

Report on an unannounced inspection of

HMP Ranby

by HM Chief Inspector of Prisons

4–15 June 2018

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Glossary of terms

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

Introduction

HMP Ranby is a category C training and resettlement prison located in Nottinghamshire. Holding around 1,000 men, the prison is spread over a large internal campus within a very long perimeter in an otherwise rural setting. All men held were convicted and represented the full range of offences – with very few sex offenders – and sentences, although the majority were serving between two and 10 years. We last inspected HMP Ranby in 2014, followed by a very early return in 2015. At the time we had very significant concerns for the establishment, which we considered unsafe and in a state of crisis, and which we thought at the time was in danger of being overwhelmed by illegal drugs.

We did discern some improvement in 2015, but at this inspection our findings were much more encouraging. It was clear to us that a significant amount of work had been undertaken to improve the establishment across a range of issues, and this was reflected in the improved assessments we were able to make. An example of this was in the assessment we made in the area of safety. In 2015 we considered outcomes for prisoners to be poor. They had improved but remained insufficient, despite the very considerable initiative on the part of managers and staff to try to make the prison safer.

New prisoners were generally received well into the establishment. In our survey, about a fifth of prisoners still felt unsafe but this was now more broadly reflective of perceptions in similar prisons. Recorded violence had increased marginally but most of it, with a few exceptions, was minor. Again, levels of violence now reflected more closely those in other similar prisons. As before, much of the violence was related to drugs and associated debt. Testing indicated that drug usage remained high, at about 28%, and nearly two-thirds of prisoners thought drugs were easy to obtain in the prison.

Balanced against this, the prison had a very good understanding of the challenges it faced and significant efforts were being undertaken to target anti-social behaviour. The management of intelligence was good, the prison had implemented measures to combat the drugs problem and work to incentivise positive behaviour had started. There were early signs that these initiatives were beginning to be effective. In our main recommendations we encourage and support the continuation of this vital work.

In light of the levels of violence and drug use, there was a continuing need to use formal disciplinary procedures frequently and use of force had almost doubled. We were, however, satisfied that supervision and oversight of these procedures were good and were features of the prison's work to combat delinquency. By way of contrast, few prisoners were being segregated.

Since we last inspected, one prisoner had taken their own life. The prison was working towards the implementation of recommendations following formal investigation of this incident by the Prisons and Probation Ombudsman (PPO), but more needed to be done to ensure cell bells were answered in a timely manner. Self-harm was increasing in the prison, with evidence that this was again linked to drug and debt issues. The assessment, care in custody and teamwork (ACCT) case management of those in crisis was too inconsistent and often poor, but the individuals we spoke to felt cared for. We considered the need to improve case management arrangements of sufficient importance to be included as one of our main recommendations.

Staff-prisoner relationships were good and most prisoners felt respected. It was clear that prisoners held on the prison's smaller units were receiving better attention than those on the busier, larger wings, where the lack of any form of key worker arrangement was an omission. The development of collaborative 'enabling environments' on some of the wings seemed to us to be a useful and encouraging initiative, although their effectiveness had yet to be fully assessed.

Living conditions and the general environment remained good and in places had improved. There remained, however, some overcrowding in some cells. Prisoners were more positive about the food, and the ability to access the prison shop on the day of arrival was a simple but important means of

mitigating the risk of debt, with all its consequences for intimidation. Consultation with prisoners was reasonably good, although more could be done to improve the applications systems and, consequently, the complaints system.

Outcomes for those with protected characteristics were reasonable overall but more needed to be done for younger prisoners and to ensure those with disabilities were properly supported. Health care provision was generally very good, except for substance misuse services, which had deteriorated. Forty-two per cent of prisoners stated they arrived at Ranby with a drug problem, 21% claimed to have developed one while at the prison, and the negative influence of drugs pervaded experiences at Ranby, making the improvement of such services a priority.

The prison's daily routines were now more predictable and ran on time. Most men could have between nine and 10 hours unlocked and our roll checks found just 20% of the population locked up during the working day. While this latter figure was still not good enough, it was about half the number we found when we last inspected. There were sufficient work and education places for the population and the amount of vocational training had increased. Our colleagues in Ofsted found teaching and learning to be good, that productive links with employers were delivering useful outcomes and that achievement rates by learners were high. Ofsted assessed the overall effectiveness of provision to be 'good'.

The prison's function as a resettlement prison was not as good and evidenced serious shortcomings. The reducing reoffending strategy was not based on a needs analysis and lacked specificity. There was no action plan, so the measurement of progress and improvement to services was limited. Too many prisoners lacked an offender assessment system (OASys) assessment or sentence plan, despite many being high risk with imminent release dates, and access to supervisors was variable and reactive.

Public protection arrangements were similarly variable. Resettlement services for the approximately 80 prisoners released each month were better, with good work to support accommodation needs and effective work undertaken by the community rehabilitation company. Visits provision was reasonable but opportunities to better support family ties were missed.

HMP Ranby had proven to be a difficult prison to run and still had many problems to fix. The key priority remained undoubtedly the continuing battle against drugs, which undermined everything. But that was not the whole picture. The prison was well led by a competent and effective governor, supported by a capable senior team and staff group. We observed much good practice, and an openness to innovative ideas as well as an attention to detail. The governor had sought to attend to getting the basics right and in our view the prison had unquestionably improved. It is to be hoped that, if the team stay focused on this agenda, their hard work will soon begin to realise more clearly improved outcomes for prisoners.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

August 2018

Fact page

Task of the establishment

Ranby is a category C male adult training and resettlement prison.

Certified normal accommodation and operational capacity

Prisoners held at the time of inspection: 987

Baseline certified normal capacity: 892

In-use certified normal capacity: 892

Operational capacity: 1038

Notable features from this inspection

42% of prisoners said they had arrived with a drug problem and a further 21% said they had developed a drug problem at Ranby.

40% of prisoners were between the ages of 21 and 29.

30% of prisoners serving long sentences arrived with less than 12 months to serve.

149 prisoners were receiving methadone treatment.

55% of prisoners said they had mental health issues.

Prison status and key providers

Public

Physical and mental health and substance misuse provider: Nottinghamshire Healthcare NHS Foundation Trust

Learning and skills provider: Milton Keynes College

Community rehabilitation company (CRC): Derbyshire, Leicestershire, Nottinghamshire and Rutland CRC

Escort contractor: GEOAmey

Region

North Midlands

Brief history

Since opening as a prison in 1972, Ranby has regularly had its capacity increased, most recently in 2008 when further accommodation was built. Workshops, a new health care building, kitchen, library and education facilities were added. In May 2016, Ranby became one of six early adopter sites for autonomy, enabling the director of the East Midlands Prison Group to make their own business and financial decisions independently of the wider prison estate. HMP Ranby is now part of the North Midlands Prison Group.

Short description of residential units

House block 1: induction wing with single and double cells.

House block 2 North: a general wing; South: the drug intervention and drug recovery unit.

House block 3 North: a general wing; South: the 'enabling environment', where the regime was more relaxed and prisoners living there were expected to live more autonomously.

House block 4: Closed during the inspection to undergo a fire protection upgrade.

House block 5: Single cells for up to 192 lower risk and older prisoners and those working night shifts.

House blocks 6 and 7: Single and double occupancy cells with integral sanitation and showers for 60 enhanced and elderly prisoners on each wing.

Name of governor and date in post

Nigel Hirst – April 2016

Independent Monitoring Board chair

Howard Kelham

Date of last inspection

24–25 August, 1–4 and 7–11 September 2015

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

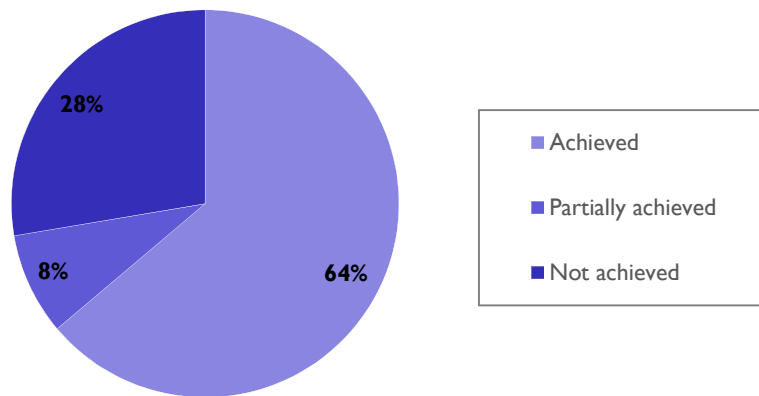
¹ <https://www.justiceinspectorates.gov.uk/hmiprisons/our-expectations/prison-expectations/>

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

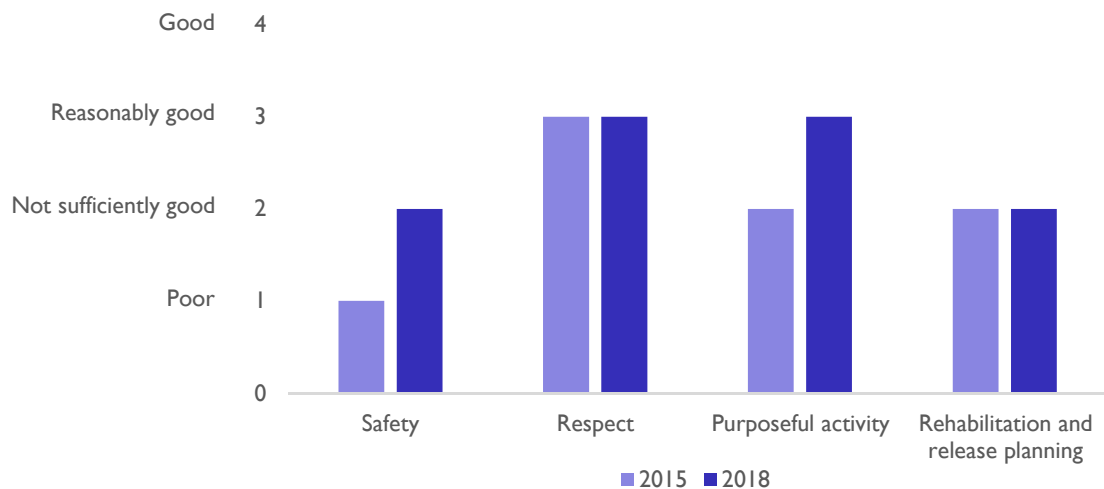
- S1 We last inspected HMP Ranby in 2015 and made 47 recommendations overall. The prison fully accepted 39 of the recommendations and partially (or subject to resources) accepted seven. It rejected one of the recommendations.
- S2 At this follow up inspection we found that the prison had achieved 30 of those recommendations, partially achieved four recommendations and not achieved 13 recommendations.

Figure 1: HMP Ranby progress on recommendations from last inspection (n=47)



- S3 Since our last inspection outcomes for prisoners stayed the same in Respect and Rehabilitation and release planning and improved in Safety and Purposeful activity. Outcomes were reasonably good for Respect and Purposeful activity; however, outcomes were not sufficiently good for Safety and Rehabilitation and release planning.

Figure 2: HMP Ranby healthy prison outcomes 2015 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** Reception and first night processes were good and prisoners were supported well. Despite a comprehensive violence reduction action plan, too many men still felt unsafe and experienced violence. Levels of violence were similar to other category C prisons and were often linked to drugs and debt. Force was used frequently, but managerial oversight was good. Segregation was used less frequently than previously, but the regime was poor. Security arrangements were good. Drugs, particularly new psychoactive substances (NPS)⁴ were easily available and had a detrimental impact across the prison. The prison had an impressive supply reduction strategy and action plan, and drugs were becoming less available. Levels of self-harm were relatively high. Prisoners at risk of self-harm felt they received good support, although assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm did not always demonstrate that they did. **Outcomes for prisoners were not sufficiently good against this healthy prison test.**
- S5** At the last inspection in 2015 we found that outcomes for prisoners in Ranby were poor against this healthy prison test. We made 10 recommendations in the area of safety.⁵ At this inspection we found that eight of the recommendations had been achieved and two had not been achieved.
- S6** Reception was bright and spacious. Staff and peer workers were welcoming and processes were reasonably swift. Staff undertook good safety assessments, which were conducted in private. First night arrangements were sound. Staff and peer workers provided a range of useful information. First night cells were fully equipped, but some cells were grubby. Induction was mostly reasonable, but too many prisoners missed some parts of it.
- S7** In our survey, 22% of prisoners said they felt unsafe, which was in line with similar prisons. Incidents of violence had increased marginally since the last inspection and now reflected those at similar prisons. Most assaults were relatively minor, although a few, including some against staff, had been serious. Much of the violence was related to drugs, particularly NPS and associated debt. Managers had a very good understanding of, and focus on, the causes of violence and antisocial behaviour and significant efforts had been made to address and reduce violence. A dynamic and effective weekly tactical violence reduction meeting reflected best practice. A small number of prisoners who felt unsafe chose to isolate themselves. The prison had a strategy and plan to identify and support them, but their regime was far too restricted and some required better oversight.
- S8** The prison was starting to develop schemes to promote good behaviour. The incentives and earned privileges (IEP) policy had been improved and provided men with greater incentives to progress, such as opportunities to move to better accommodation.
- S9** The number of adjudications was very high and almost twice that of the last inspection. Much of the increase was due to the level of violence and an increase in the use of drug tests and searches. Adjudications were overseen and monitored well and few failed to proceed or were dismissed. The recorded use of force was high and almost twice the level compared with the last inspection. Managerial oversight had improved and was good. Planned interventions were reviewed and scrutinised and staff focused well on de-escalation. Special accommodation was rarely used. Segregation was used much less frequently than at the last inspection and was comparatively low, but no routine monitoring took place to identify

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

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

trends. Work was underway to update and improve the cells, but the regime remained very poor.

- S10 Physical security was proportionate and there was a balance between maintaining an appropriate regime and the need to address drug trafficking and violence across the site. An excellent flow of information was promptly and effectively analysed and had led to some successful operations and outcomes.
- S11 The prison continued to face a considerable threat from drugs (particularly NPS) and associated debt and violence. In our survey, 42% of prisoners reported arriving at Ranby with a drug problem and almost two thirds of prisoners said that it was easy to get illegal drugs. One in five prisoners said they had developed a drug problem while at Ranby. Incidents related to NPS were common. The positive rate for random testing, including NPS, was about 28%. The prison had a robust prison-wide approach to tackling the drug supply and a comprehensive and innovative drug supply reduction strategy was in place. The number of drug finds and positive drug tests had declined over the previous 12 months.
- S12 There had been one self-inflicted death since the previous inspection. The prison was working towards implementing Prisons and Probation Ombudsman (PPO) recommendations, but we were concerned that delays in staff responding to cell call bells had not been adequately addressed. The level of self-harm had risen since the last inspection and was high. Incidents were often associated with PS use and debt. ACCT processes were too variable. Reviews were often poorly attended and care mapping was often inadequate and did not always address underlying issues. Officers' recorded observations frequently lacked detail. Nevertheless, the prisoners at risk whom we saw said all staff provided them with good day-to-day care and support. Twice weekly safeguarding meetings helped identify and manage more vulnerable prisoners and those whose cases were complex.

Respect

S13 *Most staff treated prisoners well. Living conditions had improved overall and prisoners had good access to clothing and basic amenities. Food and access to shop goods was much better than we are used to seeing. Applications and complaints processes lacked confidentiality. Outcomes for most prisoners with protected characteristics were reasonable, but not enough was being done to meet the needs of disabled and younger prisoners. Faith provision was good. Health services were sound overall, although substance misuse and dental services needed improvement. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S14 *At the last inspection in 2015 we found that outcomes for prisoners in Ranby were reasonably good against this healthy prison test. We made 16 recommendations in the area of respect. At this inspection we found that 12 of the recommendations had been achieved, one had been partially achieved and three had not been achieved.*

- S15 Most prisoners responding to our survey said staff treated them with respect, which was reinforced by what we observed. In the small units, interactions between staff and prisoners took place frequently. However, in the three large house blocks, staff still often struggled to find sufficient time to address individual prisoners' needs. As part of the enabling environment initiative, staff and prisoners were encouraged to develop a more collaborative approach in their everyday lives and had been trained in conflict resolution.
- S16 The residential accommodation in the smaller units was still good. Although some cells in the larger house blocks remained untidy, overall the conditions there had been improved. Cells

- were now better equipped and contained fridges, kettles, TVs and duvets, which prisoners valued. There was limited evidence of damage and relatively little graffiti. All prisoners could now live in decent cells and most men were content. Some prisoners, however, continued to live in cramped conditions and too many were sharing cells that had been designed for one person. Prisoners now mostly had sufficient access to clean clothes and bed linen.
- S17 Prisoners were far more positive about the food than those in similar prisons, and could have three hot meals a day. Prisoners had access to a prison shop on arrival, which reduced the potential for debt, and was good practice.
- S18 The prisoner council provided prisoners with an effective forum through which to express their views. It helped create a constructive dialogue between staff and prisoners and it was evident that positive changes had been introduced. The application system was weak and lacked confidentiality. Most complaints were dealt with adequately, but a sizable proportion were relatively minor and could have been dealt with through the application process. Complaints, including many to the Independent Monitoring Board were collected by a uniformed night orderly officer, undermining confidentiality.
- S19 The strategic management of equality work was generally reasonable, although action planning was weak. Equality mentors were used well and consultation with men was good. Discrimination incident reporting form (DIRF) responses were often delayed. The prison's own equality monitoring data raised no significant concerns for men in most protected groups, but the prison had been too slow to act on adverse data for younger prisoners. It was beginning to develop provision for prisoners in this group, but more needed to be done to ensure their needs were met.
- S20 In our survey, black and minority ethnic and Muslim prisoners reported similar treatment to their white and non-Muslim counterparts across most areas, but the prison failed to respond promptly enough to some of these prisoners' concerns. Foreign national prisoners received some good individual support, but their access to independent legal immigration advice was poor. Men with disabilities were more negative than others in some areas of our survey. Some good support was provided, but the prison took too long to make necessary adaptations. Evacuation plans were poor. Some reasonable support for Gypsy, Romany and Traveller and older prisoners was available and support for gay and bisexual prisoners was good.
- S21 Faith provision was reasonable. Good arrangements were in place for Ramadan, and other religious festivals were celebrated. Pastoral support was good and men had very good access to counselling.
- S22 Health care provision was sound, but clusters of incidents involving NPS occasionally disrupted the service. Out-of-hours support had improved since our last inspection and a registered nurse was now always on site. Primary care was very good and long-term conditions and complex cases were managed well. Arrangements for social care assessments were in place, although no one had yet met the threshold for care.
- S23 The population's mental health needs remained high and complex. Mental health services were good, but staff vacancies meant there were some gaps in the therapeutic activities available. Mental awareness peer support workers were well embedded and provided prisoners with good support.
- S24 Substance misuse services had deteriorated since the last inspection as significant staff sicknesses meant the psychosocial team covered core functions but little else. Clinical treatment was adequate but reviews required improvement. Methadone was the only opiate

substitution therapy available and it took too long to administer. Pharmacy services were effective, but medicine administration was not always adequately supervised.

- S25 The prison's ability to diagnose and treat dental problems was seriously affected by unreliable and unserviceable equipment. Too many men waited too long for diagnosis and treatment – and many prisoners complained to us about being in pain.

Purposeful activity

S26 *Most prisoners were unlocked for a good amount of time. The library and physical education (PE) provision was sound. Education, skills and work provision was good. There were sufficient activity places for the population. Attendance had improved. Teaching was engaging and motivating. A range of training activities provided good employment opportunities, although some work was mundane. Prisoners generally behaved well, although punctuality was poor. Achievement rates were high.*
Outcomes for prisoners were reasonably good against this healthy prison test.

S27 *At the last inspection in 2015 we found that outcomes for prisoners in Ranby were not good sufficiently good against this healthy prison test. We made 10 recommendations in the area of purposeful activity. At this inspection we found that six of the recommendations had been achieved, three had been partially achieved and one had not been achieved.*

S28 The regime was predictable and ran on time. For most prisoners, the amount of time unlocked was good – between nine and 10 hours during the working week. However, some prisoners, particularly those who were isolating themselves, had less than two hours unlocked. Our roll checks showed that 20% of men were locked up during the working day, which was less than half the number during the previous inspection.

S29 The library was welcoming and contained an excellent range of books and resources, which met prisoners' needs. Literacy was well promoted through a range of initiatives and peer mentors helped prisoners with poor reading skills through the Shannon Trust reading scheme. PE facilities were good. A reasonable range of employment-related qualifications was available, as well as activities to support healthy living. Neither the library nor gym monitored who attended to inform or promote their use.

S30 The leadership and management of education, skills and work activities was good. Prison and college leaders and managers had taken effective action, including robust performance management, to improve the overall quality of the provision. Quality improvement arrangements, including monitoring of teaching and learning and the self-assessment and improvement planning process, had helped to drive up standards.

S31 There were sufficient activity places for the population and the allocations process was generally effective. A good range of provision was available and the amount of vocational training had increased. We found about 70% of prisoners involved in activities at any one time. Some of those who did not attend had legitimate reasons for not doing so, but a substantial minority simply failed to participate. Induction arrangements and advice and guidance were good and helped prisoners to choose from an appropriate selection of activities.

S32 Teaching and learning engaged, motivated and challenged learners well and as a result, prisoners made good progress. Tutors supported prisoners well and provided a good variety of practical and theory activities in classroom and workshop sessions. Prisoner learning

mentors provided prisoners with effective additional help during theory and practical sessions. Some prison work was mundane and failed to motivate prisoners.

- S33 Productive links with employers had led to many prisoners securing employment. Prisoners developed good vocational, personal and social skills. Their behaviour in classrooms, workshops and in industries was mostly very good, although some were removed from activities because they were under the influence of NPS. Although attendance at scheduled activities had improved, punctuality was poor.
- S34 Overall achievement rates for most classroom-based and vocational training courses were high. Qualifications achievements in English and maths at entry levels and levels 1 and 2 had improved significantly and were now high.

Rehabilitation and release planning

S35 *The provision for visits was satisfactory, but children and families work was underdeveloped. Too many prisoners did not have an up-to-date offender assessment system (OASys) report or ongoing contact with their offender supervisors, which caused frustration and hindered progression for some. Home detention curfew (HDC) processes were sound, but a lack of suitable accommodation meant some prisoners who should have been released remained in custody. Public protection measures were good overall. Release planning was mostly good and prisoners received support to address housing, finance and debt issues. Accredited offending behaviour courses were well managed, but there was no strategy for meeting the needs of those who were not suitable. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S36 *At the last inspection in 2015 we found that outcomes for prisoners in Ranby were not sufficiently good against this healthy prison test. We made 11 recommendations in the area of resettlement.⁶ At this inspection we found that four of the recommendations had been achieved and seven had not been achieved.*

- S37 Family work was underdeveloped – the prison did not have a family support worker or family or parenting courses. Nonetheless, monthly family support days, which prisoners appreciated, were held, although those on the basic level of the IEP scheme were excluded. Visiting arrangements were satisfactory. In good weather, some enhanced prisoners' visits could take place in a very pleasant garden.
- S38 The reducing reoffending strategy was not based on a comprehensive needs analysis and was not specific to the prison population. The bi-monthly reducing reoffending committee meeting was not supported by a specific action plan, so it was difficult to establish what progress had been made.
- S39 The prison held a reasonably long-term and high-risk population, but many arrived with a relatively short time left to serve, which made it difficult to involve prisoners and focus on progression. Too many prisoners did not have an up-to-date OASys report or sentence plan and 40% of recent arrivals had been transferred to the prison without either in place, which potentially hindered their progression. OASys reports completed by offender supervisors were good.

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.

- S40 Prisoners were allocated to an offender supervisor depending on their risks. New arrivals had prompt contact with their offender supervisor, but ongoing contact was too variable and often reactive instead of promoting and encouraging prisoners to progress and reduce their risks. Some prisoners struggled to see their offender supervisor, and too many applications to the offender management unit went unanswered for lengthy periods, which left prisoners frustrated. HDC procedures were sound, but the lack of hostel places meant some men stayed in custody for months after their release date.
- S41 Contact restrictions for prisoners presenting a risk to the public were appropriately applied. Risk management planning for the release of high risk prisoners was reasonably good overall, but the inter-departmental risk management team failed to provide adequate oversight of all high-risk cases.
- S42 Categorisation reviews were up to date. Some prisoners' progression was hindered because they did not have an OASys report or sufficient offender supervisor involvement, and their assessments for accredited programmes were delayed. Too many category D transfers had been delayed due to the lack of transport and insufficient places in some open prisons.
- S43 Places on accredited programmes were appropriately prioritised. The prison did not have a strategy for addressing the needs of those not suitable for an accredited programme. The lack of provision for addressing offending behaviour linked to domestic violence remained a significant gap.
- S44 Prisoners could access good, proactive housing support and receive a good range of help with finance and debt issues. Staff monitored prisoners' accommodation status on release in detail and data revealed that only 9% of prisoners said they would be either homeless or move to very short-term accommodation.
- S45 The demand for resettlement services was reasonably high and about 80 prisoners were released each month. The community rehabilitation company provision was reasonably good and all prisoners, apart from those released on HDC, had their resettlement needs reviewed. The introduction of quarterly resettlement fairs was a positive development, but the number of other resettlement courses delivered was still very limited.

Main concerns and recommendations

- S46 Concern: Too many prisoners felt unsafe and experienced violence, which was often related to drugs (particularly NPS) and associated debt. Good violence reduction and drug supply reduction plans were in place, but they had not yet made the prison safe enough or sufficiently reduced the availability of drugs.

Recommendation: The focus on violence and drug reduction should continue. Plans to reduce the availability of drugs and violence should be embedded and their impact measured.

- S47 Concern: There had been one self-inflicted death since our last inspection and levels of self-harm had risen and were high. Prisoners on ACCT procedures felt well cared for but the documentation did not reflect this and care planning was often poor. Recommendations arising from the PPO's investigation into previous deaths were not consistently implemented, including one addressing staff delays in responding to cell call bells.

Recommendation: Prisoners subject to ACCT procedures should be better assessed and monitored. Planning should be improved and should include effective care planning and better attendance at review meetings. Recommendations arising from the PPO's investigation into previous deaths should be implemented consistently.

- S48 Concern: In our survey 42% of prisoners said they had arrived at Ranby with a drug problem and a further 21% said they had developed a drug problem while they were there. Yet the suspension of some psychosocial therapies meant that no groups had been organised in the seven months up to the end of May 2018. As a result, many prisoners had not had access to some optimal forms of therapy. The Pillars to Recovery group had begun in June 2018, but it only had capacity for 12 men. Drug recovery workers could offer only a basic service and did not attend joint 13-week treatment reviews to represent the psychosocial needs of prisoners.

Recommendation: Psychosocial interventions for prisoners with substance misuse problems should be sufficient to meet their individual and group treatment needs. Drug recovery workers should attend relevant multidisciplinary meetings, including regular individual treatment reviews.

- S49 Concern: Prisoners expressed considerable frustration about their inability to access their offender supervisor. Contact was too variable and often did not focus well enough on prisoners' progression or risk reduction.

Recommendation: Offender supervisor contact should be improved, particularly for prisoners presenting a high risk of harm. Contact should be meaningful and focus on risk reduction and progression.

Section 1. Safety

Prisoners, particularly the most vulnerable, are held safely.

Early days in custody

Expected outcomes:

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

- 1.1 Most journeys to the prison were reasonably short, normally about two hours. New arrivals we spoke to said escort staff treated them well, and we observed respectful interactions as prisoners left escort vehicles. Information about prisoners was shared with reception staff who used it to help inform initial risk assessments. Vehicles did not face delays on arrival at the prison and prisoners were disembarked promptly. They were not routinely handcuffed.
- 1.2 Reception was bright and spacious. There were fish tanks in communal areas and pictures and paintings on the walls, creating a relaxed environment. It was clean and the layout provided staff with very good sight lines so they could observe prisoners. Holding rooms were well decorated and free of graffiti. There was a TV and reading material in each room, as well as up-to-date information on notice boards (see Appendix III). All new arrivals had access to a tuck shop and could buy essential items before moving to the first night centre (see paragraph 2.16).
- 1.3 Initial safety screenings were good. Prisoners' immediate needs were identified and dealt with during private interviews with induction officers and collaboration between reception staff and peer support workers, who greeted all new arrivals, was very good. Processes were streamlined and prisoners moved reasonably quickly through reception to the first night centre on house block 1. Prisoners typically spent about two hours in reception. The attitudes of staff and peer supporters we observed in reception were particularly positive. They were aware of the potential risks for new prisoners and had created a relaxed and welcoming atmosphere. In our survey, 88% of prisoners said staff treated them well in reception.
- 1.4 First night arrangements were also good. Induction officers, usually accompanied by peer supporters, collected prisoners from reception and took them to the dedicated first night cells on the ground floor of house block 1. Prisoners identified as needing stabilisation from the effects of drugs or alcohol were located on house block 2 for treatment.
- 1.5 Most of the designated first night cells on house block 1 were well equipped, but some were grubby. Staff met prisoners as they arrived in the unit and dealt with their welfare needs. We observed them ensuring that prisoners understood how to access prison services if they needed help during their first night, providing them with information to reinforce their support. Effective handovers took place with night staff and enhanced observations of new arrivals took place during the night.
- 1.6 Induction for most prisoners began on the day after their arrival. Prisoners who were sent to the stabilisation unit on house block 2 received their induction after they had been stabilised, which was good. Prisoners received relevant information about available services and prison life, but the sessions on safer custody were cursory. Inductions for education, the library and gym were scheduled over the following week. However, the prison's tracking

systems were not being used effectively enough to ensure all prisoners attended their induction and we saw evidence that too many had not received all elements.

Recommendation

1.7 All prisoners should receive all relevant elements of the induction programme.

Managing behaviour

Expected outcomes:

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

Encouraging positive behaviour

- 1.8** In our survey, 22% of prisoners said they felt unsafe at the time of the inspection (which was similar to other category C prisons). Recorded levels of assaults had increased since the last inspection. The prison had a comprehensive system for recording acts of violence and while most assaults were minor, a few serious assaults had taken place against staff and prisoners. Much of the violence was related to drugs, particularly new psychoactive substances (NPS)⁷ and associated debt.
- 1.9** The prison gave violence and antisocial behaviour a high priority. The safer custody department was sufficiently resourced to monitor and provide prisoners with interventions and support. A range of initiatives, including a forensic psychologist's research paper on Ranby, in-depth analysis of data, regular prisoner consultation, such as a useful prisoner survey, all contributed to the prison's understanding of violence and antisocial behaviour. In response, several steps had been taken to make the prison safer, such as: more staff during mass prisoner movements; additional CCTV; an enabling environment (see paragraph 2.4); trained conflict resolution teams consisting of staff and prisoners; consideration and management of the population's demographics; greater links with the security department to further enhance intelligence; and a better post-incident investigation processes. (See main recommendation S46.)
- 1.10** A well-attended and dynamic weekly tactical violence reduction meeting reviewed emerging threats and took action to address them. It supported the more strategically focused monthly safer prisons meeting.
- 1.11** The prison was in the process of introducing 'challenge, support and intervention' plans to target the most disruptive and most vulnerable prisoners. They were designed to be used proactively in response to intelligence received and reactively following violent incidents. Traditional behaviour management processes such as the incentives and earned privileges (IEP) scheme and formal adjudications were used for other less serious incidents.
- 1.12** Despite the range of action taken, too many prisoners still experienced violence. There had been a slight increase in the rate of violence over the 12 months up to the inspection, but against a backdrop of substantial increases at many of the prisons we have recently

⁷ NPS generally refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vaporised and inhaled in e-cigarettes and other devices.

inspected, this indicated that the prison's action had helped restrict the widespread increases in violence we see elsewhere.

- I.13** The number of prisoners choosing to isolate themselves was far fewer than at the last inspection. Processes for identifying and supporting them were good, but their regime was too restrictive and oversight for the few who refused to participate was inadequate. The prison accepted our finding and took remedial action to address our concerns.
- I.14** The IEP policy had been improved by enhancing the distinctions between the levels, providing men with greater incentives to progress. For example, prisoners on the basic level could no longer wear their own clothes and those on the enhanced regime could see their visitors in more comfortable conditions. They also had the opportunity to move to better accommodation. These matters had been discussed at the prisoner council to gain the consent and approval of members. Despite these changes, prisoners in our survey were negative about the motivational effect of the scheme. Only 27% of prisoners said the IEP scheme encouraged them to behave well, compared with 41% in similar prisons.
- I.15** Individuals on the basic level were now monitored more closely. Although a group of about 10 individuals refused to cooperate, there was a much stronger emphasis on supporting men to progress, wherever possible.

Good practice

- I.16** *The weekly tactical violence reduction meeting took remedial action to address emerging threats and shared information, supporting and complementing the work of the monthly safer prisons meeting.*

Adjudications

- I.17** The number of adjudications was very high – about 2000 over the previous six months. This was almost double the number at the last inspection. Much of the increase in the number of adjudications was explained by rising levels of violence and drug use, which had led to greater use of suspicion testing and searching, resulting in disciplinary charges. Adjudications were governed well, and quarterly standardisation meetings and monthly quality checks took place. The administrative arrangements for adjudications were efficient and few charges were not completed.

Good practice

- I.18** *The provision of dedicated administration support ensured that most adjudication processes were completed, which supported the prison in tackling antisocial behaviour.*

Use of force

- I.19** Recorded use of force was much higher than at the last inspection and had almost doubled. Although about half of all incidents involved physical restraint, many recorded incidents involved NPS and consisted of guiding holds as prisoners were assisted back to their cells. Handcuffing was not routine and was based on individual risk assessments.
- I.20** Managerial oversight had improved and was good. Reviews were subject to a high level of scrutiny and were often conducted soon after the incident. Planned interventions were routinely recorded on video and, along with the use of batons, were robustly reviewed by

the head of safer custody to ensure proportionality and identify any lessons that could be learned. We were satisfied that there was an appropriate focus on de-escalation and that, although many of the staff were relatively new, they understood that force should be used as a last resort.

- I.21** Special accommodation was rarely used – only once in the six months to the inspection. Authorisation was comprehensively recorded, but ongoing observations were not logged adequately.

Recommendation

- I.22** **Special accommodation records should provide a comprehensive record of observations and occurrences.**

Segregation

- I.23** The use of segregation had declined significantly since the last inspection to less than a quarter of previous levels. The unit's capacity had been reduced because of extensive renovations to improve living conditions and there was now better support for those seeking protection, a substantial decrease in the number of prisoners held in the unit pending adjudication and better reintegration planning. Some prisoners had remained in the unit for long periods, often well over 28 days, but we were satisfied that efforts had been made to return them to the mainstream prison prior to being transferred to other prisons and often other segregation units. The unit was not routinely monitored to provide assurance or to establish trends over time.
- I.24** The regime continued to be very poor. Activities were limited to just 30 minutes in the open air every day, a shower, a phone call and access to a small and relatively old set of reading books. In-cell educational work was offered every week but rarely taken up. All prisoners were moved around the unit individually regardless of their risks and meals were served at cell doors.

Recommendation

- I.25** **The prison should monitor the usage, conditions, occupancy and regime of the segregation unit to improve conditions, identify trends and patterns of usage and address any identified concerns.**

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.26** Physical security was proportionate and there was a balance between maintaining an appropriate regime and the need to address drug trafficking and violence across the site. The extensive prison perimeter and rural location presented a real challenge in combatting drug ingress. The prison had good relationships with the police and local landowners to enhance perimeter surveillance and had invested in and used available technology well (see also

paragraph I.29). Staff patrols operated a random 'stop and search' policy when prisoners moved around the prison. The area-based drug search dog team also periodically operated across the site.

- I.27** A considerable amount of intelligence was received from across the site, providing the prison with a good insight into illicit activity. The security team analysed the information efficiently, which led to immediate action, including searches, drug testing and moving prisoners around the house blocks as a disruption tactic, as well as more strategic longer-term operations, often involving the police.
- I.28** Drugs and the associated issues of debt and violence continued to be the primary threat to the stability of the prison. NPS were the clear drugs of choice. In our survey, 42% of prisoners arriving at Ranby said they had a drug problem, almost two thirds said it was easy to get illegal drugs and one in five said they had developed a drug problem while at the prison. (See also section on substance misuse treatment).
- I.29** A comprehensive and innovative drug supply reduction strategy was in place and a robust and prison-wide approach to tackling the drug supply was evident. The primary route into the prison of NPS and other substances was through impregnated letters (including false legal correspondence), cards and photographs. All incoming mail was electronically scanned for drugs and we were satisfied that the robust restrictions that applied when a test was positive were proportionate (see paragraph 4.3). Restrictions had also been discussed at the prisoner council where staff made efforts to allay any concerns over cross-contamination. The prison also actively promoted the Email a Prisoner scheme (see paragraph 4.4), which had led to a reduction in the number of letters the prison received. The extensive perimeter meant drugs could be thrown over the wall, however, CCTV and additional patrols had been put in place to reduce this threat and all external areas were searched every day before prisoners started moving around the prison.
- I.30** Drug testing procedures were conducted appropriately. The mandatory drug testing random rate was about 10% over the six months up to the inspection, but rose to about 28% if NPS were included. A significant amount of intelligence-led suspicion testing was also undertaken. Success rates were good, demonstrating the high quality of much of the information received. Requested searches and testing were closely monitored, which ensured that the majority were carried out.
- I.31** The number of drug finds and positive random drug tests had decreased over the previous 12 months and longer-term analysis showed a reduction since the last inspection. Despite this, incidents involving NPS were common and we saw prisoners under the influence of NPS throughout the inspection.

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.32** There had been one suicide since the previous inspection. Although the prison was working towards implementing the Prisons and Probation Ombudsman recommendations following

the death, we were concerned that a vital recommendation about staff delays in responding to cell call bells had not been adequately addressed (See paragraph 2.10 and main recommendation S47).

- I.33** The number of self-harm incidents was relatively high for the type of prison and compared with the last inspection. In the six months prior to the inspection, there had been 196 self-harm incidents carried out by 95 prisoners compared with 121 at the last inspection. This represented a rate of 19.6 prisoners per 100, which was higher than we are used to seeing.
- I.34** The strategic approach to understanding and reducing self-harm was developing and management structures to deal with it had improved. The full-time safer custody team was sufficiently resourced and a safer custody committee met every month and was well attended. Information was collected and analysed very well, and a wide range of data was being used to identify trends and patterns of behaviour. Local monitoring tools for recording self-harm were good and had identified that high levels of drug use, violence and debt contributed to the large number of self-harm incidents.
- I.35** There had been 168 assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm in the previous six months, which was similar to the previous inspection. Many had been raised during prisoners' early days in the prison. The number of prisoners on an ACCT document who were in the segregation unit had declined considerably since the last inspection.
- I.36** Our observations showed that staff knew and cared about the personal circumstances of prisoners and helped them to deal with their problems. Although prisoners we spoke to who were on an ACCT told us that officers treated them well and were responsive to their needs, ACCT documents often did not reflect this. Good initial assessments were undermined by poor case management in too many cases. Reviews were often poorly attended and care maps too often did not relate to the prisoner's identified needs. Entries in ACCT documents did not always demonstrate that responses were dynamic and there was little indication that action was implemented (see main recommendation S47). The prison's safer custody team had introduced new quality assurance procedures and early signs were positive.

Protection of adults at risk⁸

- I.37** The prison had an up-to-date safeguarding policy that was reasonable and that staff understood. It also had links with the local safeguarding adults board and a referral system, although no safeguarding referrals had been made in the six months prior to the inspection.
- I.38** Local vulnerability screening procedures were in place, and the assessment of prisoners' risks carried out during their first few days in custody were reasonably good (see also section on social care). Prisoners identified as having more complex needs were discussed at a twice weekly safeguarding meeting and a multidisciplinary team of staff and managers coordinated and reviewed their care.

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 Most prisoners surveyed said most staff treated them with respect, which our observations confirmed. Interactions between staff and prisoners in the two small units (house blocks 6 and 7) and house block 5 were constructive and staff often talked to prisoners or joined them in recreational activities. Our conversations with staff in the units revealed that they knew their prisoners well and were interested in their welfare.
- 2.2 In contrast, direct contact between staff and prisoners was much less evident in the large house blocks (house blocks 1 to 3), where staff appeared to be more involved in routine procedural work. Prisoners in the large house blocks told us staff did not have enough time to help them individually.
- 2.3 There was no active personal officer scheme, which was less of a problem in the small units, where staff were actively involved with prisoners and where a more settled group of men who had progressed to the better conditions were accommodated. However, the lack of a reliable key worker system meant that the less stable group of men in the large house blocks, where most of the prisoners who were on the basic level of the regime were located, were much less likely to receive any help.
- 2.4 Constructive work between staff and prisoners was being carried out in house block 3 South where the 'enabling environment' had been recently introduced. The initiative was an attempt to develop a more collaborative approach among staff and prisoners, by emphasising consultation, discussion and negotiation and including sessions run by prisoners who had been trained in conflict resolution. Prisoners there had better facilities than in the other parts of the large house blocks. Community sessions were also scheduled every day, during which staff and prisoners shared activities, such as film shows and a book club. We were told that antisocial behaviour had declined considerably in the house block, but at times when we visited it, it was exceptionally noisy and poor behaviour was not challenged. So, although a promising approach, it was too early to determine whether the scheme had a positive impact on relationships and behaviour.

Recommendation

- 2.5 **The enabling environment on house block 3 South should be monitored to establish whether it improved relationships and behaviour.**

Daily life

Expected outcomes:

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

Living conditions

- 2.6** The standard of residential accommodation within the smaller units remained good and we found conditions in the large house blocks, which had previously been poor, were now better. Some of the cells in the large house blocks were still untidy, but they were very much in the minority and the wide range of daily checks now being carried out had led to improvements in most areas.
- 2.7** Cells in general were better equipped and now all contained fridges, kettles, TVs and duvets. Prisoners valued these items. The limited amount of damage was notable and there was little evidence of graffiti.
- 2.8** The improvements that had been made to the large house blocks meant all prisoners could now live in decent conditions and most men were content. However, some prisoners continued to live in cramped conditions with 174 men sharing cells that had been designed for one person.
- 2.9** Prisoners now mostly had sufficient access to clean clothes and bed linen, but laundry facilities in house block I broke down regularly. Access to showers was good and they were generally clean, although some required refurbishment
- 2.10** Only 20% of prisoners responding to our survey said that cell call bells were answered within five minutes, which was lower than the comparator. Monitoring of cell call bells had been introduced since the previous inspection and, although the information was routinely checked and action taken, records indicated that response times of over 20 minutes were still occurring. (See paragraph 1.32 and main recommendation S47.)

Recommendation

- 2.11 Prisoners should not be required to share cells designed to accommodate one person.**

Residential services

- 2.12** In our survey, 60% of prisoners said the food was good or very good, more than double the percentage in similar prisons. During the inspection, prisoners were generally positive about the food and they could have three hot meals a day, which was better than we usually see. In addition to pre-prepared breakfast packs, prisoners could have porridge, which they appreciated. Those attending activities also received a snack and hot drinks pack.
- 2.13** Lunch and dinner were selected from a four-week rolling menu, which included a reasonable variety of fresh vegetables, fruit and salad every day. The men's in-cell fridges meant that they could supplement their meals with fresh food bought from the shop (see paragraph 2.16).

- 2.14** Lunch was served from 11.10 am and dinner from 4.10pm, which in both cases was far too early. Serveries were kept reasonably clean and the food service we observed was generally well organised. However, servery workers were not all appropriately dressed and prisoners had made ongoing complaints about the way halal food was served (see paragraph 2.39 and recommendation 2.46). Prisoners could eat together, and in good weather, they could eat outside.
- 2.15** Consultation arrangements were good. An annual food survey was carried out and a bi-monthly catering committee meeting held. There was evidence that prisoners' views were taken seriously and acted on. The catering manager worked well with the chaplaincy, organising celebrations for religious festivals, and arrangements for the preparation of food during Ramadan were good.
- 2.16** In our survey, 76% of prisoners said they had access to the shop during their first few days at Ranby, compared with 28% in similar prisons. Prisoners could buy popular items from a tuck shop when they first arrived (see paragraph 1.2). This meant that they were less likely to get into debt by borrowing items from other prisoners during their early days in the prison and incurring debt as a result (see Appendix III).
- 2.17** More than half of men in our survey said the shop sold the things that they needed. Prisoners were consulted well about shop items during the prisoner council, and the prison had agreed to increase the provision of fresh food, which prisoners could store in their cell fridges. However, the prison had taken too long to address the concerns of black and minority ethnic prisoners about the price of specialist goods that they needed (see paragraph 2.36).

Good practice

- 2.18** *Prisoners could buy goods from a tuck shop when they first arrived, which reduced the likelihood of them getting into debt.*

Prisoner consultation, applications and redress

- 2.19** The prisoner council was held every month and chaired by the governor. Prisoner representatives were supported by trained, specialist external facilitators. The council was run professionally and provided prisoners with an effective forum for expressing their views. The council helped create a constructive dialogue between staff and prisoners and topics covered included changes to the incentives and earned privileges scheme and the impact of the smoking ban. Positive practical changes had been achieved following discussions at the council, such as the refurbishment of games equipment, as well as the introduction of an over-50s allotment and an initiative enabling prisoners and staff to donate to a local foodbank.
- 2.20** The application system was run by prison information desk workers, who were based in each of the house blocks. In our survey, only 67% of prisoners said making an application was easy and many men we spoke to thought the process lacked confidentiality and said they were reluctant to use it for personal matters, because other prisoners managed it. There was no reliable method of tracking applications, which sometimes meant matters raised went unanswered.
- 2.21** About 1500 complaints had been generated over the previous six months, which was similar to the previous inspection. Most were dealt with adequately, but quality assurance checks

highlighted that a sizable proportion of the formal complaints made were relatively minor and could have been dealt with through the application process.

- 2.22** Complaints and a proportion of Independent Monitoring Board referrals were collected by uniformed staff at the end of the day, detracting from the perception of the arrangements' independence and confidentiality.
- 2.23** Although demand for legal services was not high, there was still no formal assistance for prisoners who needed this type of support. Since the previous inspection, the range of legal texts held in the library had been improved and prisoners also had access to all the latest prison policies.
- 2.24** Good use was made of the video-conference facilities. Unless they were visiting police officers, legal visitors could not routinely see their clients in private and legal visits continued to take place in the open domestic visiting area.

Recommendations

- 2.25** **The prison should explore and address prisoners' negative perceptions of the confidentiality of the applications and complaints processes.**
- 2.26** **Legal visitors should be able to interview their clients in private.**

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

- 2.27** The strategic management of equality work was generally reasonable. However, action planning was weak.
- 2.28** Attendance at the bi-monthly equality action team meeting was better than at our last inspection, but could have been further improved. Meetings were generally satisfactory, although some action was carried over repeatedly. The equality action plan was too generic and did not focus sufficiently on some protected groups.
- 2.29** There were unacceptable delays of over two months before HM Prison and Probation Service sent equality monitoring tool data to the prison. However, the data raised no significant concerns for prisoners in most protected groups (but see paragraph 2.42).
- 2.30** Equality peer mentors were well used. Their work was well structured and supervised and they formed an integral part of the equality team. Training for peer mentors was good.

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

- 2.31** Men were consulted well and better than usual. There were ongoing quarterly forums for most minority groups. Meetings generally focused on equality issues, but minutes suggested slow progress on some issues.
- 2.32** There had been 41 discrimination incident reporting form (DIRF) submissions in the previous six months. DIRFs were investigated thoroughly and responses were helpful. However, most responses were late and, in some cases, delays were protracted. Interventions for staff and prisoners who were the subject of DIRFs were good, including training for both groups.

Recommendations

- 2.33** **Equality monitoring tool data should be sent to the prison promptly and any adverse data should be swiftly investigated.**
- 2.34** **DIRFs should receive a prompt response.**

Protected characteristics

- 2.35** The prison had begun to improve its identification of prisoners with protected characteristics, but men could still not disclose them in confidence when they first arrived. Our survey results and prison data on the number of men in each protected group suggested that some were still not being identified.
- 2.36** In our survey, black and minority ethnic prisoners' responses were mostly similar to those of white prisoners. However, significantly fewer of this group than white prisoners said most staff treated them with respect and that they were searched respectfully and treated well in reception. Equality monitoring data showed no ongoing significant issues for this group. There were quarterly black and minority ethnic forums, which focused on equality. However, the prison was too slow to respond to some concerns raised by these prisoners.
- 2.37** In our survey, 5% of prisoners said they were from a Traveller community, suggesting a population of about 50. The prison had a record of 25, which suggested that the prison had not identified all of them. There were quarterly forums and a monthly informal meeting for men from Traveller communities. Arrangements had been made for them to apply for an additional £20 phone credit each week paid for from their own private money to stay in touch with relatives.
- 2.38** There were 17 foreign nationals, most of them Irish. Support for this group was underdeveloped. There had been no forums for foreign national men in the previous year, although one was held during the inspection. Nevertheless, we found some good one-to-one support for those in greatest need, including for the one man held under immigration powers. However, this was no substitute for access to independent legal advice which, due to the limited scope of legal aid, was poor. The library stocked out-of-date immigration law text books, which was a concern, and there was little awareness of external support groups such as Bail for Immigration Detainees.
- 2.39** About 13% of prisoners were Muslim. Muslim prisoners reported a broadly similar experience of life in Ranby to other prisoners in our survey. No significant concerns arose following equality monitoring data for this group. Although there was an active chaplaincy, there were no formal consultation meetings for Muslim prisoners. The prison had not tackled concerns about the service of halal food, which had been raised repeatedly in the six months prior to the inspection. Nonetheless, arrangements for Ramadan were good.

- 2.40** In our survey, 36% of men considered themselves to have a disability. The prison had records of 253 such prisoners, suggesting some prisoners' needs had not been identified. There had been two reasonably productive forums with prisoners in this group in the previous six months. However, men with disabilities reported poorer treatment across some areas in our survey, particularly on safety. At the time of the inspection no prisoners were receiving formal social care (see section on social care). We found some examples of good support and the paid carer scheme worked well. However, the prison had not made necessary adaptations to cells, showers or toilets. Evacuation plans for prisoners with disabilities were poor and those with the greatest needs did not have an individual wing care plan.
- 2.41** There were no trans prisoners. Two focus groups had been held for gay and bisexual prisoners and support for those known to be in this group was good. However, too few gay or bisexual prisoners had disclosed their sexuality to the establishment.
- 2.42** The prison population was comparatively young – 40% of prisoners were between the ages of 21 and 29, and 23% of prisoners responding to our survey were under 26. These prisoners reported similar experiences to others. However, the prison had failed to investigate adverse equality monitoring data, which showed, for example, that prisoners under the age of 25 were twice as likely as other prisoners to be on the basic level of the incentives and earned privileges scheme. The prison had begun to develop provision for this group and a forum had been organised. Some training was also being developed. However, staff were not sufficiently aware of the specific needs of younger prisoners and more needed to be done to ensure they were met.
- 2.43** Some reasonable support was offered to older prisoners, which included forums and a monthly meeting providing a range of age-appropriate activities including quizzes and PE activities focused on older men.
- 2.44** Good support was also available for veterans, including a monthly support group run by veterans' charity Care after Combat and Nottinghamshire Healthcare. The equality administrator was training to be a volunteer with armed forces charity SSAFA to further improve support.

Recommendations

- 2.45** **Arrangements should be made so that prisoners can disclose their protected characteristics in confidence.**
- 2.46** **The prison should ensure the service of halal food is appropriate.**
- 2.47** **The needs of prisoners with disabilities should be met and should include the provision of reasonable adjustments, up-to-date evacuation plans and wing care plans.**
- 2.48** **Provision for younger prisoners should be developed in consultation with this group.**

Faith and religion

- 2.49** Faith provision was reasonable and 78% of men in our survey said their religious beliefs were respected and 93% said they could attend religious services if they wanted to. The chapel and multi-faith room had good facilities – the chapel was well resourced and had wheelchair

access and a group room. Facilities for Friday prayers were good and religious instruction classes were adequate.

- 2.50** The chaplaincy saw new prisoners within 24 hours of their arrival and gave them written information about chaplaincy services and activities. The team saw men subject to assessment, care in custody and teamwork (ACCT) case management procedures for prisoners at risk of suicide or self-harm once a week. A chaplain visited the segregation unit every day.
- 2.51** Links with the kitchens to support prisoners' religious and cultural needs were good. Arrangements for Ramadan were also good and other religious festivals were celebrated. However, there had been ongoing issues with the service of halal food, which the prison had failed to resolve (see paragraph 2.39 and recommendation 2.46).
- 2.52** Chaplains were accessible and support during a bereavement and for families was good. Prisoners had very good access to counselling through the chaplaincy and two chaplains were qualified counsellors. One specialised in support for prisoners who had suffered from abuse, which complemented the prison's rehabilitation work (see paragraph 4.32).
- 2.53** The chaplaincy had limited links with outside faith groups, but steps were being taken to develop them. Recent chaplaincy vacancies had been filled and the team aimed to improve their attendance at prison meetings, such as the equality action team meeting.

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.

- 2.54** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)¹⁰ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies.

Strategy, clinical governance and partnerships

- 2.55** Nottinghamshire Healthcare NHS Foundation Trust (Notts HC) was contracted to provide all health services from April 2018. Arrangements for contract monitoring were effective, partnership working was efficient and working relationships between the prison and partners were good.
- 2.56** Lessons had been learned from serious clinical incidents and deaths in custody. Information on how to complain was publicised and the system was confidential. Seventy-seven complaints had been received from January to March 2018 inclusive. They included concerns about waiting times and medication decisions. Responses were timely and a sufficiently senior member of staff replied. Prisoners also complimented positive and caring staff.
- 2.57** Prisoners could influence service developments through regular prisoner forums where prisoner representatives were consulted about health care. Patient surveys were undertaken

¹⁰ 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>.

and 'You said, we did' posters were displayed throughout the prison, along with an informative newsletter.

- 2.58** Most primary care services were delivered from the health care department, which was spacious and clean. Infection control compliance was excellent. Monthly awareness raising sessions on topics such as blood borne viruses were organised for waiting prisoners in the small waiting room. Primary care services were available from 7.45am to 8pm each day and a registered nurse was on duty 24 hours a day. Out-of-hours managerial and medical support was promptly available. However, health services continued to experience occasional disruption due to prisoners suffering the toxic effects of new psychoactive substances (NPS).¹¹
- 2.59** All health care professionals used SystemOne (the electronic clinical information system) which facilitated communication. A regular pattern of clinical auditing ensured standards were maintained.
- 2.60** Clinical leadership was evident – health centre staff told us they felt well supported. They had appropriate training opportunities, had undertaken all current mandatory training and received regular managerial and clinical supervision.
- 2.61** All health care staff were trained in resuscitation and had access to strategically located automated external defibrillators (AEDs), oxygen and associated equipment. The prison had its own AEDs, officers knew how to access them, and 66 had been trained to use them.
- 2.62** The CQC found there were no breaches of the relevant regulations.

Good practice

- 2.63** *The monthly awareness-raising sessions in the waiting room were an excellent use of time and prisoners who might otherwise have shown little interest participated in the sessions.*

Promoting health and well-being

- 2.64** There was a 'whole prison' approach to promoting health and well-being. Health promotion information was widely available. Staff used national NHS campaign information and prisoners had good access to information in other languages.
- 2.65** Age appropriate immunisations and vaccinations were available, for example, MMR for younger patients and flu for patients at risk. National health checks were available for prisoners aged 35 to 74 and prisoners' social care needs were also assessed.
- 2.66** The prison was smoke-free and support for smoking cessation was available. Prisoners had access to confidential sexual health services, although there were few clinics for chlamydia screening. Barrier protection was available and promoted.

¹¹ NPS generally refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vaporised and inhaled in e-cigarettes and other devices.

Primary care and inpatient services

- 2.67** Prisoners received a comprehensive health assessment on arrival. Their immediate and continuing health needs were identified and required action recorded on SystemOne to initiate care.
- 2.68** Prisoners had very good access to health care and nurses were available in the house blocks every day. Prisoners could make an appointment through a confidential pictorial application system.
- 2.69** There were two or three GP clinics per week. Prisoners waited up to 48 hours for an urgent appointment and two weeks for a routine appointment, which was similar to community waiting times. GPs led care for prisoners with the most complex issues, while nurse prescribers and nurse triage clinics dealt with more common problems.
- 2.70** Triage clinics ran in several house blocks and there were general clinics and specialist appointments for skin conditions and prescribing. Patients with long-term conditions, such as asthma and diabetes, were treated at nurse-led clinics backed up by the GP.
- 2.71** Primary care and hospital professionals provided a range of clinics, covering areas such as hepatology (liver diseases), physiotherapy, podiatry and optometry. Waiting times for clinics were reasonable.
- 2.72** Prisoners experiencing pain were managed proactively. A GP, primary care matron and pharmacist reviewed all prisoners on medication to identify if they could benefit from non-medicinal treatments instead.
- 2.73** The non-attendance rate for the GP clinic was low at only 4%, but for nurse clinics it was about 25%. The prison was due to launch an initiative to address this problem. Hospital escorts were rarely cancelled for security reasons.
- 2.74** Prisoners were seen at efficient pre-discharge clinics two weeks before leaving the prison. They received the take-home medicines they required and assistance in finding a GP if they did not have one.

Social care

- 2.75** Notts HC was responsible for conducting assessments and delivering social care packages. There was an open referral process, all prisoners were screened on their arrival at the prison to determine if they had any social care needs and information outlining support was provided during the induction process.
- 2.76** During the inspection, no one was receiving social care, although we observed that some men required occupational therapy. Nurses provided social support in emergencies.
- 2.77** The prison had established links with Nottinghamshire County Council so that social care support could be provided, but referrals for social care assessments were not always completed promptly. The memorandum of understanding between the prison, local authority and Notts HC had not been reviewed or updated following the change in health care provider.

Recommendation

- 2.78** The memorandum of understanding for social care should be reviewed and updated.

Mental health care

- 2.79** During the inspection, 55% of prisoners said they had mental health problems. A mental health worker saw prisoners at reception, which ensured urgent care was provided. Thereafter an effective open referral system ensured urgent cases were seen within 24 hours and non-urgent cases within five days, although there were gaps for prisoners who did not attend assessments. Managers had developed an action plan to ensure those who had not had an assessment on reception received one promptly.
- 2.80** Prisoners with mental health problems received an integrated stepped care model approach (mental health services that address low level anxiety and depression through to severe and enduring needs) seven days a week.
- 2.81** Mental health nurses had caseloads of 25 to 40 prisoners each, but they also covered routine duties, assessments and reception tasks. Staff vacancies led to gaps in therapeutic activities, such as groups. The team and the wider health care team discussed complex cases together and contributed to prison safeguarding meetings. Well-trained and supervised mental awareness peer supporters were well embedded and provided those with a mental health problem with good support.
- 2.82** Prisoners with a dual diagnosis, learning disabilities and other complex issues were assessed and received support from nurses, psychiatrists and a psychologist. However, psychological tools to measure progress were not widely available, which limited staff's ability to provide prisoners with feedback on their progress.
- 2.83** Arrangements to ensure continuity of care on transfer and release were good. The care planning approach was used to ensure effective links with community teams. In the previous six months, three prisoners were transferred under the Mental Health Act.
- 2.84** About 25% of custody staff had received mental health awareness training. Staff said it helped them recognise and support prisoners with mental health conditions. Further sessions were due to take place in July.

Recommendation

- 2.85** Patients with mental health conditions should have prompt access to evidence-based treatments, including psychotherapeutic groups, to meet their needs.

Substance misuse treatment¹²

- 2.86** The substance misuse service had deteriorated since the last inspection because of significant staffing issues. As a result, clinical treatment was only adequate. The remaining team covered absences by prioritising assessment, crisis management and release planning. A single peer mentor offered prisoners harm minimisation following a PS incident.

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).

- 2.87** Breaking Free, an online treatment and recovery programme for problem drinking and drug use, was being introduced. The substance misuse team and a peer mentor had received training to deliver the 12-week Pillars to Recovery course to prisoners. Prisoners on the course also received one-to-one key worker sessions to consolidate the programme content. However, there had been no psychosocial groups since October 2017, a significant gap in the service. (See main recommendation S48.) The chaplaincy department ran the Alcoholics Anonymous peer support group.
- 2.88** Prisoners had access to a comprehensive range of in-cell work booklets focusing on areas such as motivation and drug awareness, which they used well. Individual sessions were well documented on SystmOne. The psychosocial team supported 248 prisoners.
- 2.89** A total of 149 prisoners (15% of the population) were receiving opiate substitution treatment, 124 of whom were on maintenance doses and 25 on reducing doses.
- 2.90** Most prisoners who were dependent on substances were on the drug recovery wing. We observed several prisoners having to choose between opiate substitution treatment, work or health appointments, which was unacceptable. Methadone was administered during morning and afternoon sessions and 37 prisoners received their methadone after lunch. Morning administration sessions took too long.
- 2.91** The non-medical prescriber confirmed prisoners' previous prescribing regimes promptly to enable treatment continuity and prisoners were seen by a psychosocial worker within five days of their arrival at the prison. Clinical reviews scheduled for four weeks and 13 weeks were sometimes delayed, as there was only one prescriber and drug recovery workers were unable to attend because they were short-staffed. Some reviews were completed remotely and were not undertaken jointly and 49 prisoners were waiting to be allocated a key worker. Methadone was the only opiate substitution treatment available, limiting prisoners' choice and failing to meet national guidelines.
- 2.92** Pre-release planning and liaison with community services remained good and included face-to-face harm minimisation prior to release and court attendances. Overdose training and naloxone (a drug to manage substance misuse overdose) on release were actively promoted for those at risk.

Recommendation

- 2.93** **Opiate substitution prescribing should be flexible, based on individual needs and conform to national guidelines. Opiate substitution should be administered in a timely fashion so prisoners can attend work and health appointments.**

Medicines optimisation and pharmacy services

- 2.94** Prescription medicine was stored and transported around the prison safely and securely. Regular audits of over-labelled stock and over-the-counter medicines took place to assure good management.
- 2.95** Prescribed medicine reconciliation reviews took place during prisoners' reception interview and in-possession risk assessments were reviewed as part of their initial health screening. Eighty per cent of patients had their medicines in possession, but not all initial risk assessments had been subsequently reviewed. While a project to provide individual storage lockers in cells had started, not all cells had had them fitted, and many patients did not have secure storage for their medicines.

- 2.96** Pharmacy technicians and a nurse administered and supplied medicines twice a day from the health centre and some house blocks. Some of the hatches did not ensure confidentiality. Staff and prisoners told us that medicine queues were often poorly managed.
- 2.97** Prisoners could seek advice from the pharmacy technicians at the hatch, but the pharmacist post was vacant and there were no pharmacist-led clinics or regular pharmacist oversight of prescribing.
- 2.98** There was an over-the-counter medicines policy covering a good range of medicines and patient group directions (which authorise appropriate health care professionals to supply and administer prescription-only medicine) were in place. The prison kept some stock items to ensure doses of critical medicines were available and officers could administer over-the-counter medicines following direction from a GP. There was a procedure for access to out of hours' medication, but no written policy.
- 2.99** A well-attended drugs and therapeutics committee met regularly. A formulary (a list of medications used to inform prescribing) was in place and prescribing data on potentially tradable medicines were reviewed. The prison had a range of standard operating procedures (SOPs), however, some controlled drug SOPs had been due a review in December 2017.

Recommendations

- 2.100 All cells should have individual lockable storage facilities for medicines.**
- 2.101 A published out of hours' policy should be introduced.**
- 2.102 The drugs and therapeutics committee should ensure that there are robust up-to-date controlled drugs SOPs, which ensure legal requirements and best practice are followed.**

Dental services and oral health

- 2.103** Governance and infection prevention and control arrangements were very good. There were four dental clinics and two hygienist sessions each week and an extra dental session every month. The dental team could provide a full range of dental treatments and oral health promotion.
- 2.104** However, due to some key equipment being unserviceable, there was a waiting list of 169 patients, 66 of whom had waited longer than six weeks, which was unacceptable. We were dismayed by the number of prisoners we met who complained of dental problems and pain, and were concerned that there would be insufficient dental sessions to clear the waiting list when the new equipment was installed.

Recommendation

- 2.105 All prisoners on the waiting list should receive prompt access to dentistry following the installation of new equipment.**

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 Most prisoners spent a good amount of time out of their cells. A fully employed prisoner could be unlocked between nine and 10 hours from Monday to Friday and between seven and eight hours at the weekend. In our survey, prisoners said they knew the lock up times and most said they were adhered to. Managers had introduced numerous checks to ensure the regime was maintained, curtailments were avoided and standards were upheld. We were confident that improvements to the regime were embedded and that the core day was delivered reliably and consistently.
- 3.2 A small minority of men received less than two hours unlocked each day. This group consisted of men on the basic level of the IEP scheme and a small number who were isolating themselves.
- 3.3 Our roll checks found about 20% of men locked in their cells during the working day, which was lower than 43% found at the last inspection.
- 3.4 Exercise and association were scheduled daily. The exercise yards were tidy and spacious. We observed the fixed exercise equipment in each exercise yard being well used. The equipment, along with other recreational facilities, including those for table football, pool and snooker, were kept in good order.
- 3.5 The library was bright, spacious and met prisoners' diverse needs, including those speaking languages other than English and those with learning support needs. Legal texts were also available.
- 3.6 Prisoners could visit the library three times a week and it was no longer closed for operational reasons. In our survey, 50% of prisoners said they went to the library at least once a week. The library management information system had not been sufficiently improved since the previous inspection and staff remained unable to generate data on the groups of prisoners that used the library.
- 3.7 Library and education staff still promoted reading well through a number of initiatives such as the Shannon Trust reading scheme, reading groups and the Reading Ahead Book Challenge.
- 3.8 Prisoners had good access to a wide range of indoor and outdoor sports facilities and equipment, including a multiuse sports hall, weights room, cardiovascular suite, outdoor football pitch, and several classrooms. Sessions were well managed and every prisoner could attend at least three times a week, including evenings and weekends. However, in our survey, only 48% of prisoners said they used the gym twice a week or more and the prison did not monitor which groups of prisoners used the gym.

- 3.9** A well-planned and varied range of courses was offered in the gym and sports qualifications for prisoners had been reintroduced.
- 3.10** Physical education (PE) and health education courses and remedial PE helped to promote healthy living and the importance of exercise. Staff provided very good remedial support to prisoners considered unsuitable for usual physical activities.

Recommendation

- 3.11** **Library and gym use should be monitored so that data can be obtained on which groups of prisoners are less likely to visit the facilities to inform remedial action.**

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:	Good
<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>Good</i>
<i>Personal development and behaviour:</i>	<i>Good</i>
<i>Leadership and management of education, skills and work:</i>	<i>Good</i>

Management of education, skills and work

- 3.13** Prison and college leaders and managers had taken effective action to improve the overall quality of provision since the last inspection. Prisoners were generally motivated to use their time in custody productively and achievement rates for all groups were high and improving.
- 3.14** The education and vocational training provision provided by Milton Keynes College was good. Effective partnership working between the prison group learning development manager and the college's new head of education had led to significant improvements in the quality of the provision. Together, they had improved the quality of almost all teaching and significantly improved the management and delivery of English and maths.

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).

- 3.15** The college's managers had applied robust performance management measures to improve the classroom and vocational training. They had appointed new well-qualified and enthusiastic tutors who used their skills to deliver effective sessions that prisoners enjoyed.
- 3.16** Quality improvement arrangements, including the self-assessment and improvement planning process, had helped to drive up standards. Managers used the results of classroom observations to help tutors further improve their teaching practice. However, quality assurance arrangements did not extend to a small amount of vocational training delivered by external partners on behalf of the college. Inspectors found the vocational training weaker in these areas.
- 3.17** The prison provided sufficient activity places for the population and allocated most prisoners to full-time purposeful activities. A good range of provision was available and the amount of vocational training had increased. We estimated that about 70% of men were involved in an activity at any one time. Attendance rates were generally satisfactory. Some of the men not attending had legitimate reasons for not doing so, but a significant number chose not to participate and prison managers excluded them from the allocations process. The problem was exacerbated when prisoners left activity sessions to attend a legal, medical or other appointment and then failed to return.
- 3.18** Induction arrangements were good. Prisoners received suitably detailed information and guidance on how they could improve their employment prospects by taking part in the prison's activities. In addition, Jobcentre Plus staff based in the prison provided effective careers and jobs guidance in the 12 weeks prior to prisoners' release from custody. Arrangements for monitoring prisoners' post-release progression into employment were appropriate.
- 3.19** The curriculum met the needs of the population well. It was wider than at the previous inspection and better suited to the population. However, a formal needs analysis had not been produced to ensure that curriculum planning took account of all the available information and demographic data on skills, vacancies and unemployment patterns in the areas to which prisoners were released.
- 3.20** The virtual campus (internet access for prisoners to community education, training and employment opportunities) was not operating during the inspection owing to technical difficulties with the server.
- 3.21** The prison's pay policy was broadly equitable. Prisoners working in catering and the laundry received slightly higher pay than those attending education, but we did not find any evidence that prisoners who wanted to attend education were discouraged from doing so.

Recommendations

- 3.22** Prison and college managers should ensure that teaching continues to improve by extending quality assurance procedures to the vocational training delivered by the college's external partners.
- 3.23** There should be enough activity places for all eligible prisoners to be allocated to education, work or training.
- 3.24** Monitoring arrangements should ensure prisoners attend scheduled activity sessions or return to them if they leave an activity to attend a medical or other appointment.
- 3.25** A detailed and comprehensive curriculum needs analysis should be undertaken to inform education, skills and work provision.
- 3.26** Technical difficulties with the virtual campus should be resolved so that staff can use the facility to help prisoners find work after their release.

Quality of provision

- 3.27** Tutors and instructors had suitably high expectations of prisoners. They used creative and challenging teaching methods and resources to develop prisoners' interest in learning. Most tutors planned and taught lessons and vocational training sessions well. Teaching, learning and assessment engaged, motivated and challenged most prisoners, including those with special educational needs or barriers to learning, who achieved as well as their peers.
- 3.28** Tutors supported prisoners well to develop relevant skills and understanding during classroom sessions, workshops and prison employment. They facilitated a variety of practical and theory activities effectively. Prisoners took part in lively and interesting discussions, group work and independent projects. They worked confidently in groups and on their own, which helped them prepare for employment on release.
- 3.29** Prisoners made good progress in lessons and in vocational training. They developed knowledge, skills and understanding and, in workshops, achieved standards comparable with those expected in industry. Tutors and instructors used individual learning plans to set suitably challenging targets and to monitor prisoners' achievements. Prisoners had a reasonably clear grasp of what they had done well and what they needed to do to improve.
- 3.30** Tutors provided clear and constructive feedback on prisoners' work and guidance on how they could improve their work further. Tutors were particularly skilled at ensuring that prisoners learned to apply the English and maths skills they had developed to their job and in vocational training.
- 3.31** Learning support assistants provided effective support in lessons and in vocational training. Staff identified prisoners' learning needs and abilities promptly and deployed learning support assistants well to meet the needs of individual prisoners. Peer mentoring was good. Mentors were well trained and supported prisoners to develop their skills, especially those who found it difficult to participate in learning or whose reading and writing skills were weak.
- 3.32** A few tutors failed to carry out sufficient checks on whether prisoners had understood what they had learned sufficiently well, especially in vocational subjects. Although most tutors used question and answer techniques skilfully during sessions, they were not used consistently across all classroom and vocational sessions.

- 3.33** Some of the work in the commercial workshops had a low skill content and did not offer prisoners sufficient opportunities to develop higher-level skills. This type of work failed to motivate prisoners and they did not develop their skills sufficiently.

Recommendations

- 3.34** Tutors should make regular and frequent checks on what prisoners have learned, especially in vocational training sessions, through, for example, better use of question and answer techniques.
- 3.35** Prisoners undertaking routine, mundane work in the commercial workshops should be able to develop higher-level skills to better prepare for work.

Personal development and behaviour

- 3.36** Prisoners developed good vocational, personal and social skills likely to contribute to a reduction in reoffending. The prison had established three 'employer academies' linked to vocational training offered at the establishment. Each employer had an onsite presence and could ensure that prisoners received bespoke training that would help them gain the skills necessary to work for the employer on their release. Many prisoners received a job offer while still in custody, either through the academies or working with the prison's Jobcentre Plus team. Quarterly resettlement fairs also provided prisoners with the opportunity to meet with and learn about potential employers (see also paragraph 4.39).
- 3.37** The prison's extensive use of a network of prisoner peer mentor groups provided prisoners with the opportunity to develop their team-working skills and confidence and improve their behaviour. Peer mentors were held in high regard by other prisoners and were a positive role model for those seeking to use their time in custody productively. Mentors took their role seriously and were proud of the difference they could make, especially to vulnerable prisoners, such as those with mental ill health or substance misuse problems.
- 3.38** Prisoners' behaviour in classrooms, workshops and in industries was generally very good. They were courteous and respectful towards their fellow prisoners as well as to staff and visitors and most were well motivated and keen to attend purposeful activities. However, on a few occasions, staff had to remove prisoners whose behaviour was disruptive, often because they had ingested a psychoactive substance either when they arrived at an activity or during the activity itself.
- 3.39** Prisoners produced work of a standard consistent with the level of programme they were following. With the help of prisoner learning mentors and skilled and enthusiastic staff, many prisoners had produced high-quality work, especially in construction skills, music media, employability and painting and decorating.
- 3.40** Although attendance at scheduled activities had improved since the previous inspection, punctuality remained an area of concern, mostly because a few prisoners decided to take their time when making their way towards the scheduled activity session and prison staff failed to challenge them or move them on.

Recommendation

- 3.41** Prisoners' punctuality should be improved and prisoners should move swiftly to their scheduled activity.

Outcomes and achievements

- 3.42** Achievement rates for most classroom-based and vocational qualifications had increased since the previous inspection – most notably in the previous two years – and were now high, with few differences in achievement between different groups of prisoners. All groups of prisoners, including those with learning difficulties and/or disabilities, developed vocational skills and achieved well.
- 3.43** Achievements were particularly high in English and maths at entry level and at level 1, but were especially high at level 2, which we rarely see in offender learning. The number of prisoners who finished their studies was also high on most courses. Achievements on a few courses, such as catering and painting and decorating, were too low or not consistently high.
- 3.44** Most prisoners, including those with complex special educational needs, made good progress, many reporting growing confidence and better personal, social and employment skills.

Recommendation

- 3.45** **Achievement rates on the few underperforming courses should be improved in line with those of other vocational and classroom-based courses.**

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 In our survey, 56% of men said they had children under the age of 18 and only 19% said staff had encouraged them to stay in touch with their family and friends. Family work was underdeveloped, there was no family support worker and no family or parenting courses.
- 4.2 The prison did not monitor visits to identify men who did not receive visitors. Only 33% of men in our survey said it was very or quite easy for family and friends to get to Ranby. However, monthly family days, which had begun shortly before the last inspection, were now embedded. They were well run and prisoners and their visitors appreciated them, although those on the basic level of the incentives and earned privileges (IEP) scheme were excluded.
- 4.3 In our survey, 93% of men said they could use a phone every day (if they had credit). However, 58% said they had problems sending or receiving mail, compared with 45% in similar prisons. All mail was screened for new psychoactive substances (NPS)¹⁵ and, although proportionate, it often delayed the delivery of mail by up to 48 hours (see paragraph 1.29).
- 4.4 Delays in the delivery of mail were offset by the Email a Prisoner scheme, which allowed prisoners to send and receive emails with scanned attachments of photographs and pictures. In the three months prior to the inspection, almost 7,000 emails were sent to prisoners who, in turn, sent almost 4,000 replies.
- 4.5 Visiting arrangements were satisfactory. The visitors' centre was welcoming, but offered visitors little information and required refurbishment. In our survey, only 35% of men who had received a visit said they usually started or finished on time, compared with 56% of men in similar prisons. Visitors told us visits could start up to 20 minutes late. However, most visitors told us staff treated them with respect.
- 4.6 Prisoners wore a bib to identify themselves during visits. However, the atmosphere in the visits hall was relaxed and had been improved by the addition of soft seating. There was a pleasant garden where prisoners on the enhanced level of the IEP scheme could receive their visitors (see Appendix III).

¹⁵ NPS generally refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vaporised and inhaled in e-cigarettes and other devices.

- 4.7** There was a good play area and a worker from the Children's Links charity supervised children during visits. The prison had also opened a shop providing food and drinks for visitors. Staff knew which prisoners were subject to child protection measures.

Recommendation

- 4.8 Prisoners should be supported in maintaining contact with their family.**

Reducing risk, rehabilitation and progression

Expected outcomes:

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

- 4.9** The prison had an up-to-date reducing reoffending strategy, but it was not based on a comprehensive needs analysis nor was it specific to the diverse range of prisoners held. However, plans were in place to undertake more comprehensive needs analyses, including a survey of prisoners' views.
- 4.10** A reducing reoffending committee met bi-monthly and was reasonably well attended. A prison-wide action plan was in place, but it was not reviewed so it was difficult to establish the progress made in that forum.
- 4.11** Most prisoners were serving over 12 months in custody and 40% were serving sentences of four years or more. Among the latter group, about a third had less than a year left to serve when they arrived, making it hard to focus on progression. Among the population, 30% presented a high risk of harm.
- 4.12** Offender management unit (OMU) staff worked together as a team. Prison officer offender supervisors were mentored by seconded probation officers and relationships were supportive. Case administration work was delivered well and monitored robustly.
- 4.13** About a quarter (240) of all eligible prisoners did not have an up-to-date offender assessment system (OASys) report or sentence plan and about 40% of all recent arrivals had been transferred to the prison without either. In our survey only 51% of prisoners said they had a sentence plan (51% compared with 62%).
- 4.14** Prison officer offender supervisors mostly completed a shortened version of the OASys report, but their reports were good. The OMU had maintained an expectation that OASys reports and sentence plans would be reviewed every year, but it was proving difficult to achieve and some were out of date. Only half the OASys reports completed by community-based offender managers in the cases we reviewed were up to date and some still had the same sentence plan as at a previous prison.
- 4.15** OMU staff provided prisoners with a timely induction. They were promptly allocated an offender supervisor or probation officer based on their risks – higher risk cases were allocated to a prison-based probation officer. Dedicated offender supervisors managed prisoners subject to Integrated Offender Management (IOM)¹⁶ in Leicester and Nottingham, an appropriately focused model.

¹⁶https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/406868/IOM_Key_Principles_refresh_supplement_final.pdf

- 4.16** In most of the cases we reviewed, prisoners had been seen by their offender supervisor within 10 days of their arrival, which was good. However, some prisoners said they struggled to receive ongoing help from their offender supervisor, and we found too many requests for contact that had not been answered, including some that were over two months old. This poor practice left prisoners frustrated. In addition, many prisoners explained how the lack of contact with their offender supervisor had negatively affected their progression. We reviewed 10 cases managed by prison officer offender supervisors to identify their level of ongoing contact. In some cases, there was no recorded contact for many months, which was poor. Where contact had been made, it was mainly in response to events, such as the completion of an OASys report. There were no set expectations about the frequency of contact and no management oversight to monitor it. In our survey, only 36% of prisoners said they were receiving help to achieve their targets. (See main recommendation S49.)
- 4.17** Contact levels were better in higher risk cases, but it often peaked around events in a prisoner's sentence, such as sentence planning or parole board hearings. However, it was clear from discussions that the probation officers' knowledge of those on their caseloads was better and their case management was more structured than that of their prison officer colleagues.
- 4.18** In all the cases we inspected, we found only a very small number of men involved in any form of offending behaviour work. Offender supervisors and seconded probation officers acknowledged that they could not carry out structured one-to-one work with prisoners and that, as a result, there was a lack of focus on addressing their offending behaviour. Most said it was due to high caseloads and prison officer offender supervisors' previously high levels of redeployment to operational duties.
- 4.19** The new home detention curfew (HDC) eligibility criteria had been implemented successfully and the OMU's administrative work was largely up to date. Some assessments had been delayed because responses from community-based offender managers were late. In other cases, approved for HDC, the lack of hostel places in the community left some men in custody months after their release date.

Recommendations

- 4.20** **The reducing reoffending strategy should be based on a comprehensive needs analysis to ensure that resettlement and offender management provision meets the diverse population's needs.**
- 4.21** **All prisoners arriving at HMP Ranby should have an up-to-date and good quality OASys report and sentence plan to inform their allocation and promote progression.**
- 4.22** **The number of hostel places for HDCs should be increased so prisoners can be released on their earliest eligibility date.**

Public protection

- 4.23** Contact restrictions for prisoners presenting a risk to the public were appropriately applied. Restrictions were reviewed regularly and removed when the evidence suggested it was safe to do so. Applications for contact with named children were managed appropriately.
- 4.24** Approximately 25% of prisoners due to be released in the three months after our inspection were assessed as presenting a high risk of harm to others. Risk management planning for the

release of these prisoners was reasonably good overall, but community-based offender managers' involvement was variable. In one case, the prisoner had been approved for release, but spent an additional four months in custody because a lack of planning meant he was not allocated a place in approved premises sooner.

- 4.25** The scope of the inter-departmental risk management team (IDRMT) was limited – it only reviewed cases already confirmed as requiring multi-agency public protection arrangements (MAPPA) at levels 2 (requiring the active involvement of one or more agency) and 3 (prisoners on the highest risk level). It did not provide oversight of other high-risk cases that potentially needed additional risk management action to be taken in preparation for release. Poor attendance at the IDRMT meeting further undermined its effectiveness – in recent months only OMU staff had attended.
- 4.26** Administrative staff worked hard to identify prisoners' agreed MAPPA management level prior to their release. We reviewed 10 reports submitted to MAPPA meetings. Almost half were not sufficient because they lacked an analysis of risk factors and simply described the prisoners' behaviour in custody, while others relied too much on records on P-Nomis (database used in prisons for the management of offenders). None drew on information from the full range of prison departments.

Recommendation

- 4.27** **The effectiveness of the IDRMT should be improved – staff from all relevant departments should attend meetings, and reviews of all high-risk prisoners due for release should be undertaken so information can be shared, robust action plans developed and progress monitored.**

Categorisation and transfers

- 4.28** Categorisation reviews were up to date and 880 had been completed in the six months leading up to our inspection. However, the lack of completed OASys reports, some offender supervisors' lack of involvement and delays in assessments for accredited programmes hindered progression for some. In a few cases we looked at, progress between categorisation reviews was not sufficiently addressed. For example, in one case, a prisoner had his re-categorisation rejected pending an assessment for an accredited programme, but little was done to ensure the assessment was completed prior to the next review date. Other prisoners complained about being unable to get a place on the Thinking Skills Programme (TSP) because they were considered unsuitable, and as a result had been denied re-categorisation and progression to open conditions, which meant they felt they were stuck at HMP Ranby (see paragraph 4.32).
- 4.29** During the inspection, 66 category D prisoners were held at Ranby, about 50% more than at the last inspection. The prison received men from HMP Sudbury who failed to comply with open conditions, but who were difficult to transfer. About a third of the category D population were waiting for HM Prison and Probation Service transport or a place at an open prison. Some men had been waiting several months.
- 4.30** There continued to be problems transferring prisoners to a prison in their local area prior to release. In the previous six months, the prison had managed to transfer 45 prisoners, but had released a further 109 to a different resettlement area.

Recommendation

- 4.31 Category D prisoners should be able to move to open conditions without delay – the number of places should be increased and the availability of transport should be more flexible.**

Interventions

Expected outcomes:

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

- 4.32** Prisoners were generally appropriately prioritised for a place on an accredited programme. The Foundations of Rehabilitation programme aimed to improve prisoners' thinking and problem-solving skills. However, only 20 prisoners in the previous year had completed it. The prison also ran the TSP, as well as the Resolve and Kaizen programmes, which address violent behaviour, all of which were accredited. Prisoners were now prioritised for the TSP if they presented a higher risk of being reconvicted. This meant some prisoners were no longer suitable, and those who wanted to demonstrate progression so they could move to an open prison could not do so and were left feeling frustrated. The prison did not have a strategy for addressing the offending-related needs of those who were not suitable for an accredited programme, even though the Foundations of Rehabilitation programme might have provided them with a good alternative. The prison did not have any provision to address offending behaviour linked to domestic violence, but we were told the accredited programme Building Better Relationships would be introduced later in 2018.
- 4.33** Prisoners received good support to address their housing problems, including help on arrival to maintain or end tenancies. Prior to release prisoners were seen by a trained housing adviser and support from other specialist housing advisers and agencies could be accessed. The community rehabilitation company (CRC) ran a course looking at housing options, but it had only been delivered twice. A peer adviser saw prisoners on the day of their release to ask them about their planned housing status. Data based on prisoners' self-disclosed housing plans showed that over the previous six months, about 9% said they would either be homeless or only had very short-term accommodation. Longer term outcomes were not monitored.
- 4.34** Help with financial problems was good. Prisoners could open bank accounts – 99 had been opened in the previous six months. The CRC helped prisoners to manage their debts and a large number had been resolved over the previous few months. Complex debt work was provided as part of a European Social Fund project, and prisoners had phone access to specialist debt advisers. Prisoners could also make benefit claims prior to release. The CRC ran a money management course, but it had only been delivered twice in the five months up to the inspection.

Recommendation

- 4.35 A comprehensive strategy should be developed to provide progression opportunities for prisoners who are not offered a place on an accredited programme.**

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.

- 4.36** The demand for services was reasonably high and about 80 prisoners were released each month.
- 4.37** The CRC provision was reasonably good. Staff made good use of peer workers who screened prisoners on arrival as well as prior to release to identify their resettlement needs. Resettlement plan reviews were undertaken 12 weeks before release, but they did not include those being released early on HDC, which was a significant gap. The reviews were good, although they were not always recorded on P-Nomis promptly enough.
- 4.38** CRC caseworkers were well informed and persistent in their work with prisoners and they understood risk of harm issues, which informed their work. They exchanged information with community-based offender managers, but more needed to be done to ensure OMU staff were included.
- 4.39** New quarterly resettlement fairs provided prisoners with the opportunity to meet potential employers. However, the number of other resettlement courses delivered by the CRC was still very limited (see paragraphs 4.33 and 4.34).
- 4.40** Practical release arrangements were good, but those being released did not have the opportunity to be met by a mentor or receive support during the first few stages of their release. However, a new initiative based in the visitors' centre aimed to provide a contact point for those who were being released, but the initiative was still in the very early stages of development.

Recommendation

- 4.41 Resettlement plan reviews should be undertaken for all those nearing their HDC eligibility date to ensure they do not miss out on receiving help, guidance or support in preparation for their release.**

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 The focus on violence and drug reduction should continue. Plans to reduce the availability of drugs and violence should be embedded and their impact measured. (S46)
- 5.2 Prisoners subject to ACCT procedures should be better assessed and monitored. Planning should be improved and should include effective care planning and better attendance at review meetings. Recommendations arising from the PPO's investigation into previous deaths should be implemented consistently. (S47)
- 5.3 Psychosocial interventions for prisoners with substance misuse problems should be sufficient to meet their individual and group treatment needs. Drug recovery workers should attend relevant multidisciplinary meetings, including regular individual treatment reviews. (S48)
- 5.4 Offender supervisor contact should be improved, particularly for prisoners presenting a high risk of harm. Contact should be meaningful and focus on risk reduction and progression. (S49)

Recommendations

To HM Prison and Probation Service

Reducing risk, rehabilitation and progression

- 5.5 All prisoners arriving at HMP Ranby should have an up-to-date and good quality OASys report and sentence plan to inform their allocation and promote progression. (4.21)
- 5.6 The number of hostel places for HDCs should be increased so prisoners can be released on their earliest eligibility date. (4.22)
- 5.7 Category D prisoners should be able to move to open conditions without delay – the number of places should be increased and the availability of transport should be more flexible. (4.31)

Recommendations

To the governor

Early days in custody

- 5.8 All prisoners should receive all relevant elements of the induction programme. (1.7)

Managing behaviour

- 5.9** Special accommodation records should provide a comprehensive record of observations and occurrences. (1.22)
- 5.10** The prison should monitor the usage, conditions, occupancy and regime of the segregation unit to improve conditions, identify trends and patterns of usage and address any identified concerns. (1.25)

Staff-prisoner relationships

- 5.11** The enabling environment on house block 3 South should be monitored to establish whether it improved relationships and behaviour. (2.5)

Daily life

- 5.12** Prisoners should not be required to share cells designed to accommodate one person. (2.11)
- 5.13** The prison should explore and address prisoners' negative perceptions of the confidentiality of the applications and complaints processes. (2.25)
- 5.14** Legal visitors should be able to interview their clients in private. (2.26)

Equality, diversity and faith

- 5.15** Equality monitoring tool data should be sent to the prison promptly and any adverse data should be swiftly investigated. (2.33)
- 5.16** DIRFs should receive a prompt response. (2.34)
- 5.17** Arrangements should be made so that prisoners can disclose their protected characteristics in confidence. (2.45)
- 5.18** The prison should ensure the service of halal food is appropriate. (2.46)
- 5.19** The needs of prisoners with disabilities should be met and should include the provision of reasonable adjustments, up-to-date evacuation plans and wing care plans. (2.47)
- 5.20** Provision for younger prisoners should be developed in consultation with this group. (2.48)

Health, well-being and social care

- 5.21** The memorandum of understanding for social care should be reviewed and updated. (2.78)
- 5.22** Patients with mental health conditions should have prompt access to evidence-based treatments, including psychotherapeutic groups, to meet their needs. (2.85)
- 5.23** Opiate substitution prescribing should be flexible, based on individual needs and conform to national guidelines. Opiate substitution should be administered in a timely fashion so prisoners can attend work and health appointments. (2.93)
- 5.24** All cells should have individual lockable storage facilities for medicines. (2.100)
- 5.25** A published out of hours' policy should be introduced. (2.101)

5.26 The drugs and therapeutics committee should ensure that there are robust up-to-date controlled drugs SOPs, which ensure legal requirements and best practice are followed. (2.102)

5.27 All prisoners on the waiting list should receive prompt access to dentistry following the installation of new equipment. (2.105)

Time out of cell

5.28 Library and gym use should be monitored so that data can be obtained on which groups of prisoners are less likely to visit the facilities to inform remedial action. (3.11)

Education, skills and work activities

5.29 Prison and college managers should ensure that teaching continues to improve by extending quality assurance procedures to the vocational training delivered by the college's external partners. (3.22)

5.30 There should be enough activity places for all eligible prisoners to be allocated to education, work or training. (3.23)

5.31 Monitoring arrangements should ensure prisoners attend scheduled activity sessions or return to them if they leave an activity to attend a medical or other appointment. (3.24)

5.32 A detailed and comprehensive curriculum needs analysis should be undertaken to inform education, skills and work provision. (3.25)

5.33 Technical difficulties with the virtual campus should be resolved so that staff can use the facility to help prisoners find work after their release. (3.26)

5.34 Tutors should make regular and frequent checks on what prisoners have learned, especially in vocational training sessions, through, for example, better use of question and answer techniques. (3.34)

5.35 Prisoners undertaking routine, mundane work in the commercial workshops should be able to develop higher-level skills to better prepare for work. (3.35)

5.36 Prisoners' punctuality should be improved and prisoners should move swiftly to their scheduled activity. (3.41)

5.37 Achievement rates on the few underperforming courses should be improved in line with those of other vocational and classroom-based courses. (3.45)

Children and families and contact with the outside world

5.38 Prisoners should be supported in maintaining contact with their family. (4.8)

Reducing risk, rehabilitation and progression

5.39 The reducing reoffending strategy should be based on a comprehensive needs analysis to ensure that resettlement and offender management provision meets the diverse population's needs. (4.20)

- 5.40** The effectiveness of the IDRMT should be improved – staff from all relevant departments should attend meetings, and reviews of all high-risk prisoners due for release should be undertaken so information can be shared, robust action plans developed and progress monitored. (4.27)

Interventions

- 5.41** A comprehensive strategy should be developed to provide progression opportunities for prisoners who are not offered a place on an accredited programme. (4.35)

Release planning

- 5.42** Resettlement plan reviews should be undertaken for all those nearing their HDC eligibility date to ensure they do not miss out on receiving help, guidance or support in preparation for their release. (4.41)

Examples of good practice

- 5.43** The weekly tactical violence reduction meeting took remedial action to address emerging threats and shared information, supporting and complementing the work of the monthly safer prisons meeting. (1.16)
- 5.44** The provision of dedicated administration support ensured that most adjudication processes were completed, which supported the prison in tackling antisocial behaviour. (1.18)
- 5.45** Prisoners could buy goods from a tuck shop when they first arrived, which reduced the likelihood of them getting into debt. (2.18)
- 5.46** The monthly awareness-raising sessions in the waiting room were an excellent use of time and prisoners who might otherwise have shown little interest participated in the sessions. (2.63)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy chief inspector
Alison Perry	Team leader
Sandra Fieldhouse	Inspector
Martyn Griffiths	Inspector
Deri Hughes-Roberts	Inspector
Ian Macfadyen	Inspector
Gordon Riach	Inspector
Paul Rowlands	Inspector
Jonathan Tickner	Inspector
Charli Bradley	Researcher
Catherine Shaw	Researcher
Joe Simmonds	Researcher
Emily Spilman	Researcher
Patricia Taflan	Researcher
Paul Tarbuck	Lead health and social care inspector
Maureen Jamieson	Health and social care inspector
Tania Osborne	Health and social care inspector
Richard Chapman	Pharmacist
Lynda Day	Care Quality Commission inspector
Aimee Everett	Care Quality Commission inspector
Jai Sharda	Lead Ofsted inspector
Jane Hughes	Ofsted inspector
Steve Lambert	Ofsted inspector
Phil Romain	Ofsted inspector

Appendix II: Progress on recommendations from the last report

The following is a summary of the main findings from the last report and a list of all the recommendations made, organised under the four tests of a healthy prison. The reference numbers at the end of each recommendation refer to the paragraph location in the previous report. If a recommendation has been repeated in the main report, its new paragraph number is also provided. The recommendations in the main body of the report are based on the fifth edition of Expectations, but those below are based on the fourth edition. Their order may therefore differ slightly from the main report.

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2015, the prison was still not safe for most prisoners. Most prisoners said they had been treated well by escort staff. Reception was efficient and early days support was much improved. Far too many men still felt unsafe, although fewer than at our last inspection. The level of incidents and violence remained very high, particularly on house blocks 1, 2 and 3; some of which was very serious. Some violence reduction processes were improving, but significant challenges with poor behaviour remained. A high number of prisoners had taken their own lives, and we found some poor ACCT documents. Safeguarding arrangements were reasonable. Security was well aware of and responding to the challenges faced. The prevalence of new psychoactive substances (NPS) was very high. The incentives and earned privileges (IEP) scheme was undermined by use of the 'nil pay' process. The numbers of adjudications, use of force and segregation were all high. Clinical and psychosocial substance misuse support was appropriate. Outcomes for prisoners were poor against this healthy prison test.

Main recommendations

Urgent action is needed to stabilise the prison and to make it safer. NOMS should temporarily reduce the size of the prison's population to help stabilise it, and in the medium term simplify the role of the prison as a working prison only. (S46)

Achieved

An effective, whole prison strategy to reduce violence and its contributory causes should be put in place, based on consultation with staff and prisoners and an analysis of the causes of high levels of violence. (S47)

Achieved

The quality of assessment, planning and monitoring for prisoners subject to ACCT procedures should be improved and include effective care planning and better attendance at review meetings. (S48)

Not achieved

Recommendations

All requested intelligence-led searches should be completed. (1.46)

Achieved

There should be enough staff supervising to provide a safe environment during mass movement of prisoners. (1.47)

Achieved

The IEP scheme should be equitably applied to ensure full compliance with the regime. (1.52)

Achieved

Oversight and recording arrangements for use of force should be robust enough to provide reassurance that it is used proportionately and only as a last resort. (1.61)

Achieved

The transfer out policy should be evaluated and poor behaviour by prisoners should be managed without routinely resorting to transfers out. (1.68)

Achieved

Substance misuse services should be sufficient to meet demand. (1.75)

Not achieved

All prisoners prescribed methadone should be consistently located on the drug treatment unit. (1.76)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2015, the quality of residential accommodation varied; house blocks 1 to 3 needed constant attention to keep them decent. Recent management action had sought to address a range of prisoners' frustrations, and the focus needed to be sustained and developed. Most staff were respectful but some were extremely stretched which affected their ability to interact with prisoners. Equality and diversity work was developing but there were still some important gaps. Faith provision was good and complaints were reasonably well managed. There were few legal services. Health care provision was clinically sound but services were under pressure because of the NPS incidents. Food was good and canteen arrangements were reasonable. Outcomes for prisoners were reasonably good against this healthy prison test.

Recommendations

Recent management action to address a range of prisoners' frustrations by improving cellular accommodation, cleanliness and the applications process should be sustained and developed. (2.10)

Partially achieved

The cell call system should be routinely monitored by a senior manager and explanations provided for delays. (2.11)

Achieved

Strategic management of equality needed to be strengthened by more consistent attendance by relevant functional areas at equality action team meetings, a needs analysis of the population and regular monitoring of outcomes for prisoners. (2.25)

Achieved

Support for all the protected groups should be adequate to understand their concerns and, where possible, meet their specific needs. (2.34)

Not achieved

Legal services should be provided and resources to assist prisoners with their legal problems should be kept up to date. (2.49)

Not achieved

Out-of-hours provision should be sufficient to meet the needs and health challenges presented by prisoners. (2.61)

Achieved

Local responses to prisoners' health care questions and concerns should be quality assured to ensure they address the issues raised before being sealed and securely sent back to the prison. (2.62)

Achieved

Waiting times for smoking cessation services should be equivalent to those in the community. (2.63)

Achieved

Waiting times should be published and waiting times for physiotherapy services should be equivalent to those found in the community. (2.69)

Achieved

Men who require routine re-prescriptions should be periodically seen and reviewed by the GP. (2.70)

Achieved

Failure-to-attend rates should be monitored for all clinics, the reasons for non-attendance explored, and the results published. (2.71)

Achieved

The drugs and therapeutics committee should ensure that all the appropriate policies, including the in-possession policy, are in place, in date and adhered to. (2.78)

Achieved

Full records of administration of medicines should be made, including a record of all refusals of medication or failure to attend, to enable follow up. Medicines should be administered at the clinically appropriate time. (2.80)

Not achieved

Prescribing data on potentially tradable medicines and prisoners on in-possession medicines should be routinely reviewed to inform practice and prisoners should be able to store their medicines securely. (2.81)

Achieved

Prisoners should be assessed promptly following receipt of referral. (2.92)

Achieved

Prisoners should be able to place a shop order on the day after they arrive to minimise bullying. (2.104)

Achieved

Purposeful activity

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

At the last inspection, in 2015, fully employed prisoners had reasonable time out of cell but far too many were locked up during the working day. Overall learning and skills provision required improvement. The range of education was appropriate but the quality of some teaching and learning was not good enough. There were some good vocational training opportunities, and success rates were high, but more were needed. In some activities, attendance, punctuality and the development of a work ethic were not good enough. Library and PE provision needed development. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

The prison should provide a full purposeful working day for all the men held, attendance and punctuality should be good and a good work ethic promoted. (S49)

Partially achieved

Recommendations

Quality systems should be systematically and consistently applied to ensure improvements to the quality of teaching, learning and assessment, and to provide feedback to learners on their work, particularly in English and mathematics. (3.16)

Achieved

More vocational training courses and a level 2 plumbing course should be provided. (3.22)

Partially achieved

English and mathematics teachers should plan adequately for individual learning and should monitor and record learning to provide clear information about learners' progression. They should ensure that good quality lesson resources are used and provide detailed feedback to help learners to improve. (3.32)

Achieved

Tutors' knowledge of equality and diversity issues should be developed to improve their confidence in challenging stereotypical views and to provide more frequent assessment of progress in all workshops. (3.33)

Achieved

Teachers and instructors should focus on developing and accrediting prisoners' employability skills and should recognise and record the valuable personal and social skills that are developed. (3.38)

Achieved

The progress and achievements of English and mathematics learners should be improved so that they are at least good. (3.41)

Achieved

The use of the library by different groups should be monitored and the number of library closures for operational reasons should be reduced. (3.48)

Partially achieved

Privacy screens should be provided in the gym showers. (3.56)

Not achieved

The number of gym closures for operational reasons should be reduced and better use should be made of the outside sports field. (3.57)

Achieved

Resettlement

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

At the last inspection, in 2015, strategic management of resettlement was developing. Offender management was overstretched and not delivering a quality service to prisoners. Some inroads had been made to the OASys (offender assessment system) backlog but it remained considerable. Contact between offender management unit (OMU) staff and prisoners was poor, causing considerable frustration. Too much case work needed improvement. Public protection work was reasonable but multi-agency public protection arrangements (MAPPAs) needed attention. Support in the resettlement pathways was reasonable overall, and children and families work had improved. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

The backlog of offender assessment system (OASys) and home detention curfew assessments should be tackled and all relevant prisoners should be seen promptly by their offender supervisor to be assessed, have relevant targets set and risks addressed. Contact should be regular and meaningful. (S50)

Not achieved

Recommendations

OASys data should be used to inform the needs analysis. (4.9)

Not achieved

All offender supervisors should receive feedback on the quality of their work and appropriate support to improve the quality of risk assessment, contingency and pre-release planning. (4.22)

Achieved

Confirmation of MAPPAs management levels should be sought six months before release. (4.25)

Achieved

The CRC team should be fully staffed, including 'meet-at-the-gate' volunteers, and all prisoners and staff should understand their role. (4.37)

Not achieved

The National Careers Service should develop suitable arrangements to track prisoners' education, work or training outcomes systematically following their release. (4.43)

Not achieved

Methods of identifying prisoners during visits should be respectful and proportionate to the risks presented. (4.53)

Not achieved

All officers supervising the visits room should be aware of prisoners subject to child contact restrictions. (4.54)

Achieved

A family support worker should be employed to help prisoners maintain contact with their family and support those subject to child protection procedures. (4.55)

Not achieved

The need to address violence in relationships should be assessed and a programme provided if necessary. (4.62)

Not achieved

The extent of historic abuse among the population should be identified and specific services introduced to meet need. (4.64)

Achieved

Appendix III: Photographs

Reception holding room



Tuck shop



Visits garden



Appendix IV: Prison population profile

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

Status	18–20 yr olds	21 and over	%
Sentenced	-	860	86.95%
Recall	-	69	6.67
Convicted unsentenced	-	-	
Remand	-	-	
Civil prisoners	-	-	
Detainees	-	-	
Total		989	

Sentence	18–20 yr olds	21 and over	%
Unsentenced	-	0	
Less than 6 months	-	11	1.11%
6 months to less than 12 months	-	32	3.23%
12 months to less than 2 years	-	125	12.63
2 years to less than 4 years	-	436	44.08%
4 years to less than 10 years	-	289	29.22%
10 years and over (not life)	-	32	3.23%
ISPP (indeterminate sentence for public protection)	-	30	3.03%
Life	-	37	3.74%
Total		989	

Age	Number of prisoners	%
Please state minimum age here:	21	2.12%
Under 21 years	0	0
21 years to 29 years	397	40.14%
30 years to 39 years	344	34.79%
40 years to 49 years	184	18.60%
50 years to 59 years	55	5.60%
60 years to 69 years	9	0.9%
70 plus years	0	
Please state maximum age here:	68	
Total	989	

Nationality	18–20 yr olds	21 and over	%
British	-	972	98.28%
Foreign nationals	-	17	1.72%
Total		989	

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced	-	-	
Uncategorised sentenced	-	-	
Category A	-	-	
Category B	-	-	
Category C	-	926	93.62%
Category D	-	63	6.38%
Other	-	-	
Total		989	

Ethnicity	18–20 yr olds	21 and over	%
White			
British	-	708	71.58%
Irish	-	6	0.60%
Gypsy/Irish Traveller	-	23	2.32%
Other white	-	6	0.60%
Mixed			
White and black Caribbean	-	50	5.05%
White and black African	-	4	0.40%
White and Asian	-	5	0.50%
Other mixed	-	6	0.60%
Asian or Asian British			
Indian	-	11	1.11%
Pakistani	-	47	4.75%
Bangladeshi	-	3	0.30%
Chinese	-	-	-
Other Asian	-	5	0.50%
Black or black British			
Caribbean	-	71	7.17%
African	-	23	2.32%
Other black	-	19	1.92%
Other ethnic group			
Arab	-	1	0.10%
Other ethnic group	-	6	0.60%
Not stated	-	1	0.10%
Total		989	

Religion	18–20 yr olds	21 and over	%
Baptist	-		
Church of England	-	175	15.97%
Roman Catholic	-	158	15.97%
Other Christian denominations	-	125	12.63%
Muslim	-	134	13.54%
Sikh	-	5	0.50%
Hindu	-	2	0.20%
Buddhist	-	13	1.31%
Jewish	-	4	0.40%
Other	-	58	5.86%
No religion	-	315	31.85%
Total		989	

Other demographics	18–20 yr olds	21 and over	%
Veteran (ex-armed services)	-	14	1.41%
Total		989	

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	-	-	156	16.68%
1 month to 3 months	-	-	225	22.75%
3 months to 6 months	-	-	207	20.93%
6 months to 1 year	-	-	267	26.99%
1 year to 2 years	-	-	91	9.20%
2 years to 4 years	-	-	29	2.93%
4 years or more	-	-	13	1.31%
Total			989	

Sentenced prisoners only

	18–20 yr olds	21 and over	%
Foreign nationals detained post sentence expiry	-	0	
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions).	-	54	
Total			

Unsentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	-	-	-	-
1 month to 3 months	-	-	-	-
3 months to 6 months	-	-	-	-
6 months to 1 year	-	-	-	-
1 year to 2 years	-	-	-	-
2 years to 4 years	-	-	-	-
4 years or more	-	-	-	-
Total				

Main offence	18–20 yr olds	21 and over	%
Violence against the person	-	219	22.14%
Sexual offences	-	1	0.10%
Burglary	-	190	19.21%
Robbery	-	136	13.75%
Theft and handling	-	31	3.13%
Fraud and forgery	-	7	0.70%
Drugs offences	-	160	16.17%
Other offences	-	255	25.78%
Civil offences	-	0	0
Offence not recorded /holding warrant	-	0	0
Total		989	

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 4 June 2018 the prisoner population at HMP Ranby was 987. Using the sampling method described above, questionnaires were distributed to 218 prisoners. We received a total of 171 completed questionnaires, a response rate of 78%. This included one questionnaire completed via face-to-face interview. Nine prisoners declined to participate in the survey and 38 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 Ranby. 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 Ranby 2018 compared with those from other HMI Prisons surveys²¹

- Survey responses from HMP Ranby in 2018 compared with survey responses from the most recent inspection at all other category C prisons.
- Survey responses from HMP Ranby in 2018 compared with survey responses from other local prisons inspected since September 2017.
- Survey responses from HMP Ranby in 2018 compared with survey responses from HMP Ranby in 2015.

Comparisons between different residential locations within HMP Ranby 2018

- Responses of prisoners on the older, single occupancy accommodation (house block 5) compared with those from the rest of the establishment.

Comparisons between sub-populations of prisoners within HMP Ranby 2018²²

- White prisoners’ responses compared with those of prisoners from black or minority ethnic groups.
- Muslim prisoners’ responses compared with those of non-Muslim prisoners.
- Disabled prisoners’ responses compared with those who do not have a disability.
- Responses of prisoners with mental health problems compared with those who do not have mental health problems.
- Responses of prisoners aged 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.²³

In the comparator analyses, statistically significant differences are indicated by shading.²⁴ Results that are significantly more positive are indicated by green shading and results that are significantly more negative are indicated by blue shading. Orange shading has been used to show a statistically significant difference in demographic or other background details. If there is no shading, any difference between the two results is not statistically significant and may have occurred by chance. Grey shading indicates that there is no valid comparative data for that question.

Filtered questions are indented and preceded by an explanation in italics of how the filter has been applied. In the comparator analyses, percentages for filtered questions refer to the number of

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

²¹ 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.

²² These analyses are carried out on summary data from selected survey questions only.

²³ A minimum of 10 responses which must also represent at least 10% of the total response.

²⁴ 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.

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 house block are you currently living on?	
	House block 1	42 (25%)
	House block 2.....	46 (27%)
	House block 3.....	34 (20%)
	House block 5.....	28 (16%)
	House block 6.....	12 (7%)
	House block 7.....	9 (5%)
I.2	How old are you?	
	Under 21	0 (0%)
	21 - 25.....	39 (23%)
	26 - 29.....	27 (16%)
	30 - 39.....	54 (32%)
	40 - 49.....	39 (23%)
	50 - 59.....	7 (4%)
	60 - 69.....	3 (2%)
	70 or over.....	0 (0%)
I.3	What is your ethnic group?	
	White - English/ Welsh/ Scottish/ Northern Irish/ British	122 (72%)
	White - Irish.....	4 (2%)
	White - Gypsy or Irish Traveller.....	6 (4%)
	White - any other White background	0 (0%)
	Mixed - White and Black Caribbean.....	8 (5%)
	Mixed - White and Black African	0 (0%)
	Mixed - White and Asian.....	2 (1%)
	Mixed - any other Mixed ethnic background	2 (1%)
	Asian/ Asian British - Indian.....	0 (0%)
	Asian/ Asian British - Pakistani.....	8 (5%)
	Asian/ Asian British - Bangladeshi.....	0 (0%)
	Asian/ Asian British - Chinese.....	0 (0%)
	Asian - any other Asian Background	0 (0%)
	Black/ Black British - Caribbean.....	12 (7%)
	Black/ Black British - African	3 (2%)
	Black - any other Black/ African/ Caribbean background.....	1 (1%)
	Arab.....	0 (0%)
	Any other ethnic group	2 (1%)
I.4	How long have you been in this prison?	
	Less than 6 months.....	65 (39%)
	6 months or more	102 (61%)
I.5	Are you currently serving a sentence?	
	Yes	149 (88%)
	Yes - on recall.....	20 (12%)
	No - on remand or awaiting sentence.....	0 (0%)
	No - immigration detainee.....	0 (0%)

1.6	How long is your sentence?	
	Less than 6 months.....	9 (5%)
	6 months to less than 1 year.....	12 (7%)
	1 year to less than 4 years.....	85 (51%)
	4 years to less than 10 years.....	41 (24%)
	10 years or more.....	10 (6%)
	IPP (indeterminate sentence for public protection).....	5 (3%)
	Life.....	6 (4%)
	Not currently serving a sentence.....	0 (0%)

Arrival and reception

2.1	Were you given up-to-date information about this prison before you came here?	
	Yes.....	30 (18%)
	No.....	130 (77%)
	Don't remember.....	9 (5%)
2.2	When you arrived at this prison, how long did you spend in reception?	
	Less than 2 hours.....	89 (52%)
	2 hours or more.....	77 (45%)
	Don't remember.....	5 (3%)
2.3	When you were searched in reception, was this done in a respectful way?	
	Yes.....	142 (84%)
	No.....	19 (11%)
	Don't remember.....	9 (5%)
2.4	Overall, how were you treated in reception?	
	Very well.....	49 (29%)
	Quite well.....	100 (59%)
	Quite badly.....	14 (8%)
	Very badly.....	4 (2%)
	Don't remember.....	3 (2%)
2.5	When you first arrived here, did you have any of the following problems?	
	Problems getting phone numbers.....	32 (20%)
	Contacting family.....	32 (20%)
	Arranging care for children or other dependants.....	3 (2%)
	Contacting employers.....	5 (3%)
	Money worries.....	30 (18%)
	Housing worries.....	22 (13%)
	Feeling depressed.....	43 (26%)
	Feeling suicidal.....	15 (9%)
	Other mental health problems.....	40 (24%)
	Physical health problems.....	31 (19%)
	Drug or alcohol problems (e.g. withdrawal).....	22 (13%)
	Problems getting medication.....	24 (15%)
	Needing protection from other prisoners.....	12 (7%)
	Lost or delayed property.....	23 (14%)
	Other problems.....	17 (10%)
	Did not have any problems.....	55 (34%)
2.6	Did staff help you to deal with these problems when you first arrived?	
	Yes.....	32 (20%)
	No.....	75 (46%)
	Did not have any problems when I first arrived.....	55 (34%)

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.....	113 (68%)
Toiletries / other basic items	101 (61%)
A shower.....	54 (33%)
A free phone call	59 (36%)
Something to eat	132 (80%)
The chance to see someone from health care.....	106 (64%)
The chance to talk to a Listener or Samaritans.....	42 (25%)
Support from another prisoner (e.g. Insider or buddy).....	29 (17%)
Wasn't offered any of these things	14 (8%)

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

Very clean	5 (3%)
Quite clean	46 (28%)
Quite dirty	49 (29%)
Very dirty	62 (37%)
Don't remember	5 (3%)

3.3 Did you feel safe on your first night here?

Yes	126 (76%)
No.....	33 (20%)
Don't remember	7 (4%)

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

	Yes	No	Don't remember
Access to the prison shop / canteen?	123 (75%)	34 (21%)	6 (4%)
Free PIN phone credit?	68 (43%)	75 (48%)	14 (9%)
Numbers put on your PIN phone?	71 (47%)	61 (40%)	19 (13%)

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

Yes	98 (59%)
No.....	65 (39%)
Have not had an induction.....	3 (2%)

On the wing

4.1 Are you in a cell on your own?

Yes	110 (66%)
No, I'm in a shared cell or dormitory	56 (34%)

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

Yes	33 (20%)
No.....	103 (63%)
Don't know.....	19 (12%)
Don't have a cell call bell.....	9 (5%)

4.3	Please answer the following questions about the wing or house block you are currently living on:			
		Yes	No	Don't know
	Do you normally have enough clean, suitable clothes for the week?	105 (63%)	57 (34%)	4 (2%)
	Can you shower every day?	157 (95%)	8 (5%)	0 (0%)
	Do you have clean sheets every week?	110 (67%)	49 (30%)	6 (4%)
	Do you get cell cleaning materials every week?	108 (66%)	49 (30%)	6 (4%)
	Is it normally quiet enough for you to relax or sleep at night?	106 (66%)	55 (34%)	0 (0%)
	Can you get your stored property if you need it?	39 (24%)	62 (38%)	62 (38%)

4.4	Normally, how clean or dirty are the communal / shared areas of your wing or house block (landings, stairs, wing showers etc.)?	
	Very clean	23 (14%)
	Quite clean	75 (45%)
	Quite dirty	43 (26%)
	Very dirty	26 (16%)

Food and canteen

5.1	What is the quality of food like in this prison?	
	Very good.....	5 (3%)
	Quite good.....	95 (57%)
	Quite bad	51 (31%)
	Very bad	16 (10%)
5.2	Do you get enough to eat at mealtimes?	
	Always.....	19 (11%)
	Most of the time.....	46 (27%)
	Some of the time.....	74 (44%)
	Never	29 (17%)
5.3	Does the shop / canteen sell the things that you need?	
	Yes	88 (54%)
	No.....	73 (45%)
	Don't know.....	3 (2%)

Relationships with staff

6.1	Do most staff here treat you with respect?	
	Yes	128 (77%)
	No.....	39 (23%)
6.2	Are there any staff here you could turn to if you had a problem?	
	Yes	118 (72%)
	No.....	46 (28%)
6.3	In the last week, has any member of staff talked to you about how you are getting on?	
	Yes	45 (27%)
	No.....	122 (73%)

6.4	How helpful is your personal or named officer?	
	Very helpful.....	8 (5%)
	Quite helpful.....	19 (12%)
	Not very helpful.....	17 (11%)
	Not at all helpful.....	21 (13%)
	Don't know.....	34 (21%)
	Don't have a personal / named officer	60 (38%)
6.5	How often do you see prison governors, directors or senior managers talking to prisoners?	
	Regularly.....	11 (7%)
	Sometimes.....	35 (21%)
	Hardly ever.....	105 (64%)
	Don't know.....	14 (8%)
6.6	Do you feel that you are treated as an individual in this prison?	
	Yes.....	74 (47%)
	No.....	83 (53%)
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	
	Yes, and things sometimes change.....	24 (15%)
	Yes, but things don't change.....	57 (35%)
	No.....	53 (32%)
	Don't know.....	30 (18%)

Faith

7.1	What is your religion?	
	No religion.....	71 (43%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	66 (40%)
	Buddhist.....	3 (2%)
	Hindu.....	1 (1%)
	Jewish.....	0 (0%)
	Muslim.....	18 (11%)
	Sikh.....	0 (0%)
	Other.....	5 (3%)
7.2	Are your religious beliefs respected here?	
	Yes.....	73 (44%)
	No.....	12 (7%)
	Don't know.....	9 (5%)
	Not applicable (no religion).....	71 (43%)
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	
	Yes.....	69 (41%)
	No.....	7 (4%)
	Don't know.....	20 (12%)
	Not applicable (no religion).....	71 (43%)
7.4	Are you able to attend religious services, if you want to?	
	Yes.....	90 (54%)
	No.....	3 (2%)
	Don't know.....	4 (2%)
	Not applicable (no religion).....	71 (42%)

Contact with family and friends

8.1	Have staff here encouraged you to keep in touch with your family / friends?	
	Yes	30 (19%)
	No.....	130 (81%)
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	94 (58%)
	No.....	68 (42%)
8.3	Are you able to use a phone every day (if you have credit)?	
	Yes	151 (93%)
	No.....	11 (7%)
8.4	How easy or difficult is it for your family and friends to get here?	
	Very easy	16 (10%)
	Quite easy	38 (23%)
	Quite difficult	35 (22%)
	Very difficult	62 (38%)
	Don't know.....	11 (7%)
8.5	How often do you have visits from family or friends?	
	More than once a week.....	2 (1%)
	About once a week.....	23 (14%)
	Less than once a week.....	72 (44%)
	Not applicable (don't get visits).....	65 (40%)
8.6	Do visits usually start and finish on time?	
	Yes	32 (35%)
	No.....	59 (65%)
8.7	Are your visitors usually treated respectfully by staff?	
	Yes	67 (73%)
	No.....	25 (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	120 (73%)
	Yes, but these times are not usually kept to	35 (21%)
	No.....	10 (6%)
9.2	How long do you usually spend out of your cell on a typical weekday (including time spent at education, work etc.)?	
	Less than 2 hours	14 (9%)
	2 to 6 hours.....	51 (32%)
	6 to 10 hours	59 (38%)
	10 hours or more	16 (10%)
	Don't know.....	17 (11%)

9.3	How long do you usually spend out of your cell on a typical Saturday or Sunday?	
	Less than 2 hours	13 (8%)
	2 to 6 hours.....	98 (61%)
	6 to 10 hours	29 (18%)
	10 hours or more	12 (7%)
	Don't know.....	9 (6%)
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	3 (2%)
	1 or 2	20 (13%)
	3 to 5.....	20 (13%)
	More than 5.....	107 (67%)
	Don't know.....	10 (6%)
9.5	How many days in a typical week do you get association, if you want it?	
	None	5 (3%)
	1 or 2	6 (4%)
	3 to 5.....	25 (15%)
	More than 5.....	122 (74%)
	Don't know.....	6 (4%)
9.6	How many days in a typical week could you go outside for exercise, if you wanted to?	
	None	5 (3%)
	1 or 2	9 (6%)
	3 to 5.....	30 (18%)
	More than 5.....	115 (71%)
	Don't know.....	4 (2%)
9.7	Typically, how often do you go to the gym?	
	Twice a week or more	77 (48%)
	About once a week.....	24 (15%)
	Less than once a week.....	11 (7%)
	Never	50 (31%)
9.8	Typically, how often do you go to the library?	
	Twice a week or more	9 (6%)
	About once a week.....	81 (50%)
	Less than once a week.....	24 (15%)
	Never	48 (30%)
9.9	Does the library have a wide enough range of materials to meet your needs?	
	Yes	62 (41%)
	No.....	42 (28%)
	Don't use the library	48 (32%)

Applications, complaints and legal rights

10.1	Is it easy for you to make an application?	
	Yes	109 (67%)
	No.....	46 (28%)
	Don't know.....	7 (4%)

10.2	If you have made any applications here, please answer the questions below:				
		Yes	No	Not made any applications	
	Are applications usually dealt with fairly?	69 (46%)	74 (49%)	7 (5%)	
	Are applications usually dealt with within 7 days?	41 (28%)	97 (67%)	7 (5%)	
10.3	Is it easy for you to make a complaint?				
	Yes			105 (64%)	
	No			34 (21%)	
	Don't know.....			24 (15%)	
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?	30 (21%)	72 (49%)	44 (30%)	
	Are complaints usually dealt with within 7 days?	22 (16%)	74 (53%)	44 (31%)	
10.5	Have you ever been prevented from making a complaint here when you wanted to?				
	Yes			31 (20%)	
	No			90 (58%)	
	Not wanted to make a complaint			33 (21%)	
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?	56 (35%)	31 (19%)	42 (26%)	30 (19%)
	Attend legal visits?	60 (39%)	15 (10%)	48 (32%)	29 (19%)
	Get bail information?	21 (14%)	26 (18%)	53 (36%)	48 (32%)
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?				
	Yes				68 (44%)
	No				50 (32%)
	Not had any legal letters				38 (24%)

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	4 (2%)	26 (16%)	49 (30%)	63 (39%)	20 (12%)
	Nurse	8 (5%)	55 (34%)	49 (30%)	31 (19%)	20 (12%)
	Dentist	2 (1%)	23 (14%)	36 (22%)	73 (45%)	27 (17%)
	Mental health workers	10 (6%)	45 (28%)	30 (19%)	29 (18%)	45 (28%)
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	11 (7%)	57 (36%)	28 (18%)	29 (18%)	34 (21%)
	Nurse	15 (9%)	65 (41%)	34 (22%)	20 (13%)	24 (15%)
	Dentist	11 (7%)	34 (22%)	26 (17%)	30 (19%)	55 (35%)
	Mental health workers	20 (13%)	42 (27%)	22 (14%)	14 (9%)	59 (38%)

11.3	Do you have any mental health problems?	
	Yes	88 (55%)
	No	73 (45%)
11.4	Have you been helped with your mental health problems in this prison?	
	Yes	46 (28%)
	No	43 (27%)
	Don't have any mental health problems	73 (45%)
11.5	What do you think of the overall quality of the health services here?	
	Very good.....	7 (4%)
	Quite good.....	59 (37%)
	Quite bad	40 (25%)
	Very bad	36 (23%)
	Don't know.....	16 (10%)

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 (36%)
	No	104 (64%)
12.2	If you have a disability, are you getting the support you need?	
	Yes	18 (12%)
	No	31 (20%)
	Don't have a disability	104 (68%)
12.3	Have you been on an ACCT in this prison?	
	Yes	16 (10%)
	No	142 (90%)
12.4	If you have been on an ACCT in this prison, did you feel cared for by staff?	
	Yes	7 (4%)
	No	8 (5%)
	Have not been on an ACCT in this prison	142 (90%)
12.5	How easy or difficult is it for you to speak to a Listener, if you need to?	
	Very easy	18 (11%)
	Quite easy	34 (22%)
	Quite difficult	6 (4%)
	Very difficult	5 (3%)
	Don't know.....	92 (59%)
	No Listeners at this prison	2 (1%)

Alcohol and drugs

13.1	Did you have an alcohol problem when you came into this prison?	
	Yes	24 (15%)
	No	137 (85%)
13.2	Have you been helped with your alcohol problem in this prison?	
	Yes	14 (9%)
	No	9 (6%)
	Did not / do not have an alcohol problem	137 (86%)

13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	68 (42%)
	No	94 (58%)
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	33 (20%)
	No	128 (80%)
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	19 (12%)
	No	142 (88%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	31 (21%)
	No	39 (26%)
	Did not / do not have a drug problem.....	81 (54%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy	75 (48%)
	Quite easy	25 (16%)
	Quite difficult	8 (5%)
	Very difficult	2 (1%)
	Don't know.....	46 (29%)
13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy	29 (18%)
	Quite easy	34 (22%)
	Quite difficult	17 (11%)
	Very difficult	12 (8%)
	Don't know.....	65 (41%)

Safety

14.1	Have you ever felt unsafe here?	
	Yes	80 (50%)
	No	81 (50%)
14.2	Do you feel unsafe now?	
	Yes	35 (22%)
	No	124 (78%)
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	50 (32%)
	Threats or intimidation.....	46 (29%)
	Physical assault.....	27 (17%)
	Sexual assault.....	5 (3%)
	Theft of canteen or property.....	42 (27%)
	Other bullying / victimisation	26 (17%)
	Not experienced any of these from prisoners here.....	83 (53%)

14.4	If you were being bullied / victimised by other prisoners here, would you report it?	
	Yes	36 (23%)
	No	118 (77%)
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	44 (28%)
	Threats or intimidation	32 (21%)
	Physical assault	14 (9%)
	Sexual assault	4 (3%)
	Theft of canteen or property	11 (7%)
	Other bullying / victimisation	27 (17%)
	Not experienced any of these from staff here	96 (62%)
14.6	If you were being bullied / victimised by staff here, would you report it?	
	Yes	69 (45%)
	No	83 (55%)

Behaviour management

15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?		
	Yes	42 (27%)	
	No	84 (54%)	
	Don't know what the incentives / rewards are	30 (19%)	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?		
	Yes	56 (35%)	
	No	68 (43%)	
	Don't know	24 (15%)	
	Don't know what this is	10 (6%)	
15.3	Have you been physically restrained by staff in this prison in the last 6 months?		
	Yes	20 (13%)	
	No	140 (88%)	
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	3 (2%)	
	No	18 (11%)	
	Don't remember	0 (0%)	
	Not been restrained here in last 6 months	140 (87%)	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?		
	Yes	1 (1%)	
	No	160 (99%)	
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?	1 (100%)	0 (0%)
	Could you shower every day?	1 (100%)	0 (0%)
	Could you go outside for exercise every day?	1 (100%)	0 (0%)
	Could you use the phone every day (if you had credit)?	1 (100%)	0 (0%)

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	72 (47%)	37 (24%)	43 (28%)	1 (1%)
Vocational or skills training	52 (35%)	41 (28%)	54 (36%)	1 (1%)
Prison job	86 (55%)	44 (28%)	25 (16%)	1 (1%)
Voluntary work outside of the prison	7 (5%)	50 (33%)	71 (47%)	23 (15%)
Paid work outside of the prison	8 (5%)	43 (28%)	73 (48%)	27 (18%)

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	60 (42%)	40 (28%)	44 (31%)
Vocational or skills training	54 (38%)	30 (21%)	58 (41%)
Prison job	39 (27%)	78 (53%)	29 (20%)
Voluntary work outside of the prison	20 (15%)	25 (19%)	90 (67%)
Paid work outside of the prison	19 (14%)	26 (19%)	90 (67%)

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

Yes	80 (52%)
No.....	64 (42%)
Not applicable (e.g. if you are retired, sick or on remand)	10 (6%)

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

Yes	81 (51%)
No.....	77 (49%)

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

Yes	68 (87%)
No.....	8 (10%)
Don't know what my objectives or targets are.....	2 (3%)

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

Yes	27 (36%)
No.....	46 (61%)
Don't know what my objectives or targets are.....	2 (3%)

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	16 (22%)	14 (19%)	42 (58%)
Other programmes	14 (20%)	13 (19%)	43 (61%)
One to one work	13 (19%)	10 (14%)	47 (67%)
Being on a specialist unit	3 (5%)	8 (12%)	54 (83%)
ROTL - day or overnight release	3 (4%)	7 (10%)	58 (85%)

Preparation for release

18.1	Do you expect to be released in the next 3 months?		
	Yes		67 (43%)
	No		85 (54%)
	Don't know		5 (3%)
18.2	How close is this prison to your home area or intended release address?		
	Very near		6 (9%)
	Quite near		20 (31%)
	Quite far		25 (38%)
	Very far		14 (22%)
18.3	Is anybody helping you to prepare for your release (e.g. a home probation officer, responsible officer, case worker)?		
	Yes		38 (58%)
	No		27 (42%)
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	17 (26%)	30 (46%)
	Getting employment	6 (9%)	36 (56%)
	Setting up education or training	6 (10%)	25 (41%)
	Arranging benefits	11 (17%)	38 (58%)
	Sorting out finances	8 (13%)	31 (50%)
	Support for drug or alcohol problems	19 (30%)	16 (25%)
	Health / mental health support	10 (16%)	27 (42%)
	Social care support	4 (6%)	21 (33%)
	Getting back in touch with family or friends	6 (9%)	26 (41%)

More about you

19.1	Do you have children under the age of 18?	
	Yes	88 (56%)
	No	70 (44%)
19.2	Are you a UK / British citizen?	
	Yes	156 (99%)
	No	2 (1%)
19.3	Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?	
	Yes	7 (4%)
	No	150 (96%)
19.4	Have you ever been in the armed services (e.g. army, navy, air force)?	
	Yes	5 (3%)
	No	153 (97%)
19.5	What is your gender?	
	Male	157 (99%)
	Female	0 (0%)
	Non-binary	0 (0%)
	Other	1 (1%)

19.6	How would you describe your sexual orientation?	
	Straight / heterosexual.....	151 (97%)
	Gay / lesbian / homosexual.....	1 (1%)
	Bisexual.....	2 (1%)
	Other	1 (1%)
19.7	Do you identify as transgender or transsexual?	
	Yes.....	0 (0%)
	No.....	149 (100%)

Final questions about this prison

20.1	Do you think your experiences in this prison have made you more or less likely to offend in the future?	
	More likely to offend.....	10 (6%)
	Less likely to offend.....	66 (43%)
	Made no difference	78 (51%)

HMP Ranby 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 Ranby 2018 are compared with the following HMIP survey data:

- **Summary statistics from most recent surveys of all other category C training prisons (38 prisons).** Please note that we do not have comparable data for the new questions introduced in September 2017.
- **Summary statistics from surveys of category C training prisons conducted since the introduction of the new questionnaire in September 2017 (7 prisons).** Please note that this does not include all local prisons.
- **Summary statistics from HMP Ranby in 2018 are compared with those from HMP Ranby in 2015.** Please note that we do not have comparable data for the new questions introduced in September 2017.

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DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION		HMP Ranby 2018	All other category C training prisons	HMP Ranby 2018	All other category C training prisons surveyed since September 2017	HMP Ranby 2018	HMP Ranby 2015
1.2	Are you under 21 years of age? <i>n</i>=169	0%	2%	0%	4%	0%	0%
	Are you 25 years of age or younger? <i>n</i>=169	23%		23%	23%	23%	
	Are you 50 years of age or older? <i>n</i>=169	6%	18%	6%	13%	6%	9%
	Are you 70 years of age or older? <i>n</i>=169	0%	2%	0%	2%	0%	0%
1.3	Are you from a minority ethnic group? <i>n</i>=170	22%	26%	22%	24%	22%	17%
1.4	Have you been in this prison for less than 6 months? <i>n</i>=167	39%		39%	32%	39%	
1.5	Are you currently serving a sentence? <i>n</i>=169	100%	100%	100%	100%	100%	100%
	Are you on recall? <i>n</i>=169	12%	9%	12%	9%	12%	10%
1.6	Is your sentence less than 12 months? <i>n</i>=168	13%	6%	13%	8%	13%	14%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)? <i>n</i>=168	3%	7%	3%	3%	3%	3%
7.1	Are you Muslim? <i>n</i>=164	11%	14%	11%	14%	11%	8%
11.3	Do you have any mental health problems? <i>n</i>=161	55%		55%	42%	55%	
12.1	Do you consider yourself to have a disability? <i>n</i>=162	36%	26%	36%	34%	36%	25%
19.1	Do you have any children under the age of 18? <i>n</i>=158	56%	49%	56%	52%	56%	57%
19.2	Are you a foreign national? <i>n</i>=158	1%	12%	1%	5%	1%	3%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller) <i>n</i>=157	5%	4%	5%	4%	5%	5%
19.4	Have you ever been in the armed services? <i>n</i>=158	3%	7%	3%	5%	3%	5%
19.5	Is your gender female or non-binary? <i>n</i>=158	1%		1%	0%	1%	
19.6	Are you homosexual, bisexual or other sexual orientation? <i>n</i>=155	3%	4%	3%	4%	3%	1%
19.7	Do you identify as transgender or transsexual? <i>n</i>=149	0%		0%	2%	0%	
ARRIVAL AND RECEPTION							
2.1	Were you given up-to-date information about this prison before you came here? <i>n</i>=169	18%		18%	17%	18%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception? <i>n</i>=171	52%	55%	52%	45%	52%	33%
2.3	When you were searched in reception, was this done in a respectful way? <i>n</i>=170	84%	85%	84%	84%	84%	85%
2.4	Overall, were you treated very / quite well in reception? <i>n</i>=170	88%		88%	87%	88%	

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2.5	When you first arrived, did you have any problems?	<i>n=164</i>	67%	65%	67%	72%	67%	64%
2.5	Did you have problems with:							
	- Getting phone numbers?	<i>n=164</i>	20%	18%	20%	28%	20%	12%
	- Contacting family?	<i>n=164</i>	20%	20%	20%	28%	20%	16%
	- Arranging care for children or other dependents?	<i>n=164</i>	2%		2%	2%	2%	
	- Contacting employers?	<i>n=164</i>	3%	2%	3%	2%	3%	2%
	- Money worries?	<i>n=164</i>	18%	14%	18%	17%	18%	14%
	- Housing worries?	<i>n=164</i>	13%	13%	13%	13%	13%	18%
	- Feeling depressed?	<i>n=164</i>	26%		26%	29%	26%	
	- Feeling suicidal?	<i>n=164</i>	9%		9%	8%	9%	
	- Other mental health problems?	<i>n=164</i>	24%		24%	21%	24%	
	- Physical health problems	<i>n=164</i>	19%	14%	19%	14%	19%	15%
	- Drugs or alcohol (e.g. withdrawal)?	<i>n=164</i>	13%		13%	13%	13%	
	- Getting medication?	<i>n=164</i>	15%		15%	23%	15%	
	- Needing protection from other prisoners?	<i>n=164</i>	7%	5%	7%	5%	7%	6%
	- Lost or delayed property?	<i>n=164</i>	14%	20%	14%	21%	14%	18%
	<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=107</i>	30%	36%	30%	33%	30%	33%
FIRST NIGHT AND INDUCTION								
3.1	Before you were locked up on your first night, were you offered:							
	- Tobacco or nicotine replacement?	<i>n=166</i>	68%	67%	68%	71%	68%	87%
	- Toiletries / other basic items?	<i>n=166</i>	61%	52%	61%	52%	61%	34%
	- A shower?	<i>n=166</i>	33%	31%	33%	44%	33%	19%
	- A free phone call?	<i>n=166</i>	36%	40%	36%	45%	36%	28%
	- Something to eat?	<i>n=166</i>	80%	59%	80%	76%	80%	73%
	- The chance to see someone from health care?	<i>n=166</i>	64%	68%	64%	60%	64%	68%
	- The chance to talk to a Listener or Samaritans?	<i>n=166</i>	25%	34%	25%	29%	25%	22%
	- Support from another prisoner (e.g. Insider or buddy)?	<i>n=166</i>	18%		18%	25%	18%	
	- None of these?	<i>n=166</i>	8%		8%	5%	8%	
3.2	On your first night in this prison, was your cell very / quite clean?	<i>n=167</i>	31%		31%	37%	31%	
3.3	Did you feel safe on your first night here?	<i>n=166</i>	76%	78%	76%	76%	76%	67%
3.4	In your first few days here, did you get?							
	- Access to the prison shop / canteen?	<i>n=163</i>	76%	28%	76%	36%	76%	20%
	- Free PIN phone credit?	<i>n=157</i>	43%		43%	46%	43%	
	- Numbers put on your PIN phone?	<i>n=151</i>	47%		47%	47%	47%	
3.5	Have you had an induction at this prison?	<i>n=166</i>	98%	91%	98%	93%	98%	94%
	<i>For those who have had an induction:</i>							
3.5	Did your induction cover everything you needed to know about this prison?	<i>n=163</i>	60%		60%	55%	60%	

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ON THE WING						
4.1	Are you in a cell on your own?	n=166	66%		66%	
4.2	Is your cell call bell normally answered within 5 minutes?	n=164	20%	34%	20%	29%
4.3	On the wing or houseblock you currently live on:					
	- Do you normally have enough clean, suitable clothes for the week?	n=166	63%	68%	63%	67%
	- Can you shower every day?	n=165	95%	87%	95%	93%
	- Do you have clean sheets every week?	n=165	67%	67%	67%	58%
	- Do you get cell cleaning materials every week?	n=163	66%	63%	66%	63%
	- Is it normally quiet enough for you to relax or sleep at night?	n=161	66%	69%	66%	70%
	- Can you get your stored property if you need it?	n=163	24%	25%	24%	25%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	n=167	59%		59%	64%
FOOD AND CANTEEN						
5.1	Is the quality of the food in this prison very / quite good?	n=167	60%		60%	29%
5.2	Do you get enough to eat at meal-times always / most of the time?	n=168	39%		39%	26%
5.3	Does the shop / canteen sell the things that you need?	n=164	54%	53%	54%	65%
RELATIONSHIPS WITH STAFF						
6.1	Do most staff here treat you with respect?	n=167	77%	77%	77%	70%
6.2	Are there any staff here you could turn to if you had a problem?	n=164	72%	72%	72%	72%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	n=167	27%	30%	27%	29%
6.4	Do you have a personal officer?	n=159	62%		62%	85%
	<i>For those who have a personal officer:</i>					
6.4	Is your personal or named officer very / quite helpful?	n=99	27%		27%	46%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	n=165	7%		7%	9%
6.6	Do you feel that you are treated as an individual in this prison?	n=157	47%		47%	43%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	n=164	49%		49%	50%
	If so, do things sometimes change?	n=81	30%		30%	31%
FAITH						
7.1	Do you have a religion?	n=164	57%	70%	57%	64%
	<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	n=94	78%		78%	69%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	n=96	72%		72%	71%
7.4	Are you able to attend religious services, if you want to?	n=97	93%		93%	87%

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CONTACT WITH FAMILY AND FRIENDS						
8.1	Have staff here encouraged you to keep in touch with your family / friends?	<i>n</i> =160	19%		19%	
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	<i>n</i> =162	58%	45%	58%	46%
8.3	Are you able to use a phone every day (if you have credit)?	<i>n</i> =162	93%		93%	
8.4	Is it very / quite easy for your family and friends to get here?	<i>n</i> =162	33%		33%	
8.5	Do you get visits from family/friends once a week or more?	<i>n</i> =162	15%		15%	
<i>For those who get visits:</i>						
8.6	Do visits usually start and finish on time?	<i>n</i> =91	35%		35%	
8.7	Are your visitors usually treated respectfully by staff?	<i>n</i> =92	73%		73%	
TIME OUT OF CELL						
9.1	Do you know what the unlock and lock-up times are supposed to be here?	<i>n</i> =165	94%		94%	
<i>For those who know what the unlock and lock-up times are supposed to be:</i>						
9.1	Are these times usually kept to?	<i>n</i> =155	77%		77%	
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	<i>n</i> =157	9%	13%	9%	9%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	<i>n</i> =157	10%	16%	10%	19%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	<i>n</i> =161	8%		8%	
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	<i>n</i> =161	8%		8%	
9.4	Do you have time to do domestics more than 5 days in a typical week?	<i>n</i> =160	67%		67%	
9.5	Do you get association more than 5 days in a typical week, if you want it?	<i>n</i> =164	74%		74%	
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	<i>n</i> =163	71%		71%	
9.7	Do you typically go to the gym twice a week or more?	<i>n</i> =162	48%		48%	
9.8	Do you typically go to the library twice a week or more?	<i>n</i> =162	6%	12%	6%	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?	<i>n</i> =104	60%	61%	60%	53%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS						
10.1	Is it easy for you to make an application?	<i>n</i> =162	67%	80%	67%	80%
<i>For those who have made an application:</i>						
10.2	Are applications usually dealt with fairly?	<i>n</i> =143	48%	57%	48%	47%
	Are applications usually dealt with within 7 days?	<i>n</i> =138	30%	40%	30%	34%
10.3	Is it easy for you to make a complaint?	<i>n</i> =163	64%	59%	64%	62%
<i>For those who have made a complaint:</i>						
10.4	Are complaints usually dealt with fairly?	<i>n</i> =102	29%	32%	29%	31%
	Are complaints usually dealt with within 7 days?	<i>n</i> =96	23%	27%	23%	25%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	<i>n</i> =121	26%		26%	

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<i>For those who need it, is it easy to:</i>									
10.6	Communicate with your solicitor or legal representative?	<i>n=129</i>	43%			43%	39%	43%	
	Attend legal visits?	<i>n=123</i>	49%			49%	50%	49%	
	Get bail information?	<i>n=100</i>	21%			21%	16%	21%	
<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?	<i>n=118</i>	58%	50%		58%	57%	58%	54%
HEALTH CARE									
11.1	Is it very / quite easy to see:								
	- Doctor?	<i>n=162</i>	19%			19%	30%	19%	
	- Nurse?	<i>n=163</i>	39%			39%	53%	39%	
	- Dentist?	<i>n=161</i>	16%			16%	14%	16%	
	- Mental health workers?	<i>n=159</i>	35%			35%	21%	35%	
11.2	Do you think the quality of the health service is very / quite good from:								
	- Doctor?	<i>n=159</i>	43%			43%	42%	43%	
	- Nurse?	<i>n=158</i>	51%			51%	56%	51%	
	- Dentist?	<i>n=156</i>	29%			29%	31%	29%	
	- Mental health workers?	<i>n=157</i>	40%			40%	24%	40%	
11.3	Do you have any mental health problems?	<i>n=161</i>	55%			55%	42%	55%	
<i>For those who have mental health problems:</i>									
11.4	Have you been helped with your mental health problems in this prison?	<i>n=89</i>	52%			52%	39%	52%	
11.5	Do you think the overall quality of the health services here is very / quite good?	<i>n=158</i>	42%			42%	40%	42%	
OTHER SUPPORT NEEDS									
12.1	Do you consider yourself to have a disability?	<i>n=162</i>	36%	26%		36%	34%	36%	25%
<i>For those who have a disability:</i>									
12.2	Are you getting the support you need?	<i>n=49</i>	37%			37%	30%	37%	
12.3	Have you been on an ACCT in this prison?	<i>n=158</i>	10%			10%	14%	10%	
<i>For those who have been on an ACCT:</i>									
12.4	Did you feel cared for by staff?	<i>n=15</i>	47%			47%	41%	47%	
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	<i>n=157</i>	33%			33%	45%	33%	
ALCOHOL AND DRUGS									
13.1	Did you have an alcohol problem when you came into this prison?	<i>n=161</i>	15%	16%		15%	14%	15%	14%
<i>For those who had / have an alcohol problem:</i>									
13.2	Have you been helped with your alcohol problem in this prison?	<i>n=23</i>	61%	61%		61%	48%	61%	46%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	<i>n=162</i>	42%	25%		42%	28%	42%	34%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	<i>n=161</i>	21%	12%		21%	18%	21%	15%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	<i>n=161</i>	12%			12%	12%	12%	
<i>For those who had / have a drug problem:</i>									
13.6	Have you been helped with your drug problem in this prison?	<i>n=70</i>	44%	59%		44%	46%	44%	59%
13.7	Is it very / quite easy to get illicit drugs in this prison?	<i>n=156</i>	64%			64%	51%	64%	

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Number of completed questionnaires returned

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

HMP Ranby 2018	All other category C training prisons	HMP Ranby 2018	All other category C training prisons surveyed since September 2017	HMP Ranby 2018	HMP Ranby 2015
171	6,490	171	1,231	171	197

QID	Question	n	HMP Ranby 2018	All other category C training prisons	HMP Ranby 2018	All other category C training prisons surveyed since September 2017	HMP Ranby 2018	HMP Ranby 2015
13.8	Is it very / quite easy to get alcohol in this prison?	n=157	40%		40%	34%	40%	
SAFETY								
14.1	Have you ever felt unsafe here?	n=161	50%	41%	50%	40%	50%	57%
14.2	Do you feel unsafe now?	n=159	22%	18%	22%	18%	22%	24%
14.3	Have you experienced any of the following from other prisoners here:							
	- Verbal abuse?	n=157	32%		32%	32%	32%	
	- Threats or intimidation?	n=157	29%		29%	28%	29%	
	- Physical assault?	n=157	17%		17%	15%	17%	
	- Sexual assault?	n=157	3%		3%	2%	3%	
	- Theft of canteen or property?	n=157	27%		27%	22%	27%	
	- Other bullying / victimisation?	n=157	17%		17%	16%	17%	
	- Not experienced any of these from prisoners here	n=157	53%	69%	53%	57%	53%	70%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	n=154	23%		23%	35%	23%	
14.5	Have you experienced any of the following from staff here:							
	- Verbal abuse?	n=155	28%		28%	29%	28%	
	- Threats or intimidation?	n=155	21%		21%	21%	21%	
	- Physical assault?	n=155	9%		9%	8%	9%	
	- Sexual assault?	n=155	3%		3%	2%	3%	
	- Theft of canteen or property?	n=155	7%		7%	7%	7%	
	- Other bullying / victimisation?	n=155	17%		17%	14%	17%	
	- Not experienced any of these from staff here	n=155	62%	71%	62%	60%	62%	72%
14.6	If you were being bullied / victimised by staff here, would you report it?	n=152	45%		45%	50%	45%	
BEHAVIOUR MANAGEMENT								
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	n=156	27%		27%	41%	27%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	n=158	35%		35%	38%	35%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	n=160	13%	9%	13%	10%	13%	10%
<i>For those who have been restrained in the last 6 months:</i>								
15.4	Did anyone come and talk to you about it afterwards?	n=21	14%		14%	13%	14%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	n=161	1%	14%	1%	8%	1%	15%
<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?	n=1	100%		100%	66%	100%	
	Could you shower every day?	n=1	100%		100%	79%	100%	
	Could you go outside for exercise every day?	n=1	100%		100%	81%	100%	
	Could you use the phone every day (if you had credit)?	n=1	100%		100%	75%	100%	

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Number of completed questionnaires returned

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

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EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	n=153	47%		
	- Vocational or skills training?	n=148	35%		
	- Prison job?	n=156	55%		
	- Voluntary work outside of the prison?	n=151	5%		
	- Paid work outside of the prison?	n=151	5%		
16.2	In this prison, have you done the following activities:				
	- Education?	n=144	69%	81%	
	- Vocational or skills training?	n=142	59%	75%	
	- Prison job?	n=146	80%	84%	
	- Voluntary work outside of the prison?	n=135	33%		
	- Paid work outside of the prison?	n=135	33%		
<i>For those who have done the following activities, do you think they will help you on release:</i>					
	- Education?	n=100	60%	58%	
	- Vocational or skills training?	n=84	64%	59%	
	- Prison job?	n=117	33%	43%	
	- Voluntary work outside of the prison?	n=45	44%		
	- Paid work outside of the prison?	n=45	42%		
16.3	Do staff encourage you to attend education, training or work?	n=144	56%		
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	n=158	51%		
<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=78	87%		
17.3	Are staff helping you to achieve your objectives or targets?	n=75	36%		
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	n=72	42%		
	- Other programmes?	n=70	39%		
	- One to one work?	n=70	33%		
	- Been on a specialist unit?	n=65	17%		
	- ROTL - day or overnight release?	n=68	15%		
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>					
	- Offending behaviour programmes?	n=30	53%		
	- Other programmes?	n=27	52%		
	- One to one work?	n=23	57%		
	- Being on a specialist unit?	n=11	27%		
	- ROTL - day or overnight release?	n=10	30%		

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Number of completed questionnaires returned

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

HMP Ranby 2018	All other category C training prisons	HMP Ranby 2018	All other category C training prisons surveyed since September 2017	HMP Ranby 2018	HMP Ranby 2015
171	6,490	171	1,231	171	197

PREPARATION FOR RELEASE								
18.1	Do you expect to be released in the next 3 months?	<i>n=157</i>	43%		43%	23%	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?	<i>n=65</i>	40%		40%	43%	40%	
18.3	Is anybody helping you to prepare for your release?	<i>n=65</i>	59%		59%	57%	59%	
18.4	Do you need help to sort out the following for when you are released:							
	- Finding accommodation?	<i>n=65</i>	72%		72%	60%	72%	
	- Getting employment?	<i>n=64</i>	66%		66%	57%	66%	
	- Setting up education or training?	<i>n=61</i>	51%		51%	46%	51%	
	- Arranging benefits?	<i>n=65</i>	75%		75%	63%	75%	
	- Sorting out finances?	<i>n=62</i>	63%		63%	53%	63%	
	- Support for drug or alcohol problems?	<i>n=64</i>	55%		55%	42%	55%	
	- Health / mental Health support?	<i>n=64</i>	58%		58%	49%	58%	
	- Social care support?	<i>n=63</i>	40%		40%	36%	40%	
	- Getting back in touch with family or friends?	<i>n=64</i>	50%		50%	39%	50%	
18.4	Are you getting help to sort out the following for when you are released, if you need it:							
	- Finding accommodation?	<i>n=47</i>	36%		36%	34%	36%	
	- Getting employment?	<i>n=42</i>	14%		14%	17%	14%	
	- Setting up education or training?	<i>n=31</i>	19%		19%	23%	19%	
	- Arranging benefits?	<i>n=49</i>	22%		22%	26%	22%	
	- Sorting out finances?	<i>n=39</i>	21%		21%	21%	21%	
	- Support for drug or alcohol problems?	<i>n=35</i>	54%		54%	46%	54%	
	- Health / mental Health support?	<i>n=37</i>	27%		27%	28%	27%	
	- Social care support?	<i>n=25</i>	16%		16%	24%	16%	
	- Getting back in touch with family or friends?	<i>n=32</i>	19%		19%	33%	19%	
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=154</i>	43%		43%	53%	43%	

HMP Ranby 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
38	132	18	146

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	0%	0%	0%	0%
	Are you 50 years of age or older?	3%	7%	0%	7%
1.3	Are you from a minority ethnic group?			89%	15%
7.1	Are you Muslim?	42%	2%		
11.3	Do you have any mental health problems?	33%	61%	29%	56%
12.1	Do you consider yourself to have a disability?	32%	36%	35%	36%
19.2	Are you a foreign national?	0%	2%	0%	2%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	6%	0%	4%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	66%	89%	72%	85%
2.4	Overall, were you treated very / quite well in reception?	71%	92%	67%	90%
2.5	When you first arrived, did you have any problems?	78%	63%	82%	65%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	17%	35%	27%	30%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	68%	78%	61%	79%
3.5	Have you had an induction at this prison?	97%	98%	94%	99%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	54%	62%	59%	60%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	24%	19%	17%	21%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	54%	66%	50%	66%
	- Can you shower every day?	95%	95%	100%	94%
	- Do you have clean sheets every week?	58%	69%	53%	69%
	- Do you get cell cleaning materials every week?	58%	69%	59%	67%
	- Is it normally quiet enough for you to relax or sleep at night?	58%	68%	56%	68%
	- Can you get your stored property if you need it?	43%	18%	44%	21%

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Number of completed questionnaires returned

Black and minority ethnic	White
38	132

Muslim	Non-Muslim
18	146

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	26%	43%
5.3	Does the shop / canteen sell the things that you need?	43%	57%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	55%	83%
6.2	Are there any staff here you could turn to if you had a problem?	55%	77%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	24%	27%
6.6	Do you feel that you are treated as an individual in this prison?	49%	47%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	63%	86%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	59%	78%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	16%	20%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	62%	57%
8.3	Are you able to use a phone every day (if you have credit)?	95%	93%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	62%	76%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	6%	10%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	11%	10%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	35%	68%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	61%	70%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	31%	54%
10.3	Is it easy for you to make a complaint?	57%	67%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	14%	36%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	26%	26%

33%	39%
50%	56%
56%	79%
39%	75%
22%	27%
31%	48%
56%	84%
50%	76%
22%	18%
53%	58%
89%	94%
60%	74%
0%	10%
12%	10%
42%	63%
59%	69%
38%	50%
53%	66%
0%	32%
21%	26%

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Number of completed questionnaires returned

	Black and minority ethnic	White	Muslim	Non-Muslim
	38	132	18	146

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	25%	17%	12%	20%
	- Nurse?	39%	39%	29%	41%
	- Dentist?	28%	12%	18%	16%
	- Mental health workers?	35%	34%	25%	35%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	46%	53%	40%	54%
11.5	Do you think the overall quality of the health services here is very / quite good?	46%	41%	29%	44%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	40%	37%	17%	41%
SAFETY					
14.1	Have you ever felt unsafe here?	57%	47%	56%	48%
14.2	Do you feel unsafe now?	31%	19%	31%	19%
14.3	Not experienced bullying / victimisation by other prisoners	47%	55%	38%	56%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	21%	23%	31%	22%
14.5	Not experienced bullying / victimisation by members of staff	47%	66%	47%	64%
14.6	If you were being bullied / victimised by staff here, would you report it?	53%	43%	53%	44%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	24%	28%	19%	27%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	27%	38%	25%	37%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	20%	11%	12%	12%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	0%	1%	0%	1%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	59%	54%	44%	57%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	50%	52%	47%	52%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	50%	32%	86%	30%
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?	50%	60%	20%	60%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	50%	41%	31%	44%

HMP Ranby 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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Number of completed questionnaires returned

Mental health problems	No mental health problems	Have a disability	Do not have a disability
88	73	58	104

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	0%	0%	0%	0%
	Are you 50 years of age or older?	4%	8%	7%	6%
1.3	Are you from a minority ethnic group?	14%	33%	21%	24%
7.1	Are you Muslim?	6%	16%	11%	11%
11.3	Do you have any mental health problems?			83%	39%
12.1	Do you consider yourself to have a disability?	54%	14%		
19.2	Are you a foreign national?	1%	1%	0%	2%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	6%	3%	7%	2%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	84%	84%	81%	86%
2.4	Overall, were you treated very / quite well in reception?	89%	88%	83%	91%
2.5	When you first arrived, did you have any problems?	75%	56%	86%	55%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	34%	28%	35%	29%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	70%	82%	60%	85%
3.5	Have you had an induction at this prison?	98%	100%	97%	100%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	55%	65%	47%	66%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	20%	20%	14%	23%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	61%	64%	54%	67%
	- Can you shower every day?	93%	97%	91%	97%
	- Do you have clean sheets every week?	66%	66%	59%	70%
	- Do you get cell cleaning materials every week?	66%	70%	61%	70%
	- Is it normally quiet enough for you to relax or sleep at night?	61%	70%	55%	71%
	- Can you get your stored property if you need it?	24%	23%	21%	26%

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

Number of completed questionnaires returned

	Mental health problems	No mental health problems		
	88	73	Have a disability	Do not have a disability
			58	104

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	40%	36%	31%	41%
5.3	Does the shop / canteen sell the things that you need?	53%	54%	43%	60%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	81%	72%	74%	78%
6.2	Are there any staff here you could turn to if you had a problem?	72%	71%	67%	75%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	33%	21%	26%	28%
6.6	Do you feel that you are treated as an individual in this prison?	46%	45%	33%	54%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	80%	79%	71%	84%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	80%	63%	77%	70%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	17%	21%	16%	20%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	57%	60%	65%	54%
8.3	Are you able to use a phone every day (if you have credit)?	91%	96%	88%	96%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	74%	72%	62%	77%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	16%	1%	16%	4%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	7%	13%	9%	11%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	69%	50%	49%	66%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	66%	71%	59%	73%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	51%	47%	44%	50%
10.3	Is it easy for you to make a complaint?	66%	64%	57%	68%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	21%	40%	11%	39%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	32%	19%	43%	15%

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Number of completed questionnaires returned

	Mental health problems	No mental health problems		
	88	73	Have a disability	Do not have a disability
			58	104

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	17%	19%	25%	15%
	- Nurse?	38%	38%	42%	37%
	- Dentist?	16%	15%	25%	11%
	- Mental health workers?	47%	20%	44%	30%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	52%		51%	54%
11.5	Do you think the overall quality of the health services here is very / quite good?	43%	42%	40%	43%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	39%	22%	37%	
SAFETY					
14.1	Have you ever felt unsafe here?	57%	40%	64%	40%
14.2	Do you feel unsafe now?	28%	15%	38%	13%
14.3	Not experienced bullying / victimisation by other prisoners	44%	63%	36%	62%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	21%	27%	21%	25%
14.5	Not experienced bullying / victimisation by members of staff	54%	71%	47%	70%
14.6	If you were being bullied / victimised by staff here, would you report it?	34%	58%	38%	50%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	25%	30%	26%	27%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	38%	33%	29%	39%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	13%	13%	9%	15%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	1%	0%	0%	1%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	58%	52%	48%	60%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	52%	53%	50%	53%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	33%	39%	26%	42%
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?	64%	52%	64%	55%
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?	36%	51%	38%	46%

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

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

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

Number of completed questionnaires returned

25 and under	Over 25
39	130

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	
	Are you 50 years of age or older?		8%
1.3	Are you from a minority ethnic group?	36%	18%
7.1	Are you Muslim?	13%	11%
11.3	Do you have any mental health problems?	47%	56%
12.1	Do you consider yourself to have a disability?	27%	38%
19.2	Are you a foreign national?	0%	2%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	3%	5%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	69%	88%
2.4	Overall, were you treated very / quite well in reception?	80%	91%
2.5	When you first arrived, did you have any problems?	58%	69%
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	18%	33%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	72%	78%
3.5	Have you had an induction at this prison?	97%	98%
<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	68%	58%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	29%	18%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	58%	66%
	- Can you shower every day?	92%	96%
	- Do you have clean sheets every week?	51%	71%
	- Do you get cell cleaning materials every week?	60%	69%
	- Is it normally quiet enough for you to relax or sleep at night?	63%	67%
	- Can you get your stored property if you need it?	22%	25%

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Number of completed questionnaires returned

	25 and under	Over 25
	39	130

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	39%	39%
5.3	Does the shop / canteen sell the things that you need?	56%	54%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	61%	82%
6.2	Are there any staff here you could turn to if you had a problem?	55%	77%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	16%	30%
6.6	Do you feel that you are treated as an individual in this prison?	49%	47%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	50%	84%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	63%	74%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	27%	17%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	68%	54%
8.3	Are you able to use a phone every day (if you have credit)?	92%	94%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	67%	75%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	3%	10%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	13%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	48%	63%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	62%	69%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	38%	52%
10.3	Is it easy for you to make a complaint?	65%	65%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	22%	33%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	37%	21%

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Number of completed questionnaires returned

	25 and under	Over 25
	39	130

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	19%	19%
	- Nurse?	32%	42%
	- Dentist?	19%	15%
	- Mental health workers?	30%	36%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	50%	54%
11.5	Do you think the overall quality of the health services here is very / quite good?	35%	45%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	40%	37%
SAFETY			
14.1	Have you ever felt unsafe here?	46%	50%
14.2	Do you feel unsafe now?	19%	23%
14.3	Not experienced bullying / victimisation by other prisoners	70%	48%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	15%	25%
14.5	Not experienced bullying / victimisation by members of staff	54%	65%
14.6	If you were being bullied / victimised by staff here, would you report it?	44%	46%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	23%	29%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	37%	36%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	17%	12%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	0%	1%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	68%	51%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	46%	53%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	29%	39%
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?	67%	55%
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%	43%

HMP Ranby 2018

Comparison of survey responses from different residential locations

In this table responses from older, single occupancy accommodation (houseblock 5) are compared with those from the rest of the establishment.

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

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Number of completed questionnaires returned

	Houseblock 5	Rest of the establishment
Number of completed questionnaires returned	28	143

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	0%
	Are you 25 years of age or younger?	18%	24%
	Are you 50 years of age or older?	21%	3%
	Are you 70 years of age or older?	0%	0%
1.3	Are you from a minority ethnic group?	18%	23%
1.4	Have you been in this prison for less than 6 months?	25%	42%
1.5	Are you currently serving a sentence?	100%	100%
	Are you on recall?	7%	13%
1.6	Is your sentence less than 12 months?	15%	12%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	4%
7.1	Are you Muslim?	7%	12%
11.3	Do you have any mental health problems?	42%	57%
12.1	Do you consider yourself to have a disability?	41%	35%
19.1	Do you have any children under the age of 18?	59%	55%
19.2	Are you a foreign national?	0%	2%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	4%	5%
19.4	Have you ever been in the armed services?	11%	2%
19.5	Is your gender female or non-binary?	0%	1%
19.6	Are you homosexual, bisexual or other sexual orientation?	0%	3%
19.7	Do you identify as transgender or transsexual?	0%	0%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	21%	17%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	61%	50%
2.3	When you were searched in reception, was this done in a respectful way?	86%	83%
2.4	Overall, were you treated very / quite well in reception?	93%	87%

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Houseblock 5	Rest of the establishment
28	143

Number of completed questionnaires returned

2.5	When you first arrived, did you have any problems?	64%	67%
2.5	Did you have problems with:		
	- Getting phone numbers?	25%	18%
	- Contacting family?	32%	17%
	- Arranging care for children or other dependents?	4%	2%
	- Contacting employers?	4%	3%
	- Money worries?	18%	18%
	- Housing worries?	7%	15%
	- Feeling depressed?	18%	28%
	- Feeling suicidal?	7%	10%
	- Other mental health problems?	14%	27%
	- Physical health problems?	21%	18%
	- Drugs or alcohol (e.g. withdrawal)?	0%	16%
	- Getting medication?	14%	15%
	- Needing protection from other prisoners?	0%	9%
	- Lost or delayed property?	18%	13%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	28%	30%
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	43%	73%
	- Toiletries / other basic items?	61%	61%
	- A shower?	21%	35%
	- A free phone call?	25%	38%
	- Something to eat?	71%	81%
	- The chance to see someone from health care?	46%	67%
	- The chance to talk to a Listener or Samaritans?	21%	26%
	- Support from another prisoner (e.g. Insider or buddy)?	21%	17%
	- None of these?	21%	6%
3.2	On your first night in this prison, was your cell very / quite clean?	29%	31%
3.3	Did you feel safe on your first night here?	68%	78%
3.4	In your first few days here, did you get?		
	- Access to the prison shop / canteen?	78%	75%
	- Free PIN phone credit?	42%	44%
	- Numbers put on your PIN phone?	48%	47%
3.5	Have you had an induction at this prison?	96%	99%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	67%	59%

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Houseblock 5	Rest of the establishment
28	143

Number of completed questionnaires returned

ON THE WING			
4.1	Are you in a cell on your own?	100%	59%
4.2	Is your cell call bell normally answered within 5 minutes?	19%	20%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	74%	61%
	- Can you shower every day?	100%	94%
	- Do you have clean sheets every week?	86%	63%
	- Do you get cell cleaning materials every week?	70%	65%
	- Is it normally quiet enough for you to relax or sleep at night?	70%	65%
	- Can you get your stored property if you need it?	18%	25%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	71%	56%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	29%	66%
5.2	Do you get enough to eat at meal-times always / most of the time?	21%	42%
5.3	Does the shop / canteen sell the things that you need?	41%	56%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	86%	75%
6.2	Are there any staff here you could turn to if you had a problem?	75%	71%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	18%	29%
6.4	Do you have a personal officer?	50%	65%
<i>For those who have a personal officer:</i>			
6.4	Is your personal or named officer very / quite helpful?	31%	27%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	12%	6%
6.6	Do you feel that you are treated as an individual in this prison?	37%	49%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	36%	52%
	If so, do things sometimes change?	30%	30%
FAITH			
7.1	Do you have a religion?	64%	55%
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	71%	79%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	59%	75%
7.4	Are you able to attend religious services, if you want to?	83%	95%

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Number of completed questionnaires returned

Houseblock 5	Rest of the establishment
28	143

CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	15%	19%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	59%	58%
8.3	Are you able to use a phone every day (if you have credit)?	100%	92%
8.4	Is it very / quite easy for your family and friends to get here?	30%	34%
8.5	Do you get visits from family/friends once a week or more?	26%	13%
<i>For those who get visits:</i>			
8.6	Do visits usually start and finish on time?	14%	42%
8.7	Are your visitors usually treated respectfully by staff?	67%	75%
TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	100%	93%
<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?	82%	77%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	0%	11%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	30%	6%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	7%	8%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	19%	5%
9.4	Do you have time to do domestics more than 5 days in a typical week?	93%	62%
9.5	Do you get association more than 5 days in a typical week, if you want it?	82%	73%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	74%	70%
9.7	Do you typically go to the gym twice a week or more?	59%	45%
9.8	Do you typically go to the library twice a week or more?	15%	4%
<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%	60%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	63%	68%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	48%	48%
	Are applications usually dealt with within 7 days?	35%	29%
10.3	Is it easy for you to make a complaint?	59%	65%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	21%	31%
	Are complaints usually dealt with within 7 days?	26%	22%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	27%	25%

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Number of completed questionnaires returned

Houseblock 5	Rest of the establishment
28	143

<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	27%	47%
	Attend legal visits?	32%	52%
	Get bail information?	7%	24%
<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?	67%	56%
HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	11%	20%
	- Nurse?	30%	40%
	- Dentist?	12%	16%
	- Mental health workers?	31%	35%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	42%	43%
	- Nurse?	42%	52%
	- Dentist?	24%	30%
	- Mental health workers?	31%	41%
11.3	Do you have any mental health problems?	42%	57%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	46%	53%
11.5	Do you think the overall quality of the health services here is very / quite good?	27%	45%
OTHER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	41%	35%
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	13%	42%
12.3	Have you been on an ACCT in this prison?	0%	12%
<i>For those who have been on an ACCT:</i>			
12.4	Did you feel cared for by staff?		47%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	26%	35%
ALCOHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	11%	16%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	33%	65%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	19%	47%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	0%	25%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	4%	13%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	0%	47%
13.7	Is it very / quite easy to get illicit drugs in this prison?	62%	65%
13.8	Is it very / quite easy to get alcohol in this prison?	35%	41%

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Houseblock 5	Rest of the establishment
28	143

Number of completed questionnaires returned

SAFETY			
14.1	Have you ever felt unsafe here?	46%	50%
14.2	Do you feel unsafe now?	19%	23%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	23%	34%
	- Threats or intimidation?	8%	34%
	- Physical assault?	8%	19%
	- Sexual assault?	0%	4%
	- Theft of canteen or property?	15%	29%
	- Other bullying / victimisation?	12%	18%
	- Not experienced any of these from prisoners here	69%	50%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	27%	23%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	12%	32%
	- Threats or intimidation?	4%	24%
	- Physical assault?	4%	10%
	- Sexual assault?	0%	3%
	- Theft of canteen or property?	4%	8%
	- Other bullying / victimisation?	8%	19%
	- Not experienced any of these from staff here	89%	57%
14.6	If you were being bullied / victimised by staff here, would you report it?	46%	45%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	40%	24%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	39%	35%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	4%	14%
	<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?	0%	15%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	0%	1%
	<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?		100%
	Could you shower every day?		100%
	Could you go outside for exercise every day?		100%
	Could you use the phone every day (if you had credit)?		100%

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Number of completed questionnaires returned

Houseblock 5	28	Rest of the establishment	143
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EDUCATION, SKILLS AND WORK			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	35%	50%
	- Vocational or skills training?	32%	36%
	- Prison job?	48%	57%
	- Voluntary work outside of the prison?	0%	6%
	- Paid work outside of the prison?	0%	6%
16.2	In this prison, have you done the following activities:		
	- Education?	84%	66%
	- Vocational or skills training?	75%	56%
	- Prison job?	92%	78%
	- Voluntary work outside of the prison?	32%	34%
	- Paid work outside of the prison?	32%	34%
<i>For those who have done the following activities, do you think they will help you on release:</i>			
	- Education?	48%	63%
	- Vocational or skills training?	56%	67%
	- Prison job?	23%	36%
	- Voluntary work outside of the prison?	14%	50%
	- Paid work outside of the prison?	14%	47%
16.3	Do staff encourage you to attend education, training or work?	67%	53%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	58%	50%
<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?	80%	89%
17.3	Are staff helping you to achieve your objectives or targets?	36%	36%
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	23%	46%
	- Other programmes?	33%	40%
	- One to one work?	15%	37%
	- Been on a specialist unit?	9%	19%
	- ROTL - day or overnight release?	8%	16%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>			
	- Offending behaviour programmes?	67%	52%
	- Other programmes?	75%	48%
	- One to one work?	100%	52%
	- Being on a specialist unit?	100%	20%
	- ROTL - day or overnight release?	0%	33%

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

Houseblock 5	Rest of the establishment
28	143

Number of completed questionnaires returned

PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	44%	42%
<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?	20%	44%
18.3	Is anybody helping you to prepare for your release?	30%	64%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	70%	73%
	- Getting employment?	60%	67%
	- Setting up education or training?	67%	48%
	- Arranging benefits?	80%	75%
	- Sorting out finances?	70%	62%
	- Support for drug or alcohol problems?	44%	56%
	- Health / mental Health support?	60%	57%
	- Social care support?	33%	41%
	- Getting back in touch with family or friends?	60%	48%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	29%	38%
	- Getting employment?	17%	14%
	- Setting up education or training?	17%	20%
	- Arranging benefits?	13%	24%
	- Sorting out finances?	14%	22%
	- Support for drug or alcohol problems?	0%	61%
	- Health / mental Health support?	17%	29%
	- Social care support?	0%	18%
	- Getting back in touch with family or friends?	17%	19%
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?	68%	38%