those at risk of harm was generally good. Security was well managed. Drugs were easily available but supply reduction measures were improving, particularly addressing new psychoactive substances. The level of use of force was high and governance was weak. The use of segregation was relatively low but reintegration planning was underdeveloped. Clinical substance misuse services were good but psychosocial support was limited. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

Comprehensive data on violent incidents should be collated and analysed. Prisoners' views on safety should be sought and analysed alongside all other safety data, and this should inform a coordinated action plan to make the prison safer. (S57)

Not achieved

All use of force should be fully recorded. Managerial oversight should ensure that all uses of force are analysed, that patterns and trends are identified and acted on, and that force is always justified. (S58)

Not achieved

Recommendations

Prisoners should be escorted to the prison as soon as they have been dealt with by the courts. (1.4)

Not achieved

All first night cells should be equipped adequately. (1.14)

Not achieved

All prisoners subject to assessment, care in custody and teamwork (ACCT) procedures should have the opportunity to engage fully in the regime and should be encouraged and supported in doing so. (1.27)

Not achieved

Prisoners should only be strip-searched on the basis of intelligence or specific suspicion. (1.35)

Not achieved

The mandatory drug testing programme should be sufficiently resourced to undertake all types of testing within the required time scale, and drug testing figures should be collated by type and location to provide more effective management information. (I.36)

Not achieved

The negative perceptions of black and minority ethnic prisoners and prisoners on the older wings should be investigated and measures implemented to improve them. (I.40)

Achieved

The regime for longer-stay prisoners on the segregation unit should be improved and include purposeful activities. (I.53)

Not achieved

Individual management and reintegration plans for segregated prisoners should be more organised and detailed, and applied consistently. (I.54)

Not achieved

Substance misuse interventions of varying intensity should be introduced to meet the identified needs of the population, taking into account service user feedback and current trends in drug use. Peer support and mutual aid should be extended. (I.62)

Achieved

First night treatment for opiate-dependent prisoners should be provided consistently. (I.63)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2016, the prison was generally clean. The environment was good for those on the newer wings, but poor for those on the older wings. Access to basic essentials was sometimes problematic. Staff–prisoner relationships were good and were a real strength. Equality and diversity arrangements required improvement. Outcomes for prisoners with protected characteristics were not adequately monitored and little dedicated support was available. Faith provision was good. Prisoner complaints were well managed. Health services were inadequate overall and a cause for concern. The quality of the food provided was poor. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

The environment for prisoners on the older wings should be improved, to provide all prisoners with decent living conditions. (S59)

Not achieved

Clinical governance arrangements should be improved, to ensure that prisoners' health is not put at risk. All staff should receive clinical supervision. (S60)

Partially achieved

Recommendations

All in-cell toilets should have lids and adequate screening, and prisoners should have good access to essential equipment for their cell, clean laundry each week, cell cleaning materials and a lockable cupboard. (2.7)

Not achieved

All communal showers should be adequately screened. (2.8).

Not achieved

Prisoner confidence in the application system should be improved, including the introduction of an effective system for tracking applications. (2.9)

Partially achieved

Prisoners should not experience delays in accessing their property held in storage. (2.10)

Not achieved

The needs of prisoners with protected characteristics should be promptly identified and met through individual assessment, regular direct consultation with minority groups, effective care planning and monitoring. (2.21)

Not achieved

All discrimination incident report forms (DIRFs) should be investigated. Any decision not to pursue a full investigation under the DIRF procedure should be made by a senior manager, and only on the basis that no discriminatory element has been alleged. (2.22)

Achieved

The prison should develop a strategy that seeks to engage with gay and bisexual prisoners more fully, identifies their specific needs and ensures effective support is provided. (2.30)

Not achieved

Prisoners with immigration and deportation issues should have access to independent legal advice. (2.40)

Not achieved

All treatment rooms should be cleaned to an NHS-equivalent standard and should be fully compliant with infection control standards. (2.53)

Partially achieved

Prisoners should be able to complain about health services through a well-publicised, confidential system. All responses to complaints should be respectful, fully address the issues raised and be monitored effectively. (2.54)

Not achieved

The emergency resuscitation equipment should be in good order, and monitored effectively. (2.55)

Achieved

All new arrivals should receive a comprehensive secondary assessment within 72 hours. (2.62)

Not achieved

There should be further development of nurse-led clinics and evidence-based care plans for prisoners with life-long conditions, from appropriately trained and supervised staff. (2.63)

Partially achieved

Prisoners should have timely access to external hospital appointments. (2.64)

Partially achieved

The inpatient extra care unit should offer a clinically therapeutic environment, with clear guidelines regarding its purpose, and care plans to inform service delivery. (2.65)

Achieved

Patients should receive their repeat medication in a timely manner, to ensure continuity of treatment. (2.72)

Partially achieved

The in-possession policy should be used to meet patient need rather than that of the prison regime. (2.73)

Partially achieved

Custody staff should provide adequate supervision of all medicines administration, to ensure confidentiality and prevent diversion. (2.74)

Not achieved

Nurses should be able to supply an appropriate range of non-prescribed and prescribed medications, with the appropriate governance arrangements in place, including a policy and the implementation of patient group directions. (2.75)

Not achieved

Prescribing should be in line with the prison formulary and national guidelines, and nurses should administer controlled drugs in a safe manner. (2.76)

Partially achieved

Prisoners should have timely access to a full range of mental health support, including clinical psychology services and group interventions to meet the mental health needs of the population. (2.83)

Not achieved

The transfer of prisoners to external health care beds should be expedited and occur within Department of Health transfer target timescales. (2.84)

Not achieved

Prisoners' poor perceptions about the quality of the food provided should be addressed. (2.89)

Partially achieved

Prisoners should not be charged an administration fee for catalogue orders. (2.94)

Achieved

Purposeful activity

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

At the last inspection, in 2016, for most prisoners, the amount of time out of cell was reasonable, at over eight hours a day, but was considerably less for a significant minority. There were sufficient learning and skills and work places for all prisoners to work part time but they were not used effectively and too many prisoners were without any activity at all. The range and variety of activities were reasonable but opportunities to develop English and mathematics skills were limited. Opportunities to accredit vocational skills were missed. The quality of teaching and learning required improvement. Achievements were good. The library and recreational PE activities were good. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

All prisoners should have the opportunity to take part in education, work or training. (S61)

Not achieved

Recommendations

All prisoners should have access to at least one hour of exercise in the open air each day, and daily association. (3.3)

Not achieved

Prisoners should have the opportunity to access information and communication technology training. (3.11)

Partially achieved

The range of learning and skills and work activities for vulnerable prisoners should be increased. (3.12)

Not achieved

The quality of teaching, learning and assessment should be improved and should focus on the progress made by prisoners over time. (3.22)

Not achieved

The timetable in education should be planned so that prisoners do not spend the whole morning or afternoon studying the same subject. (3.23)

Not achieved

Qualifications in relevant vocational subjects, at the appropriate levels, should be introduced. (3.24)

Achieved

All staff should be aware of the need to promote English and mathematics in a vocational context, in order to benefit prisoners in the development of their employability skills. Prisoners should be encouraged and able to take English and mathematics qualifications alongside vocational training. (3.25)

Partially achieved

Rates of attendance and punctuality at learning and skills and work activities should be improved. (3.29)

Not achieved

The plans to provide facilities for independent research and study in the library should be implemented. (3.35)

Achieved

Prisoners should have the opportunity to visit the library weekly. (3.36)

Achieved

Prisoners in full-time education and/or work should be able to access their allocated PE sessions more regularly. (3.41)

Achieved

Accredited qualifications should be reintroduced into PE. (3.42)

Achieved

Resettlement

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

At the last inspection, in 2016, offender management had deteriorated. Offender supervisors had little contact with the prisoners in their care, and the quality of assessments and sentence plans was poor. Home detention curfew assessments were often completed late. The management of high-risk prisoners was weak. Categorisation processes were reasonable but too many prisoners were transferred without an offender assessment system (OASys) assessment to inform their move. The demand for resettlement services was high and prisoners received timely needs assessments and reviews. Work under the resettlement pathways had improved and was mostly good. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

All eligible prisoners should have a high-quality offender assessment system (OASys) assessment and plan. Offender supervisors should have regular and focused contact with prisoners to manage their risk, encourage and monitor achievement of sentence plan targets and promote progressive transfers. (S62)

Partially achieved

Recommendations

Sentenced sex offenders should not remain at the establishment for too long without an adequate focus on their progression. (4.24)

Partially achieved

The reducing reoffending strategy should be based on a comprehensive needs analysis, supported by a detailed action plan, and locate the offender management unit at the centre of the work. (4.6)

Not achieved

All eligible prisoners should be encouraged to apply for home detention curfew and assessments should be completed on time, to ensure that more cases are considered by the board. (4.14)

Achieved

Multi-agency public protection arrangements (MAPPA) levels should be confirmed at least six months before release, to enable the offender management unit to contribute to more MAPPA release plans. (4.19, repeated recommendation 4.22)

Not achieved

The reasons for poor attendance at the indeterminate-sentenced prisoner family days should be explored and action taken to improve it. (4.27)

No longer relevant

All risk of harm factors should be considered when reviewing the resettlement release plan, and links with the offender management unit should be improved. (4.32)

Not achieved

The number of prisoners released homeless or to sustainable accommodation should be more closely and carefully monitored through validated data. (4.36)

Achieved

The virtual campus should be used to support prisoners in their development of job search skills. (4.39)

Achieved

The number of prisoners released homeless or to employment or training should be monitored more carefully through validated data. (4.40)

Partially achieved

The mainstream prisoner waiting area should be clean and well ventilated. (4.52)

Achieved

Visits should start on time. (4.53)

Partially achieved

There should be a robust needs analysis to inform the provision of offending behaviour work. (4.56, repeated recommendation 4.57)

Not achieved

Appendix III: Photographs



Graffiti in adjudication holding room



Rubbish in adjudication holding room



B wing exercise yard



Graffiti in cell on E wing



Mobile phone found in the prison against a penny



Rubbish and clothing on wire near the main entrance to the prison



Segregation exercise yard



Communal toilet on B wing



Servery on C wing



Segregation exercise yard



Showers on B wing



Communal toilet and shower area on C wing



Outside cells on B wing

Appendix IV: Prison population profile

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

Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced	33	355	55.8%
Recall	5	68	10.5%
Convicted unsentenced	21	74	13.6%
Remand	16	115	18.8%
Civil prisoners	0	0	0%
Detainees	1	6	1%
Unknown	0	2	0.3%
Total	76	620	100%

Sentence	18–20 yr olds	21 and over	%
Unsentenced	39	201	34.5%
Less than 6 months	3	63	9.5%
6 months to less than 12 months	2	55	8.2%
12 months to less than 2 years	7	68	10.8%
2 years to less than 4 years	14	85	14.1%
4 years to less than 10 years	10	88	14.1%
10 years and over (not life)	1	39	5.7%
ISPP (indeterminate sentence for public protection)	0	15	2.2%
Life	0	7	1%
Total	76	620	100%

Age	Number of prisoners	%
Please state minimum age here: 18		
Under 21 years	76	10.9%
21 years to 29 years	235	33.8%
30 years to 39 years	218	31.3%
40 years to 49 years	94	13.5%
50 years to 59 years	51	7.3%
60 years to 69 years	13	1.9%
70 plus years	9	1.3%
Please state maximum age here: 84		
Total	696	100%

Nationality	18–20 yr olds	21 and over	%
British	65	556	89.2%
Foreign nationals	9	58	9.6%
Not stated	2	6	1.1%
Total			

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced	39	222	37.7%
Uncategorised sentenced	0	10	1.4%
Category A	0	0	0%
Category B	0	42	6.1%
Category C	1	317	45.9%
Category D	0	23	3.3%
YOI closed	36	3	5.6%
Total	76¹⁵	617¹⁶	100%

Ethnicity	18–20 yr olds	21 and over	%
White			
British	38	439	68.5%
Irish	0	6	0.9%
Gypsy/Irish Traveller	2	10	1.7%
Other white	4	33	5.3%
Mixed			
White and black Caribbean	4	14	2.6%
White and black African	2	2	0.6%
White and Asian	0	3	0%
Other mixed	1	3	0.6%
Asian or Asian British			
Indian	0	3	0.4%
Pakistani	1	2	0.4%
Bangladeshi	0	4	0.6%
Chinese	0	2	0.3%
Other Asian	3	6	1.3%
Black or black British			
Caribbean	5	28	4.7%
African	6	12	3.9%
Other black	6	24	4.3%
Other ethnic group			
Arab	0	0	0%
Other ethnic group	1	10	1.6%
Not stated	3	10	1.9%
Total	76	620	100%

¹⁵ This data was collected at a different time. The number of men held had changed and therefore the total figures are not consistent with the rest of this document.

¹⁶ This data was collected at a different time. The number of men held had changed and therefore the total figures are not consistent with the rest of this document.

Religion	18–20 yr olds	21 and over	%
Baptist	1	0	0.1%
Church of England	3	115	17%
Roman Catholic	11	137	21.3%
Other Christian denominations	24	145	24.3%
Muslim	11	56	9.6%
Sikh	0	0	0%
Hindu	0	1	0.1%
Buddhist	0	7	1%
Jewish	0	2	0.3%
Other	1	3	0.6%
No religion	24	153	24.5%
Not stated	1	1	0.3%
Total			

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	7	1%	92	13.2%
1 month to 3 months	14	2%	124	17.8%
3 months to 6 months	7	1%	107	15.4%
6 months to 1 year	9	1.3%	72	10.3%
1 year to 2 years	0	0%	20	2.9%
2 years to 4 years	0	0%	4	0.6%
4 years or more	0	0%	0	0%
Total	37	5.3%	419	60.2%

Sentenced prisoners only

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

Unsentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	15	2.2%	74	10.6%
1 month to 3 months	13	1.9%	62	8.9%
3 months to 6 months	8	1.1%	44	6.3%
6 months to 1 year	3	0.4%	18	2.6%
1 year to 2 years	0	0%	3	0.4%
2 years to 4 years	0	0%	0	0%
4 years or more	0	0%	0	0%
Total	39	5.6%	201	28.9%

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.¹⁷

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 power calculation, 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.¹⁸

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.¹⁹ 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 21 May 2018 the prisoner population at HMP and YOI Chelmsford was 696. Using the sampling method described above, questionnaires were distributed to 199 prisoners. We received a total of 155 completed questionnaires, a response rate of 78%. This included one questionnaire completed via face-to-face interviews. Twelve prisoners declined to participate in the survey and 32 questionnaires were either not returned at all, or returned blank.

¹⁷ Qualitative analysis of these written comments is undertaken by HMI Prisons researchers and used by inspectors.

¹⁸ 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments).

¹⁹ 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 and YOI Chelmsford. For the comparator analyses, each question was reformulated into a binary ‘yes/no’ format and affirmative responses compared.²⁰ 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 and YOI Chelmsford 2018²¹ compared with those from other HMI Prisons surveys²²

- Survey responses from HMP and YOI Chelmsford in 2018 compared with survey responses from the most recent inspection at all other local prisons.
- Survey responses from HMP and YOI Chelmsford in 2018 compared with survey responses from other local prisons inspected since September 2017.
- Survey responses from HMP and YOI Chelmsford in 2018 compared with survey responses from HMP and YOI Chelmsford in 2016.

Comparisons between different residential locations within HMP and YOI Chelmsford 2018

- Responses of prisoners on the older prison wings (A–D wings) compared with those from the rest of the establishment.

Comparisons between sub-populations of prisoners within HMP and YOI Chelmsford 2018²³

- White prisoners’ responses compared with those of prisoners from black or minority ethnic groups.
- 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.²⁴

In the comparator analyses, statistically significant differences are indicated by shading.²⁵ 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

²⁰ Using the Chi-square test (or Fisher’s exact test if there are fewer than five responses in a group).

²¹ Percentages shown in the full breakdown may differ slightly from those shown in the comparative analyses. This is because the data has been weighted to enable valid statistical comparison between establishments.

²² 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.

²³ These analyses are carried out on summary data from selected survey questions only.

²⁴ A minimum of 10 responses which must also represent at least 10% of the total response.

²⁵ 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.

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.

Background information

I.1	What wing or houseblock are you currently living on?	
	A Wing.....	4 (3%)
	B Wing.....	18 (12%)
	C Wing.....	32 (21%)
	D Wing.....	12 (8%)
	E Wing.....	28 (18%)
	F Wing.....	28 (18%)
	G Wing.....	32 (21%)
	Health care unit.....	1 (1%)
I.2	How old are you?	
	Under 21	13 (9%)
	21 - 25.....	26 (17%)
	26 - 29.....	20 (13%)
	30 - 39.....	42 (28%)
	40 - 49.....	28 (18%)
	50 - 59.....	16 (11%)
	60 - 69.....	7 (5%)
	70 or over.....	0 (0%)
I.3	What is your ethnic group?	
	White - English/ Welsh/ Scottish/ Northern Irish/ British	104 (68%)
	White - Irish.....	1 (1%)
	White - Gypsy or Irish Traveller.....	2 (1%)
	White - any other White background	6 (4%)
	Mixed - White and Black Caribbean.....	6 (4%)
	Mixed - White and Black African	2 (1%)
	Mixed - White and Asian.....	2 (1%)
	Mixed - any other Mixed ethnic background	3 (2%)
	Asian/ Asian British - Indian.....	0 (0%)
	Asian/ Asian British - Pakistani.....	1 (1%)
	Asian/ Asian British - Bangladeshi.....	2 (1%)
	Asian/ Asian British - Chinese.....	1 (1%)
	Asian - any other Asian Background	0 (0%)
	Black/ Black British - Caribbean.....	8 (5%)
	Black/ Black British - African	9 (6%)
	Black - any other Black/ African/ Caribbean background.....	2 (1%)
	Arab.....	1 (1%)
	Any other ethnic group	2 (1%)
I.4	How long have you been in this prison?	
	Less than 6 months.....	92 (63%)
	6 months or more.....	53 (37%)
I.5	Are you currently serving a sentence?	
	Yes	90 (60%)
	Yes - on recall	12 (8%)
	No - on remand or awaiting sentence.....	49 (32%)
	No - immigration detainee.....	0 (0%)

1.6	How long is your sentence?	
	Less than 6 months.....	21 (14%)
	6 months to less than 1 year.....	15 (10%)
	1 year to less than 4 years.....	29 (19%)
	4 years to less than 10 years.....	23 (15%)
	10 years or more.....	10 (7%)
	IPP (indeterminate sentence for public protection).....	2 (1%)
	Life.....	1 (1%)
	Not currently serving a sentence.....	49 (33%)

Arrival and reception

2.1	Were you given up-to-date information about this prison before you came here?	
	Yes.....	19 (12%)
	No.....	123 (80%)
	Don't remember.....	12 (8%)
2.2	When you arrived at this prison, how long did you spend in reception?	
	Less than 2 hours.....	56 (37%)
	2 hours or more.....	88 (58%)
	Don't remember.....	9 (6%)
2.3	When you were searched in reception, was this done in a respectful way?	
	Yes.....	126 (82%)
	No.....	22 (14%)
	Don't remember.....	6 (4%)
2.4	Overall, how were you treated in reception?	
	Very well.....	42 (28%)
	Quite well.....	77 (51%)
	Quite badly.....	21 (14%)
	Very badly.....	4 (3%)
	Don't remember.....	8 (5%)
2.5	When you first arrived here, did you have any of the following problems?	
	Problems getting phone numbers.....	55 (35%)
	Contacting family.....	69 (45%)
	Arranging care for children or other dependants.....	6 (4%)
	Contacting employers.....	10 (6%)
	Money worries.....	39 (25%)
	Housing worries.....	35 (23%)
	Feeling depressed.....	70 (45%)
	Feeling suicidal.....	25 (16%)
	Other mental health problems.....	44 (28%)
	Physical health problems.....	31 (20%)
	Drug or alcohol problems (e.g. withdrawal).....	31 (20%)
	Problems getting medication.....	40 (26%)
	Needing protection from other prisoners.....	17 (11%)
	Lost or delayed property.....	32 (21%)
	Other problems.....	18 (12%)
	Did not have any problems.....	24 (15%)
2.6	Did staff help you to deal with these problems when you first arrived?	
	Yes.....	34 (23%)
	No.....	89 (61%)
	Did not have any problems when I first arrived.....	24 (16%)

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.....	118 (77%)
Toiletries / other basic items	68 (44%)
A shower.....	13 (8%)
A free phone call	51 (33%)
Something to eat	112 (73%)
The chance to see someone from health care.....	95 (62%)
The chance to talk to a Listener or Samaritans.....	32 (21%)
Support from another prisoner (e.g. Insider or buddy).....	38 (25%)
Wasn't offered any of these things	6 (4%)

3.2 On your first night in this prison, how clean or dirty was your cell?

Very clean.....	5 (3%)
Quite clean.....	32 (21%)
Quite dirty	49 (32%)
Very dirty	61 (40%)
Don't remember.....	4 (3%)

3.3 Did you feel safe on your first night here?

Yes	115 (76%)
No.....	35 (23%)
Don't remember.....	2 (1%)

3.4 In your first few days here, did you get:

	Yes	No	Don't remember
Access to the prison shop / canteen?	42 (28%)	101 (68%)	6 (4%)
Free PIN phone credit?	101 (68%)	45 (30%)	2 (1%)
Numbers put on your PIN phone?	38 (28%)	93 (67%)	7 (5%)

3.5 Did your induction cover everything you needed to know about this prison?

Yes	72 (49%)
No.....	55 (37%)
Have not had an induction.....	20 (14%)

On the wing

4.1 Are you in a cell on your own?

Yes	70 (46%)
No, I'm in a shared cell or dormitory.....	81 (54%)

4.2 Is your cell call bell normally answered within 5 minutes?

Yes	29 (19%)
No.....	114 (76%)
Don't know.....	7 (5%)
Don't have a cell call bell.....	0 (0%)

4.3 Please answer the following questions about the wing or houseblock you are currently living on:

	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	73 (50%)	70 (48%)	3 (2%)
Can you shower every day?	118 (80%)	28 (19%)	1 (1%)
Do you have clean sheets every week?	71 (48%)	71 (48%)	5 (3%)
Do you get cell cleaning materials every week?	68 (46%)	71 (48%)	8 (5%)
Is it normally quiet enough for you to relax or sleep at night?	84 (58%)	59 (40%)	3 (2%)
Can you get your stored property if you need it?	29 (21%)	74 (52%)	38 (27%)

4.4 Normally, how clean or dirty are the communal / shared areas of your wing or houseblock (landings, stairs, wing showers etc.)?

Very clean.....	24 (16%)
Quite clean.....	79 (53%)
Quite dirty	30 (20%)
Very dirty	15 (10%)

Food and canteen

5.1 What is the quality of food like in this prison?

Very good.....	3 (2%)
Quite good.....	50 (34%)
Quite bad	49 (33%)
Very bad	45 (31%)

5.2 Do you get enough to eat at mealtimes?

Always.....	9 (6%)
Most of the time.....	30 (20%)
Some of the time.....	52 (35%)
Never	57 (39%)

5.3 Does the shop / canteen sell the things that you need?

Yes	90 (60%)
No.....	51 (34%)
Don't know.....	8 (5%)

Relationships with staff

6.1 Do most staff here treat you with respect?

Yes	112 (75%)
No.....	37 (25%)

6.2 Are there any staff here you could turn to if you had a problem?

Yes	115 (79%)
No.....	31 (21%)

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

Yes	51 (34%)
No.....	98 (66%)

6.4	How helpful is your personal or named officer?	
	Very helpful.....	19 (13%)
	Quite helpful.....	22 (15%)
	Not very helpful.....	10 (7%)
	Not at all helpful.....	10 (7%)
	Don't know.....	21 (14%)
	Don't have a personal / named officer	63 (43%)
6.5	How often do you see prison governors, directors or senior managers talking to prisoners?	
	Regularly.....	11 (7%)
	Sometimes.....	42 (28%)
	Hardly ever.....	79 (53%)
	Don't know.....	16 (11%)
6.6	Do you feel that you are treated as an individual in this prison?	
	Yes.....	64 (45%)
	No.....	78 (55%)
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	
	Yes, and things sometimes change.....	23 (15%)
	Yes, but things don't change.....	38 (26%)
	No.....	63 (42%)
	Don't know.....	25 (17%)

Faith

7.1	What is your religion?	
	No religion.....	45 (30%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	86 (58%)
	Buddhist.....	1 (1%)
	Hindu.....	0 (0%)
	Jewish.....	2 (1%)
	Muslim.....	10 (7%)
	Sikh.....	0 (0%)
	Other.....	4 (3%)
7.2	Are your religious beliefs respected here?	
	Yes.....	81 (55%)
	No.....	11 (7%)
	Don't know.....	10 (7%)
	Not applicable (no religion).....	45 (31%)
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	
	Yes.....	68 (46%)
	No.....	14 (9%)
	Don't know.....	21 (14%)
	Not applicable (no religion).....	45 (30%)
7.4	Are you able to attend religious services, if you want to?	
	Yes.....	92 (62%)
	No.....	8 (5%)
	Don't know.....	3 (2%)
	Not applicable (no religion).....	45 (30%)

Contact with family and friends

8.1	Have staff here encouraged you to keep in touch with your family / friends?	
	Yes	40 (27%)
	No	109 (73%)
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	78 (55%)
	No	64 (45%)
8.3	Are you able to use a phone every day (if you have credit)?	
	Yes	130 (88%)
	No	17 (12%)
8.4	How easy or difficult is it for your family and friends to get here?	
	Very easy	11 (8%)
	Quite easy	57 (39%)
	Quite difficult.....	33 (23%)
	Very difficult.....	28 (19%)
	Don't know.....	16 (11%)
8.5	How often do you have visits from family or friends?	
	More than once a week.....	4 (3%)
	About once a week.....	24 (17%)
	Less than once a week.....	55 (39%)
	Not applicable (don't get visits)	58 (41%)
8.6	Do visits usually start and finish on time?	
	Yes	22 (27%)
	No	59 (73%)
8.7	Are your visitors usually treated respectfully by staff?	
	Yes	58 (73%)
	No	21 (27%)

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	50 (34%)
	Yes, but these times are not usually kept to	60 (41%)
	No	36 (25%)
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	75 (51%)
	2 to 6 hours.....	49 (34%)
	6 to 10 hours.....	11 (8%)
	10 hours or more.....	4 (3%)
	Don't know.....	7 (5%)

9.3	How long do you usually spend out of your cell on a typical Saturday or Sunday?	
	Less than 2 hours	106 (73%)
	2 to 6 hours.....	29 (20%)
	6 to 10 hours.....	3 (2%)
	10 hours or more.....	1 (1%)
	Don't know.....	7 (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	13 (9%)
	1 or 2.....	27 (19%)
	3 to 5.....	34 (23%)
	More than 5.....	56 (39%)
	Don't know.....	15 (10%)
9.5	How many days in a typical week do you get association, if you want it?	
	None	10 (7%)
	1 or 2.....	9 (6%)
	3 to 5.....	33 (23%)
	More than 5.....	84 (58%)
	Don't know.....	10 (7%)
9.6	How many days in a typical week could you go outside for exercise, if you wanted to?	
	None	4 (3%)
	1 or 2.....	18 (12%)
	3 to 5.....	37 (25%)
	More than 5.....	80 (54%)
	Don't know.....	8 (5%)
9.7	Typically, how often do you go to the gym?	
	Twice a week or more	54 (36%)
	About once a week.....	18 (12%)
	Less than once a week.....	12 (8%)
	Never	64 (43%)
9.8	Typically, how often do you go to the library?	
	Twice a week or more	7 (5%)
	About once a week.....	42 (29%)
	Less than once a week.....	47 (32%)
	Never	51 (35%)
9.9	Does the library have a wide enough range of materials to meet your needs?	
	Yes	49 (35%)
	No.....	42 (30%)
	Don't use the library	51 (36%)

Applications, complaints and legal rights

10.1	Is it easy for you to make an application?	
	Yes	91 (62%)
	No.....	43 (29%)
	Don't know.....	13 (9%)

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?	57 (41%)	62 (45%)	19 (14%)	
	Are applications usually dealt with within 7 days?	27 (20%)	86 (65%)	19 (14%)	
10.3	Is it easy for you to make a complaint?				
	Yes			80 (54%)	
	No			35 (24%)	
	Don't know.....			32 (22%)	
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?	29 (21%)	52 (37%)	59 (42%)	
	Are complaints usually dealt with within 7 days?	14 (10%)	62 (46%)	59 (44%)	
10.5	Have you ever been prevented from making a complaint here when you wanted to?				
	Yes			24 (16%)	
	No			82 (55%)	
	Not wanted to make a complaint			42 (28%)	
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?	57 (40%)	47 (33%)	17 (12%)	23 (16%)
	Attend legal visits?	69 (49%)	32 (23%)	18 (13%)	22 (16%)
	Get bail information?	21 (15%)	44 (31%)	38 (27%)	37 (26%)
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?				
	Yes				48 (34%)
	No				76 (54%)
	Not had any legal letters				18 (13%)

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	3 (2%)	17 (12%)	46 (32%)	61 (42%)	17 (12%)
	Nurse	5 (3%)	43 (30%)	43 (30%)	33 (23%)	20 (14%)
	Dentist	2 (1%)	2 (1%)	29 (20%)	85 (59%)	27 (19%)
	Mental health workers	3 (2%)	23 (16%)	26 (18%)	45 (31%)	46 (32%)
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	4 (3%)	34 (24%)	31 (22%)	39 (27%)	36 (25%)
	Nurse	17 (12%)	50 (35%)	21 (15%)	21 (15%)	33 (23%)
	Dentist	5 (4%)	17 (12%)	15 (11%)	35 (25%)	70 (49%)
	Mental health workers	5 (4%)	22 (16%)	13 (10%)	28 (21%)	66 (49%)
11.3	Do you have any mental health problems?					
	Yes					75 (52%)
	No					70 (48%)

11.4	Have you been helped with your mental health problems in this prison?	
	Yes	23 (17%)
	No	45 (33%)
	Don't have any mental health problems	70 (51%)
11.5	What do you think of the overall quality of the health services here?	
	Very good.....	5 (4%)
	Quite good.....	31 (22%)
	Quite bad	43 (30%)
	Very bad	36 (25%)
	Don't know.....	27 (19%)

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	58 (40%)
	No	88 (60%)
12.2	If you have a disability, are you getting the support you need?	
	Yes	14 (10%)
	No	37 (27%)
	Don't have a disability	88 (63%)
12.3	Have you been on an ACCT in this prison?	
	Yes	40 (28%)
	No	102 (72%)
12.4	If you have been on an ACCT in this prison, did you feel cared for by staff?	
	Yes	23 (16%)
	No	16 (11%)
	Have not been on an ACCT in this prison	102 (72%)
12.5	How easy or difficult is it for you to speak to a Listener, if you need to?	
	Very easy	36 (25%)
	Quite easy	41 (29%)
	Quite difficult	12 (8%)
	Very difficult	9 (6%)
	Don't know.....	42 (29%)
	No Listeners at this prison	3 (2%)

Alcohol and drugs

13.1	Did you have an alcohol problem when you came into this prison?	
	Yes	31 (21%)
	No	114 (79%)
13.2	Have you been helped with your alcohol problem in this prison?	
	Yes	16 (11%)
	No	12 (8%)
	Did not / do not have an alcohol problem	114 (80%)
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	50 (35%)
	No	92 (65%)

13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	22 (15%)
	No	122 (85%)
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	11 (8%)
	No	132 (92%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	30 (22%)
	No	25 (18%)
	Did not / do not have a drug problem.....	83 (60%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy	38 (27%)
	Quite easy	23 (16%)
	Quite difficult	8 (6%)
	Very difficult	8 (6%)
	Don't know.....	64 (45%)
13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy	10 (7%)
	Quite easy	17 (12%)
	Quite difficult	15 (11%)
	Very difficult	17 (12%)
	Don't know.....	81 (58%)

Safety

14.1	Have you ever felt unsafe here?	
	Yes	69 (47%)
	No	77 (53%)
14.2	Do you feel unsafe now?	
	Yes	30 (21%)
	No	113 (79%)
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	42 (31%)
	Threats or intimidation.....	34 (25%)
	Physical assault.....	28 (20%)
	Sexual assault.....	3 (2%)
	Theft of canteen or property.....	28 (20%)
	Other bullying / victimisation	25 (18%)
	Not experienced any of these from prisoners here.....	80 (58%)
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	
	Yes	46 (33%)
	No	95 (67%)

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	29 (21%)
	Threats or intimidation.....	23 (17%)
	Physical assault.....	14 (10%)
	Sexual assault.....	0 (0%)
	Theft of canteen or property.....	6 (4%)
	Other bullying / victimisation	9 (7%)
	Not experienced any of these from staff here.....	90 (66%)

14.6	If you were being bullied / victimised by staff here, would you report it?	
	Yes	67 (48%)
	No.....	74 (52%)

Behaviour management

15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	
	Yes	57 (40%)
	No.....	51 (35%)
	Don't know what the incentives / rewards are	36 (25%)

15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	
	Yes	55 (40%)
	No.....	42 (30%)
	Don't know.....	24 (17%)
	Don't know what this is	18 (13%)

15.3	Have you been physically restrained by staff in this prison in the last 6 months?	
	Yes	25 (18%)
	No.....	117 (82%)

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	7 (5%)
	No.....	16 (11%)
	Don't remember	1 (1%)
	Not been restrained here in last 6 months	117 (83%)

15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	
	Yes	14 (10%)
	No.....	126 (90%)

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?	8 (73%)	3 (27%)
	Could you shower every day?	9 (82%)	2 (18%)
	Could you go outside for exercise every day?	9 (75%)	3 (25%)
	Could you use the phone every day (if you had credit)?	9 (82%)	2 (18%)

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	74 (55%)	31 (23%)	27 (20%)	3 (2%)
Vocational or skills training	29 (22%)	47 (36%)	49 (38%)	5 (4%)
Prison job	33 (24%)	75 (56%)	23 (17%)	4 (3%)
Voluntary work outside of the prison	7 (5%)	36 (28%)	42 (33%)	43 (34%)
Paid work outside of the prison	5 (4%)	33 (25%)	44 (34%)	49 (37%)

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	56 (43%)	32 (24%)	43 (33%)
Vocational or skills training	42 (34%)	14 (11%)	68 (55%)
Prison job	40 (32%)	38 (30%)	47 (38%)
Voluntary work outside of the prison	24 (20%)	11 (9%)	88 (72%)
Paid work outside of the prison	24 (20%)	11 (9%)	88 (72%)

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

Yes	53 (39%)
No.....	73 (54%)
Not applicable (e.g. if you are retired, sick or on remand)	10 (7%)

Planning and progression

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

Yes	35 (25%)
No.....	105 (75%)

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

Yes	31 (89%)
No.....	1 (3%)
Don't know what my objectives or targets are.....	3 (9%)

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

Yes	17 (52%)
No.....	13 (39%)
Don't know what my objectives or targets are.....	3 (9%)

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	10 (36%)	1 (4%)	17 (61%)
Other programmes	9 (31%)	3 (10%)	17 (59%)
One to one work	8 (29%)	1 (4%)	19 (68%)
Being on a specialist unit	5 (19%)	2 (7%)	20 (74%)
ROTL - day or overnight release	5 (19%)	1 (4%)	21 (78%)

Preparation for release

18.1	Do you expect to be released in the next 3 months?			
	Yes			50 (35%)
	No			69 (48%)
	Don't know			24 (17%)
18.2	How close is this prison to your home area or intended release address?			
	Very near			9 (19%)
	Quite near			28 (58%)
	Quite far			9 (19%)
	Very far			2 (4%)
18.3	Is anybody helping you to prepare for your release (e.g. a home probation officer, responsible officer, case worker)?			
	Yes			21 (43%)
	No			28 (57%)
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	7 (15%)	25 (52%)	16 (33%)
	Getting employment	5 (11%)	19 (40%)	23 (49%)
	Setting up education or training	4 (9%)	14 (32%)	26 (59%)
	Arranging benefits	9 (20%)	18 (41%)	17 (39%)
	Sorting out finances	4 (10%)	18 (43%)	20 (48%)
	Support for drug or alcohol problems	8 (19%)	14 (33%)	21 (49%)
	Health / mental health support	5 (11%)	16 (36%)	23 (52%)
	Social care support	4 (10%)	15 (36%)	23 (55%)
	Getting back in touch with family or friends	6 (14%)	12 (29%)	24 (57%)

More about you

19.1	Do you have children under the age of 18?		
	Yes		80 (55%)
	No		65 (45%)
19.2	Are you a UK / British citizen?		
	Yes		139 (95%)
	No		7 (5%)
19.3	Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?		
	Yes		12 (8%)
	No		133 (92%)
19.4	Have you ever been in the armed services (e.g. army, navy, air force)?		
	Yes		11 (8%)
	No		134 (92%)
19.5	What is your gender?		
	Male		143 (98%)
	Female		0 (0%)
	Non-binary		0 (0%)
	Other		3 (2%)

19.6	How would you describe your sexual orientation?	
	Straight / heterosexual.....	140 (97%)
	Gay / lesbian / homosexual.....	1 (1%)
	Bisexual.....	1 (1%)
	Other.....	3 (2%)
19.7	Do you identify as transgender or transsexual?	
	Yes.....	5 (4%)
	No.....	132 (96%)

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.....	8 (6%)
	Less likely to offend.....	71 (50%)
	Made no difference.....	62 (44%)

HMP / YOI Chelmsford 2018

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

In this table summary statistics from HMP / YOI Chelmsford 2018 are compared with the following HMIP survey data:

- Summary statistics from most recent surveys of all other local prisons (33 prisons). Please note that we do not have comparable data for the new questions introduced in September 2017.
- Summary statistics from surveys of local prisons conducted since the introduction of the new questionnaire in September 2017 (11 prisons). Please note that this does not include all local prisons.
- Summary statistics from HMP / YOI Chelmsford in 2018 are compared with those from HMP / YOI Chelmsford in 2016. Please note that we do not have comparable data for the new questions introduced in September 2017.

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

Number of completed questionnaires returned

n=number of valid responses to question (HMP / YOI Chelmsford 2018)

HMP / YOI Chelmsford 2018	All other local prisons	HMP / YOI Chelmsford 2018	All other local prisons surveyed since September 2017	HMP / YOI Chelmsford 2018	HMP / YOI Chelmsford 2016
155	5,925	155	1,956	155	180

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION								
1.2	Are you under 21 years of age?	<i>n=152</i>	9%	6%	9%	5%	9%	7%
	Are you 25 years of age or younger?	<i>n=152</i>	26%		26%	22%	26%	
	Are you 50 years of age or older?	<i>n=152</i>	15%	13%	15%	14%	15%	8%
	Are you 70 years of age or older?	<i>n=152</i>	0%	2%	0%	1%	0%	2%
1.3	Are you from a minority ethnic group?	<i>n=152</i>	26%	24%	26%	24%	26%	12%
1.4	Have you been in this prison for less than 6 months?	<i>n=145</i>	63%		63%	61%	63%	
1.5	Are you currently serving a sentence?	<i>n=151</i>	68%	72%	68%	72%	68%	66%
	Are you on recall?	<i>n=151</i>	8%	11%	8%	13%	8%	11%
1.6	Is your sentence less than 12 months?	<i>n=150</i>	24%	21%	24%	21%	24%	24%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n=150</i>	1%	3%	1%	3%	1%	1%
7.1	Are you Muslim?	<i>n=148</i>	7%	12%	7%	12%	7%	5%
11.3	Do you have any mental health problems?	<i>n=145</i>	52%		52%	49%	52%	
12.1	Do you consider yourself to have a disability?	<i>n=146</i>	40%	34%	40%	40%	40%	28%
19.1	Do you have any children under the age of 18?	<i>n=145</i>	55%	52%	55%	52%	55%	59%
19.2	Are you a foreign national?	<i>n=146</i>	5%	11%	5%	10%	5%	11%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n=145</i>	8%	5%	8%	6%	8%	12%
19.4	Have you ever been in the armed services?	<i>n=145</i>	8%	6%	8%	7%	8%	11%
19.5	Is your gender female or non-binary?	<i>n=146</i>	2%		2%	1%	2%	
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n=145</i>	3%	3%	3%	4%	3%	3%
19.7	Do you identify as transgender or transsexual?	<i>n=137</i>	4%		4%	2%	4%	

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

Number of completed questionnaires returned

n=number of valid responses to question (HMP / YOI Chelmsford 2018)

HMP / YOI Chelmsford 2018	All other local prisons	HMP / YOI Chelmsford 2018	All other local prisons surveyed since September 2017	HMP / YOI Chelmsford 2018	HMP / YOI Chelmsford 2016
155	5,925	155	1,956	155	180

ARRIVAL AND RECEPTION								
2.1	Were you given up-to-date information about this prison before you came here?	<i>n=154</i>	12%		12%	17%	12%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n=153</i>	37%	38%	37%	35%	37%	40%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n=154</i>	82%	77%	82%	76%	82%	82%
2.4	Overall, were you treated very / quite well in reception?	<i>n=152</i>	78%		78%	73%	78%	
2.5	When you first arrived, did you have any problems?	<i>n=155</i>	85%	83%	85%	89%	85%	78%
2.5	Did you have problems with:							
	- Getting phone numbers?	<i>n=155</i>	36%	37%	36%	47%	36%	32%
	- Contacting family?	<i>n=155</i>	45%	40%	45%	50%	45%	33%
	- Arranging care for children or other dependents?	<i>n=155</i>	4%		4%	5%	4%	
	- Contacting employers?	<i>n=155</i>	7%	6%	7%	8%	7%	3%
	- Money worries?	<i>n=155</i>	25%	25%	25%	28%	25%	24%
	- Housing worries?	<i>n=155</i>	23%	24%	23%	24%	23%	22%
	- Feeling depressed?	<i>n=155</i>	45%		45%	48%	45%	
	- Feeling suicidal?	<i>n=155</i>	16%		16%	18%	16%	
	- Other mental health problems?	<i>n=155</i>	28%		28%	28%	28%	
	- Physical health problems	<i>n=155</i>	20%	20%	20%	20%	20%	17%
	- Drugs or alcohol (e.g. withdrawal)?	<i>n=155</i>	20%		20%	24%	20%	
	- Getting medication?	<i>n=155</i>	26%		26%	31%	26%	
	- Needing protection from other prisoners?	<i>n=155</i>	11%	10%	11%	11%	11%	6%
	- Lost or delayed property?	<i>n=155</i>	21%	19%	21%	21%	21%	15%
<i>For those who had any problems when they first arrived:</i>								
2.6	Did staff help you to deal with these problems?	<i>n=123</i>	28%	32%	28%	30%	28%	31%

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

	Green shading shows results that are significantly more positive than the comparator
	Blue shading shows results that are significantly more negative than the comparator
	Orange shading shows significant differences in demographics and background information
	No shading means that differences are not significant and may have occurred by chance
	Grey shading indicates that we have no valid data for this question

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

Number of completed questionnaires returned

HMP / YOI Chelmsford 2018	All other local prisons	HMP / YOI Chelmsford 2018	All other local prisons surveyed since September 2017	HMP / YOI Chelmsford 2018	HMP / YOI Chelmsford 2016
155	5,925	155	1,956	155	180

n=number of valid responses to question (HMP / YOI Chelmsford 2018)

FIRST NIGHT AND INDUCTION								
3.1	Before you were locked up on your first night, were you offered:							
	- Tobacco or nicotine replacement?	n=153	77%	71%	77%	71%	77%	82%
	- Toiletries / other basic items?	n=153	44%	57%	44%	54%	44%	44%
	- A shower?	n=153	9%	30%	9%	30%	9%	17%
	- A free phone call?	n=153	33%	52%	33%	46%	33%	35%
	- Something to eat?	n=153	73%	73%	73%	76%	73%	66%
	- The chance to see someone from health care?	n=153	62%	65%	62%	63%	62%	62%
	- The chance to talk to a Listener or Samaritans?	n=153	21%	29%	21%	26%	21%	41%
	- Support from another prisoner (e.g. Insider or buddy)?	n=153	25%		25%	21%	25%	
	- None of these?	n=153	4%		4%	5%	4%	
3.2	On your first night in this prison, was your cell very / quite clean?	n=151	25%		25%	28%	25%	
3.3	Did you feel safe on your first night here?	n=152	76%	64%	76%	60%	76%	70%
3.4	In your first few days here, did you get?							
	- Access to the prison shop / canteen?	n=149	28%	25%	28%	31%	28%	19%
	- Free PIN phone credit?	n=148	68%		68%	53%	68%	
	- Numbers put on your PIN phone?	n=138	28%		28%	32%	28%	
3.5	Have you had an induction at this prison?	n=147	86%	79%	86%	82%	86%	85%
<i>For those who have had an induction:</i>								
3.5	Did your induction cover everything you needed to know about this prison?	n=127	57%		57%	48%	57%	
ON THE WING								
4.1	Are you in a cell on your own?	n=151	46%		46%	31%	46%	
4.2	Is your cell call bell normally answered within 5 minutes?	n=150	19%	21%	19%	18%	19%	26%
4.3	On the wing or houseblock you currently live on:							
	- Do you normally have enough clean, suitable clothes for the week?	n=146	50%	50%	50%	54%	50%	48%
	- Can you shower every day?	n=147	80%	75%	80%	73%	80%	83%
	- Do you have clean sheets every week?	n=147	48%	61%	48%	62%	48%	47%
	- Do you get cell cleaning materials every week?	n=147	46%	49%	46%	48%	46%	44%
	- Is it normally quiet enough for you to relax or sleep at night?	n=146	58%	54%	58%	53%	57%	63%
	- Can you get your stored property if you need it?	n=141	21%	19%	21%	21%	21%	13%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	n=148	70%		70%	55%	70%	

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

Number of completed questionnaires returned

HMP / YO1 Chelmsford 2018	All other local prisons	HMP / YO1 Chelmsford 2018	All other local prisons surveyed since September 2017	HMP / YO1 Chelmsford 2018	HMP / YO1 Chelmsford 2016
155	5,925	155	1,956	155	180

n=number of valid responses to question (HMP / YO1 Chelmsford 2018)

FOOD AND CANTEEN							
5.1	Is the quality of the food in this prison very / quite good?	n=147	36%		36%	36%	
5.2	Do you get enough to eat at meal-times always / most of the time?	n=148	26%		26%	28%	
5.3	Does the shop / canteen sell the things that you need?	n=149	60%	52%	60%	60%	60% 51%
RELATIONSHIPS WITH STAFF							
6.1	Do most staff here treat you with respect?	n=149	75%	70%	75%	66%	75% 73%
6.2	Are there any staff here you could turn to if you had a problem?	n=146	79%	69%	79%	69%	79% 72%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	n=149	34%	28%	34%	28%	34% 31%
6.4	Do you have a personal officer?	n=145	57%		57%	57%	57%
<i>For those who have a personal officer:</i>							
6.4	Is your personal or named officer very / quite helpful?	n=82	50%		50%	45%	50%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	n=148	7%		7%	7%	7%
6.6	Do you feel that you are treated as an individual in this prison?	n=142	45%		45%	37%	45%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	n=149	41%		41%	40%	41%
	If so, do things sometimes change?	n=61	38%		38%	33%	38%
FAITH							
7.1	Do you have a religion?	n=148	70%	68%	70%	69%	70% 67%
<i>For those who have a religion:</i>							
7.2	Are your religious beliefs respected here?	n=102	79%		79%	65%	79%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	n=103	66%		66%	64%	66%
7.4	Are you able to attend religious services, if you want to?	n=103	89%		89%	83%	89%
CONTACT WITH FAMILY AND FRIENDS							
8.1	Have staff here encouraged you to keep in touch with your family / friends?	n=149	27%		27%	24%	27%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	n=142	55%	49%	55%	55%	55% 48%
8.3	Are you able to use a phone every day (if you have credit)?	n=147	88%		88%	77%	88%
8.4	Is it very / quite easy for your family and friends to get here?	n=145	47%		47%	44%	47%
8.5	Do you get visits from family/friends once a week or more?	n=141	20%		20%	22%	20%
<i>For those who get visits:</i>							
8.6	Do visits usually start and finish on time?	n=81	27%		27%	46%	27%
8.7	Are your visitors usually treated respectfully by staff?	n=79	73%		73%	73%	73%

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

Number of completed questionnaires returned

HMP / YOI Chelmsford 2018	All other local prisons	HMP / YOI Chelmsford 2018	All other local prisons surveyed since September 2017	HMP / YOI Chelmsford 2018	HMP / YOI Chelmsford 2016
155	5,925	155	1,956	155	180

n=number of valid responses to question (HMP / YOI Chelmsford 2018)

TIME OUT OF CELL								
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=146	75%		75%	81%	75%	
<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=110	46%		46%	49%	46%	
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	n=146	51%	32%	51%	37%	51%	28%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	n=146	3%	7%	3%	5%	3%	8%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=146	73%		73%	53%	73%	
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=146	1%		1%	1%	1%	
9.4	Do you have time to do domestics more than 5 days in a typical week?	n=145	39%		39%	40%	39%	
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=146	58%		58%	40%	58%	
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=147	54%		54%	46%	54%	
9.7	Do you typically go to the gym twice a week or more?	n=148	37%		37%	36%	37%	
9.8	Do you typically go to the library twice a week or more?	n=147	5%	7%	5%	11%	5%	6%
<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=91	54%	55%	54%	57%	54%	54%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS								
10.1	Is it easy for you to make an application?	n=147	62%	70%	62%	68%	62%	72%
<i>For those who have made an application:</i>								
10.2	Are applications usually dealt with fairly?	n=119	48%	46%	48%	46%	48%	48%
	Are applications usually dealt with within 7 days?	n=113	24%	32%	24%	30%	24%	22%
10.3	Is it easy for you to make a complaint?	n=147	54%	50%	54%	54%	54%	45%
<i>For those who have made a complaint:</i>								
10.4	Are complaints usually dealt with fairly?	n=81	36%	26%	36%	27%	36%	24%
	Are complaints usually dealt with within 7 days?	n=76	18%	21%	18%	19%	18%	21%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=106	23%		23%	30%	23%	
<i>For those who need it, is it easy to:</i>								
10.6	Communicate with your solicitor or legal representative?	n=121	47%		47%	39%	47%	
	Attend legal visits?	n=119	58%		58%	56%	58%	
	Get bail information?	n=103	20%		20%	15%	20%	
<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=124	39%	49%	39%	51%	39%	46%

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

Number of completed questionnaires returned

n=number of valid responses to question (HMP / YOI Chelmsford 2018)

HMP / YOI Chelmsford 2018	All other local prisons	HMP / YOI Chelmsford 2018	All other local prisons surveyed since September 2017	HMP / YOI Chelmsford 2018	HMP / YOI Chelmsford 2016
155	5,925	155	1,956	155	180

HEALTH CARE							
11.1	Is it very / quite easy to see:						
	- Doctor?	n=144	14%		14%	24%	14%
	- Nurse?	n=144	33%		33%	48%	33%
	- Dentist?	n=145	3%		3%	11%	3%
	- Mental health workers?	n=143	18%		18%	19%	18%
11.2	Do you think the quality of the health service is very / quite good from:						
	- Doctor?	n=144	26%		26%	40%	26%
	- Nurse?	n=142	47%		47%	51%	47%
	- Dentist?	n=142	16%		16%	25%	16%
	- Mental health workers?	n=134	20%		20%	24%	20%
11.3	Do you have any mental health problems?	n=145	52%		52%	49%	52%
	<i>For those who have mental health problems:</i>						
11.4	Have you been helped with your mental health problems in this prison?	n=68	34%		34%	34%	34%
11.5	Do you think the overall quality of the health services here is very / quite good?	n=142	25%		25%	34%	25%
OTHER SUPPORT NEEDS							
12.1	Do you consider yourself to have a disability?	n=146	40%	34%	40%	40%	40%
	<i>For those who have a disability:</i>						
12.2	Are you getting the support you need?	n=51	28%		28%	25%	28%
12.3	Have you been on an ACCT in this prison?	n=142	28%		28%	23%	28%
	<i>For those who have been on an ACCT:</i>						
12.4	Did you feel cared for by staff?	n=39	59%		59%	46%	59%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=143	54%		54%	47%	54%
ALCOHOL AND DRUGS							
13.1	Did you have an alcohol problem when you came into this prison?	n=145	21%	22%	21%	23%	21%
	<i>For those who had / have an alcohol problem:</i>						
13.2	Have you been helped with your alcohol problem in this prison?	n=28	57%	55%	57%	61%	57%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=142	35%	36%	35%	34%	35%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=144	15%	13%	15%	16%	15%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=143	8%		8%	12%	8%
	<i>For those who had / have a drug problem:</i>						
13.6	Have you been helped with your drug problem in this prison?	n=55	55%	54%	55%	49%	55%

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

Number of completed questionnaires returned

n=number of valid responses to question (HMP / YOI Chelmsford 2018)

HMP / YOI Chelmsford 2018	All other local prisons	HMP / YOI Chelmsford 2018	All other local prisons surveyed since September 2017	HMP / YOI Chelmsford 2018	HMP / YOI Chelmsford 2016
155	5,925	155	1,956	155	180

13.7	Is it very / quite easy to get illicit drugs in this prison?	<i>n=141</i>	43%		43%	50%	43%	
13.8	Is it very / quite easy to get alcohol in this prison?	<i>n=140</i>	19%		19%	26%	19%	
SAFETY								
14.1	Have you ever felt unsafe here?	<i>n=146</i>	47%	55%	47%	60%	47%	50%
14.2	Do you feel unsafe now?	<i>n=143</i>	21%	26%	21%	28%	21%	20%
14.3	Have you experienced any of the following from other prisoners here:							
	- Verbal abuse?	<i>n=137</i>	31%		31%	39%	31%	
	- Threats or intimidation?	<i>n=137</i>	25%		25%	35%	25%	
	- Physical assault?	<i>n=137</i>	20%		20%	20%	20%	
	- Sexual assault?	<i>n=137</i>	2%		2%	2%	2%	
	- Theft of canteen or property?	<i>n=137</i>	20%		20%	30%	20%	
	- Other bullying / victimisation?	<i>n=137</i>	18%		18%	20%	18%	
	- Not experienced any of these from prisoners here	<i>n=137</i>	58%	62%	58%	47%	58%	67%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<i>n=141</i>	33%		33%	35%	33%	
14.5	Have you experienced any of the following from staff here:							
	- Verbal abuse?	<i>n=137</i>	21%		21%	35%	21%	
	- Threats or intimidation?	<i>n=137</i>	17%		17%	26%	17%	
	- Physical assault?	<i>n=137</i>	10%		10%	14%	10%	
	- Sexual assault?	<i>n=137</i>	0%		0%	2%	0%	
	- Theft of canteen or property?	<i>n=137</i>	4%		4%	11%	4%	
	- Other bullying / victimisation?	<i>n=137</i>	7%		7%	18%	7%	
	- Not experienced any of these from staff here	<i>n=137</i>	66%	64%	66%	55%	66%	65%
14.6	If you were being bullied / victimised by staff here, would you report it?	<i>n=141</i>	48%		48%	46%	48%	
BEHAVIOUR MANAGEMENT								
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<i>n=144</i>	40%		40%	38%	40%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<i>n=139</i>	40%		40%	34%	40%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<i>n=142</i>	18%	13%	18%	14%	18%	11%
<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=24</i>	29%		29%	19%	29%	

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

Number of completed questionnaires returned

n=number of valid responses to question (HMP / YOI Chelmsford 2018)

		HMP / YOI Chelmsford 2018	All other local prisons	HMP / YOI Chelmsford 2018	All other local prisons surveyed since September 2017	HMP / YOI Chelmsford 2018	HMP / YOI Chelmsford 2016
		155	5,925	155	1,956	155	180
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months? <i>n=140</i>	10%	17%	10%	9%	10%	16%
<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=11</i>	73%		73%	53%	73%	
	Could you shower every day? <i>n=11</i>	82%		82%	46%	82%	
	Could you go outside for exercise every day? <i>n=12</i>	75%		75%	54%	75%	
	Could you use the phone every day (if you had credit)? <i>n=11</i>	82%		82%	42%	82%	
EDUCATION, SKILLS AND WORK							
16.1	In this prison, is it easy to get into the following activities:						
	- Education? <i>n=135</i>	55%		55%	50%	55%	
	- Vocational or skills training? <i>n=130</i>	22%		22%	25%	22%	
	- Prison job? <i>n=135</i>	24%		24%	31%	24%	
	- Voluntary work outside of the prison? <i>n=128</i>	6%		6%	3%	6%	
- Paid work outside of the prison? <i>n=131</i>	4%		4%	4%	4%		
16.2	In this prison, have you done the following activities:						
	- Education? <i>n=131</i>	67%	68%	67%	72%	67%	65%
	- Vocational or skills training? <i>n=124</i>	45%	55%	45%	55%	45%	47%
	- Prison job? <i>n=125</i>	62%	72%	62%	70%	62%	71%
	- Voluntary work outside of the prison? <i>n=123</i>	29%		29%	31%	29%	
- Paid work outside of the prison? <i>n=123</i>	29%		29%	31%	29%		
<i>For those who have done the following activities, do you think they will help you on release:</i>							
	- Education? <i>n=88</i>	64%	50%	64%	57%	64%	49%
	- Vocational or skills training? <i>n=56</i>	75%	45%	75%	56%	75%	40%
	- Prison job? <i>n=78</i>	51%	39%	51%	42%	51%	45%
	- Voluntary work outside of the prison? <i>n=35</i>	69%		69%	48%	69%	
	- Paid work outside of the prison? <i>n=35</i>	69%		69%	55%	69%	
16.3	Do staff encourage you to attend education, training or work? <i>n=126</i>	42%		42%	44%	42%	

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

Number of completed questionnaires returned

HMP / YOI Chelmsford 2018	All other local prisons	HMP / YOI Chelmsford 2018	All other local prisons surveyed since September 2017	HMP / YOI Chelmsford 2018	HMP / YOI Chelmsford 2016
155	5,925	155	1,956	155	180

n=number of valid responses to question (HMP / YOI Chelmsford 2018)

PLANNING AND PROGRESSION								
17.1	Do you have a custody plan?	n=140	25%		25%	26%	25%	
<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=35	89%		89%	76%	89%	
17.3	Are staff helping you to achieve your objectives or targets?	n=33	52%		52%	43%	52%	
17.4	In this prison, have you done:							
	- Offending behaviour programmes?	n=28	39%		39%	43%	39%	
	- Other programmes?	n=29	41%		41%	42%	41%	
	- One to one work?	n=28	32%		32%	36%	32%	
	- Been on a specialist unit?	n=27	26%		26%	21%	26%	
	- ROTL - day or overnight release?	n=27	22%		22%	16%	22%	
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>								
	- Offending behaviour programmes?	n=11	91%		91%	68%	91%	
	- Other programmes?	n=12	75%		75%	65%	75%	
	- One to one work?	n=9	89%		89%	64%	89%	
	- Being on a specialist unit?	n=7	71%		71%	46%	71%	
	- ROTL - day or overnight release?	n=6	83%		83%	45%	83%	
PREPARATION FOR RELEASE								
18.1	Do you expect to be released in the next 3 months?	n=143	35%		35%	32%	35%	
<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=48	77%		77%	59%	77%	
18.3	Is anybody helping you to prepare for your release?	n=49	43%		43%	44%	43%	
18.4	Do you need help to sort out the following for when you are released:							
	- Finding accommodation?	n=48	67%		67%	64%	67%	
	- Getting employment?	n=47	51%		51%	60%	51%	
	- Setting up education or training?	n=44	41%		41%	48%	41%	
	- Arranging benefits?	n=44	61%		61%	66%	61%	
	- Sorting out finances?	n=42	52%		52%	55%	52%	
	- Support for drug or alcohol problems?	n=43	51%		51%	51%	51%	
	- Health / mental Health support?	n=44	48%		48%	59%	48%	
	- Social care support?	n=42	45%		45%	41%	45%	
	- Getting back in touch with family or friends?	n=42	43%		43%	41%	43%	

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

Number of completed questionnaires returned

n=number of valid responses to question (HMP / YOI Chelmsford 2018)

HMP / YOI Chelmsford 2018	All other local prisons	HMP / YOI Chelmsford 2018	All other local prisons surveyed since September 2017	HMP / YOI Chelmsford 2018	HMP / YOI Chelmsford 2016
155	5,925	155	1,956	155	180

		HMP / YOI Chelmsford 2018		All other local prisons		HMP / YOI Chelmsford 2018		All other local prisons surveyed since September 2017		HMP / YOI Chelmsford 2018		HMP / YOI Chelmsford 2016	
18.4	Are you getting help to sort out the following for when you are released, if you need it:												
	- Finding accommodation?	<i>n=32</i>	22%		22%	29%	22%			22%			
	- Getting employment?	<i>n=24</i>	21%		21%	20%	21%			21%			
	- Setting up education or training?	<i>n=18</i>	22%		22%	15%	22%			22%			
	- Arranging benefits?	<i>n=27</i>	33%		33%	23%	33%			33%			
	- Sorting out finances?	<i>n=22</i>	18%		18%	17%	18%			18%			
	- Support for drug or alcohol problems?	<i>n=22</i>	36%		36%	43%	36%			36%			
	- Health / mental Health support?	<i>n=21</i>	24%		24%	22%	24%			24%			
	- Social care support?	<i>n=19</i>	21%		21%	16%	21%			21%			
- Getting back in touch with family or friends?	<i>n=18</i>	33%		33%	24%	33%			33%				
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?	<i>n=141</i>	50%		50%	48%	50%			50%			

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

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

	Green shading shows results that are significantly more positive than the comparator
	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

Number of completed questionnaires returned

Black and minority ethnic	White
39	113

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	10%	8%
	Are you 50 years of age or older?	3%	20%
7.1	Are you Muslim?	21%	1%
11.3	Do you have any mental health problems?	32%	59%
12.1	Do you consider yourself to have a disability?	31%	43%
19.2	Are you a foreign national?	8%	4%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	5%	9%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	77%	85%
2.4	Overall, were you treated very / quite well in reception?	77%	80%
2.5	When you first arrived, did you have any problems?	80%	86%
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	26%	28%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	69%	77%
3.5	Have you had an induction at this prison?	87%	86%
<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	52%	58%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	10%	23%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	50%	50%
	- Can you shower every day?	82%	79%
	- Do you have clean sheets every week?	40%	51%
	- Do you get cell cleaning materials every week?	53%	44%
	- Is it normally quiet enough for you to relax or sleep at night?	57%	59%
	- Can you get your stored property if you need it?	17%	23%

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

Black and minority ethnic	White
39	113

Number of completed questionnaires returned

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	21%	28%
5.3	Does the shop / canteen sell the things that you need?	44%	66%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	59%	81%
6.2	Are there any staff here you could turn to if you had a problem?	74%	81%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	40%	33%
6.6	Do you feel that you are treated as an individual in this prison?	42%	46%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	71%	84%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	63%	66%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	18%	30%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	51%	56%
8.3	Are you able to use a phone every day (if you have credit)?	92%	87%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	71%	75%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	46%	54%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	5%	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?	32%	61%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	54%	64%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	33%	53%
10.3	Is it easy for you to make a complaint?	47%	57%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	8%	48%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	37%	18%

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

Black and minority ethnic	White
39	113

Number of completed questionnaires returned

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	11%	14%
	- Nurse?	28%	34%
	- Dentist?	3%	3%
	- Mental health workers?	19%	18%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	46%	32%
11.5	Do you think the overall quality of the health services here is very / quite good?	22%	26%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	50%	23%
SAFETY			
14.1	Have you ever felt unsafe here?	51%	47%
14.2	Do you feel unsafe now?	25%	20%
14.3	Not experienced bullying / victimisation by other prisoners	64%	56%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	27%	35%
14.5	Not experienced bullying / victimisation by members of staff	55%	70%
14.6	If you were being bullied / victimised by staff here, would you report it?	42%	49%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	47%	37%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	43%	38%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	25%	15%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	17%	8%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	42%	42%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	27%	25%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	60%	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?	42%	44%
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?	56%	47%

HMP / YOI Chelmsford 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.

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

Number of completed questionnaires returned

Mental health problems	No mental health problems	Have a disability	Do not have a disability
75	70	58	88

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	5%	10%	9%	7%
	Are you 50 years of age or older?	14%	19%	23%	12%
1.3	Are you from a minority ethnic group?	16%	37%	19%	29%
7.1	Are you Muslim?	5%	9%	3%	8%
11.3	Do you have any mental health problems?			79%	33%
12.1	Do you consider yourself to have a disability?	62%	17%		
19.2	Are you a foreign national?	1%	9%	5%	5%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	11%	6%	11%	7%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	84%	83%	74%	90%
2.4	Overall, were you treated very / quite well in reception?	81%	79%	82%	78%
2.5	When you first arrived, did you have any problems?	92%	76%	91%	80%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	31%	21%	24%	31%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	69%	81%	72%	78%
3.5	Have you had an induction at this prison?	88%	87%	83%	90%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	44%	69%	49%	62%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	23%	16%	23%	19%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	46%	52%	50%	49%
	- Can you shower every day?	75%	85%	77%	82%
	- Do you have clean sheets every week?	44%	50%	38%	54%
	- Do you get cell cleaning materials every week?	38%	53%	46%	46%
	- Is it normally quiet enough for you to relax or sleep at night?	51%	64%	54%	59%
	- Can you get your stored property if you need it?	24%	17%	26%	17%

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

Number of completed questionnaires returned

	Mental health problems	No mental health problems		
	75	70	Have a disability	Do not have a disability
			58	88

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	22%	28%	25%	26%
5.3	Does the shop / canteen sell the things that you need?	60%	63%	57%	65%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	81%	73%	74%	78%
6.2	Are there any staff here you could turn to if you had a problem?	81%	78%	81%	80%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	36%	31%	40%	31%
6.6	Do you feel that you are treated as an individual in this prison?	47%	43%	50%	42%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	81%	76%	76%	81%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	64%	68%	68%	64%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	22%	30%	19%	31%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	55%	57%	59%	53%
8.3	Are you able to use a phone every day (if you have credit)?	82%	94%	84%	91%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	68%	79%	75%	75%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	57%	48%	61%	47%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	3%	5%	1%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	59%	48%	55%	51%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	62%	60%	57%	64%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	52%	41%	42%	51%
10.3	Is it easy for you to make a complaint?	54%	53%	53%	54%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	38%	29%	31%	38%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	20%	23%	25%	21%

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

Number of completed questionnaires returned

	Mental health problems	No mental health problems	Have a disability	Do not have a disability
	75	70	58	88

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	14%	15%	16%	13%
	- Nurse?	39%	28%	39%	30%
	- Dentist?	1%	4%	4%	2%
	- Mental health workers?	22%	15%	25%	14%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	32%		35%	33%
11.5	Do you think the overall quality of the health services here is very / quite good?	26%	22%	29%	23%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	27%	30%	28%	
SAFETY					
14.1	Have you ever felt unsafe here?	56%	38%	52%	43%
14.2	Do you feel unsafe now?	21%	22%	17%	24%
14.3	Not experienced bullying / victimisation by other prisoners	52%	66%	57%	59%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	29%	38%	31%	34%
14.5	Not experienced bullying / victimisation by members of staff	67%	64%	59%	70%
14.6	If you were being bullied / victimised by staff here, would you report it?	43%	52%	50%	46%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	38%	41%	39%	40%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	40%	40%	35%	42%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	16%	19%	23%	14%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	10%	10%	13%	8%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	45%	39%	38%	45%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	26%	23%	25%	26%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	50%	56%	55%	50%
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?	41%	46%	50%	35%
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?	44%	57%	44%	55%

HMP / YOI Chelmsford 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:

	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

Number of completed questionnaires returned

		25 and under		Over 25	
		39		113	
		50 and over		Under 50	
		23		129	

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.3	Are you from a minority ethnic group?	39%	21%	4%	30%
7.1	Are you Muslim?	11%	6%	0%	8%
11.3	Do you have any mental health problems?	39%	56%	44%	53%
12.1	Do you consider yourself to have a disability?	29%	43%	57%	36%
19.2	Are you a foreign national?	8%	4%	4%	5%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	11%	7%	0%	9%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	72%	86%	91%	81%
2.4	Overall, were you treated very / quite well in reception?	72%	81%	96%	75%
2.5	When you first arrived, did you have any problems?	85%	84%	70%	87%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	19%	29%	27%	26%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	74%	76%	73%	76%
3.5	Have you had an induction at this prison?	87%	86%	87%	86%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	56%	56%	55%	56%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	13%	22%	29%	18%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	53%	50%	61%	48%
	- Can you shower every day?	83%	79%	77%	80%
	- Do you have clean sheets every week?	43%	50%	46%	48%
	- Do you get cell cleaning materials every week?	47%	46%	46%	47%
	- Is it normally quiet enough for you to relax or sleep at night?	46%	61%	77%	54%
	- Can you get your stored property if you need it?	21%	21%	15%	22%

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

Number of completed questionnaires returned

	25 and under	Over 25	50 and over	Under 50
	39	113	23	129

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	14%	30%	48%	22%
5.3	Does the shop / canteen sell the things that you need?	57%	61%	74%	57%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	58%	80%	91%	72%
6.2	Are there any staff here you could turn to if you had a problem?	69%	82%	91%	76%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	42%	32%	30%	35%
6.6	Do you feel that you are treated as an individual in this prison?	46%	44%	42%	45%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	64%	85%	94%	76%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	68%	64%	75%	64%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	23%	27%	22%	27%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	61%	53%	36%	59%
8.3	Are you able to use a phone every day (if you have credit)?	83%	90%	87%	88%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	75%	72%	89%	71%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	69%	45%	35%	54%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	0%	4%	0%	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?	61%	50%	57%	51%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	49%	65%	81%	58%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	38%	51%	63%	44%
10.3	Is it easy for you to make a complaint?	43%	57%	68%	51%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	20%	41%	50%	34%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	23%	23%	7%	26%

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

Number of completed questionnaires returned

		25 and under	Over 25
		39	113
		50 and over	Under 50
		23	129

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	17%	13%	14%	14%
	- Nurse?	22%	37%	27%	34%
	- Dentist?	6%	2%	0%	3%
	- Mental health workers?	25%	15%	10%	19%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	46%	31%	29%	34%
11.5	Do you think the overall quality of the health services here is very / quite good?	23%	26%	23%	25%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	50%	24%	27%	28%
SAFETY					
14.1	Have you ever felt unsafe here?	49%	48%	52%	47%
14.2	Do you feel unsafe now?	20%	22%	22%	21%
14.3	Not experienced bullying / victimisation by other prisoners	66%	57%	61%	58%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	12%	40%	48%	31%
14.5	Not experienced bullying / victimisation by members of staff	59%	68%	86%	62%
14.6	If you were being bullied / victimised by staff here, would you report it?	29%	53%	62%	45%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	29%	43%	46%	38%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	20%	45%	29%	41%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	37%	11%	5%	20%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	12%	10%	0%	12%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	33%	45%	44%	42%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	21%	27%	29%	25%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	57%	50%	40%	54%
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?	36%	46%	50%	43%
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?	54%	48%	41%	51%

HMP / YOI Chelmsford 2018

Comparison of survey responses from different residential locations

In this table responses from prisoners in the old accommodation (A, B, C and D wings) are compared with responses of prisoners living in the new accommodation (E, F and G wings).

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

Number of completed questionnaires returned

Old accommodation	New accommodation
66	88

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	14%	5%
	Are you 25 years of age or younger?	40%	15%
	Are you 50 years of age or older?	5%	23%
	Are you 70 years of age or older?	0%	0%
1.3	Are you from a minority ethnic group?	38%	17%
1.4	Have you been in this prison for less than 6 months?	48%	74%
1.5	Are you currently serving a sentence?	71%	64%
	Are you on recall?	6%	10%
1.6	Is your sentence less than 12 months?	17%	29%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	2%	1%
7.1	Are you Muslim?	10%	5%
11.3	Do you have any mental health problems?	40%	61%
12.1	Do you consider yourself to have a disability?	28%	47%
19.1	Do you have any children under the age of 18?	55%	55%
19.2	Are you a foreign national?	5%	5%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	10%	7%
19.4	Have you ever been in the armed services?	3%	11%
19.5	Is your gender female or non-binary?	5%	0%
19.6	Are you homosexual, bisexual or other sexual orientation?	7%	0%
19.7	Do you identify as transgender or transsexual?	7%	1%

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

Number of completed questionnaires returned

	Old accommodation	New accommodation
Number of completed questionnaires returned	66	88

ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	11%	14%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	39%	35%
2.3	When you were searched in reception, was this done in a respectful way?	80%	83%
2.4	Overall, were you treated very / quite well in reception?	68%	86%
2.5	When you first arrived, did you have any problems?	82%	86%
2.5	Did you have problems with:		
	- Getting phone numbers?	35%	36%
	- Contacting family?	42%	46%
	- Arranging care for children or other dependents?	5%	3%
	- Contacting employers?	8%	6%
	- Money worries?	26%	25%
	- Housing worries?	17%	27%
	- Feeling depressed?	41%	49%
	- Feeling suicidal?	15%	17%
	- Other mental health problems?	20%	34%
	- Physical health problems?	17%	23%
	- Drugs or alcohol (e.g. withdrawal)?	9%	28%
	- Getting medication?	23%	28%
- Needing protection from other prisoners?	14%	9%	
- Lost or delayed property?	21%	21%	
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	26%	28%
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	75%	78%
	- Toiletries / other basic items?	39%	49%
	- A shower?	9%	8%
	- A free phone call?	34%	33%
	- Something to eat?	69%	77%
	- The chance to see someone from health care?	56%	67%
	- The chance to talk to a Listener or Samaritans?	22%	21%
	- Support from another prisoner (e.g. Insider or buddy)?	22%	27%
- None of these?	6%	2%	
3.2	On your first night in this prison, was your cell very / quite clean?	26%	24%

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

Number of completed questionnaires returned

	Old accommodation	New accommodation
Number of completed questionnaires returned	66	88

3.3	Did you feel safe on your first night here?	77%	74%
3.4	In your first few days here, did you get?		
	- Access to the prison shop / canteen?	27%	28%
	- Free PIN phone credit?	72%	66%
	- Numbers put on your PIN phone?	28%	27%
3.5	Have you had an induction at this prison?	87%	87%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	58%	56%
ON THE WING			
4.1	Are you in a cell on your own?	31%	58%
4.2	Is your cell call bell normally answered within 5 minutes?	14%	23%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	48%	51%
	- Can you shower every day?	75%	84%
	- Do you have clean sheets every week?	46%	49%
	- Do you get cell cleaning materials every week?	40%	51%
	- Is it normally quiet enough for you to relax or sleep at night?	46%	66%
	- Can you get your stored property if you need it?	17%	23%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	65%	73%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	25%	43%
5.2	Do you get enough to eat at meal-times always / most of the time?	27%	26%
5.3	Does the shop / canteen sell the things that you need?	47%	70%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	67%	81%
6.2	Are there any staff here you could turn to if you had a problem?	71%	84%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	40%	31%
6.4	Do you have a personal officer?	66%	49%
	<i>For those who have a personal officer:</i>		
6.4	Is your personal or named officer very / quite helpful?	54%	45%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	7%	8%
6.6	Do you feel that you are treated as an individual in this prison?	47%	44%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	50%	34%
	If so, do things sometimes change?	39%	35%

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

	Old accommodation	New accommodation
Number of completed questionnaires returned	66	88

FAITH			
7.1	Do you have a religion?	73%	68%
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	73%	84%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	62%	69%
7.4	Are you able to attend religious services, if you want to?	84%	93%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	35%	21%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	58%	54%
8.3	Are you able to use a phone every day (if you have credit)?	87%	89%
8.4	Is it very / quite easy for your family and friends to get here?	46%	48%
8.5	Do you get visits from family/friends once a week or more?	20%	20%
<i>For those who get visits:</i>			
8.6	Do visits usually start and finish on time?	22%	31%
8.7	Are your visitors usually treated respectfully by staff?	69%	77%
TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	80%	72%
<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?	29%	57%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	53%	50%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	5%	1%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	75%	71%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	0%	1%
9.4	Do you have time to do domestics more than 5 days in a typical week?	35%	42%
9.5	Do you get association more than 5 days in a typical week, if you want it?	62%	55%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	60%	51%
9.7	Do you typically go to the gym twice a week or more?	45%	31%
9.8	Do you typically go to the library twice a week or more?	5%	5%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	55%	54%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	57%	66%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	48%	47%
	Are applications usually dealt with within 7 days?	22%	24%

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

	Old accommodation	New accommodation
Number of completed questionnaires returned	66	88

10.3	Is it easy for you to make a complaint?	49%	58%
	<i>For those who have made a complaint:</i>		
10.4	Are complaints usually dealt with fairly?	21%	48%
	Are complaints usually dealt with within 7 days?	11%	26%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	27%	18%
	<i>For those who need it, is it easy to:</i>		
10.6	Communicate with your solicitor or legal representative?	52%	43%
	Attend legal visits?	60%	57%
	Get bail information?	23%	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?	40%	37%
HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	12%	14%
	- Nurse?	28%	37%
	- Dentist?	3%	2%
	- Mental health workers?	21%	16%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	24%	27%
	- Nurse?	39%	52%
	- Dentist?	17%	13%
	- Mental health workers?	23%	19%
11.3	Do you have any mental health problems?	40%	61%
	<i>For those who have mental health problems:</i>		
11.4	Have you been helped with your mental health problems in this prison?	36%	33%
11.5	Do you think the overall quality of the health services here is very / quite good?	21%	27%
OTHER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	28%	47%
	<i>For those who have a disability:</i>		
12.2	Are you getting the support you need?	33%	26%
12.3	Have you been on an ACCT in this prison?	20%	35%
	<i>For those who have been on an ACCT:</i>		
12.4	Did you feel cared for by staff?	75%	52%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	41%	64%

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

Number of completed questionnaires returned

	Old accommodation	New accommodation
Number of completed questionnaires returned	66	88

ALCOHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	12%	28%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	50%	59%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	21%	44%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	14%	17%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	3%	10%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	33%	64%
13.7	Is it very / quite easy to get illicit drugs in this prison?	42%	44%
13.8	Is it very / quite easy to get alcohol in this prison?	22%	16%
SAFETY			
14.1	Have you ever felt unsafe here?	51%	45%
14.2	Do you feel unsafe now?	22%	21%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	40%	24%
	- Threats or intimidation?	32%	20%
	- Physical assault?	28%	15%
	- Sexual assault?	4%	1%
	- Theft of canteen or property?	23%	19%
	- Other bullying / victimisation?	19%	18%
	- Not experienced any of these from prisoners here	53%	62%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	31%	33%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	26%	18%
	- Threats or intimidation?	23%	13%
	- Physical assault?	14%	6%
	- Sexual assault?	0%	0%
	- Theft of canteen or property?	5%	4%
	- Other bullying / victimisation?	9%	5%
	- Not experienced any of these from staff here	61%	70%
14.6	If you were being bullied / victimised by staff here, would you report it?	41%	51%

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

Old accommodation	New accommodation
66	88

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?	32%	45%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	37%	42%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	27%	11%
<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?	29%	30%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	19%	2%
<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?	78%	100%
	Could you shower every day?	89%	100%
	Could you go outside for exercise every day?	89%	50%
	Could you use the phone every day (if you had credit)?	89%	100%
EDUCATION, SKILLS AND WORK			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	51%	58%
	- Vocational or skills training?	15%	28%
	- Prison job?	22%	26%
	- Voluntary work outside of the prison?	7%	4%
16.2	- Paid work outside of the prison?	4%	4%
	In this prison, have you done the following activities:		
	- Education?	67%	67%
	- Vocational or skills training?	43%	46%
	- Prison job?	69%	57%
	- Voluntary work outside of the prison?	31%	26%
	- Paid work outside of the prison?	31%	25%
<i>For those who have done the following activities, do you think they will help you on release:</i>			
	- Education?	58%	67%
	- Vocational or skills training?	83%	72%
	- Prison job?	47%	54%
	- Voluntary work outside of the prison?	69%	67%
	- Paid work outside of the prison?	63%	72%
16.3	Do staff encourage you to attend education, training or work?	42%	42%

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

	Old accommodation	New accommodation
Number of completed questionnaires returned	66	88

PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	25%	24%
<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?	87%	95%
17.3	Are staff helping you to achieve your objectives or targets?	47%	59%
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	25%	47%
	- Other programmes?	21%	57%
	- One to one work?	15%	43%
	- Been on a specialist unit?	15%	31%
	- ROTL - day or overnight release?	8%	31%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>			
	- Offending behaviour programmes?	100%	86%
	- Other programmes?	67%	88%
	- One to one work?	100%	83%
	- Being on a specialist unit?	100%	75%
	- ROTL - day or overnight release?	100%	75%
PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	22%	43%
<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?	69%	79%
18.3	Is anybody helping you to prepare for your release?	54%	40%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	62%	68%
	- Getting employment?	50%	50%
	- Setting up education or training?	46%	37%
	- Arranging benefits?	69%	57%
	- Sorting out finances?	67%	45%
	- Support for drug or alcohol problems?	33%	57%
	- Health / mental Health support?	46%	47%
	- Social care support?	54%	39%
	- Getting back in touch with family or friends?	33%	45%

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

	Old accommodation	New accommodation
Number of completed questionnaires returned	66	88

18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	25%	22%
	- Getting employment?	33%	18%
	- Setting up education or training?	33%	18%
	- Arranging benefits?	44%	29%
	- Sorting out finances?	38%	8%
	- Support for drug or alcohol problems?	50%	35%
	- Health / mental Health support?	17%	29%
	- Social care support?	29%	18%
	- Getting back in touch with family or friends?	50%	31%
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?	55%	46%