

Report on an unannounced inspection of

HMP Peterborough (male)

by HM Chief Inspector of Prisons

9–19 July 2018

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



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Glossary of terms

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

Introduction

HMP Peterborough is a category B local prison that holds both male and female prisoners. The men's and women's jails are separated but are on the same site and share a management team. It is not unusual for staff to move between the prisons, and indeed, during this inspection of the men's prison, I met members of staff who I had previously met when inspecting the adjacent women's prison in 2017. At the time of this inspection, the prison held just over 800 prisoners.

The prison was last inspected in February 2015, and on that occasion was given the highest assessments in three of our four healthy prison tests. The exception was in purposeful activity, where performance was found to be not sufficiently good. There were many ways in which the prison we inspected this time, in July 2018, was a fundamentally different establishment from that we saw in 2015. There was still much to commend in the prison, and the six areas of good practice that we identify in this report were just a small part of this. However, the simple fact was that while Peterborough was a safe prison in 2015, our judgement on this occasion was that safety had declined to such an extent that we had no choice other than to reduce our assessment in this area by two levels, to 'not sufficiently good'.

The reason for this decline was easy to see. In common with many other prisons, Peterborough has suffered the ravages of the epidemic of drugs – especially new psychoactive substances (NPS) – that have flowed into them in recent years and the debt, bullying and violence they cause. Over 50% of prisoners told us it was easy to get hold of illicit drugs in the prison, and more than one in five had acquired a drug habit since entering the jail. As a result, levels of violence had doubled since the last inspection. Unsurprisingly, 55% of prisoners had felt unsafe since coming into the prison and 20% felt unsafe at the time of the inspection.

However, there had been a determined effort to get to grips with the problem. There were credible plans in place, described in this report, and while there was still more to do, we felt that in general the approach to tackling the violence was absolutely right. The prison had been through an extremely difficult period and it was still too soon to come to definitive judgements as to whether there would be sustained success. Nevertheless, there were some encouraging signs, and, in the three months leading up to the inspection, there had been a reduction in levels of violence. We would encourage the prison to build on this progress and to continue the energetic, determined approach to this problem. HM Inspectorate of Prisons' judgements are based upon the outcomes being experienced by prisoners at the time of the inspection, and not on plans for the future, so it was inevitable that the area of safety would attract a much lower judgement on this occasion.

Aside from the violence that has plagued the prison in recent times, most of the many functions that a prison has to perform were being delivered well at Peterborough. The detail of this report clearly shows that there was a dedicated staff team working hard in what have been very difficult circumstances. There were many new and inexperienced staff working in the prison, and sometimes that inexperience and lack of confidence was plain to see. However, the fact that we have made only two main recommendations shows that we found HMP Peterborough to be a generally well-run establishment. One of those recommendations is of course focused on the need to reduce the violence, while the other calls for the governance and clinical oversight of health care to be strengthened. In other key areas, it was refreshing to see a local prison where time out of cell was good for most prisoners and where there were activity places for 80% of the population. This was better than we often see in prisons that are specifically designated as training prisons. On this occasion, these improvements in the area of purposeful activity meant that it attracted a higher assessment than at the last inspection.

In the area of rehabilitation and release planning, we again judged it to be good, our highest assessment. There was much to praise in this area, and in the report we identify no less than five instances of good practice. The work with children and families was an example that many other

prisons could follow, as was the Outside Link facility which enabled prisoners to seek help and advice after their release. The Building Resilience programme, which was designed to support those prisoners who had experienced trauma and is widely used within the female prison estate, was being piloted for the first time in a male prison at Peterborough.

HMP Peterborough still had much work to do to reduce the violence that had flowed from the influx of drugs into the establishment. Nevertheless, at the time of this inspection the signs were promising that further progress could be made. It is essential that the prison is restored to being a safe place, so that all the good work that was being delivered in so many areas is not put in jeopardy.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

September 2018

Fact page

Task of the establishment

HMP Peterborough is a local and resettlement prison for category B prisoners, with an extension for category C prisoners.

Certified normal accommodation and operational capacity

Prisoners held at the time of inspection: 810

Baseline certified normal capacity: 762

Operational capacity: 868

Notable features from this inspection

2,300 new prisoners were received each year.

101 foreign national prisoners were held at the time of the inspection.

31% of prisoners were from black and minority ethnic backgrounds.

90 prisoners were released into the community each month.

Demand for substance misuse services was high; 282 prisoners were receiving psychosocial support and 160 were receiving opiate substitution therapy at the time of the inspection.

The prison had facilitated over 600 release on temporary licence events in the previous six months.

Prison status (public or private) and key providers

Private; Sodexo Justice Services

Physical health provider: Sodexo Justice Services (GP services sub-contracted to Cimmaron UK)

Mental health provider: Primary care – Sodexo Justice Services; Secondary care – Cambridgeshire and Peterborough NHS Foundation Trust

Substance misuse provider: Clinical – Sodexo Justice Services; Psychosocial – Cambridgeshire and Peterborough NHS Foundation Trust

Learning and skills provider: Sodexo Justice Services

Community rehabilitation company (CRC): Bedfordshire, Northamptonshire, Cambridgeshire and Hertfordshire (BeNCH), contracted to St Giles

Escort contractor: Serco, GEOAmev & Mitie Care and Custody (deportation transport)

Prison group

Private sector prisons

Brief history

The prison was run by Peterborough Prison Management Ltd, which sub-contracted Sodexo Justice Services. It was established on 28 March 2005. In January 2015, it opened a resettlement unit in house block 5, providing spaces for an additional 292 prisoners. House blocks 3 and 4 were part of the original prison and built to accommodate 480 prisoners.

Short description of residential units

There are 12 wings in total, four on each of the three house blocks.

House block 3:

W1 – First night and induction unit

X1 – Integrated drug treatment system and first night centre for those requiring detoxification or stabilisation

Y1 – Remand prisoners

Z1 – Remand prisoners

House block 4:

W2 – Convicted prisoners

X2 – Convicted prisoners

Y2 – Convicted prisoners

Z2 – Convicted prisoners on the enhanced level of the incentives and earned privileges scheme

House block 5:

Burghley wing – Convicted prisoners on the enhanced level of the incentives and earned privileges scheme, veterans, over-50s and those participating in release on temporary licence

Royce wing – Safeguarding unit for vulnerable prisoners

Cavell wing – Convicted category C prisoners whom the prison aims to progress to Burghley wing

Nene wing – Convicted category C prisoners whom the prison aims to progress to Burghley wing

Name of director and date in post

Damian Evans; October 2016

Independent Monitoring Board chair

Pauline Davison

Date of last inspection

16–27 February 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

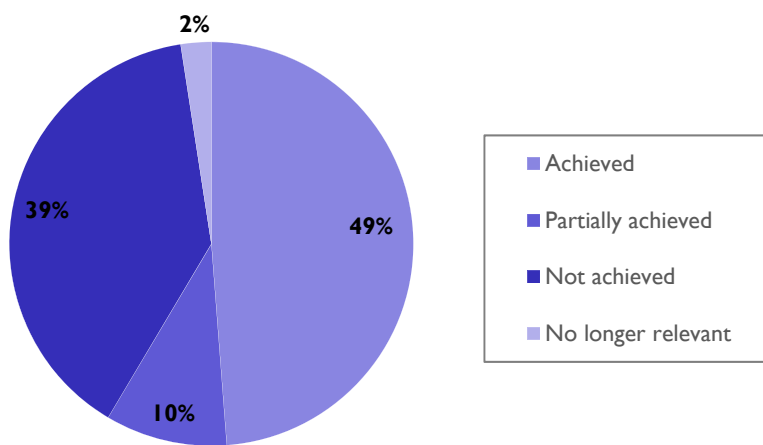
¹ <https://www.justiceinspectorates.gov.uk/hmiprison/our-expectations/prison-expectations/>

² The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

Summary

- S1 We last inspected HMP Peterborough in 2015 and made 41 recommendations overall. The prison fully accepted 32 of the recommendations and partially (or subject to resources) accepted four. It rejected five of the recommendations.
- S2 At this follow up inspection, we found that the prison had achieved 20 of those recommendations, partially achieved four recommendations and did not achieve 16 recommendations. One recommendation was no longer relevant.

Figure 1: HMP Peterborough progress on recommendations from last inspection (n=41)



- S3 Since our last inspection, outcomes for prisoners had declined in the Safety and Respect healthy prison areas. Outcomes for Safety were not sufficiently good and were reasonably good for Respect. Outcomes for Purposeful Activity had improved and were now reasonably good. Rehabilitation and release planning outcomes remained good.

Figure 2: HMP Peterborough 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** *Prisoners were supported well during their early days at the establishment. Levels of violence had doubled since the previous inspection, and much of this was associated with substance misuse and debt. Although the security and safer custody teams had responded appropriately to this issue, behaviour management was undermined by inconsistent application of the incentives and earned privileges scheme and a lack of challenge by staff. In addition, around half of adjudications had been not proceeded with or dismissed. Levels of use of force were high; governance was good but some incidents could have been avoided by better use of de-escalation by staff. Stays on the segregation unit were generally short and the regime was good. Support for prisoners at risk of self-harm was reasonable and safeguarding arrangements were developing well. **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 Peterborough were good against this healthy prison test. We made nine recommendations in the area of safety. At this inspection, we found that six of the recommendations had been achieved and three had not been achieved.*
- S6** The reception area was clean and well ordered, and processes were efficient. There was good use of orderlies and peer support workers to address initial concerns. Risks were identified well during the reception interview. In our survey, prisoners were generally positive about first night conditions, and the peer-led induction session was engaging.
- S7** Levels of violence had doubled since the previous inspection, although there had been a downward trend in the previous three months. There was evidence that a large amount of this increase was associated with substance misuse and debt. In our survey, a fifth of prisoners said that they currently felt unsafe. Systems for identifying perpetrators of violence were comprehensive, and analysis and investigations were good. A new process for managing perpetrators was showing signs of success. Consultation with prisoners about violence and related factors had taken place and the prison was acting on some useful information gathered from prisoners and staff. This good work to tackle bullying and violence was undermined by the inconsistency of staff challenge of low-level poor behaviour on the residential units. There were also inconsistencies in the management of prisoners on the basic level of the incentives and earned privileges scheme, and there was not enough emphasis on rehabilitation for those seeking enhanced status. In addition, almost half of the adjudication charges laid, including some for serious violence, had been either dismissed or not proceeded with and around 250 were still waiting for a hearing, although the backlog was being worked on.
- S8** Levels of use of force were high, and far higher than at comparator prisons. Most incidents of force related to threatening behaviour or not obeying lawful orders. The prison was taking robust action to deal with poor practice in the use of force but some incidents could have been avoided by better use of de-escalation by staff.
- S9** The segregation unit communal areas were clean but cells were grubby and contained graffiti. Exercise yards were stark. Few prisoners remained on the unit for long periods and care plans were good. Most prisoners returned to residential locations within the prison. Mental health support was very good, with a dedicated nurse for the unit. The regime on the unit was reasonable and prisoners could attend gym sessions and religious services, according to individual risk assessments. Staff-prisoner relationships on the unit were reasonable but staff did little to challenge low-level poor behaviour, such as shouting out of windows and banging on cell doors.

- S10 An escape from the prison in January 2018 had been investigated and the resulting recommendations implemented fully, including improvements to physical and procedural security. Intelligence gathering and analysis were thorough and prompt. Required actions, such as searching and drug testing, were carried out quickly and with considerable success. Relationships and information sharing between security and safer custody teams were good. There was a reasonable drug supply reduction strategy, identifying the main areas of concern, and action was undertaken to address these. Drug use was a serious problem. In our survey, 52% of prisoners said that it was quite easy or very easy to get illicit drugs in the prison and 21% that they had developed a drug problem since being there. The random mandatory drug testing rate was high, and currently stood at 22% (including new psychoactive substances), although this was lower than earlier in the year.
- S11 Levels of self-harm were slightly higher than at comparator prisons. Assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm were opened appropriately. Staff on the wings knew the circumstances of prisoners on ACCT procedures but many such prisoners we spoke to felt unsupported. Assessments and reviews were generally reasonable but care planning was underdeveloped. Most recorded conversations were functional and did not evidence meaningful engagement. There was good support from Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) and safer custody peer support workers. Governance of the use of anti-ligature clothing and removal of items from cells for those who were at serious risk of self-harm was weak.
- S12 There were effective links with the local authority to support safeguarding processes. There were good mechanisms to identify prisoners with complex needs but care planning, although reasonable, was not detailed enough. Processes to identify and safeguard prisoners at risk were developing well.

Respect

- S13** *Relationships between staff and prisoners were generally friendly and courteous but some staff did not enforce boundaries and rules sufficiently well. The key worker scheme had been implemented thoughtfully and was beginning to have a positive impact. Living conditions were reasonable and prisoners had good access to everyday essentials, but the physical conditions were sometimes poor. The applications and complaints systems were effective but consultation arrangements were weak. Although there was no clear evidence of poorer outcomes, the management of equality and diversity had deteriorated since the previous inspection. Health services met need but weak oversight created risk and medicines management was poor. Substance misuse services were broadly appropriate. **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 Peterborough were good against this healthy prison test. We made 18 recommendations in the area of respect. At this inspection we found that five of the recommendations had been achieved, one had been partially achieved and 12 had not been achieved.*

- S15 In our survey, around three-quarters of prisoners said most staff treated them respectfully. The interactions we observed were generally friendly and courteous. There was too little challenge of low-level poor behaviour on some wings, and some inexperienced staff needed more support to be able to enforce boundaries and rules. The key worker scheme was developing well and beginning to have a good impact. All staff were trained in this work, and at the time of the inspection a third of prisoners were receiving key work sessions. Plans to roll the scheme out to all prisoners were coherent.

- S16 In our survey, prisoners were very positive about living conditions. Cells were mostly in a reasonable condition and prisoners had good access to cleaning materials and other essential items. However, we found extensive graffiti that had clearly been there for some time, and offensive material on cell walls.
- S17 Communal areas on some residential units were grubby. Although fewer than at the time of the previous inspection, too many prisoners still shared small, often stiflingly hot and overcrowded cells, with insufficient furniture and inadequate screening of toilets. Showers lacked privacy and some were dirty and mouldy, with paint peeling off the walls.
- S18 The quality and quantity of the food provided were reasonable but serveries were not sufficiently clean and the food service was poorly supervised by staff. The range of goods available in the prison shop did not meet the needs of the population.
- S19 Consultation arrangements had deteriorated and were weak. There was no central prison council and wing meetings were, at best, rare and sporadic, with little evidence of follow-up of actions. The applications and complaints systems worked well and the electronic kiosks gave prisoners some control over their daily lives.
- S20 Our survey results from prisoners in minority groups were broadly similar to those of comparator groups and we found no evidence of obvious direct discrimination. However, equality and diversity did not have the same profile as we had found previously. Diversity inclusion action team meetings took place less frequently, were inconsistently attended by staff and had not been attended by prisoner representatives for over six months.
- S21 Consultation with prisoners about diversity had lapsed. The quality of investigations into allegations of discrimination was reasonable, but there were a number of enquiries which were inconclusive. Insufficient use was made of external quality assurance procedures and feedback to help to resolve these. Professional telephone interpreting services were used in several areas of the prison, although we came across recent instances where this had not been the case, for prisoners during reception, on their first night, on induction and with the external adjudicator. The support available to prisoners from different minority groups was mixed. It was better for foreign nationals and prisoners with disabilities but there was no provision for gay and bisexual prisoners. The chaplaincy maintained a reasonably high profile within the establishment. Access to religious services was good and chaplains provided a high level of pastoral support.
- S22 Health services generally met need, but some aspects of the governance of the service created too much risk. Oversight of the pharmacy service was poor and too many aspects of medicines management caused concern. Access to health services was good for all prisoners. There was an appropriate range of primary care services but there was a large backlog of people who had not received their secondary health screen. Officers on the inpatient unit provided compassionate support to prisoners with complex needs but the regime was not sufficiently therapeutic. Social care arrangements were excellent but reliant on one member of staff, which created risk. The mental health team provided good support but some prisoners had excessive waits to transfer to hospitals under the Mental Health Act.
- S23 There was a high demand for substance use services, which generally met need. However, some aspects of clinical care were lacking. The psychosocial service offered a wide range of in-cell activities, one-to-one work and support from recovery champions. There was not enough group work available to meet demand.

Purposeful activity

- S24** *The amount of time out of cell was good for most prisoners but exercise periods were too short. Gym facilities were good and prisoners had good access to them, but they had poor perceptions about library provision. Managers had implemented an effective strategy to improve learning, skills and work provision since the previous inspection. There were enough activity places to occupy 80% of the population, and the allocation process worked well. Teaching and learning were good and outcomes had improved, and were particularly high in English and mathematics. Attendance was good in activities and prisoners who refused to attend were appropriately challenged. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S25** *At the last inspection in 2015 we found that outcomes for prisoners in Peterborough were not 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.*
- S26** The amount of time out of cell was good. Fully employed prisoners could be unlocked for around 10 hours on weekdays, although for some this was as little as three hours; at weekends, all prisoners were unlocked for seven and a half hours a day. Exercise periods were too short, at 30 minutes. The daily evening association periods were rarely curtailed and most association equipment was in good order and well used.
- S27** Access to the library was limited, and in our survey only 6% of prisoners said that they used it twice or more a week. Attendance at the gym was good. Classes were available for prisoners with additional support needs, and the number of sessions scheduled for vulnerable prisoners had increased. The gym facilities were good but the showers were in need of refurbishment.
- S28** Leaders and managers of education, skills and work had implemented an effective strategy for improving the provision of activity. In particular, the raising of prisoners' English and mathematics skills levels was given a high priority. Quality assurance and improvement arrangements were effective. The range and breadth of education, vocational training and work were adequate. Appropriate qualifications were on offer, except in the laundry. There were sufficient activity places to occupy 80% of the prison population at any one time. Activity allocation was effective. Waiting lists were short and suitably managed. Pay rates and differentials were fair and reflected the demands of the activities. An appropriately large proportion of prisoners attended sessions and were punctual.
- S29** Prisoners participated in several useful enrichment activities that utilised the prison's external links. The synchronisation and availability of interventions to improve the success of prisoners' applications for education, training and/or employment opportunities required improvement. Vulnerable prisoners had limited access to taught education and vocational training classes. Managers had yet to exploit regional skills shortage information fully, to plan the provision.
- S30** The quality of taught sessions was generally good. Prisoners participated in courses that developed their skills well and addressed their sentence plan objectives. Those taking distance-learning courses received effective support. Learners with additional support needs were suitably identified and supported. Tutors made good use of classroom-based peer mentors to facilitate learning. In a few cases, tutors did not provide prisoners with sufficiently detailed feedback or ensured that session activities challenged the less or more able prisoners. Prisoners' progress reviews did not always challenge them sufficiently to develop their personal and employability skills when undertaking work or vocational training.

- S31 Learners behaved well, and demonstrated respect and support for each other in classes, although we observed some low-level disruption in a small minority of lessons. Most prisoners quickly developed a positive attitude towards learning and session attendance. Prisoners who did not attend were appropriately challenged by staff. Prisoners employed in the kitchen developed a good appreciation of working to demanding deadlines.
- S32 There were very high qualification achievement rates for English and mathematics. Most prisoners who undertook education and vocational training qualifications achieved them. Prisoners' written and practical work was of an appropriate standard to enable them to complete their qualifications successfully. Most prisoners made at least the progress expected in developing new skills and knowledge. Prisoners who received additional support achieved their full qualification or qualification units similarly to others.

Rehabilitation and release planning

- S33 *Maintaining contact with children and families was given a high priority and we found many examples of excellent work. The management of rehabilitation and release planning was good. There was an impressive range of services to meet prisoners' resettlement needs. This largely mitigated the limited contact between offender supervisors and prisoners. The work done to support prisoners on recall, repeat offenders and those who had experienced trauma was highly effective. Prisoners had good access to release on temporary licence. Public protection work was generally sound. Pre-release planning was effective, although recording required improvement. However, 30% of prisoners did not have sustainable accommodation on release. Work through the Outside Link facility was good practice. **Outcomes for prisoners were good against this healthy prison test.***
- S34 *At the last inspection in 2015 we found that outcomes for prisoners in Peterborough were good against this healthy prison test. We made four recommendations in the area of resettlement. At this inspection we found that three of the recommendations had been achieved and one was no longer relevant.*

- S35 Children and families work was well managed, with a good strategy which emphasised the importance of maintaining strong family links. The visitors centre was welcoming and provided family members and friends with helpful and reassuring advice. Some excellent proactive work was being carried out to help prisoners who had difficulty in maintaining constructive relationships with their families. Family support workers routinely facilitated 'contact' visits for fathers and were sometimes involved in organising 'letter box contact' for prisoners whose children were fostered or had been adopted.
- S36 The overall structure of offender management and rehabilitation was good, with a clear strategic approach, supported by appropriate policy documents and bimonthly resettlement meetings. The quality of offender assessment system (OASys) assessments for high-risk cases was good but those for medium-risk prisoners were more variable. Caseloads for offender supervisors were too high to offer an effective level of case management or contact beyond the completion of OASys assessments. Probation caseloads were lower, enabling a greater level of contact and more effective case management.
- S37 Home detention curfew and recategorisation arrangements were sound. The prison had facilitated over 600 release on temporary licence events in the previous six months, with up to seven prisoners accessing voluntary work in the community at any one time.

- S38 Public protection procedures worked reasonably well in most cases. However, we were not assured that all prisoners subject to public protection and/or multi-agency public protection arrangements (MAPPA) were identified or managed as rigorously as necessary.
- S39 Despite the often-limited contact between offender supervisors and prisoners, there was an impressive range of alternative services and resources, including support through the rehabilitation team. The recent introduction of key workers, although not yet tied in formally with offender management, was already having a positive impact. Support for prisoners on recall was both effective and innovative, as was that provided for prisoners who had been to prison on 15 or more occasions. Work with prisoners who had experienced trauma was especially impressive, and unique in the male estate.
- S40 Three nationally accredited programmes were delivered. This appeared to be appropriate for the population. A wide range of non-accredited programmes was also provided, including those relating to motivation, anger management and improving relationships. In our survey, 57% of respondents said that they had done an offending behaviour programme at the establishment, and 60% that they had engaged in other programmes.
- S41 Housing provision through St Giles (on behalf of Bedfordshire, Northamptonshire, Cambridgeshire and Hertfordshire CRC) ensured that all prisoners requiring support were seen before release. However, finding accommodation before release was difficult, and almost 30% of prisoners released left the establishment without an address to go to. Programmes, interventions and support were often offered in an unplanned manner, with no clear prioritisation, or sequencing of identified work.
- S42 Virtually all prisoners were seen by St Giles staff before release, to complete a resettlement plan. The quality and usefulness of these plans varied and it was not always clear what work had actually been done before release. The recent introduction of pre-release boards was a good initiative. Further work was required but the model offered a good opportunity to ensure that all pre-release issues were covered. The Outside Links facility offered good support for prisoners immediately after, and potentially beyond, release.

Main concerns and recommendations

- S43 Concern: Levels of violence were too high. Too many prisoners felt unsafe, and bullied or intimidated by staff and other prisoners. Sanctions for poor behaviour were ineffective and staff did not always challenge poor behaviour.

Recommendation: Managers should ensure that poor behaviour is consistently challenged and that there are appropriate and effective sanctions for perpetrators of violence.

- S44 Concern: Governance systems and processes and the clinical oversight of health care services were weak. Significant risks were identified in relation to medicines management which had not been identified prior to the inspection.

Recommendation: The governance and clinical oversight of health care should be strengthened to improve systems and processes and reduce risk.

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 Prisoners could wait far too long in court before being brought to the establishment, and vans being redirected from HMP Bedford had exacerbated this situation. Most journeys to the prison took under two hours and the vans we saw were in a reasonable condition. Person escort records had identified all known risks but in many cases no dates or details were recorded, which made the information less useful for reception staff. Handovers between escort and prison staff were good and prisoners were not routinely handcuffed when leaving the van. However, they were all strip-searched in reception, without supporting intelligence (see recommendation 1.42).
- 1.2 There were around 160 movements to court every month. The prison made effective use of video courts (see also paragraph 2.33) and was expanding this provision at the time of the inspection.
- 1.3 The reception area was clean and well ordered, and processes to manage booking-in and property were efficient. Reception staff were friendly and professional, and 83% of respondents to our survey said that they were treated well in reception. Holding cells were clean and graffiti free, and some contained newspapers.
- 1.4 An average of 45 prisoners arrived at the establishment each week. Although processes in reception worked well, the large number of new arrivals sometimes resulted in prisoners spending too long there. When a van arrived after 7.30pm (lock-out time), it was likely that the last person to be processed would get to their cell at around midnight.
- 1.5 There was very good use of orderlies and peer support workers in reception, including drug recovery workers, Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) and Connections workers, who showed prisoners how to use the electronic kiosks (see paragraph 2.31) and completed menu and shop order forms with them. They had an allocated room, which contained a large amount of useful information.
- 1.6 All prisoners were offered a shower and a free telephone call in reception. In our survey, respondents were far more positive than at comparator prisons about being able to access telephone numbers and contacting family.
- 1.7 Risks were identified well during the reception interview. The prison had introduced a comprehensive reception screening risk assessment, and only staff trained in this and in assessment, care in custody and teamwork (ACCT) case management processes interviewed new arrivals. However, first night and health care interviews were not always confidential.
- 1.8 In our survey, respondents were generally positive about first night conditions. First night cells were clean but the fabric was shabby. All essential kit was provided, although prisoners

sometimes had to wait for in-cell telephones (see also paragraph 2.6) to be provided. They had good access to the wing kiosk, which meant that they could start to make applications for activities and services immediately.

- I.9** Around two-thirds of respondents to our survey said that they had felt safe on their first night, which was in line with comparator prisons but far less than at the time of the previous inspection (81%). There were enhanced checks on new arrivals throughout the night and night staff knew where they were located.
- I.10** On the day after their arrival, prisoners had a one-to-one interview with safer custody peer workers, to see if there were any welfare concerns. They also attended the well-being centre for their prison induction, underwent a second day health screening and had a free haircut, if they wanted one.
- I.11** The peer-led induction session was engaging but the PowerPoint presentation used contained too much information. In our survey, 95% of respondents, more than at similar prisons, said that they had completed an induction, and most of these said that it had covered everything they needed to know. A useful induction booklet was also available. The Connections workers supported new arrivals through their first few days at the prison and answered their queries. Those who needed drug stabilisation treatment were located on XI wing on arrival and started their induction process five days later. New receptions also had induction sessions with the chaplaincy, library and education departments, and a resettlement needs screening with the offender management unit. Induction was tracked centrally and prisoners did not move off the first night wing until it was complete.
- I.12** Although there was some printed information available in languages other than English, not enough use was made of professional telephone interpreting services during reception and induction. We saw prisoners who spoke little English sitting through an hour-long induction, without any interpreting available.
- I.13** Prisoners identified as being potentially at risk from others by virtue of their offence or other concerns were allocated to Royce wing. The induction process for this wing took place only on Fridays, which meant that a new arrival located there could spend a week in prison without going through a formal induction process.

Recommendations

- I.14 All initial reception interviews should be confidential.**
- I.15 Prisoners who speak little English and those allocated to Royce wing should have specific induction sessions, to ensure equivalent provision.**

Managing behaviour

Expected outcomes:

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

Encouraging positive behaviour

- I.16** Levels of violence had doubled since the previous inspection, and this had included some serious assaults, although there had been a downward trend in the previous three months. Much of the violence was related to substance misuse or debt. In our survey, a fifth of prisoners said that they currently felt unsafe, and over half that they had felt unsafe at some time during their stay at the establishment. Fewer prisoners than at the time of the previous inspection said that they had not been bullied or intimidated by other prisoners (48% versus 70%) or by staff (52% versus 72%) (see main recommendation S43).
- I.17** The safer custody team and security staff had responded appropriately to the increase in violence and showed an informed approach. Managers had recognised many of the reasons behind it, and systems for identifying the perpetrators were comprehensive. The violence reduction steering group met monthly, and analysis and investigations into identified trends were good. A weekly meeting considered all acts of violence and ensured that necessary actions were followed up. A new process for managing perpetrators of violence, the 'challenge, support and intervention plan', was showing early signs of success and some challenging individuals had shown an improvement in their behaviour.
- I.18** Consultation with prisoners about violence and some related factors had taken place and the prison was acting on some useful information gathered from prisoners and staff.
- I.19** Sanctions for prisoners, such as the incentives and earned privileges (IEP) scheme and adjudications, were not particularly effective, and this undermined the prison's efforts to tackle violence. We also saw many incidents of low-level poor behaviour on the residential units going unchallenged (see main recommendation S43).
- I.20** In our survey, only 40% of prisoners said that the IEP scheme encouraged them to improve their behaviour, and 42% that it was fair. There were inconsistencies in the management of prisoners on the basic level of the scheme; some were told that they would have at least seven days on this regime, and others 28 days. There was not enough emphasis on rehabilitation for those seeking enhanced status, and we found cases where this had been awarded for gaining two positive comments from staff, and others where prisoners had fully engaged in the regime but remained on the standard level.

Adjudications

- I.21** The number of adjudications had increased and was higher than at similar prisons. Almost half of the adjudication charges laid in the previous six months had been either dismissed or not proceeded with, including for serious charges, and too many were still waiting for a hearing, although the backlog was being worked on. This resulted in risk factors being missed when assessing prisoners during their sentence, as well as a lack of consequences for wrongdoing (see also paragraph I.19).

- I.22** We found that some serious charges, such as assaults, had not been dealt with in line with the prison's guidelines. These were dealt with by the prison instead of the independent adjudicator and had either missed their deadline or been dealt with unduly leniently.

Use of force

- I.23** Levels of use of force were far higher than at comparator prisons and at the time of the previous inspection, with 434 incidents in the previous six months. Around 40 incidents per month involved the full use of control and restraint. Force was used more often for incidents of not obeying orders or issuing threats than for incidents involving fights or assaults.
- I.24** Records of use of force were well ordered and most reports of incidents were complete. Most incidents had accompanying closed-circuit television or body-worn camera footage, and the collation of paperwork and video recordings after incidents was excellent. Scrutiny and quality assurance by senior managers was robust.
- I.25** Some footage we viewed showed some good, measured responses and examples of skilled officers calming prisoners down. However, we also saw footage showing staff not being sensitive enough to prisoners in distress and not de-escalating situations sufficiently. Body-worn cameras were often switched on too late and paperwork did not always describe the build-up to situations. Force was not always used as a last resort.
- I.26** There was a system to debrief prisoners following incidents and get their feedback but this was not used systematically.
- I.27** The prison was taking robust action to deal with poor practice in the use of force. Staff received regular training and briefings, but more work was needed to ensure that they developed communication skills and that de-escalation was used to full effect.

Recommendations

- I.28** **Prisoner debriefs should take place after all incidents.**
- I.29** **Staff should receive further training in de-escalation, to ensure that force is used only as a last resort.**

Segregation

- I.30** The segregation unit communal area was clean and bright but cells were grubby and contained graffiti. Exercise yards were stark. Prisoners located onto the unit who were wearing their own clothes were required to change into prison clothing under observation; this amounted to a strip-search, which was inappropriate for some (see recommendation I.42).
- I.31** There were six prisoners on the unit at the start of the inspection. Reviews were timely and multidisciplinary, records were detailed and care plans were generally comprehensive, with a focus on reintegration back to the wings. A dedicated mental health nurse attended the unit daily to see all prisoners. She also carried out assessments on those who were on open ACCT documents, and 24-hour assessments on all those on the unit. Few prisoners stayed on the unit for long periods and most returned to residential units at the establishment. Over the previous three months, there had been an increase in the number of prisoners

transferred out of the prison from the unit, which needed to be monitored, to ensure that the transfers were appropriate.

- I.32 The regime on the unit was adequate for most. Exercise and showers were offered daily and most prisoners had in-cell telephones or could use the communal PIN telephone. Those on the unit for their own protection had a television in their cell. Segregated prisoners could attend a weekly gym session and attend religious services off the unit, according to individual risk assessments, and this had been approved for some. More needed to be done to provide activities in association for those who were not on the unit for punishment.
- I.33 Twenty-three prisoners on open ACCT documents had been held on the unit in the previous six months. In all cases other locations were considered and a proper assessment of exceptional circumstances had taken place.
- I.34 Levels of unlock for all prisoners were decided by risk assessment and these were proportionate to the risks posed.
- I.35 Staff–prisoner relationships on the unit were reasonable. Staff knew the prisoners in their care and responded to requests and incidents. Most prisoners we spoke to on the unit were complimentary about segregation staff, and in our survey 74% of those who had been segregated in the previous six months said that they had been treated well. Staff sometimes failed to challenge some low-level poor behaviour, such as shouting out of windows and banging on cell doors (see main recommendation S43).

Recommendation

- I.36 **Segregation unit cells and toilets should be kept clean.**

Good practice

- I.37 *A dedicated mental health nurse attended the unit daily to see all prisoners, carrying out assessments on those who were on open ACCT documents, and 24-hour assessments on all those on the unit.*

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.38 An escape from the prison in January 2018 had been investigated and the resulting recommendations had been fully implemented, including improvements in physical and procedural security which were appropriate for a local prison. Prisoners could attend work and activities unhindered on free-flow movement and were escorted by staff outside of these times. There was some routine strip-searching in reception and on the segregation unit that was inappropriate (see paragraphs I.1 and I.30) There were effective procedures for dealing with misconduct and illegal conduct by staff. However, in a prison with high levels of violence, prisoners did not have an effective way of reporting concerns about these matters to the police as they were required to use the police reporting telephone line (101); some

prisoners told us that they would not use this line as they felt that their issues would not be dealt with.

- I.39** Intelligence gathering and analysis were thorough and carried out promptly, including at weekends. Required actions, such as searching and drug testing, were carried out quickly and with considerable success. The monthly ‘tactical tasking’ meeting discussed all intelligence thoroughly and the prison was sighted on the main threats of mobile phones and drugs. Information on the main security issues was disseminated to staff in daily briefings. Security objectives reflected the current threats, and there was good feedback from staff. Relationships and information sharing between security and safer custody teams were good.
- I.40** There were 15 visitors who had been banned following illicit activity or poor behaviour in visits. One visitor and 19 prisoners had been placed on closed visits, all for visits-related incidents. All restrictions were reviewed monthly and were lifted when no further intelligence was submitted or incidents had occurred.
- I.41** A drug supply reduction strategy had been developed, identifying the principal areas of concern and action required to address these. Drug use remained a serious problem. In our survey, 52% of prisoners said that it was quite easy or very easy to get illicit drugs in the prison and 21% that they had developed a problem with drugs since being there. Random mandatory drug testing (MDT) was up to date. The MDT positive rate for the previous six months was high, at 10.2%, and this increased to 22% when new psychoactive substances⁴ were included, but was reducing gradually month on month. The MDT suite was grubby, and the toilet dirty and inadequately screened.

Recommendations

- I.42 Strip-searching should be appropriately identified as such, properly authorised and recorded, and undertaken only when a risk assessment shows it to be necessary.**
- I.43 Prisoners should have an effective means of reporting concerns to the police.**

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.44** There had been one self-inflicted death and one non-natural death at the prison since the previous inspection. The deaths in custody action plan was coherent, and all previous actions were reviewed and tested annually. The plan incorporated additional recommendations from Prisons and Probation Ombudsman thematic reports, which was helping the prison to develop best practice. Most of the actions had been completed, although observation panels in cell doors were sometimes still covered, which was a serious concern.

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

- I.45** Suicide and self-harm prevention work was overseen by a small safer prisons team. The number of self-harm incidents was slightly higher than at comparator prisons, but the number of ACCT documents opened was similar.
- I.46** Prisoners who needed to be on an ACCT were identified appropriately, including those who were vulnerable because of a change of circumstances, such as receiving a long sentence. Initial ACCT assessments were reasonable but not always detailed and did not always explore the underlying reasons why the prisoner was experiencing distress. Reviews had appropriate input from health services staff but none from other departments.
- I.47** Although staff on the wings knew the circumstances of prisoners on ACCT procedures, this was not always reflected in ACCT records. Most of the conversations recorded were functional and perfunctory, and did not evidence meaningful communication. Most entries were from residential officers, with too little input from other staff who were in contact with prisoners on an ACCT.
- I.48** Many prisoners we spoke to who were on an ACCT said that they did not feel cared for. Care planning was underdeveloped. Although there were useful resources in the prison that could help prisoners in crisis, such individuals were not always signposted to these where appropriate. Actions on care plans were not always fully followed up and signed off before ACCTs were closed.
- I.49** The safer prisons team had some contact with the families of prisoners on an ACCT but this was not yet embedded as part of the ACCT process.
- I.50** There was good support from Listeners and safer custody peer support workers, who had a visible presence in the prison, but there was some confusion about access to Listeners on Royce wing, which needed clarifying.
- I.51** Governance of the use of anti-ligature clothing and removal of items from cells for those who were at serious risk of self-harm was weak and did not involve an enhanced multidisciplinary review.

Recommendation

- I.52** **Staff from all relevant departments should be involved in assessment, care in custody and teamwork (ACCT) reviews and record observations and conversations in ACCT documents, where appropriate.**

Protection of adults at risk⁵

- I.53** Safeguarding processes were better than we usually see. There were useful links with the local authority, and an on-site social worker supported this work. Senior staff attended the local safeguarding adults board.
- I.54** There were good mechanisms to identify prisoners with complex needs, including those with high levels of self-harm, health and social care needs, and challenging behaviour. The weekly multidisciplinary complex needs meeting was effective and care plans were reasonable but

⁵ 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).

minutes and care plans did not fully detail the discussions that had taken place or decisions behind actions.

- I.55** Processes to identify prisoners at risk were developing well. The prison had recently introduced a 'keep safe' form, which anyone (prisoner or staff member) could complete if they were concerned about a prisoner's well-being. Those at risk because of their offence or because of debt were held on Royce wing, the safeguarding wing. There was a new policy and process of referral to the safer prisons team for prisoners who were self-isolating but this was not yet embedded. The safer prisons team had also begun reviewing cell sharing risk assessments following incidents or the receipt of new information.

Section 2. Respect

Prisoners are treated with respect for their human dignity.

Staff-prisoner relationships

Expected outcomes:

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

- 2.1** In our survey, around three-quarters of respondents said that most staff treated them respectfully. The interactions we observed were generally friendly and courteous, and staff were positively engaged and responsive to prisoners' queries. Staff and prisoners generally addressed each other by their first names. However, there was too little challenge of low-level poor behaviour on some wings and we also saw some blatant incidents of poor behaviour that were not tackled. Some wings were well ordered but others lacked supervision. Some inexperienced staff needed more support to be able to enforce boundaries and rules (see main recommendation S43).
- 2.2** P-NOMIS (electronic case notes) entries varied in depth but it was noticeable that there were more entries for prisoners on the category C side of the prison. There was evidence of input from key workers (trained designated officers tasked with supporting a prisoner's welfare and progression) but there were not enough entries from other staff. The key worker scheme was developing well and beginning to have a good impact. All staff were trained in this work, and at the time of the inspection a third of prisoners were receiving regular key work sessions. The scheme was being rolled out so that all prisoners would have a key worker by the end of 2018. Implementation plans were coherent as the prison had allocated the most challenging and vulnerable prisoners to key workers first, and assigned the most experienced staff to work with them (see also paragraph 4.28).
- 2.3** We saw some good support being offered, and in our survey 61% of respondents said that they had a personal officer; over half of these prisoners said that this officer was helpful. Around two-thirds of prisoners said that there was a staff member they could turn to if they had a problem.

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

- 2.4** Our survey results were extremely positive about living conditions and services on the wings. Most prisoners we spoke to said that access to cleaning materials and other essential items was good and that it was possible to live a well-ordered life, in clean and well-equipped cells.

- 2.5** Structurally, the relatively new residential units were in good order but, despite the many wing cleaners, communal areas on some wings were grubby, some stairwells were dusty and strewn with litter, and landing floors and walls were too often dirty and stained. The two enhanced wings were much cleaner and calmer than the rest of the prison.
- 2.6** Although many cells were clean, tidy and well equipped, we found: too many to be dirty, with long-standing, extensive graffiti; many covered observation panels in cell doors (see also paragraph 1.44); a lack of enforcement of the offensive display policy; and a clear disregard of basic wing rules that too often went unchallenged (see also paragraph 2.1 and main recommendation S43). Although fewer than at the time of the previous inspection, too many prisoners still shared small and overcrowded cells, which were made almost intolerable because of poor ventilation, a lack of sufficient furniture and poorly screened toilets. Of concern, although we were told that young adults did not share cells with adults, we found at least one instance where this was the case. Few cells had lockable cabinets, which was particularly an issue for those in shared cells. Telephones had been installed in all cells since the previous inspection; these were appreciated by prisoners and removed the flashpoint of telephone queues on landings (see also paragraph 4.7). All cells had privacy locks but some locks could not be used because of a lack of keys.
- 2.7** Most prisoners wore their own clothes. Each wing had its own laundry, and all prisoners had access to it at least once a week. Prison-issue clothing and bedding was available for those who required it, and kit could be changed weekly.
- 2.8** Prisoners could shower daily. However, shower areas were in a much worse condition than at the time of the previous inspection and were often dirty and mouldy, with abandoned clothing and rubbish left on floors for long periods. Paint was peeling off some of the walls and none of the cubicles provided sufficient privacy.
- 2.9** Cell call bells were monitored and we were satisfied that they were answered promptly in most cases.

Recommendations

- 2.10 Communal areas should be kept clean.**
- 2.11 Cells designed for one prisoner should not be shared.** (Repeated recommendation 2.7)
- 2.12 Ventilation in cells should be improved.** (Repeated recommendation 2.8)
- 2.13 Young adults should not share cells with adults.**

Residential services

- 2.14** In our survey, 41% of respondents said that the food provided was quite or very good, which was better than we normally see. Menus were varied and healthy options were available. Special diets were provided where required, in consultation with the health care department, and prisoners could have two hot meals a day. A wide range of cultural and religious events were supported by the provision of speciality meals (see also paragraph 2.56).
- 2.15** Prisoners could order their meals up to two weeks in advance via the wing kiosks (see paragraph 2.31). Breakfast, comprising cereals, toast and fresh milk, was issued daily from the wing serveries.

- 2.16** The meal sessions we witnessed were often chaotic, with little effective supervision from wing staff. We saw prisoners refusing to queue, walking up to the hotplates and helping themselves. Portion control was often poor, leading to wide disparities in meal sizes.
- 2.17** Mealtimes were mostly reasonable, although the evening meal at weekends was served far too early, at 3.45pm.
- 2.18** The main kitchen was clean and well equipped. The maintenance and repair contract was effective and ensured that equipment was rarely out of action. However, serveries were not sufficiently clean. We found many hotplates to be dirty, with burned-on food, and in some cases trays of food from previous days. Cooking facilities on most wings were very limited, consisting of toasters. Prisoners on the enhanced wings had access to microwave ovens and grills. There were facilities to dine communally on the enhanced wings but prisoners on the other wings ate in their cells.
- 2.19** Kettles were issued only on the enhanced wings; the rest of the population had to use flasks for making overnight drinks.
- 2.20** Beyond an annual survey, there was little consultation about the food served. Wing food comment books were not readily available and few prisoners knew they existed.
- 2.21** In our survey, only 29% of prisoners said that the prison shop sold a wide enough range of goods to meet their needs. There was little consultation, and prisoners on the wings were unaware of any way that they could influence the range of goods available, beyond making a formal complaint.
- 2.22** Catalogue access was good and items were normally received, processed and issued within two weeks of the order being placed.
- 2.23** In our survey, 53% of respondents said that they had had access to the prison shop within the first few days of arrival, against the 26% comparator. Grocery packs up to the value of £15.50 were available on arrival. The cost of these was recovered as soon as prisoners had sufficient funds in their account. Despite the shop being on-site, prisoners could wait up to a week to receive their first full order.

Recommendations

- 2.24** **Staff should supervise and control the serving of meals, to ensure that all prisoners receive their allocated meals.**
- 2.25** **The evening meal should not be served before 5pm.**
- 2.26** **All prisoners should be issued with in-cell kettles.**
- 2.27** **Prisoners should be consulted about the range of goods available from the prison shop.**

Prisoner consultation, applications and redress

- 2.28** Consultation arrangements had deteriorated and were weak. There had been very few consultative meetings with prisoners, and these were ad hoc, with little follow-up of actions. There was no structured process to engage with prisoners about daily life and other issues that affected them.

- 2.29** Around 1,000 complaints had been submitted in the previous six months, which was in line with similar prisons, although more than at the time of the previous inspection. Most of these had related to health care and property. Complaint forms were easily accessible and supplies were replenished every day.
- 2.30** The complaints we viewed had generally been answered politely and respectfully. Managerial oversight was good and quality assurance processes were thorough.
- 2.31** All wings had electronic 'kiosks', enabling prisoners to deal effectively with most day-to-day requests and transactions. Applications were made via these kiosks, which enabled tracking and follow-up where required. Prisoners were positive about the kiosks and appreciated the control that they gave them over their daily lives.
- 2.32** Access to legal and bail information was good, and better than we usually see. Newly remanded prisoners were seen by a Connections worker, who could signpost them to accommodation services to support bail applications. Rehabilitation staff provided details of solicitors and, when required, could authorise a free telephone call.
- 2.33** The video court was well used to reduce the necessity for some prisoners to attend courts, and two other video-link rooms were used for consultation with solicitors, inter-prison visits and to contact community offender managers.
- 2.34** There was ample provision of legal visits slots, and there were appointments available for most of the sessions during the inspection. The library held a range of legal texts and a full set of Prison Service Instructions, which could be copied on request (see also paragraph 3.4). Access to Justice laptop computers, to help prisoners to prepare paperwork for legal cases, were available but rarely used.
- 2.35** In our survey, 46% of respondents said that their legal letters had been opened by staff when they had not been present. This issue was well recorded, and records showed that 10 letters had been opened in error in the previous six months. This was often because legal representatives had not marked the envelope correctly, and in these cases both the sender and the recipient were informed.

Recommendation

- 2.36 Prisoners should be regularly consulted about prison life and given the opportunity to present any areas of grievance or dissatisfaction directly to managers.**

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 characteristics⁶ 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

- 2.37** Our survey results from prisoners in minority groups were broadly similar to those of comparator groups, and during the inspection we found no evidence of any obvious direct discrimination. However, equality and diversity did not have the same profile as we had found previously and there was limited evidence of it being promoted through posters or displays. Diversity inclusion action team (DIAT) meetings took place bimonthly, having previously taken place monthly. They were now less well attended by staff, and prisoner diversity representatives had not been present at them for over six months. Detailed data were produced for each DIAT, but the level of analysis was limited.
- 2.38** Equality and diversity work was led by the decency manager, who now reported to the head of learning and skills, rather than directly to the director, as previously. The two foreign national managers, who had previously worked alongside the decency manager, continued to carry out this function but were now based within the offender management unit.
- 2.39** There were normally around eight or nine prisoner diversity representatives. At the time of the inspection, the most prominent members of this group covered race and religion, and the diversity representatives were on enhanced status, which enabled them to 'wing walk', so that they could pick up issues from other prisoners. There were weekly meetings between the diversity representatives and the decency manager, who brought the matters they raised to the DIAT, where they were discussed by staff. The representatives told us that they found this process useful and gave examples where things had changed as a result – for example, improvements had been made to the laundering of items for Muslim prisoners. The diversity representatives that we spoke to believed that the biggest problem they came across in their role was the difficulty in communication faced by prisoners who did not speak English. Although we came across recent cases where professional telephone interpreting services should have been used for a prisoner on their first night and with the external adjudicator, on balance we were satisfied that these services were used sufficiently and effectively.
- 2.40** We were told that prisoner discussion forums had not been run for the previous two years because they were difficult to organise. This limited the range and depth of consultation taking place within minority groups. Although the diversity representatives carried out some useful work, this was no substitute for regular group discussions involving prisoners covering all the protected characteristics.
- 2.41** Forty discrimination incident report forms had been submitted over the previous six months, which was double the number in the same period at the time of the previous inspection. The quality of investigations, and of responses, was reasonable, but we found several enquiries which were inconclusive and should have been taken further. Insufficient use was made of external quality assurance procedures and the arrangements to provide prisoner feedback.

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

Recommendation

- 2.42** There should be effective consultation with prisoners from all the protected characteristics, and prisoners from each of the protected characteristics should be able to receive the help that they need.

Protected characteristics

- 2.43** Overall, the support for people from different minority groups was not as strong as at the time of the previous inspection.
- 2.44** Thirty-one per cent of the population identified as being from a black and minority ethnic group. Black History Month was celebrated and was popular with prisoners but, apart from a designated representative, there were no other formal arrangements to support the distinctive needs of this group.
- 2.45** Around one in five prisoners was Muslim. They were well supported by the Muslim chaplain, who visited the prison every week and was satisfied that the needs of Muslim prisoners were being met.
- 2.46** At the time of the inspection, there were 101 foreign national prisoners, and they were well supported. Specialist prison staff provided drop-in clinics every week and foreign national prisoners could also attend surgeries run by a voluntary organisation (Hibiscus), which was able to advise them of their rights. Home Office officials visited the prison regularly to carry out immigration casework.
- 2.47** Thirty-four per cent of prisoners responding to our survey considered themselves to have some form of disability. The prison identified and met the needs of these prisoners reasonably well, with strong links with the local authority and a good level of social care input (see section on social care). We received complaints from some prisoners with physical disabilities about their treatment but, on the whole, we found that the prison made the best use of the resources available.
- 2.48** Just over 7% of the population were over the age of 50. Many of these were vulnerable prisoners and located on Royce wing. This meant that they had occasional access to a small library on the wing, and could also attend a gym session designed for older prisoners. A similar percentage of the population were under 21. There was good awareness of the distinctive needs of this age group, and relevant guidance and assistance was provided by the family support team in supporting young people who were care leavers to maintain contact with families (see section on children and families and contact with the outside world).
- 2.49** Some good work was carried out with prisoners from a Traveller background and service veterans, but there was no formal support available for gay or bisexual prisoners. In our survey, 6% of respondents identified as gay or bisexual but the prison had not identified any prisoners from this group. Of concern, some homophobic comments were made during a group discussion with diversity representatives, and this was an area where additional training and awareness raising was required.

Recommendation

- 2.50** Diversity representatives should receive sufficient training, including awareness training relating to sexual orientation, and any discriminatory attitudes should be challenged.

Faith and religion

- 2.51** Prisoners' spiritual needs were well met and our survey results associated with this area were positive. Sixty-eight per cent of prisoners said that their religious beliefs were respected, and 88% that they could attend religious services if they wanted to.
- 2.52** An experienced managing chaplain had recently been appointed, following a period of over a year without one, and he told us that his priority was to make sure that chaplains were out on the wings as much as possible.
- 2.53** All newly admitted prisoners were seen by a chaplain shortly after their admission, issued with an information leaflet based on their chosen religion and told about the services offered by the chaplaincy. Statutory visits were carried out as required and a rota had just been introduced to ensure that all prisoners on an open assessment, care in custody and teamwork (ACCT) case management document were seen by a chaplain at least once a week.
- 2.54** The chaplaincy was well integrated into the day-to-day running of the prison and a representative from the team usually attended each of the main committees held within the establishment.
- 2.55** The faith facilities available consisted of a large multi-faith hall and a smaller dedicated space. These areas were well maintained and suitably equipped.
- 2.56** The chaplaincy produced a varied programme of faith-based events and worked closely with the catering department to promote all the major religious festivals (see also paragraph 2.14).

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.

- 2.57** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁷ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. CQC took enforcement action in the form of a warning notice, served to the provider on 15 August 2018 under section 29 of the Health and Social Care Act 2008. The regulatory breaches will be followed up with the health care provider.

Strategy, clinical governance and partnerships

- 2.58** Health services were provided by Sodexo Justice Health and Cambridgeshire and Peterborough NHS Foundation Trust (CPFT). Regular partnership board and contract review meetings took place, and health managers were well engaged with the wider prison.
- 2.59** A health needs assessment had been completed in December 2017 but its recommendations had not been incorporated into the service action plan.

⁷ CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

- 2.60** There was insufficient prisoner engagement to support health service development. A recent survey had been carried out to review patient satisfaction, but the results from this had yet to be analysed and patient feedback was not informing service delivery. A second survey for missed appointments had been completed and findings were being used to reduce non-attendance rates.
- 2.61** There were many nursing vacancies. Although regular agency staff were used and received good support, clinical nurse managers covered clinics and daily nursing activity, which resulted in gaps in the clinical management and oversight of the service.
- 2.62** Incidents were reported and investigated using the online system, Datix. Eleven incidents had been reported in the previous six months. All had been investigated appropriately and lessons learned shared with the health services team during team meetings. Trends from incidents were evaluated and used to inform service delivery.
- 2.63** Death-in-custody actions plans were robust, monitored and reviewed regularly.
- 2.64** Registered nurses (including agency staff) received regular clinical supervision. Annual appraisals were completed and staff induction was robust. Access to training was very good.
- 2.65** All patients had a single clinical record. Mental health and social care services also used their own systems. All health care professionals had access to SystmOne (the electronic clinical record). A record-keeping audit had been completed, and training was provided for all staff, but we found some examples of poor record keeping.
- 2.66** Consent to share information was sought on reception and was well documented.
- 2.67** A professional telephone interpreting service was used when patients could not speak English.
- 2.68** Clinical space was limited and the waiting area was too small, although there was an improvement plan. Treatment rooms on the wings were dirty and did not comply with infection control standards. Daily cleaning tasks were not completed and there was no management oversight to ensure that these checks were completed and standards maintained.
- 2.69** Emergency equipment was widely available but routine checks were inconsistent and we found out-of-date medication and defibrillator pads in the emergency bag in reception. All staff were trained in intermediate life support.
- 2.70** Patients used the prison complaints system to complain about health services, but confidential envelopes were available, which meant that these complaints were sent directly to the health care department. These complaints were logged and investigated in a timely manner, and the responses we reviewed were polite, although were not always legible and did not routinely include information on how a patient could escalate their complaint.

Recommendations

- 2.71 Prisoner engagement should be developed, to obtain patient feedback that influences service development.**
- 2.72 All treatment rooms should be cleaned regularly and meet recognised standards for infection prevention and control.**
- 2.73 There should be effective monitoring to ensure that emergency equipment is in good order.**

Promoting health and well-being

- 2.74** There was no prison-wide health and well-being strategy, although the health services team had recently organised a health promotion action group to support work in this area.
- 2.75** There was limited written health services information available; the only health promotion material available on the wings related to drug misuse.
- 2.76** There were two health champions working in the prison, but we were not clear about their role and they were not well linked into the health care service.
- 2.77** Prisoners were able to access smoking cessation support. There were few health screening activities. Health care assistants had recently undertaken training to support the implementation of over-40s health checks, but these clinics were still in the planning phase.
- 2.78** Sexual health services were provided by the local NHS trust and accessed outside the prison. Regular blood-borne virus clinics took place and there were plans to develop the service further.
- 2.79** Condoms were available but not advertised. Prisoners were not routinely provided with condoms or general health promotion advice on release.

Recommendations

- 2.80 There should be systematic health promotion activity linked to relevant national and local health campaigns.**
- 2.81 Condoms should be easily available and well advertised, both during custody and on release.**

Primary care and inpatient services

- 2.82** All prisoners were seen by a registered nurse on arrival, and received a comprehensive health screen. Most prisoners arriving at the prison during the two months prior to our inspection had a secondary screen within a couple of days of arrival. Prior to this, secondary screening had lapsed. The large backlog was being addressed but on a wing by wing basis and not based on patient risk.
- 2.83** In our survey, 40% of respondents said that it was easy to see a doctor, and 59% that it was easy to see a nurse. All prisoners had good access to health services, and those we spoke to

were generally complimentary about the service. Daily nurse triage and emergency appointments with the GP were readily available.

- 2.84** There was an appropriate range of clinics, although physiotherapy was still unavailable in the prison and had to be accessed externally. Waiting lists for all clinics were reasonable, with the exception of the optician, who had 78 patients waiting, owing to a long gap during a recent change in provider.
- 2.85** Long-term condition management was coordinated by a senior nurse. Assessments had been completed but there were no care plans available on SystemOne. Some patients were provided with a booklet to keep, containing information on their care, but we were told that they were mainly used for diabetic patients.
- 2.86** Five escorts per day were available for external hospital appointments, which were managed by an administrator, with good links to local services. In the first six months of 2018, 555 hospital escorts had been planned; however, 286 (51%) had been rescheduled, with 85 (30%) of these cancelled to facilitate emergency care. Data on cancellations were collated but analysis did not influence service improvement.
- 2.87** Health care arrangements for prisoners going to court or being transferred were reasonable. Those being released were provided with seven days' medication, and a summary of their care was sent to their GP.
- 2.88** Officers ran the inpatient unit and had regular support from mental health and primary care staff. Officers provided compassionate support for up to 13 residents with complex needs, including those at risk of serious self-harm. A weekly multidisciplinary meeting supported effective care and discharge planning.
- 2.89** The therapeutic purpose of the inpatient unit was regularly undermined by operational admissions, including prisoners located there for their own protection, and because of insufficient facilities for those with disabilities.
- 2.90** The unit was cramped and recreational facilities were limited as the small association room was often needed for reviews. Residents had satisfactory access to showers and association, but there were no regular in-reaching activities or groups to promote recovery. The prisoners we spoke to on the unit were positive about the support they received from staff.

Recommendations

- 2.91 All prisoners should have a secondary health screen within seven days of arrival at the prison. Any secondary health screens not completed within seven days should be prioritised based on patient risk.**
- 2.92 Prisoners with long-term conditions should receive personalised care planning which is recorded in their medical record, to ensure that their needs are met.**
- 2.93 Escort data should be closely monitored and appropriate action taken to reduce cancellations.**
- 2.94 Prisoners on the inpatient unit should have consistent access to therapeutic activities to support their recovery.**

Social care

- 2.95** There was a memorandum of understanding between the prison and the local authority. A dedicated social worker was employed by CPFT and provided an excellent service to assess, commission and monitor care for prisoners with social care needs. However, the service was too reliant on this person, which created risk.
- 2.96** Care was delivered by a local agency and overseen by the social worker, but care records were not logged on SystemOne. One prisoner had a care package in place at the time of the inspection; a care plan had been drawn up but this had not been shared with the health services team or prison staff, and was only available on the local authority database accessed by the social worker.

Recommendation

- 2.97** **Relevant information and social care plans should be shared appropriately, in order that all those involved in the care of prisoners receiving social care are aware of their needs.**

Mental health care

- 2.98** The mental health in-reach team (MHIT) provided annual mental health awareness updates at prison staff meetings. New officers received mental health awareness training, and four bespoke sessions had recently been provided for officers working on the inpatient unit. Partnership working between the mental health team, health services staff and the prison was good.
- 2.99** In our survey, 41% of respondents said that they had mental health problems, of whom 36% said that they had been helped at the prison.
- 2.100** CPFT provided an integrated mental health service using the stepped care model. The small team of mental health nurses, psychologists and a substance misuse worker provided responsive care every day but were stretched. Access to a psychiatrist was good but provision was reducing considerably, which would increase waiting times.
- 2.101** All prison staff could refer to the team, and around 50 referrals were received monthly. Referrals were reviewed and prioritised daily. Prisoners with urgent needs were seen quickly and those with lower-level needs were seen within two to four weeks. High non-attendance rates (about 25%) were extending waiting times, and around a third of these were for operational reasons, such as not being unlocked.
- 2.102** During the inspection, the MHIT was supporting 78 patients, of whom 27 had severe and enduring mental ill-health. Care planning and support were generally good, although we identified a few patients who had not consistently been reviewed frequently enough.
- 2.103** Named nurses allocated to the segregation and inpatient units provided consistent proactive support to the residents, and this was valued by the staff who worked there. One-to-one support for mild to moderate mental ill-health was good. There was no group support, although sessions for the inpatient unit were in development.
- 2.104** Bereavement counselling was available through the chaplaincy. The prison had commissioned the mental health charity, Mind, to provide a six-session anger management group and up to six sessions of one-to-one support. Demand was high and prisoners waited around six

months for the service, although this was mitigated by prioritisation and effective joint working with the mental health team. Additional support was available through the trauma coordinator and trauma prisoner champions, including a group intervention.

- 2.105** Four of the seven prisoners transferred under the Mental Health Act since January 2018 had waited between seven and 15 weeks to be moved, which was excessive. Delays were due to external factors, including bed availability. The team appropriately escalated transfer delays.
- 2.106** Arrangements to ensure continuity of care on transfer and release were satisfactory.

Recommendations

- 2.107 Missed appointments for mental health services should be analysed and the results should inform an action plan to reduce them.**
- 2.108 The transfer of patients to hospital under the Mental Health Act should occur within Department of Health transfer target timescales.** (Repeated recommendation 2.90)

Substance misuse treatment⁸

- 2.109** The prison's strategic approach to substance misuse was reasonable. The current strategy encompassed both the male and female sides of the prison, but there were plans to develop a male-specific strategy.
- 2.110** The integrated substance misuse service (ISMS) had good links with community drug agencies and a multi-agency group which was working to support a regional strategy for substance misuse management in the local area.
- 2.111** In our survey, 34% of respondents said that they had arrived at the prison with a drug problem, and 20% a problem with alcohol. Forty-three per cent of those with a drug problem said that they had been helped at the prison, and prisoners we spoke to were broadly positive about their treatment. However, only 33% said that they had been helped with their alcohol issues, against 67% at the time of the previous inspection.
- 2.112** There was a high demand for services, which generally met need. At the time of the inspection, 282 people were receiving support from the psychosocial team and 160 were receiving opiate substitution therapy, with 99 being maintained. In the previous six months, 62 prisoners had undertaken alcohol detoxification.
- 2.113** New arrivals were promptly identified and referred for first night prescribing and support. XI wing was designated for those requiring ISMS support in the first five days of their stay. However, not all prisoners with substance misuse issues were located there and, regardless of location, not all prisoners received daily clinical checks and overnight observations, which was poor. Observations that were undertaken were not routinely recorded on SystmOne. The five-day clinical review was too often delayed.
- 2.114** Prisoners and staff alike could refer to the ISMS, and an average of 47 referrals were made each month. Psychosocial assessments were undertaken promptly, and comprehensive recovery plans devised.

⁸ In the previous report substance use treatment was included within safety, while reintegration planning for drugs and alcohol came under rehabilitation and release planning (previously resettlement).

- 2.115 The psychosocial service offered a wide range of in-cell activities, one-to-one work and support from the six recovery champions (peer workers), who provided a good service.
- 2.116 A range of one-off group sessions was offered but waiting lists were long; only one group ran per week, which was insufficient to meet demand. There was a high rate of non-attendance at some groups, and there had been no systematic enquiry into the reasons for this, so there was no robust strategy to address it.
- 2.117 Longer programmes were available and well regarded, including Building Skills for Recovery, Control of Violence for Angry Impulsive Drinkers, and Physical Education and Recovery Skills. Alcoholics Anonymous attended the prison twice a month but Narcotics Anonymous did not provide a service.
- 2.118 There were close links with the mental health team to support prisoners with more complex needs.
- 2.119 Discharge planning was good and there were effective links with community drug agencies. However, prisoners were not offered naloxone (an opiate reversal agent) on discharge, which was a missed opportunity.

Recommendations

- 2.120 **Prisoners requiring stabilisation or detoxification should receive appropriate 24-hour monitoring and observation, which is recorded in their medical record.**
- 2.121 **The high rates of non-attendance at groups should be investigated, to ascertain the reasons for these, and action taken to reduce them.**

Medicines optimisation and pharmacy services

- 2.122 Named-patient medicines were obtained from a local community pharmacy, and if ordered before 11am were received on the same day. In-possession medicines were supplied to each wing on a different day each week by the pharmacy technicians, who did not routinely check that the medication reflected the current prescription for the patient (see main recommendation S44).
- 2.123 Supervised medicines were administered by nursing staff and queues were regulated by officers, who also provided patients with a glass of water. There was no confidentiality as each patient was handed the glass across the patient in front of them, who was collecting their medication.
- 2.124 In-possession risk assessments were completed for all new patients, but the result of this assessment was not readily visible to the prescriber at the point of prescribing. In-possession risk assessments were not routinely reviewed. Some patient records showed an in-possession risk assessment which had been completed during a previous sentence and was out of date.
- 2.125 We noted some prescribing of doses which suited the prison regime rather than the medicine. Patients who did not attend to receive their medicines were not consistently followed up.
- 2.126 The rooms used to store and administer medicines on the wings were dirty, and the storage of medicines was poor. Refrigerator temperature monitoring was ineffective. Medicines

trolleys were not securely attached to the wall and we found one that could not be locked, and that one controlled drugs cabinet was not secured to the floor (see main recommendation S44).

- 2.127** Stock and named-patient medicines were not stored separately, which led to named-patient medicines being used as stock. We found out-of-date medication, loose strips of tablets, and boxes containing mixed batches and different strengths of medication in many treatment rooms. Named-patient medication for those who had left the prison was also routinely put into general stock (see main recommendation S44).
- 2.128** The pharmacy storage room was accessible to all health services staff and there was no routine audit of the medicines stored there. The management of access to the controlled drugs cabinets was not robust. One nurse signed for the main controlled drugs cabinet key daily but was seen to give it to other nurses, with no audit trail. Access to the controlled drugs cabinets on the wings was not audited at all.
- 2.129** We witnessed secondary dispensing, which was unacceptable (see main recommendation S44). There was some primary dispensing by nurses, and stock supplied through patient group directions (which enable nurses to supply and administer prescription-only medicine) was not labelled appropriately.

Recommendations

- 2.130** **The administration of medicines to patients should be confidential.**
- 2.131** **Prescribers should have easy access to the latest in-possession risk assessment.**
- 2.132** **Medicines should be stored safely and securely, and in manufacturer's boxes or in patient-labelled containers.**
- 2.133** **The medicines and therapeutics committee should review the use of general stock. Named-patient medication should be used wherever possible and general stock should be used only if unavoidable.** (Repeated recommendation 2.76)
- 2.134** **Access to the pharmacy and controlled drugs cabinets should be audited, as should any medicines taken from the pharmacy room; all checks should be recorded.**

Dental services and oral health

- 2.135** Dental services were provided by I Dental House Ltd. Appointments were prioritised based on clinical need, and dental sessions offered a range of community-equivalent treatment.
- 2.136** Urgent referrals were seen promptly, and the waiting time for routine appointments was around eight weeks. Missed appointments were monitored. Oral health promotion was provided verbally during consultations.
- 2.137** Governance processes were good. Dental equipment was well maintained and serviced regularly, and the dental chair was due to be serviced imminently.
- 2.138** The dental suite met infection control standards and included a newly built separate decontamination area.

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 The amount of time unlocked for most prisoners was good, at around 10 hours a day for fully employed prisoners during the week and seven and a half hours at weekends. For those who were unemployed or in part-time work, this could be between three and five hours a day during the week. In our roll checks, we found over 30% of prisoners locked in their cell, which was similar to the figure at the time of the previous inspection and was still too many.
- 3.2 The daily routine was well publicised and adhered to. This was borne out by discussions with prisoners, our survey (in which 93% of respondents said that they knew what the unlock and lock-up times were) and reviews of daily logs. Association areas were reasonably well equipped and recreational equipment was well used.
- 3.3 The regular daily association periods were rarely curtailed. Daily exercise periods were too short, at only 30 minutes on weekdays.
- 3.4 The main library was small and cramped. The stock included easy-read and foreign language material but some of the shelves were empty. Library staff told us that they were waiting for the delivery of new books which had been ordered. Legal texts were available but because of heavy demand, prisoners were required to arrange viewing in advance, using the wing kiosks (see paragraph 2.31). Only 32% of respondents to our survey said that the library had a wide enough range of materials to meet their needs, which was far worse than the 56% comparator.
- 3.5 Although the timetable allowed for prisoners located in all parts of the prison to attend the library, our survey results in relation to access were very poor. Only 6% of prisoners said that they went to the library twice or more a week. Prisoners told us that officers were not familiar with the library timetable. Staff working in the library said that wing staff were busy and did not prioritise getting prisoners to the library at their allotted times.
- 3.6 Since the previous inspection, a small library had been set up on house block 5, for vulnerable prisoners. The Storybook Dads scheme (in which prisoners record stories for their children) was still being run, and some good work was also carried out through the Shannon Trust to help prisoners who had problems with reading.
- 3.7 Attendance at the gym was good, with 52% of respondents to our survey saying that they used these facilities twice or more a week, which was considerably better than recent findings at similar prisons.
- 3.8 The gym timetable was suitably varied and reflected the needs of the whole population. Classes were offered for prisoners with additional support needs, and the number of sessions scheduled for vulnerable prisoners had increased.

- 3.9** The facilities in the gym were good and prisoners had the opportunity to use cardiovascular, resistance and free-weight equipment. There was ample space available for indoor games, as well as a popular all-weather five-a-side football pitch. However, the showers were shabby and showing signs of heavy use, and needed to be refurbished.
- 3.10** Gym staff provided a wide range and volume of accredited learning courses which were designed to support employment in the fitness industry.
- 3.11** The PE department also maintained constructive links with the community, and a violence reduction programme, delivered by ex-professional footballers, was run every month in collaboration with staff from the gym.
- 3.12** In response to a recent prisoner consultation, table tennis sessions had been introduced as a programmed activity.

Recommendations

- 3.13 All prisoners should have the opportunity to spend one hour a day in the open air.** (Repeated recommendation 3.5)
- 3.14 Stock within the library should be adequately maintained, to reflect the interests of the population.**
- 3.15 All prisoners should be given the opportunity to attend the library.**

Education, skills and work activities (Ofsted)⁹

Expected outcomes:

All prisoners can engage in activities that are purposeful, benefit them and increase their employability. Prisoners are encouraged and enabled to learn both during and after their sentence. The education, skills and work provision is of a good standard and is effective in meeting the needs of all prisoners.¹⁰

3.16 *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>

⁹ 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.

¹⁰ In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

Management of education, skills and work

- 3.17** Leaders and managers had implemented an effective improvement strategy that had addressed most of the recommendations from the previous inspection. The provision had increased to include rail track safety, catering and hospitality, waste management, contact centres, customer services, and radio and media production training. Managers had prioritised the identification and raising of prisoners' English and mathematics skills levels as a vital contributor to successful resettlement on release. The quality of taught sessions had improved considerably.
- 3.18** The range and breadth of education and vocational training were adequate, and met the needs of prisoners, particularly the relatively large proportion with short stays. In our survey, more respondents than at other prisons said that their participation in education and vocational training would help them on release. However, managers had yet to exploit regional skills shortage information fully, to plan provision. The prison recognised that destination data for released prisoners was not sufficiently robust.
- 3.19** The prison offered 479 full- and 293 part-time purposeful activity places. This was sufficient to occupy 80% of the prison population at any one time. A wide variety of work was available and most prisoners actively engaged in the planned tasks. Appropriate qualifications were on offer, except in the laundry. Vulnerable prisoners on Royce wing had limited access to taught education and vocational training classes. This contributed to their relatively high unemployment.
- 3.20** The prison collected a wide variety of relevant data that managers used well to check the provision's performance against appropriately challenging targets. Managers suitably monitored the progress of different prisoner groups, so none was disadvantaged or underachieved.
- 3.21** The quality improvement group was effective in raising standards. The group used suitably detailed reports well to inform its evaluation of progress in achieving agreed improvement actions. Self-assessment was generally accurate. Managers had a realistic understanding of the provision's strengths and weaknesses. Arrangements to elicit and respond to feedback from prisoners were effective. The quality of the education and vocational training provided by Sodexo Justice Services was good.
- 3.22** Senior managers reviewed session attendance rates daily as part of a strategy that resulted in effective remedial actions where needed. This ensured that an appropriately high proportion of prisoners attended sessions and were punctual.
- 3.23** Activity allocations was fair and impartial. Managers maximised the use of available places and ensured that prisoners started an activity quickly after completing their induction. The prison appropriately managed the small number of short waiting lists. Pay rates reflected the demands of the activities and did not act as a disincentive to participation.
- 3.24** Prisoners participated in several useful enrichment activities that utilised the prison's external links. For example, prisoners' project work led to financial donations to charities. The prison had an adequate quantity and variety of links with employers that it used suitably to provide release on temporary licence (ROTL). At the time of the inspection, six prisoners were participating in ROTL. Thirty-seven prisoners were following distance-learning and Open University programmes, effectively supported by the education department.
- 3.25** The discharge board identified pre-release needs; prisoners addressed these through attending activities delivered in 'The Link' development centre. Sodexo Justice Services provided prisoners with high-quality information, advice and guidance. The synchronisation

and availability of activities to improve the success of prisoners' applications for education, training and/or employment opportunities required improvement. Prisoners had no access to the virtual campus (internet access for prisoners to community education, training and employment opportunities).

Recommendations

- 3.26 Prison managers should use reliable data on prisoners' release destinations and regional skills shortage information to inform the development of the education, skills and work provision.**
- 3.27 All vulnerable prisoners should be engaged in suitable purposeful activity.**
- 3.28 Prisoners should attend appropriately synchronised pre-release activities, including use of the virtual campus, to improve their potential for successful rehabilitation.**

Quality of provision

- 3.29** Tutors were knowledgeable and planned engaging learning activities and effective teaching strategies. Most prisoners became proficient at applying their newly acquired knowledge and skills to develop further. In addition, prisoners made good gains in personal motivation and developed a positive attitude to learning. For example, a well-considered rail safety programme had been successful in encouraging prisoners to learn while developing vocationally relevant employment skills. Tutors made good use of the high-standard learning resources, and classrooms were well equipped. However, in a small minority of lessons, prisoners participated in activities that failed to challenge the less or more able, which impeded their progress.
- 3.30** Tutors effectively used the outcomes of induction to identify prisoners' starting points and place them on the correct course and level. When sentence plans were available, tutors used them well to prepare prisoners for their next steps. They effectively assisted prisoners who had not achieved at least a level 1 qualification in English and mathematics to study towards achieving this as a priority.
- 3.31** Tutors checked prisoners' progress during lessons and provided them with support and encouragement. Where it was not the focus of the programme, tutors skilfully delivered session activities that allowed prisoners to practise and improve their English and mathematics skills. For example, in an art class, learners successfully used their numeracy skills to calculate the cost of the materials of their completed artwork. Tutors appropriately exploited subject topics to explore and promote prisoners' appreciation of equality and diversity.
- 3.32** Most tutors made good use of verbal and written feedback to check learners' understanding; verbal feedback in vocational training was particularly helpful in facilitating them to improve their practical skills. In the work areas, tutors were generally effective in developing prisoners' English and mathematics skills well. Work tasks were generally appropriately challenging. As preparation for release, prisoners were encouraged to experience a range of work activities that progressively raised their skills and employability levels. However, not all prisoners were gainfully employed throughout the working day.
- 3.33** Not all learners received sufficiently detailed written feedback, which meant that they were not always clear about how they could improve. Their progress reviews did not always

suitably challenge them to develop their personal and employability skills when undertaking work or vocational training. In education classes, tutors failed to capture fully the skills and knowledge that prisoners needed to develop to accelerate their achievement.

- 3.34** Tutors closely monitored prisoners' test results and ongoing performance, to detect any additional learning support needs, and addressed these effectively. They made particularly good use of in-class learning and support assistants, who successfully supported tutors and helped learners to understand new concepts and learn new skills. In addition, tutors effectively deployed peer mentors, who were trained to provide prisoners with individual English and mathematics support.

Recommendations

- 3.35** Tutors should provide learners with sufficiently detailed written feedback and ensure that learning activities challenge the less and more able prisoners to attain fully.
- 3.36** Tutors should ensure that prisoners' progress reviews help them effectively to develop their personal and employability skills during work or vocational training.
- 3.37** In education classes, tutors should routinely identify the skills and knowledge that prisoners need, to help them to improve rapidly.

Personal development and behaviour

- 3.38** Prisoners took pride in completing their work and were motivated to aspire to higher standards. Participation in learning ensured that they developed confidence and self-esteem. These gains in personal development prepared them well for their next steps, including employment and successful rehabilitation.
- 3.39** Most prisoners were motivated to arrive at their allotted sessions on time and were ready to learn. Staff effectively challenged those who failed to attend as planned. Prisoners listened carefully to tutors and followed their instructions carefully. Those employed in the kitchen developed a good appreciation of how to work to demanding deadlines. During work and taught sessions, prisoners demonstrated an appropriate understanding of health and safety practices.
- 3.40** Prisoners treated each other and staff with respect. Most of them participated effectively in collaborative working to complete set tasks. In most of the sessions we observed, learners behaved well but we witnessed low-level disruption in a small minority of education lessons.
- 3.41** A large proportion of prisoners in work were motivated to take extra qualifications that improved their work effectiveness and made them more employable on release. However, tutors did not routinely track prisoners' personal and employability skills development well enough in work and vocational training; this meant that too many prisoners did not clearly recognise how the progress they had made contributed to their future successful rehabilitation.

Recommendation

- 3.42 Tutors should routinely track and plan the development of prisoners' personal and employability skills in work and vocational training.**

Outcomes and achievements

- 3.43** The proportion of prisoners who completed courses and achieved qualifications was generally high. Achievement rates for English and mathematics qualifications were very high. There were no achievement gaps between different groups of prisoners.
- 3.44** Prisoners' written and practical work was of an appropriate or better standard to enable them to complete their qualifications successfully. Most prisoners, including those with special educational needs and/or learning difficulties, developed good employability skills. For example, those undertaking call centre and rail safety work programmes rapidly developed the required competences to access work placements following release. In a minority of other programme areas, a few prisoners did not develop new skills and knowledge at the expected rate.
- 3.45** Prisoners' progression between courses and to higher levels of learning was good in education and vocational training, and in most work areas.

Recommendation

- 3.46 Tutors should ensure that all prisoners make the progress expected in developing new skills and knowledge.**

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 This was a well-managed area of work, with a strategy that was well thought through and emphasised the importance of maintaining strong family links. Application of the strategy was monitored fortnightly at a meeting involving relevant managers, covering issues relating to children and families.
- 4.2 The visitors centre was next to the staff entrance and easily accessible. The officers and the prison orderly working there were friendly and provided family members and friends with helpful and reassuring advice.
- 4.3 The visits hall was bright and spacious, and a refreshment bar was provided by a voluntary organisation, Friends of Peterborough Prison (FOPP), which worked in partnership with the prison. FOPP also provided trained volunteers, to offer play activities for children in the visits hall play area.
- 4.4 Some excellent proactive work was being carried out by the small family support team to help prisoners who had difficulty in maintaining constructive relationships with their families. Prisoners who did not receive visits were identified and, where possible, and following relevant checks, the prison set up meetings between the prisoner and family members, with family support staff present to try to resolve difficulties. At the time of the inspection, there were six cases being dealt with in this way.
- 4.5 Family support workers routinely helped to organise 'contact' visits for fathers and were also sometimes involved in facilitating 'letter box contact' for those whose children were fostered or had been adopted. Special attention was given to prisoners who had been admitted to custody for the first time; they were interviewed by a member of the family support team and an information pack was sent to their visitors.
- 4.6 On admission, prisoners were asked if they had ever been in care; when this was identified, a member of the family support team contacted the local authority and, where appropriate, requested assistance from the prisoner's personal adviser (a support worker who assists prisoners on leaving care).
- 4.7 Family days were run every month. These events were popular and were open to prisoners on all levels of the incentives and earned privileges scheme. This opportunity was not available for those convicted of sexual offences against children. Prisoners had telephones

installed in their cells, which this made it relatively easy for them to maintain contact with their family members. In our survey, 93% of prisoners said that, if they had credit, they could get access to a telephone daily. Good use was also made of the 'email a prisoner' scheme, as well as the prisonvoicemail.com scheme, which enabled prisoners to send recorded messages.

Good practice

- 4.8** *Family support staff identified prisoners who needed help in maintaining links with their families and, where possible, set up meetings between the prisoner and family members to try to resolve these difficulties.*

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** A total of 2,300 new prisoners were received each year. There was a good focus on the strategic development of rehabilitation and release planning. The prison had a 'through-the-gate' strategy that had been informed by a needs analysis and information from offender assessment system (OASys) assessments. The offender management policy (2017) was also comprehensive.
- 4.10** The resettlement committee met bimonthly, with good attendance from across the prison. The meeting was chaired by the head of rehabilitation but was also attended by the director, which reinforced the importance that this work was given by the prison. The meeting covered work on both the male and female sides of the prison, with clear distinctions where necessary and appropriate.
- 4.11** There was a small backlog of OASys assessments, with 31 outstanding at the time of the inspection, of which seven were the responsibility of the National Probation Service. The quality of those we reviewed varied. In most cases, those completed on high-risk prisoners (by the National Probation Service) were good, with appropriately detailed risk management plans. However, those undertaken internally by offender supervisors were more variable; the best were comparable with those undertaken by probation staff but others were not comprehensive and were vague, especially in the setting of sentence plan targets. Prisoners believed to present a low risk of harm were subject to shortened 'risk-OASys' assessment but in some cases it was not clear how their low risk had been determined. In one case we reviewed, the prisoner's previous convictions suggested to us that a full assessment would have been more appropriate. Sentence plans for prisoners subject to the shorter OASys risk assessment were unclear. Despite this, in our survey, 83% of respondents who said that they had a custody plan knew what they needed to do to achieve the identified targets.
- 4.12** The prison had also recently started to invite prisoners' families to sentence planning meetings/reviews. This enabled them to be actively involved in supporting prisoners in meeting identified targets and to see the progress being made. We were told that three out of the last 10 sentence planning boards had had a family member in attendance. These were often timed to coincide with family visits.
- 4.13** There were 10 offender supervisors in total, two of whom were probation officers. All offender supervisors had on their caseload a combination of prisoners from both the male

and female side. Probation officers were allocated only high-risk cases but each of the officer offender supervisors had a mixture of high- and low-risk cases, although all had some prisoners assessed as presenting a high risk of harm. Despite this, there was relatively little oversight of some of this work. The part-time senior probation officer offered supervision monthly to the probation staff and, although this had also been offered to officers, it was voluntary and none had taken up the offer. Case review meetings had recently begun to include a mixture of officers and probation staff; these showed promise but it was too early to assess their effectiveness.

- 4.14** Levels of contact between prisoners and offender supervisors were too variable. High-risk prisoners should have been seen at least every three months, and in most cases this was achieved. However, such contact was often unplanned, and in some cases its role was unclear. Contact by probation offender supervisors tended to be more planned and have a clearer focus. Contact with lower-risk prisoners was less frequent. The recording of contact was also variable; much of this information was recorded on offender management logs, available only to offender management unit (OMU) staff, rather than on OASys. It was unclear what information was supposed to be recorded on P-NOMIS (electronic case notes). The offender management logs were not shared, even with responsible officers on the release of a prisoner.
- 4.15** The main challenge to offender management was the large caseloads of most officer offender supervisors. Although the average caseload of probation offender supervisors was around 45, for officers this was 76, with the highest at the time of the inspection being 81.
- 4.16** The prison held 38 indeterminate-sentenced prisoners (ISPs) at the time of the inspection, 19 of whom were serving indeterminate sentences for public protection. All ISPs were allocated across the team of offender supervisors. Those on remand and likely to receive a life sentence were also allocated to an offender supervisor, to offer them support through the trial process. There were no problems in organising multi-agency lifer risk assessment panels. The OMU regularly undertook review meetings, to ensure that all prisoners subject to an indeterminate sentence made progress. These meetings were primarily administrative and did not include the prisoner.
- 4.17** The management of home detention curfew (HDC) appeared good. In the previous six months, approximately 75% of eligible prisoners had been awarded HDC. Approximately 70% were released on, or within seven days of, their eligibility date. In the cases we reviewed, failures to meet this timeframe had been for justifiable reasons.
- 4.18** Arrangements for the review of categorisations also appeared appropriate. Of 228 prisoners reviewed in the previous six months, 68 had been successfully downgraded. In the cases we reviewed, decisions appeared to be appropriate.
- 4.19** In the previous six months, 227 prisoners had been moved to, and 270 moved from, the establishment. There were 44 prisoners currently classified as category D. There were some delays in moving these individuals to appropriate prisons, although some, including those involved in peer support and/or release on temporary licence (ROTL), were content to remain at Peterborough. Moving long-term category B and C prisoners, especially those convicted of a sex offence, was also difficult, reflecting a national issue.
- 4.20** In the previous six months, there had been 639 separate ROTL events, of which almost 90% had been for employment purposes. There had been 63 ROTL events to support family ties, including resettlement overnight release. Up to seven prisoners each month accessed this unpaid community employment. ROTL risk assessments were generally good and ROTL releases were well managed.

4.21 Overall, public protection arrangements were reasonable but some improvements were required. On arrival, all prisoners were reviewed by the small public protection team in the OMU, and those subject to harassment restrictions, restraining orders or child protection procedures were identified, with monitoring undertaken appropriately. The interdepartmental risk management team meeting took place monthly but was not well attended from across the prison. In addition, it was not clear how cases that needed to be discussed were identified. There was no systematic process to ensure that all high-risk prisoners due to be released were reviewed in this meeting during the last few months of their sentence. Requests for responsible officers in the community to confirm multi-agency public protection arrangements (MAPPA) management levels for those due to be released were sent, but follow-up when responses were not forthcoming was inconsistent. The quality of reports by offender supervisors for community MAPPA meetings (MAPPA F reports) was variable; some were analytical, detailed and comprehensive but others were too brief and failed to consider information from across the prison. The prison had not been countersigning all such reports but started doing so during the inspection.

Recommendations

- 4.22 All contact and information on the management of prisoners should be recorded on P-NOMIS, to ensure that all departments are aware of issues and progress being made.**
- 4.23 Offender supervisors, particularly those managing high risk of harm cases or those involving child protection issues, should have regular case management supervision.**
- 4.24 The interdepartmental risk management team meeting should review all prisoners assessed as presenting a high risk of harm in the six months before their release.**
- 4.25 Managers should ensure that they receive confirmation of the multi-agency public protection arrangements (MAPPA) management level for all those subject to MAPPA six months before their release date.**

Good practice

- 4.26** *The invitation of families to sentence planning meetings helped to ensure that they supported prisoners in achieving their sentence planning targets.*

Interventions

Expected outcomes:

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

- 4.27** Although contact between offender supervisors, especially officers, and prisoners beyond the completion of OASys assessments and sentence planning was often limited (see paragraph 4.14), this was mitigated by an impressive range of interventions available across the prison.
- 4.28** In May 2018, the prison had introduced key workers (see also paragraph 2.2). Their role was not yet tied in formally with offender management but we saw a number of examples where the engagement of key workers was impressive. Contact often focused on issues that related

to offending and/or helped prisoners to resolve practical issues. In some of the cases we reviewed, prisoners had already had five or six contacts with a key worker.

- 4.29** Along with the OMU and the community rehabilitation company (CRC), the prison also had a rehabilitation team, which offered a range of support to prisoners to complement the more traditionally available services. The team worked mainly in three areas: recall, those most in need, and trauma. The recall work involved prisoners who were subject to licence recall (83 at the time of the inspection). The focus was not specifically on interventions but on ensuring that those on short recalls (typically 14 or 28 days) were identified, helped to engage with their responsible officer where appropriate, and linked to wider support services in the community. These were often prisoners who would otherwise have had little or no contact with an offender supervisor while at the prison.
- 4.30** The ‘most in need’ work focused on prisoners who had been to prison on 15 or more occasions. At the time of the inspection, there were 40 such prisoners. In most cases, these were individuals subject to regular terms of imprisonment but often for only short periods (under 12 months) and so not subject to OASys and offender management. There were good community links for these prisoners, especially to local intensive offender management projects. Prisoners in this category were prioritised for the GR8 motivational programme and Road to Success programme delivered by the rehabilitation team.
- 4.31** The third strand focused on prisoners who had experienced trauma. Provision included one-to-one support, peer support (from two trained peer advisers) and links to community organisations. Between 15 and 20 prisoners were identified as requiring support each month. Since 2018, the prison had been piloting the Building Resilience programme. This was delivered widely within the female estate but this was the first pilot in the male estate.
- 4.32** Three nationally accredited offending behaviour programmes were provided: Control of Violence for Angry Impulsive Drinkers, Building Skills for Recovery (a substance misuse programme) and the thinking skills programme (a generic cognitive behavioural programme), and these appeared to be appropriate for the prison population. Along with accredited programmes, several non-accredited programmes were delivered, in addition to the GR8 and Road to Success programmes. These included Anger Management and Safer Relationships (designed to address domestic violence), delivered by Bold Moves (a community-based charity), and the RESTORE Forgiveness project. In our survey, 57% of respondents said that they had done an offending behaviour programme at the establishment, and 60% that they had engaged in other programmes.
- 4.33** St Giles delivered accommodation advice. Support was generally appropriate, although it was rare that prisoners requiring accommodation on release were able to secure it before leaving the prison. In the previous six months, 239 prisoners had presented as homeless, of whom 96 had gone to a specific address, usually that of a family member or friend. Only four had been released to supported accommodation in this period. Approximately 29% of all prisoners were either released without an address or their release address was unknown or undisclosed. Nevertheless, they were all offered support and, at the very least, a community contact point to present to for emergency accommodation on their release. However, there was no post-release follow-up to establish how successful this work had been in securing sustainable accommodation.
- 4.34** Support for those with finance, benefits and debt issues was also provided by St Giles, along with peer advisers (Connections workers). Demand was reasonably high, with an average of one appointment for advice or telephone support each day. The prison also provided a money management programme.
- 4.35** Although the range of support offered was extremely positive, too often it was provided alongside, rather than coordinated with, offender management. Programmes, interventions

and support were often offered in an unplanned manner, with no clear prioritisation, or sequencing of identified work.

Recommendations

- 4.36** **Post-release outcomes regarding accommodation should be monitored, to ensure that support and resources can meet need.**
- 4.37** **Work identified to support prisoners and reduce their risk of harm and reoffending should be coordinated, to ensure that interventions are sequenced appropriately.**

Good practice

- 4.38** *The 'recall' and 'most in need' projects delivered by the rehabilitation team both offered focused support and engagement to prisoners who otherwise might easily have had little or no engagement with offender management.*
- 4.39** *The trauma work delivered by the rehabilitation team, and especially the Building Resilience programme, offered a range of support to prisoners which was unique within the male prison estate.*

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.

- 4.40** Resettlement services were provided by St Giles on behalf of BeNCH (Bedfordshire, Northamptonshire, Cambridgeshire and Hertfordshire) CRC. The prison released an average of 90 prisoners each month, and all were seen around 12 weeks before release (or closer to release, if they had less time to serve) to complete a resettlement plan. All of the cases we reviewed had had a resettlement plan, although the quality and usefulness of these varied. In a number of cases, it was not clear if the work identified at the 12 weeks pre-release stage had been completed before release.
- 4.41** The role of offender supervisors in some release planning was also unclear. When high-risk prisoners were due to be released, probation offender managers were usually up to date with release plans and the management of risk, and we saw many examples where this was the case. However, in lower-risk cases, managed by officer offender supervisors, there was often less involvement.
- 4.42** The prison had recently introduced a revamped pre-release board. Prisoners were usually scheduled to be considered by the board around six weeks before release. All departments across the prison were invited to attend, or at least give written contributions for the prisoners they knew. Prisoners were also encouraged to attend. The board usually considered around 15 individuals each week. Those on short sentences were usually seen by peer advisers to identify any outstanding issues. The board was a positive initiative and offered the opportunity to ensure that all areas of concern had been covered and that information about licence requirements was given to prisoners due to be released. Pre-release boards were attended by an OMU senior prison custody officer. Information from the pre-release board was subsequently included in resettlement plans, although in the cases

we reviewed there was rarely sufficient detail effectively to inform responsible officers in the community.

- 4.43** The Outside Links facility offered a good level of support. Immediately after release, prisoners could receive support and guidance, contact their responsible officer and meet whoever was collecting them. Further facilities were available in and around Peterborough, offering ongoing support to those who wanted it.

Recommendation

- 4.44** Information in resettlement plans should clearly indicate the work that has been undertaken by prisoners while in custody and any outstanding work to address their risk of harm and reoffending.

Good practice

- 4.45** *After release, prisoners could receive help and advice from the Outside Links facility, which helped them with ongoing difficulties and supported successful resettlement.*

Section 5. Summary of recommendations and good practice

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

Main recommendations

To the governor

- 5.1 Managers should ensure that poor behaviour is consistently challenged and that there are appropriate and effective sanctions for perpetrators of violence. (S43)
- 5.2 The governance and clinical oversight of health care should be strengthened to improve systems and processes and reduce risk. (S44)

Recommendations

Early days in custody

- 5.3 All initial reception interviews should be confidential. (1.14)
- 5.4 Prisoners who speak little English and those allocated to Royce wing should have specific induction sessions, to ensure equivalent provision. (1.15)

Managing behaviour

- 5.5 Prisoner debriefs should take place after all incidents. (1.28)
- 5.6 Staff should receive further training in de-escalation, to ensure that force is used only as a last resort. (1.29)
- 5.7 Segregation unit cells and toilets should be kept clean. (1.36)

Security

- 5.8 Strip-searching should be appropriately identified as such, properly authorised and recorded, and undertaken only when a risk assessment shows it to be necessary. (1.42)
- 5.9 Prisoners should have an effective means of reporting concerns to the police. (1.43)

Safeguarding

- 5.10 Staff from all relevant departments should be involved in assessment, care in custody and teamwork (ACCT) reviews and record observations and conversations in ACCT documents, where appropriate. (1.52)

Daily life

- 5.11** Communal areas should be kept clean. (2.10)
- 5.12** Cells designed for one prisoner should not be shared. (2.11, repeated recommendation 2.7)
- 5.13** Ventilation in cells should be improved. (2.12, repeated recommendation 2.8)
- 5.14** Young adults should not share cells with adults. (2.13)
- 5.15** Staff should supervise and control the serving of meals, to ensure that all prisoners receive their allocated meals. (2.24)
- 5.16** The evening meal should not be served before 5pm. (2.25)
- 5.17** All prisoners should be issued with in-cell kettles. (2.26)
- 5.18** Prisoners should be consulted about the range of goods available from the prison shop. (2.27)
- 5.19** Prisoners should be regularly consulted about prison life and given the opportunity to present any areas of grievance or dissatisfaction directly to managers. (2.36)

Equality, diversity and faith

- 5.20** There should be effective consultation with prisoners from all the protected characteristics, and prisoners from each of the protected characteristics should be able to receive the help that they need. (2.42)
- 5.21** Diversity representatives should receive sufficient training, including awareness training relating to sexual orientation, and any discriminatory attitudes should be challenged. (2.50)

Health, well-being and social care

- 5.22** Prisoner engagement should be developed, to obtain patient feedback that influences service development. (2.71)
- 5.23** All treatment rooms should be cleaned regularly and meet recognised standards for infection prevention and control. (2.72)
- 5.24** There should be effective monitoring to ensure that emergency equipment is in good order. (2.73)
- 5.25** There should be systematic health promotion activity linked to relevant national and local health campaigns. (2.80)
- 5.26** Condoms should be easily available and well advertised, both during custody and on release. (2.81)
- 5.27** All prisoners should have a secondary health screen within seven days of arrival at the prison. Any secondary health screens not completed within seven days should be prioritised based on patient risk. (2.91)
- 5.28** Prisoners with long-term conditions should receive personalised care planning which is recorded in their medical record, to ensure that their needs are met. (2.92)

- 5.29** Escort data should be closely monitored and appropriate action taken to reduce cancellations. (2.93)
- 5.30** Prisoners on the inpatient unit should have consistent access to therapeutic activities to support their recovery. (2.94)
- 5.31** Relevant information and social care plans should be shared appropriately, in order that all those involved in the care of prisoners receiving social care are aware of their needs. (2.97)
- 5.32** Missed appointments for mental health services should be analysed and the results should inform an action plan to reduce them. (2.107)
- 5.33** The transfer of patients to hospital under the Mental Health Act should occur within Department of Health transfer target timescales. (2.108, repeated recommendation 2.90)
- 5.34** Prisoners requiring stabilisation or detoxification should receive appropriate 24-hour monitoring and observation, which is recorded in their medical record. (2.120)
- 5.35** The high rates of non-attendance at groups should be investigated, to ascertain the reasons for these, and action taken to reduce them. (2.121)
- 5.36** The administration of medicines to patients should be confidential. (2.130)
- 5.37** Prescribers should have easy access to the latest in-possession risk assessment. (2.131)
- 5.38** Medicines should be stored safely and securely, and in manufacturer's boxes or in patient-labelled containers. (2.132)
- 5.39** The medicines and therapeutics committee should review the use of general stock. Named-patient medication should be used wherever possible and general stock should be used only if unavoidable. (2.133, repeated recommendation 2.76)
- 5.40** Access to the pharmacy and controlled drugs cabinets should be audited, as should any medicines taken from the pharmacy room; all checks should be recorded. (2.134)

Time out of cell

- 5.41** All prisoners should have the opportunity to spend one hour a day in the open air. (3.13, repeated recommendation 3.5)
- 5.42** Stock within the library should be adequately maintained, to reflect the interests of the population. (3.14)
- 5.43** All prisoners should be given the opportunity to attend the library. (3.15)

Education, skills and work activities

- 5.44** Prison managers should use reliable data on prisoners' release destinations and regional skills shortage information to inform the development of the education, skills and work provision. (3.26)
- 5.45** All vulnerable prisoners should be engaged in suitable purposeful activity. (3.27)
- 5.46** Prisoners should attend appropriately synchronised pre-release activities, including use of the virtual campus, to improve their potential for successful rehabilitation. (3.28)

- 5.47** Tutors should provide learners with sufficiently detailed written feedback and ensure that learning activities challenge the less and more able prisoners to attain fully. (3.35)
- 5.48** Tutors should ensure that prisoners' progress reviews help them effectively to develop their personal and employability skills during work or vocational training. (3.36)
- 5.49** In education classes, tutors should routinely identify the skills and knowledge that prisoners need, to help them to improve rapidly. (3.37)
- 5.50** Tutors should routinely track and plan the development of prisoners' personal and employability skills in work and vocational training. (3.42)
- 5.51** Tutors should ensure that all prisoners make the progress expected in developing new skills and knowledge. (3.46)

Reducing risk, rehabilitation and progression

- 5.52** All contact and information on the management of prisoners should be recorded on P-NOMIS, to ensure that all departments are aware of issues and progress being made. (4.22)
- 5.53** Offender supervisors, particularly those managing high risk of harm cases or those involving child protection issues, should have regular case management supervision. (4.23)
- 5.54** The interdepartmental risk management team meeting should review all prisoners assessed as presenting a high risk of harm in the six months before their release. (4.24)
- 5.55** Managers should ensure that they receive confirmation of the multi-agency public protection arrangements (MAPPAs) management level for all those subject to MAPPA six months before their release date. (4.25)

Interventions

- 5.56** Post-release outcomes regarding accommodation should be monitored, to ensure that support and resources can meet need. (4.36)
- 5.57** Work identified to support prisoners and reduce their risk of harm and reoffending should be coordinated, to ensure that interventions are sequenced appropriately. (4.37)

Release planning

- 5.58** Information in resettlement plans should clearly indicate the work that has been undertaken by prisoners while in custody and any outstanding work to address their risk of harm and reoffending. (4.44)

Examples of good practice

Managing behaviour

- 5.59** A dedicated mental health nurse attended the unit daily to see all prisoners, carrying out assessments on those who were on open ACCT documents, and 24-hour assessments on all those on the unit. (1.37)

Children and families and contact with the outside world

- 5.60** Family support staff identified prisoners who needed help in maintaining links with their families and, where possible, set up meetings between the prisoner and family members to try to resolve these difficulties. (4.8)

Reducing risk, rehabilitation and progression

- 5.61** The invitation of families to sentence planning meetings helped to ensure that they supported prisoners in achieving their sentence planning targets. (4.26)

Interventions

- 5.62** The 'recall' and 'most in need' projects delivered by the rehabilitation team both offered focused support and engagement to prisoners who otherwise might easily have had little or no engagement with offender management. (4.38)
- 5.63** The trauma work delivered by the rehabilitation team, and especially the Building Resilience programme, offered a range of support to prisoners which was unique within the male prison estate. (4.39)

Release planning

- 5.64** After release, prisoners could receive help and advice from the Outside Links facility, which helped them with ongoing difficulties and supported successful resettlement. (4.45)

Section 6. Appendices

Appendix I: Inspection team

Peter Clarke	Chief Inspector
Angus Mulready-Jones	Team leader
Francesca Cooney	Inspector
Karen Dillon	Inspector
Ian Macfadyen	Inspector
Keith McInnis	Inspector
Paul Rowlands	Inspector
Charli Bradley	Researcher
Laura Green	Researcher
Helen Ranns	Researcher
Emma Seymour	Researcher
Claudia Vince	Researcher
Liz Walsh	Lead health and social care inspector
Majella Pearce	Health and social care inspector
Simon Pyke	Health and social care inspector
Sue Melvin	Pharmacist
Bev Hall	Care Quality Commission inspector
Dayni Johnson	Care Quality Commission inspector
Nigel Bragg	Ofsted inspector
Andrew Fitt	Ofsted inspector
Elaine Price	Ofsted inspector
Martyn Griffiths	Offender management inspector
Mark Rogers	Offender management inspector
Gabriella Morris	Policy officer HMIP (observer)

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, prisoners were generally positive about escort arrangements, and support during their early days at the prison was good. Most prisoners felt safe and levels of violence had reduced, although some minority groups and those in the safeguarding unit for vulnerable prisoners felt less secure than others. Prison staff actively challenged antisocial behaviour. Support for prisoners vulnerable to self-harm or who needed safeguarding was good. Security arrangements were appropriate and drugs issues were prioritised. The incentives and earned privileges (IEP) scheme was used well. Disciplinary measures were used frequently but supported safety effectively. Use of force was high but mostly proportionate. Segregation was also used frequently but the environment and regime were reasonable; care planning and relationships were very good. Substance misuse support was very good. **Outcomes for prisoners were good against this healthy prison test.***

Recommendations

Prisoners should not wait for long periods at court after completing their cases. (1.4)

Not achieved

Holding rooms in reception should be well equipped, all first night cells should be clean and both should be free of graffiti. (1.14)

Achieved

Managers should ensure there is an integrated strategic approach to behaviour management in which incentives and antisocial behaviour measures work together coherently, taking into account any patterns and trends in violence. (1.24)

Achieved

A single death in custody action plan should be drawn up to monitor progress in implementing recommendations from all investigations carried out. (1.30)

Achieved

The establishment should ensure that the MDT programme is adequately resourced by trained testing officers so that all requested suspicion tests are undertaken. (1.43)

Achieved

Prisoners should be able to retain their enhanced status when they arrive from another prison. (1.48)

Achieved

Reviews for prisoners completing the entry level should be held on time. (1.49)

Achieved

Prisoner debriefs following use of force should be carried out for all prisoners and reviewed so lessons can be learned. (1.57)

Not achieved

Lighting in the special accommodation should be appropriate and prisoners should be provided with a mattress subject to security and safety considerations. (1.58)

Not achieved

Respect

Prisoners are treated with respect for their human dignity.

*At the last inspection, in 2015, the general environment and accommodation were good. Staff-prisoner relationships were strong and properly challenging. Some minority groups were less positive than others about key outcomes, but support for prisoners with protected characteristics was generally good. The chaplaincy provision was good. Complaints were managed well. Advice on accessing legal services was readily available. Health services were appropriate and outcomes generally good. Prisoners were more positive about the food than the comparator and canteen arrangements were appropriate. **Outcomes for prisoners were good against this healthy prison test.***

Recommendations

Cells designed for one prisoner should not be shared. (2.7)

Not achieved (recommendation repeated, 2.11)

Ventilation in cells should be improved. (2.8)

Not achieved (recommendation repeated, 2.12)

The poor perceptions of minority groups should be explored and addressed. (2.30)

Not achieved

The identification of disabled prisoners should be improved so that their needs can be met effectively. (2.31)

Achieved

Monitoring data about young adult prisoners should be introduced and their specific needs identified and met. (2.32)

Achieved

Prisoners should be able to make a confidential complaint directly to health providers. (2.52)

Achieved

Prisoners should have a care plan, based on an initial review; appropriately trained and well-supervised staff should carry out subsequent periodic reviews. (2.53)

Not achieved

All wing staff should receive regular first aid and resuscitation training and there should be sufficient trained staff to use emergency equipment. (2.54)

Achieved

The facilities used by the triage nurse in the wellbeing centre should be upgraded to allow more appropriate secondary health screening and interventions to take place. (2.64)

Not achieved

The high non-attendance rate should be investigated to ensure men with genuine health needs are not disadvantaged and that services are delivered efficiently. (2.65)

Achieved

Waiting times for optician and podiatry services should be equivalent to those in the community. (2.66)

Partially achieved

Access to the pharmacy and CD cabinet should be audited, as should any medicines taken from the pharmacy room out of hours; all checks should be recorded. (2.75)

Not achieved

The medicines and therapeutics committee should review the use of general stock. Named-patient medication should be used wherever possible and general stock should be used only if unavoidable. (2.76)

Not achieved (recommendation repeated, 2.133)

A policy for prisoners reporting sick to nurses should be implemented and regularly reviewed by the medicines and therapeutics committee to ensure that all appropriate medicines can be supplied. (2.77)

(2.77)

Not achieved

All prison staff should attend mental health awareness training. (2.89)

Not achieved

The transfer of patients to hospital under the Mental Health Act should occur within Department of Health transfer target timescales. (2.90)

Not achieved (recommendation repeated, 2.108)

Prisoners should have sufficient hot water during the night. (2.96)

Not achieved

Prisoners should be able to access a full canteen order within 72 hours of arrival. (2.102)

Not achieved

Purposeful activity

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

*At the last inspection, in 2015, time out of cell was generally good but access to outside exercise needed to be better. Learning and skills needed better focus to ensure outcomes were consistently good. There were sufficient activity places but attendance in education needed to be improved. The range of opportunities available was limited for those with longer sentences, particularly vocational training. Too much teaching and learning needed improvement. Achievements in many areas were good but not sufficient in some of the most important areas. The library and gym provided prisoners with some good opportunities. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

Main recommendation

The quality of teaching, learning and assessment should be improved. (S42)

Achieved

Recommendations

All prisoners should have the opportunity to spend one hour a day in the open air. (3.5)

Not achieved (recommendation repeated, 3.13)

Data should be used more effectively to monitor and evaluate the participation and outcomes of different groups of prisoners in activities. (3.12)

Achieved

A detailed analysis of prisoners' training needs should be undertaken to ensure the range of education and training provision meets the needs of prisoners and local employers. (3.13)

Partially achieved

The prison should provide additional accredited vocational and work activities to better prepare prisoners for employment. (3.20)

Achieved

English and mathematics support should be available in work areas for prisoners with skills below level 2. (3.21)

Partially achieved

The coordination and sequencing of activities should be improved to prioritise attendance at education and training. (3.22)

Achieved

All activities should occupy and challenge prisoners throughout the working day. (3.32)

Partially achieved

The proportion of prisoners achieving English, mathematics and functional skills qualifications should be improved. (3.37)

Achieved

Methods of recognising and recording prisoners' knowledge and skills development should be introduced in non-accredited areas to enhance self-esteem and provide evidence for use in employment on release. (3.38)

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, the strategic management of resettlement was very good. Offender management work was good overall. The Link and Outside Links provision was excellent and provided a range of support on arrival and 'through the gate'. Prisoner mentors were used effectively to support resettlement. Support in the reducing reoffending pathways was very good. **Outcomes for prisoners were good against this healthy prison test.***

Recommendations

Prisoners should complete ROTL application forms in detail, setting out the purpose of ROR and providing a clear plan for release detailing what they plan to do, where, why and with whom. (4.9)

Achieved

The OMU should take action to ensure that assessments and plans from offender managers are current, timely and of a high standard. (4.17)

Achieved

Prisoners deemed suitable for HDC should be released on their eligibility date. (4.18)

Achieved

Effective links should be established with the National Careers Service to support resettlement. (4.33)

No longer relevant

Appendix III: Prison population profile

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

Status	18–20-year-olds	21 and over	%
Sentenced	32	542	71
Recall	3	73	9.4
Convicted Unsented	10	45	6.8
Remand	16	83	12.3
Civil prisoners	0	1	0.1
Detainees	0	2	0.2
Unknown	0	1	0.1%
Total	61	747	100

Sentence	18–20-year-olds	21 and over	%
Unsented	26	138	20.3
Less than six months	0	42	5.2
six months to less than 12 months	2	48	6.2
12 months to less than 2 years	10	70	9.9
2 years to less than 4 years	17	157	21.6
4 years to less than 10 years	4	176	22.3
10 years and over (not life)	2	78	9.9
ISPP (indeterminate sentence for public protection)	0	19	2.4
Life	0	19	2.4
Total	61	747	100

Age	Number of prisoners	%
Please state minimum age here:	18	N/A
Under 21 years	61	7.5
21 years to 29 years	266	32.9
30 years to 39 years	268	33.2
40 years to 49 years	156	19.3
50 years to 59 years	41	5.1
60 years to 69 years	11	1.4
70 plus years	5	0.6
Please state maximum age here:	83	N/A
Total	808	100

Nationality	18–20-year-olds	21 and over	%
British	53	654	87.5
Foreign nationals	8	93	12.5
Total	61	747	100

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced	2	14	2
Uncategorised sentenced	26	148	21.5
Category A	N/A	N/A	N/A
Category B	0	81	10
Category C	0	460	56.9
Category D	0	44	5.4
Other	33	0	4.1
Total	61	747	100

Ethnicity	18–20-year-olds	21 and over	%
White			
British	28	470	61.6
Irish	0	10	1.2
Gypsy/Irish Traveller	2	18	2.5
Other white	2	58	7.4
Mixed			
White and black Caribbean	5	25	3.7
White and black African	3	3	0.7
White and Asian	0	3	0.4
Other mixed	4	7	1.4
Asian or Asian British			
Indian	1	10	1.4
Pakistani	2	31	4.1
Bangladeshi	1	8	1.1
Chinese	0	0	0
Other Asian	1	18	2.4
Black or black British			
Caribbean	5	31	4.5
African	4	31	4.3
Other black	3	18	2.6
Other ethnic group			
Arab	0	0	0
Other ethnic group	0	5	0.6
Not stated	0	1	0.1
Total	61	747	100

Religion	18–20-year-olds	21 and over	%
Baptist	0	0	0
Church of England	2	82	10.4
Roman Catholic	7	158	20.4
Other Christian denominations	11	111	15.1
Muslim	12	132	17.8
Sikh	1	4	0.6
Hindu	0	2	0.2
Buddhist	1	15	2
Jewish	0	5	0.6
Other	0	11	1.4
No religion	25	224	30.8
Total	61	747	100

Other demographics	18–20-year-olds	21 and over	%
Veteran (ex-armed services)	0	12	1.5
Total	0	12	1.5

Sentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	3	0.4	97	12
1 month to 3 months	14	1.7	157	19.4
3 months to six months	12	1.5	105	13
six months to 1 year	3	0.4	154	19.1
1 year to 2 years	3	0.4	80	9.9
2 years to 4 years	0	0	13	1.6
4 years or more	0	0	3	0.4
Total	35	4.4	609	75.4

Sentenced prisoners only

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

Unsentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	5	3	33	20.1
1 month to 3 months	12	7.3	51	31.1
3 months to six months	6	3.7	35	21.3
six months to 1 year	3	1.8	17	10.4
1 year to 2 years	0	0	2	1.2
2 years to 4 years	0	0	0	0
4 years or more	0	0	0	0
Total	26	15.8	138	84.1

Appendix IV: 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.¹¹

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

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

Sampling

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

Distributing and collecting questionnaires

HMI Prisons researchers distribute and collect the questionnaires in person. So that prisoners can give their informed consent to participate, the purpose of the survey is explained and assurances are given about confidentiality and anonymity.¹³ 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 9 July 2018 the prisoner population at HMP Peterborough was 806. Using the sampling method described above, questionnaires were distributed to 213 prisoners. We received a total of 172 completed questionnaires, a response rate of 81%. Twenty-one prisoners declined to participate in the survey and 20 questionnaires were either not returned at all, or returned blank.

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

¹² 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments).

¹³ 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 Peterborough. For the comparator analyses, each question was reformulated into a binary 'yes/no' format and affirmative responses compared.¹⁴ 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 Peterborough 2018 compared with those from other HMIP surveys¹⁵

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

Comparisons between different residential locations within HMP Peterborough 2018

- responses of prisoners on houseblock five compared with those from the rest of the establishment.

Comparisons between sub-populations of prisoners within HMP Peterborough 2018¹⁶

- white prisoners' responses compared with those of prisoners from black or minority ethnic groups.
- British nationals' responses compared with those of foreign nationals.
- 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.¹⁷

In the comparator analyses, statistically significant differences are indicated by shading.¹⁸ 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

¹⁴ Using the Chi-square test (or Fisher's exact test if there are fewer than five responses in a group).

¹⁵ 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.

¹⁶ These analyses are carried out on summary data from selected survey questions only.

¹⁷ A minimum of 10 responses which must also represent at least 10% of the total response.

¹⁸ 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.

Survey summary

Background information

I.1	What wing or houseblock are you currently living on?	
	Houseblock 3	45 (26%)
	Houseblock 4	57 (33%)
	Houseblock 5	65 (38%)
	Segregation unit.....	3 (2%)
	Health care unit.....	2 (1%)
I.2	How old are you?	
	Under 21	9 (5%)
	21 - 25.....	26 (15%)
	26 - 29.....	27 (16%)
	30 - 39.....	56 (33%)
	40 - 49.....	41 (24%)
	50 - 59.....	8 (5%)
	60 - 69.....	2 (1%)
	70 or over	0 (0%)
I.3	What is your ethnic group?	
	White - English/ Welsh/ Scottish/ Northern Irish/ British	95 (57%)
	White - Irish.....	1 (1%)
	White - Gypsy or Irish Traveller.....	8 (5%)
	White - any other White background	11 (7%)
	Mixed - White and Black Caribbean	7 (4%)
	Mixed - White and Black African	2 (1%)
	Mixed - White and Asian	2 (1%)
	Mixed - any other Mixed ethnic background	2 (1%)
	Asian/ Asian British - Indian.....	2 (1%)
	Asian/ Asian British - Pakistani.....	9 (5%)
	Asian/ Asian British - Bangladeshi.....	4 (2%)
	Asian/ Asian British - Chinese.....	0 (0%)
	Asian - any other Asian Background	2 (1%)
	Black/ Black British - Caribbean.....	6 (4%)
	Black/ Black British - African	9 (5%)
	Black - any other Black/ African/ Caribbean background.....	3 (2%)
	Arab.....	0 (0%)
	Any other ethnic group	3 (2%)
I.4	How long have you been in this prison?	
	Less than 6 months.....	80 (49%)
	6 months or more	83 (51%)
I.5	Are you currently serving a sentence?	
	Yes	115 (69%)
	Yes - on recall.....	17 (10%)
	No - on remand or awaiting sentence.....	35 (21%)
	No - immigration detainee.....	0 (0%)

1.6	How long is your sentence?	
	Less than 6 months.....	13 (8%)
	6 months to less than 1 year.....	13 (8%)
	1 year to less than 4 years.....	43 (26%)
	4 years to less than 10 years.....	41 (24%)
	10 years or more.....	19 (11%)
	IPP (indeterminate sentence for public protection).....	3 (2%)
	Life.....	1 (1%)
	Not currently serving a sentence.....	35 (21%)
Arrival and reception		
2.1	Were you given up-to-date information about this prison before you came here?	
	Yes.....	42 (25%)
	No.....	106 (63%)
	Don't remember.....	20 (12%)
2.2	When you arrived at this prison, how long did you spend in reception?	
	Less than 2 hours.....	74 (44%)
	2 hours or more.....	85 (51%)
	Don't remember.....	8 (5%)
2.3	When you were searched in reception, was this done in a respectful way?	
	Yes.....	146 (86%)
	No.....	19 (11%)
	Don't remember.....	4 (2%)
2.4	Overall, how were you treated in reception?	
	Very well.....	50 (30%)
	Quite well.....	90 (53%)
	Quite badly.....	17 (10%)
	Very badly.....	7 (4%)
	Don't remember.....	5 (3%)
2.5	When you first arrived here, did you have any of the following problems?	
	Problems getting phone numbers.....	48 (29%)
	Contacting family.....	47 (28%)
	Arranging care for children or other dependants.....	5 (3%)
	Contacting employers.....	8 (5%)
	Money worries.....	35 (21%)
	Housing worries.....	29 (18%)
	Feeling depressed.....	64 (39%)
	Feeling suicidal.....	22 (13%)
	Other mental health problems.....	38 (23%)
	Physical health problems.....	25 (15%)
	Drug or alcohol problems (e.g. withdrawal).....	31 (19%)
	Problems getting medication.....	44 (27%)
	Needing protection from other prisoners.....	22 (13%)
	Lost or delayed property.....	27 (16%)
	Other problems.....	21 (13%)
	Did not have any problems.....	39 (24%)
2.6	Did staff help you to deal with these problems when you first arrived?	
	Yes.....	42 (26%)
	No.....	79 (49%)
	Did not have any problems when I first arrived.....	39 (24%)

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.....			117 (70%)
	Toiletries / other basic items			113 (68%)
	A shower.....			64 (39%)
	A free phone call.....			129 (78%)
	Something to eat.....			140 (84%)
	The chance to see someone from health care			115 (69%)
	The chance to talk to a Listener or Samaritans.....			55 (33%)
	Support from another prisoner (e.g. Insider or buddy).....			43 (26%)
	Wasn't offered any of these things			2 (1%)
3.2	On your first night in this prison, how clean or dirty was your cell?			
	Very clean			4 (2%)
	Quite clean			49 (29%)
	Quite dirty			50 (29%)
	Very dirty.....			61 (36%)
	Don't remember			7 (4%)
3.3	Did you feel safe on your first night here?			
	Yes			109 (64%)
	No.....			49 (29%)
	Don't remember			11 (7%)
3.4	In your first few days here, did you get:			
		Yes	No	Don't remember
	Access to the prison shop / canteen?	86 (53%)	65 (40%)	10 (6%)
	Free PIN phone credit?	94 (57%)	59 (36%)	13 (8%)
	Numbers put on your PIN phone?	94 (58%)	58 (36%)	11 (7%)
3.5	Did your induction cover everything you needed to know about this prison?			
	Yes.....			110 (67%)
	No.....			44 (27%)
	Have not had an induction.....			9 (6%)

On the wing

4.1	Are you in a cell on your own?		
	Yes.....		100 (59%)
	No, I'm in a shared cell or dormitory.....		69 (41%)
4.2	Is your cell call bell normally answered within 5 minutes?		
	Yes.....		65 (39%)
	No.....		78 (47%)
	Don't know.....		23 (14%)
	Don't have a cell call bell.....		1 (1%)

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

	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	119 (73%)	41 (25%)	4 (2%)
Can you shower every day?	163 (98%)	3 (2%)	0 (0%)
Do you have clean sheets every week?	150 (90%)	11 (7%)	6 (4%)
Do you get cell cleaning materials every week?	105 (63%)	57 (34%)	5 (3%)
Is it normally quiet enough for you to relax or sleep at night?	113 (69%)	47 (29%)	3 (2%)
Can you get your stored property if you need it?	63 (38%)	55 (33%)	47 (28%)

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

Very clean	15 (9%)
Quite clean	81 (49%)
Quite dirty	51 (31%)
Very dirty	18 (11%)

Food and canteen

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

Very good	9 (5%)
Quite good	60 (36%)
Quite bad	57 (34%)
Very bad	43 (25%)

5.2 Do you get enough to eat at mealtimes?

Always	9 (5%)
Most of the time	44 (26%)
Some of the time	71 (42%)
Never	44 (26%)

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

Yes	47 (28%)
No	108 (65%)
Don't know	10 (6%)

Relationships with staff

6.1 Do most staff here treat you with respect?

Yes	123 (74%)
No	44 (26%)

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

Yes	112 (67%)
No	56 (33%)

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

Yes	55 (33%)
No	114 (67%)

6.4	How helpful is your personal or named officer?	
	Very helpful.....	22 (14%)
	Quite helpful.....	30 (19%)
	Not very helpful	12 (8%)
	Not at all helpful.....	13 (8%)
	Don't know.....	20 (13%)
	Don't have a personal / named officer	62 (39%)
6.5	How often do you see prison governors, directors or senior managers talking to prisoners?	
	Regularly.....	13 (8%)
	Sometimes.....	38 (23%)
	Hardly ever.....	102 (62%)
	Don't know.....	12 (7%)
6.6	Do you feel that you are treated as an individual in this prison?	
	Yes.....	75 (47%)
	No.....	86 (53%)
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	
	Yes, and things sometimes change.....	27 (16%)
	Yes, but things don't change.....	50 (30%)
	No.....	58 (35%)
	Don't know.....	32 (19%)

Faith

7.1	What is your religion?	
	No religion.....	54 (34%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	68 (43%)
	Buddhist.....	2 (1%)
	Hindu.....	0 (0%)
	Jewish	1 (1%)
	Muslim.....	30 (19%)
	Sikh	0 (0%)
	Other	4 (3%)
7.2	Are your religious beliefs respected here?	
	Yes.....	72 (45%)
	No.....	14 (9%)
	Don't know.....	20 (13%)
	Not applicable (no religion).....	54 (34%)
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	
	Yes.....	75 (46%)
	No.....	10 (6%)
	Don't know.....	24 (15%)
	Not applicable (no religion).....	54 (33%)
7.4	Are you able to attend religious services, if you want to?	
	Yes.....	95 (59%)
	No.....	8 (5%)
	Don't know.....	5 (3%)
	Not applicable (no religion).....	54 (33%)

Contact with family and friends

8.1	Have staff here encouraged you to keep in touch with your family / friends?	
	Yes	55 (34%)
	No	108 (66%)
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	82 (49%)
	No	84 (51%)
8.3	Are you able to use a phone every day (if you have credit)?	
	Yes	157 (93%)
	No	12 (7%)
8.4	How easy or difficult is it for your family and friends to get here?	
	Very easy	26 (15%)
	Quite easy	58 (34%)
	Quite difficult	32 (19%)
	Very difficult	39 (23%)
	Don't know	14 (8%)
8.5	How often do you have visits from family or friends?	
	More than once a week	7 (4%)
	About once a week	45 (27%)
	Less than once a week	60 (37%)
	Not applicable (don't get visits)	52 (32%)
8.6	Do visits usually start and finish on time?	
	Yes	54 (49%)
	No	57 (51%)
8.7	Are your visitors usually treated respectfully by staff?	
	Yes	76 (70%)
	No	32 (30%)

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	89 (54%)
	Yes, but these times are not usually kept to	64 (39%)
	No	12 (7%)
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	22 (14%)
	2 to 6 hours	76 (47%)
	6 to 10 hours	41 (25%)
	10 hours or more	9 (6%)
	Don't know	13 (8%)
9.3	How long do you usually spend out of your cell on a typical Saturday or Sunday?	
	Less than 2 hours	15 (9%)
	2 to 6 hours	110 (67%)
	6 to 10 hours	30 (18%)
	10 hours or more	2 (1%)
	Don't know	8 (5%)

9.4	How many days in a typical week do you have time to do domestics (shower, clean cell, use the wing phones etc.)?		
	None	3	(2%)
	1 or 2	14	(8%)
	3 to 5.....	32	(19%)
	More than 5.....	107	(65%)
	Don't know.....	9	(5%)
9.5	How many days in a typical week do you get association, if you want it?		
	None	4	(2%)
	1 or 2	8	(5%)
	3 to 5.....	21	(13%)
	More than 5.....	122	(73%)
	Don't know.....	11	(7%)
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	24	(15%)
	3 to 5.....	48	(29%)
	More than 5.....	77	(47%)
	Don't know.....	11	(7%)
9.7	Typically, how often do you go to the gym?		
	Twice a week or more	86	(52%)
	About once a week.....	18	(11%)
	Less than once a week.....	8	(5%)
	Never	54	(33%)
9.8	Typically, how often do you go to the library?		
	Twice a week or more	9	(5%)
	About once a week.....	39	(24%)
	Less than once a week.....	31	(19%)
	Never	86	(52%)
9.9	Does the library have a wide enough range of materials to meet your needs?		
	Yes	24	(15%)
	No.....	51	(32%)
	Don't use the library	86	(53%)

Applications, complaints and legal rights

10.1	Is it easy for you to make an application?			
	Yes.....	110	(67%)	
	No.....	38	(23%)	
	Don't know.....	16	(10%)	
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?	75 (50%)	58 (38%)	18 (12%)
	Are applications usually dealt with within 7 days?	69 (47%)	59 (40%)	18 (12%)

I0.3	Is it easy for you to make a complaint?			
	Yes.....			100 (62%)
	No.....			27 (17%)
	Don't know.....			35 (22%)
I0.4	If you have made any complaints here, please answer the questions below:			
		Yes	No	Not made any complaints
	Are complaints usually dealt with fairly?	24 (17%)	62 (43%)	59 (41%)
	Are complaints usually dealt with within 7 days?	26 (19%)	55 (39%)	59 (42%)
I0.5	Have you ever been prevented from making a complaint here when you wanted to?			
	Yes.....			33 (22%)
	No.....			78 (51%)
	Not wanted to make a complaint.....			42 (27%)
I0.6	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?	72 (45%)	41 (26%)	29 (18%) 18 (11%)
	Attend legal visits?	80 (51%)	31 (20%)	25 (16%) 20 (13%)
	Get bail information?	25 (16%)	46 (30%)	43 (28%) 39 (25%)
I0.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?			
	Yes.....			62 (39%)
	No.....			73 (45%)
	Not had any legal letters.....			26 (16%)

Health care

I1.1	How easy or difficult is it to see the following people?				
		Very easy	Quite easy	Quite difficult	Very difficult Don't know
	Doctor	17 (10%)	49 (30%)	48 (29%)	39 (23%) 13 (8%)
	Nurse	24 (15%)	72 (44%)	33 (20%)	21 (13%) 13 (8%)
	Dentist	10 (6%)	14 (9%)	31 (19%)	84 (52%) 22 (14%)
	Mental health workers	10 (6%)	19 (12%)	31 (20%)	41 (26%) 57 (36%)
I1.2	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	14 (9%)	49 (30%)	39 (24%)	35 (21%) 27 (16%)
	Nurse	23 (14%)	61 (38%)	31 (19%)	24 (15%) 23 (14%)
	Dentist	14 (9%)	28 (17%)	27 (17%)	30 (19%) 62 (39%)
	Mental health workers	9 (6%)	25 (16%)	20 (13%)	18 (12%) 83 (54%)
I1.3	Do you have any mental health problems?				
	Yes.....				67 (41%)
	No.....				96 (59%)
I1.4	Have you been helped with your mental health problems in this prison?				
	Yes.....				24 (15%)
	No.....				43 (26%)
	Don't have any mental health problems.....				96 (59%)

11.5	What do you think of the overall quality of the health services here?	
	Very good	5 (3%)
	Quite good	55 (34%)
	Quite bad	53 (33%)
	Very bad	30 (19%)
	Don't know.....	19 (12%)
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	56 (34%)
	No.....	108 (66%)
12.2	If you have a disability, are you getting the support you need?	
	Yes	14 (9%)
	No.....	38 (24%)
	Don't have a disability	108 (68%)
12.3	Have you been on an ACCT in this prison?	
	Yes	30 (19%)
	No.....	125 (81%)
12.4	If you have been on an ACCT in this prison, did you feel cared for by staff?	
	Yes	13 (8%)
	No.....	19 (12%)
	Have not been on an ACCT in this prison.....	125 (80%)
12.5	How easy or difficult is it for you to speak to a Listener, if you need to?	
	Very easy	20 (13%)
	Quite easy	25 (16%)
	Quite difficult	11 (7%)
	Very difficult	9 (6%)
	Don't know.....	80 (52%)
	No Listeners at this prison	9 (6%)

Alcohol and drugs

13.1	Did you have an alcohol problem when you came into this prison?	
	Yes	32 (20%)
	No.....	129 (80%)
13.2	Have you been helped with your alcohol problem in this prison?	
	Yes	10 (6%)
	No.....	20 (13%)
	Did not / do not have an alcohol problem	129 (81%)
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	56 (34%)
	No.....	107 (66%)
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	33 (21%)
	No.....	127 (79%)

13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	21 (13%)
	No	141 (87%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	25 (17%)
	No	33 (22%)
	Did not / do not have a drug problem.....	93 (62%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy	56 (36%)
	Quite easy	25 (16%)
	Quite difficult	5 (3%)
	Very difficult	10 (6%)
	Don't know.....	59 (38%)
13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy	25 (16%)
	Quite easy	29 (18%)
	Quite difficult	10 (6%)
	Very difficult	17 (11%)
	Don't know.....	76 (48%)

Safety

14.1	Have you ever felt unsafe here?	
	Yes	89 (55%)
	No	73 (45%)
14.2	Do you feel unsafe now?	
	Yes	32 (20%)
	No	125 (80%)
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	55 (35%)
	Threats or intimidation.....	56 (36%)
	Physical assault.....	40 (26%)
	Sexual assault.....	4 (3%)
	Theft of canteen or property.....	51 (33%)
	Other bullying / victimisation	36 (23%)
	Not experienced any of these from prisoners here.....	75 (48%)
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	
	Yes	47 (31%)
	No	106 (69%)

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	47 (30%)
	Threats or intimidation.....	38 (24%)
	Physical assault.....	20 (13%)
	Sexual assault.....	4 (3%)
	Theft of canteen or property.....	18 (12%)
	Other bullying / victimisation	27 (17%)
	Not experienced any of these from staff here.....	90 (58%)

14.6	If you were being bullied / victimised by staff here, would you report it?	
	Yes	59 (40%)
	No.....	90 (60%)

Behaviour management

15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	
	Yes	62 (39%)
	No.....	66 (42%)
	Don't know what the incentives / rewards are	29 (18%)

15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	
	Yes	67 (42%)
	No.....	60 (38%)
	Don't know.....	19 (12%)
	Don't know what this is	14 (9%)

15.3	Have you been physically restrained by staff in this prison in the last 6 months?	
	Yes	25 (15%)
	No.....	139 (85%)

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	8 (5%)
	No.....	10 (6%)
	Don't remember	5 (3%)
	Not been restrained here in last 6 months	139 (86%)

15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	
	Yes	19 (12%)
	No.....	142 (88%)

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?	14 (74%)	5 (26%)
	Could you shower every day?	14 (82%)	3 (18%)
	Could you go outside for exercise every day?	13 (76%)	4 (24%)
	Could you use the phone every day (if you had credit)?	14 (82%)	3 (18%)

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

	Easy	Difficult	Don't know	Not available here
Education	98 (63%)	28 (18%)	28 (18%)	2 (1%)
Vocational or skills training	55 (37%)	44 (30%)	45 (30%)	5 (3%)
Prison job	62 (41%)	64 (42%)	24 (16%)	1 (1%)
Voluntary work outside of the prison	11 (7%)	49 (33%)	72 (49%)	16 (11%)
Paid work outside of the prison	6 (4%)	50 (34%)	73 (50%)	17 (12%)

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	74 (50%)	37 (25%)	37 (25%)
Vocational or skills training	59 (41%)	31 (22%)	53 (37%)
Prison job	48 (34%)	55 (39%)	38 (27%)
Voluntary work outside of the prison	30 (22%)	18 (13%)	91 (65%)
Paid work outside of the prison	31 (22%)	20 (14%)	92 (64%)

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

Yes	71 (46%)
No.....	74 (47%)
Not applicable (e.g. if you are retired, sick or on remand)	11 (7%)

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

Yes	60 (38%)
No.....	96 (62%)

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

Yes	50 (83%)
No.....	7 (12%)
Don't know what my objectives or targets are.....	3 (5%)

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

Yes	30 (53%)
No.....	24 (42%)
Don't know what my objectives or targets are.....	3 (5%)

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	26 (48%)	5 (9%)	23 (43%)
Other programmes	23 (42%)	10 (18%)	22 (40%)
One to one work	20 (37%)	6 (11%)	28 (52%)
Being on a specialist unit	4 (8%)	3 (6%)	44 (86%)
ROTL - day or overnight release	8 (15%)	3 (6%)	42 (79%)

Preparation for release

18.1	Do you expect to be released in the next 3 months?			
	Yes			44 (28%)
	No			90 (57%)
	Don't know			25 (16%)
18.2	How close is this prison to your home area or intended release address?			
	Very near			12 (28%)
	Quite near			13 (30%)
	Quite far			10 (23%)
	Very far			8 (19%)
18.3	Is anybody helping you to prepare for your release (e.g. a home probation officer, responsible officer, case worker)?			
	Yes			24 (55%)
	No			20 (45%)
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	14 (33%)	14 (33%)	14 (33%)
	Getting employment	8 (21%)	16 (41%)	15 (38%)
	Setting up education or training	4 (10%)	14 (36%)	21 (54%)
	Arranging benefits	7 (17%)	20 (48%)	15 (36%)
	Sorting out finances	5 (13%)	14 (37%)	19 (50%)
	Support for drug or alcohol problems	7 (17%)	8 (20%)	26 (63%)
	Health / mental health support	5 (13%)	13 (33%)	21 (54%)
	Social care support	4 (11%)	8 (22%)	24 (67%)
	Getting back in touch with family or friends	5 (13%)	8 (21%)	26 (67%)

More about you

19.1	Do you have children under the age of 18?			
	Yes			85 (53%)
	No			75 (47%)
19.2	Are you a UK / British citizen?			
	Yes			143 (90%)
	No			16 (10%)
19.3	Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?			
	Yes			12 (8%)
	No			148 (93%)
19.4	Have you ever been in the armed services (e.g. army, navy, air force)?			
	Yes			12 (8%)
	No			146 (92%)
19.5	What is your gender?			
	Male			158 (98%)
	Female			1 (1%)
	Non-binary			2 (1%)
	Other			0 (0%)

19.6	How would you describe your sexual orientation?	
	Straight / heterosexual.....	151 (94%)
	Gay / lesbian / homosexual.....	5 (3%)
	Bisexual.....	3 (2%)
	Other	1 (1%)
19.7	Do you identify as transgender or transsexual?	
	Yes.....	7 (4%)
	No.....	149 (96%)

Final questions about this prison

20.1	Do you think your experiences in this prison have made you more or less likely to offend in the future?	
	More likely to offend.....	20 (13%)
	Less likely to offend.....	81 (52%)
	Made no difference	55 (35%)

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

- **Summary statistics from most recent surveys of all other local prisons (33 prisons).** Please note that we do not have comparable data for the new questions introduced in September 2017.
- **Summary statistics from surveys of local prisons conducted since the introduction of the new questionnaire in September 2017 (13 prisons).** Please note that this does not include all local prisons.
- **Summary statistics from HMP Peterborough in 2018 are compared with those from HMP Peterborough in 2015.** Please note that we do not have comparable data for the new questions introduced in September 2017.

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

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

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

Number of completed questionnaires returned

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

HMP Peterborough 2018	All other local prisons	HMP Peterborough 2018	All other local prisons surveyed since September 2017	HMP Peterborough 2018	HMP Peterborough 2015
172	5,881	172	2,290	172	166

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION								
1.2	Are you under 21 years of age?	<i>n=169</i>	5%	6%	5%	5%	5%	4%
	Are you 25 years of age or younger?	<i>n=169</i>	21%		21%	21%	21%	
	Are you 50 years of age or older?	<i>n=169</i>	6%	13%	6%	14%	6%	9%
	Are you 70 years of age or older?	<i>n=169</i>	0%	2%	0%	2%	0%	2%
1.3	Are you from a minority ethnic group?	<i>n=166</i>	31%	24%	31%	25%	31%	21%
1.4	Have you been in this prison for less than 6 months?	<i>n=163</i>	49%		49%	60%	49%	
1.5	Are you currently serving a sentence?	<i>n=167</i>	79%	72%	79%	72%	79%	79%
	Are you on recall?	<i>n=167</i>	10%	11%	10%	13%	10%	7%
1.6	Is your sentence less than 12 months?	<i>n=168</i>	16%	21%	16%	21%	16%	16%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n=168</i>	2%	3%	2%	4%	2%	2%
7.1	Are you Muslim?	<i>n=159</i>	19%	12%	19%	12%	19%	12%
11.3	Do you have any mental health problems?	<i>n=163</i>	41%		41%	50%	41%	
12.1	Do you consider yourself to have a disability?	<i>n=164</i>	34%	35%	34%	39%	34%	22%
19.1	Do you have any children under the age of 18?	<i>n=160</i>	53%	52%	53%	52%	53%	60%
19.2	Are you a foreign national?	<i>n=159</i>	10%	11%	10%	9%	10%	10%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n=160</i>	8%	5%	8%	6%	8%	6%
19.4	Have you ever been in the armed services?	<i>n=158</i>	8%	6%	8%	7%	8%	5%
19.5	Is your gender female or non-binary?	<i>n=161</i>	2%		2%	1%	2%	
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n=160</i>	6%	4%	6%	4%	6%	3%
19.7	Do you identify as transgender or transsexual?	<i>n=156</i>	5%		5%	2%	5%	
ARRIVAL AND RECEPTION								
2.1	Were you given up-to-date information about this prison before you came here?	<i>n=168</i>	25%		25%	17%	25%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n=167</i>	44%	38%	44%	34%	44%	39%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n=169</i>	86%	77%	86%	76%	86%	82%
2.4	Overall, were you treated very / quite well in reception?	<i>n=169</i>	83%		83%	74%	83%	

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2.5	When you first arrived, did you have any problems?	<i>n=165</i>	76%	84%	76%	89%	76%	69%
2.5	Did you have problems with:							
	- Getting phone numbers?	<i>n=165</i>	29%	38%	29%	46%	29%	25%
	- Contacting family?	<i>n=165</i>	29%	42%	29%	49%	29%	18%
	- Arranging care for children or other dependents?	<i>n=165</i>	3%		3%	5%	3%	
	- Contacting employers?	<i>n=165</i>	5%	6%	5%	7%	5%	6%
	- Money worries?	<i>n=165</i>	21%	26%	21%	28%	21%	24%
	- Housing worries?	<i>n=165</i>	18%	23%	18%	24%	18%	31%
	- Feeling depressed?	<i>n=165</i>	39%		39%	48%	39%	
	- Feeling suicidal?	<i>n=165</i>	13%		13%	18%	13%	
	- Other mental health problems?	<i>n=165</i>	23%		23%	28%	23%	
	- Physical health problems	<i>n=165</i>	15%	20%	15%	20%	15%	12%
	- Drugs or alcohol (e.g. withdrawal)?	<i>n=165</i>	19%		19%	23%	19%	
	- Getting medication?	<i>n=165</i>	27%		27%	30%	27%	
	- Needing protection from other prisoners?	<i>n=165</i>	13%	10%	13%	11%	13%	8%
	- Lost or delayed property?	<i>n=165</i>	16%	19%	16%	21%	16%	14%
	<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=121</i>	35%	32%	35%	30%	35%	31%
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>	71%	70%	71%	71%	71%	86%
	- Toiletries / other basic items?	<i>n=166</i>	68%	57%	68%	52%	68%	62%
	- A shower?	<i>n=166</i>	39%	29%	39%	27%	39%	37%
	- A free phone call?	<i>n=166</i>	78%	50%	78%	47%	78%	84%
	- Something to eat?	<i>n=166</i>	84%	73%	84%	76%	84%	71%
	- The chance to see someone from health care?	<i>n=166</i>	69%	64%	69%	62%	69%	72%
	- The chance to talk to a Listener or Samaritans?	<i>n=166</i>	33%	28%	33%	25%	33%	39%
	- Support from another prisoner (e.g. Insider or buddy)?	<i>n=166</i>	26%		26%	21%	26%	
	- None of these?	<i>n=166</i>	1%		1%	5%	1%	
3.2	On your first night in this prison, was your cell very / quite clean?	<i>n=171</i>	31%		31%	28%	31%	
3.3	Did you feel safe on your first night here?	<i>n=169</i>	65%	64%	65%	61%	65%	81%
3.4	In your first few days here, did you get:							
	- Access to the prison shop / canteen?	<i>n=161</i>	53%	26%	53%	31%	53%	37%
	- Free PIN phone credit?	<i>n=166</i>	57%		57%	54%	57%	
	- Numbers put on your PIN phone?	<i>n=163</i>	58%		58%	32%	58%	
3.5	Have you had an induction at this prison?	<i>n=163</i>	95%	79%	95%	82%	95%	89%
	<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=154</i>	71%		71%	48%	71%	

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ON THE WING						
4.1	Are you in a cell on your own?	<i>n=169</i>	59%		59%	32%
4.2	Is your cell call bell normally answered within 5 minutes?	<i>n=167</i>	39%	19%	39%	19%
4.3	On the wing or houseblock you currently live on:					
	- Do you normally have enough clean, suitable clothes for the week?	<i>n=164</i>	73%	49%	73%	55%
	- Can you shower every day?	<i>n=166</i>	98%	75%	98%	74%
	- Do you have clean sheets every week?	<i>n=167</i>	90%	61%	90%	62%
	- Do you get cell cleaning materials every week?	<i>n=167</i>	63%	48%	63%	51%
	- Is it normally quiet enough for you to relax or sleep at night?	<i>n=163</i>	69%	53%	69%	53%
	- Can you get your stored property if you need it?	<i>n=165</i>	38%	18%	38%	21%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	<i>n=165</i>	58%		58%	57%
FOOD AND CANTEEN						
5.1	Is the quality of the food in this prison very / quite good?	<i>n=169</i>	41%		41%	35%
5.2	Do you get enough to eat at meal-times always / most of the time?	<i>n=168</i>	32%		32%	29%
5.3	Does the shop / canteen sell the things that you need?	<i>n=165</i>	29%	53%	29%	60%
RELATIONSHIPS WITH STAFF						
6.1	Do most staff here treat you with respect?	<i>n=167</i>	74%	70%	74%	67%
6.2	Are there any staff here you could turn to if you had a problem?	<i>n=168</i>	67%	69%	67%	70%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<i>n=169</i>	33%	28%	33%	29%
6.4	Do you have a personal officer?	<i>n=159</i>	61%		61%	57%
	<i>For those who have a personal officer:</i>					
6.4	Is your personal or named officer very / quite helpful?	<i>n=97</i>	54%		54%	45%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	<i>n=165</i>	8%		8%	7%
6.6	Do you feel that you are treated as an individual in this prison?	<i>n=161</i>	47%		47%	39%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	<i>n=167</i>	46%		46%	40%
	If so, do things sometimes change?	<i>n=77</i>	35%		35%	34%
FAITH						
7.1	Do you have a religion?	<i>n=159</i>	66%	68%	66%	69%
	<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	<i>n=106</i>	68%		68%	66%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	<i>n=109</i>	69%		69%	65%
7.4	Are you able to attend religious services, if you want to?	<i>n=108</i>	88%		88%	84%
CONTACT WITH FAMILY AND FRIENDS						
8.1	Have staff here encouraged you to keep in touch with your family / friends?	<i>n=163</i>	34%		34%	24%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	<i>n=166</i>	49%	50%	49%	55%
8.3	Are you able to use a phone every day (if you have credit)?	<i>n=169</i>	93%		93%	79%
8.4	Is it very / quite easy for your family and friends to get here?	<i>n=169</i>	50%		50%	45%
8.5	Do you get visits from family/friends once a week or more?	<i>n=164</i>	32%		32%	24%
	<i>For those who get visits:</i>					
8.6	Do visits usually start and finish on time?	<i>n=111</i>	49%		49%	44%
8.7	Are your visitors usually treated respectfully by staff?	<i>n=108</i>	70%		70%	71%

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TIME OUT OF CELL						
9.1	Do you know what the unlock and lock-up times are supposed to be here?	<i>n=165</i>	93%		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?	<i>n=153</i>	58%		58%	49%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	<i>n=161</i>	14%	33%	14%	12%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	<i>n=161</i>	6%	7%	6%	14%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	<i>n=165</i>	9%		9%	53%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	<i>n=165</i>	1%		1%	1%
9.4	Do you have time to do domestics more than 5 days in a typical week?	<i>n=165</i>	65%		65%	40%
9.5	Do you get association more than 5 days in a typical week, if you want it?	<i>n=166</i>	74%		74%	43%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	<i>n=165</i>	47%		47%	46%
9.7	Do you typically go to the gym twice a week or more?	<i>n=166</i>	52%		52%	36%
9.8	Do you typically go to the library twice a week or more?	<i>n=165</i>	6%	7%	6%	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?	<i>n=75</i>	32%	56%	32%	58%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS						
10.1	Is it easy for you to make an application?	<i>n=164</i>	67%	70%	67%	67%
<i>For those who have made an application:</i>						
10.2	Are applications usually dealt with fairly?	<i>n=133</i>	56%	46%	56%	47%
	Are applications usually dealt with within 7 days?	<i>n=128</i>	54%	31%	54%	31%
10.3	Is it easy for you to make a complaint?	<i>n=162</i>	62%	50%	62%	54%
<i>For those who have made a complaint:</i>						
10.4	Are complaints usually dealt with fairly?	<i>n=86</i>	28%	26%	28%	27%
	Are complaints usually dealt with within 7 days?	<i>n=81</i>	32%	21%	32%	20%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	<i>n=111</i>	30%		30%	30%

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<i>For those who need it, is it easy to:</i>							
10.6	Communicate with your solicitor or legal representative?	n=142	51%		51%	40%	51%
	Attend legal visits?	n=136	59%		59%	57%	59%
	Get bail information?	n=114	22%		22%	16%	22%
<i>For those who have had legal letters:</i>							
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=135	46%	49%	46%	50%	46%
HEALTH CARE							
11.1	Is it very / quite easy to see:						
	- Doctor?	n=166	40%		40%	24%	40%
	- Nurse?	n=163	59%		59%	47%	59%
	- Dentist?	n=161	15%		15%	11%	15%
	- Mental health workers?	n=158	18%		18%	19%	18%
11.2	Do you think the quality of the health service is very / quite good from:						
	- Doctor?	n=164	38%		38%	39%	38%
	- Nurse?	n=162	52%		52%	51%	52%
	- Dentist?	n=161	26%		26%	25%	26%
	- Mental health workers?	n=155	22%		22%	24%	22%
11.3	Do you have any mental health problems?	n=163	41%		41%	50%	41%
<i>For those who have mental health problems:</i>							
11.4	Have you been helped with your mental health problems in this prison?	n=67	36%		36%	35%	36%
11.5	Do you think the overall quality of the health services here is very / quite good?	n=162	37%		37%	34%	37%
OTHER SUPPORT NEEDS							
12.1	Do you consider yourself to have a disability?	n=164	34%	35%	34%	39%	34%
<i>For those who have a disability:</i>							
12.2	Are you getting the support you need?	n=52	27%		27%	27%	27%
12.3	Have you been on an ACCT in this prison?	n=155	19%		19%	24%	19%
<i>For those who have been on an ACCT:</i>							
12.4	Did you feel cared for by staff?	n=32	41%		41%	49%	41%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=154	29%		29%	48%	29%
ALCOHOL AND DRUGS							
13.1	Did you have an alcohol problem when you came into this prison?	n=161	20%	22%	20%	23%	20%
<i>For those who had / have an alcohol problem:</i>							
13.2	Have you been helped with your alcohol problem in this prison?	n=30	33%	55%	33%	61%	33%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=163	34%	36%	34%	34%	34%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=160	21%	14%	21%	15%	21%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=162	13%		13%	11%	13%
<i>For those who had / have a drug problem:</i>							
13.6	Have you been helped with your drug problem in this prison?	n=58	43%	54%	43%	49%	43%
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=155	52%		52%	50%	52%
13.8	Is it very / quite easy to get alcohol in this prison?	n=157	34%		34%	25%	34%

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SAFETY								
14.1	Have you ever felt unsafe here?	n=162	55%	56%	55%	60%	55%	32%
14.2	Do you feel unsafe now?	n=157	20%	27%	20%	28%	20%	13%
14.3	Have you experienced any of the following from other prisoners here:							
	- Verbal abuse?	n=155	36%		36%	39%	36%	
	- Threats or intimidation?	n=155	36%		36%	35%	36%	
	- Physical assault?	n=155	26%		26%	20%	26%	
	- Sexual assault?	n=155	3%		3%	3%	3%	
	- Theft of canteen or property?	n=155	33%		33%	30%	33%	
	- Other bullying / victimisation?	n=155	23%		23%	20%	23%	
	- Not experienced any of these from prisoners here	n=155	48%	61%	48%	48%	48%	70%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	n=153	31%		31%	35%	31%	
14.5	Have you experienced any of the following from staff here:							
	- Verbal abuse?	n=156	30%		30%	34%	30%	
	- Threats or intimidation?	n=156	24%		24%	26%	24%	
	- Physical assault?	n=156	13%		13%	14%	13%	
	- Sexual assault?	n=156	3%		3%	2%	3%	
	- Theft of canteen or property?	n=156	12%		12%	11%	12%	
	- Other bullying / victimisation?	n=156	17%		17%	18%	17%	
	- Not experienced any of these from staff here	n=156	58%	63%	58%	55%	58%	72%
14.6	If you were being bullied / victimised by staff here, would you report it?	n=149	40%		40%	47%	40%	
BEHAVIOUR MANAGEMENT								
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	n=157	40%		40%	38%	40%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	n=160	42%		42%	34%	42%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	n=164	15%	13%	15%	14%	15%	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=23	35%		35%	20%	35%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	n=161	12%	16%	12%	9%	12%	24%
<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=19	74%		74%	56%	74%	
	Could you shower every day?	n=17	82%		82%	47%	82%	
	Could you go outside for exercise every day?	n=17	77%		77%	56%	77%	
	Could you use the phone every day (if you had credit)?	n=17	82%		82%	43%	82%	

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EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	n=156	63%		63%
	- Vocational or skills training?	n=149	37%		37%
	- Prison job?	n=151	41%		41%
	- Voluntary work outside of the prison?	n=148	7%		7%
	- Paid work outside of the prison?	n=146	4%		4%
16.2	In this prison, have you done the following activities:				
	- Education?	n=148	75%	69%	75%
	- Vocational or skills training?	n=143	63%	55%	63%
	- Prison job?	n=141	73%	71%	73%
	- Voluntary work outside of the prison?	n=139	35%		35%
	- Paid work outside of the prison?	n=143	36%		36%
<i>For those who have done the following activities, do you think they will help you on release:</i>					
	- Education?	n=111	67%	51%	67%
	- Vocational or skills training?	n=90	66%	46%	66%
	- Prison job?	n=103	47%	39%	47%
	- Voluntary work outside of the prison?	n=48	63%		63%
	- Paid work outside of the prison?	n=51	61%		61%
16.3	Do staff encourage you to attend education, training or work?	n=145	49%		49%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	n=156	39%		39%
<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=60	83%		83%
17.3	Are staff helping you to achieve your objectives or targets?	n=57	53%		53%
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	n=54	57%		57%
	- Other programmes?	n=55	60%		60%
	- One to one work?	n=54	48%		48%
	- Been on a specialist unit?	n=51	14%		14%
	- ROTL - day or overnight release?	n=53	21%		21%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>					
	- Offending behaviour programmes?	n=31	84%		84%
	- Other programmes?	n=33	70%		70%
	- One to one work?	n=26	77%		77%
	- Being on a specialist unit?	n=7	57%		57%
	- ROTL - day or overnight release?	n=11	73%		73%

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PREPARATION FOR RELEASE						
18.1	Do you expect to be released in the next 3 months?	n=159	28%		28%	31%
<i>For those who expect to be released in the next 3 months:</i>						
18.2	Is this prison very / quite near to your home area or intended release address?	n=43	58%		58%	61%
18.3	Is anybody helping you to prepare for your release?	n=44	55%		55%	45%
18.4	Do you need help to sort out the following for when you are released:					
	- Finding accommodation?	n=42	67%		67%	64%
	- Getting employment?	n=39	62%		62%	60%
	- Setting up education or training?	n=39	46%		46%	48%
	- Arranging benefits?	n=42	64%		64%	66%
	- Sorting out finances?	n=38	50%		50%	56%
	- Support for drug or alcohol problems?	n=41	37%		37%	51%
	- Health / mental Health support?	n=39	46%		46%	58%
	- Social care support?	n=36	33%		33%	41%
	- Getting back in touch with family or friends?	n=39	33%		33%	41%
18.4	Are you getting help to sort out the following for when you are released, if you need it:					
	- Finding accommodation?	n=28	50%		50%	30%
	- Getting employment?	n=24	33%		33%	20%
	- Setting up education or training?	n=18	22%		22%	16%
	- Arranging benefits?	n=27	26%		26%	24%
	- Sorting out finances?	n=19	26%		26%	17%
	- Support for drug or alcohol problems?	n=15	47%		47%	42%
	- Health / mental Health support?	n=18	28%		28%	23%
	- Social care support?	n=12	33%		33%	18%
	- Getting back in touch with family or friends?	n=13	39%		39%	26%
FINAL QUESTION ABOUT THIS PRISON						
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	n=156	52%		52%	48%

HMP Peterborough 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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Black and minority ethnic	White	Muslim	Non-Muslim
51	115	30	129

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	6%	5%	3%	5%
	Are you 50 years of age or older?	2%	8%	0%	7%
1.3	Are you from a minority ethnic group?			87%	15%
7.1	Are you Muslim?	58%	4%		
11.3	Do you have any mental health problems?	30%	45%	39%	42%
12.1	Do you consider yourself to have a disability?	25%	38%	28%	36%
19.2	Are you a foreign national?	11%	9%	10%	10%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	4%	8%	3%	7%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	88%	87%	83%	88%
2.4	Overall, were you treated very / quite well in reception?	88%	83%	83%	84%
2.5	When you first arrived, did you have any problems?	79%	75%	83%	75%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	43%	33%	44%	31%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	72%	62%	66%	64%
3.5	Have you had an induction at this prison?	96%	94%	97%	94%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	70%	74%	75%	72%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	42%	38%	41%	39%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	79%	69%	76%	71%
	- Can you shower every day?	100%	97%	97%	98%
	- Do you have clean sheets every week?	90%	90%	86%	91%
	- Do you get cell cleaning materials every week?	58%	66%	70%	63%
	- Is it normally quiet enough for you to relax or sleep at night?	77%	67%	83%	67%
	- Can you get your stored property if you need it?	41%	36%	50%	36%

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	51	115	30	129

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	20%	37%	28%	33%
5.3	Does the shop / canteen sell the things that you need?	18%	34%	17%	31%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	71%	76%	72%	76%
6.2	Are there any staff here you could turn to if you had a problem?	68%	68%	60%	69%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	32%	33%	31%	33%
6.6	Do you feel that you are treated as an individual in this prison?	36%	51%	48%	46%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	79%	62%	82%	65%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	81%	62%	80%	66%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	25%	38%	27%	37%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	54%	46%	57%	49%
8.3	Are you able to use a phone every day (if you have credit)?	92%	94%	83%	95%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	67%	73%	64%	74%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	8%	15%	7%	14%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	6%	6%	11%	5%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	5%	43%	17%	37%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	69%	67%	64%	68%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	53%	60%	70%	55%
10.3	Is it easy for you to make a complaint?	67%	60%	63%	61%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	12%	35%	16%	33%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	25%	32%	27%	30%

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	51	115	30	129

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	30%	45%	27%	42%
	- Nurse?	54%	63%	55%	61%
	- Dentist?	10%	18%	7%	16%
	- Mental health workers?	15%	21%	12%	20%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	33%	38%	42%	31%
11.5	Do you think the overall quality of the health services here is very / quite good?	21%	45%	17%	42%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	9%	33%	13%	32%
SAFETY					
14.1	Have you ever felt unsafe here?	48%	56%	62%	53%
14.2	Do you feel unsafe now?	13%	22%	26%	19%
14.3	Not experienced bullying / victimisation by other prisoners	52%	48%	46%	48%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	36%	30%	26%	32%
14.5	Not experienced bullying / victimisation by members of staff	47%	62%	43%	63%
14.6	If you were being bullied / victimised by staff here, would you report it?	42%	40%	37%	39%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	36%	42%	39%	40%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	33%	46%	38%	43%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	10%	16%	20%	15%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	9%	13%	14%	11%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	35%	55%	41%	50%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	38%	39%	45%	36%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	35%	63%	39%	62%
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%	56%	86%	49%
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?	47%	54%	52%	50%

HMP Peterborough 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:
 - responses of foreign national prisoners are compared with those of British national prisoners
 Please note that these analyses are based on summary data from selected survey questions only.

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

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

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

	Foreign national	British national
Number of completed questionnaires returned	16	143

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION		
1.2	Are you under 21 years of age?	0%
	Are you 50 years of age or older?	6%
1.3	Are you from a minority ethnic group?	33%
7.1	Are you Muslim?	29%
11.3	Do you have any mental health problems?	20%
12.1	Do you consider yourself to have a disability?	27%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	44%
31%		36%
6%		6%
ARRIVAL AND RECEPTION		
2.3	When you were searched in reception, was this done in a respectful way?	88%
2.4	Overall, were you treated very / quite well in reception?	87%
2.5	When you first arrived, did you have any problems?	75%
	<i>For those who had any problems when they first arrived:</i>	84%
2.6	Did staff help you to deal with these problems?	81%
42%		76%
FIRST NIGHT AND INDUCTION		
3.3	Did you feel safe on your first night here?	50%
3.5	Have you had an induction at this prison?	67%
	<i>For those who have had an induction:</i>	93%
3.5	Did your induction cover everything you needed to know about this prison?	94%
71%		72%
ON THE WING		
4.2	Is your cell call bell normally answered within 5 minutes?	33%
4.3	On the wing or houseblock you currently live on:	39%
	- Do you normally have enough clean, suitable clothes for the week?	75%
	- Can you shower every day?	73%
	- Do you have clean sheets every week?	100%
	- Do you get cell cleaning materials every week?	98%
	- Is it normally quiet enough for you to relax or sleep at night?	81%
	- Can you get your stored property if you need it?	91%
		69%
		65%
		50%
		71%
		44%
		38%

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

	Foreign national	British national
Number of completed questionnaires returned	16	143

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	44%	33%
5.3	Does the shop / canteen sell the things that you need?	6%	32%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	56%	76%
6.2	Are there any staff here you could turn to if you had a problem?	56%	70%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	40%	32%
6.6	Do you feel that you are treated as an individual in this prison?	36%	48%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	64%	67%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	50%	73%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	33%	34%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	40%	51%
8.3	Are you able to use a phone every day (if you have credit)?	94%	94%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	90%	69%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	14%	15%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	0%	7%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	20%	33%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	50%	71%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	46%	60%
10.3	Is it easy for you to make a complaint?	60%	65%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	29%	30%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	20%	29%

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

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

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

	Foreign national	British national
Number of completed questionnaires returned	16	143

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	25%	41%
	- Nurse?	33%	63%
	- Dentist?	14%	14%
	- Mental health workers?	14%	19%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	80%	34%
11.5	Do you think the overall quality of the health services here is very / quite good?	27%	39%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	67%	25%
SAFETY			
14.1	Have you ever felt unsafe here?	56%	55%
14.2	Do you feel unsafe now?	19%	21%
14.3	Not experienced bullying / victimisation by other prisoners	47%	48%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	33%	29%
14.5	Not experienced bullying / victimisation by members of staff	79%	57%
14.6	If you were being bullied / victimised by staff here, would you report it?	53%	38%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	50%	39%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	38%	44%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	19%	15%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	0%	13%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	43%	51%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	21%	40%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	100%	51%
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?	17%	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?	57%	52%

HMP Peterborough 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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

	Green shading shows results that are significantly more positive than the comparator
	Blue shading shows results that are significantly more negative than the comparator
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	Grey shading indicates that we have no valid data for this question

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

Number of completed questionnaires returned

Mental health problems	No mental health problems	Have a disability	Do not have a disability
67	96	56	108

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	2%	8%	4%	7%
	Are you 50 years of age or older?	3%	8%	5%	7%
1.3	Are you from a minority ethnic group?	22%	35%	22%	35%
7.1	Are you Muslim?	17%	19%	15%	21%
11.3	Do you have any mental health problems?			69%	26%
12.1	Do you consider yourself to have a disability?	57%	18%		
19.2	Are you a foreign national?	6%	12%	9%	11%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	6%	8%	7%	8%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	83%	90%	86%	88%
2.4	Overall, were you treated very / quite well in reception?	80%	85%	84%	83%
2.5	When you first arrived, did you have any problems?	88%	68%	87%	71%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	33%	37%	29%	37%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	56%	71%	51%	70%
3.5	Have you had an induction at this prison?	95%	94%	93%	95%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	61%	79%	63%	75%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	39%	40%	36%	41%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	64%	79%	59%	81%
	- Can you shower every day?	97%	99%	98%	98%
	- Do you have clean sheets every week?	89%	91%	89%	92%
	- Do you get cell cleaning materials every week?	56%	68%	63%	64%
	- Is it normally quiet enough for you to relax or sleep at night?	67%	69%	58%	74%
	- Can you get your stored property if you need it?	30%	44%	40%	38%

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	No shading means that differences are not significant and may have occurred by chance
	Grey shading indicates that we have no valid data for this question

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

Number of completed questionnaires returned

Mental health problems	No mental health problems
67	96

Have a disability	Do not have a disability
56	108

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	30%	32%
5.3	Does the shop / canteen sell the things that you need?	39%	20%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	77%	72%
6.2	Are there any staff here you could turn to if you had a problem?	67%	70%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	32%	33%
6.6	Do you feel that you are treated as an individual in this prison?	41%	51%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	64%	68%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	63%	73%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	31%	36%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	50%	50%
8.3	Are you able to use a phone every day (if you have credit)?	88%	96%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	69%	71%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	14%	11%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	7%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	30%	33%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	59%	73%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	58%	54%
10.3	Is it easy for you to make a complaint?	60%	62%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	25%	32%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	29%	30%

32%	30%
35%	24%
71%	75%
68%	68%
31%	33%
50%	44%
62%	69%
67%	70%
31%	36%
55%	47%
93%	94%
69%	73%
23%	9%
4%	7%
38%	28%
64%	68%
52%	59%
59%	63%
26%	29%
33%	29%

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

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

Number of completed questionnaires returned

Mental health problems	No mental health problems
67	96

Have a disability	Do not have a disability
56	108

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	39%	42%
	- Nurse?	61%	60%
	- Dentist?	17%	14%
	- Mental health workers?	21%	17%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	35%	
11.5	Do you think the overall quality of the health services here is very / quite good?	32%	42%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	19%	50%
SAFETY			
14.1	Have you ever felt unsafe here?	72%	42%
14.2	Do you feel unsafe now?	31%	14%
14.3	Not experienced bullying / victimisation by other prisoners	28%	62%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	26%	36%
14.5	Not experienced bullying / victimisation by members of staff	41%	69%
14.6	If you were being bullied / victimised by staff here, would you report it?	33%	44%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	36%	43%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	39%	45%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	25%	10%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	21%	5%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	37%	57%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	48%	31%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	46%	65%
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?	65%	46%
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%	54%

41%	40%
58%	60%
13%	16%
19%	19%
29%	48%
35%	38%
27%	
71%	46%
27%	17%
33%	57%
37%	29%
46%	66%
40%	41%
38%	41%
36%	46%
16%	14%
13%	11%
36%	55%
43%	36%
50%	56%
63%	52%
52%	53%

HMP Peterborough 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:

	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
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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
35	134

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	26%	
	Are you 50 years of age or older?		8%
1.3	Are you from a minority ethnic group?	46%	27%
7.1	Are you Muslim?	24%	18%
11.3	Do you have any mental health problems?	31%	43%
12.1	Do you consider yourself to have a disability?	21%	38%
19.2	Are you a foreign national?	0%	13%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	9%	7%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	79%	88%
2.4	Overall, were you treated very / quite well in reception?	82%	83%
2.5	When you first arrived, did you have any problems?	69%	79%
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	33%	34%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	74%	62%
3.5	Have you had an induction at this prison?	100%	93%
<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	79%	69%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	29%	41%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	89%	68%
	- Can you shower every day?	97%	99%
	- Do you have clean sheets every week?	86%	92%
	- Do you get cell cleaning materials every week?	74%	60%
	- Is it normally quiet enough for you to relax or sleep at night?	74%	68%
	- Can you get your stored property if you need it?	29%	41%

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

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

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

Number of completed questionnaires returned

	25 and under	Over 25
	35	134

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	21%	34%
5.3	Does the shop / canteen sell the things that you need?	18%	31%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	65%	76%
6.2	Are there any staff here you could turn to if you had a problem?	63%	67%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	26%	34%
6.6	Do you feel that you are treated as an individual in this prison?	42%	47%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	70%	67%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	80%	66%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	27%	35%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	56%	47%
8.3	Are you able to use a phone every day (if you have credit)?	94%	92%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	72%	70%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	6%	16%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	9%	5%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	33%	32%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	65%	67%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	52%	58%
10.3	Is it easy for you to make a complaint?	59%	62%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	29%	29%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	45%	27%

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

	25 and under	Over 25
Number of completed questionnaires returned	35	134

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	27%	42%
	- Nurse?	42%	63%
	- Dentist?	13%	16%
	- Mental health workers?	19%	19%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	27%	35%
11.5	Do you think the overall quality of the health services here is very / quite good?	29%	39%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	14%	29%
SAFETY			
14.1	Have you ever felt unsafe here?	32%	61%
14.2	Do you feel unsafe now?	12%	23%
14.3	Not experienced bullying / victimisation by other prisoners	79%	39%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	39%	29%
14.5	Not experienced bullying / victimisation by members of staff	51%	60%
14.6	If you were being bullied / victimised by staff here, would you report it?	36%	40%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	27%	43%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	29%	46%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	29%	12%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	18%	10%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	42%	50%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	41%	37%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	54%	51%
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%	50%
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?	40%	56%

HMP Peterborough 2018

Comparison of survey responses from different residential locations

In this table responses from houseblock five are compared with those from the rest of the establishment.

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

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

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

Number of completed questionnaires returned

Houseblock five	Houseblock three and four
65	102

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	9%
	Are you 25 years of age or younger?	14%	24%
	Are you 50 years of age or older?	5%	6%
	Are you 70 years of age or older?	0%	0%
1.3	Are you from a minority ethnic group?	30%	33%
1.4	Have you been in this prison for less than 6 months?	44%	53%
1.5	Are you currently serving a sentence?	86%	74%
	Are you on recall?	8%	10%
1.6	Is your sentence less than 12 months?	14%	17%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	2%	2%
7.1	Are you Muslim?	25%	16%
11.3	Do you have any mental health problems?	39%	40%
12.1	Do you consider yourself to have a disability?	39%	31%
19.1	Do you have any children under the age of 18?	58%	52%
19.2	Are you a foreign national?	7%	13%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	7%	9%
19.4	Have you ever been in the armed services?	13%	4%
19.5	Is your gender female or non-binary?	3%	1%
19.6	Are you homosexual, bisexual or other sexual orientation?	10%	3%
19.7	Do you identify as transgender or transsexual?	5%	4%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	22%	27%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	45%	44%
2.3	When you were searched in reception, was this done in a respectful way?	88%	86%
2.4	Overall, were you treated very / quite well in reception?	84%	82%

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2.5	When you first arrived, did you have any problems?	80%	75%
2.5	Did you have problems with:		
	- Getting phone numbers?	28%	30%
	- Contacting family?	23%	32%
	- Arranging care for children or other dependents?	3%	3%
	- Contacting employers?	3%	6%
	- Money worries?	20%	22%
	- Housing worries?	13%	22%
	- Feeling depressed?	38%	40%
	- Feeling suicidal?	16%	12%
	- Other mental health problems?	20%	24%
	- Physical health problems?	14%	16%
	- Drugs or alcohol (e.g. withdrawal)?	14%	22%
	- Getting medication?	27%	28%
	- Needing protection from other prisoners?	22%	7%
	- Lost or delayed property?	17%	16%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	40%	31%
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	61%	77%
	- Toiletries / other basic items?	69%	69%
	- A shower?	39%	38%
	- A free phone call?	77%	79%
	- Something to eat?	86%	84%
	- The chance to see someone from health care?	69%	70%
	- The chance to talk to a Listener or Samaritans?	36%	32%
	- Support from another prisoner (e.g. Insider or buddy)?	28%	25%
	- None of these?	0%	1%
3.2	On your first night in this prison, was your cell very / quite clean?	29%	32%
3.3	Did you feel safe on your first night here?	59%	68%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	53%	53%
	- Free PIN phone credit?	52%	59%
	- Numbers put on your PIN phone?	57%	57%
3.5	Have you had an induction at this prison?	92%	97%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	72%	71%

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ON THE WING			
4.1	Are you in a cell on your own?	42%	68%
4.2	Is your cell call bell normally answered within 5 minutes?	36%	40%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	73%	71%
	- Can you shower every day?	97%	99%
	- Do you have clean sheets every week?	90%	89%
	- Do you get cell cleaning materials every week?	65%	60%
	- Is it normally quiet enough for you to relax or sleep at night?	69%	70%
	- Can you get your stored property if you need it?	44%	34%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	64%	56%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	38%	41%
5.2	Do you get enough to eat at meal-times always / most of the time?	34%	28%
5.3	Does the shop / canteen sell the things that you need?	30%	27%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	64%	80%
6.2	Are there any staff here you could turn to if you had a problem?	67%	66%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	17%	41%
6.4	Do you have a personal officer?	58%	61%
<i>For those who have a personal officer:</i>			
6.4	Is your personal or named officer very / quite helpful?	53%	54%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	8%	6%
6.6	Do you feel that you are treated as an individual in this prison?	47%	46%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	57%	39%
	If so, do things sometimes change?	39%	28%
FAITH			
7.1	Do you have a religion?	64%	68%
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	68%	70%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	83%	59%
7.4	Are you able to attend religious services, if you want to?	93%	86%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	28%	37%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	48%	51%
8.3	Are you able to use a phone every day (if you have credit)?	94%	92%
8.4	Is it very / quite easy for your family and friends to get here?	52%	51%
8.5	Do you get visits from family/friends once a week or more?	31%	34%
<i>For those who get visits:</i>			
8.6	Do visits usually start and finish on time?	35%	59%
8.7	Are your visitors usually treated respectfully by staff?	62%	76%

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TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	95%	92%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
9.1	Are these times usually kept to?	61%	56%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	13%	15%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	5%	6%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	10%	8%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	0%	2%
9.4	Do you have time to do domestics more than 5 days in a typical week?	75%	58%
9.5	Do you get association more than 5 days in a typical week, if you want it?	76%	71%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	40%	50%
9.7	Do you typically go to the gym twice a week or more?	42%	58%
9.8	Do you typically go to the library twice a week or more?	5%	6%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	26%	37%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	70%	64%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	56%	56%
	Are applications usually dealt with within 7 days?	57%	52%
10.3	Is it easy for you to make a complaint?	65%	61%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	26%	29%
	Are complaints usually dealt with within 7 days?	40%	24%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	30%	30%

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<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	57%	46%
	Attend legal visits?	55%	63%
	Get bail information?	25%	20%
<i>For those who have had legal letters:</i>			
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	51%	43%
HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	37%	41%
	- Nurse?	61%	58%
	- Dentist?	18%	13%
	- Mental health workers?	22%	15%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	30%	45%
	- Nurse?	46%	55%
	- Dentist?	28%	25%
	- Mental health workers?	30%	14%
11.3	Do you have any mental health problems?	39%	40%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	54%	23%
11.5	Do you think the overall quality of the health services here is very / quite good?	32%	41%
OTHER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	39%	31%
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	35%	22%
12.3	Have you been on an ACCT in this prison?	23%	15%
<i>For those who have been on an ACCT:</i>			
12.4	Did you feel cared for by staff?	29%	53%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	38%	24%
ALCOHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	15%	23%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	44%	30%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	25%	41%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	15%	23%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	10%	13%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	59%	33%
13.7	Is it very / quite easy to get illicit drugs in this prison?	67%	43%
13.8	Is it very / quite easy to get alcohol in this prison?	44%	27%

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SAFETY			
14.1	Have you ever felt unsafe here?	67%	45%
14.2	Do you feel unsafe now?	28%	15%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	43%	30%
	- Threats or intimidation?	48%	28%
	- Physical assault?	31%	23%
	- Sexual assault?	3%	2%
	- Theft of canteen or property?	35%	31%
	- Other bullying / victimisation?	33%	17%
	- Not experienced any of these from prisoners here	40%	54%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	29%	32%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	37%	25%
	- Threats or intimidation?	29%	22%
	- Physical assault?	15%	11%
	- Sexual assault?	3%	2%
	- Theft of canteen or property?	9%	12%
	- Other bullying / victimisation?	20%	15%
	- Not experienced any of these from staff here	48%	64%
14.6	If you were being bullied / victimised by staff here, would you report it?	35%	42%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	45%	37%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	42%	41%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	11%	17%
	<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?	17%	40%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	13%	7%
	<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?	75%	71%
	Could you shower every day?	71%	83%
	Could you go outside for exercise every day?	71%	83%
	Could you use the phone every day (if you had credit)?	71%	83%

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EDUCATION, SKILLS AND WORK		
16.1	In this prison, is it easy to get into the following activities:	
	- Education?	60% 66%
	- Vocational or skills training?	35% 38%
	- Prison job?	46% 39%
	- Voluntary work outside of the prison?	7% 7%
	- Paid work outside of the prison?	4% 3%
16.2	In this prison, have you done the following activities:	
	- Education?	75% 75%
	- Vocational or skills training?	62% 63%
	- Prison job?	74% 72%
	- Voluntary work outside of the prison?	32% 36%
	- Paid work outside of the prison?	34% 37%
<i>For those who have done the following activities, do you think they will help you on release:</i>		
	- Education?	61% 73%
	- Vocational or skills training?	62% 71%
	- Prison job?	45% 49%
	- Voluntary work outside of the prison?	59% 66%
	- Paid work outside of the prison?	58% 63%
16.3	Do staff encourage you to attend education, training or work?	50% 47%
PLANNING AND PROGRESSION		
17.1	Do you have a custody plan?	36% 39%
<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?	96% 77%
17.3	Are staff helping you to achieve your objectives or targets?	65% 47%
17.4	In this prison, have you done:	
	- Offending behaviour programmes?	63% 53%
	- Other programmes?	63% 58%
	- One to one work?	58% 41%
	- Been on a specialist unit?	6% 16%
	- ROTL - day or overnight release?	17% 22%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>		
	- Offending behaviour programmes?	100% 71%
	- Other programmes?	92% 58%
	- One to one work?	91% 62%
	- Being on a specialist unit?	100% 40%
	- ROTL - day or overnight release?	100% 57%

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PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	22%	32%
<i>For those who expect to be released in the next 3 months:</i>			
18.2	Is this prison very / quite near to your home area or intended release address?	69%	55%
18.3	Is anybody helping you to prepare for your release?	69%	47%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	62%	68%
	- Getting employment?	67%	58%
	- Setting up education or training?	42%	46%
	- Arranging benefits?	62%	64%
	- Sorting out finances?	50%	48%
	- Support for drug or alcohol problems?	46%	30%
	- Health / mental Health support?	58%	39%
	- Social care support?	42%	26%
	- Getting back in touch with family or friends?	39%	28%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	75%	37%
	- Getting employment?	63%	13%
	- Setting up education or training?	60%	0%
	- Arranging benefits?	50%	11%
	- Sorting out finances?	33%	17%
	- Support for drug or alcohol problems?	50%	38%
	- Health / mental Health support?	43%	10%
	- Social care support?	60%	0%
	- Getting back in touch with family or friends?	80%	0%
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?	48%	55%