

Report on an unannounced inspection of

HMP Lancaster Farms

by HM Chief Inspector of Prisons

29 October, 5–8 November 2018

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Contents

Introduction	5
Fact page	7
About this inspection and report	9
Summary	11
Section 1. Safety	19
Section 2. Respect	27
Section 3. Purposeful activity	39
Section 4. Rehabilitation and release planning	45
Section 5. Summary of recommendations and good practice	51
Section 6. Appendices	57
Appendix I: Inspection team	57
Appendix II: Progress on recommendations from the last report	59
Appendix III: Photographs	67
Appendix IV: Prison population profile	71
Appendix V: Prisoner survey methodology and results	75

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 Lancaster Farms is a category C resettlement prison serving the North West of England. Opened in 1993, the prison has an operational capacity of 560 and now holds adult male prisoners in a prison campus that contains six main accommodation units. The majority of those held were aged between 21 and 40, with most serving sentences of between two and 10 years. A smaller number of shorter-term prisoners and those serving life were also in residence. Most prisoners had arrived at the prison over the preceding 12 months.

We last inspected Lancaster Farms in 2015 when we found a prison that was reasonably safe and respectful but with more to do to improve outcomes in learning and skills as well as resettlement. At this inspection the evidence pointed clearly to some improvement, but overall our healthy prison assessments remained the same. It was disappointing that only a third of our previous recommendations had been achieved.

The prison continued to be a reasonably safe place. Arrangements to receive new prisoners into the establishment were generally effective and we found a prison that was calm and ordered. Levels of violence broadly reflected those seen in similar prisons but most incidents, with some exceptions, were relatively less serious. There was some evidence of prisoners intimidating other prisoners and there were several individuals who sought sanctuary either through self-isolation or in segregation. Support for these prisoners was better than before but remained insufficient. New CSIP (Challenge, Support and Intervention Plan)¹ case management and multi-disciplinary initiatives to promote improved outcomes for victims and perpetrators were encouraging but embryonic. The use of force had increased noticeably but was poorly documented, which meant there was inadequate assurance that it was used proportionately and legitimately. Segregation was usually full, although staff were supportive and living conditions reasonable. Reintegration planning for those segregated was too limited.

Security was managed competently and proportionately. There was a good flow of intelligence, although some was not prioritised or acted upon with sufficient rigour. There was considerable evidence of a drug problem within the prison, notwithstanding a series of initiatives to combat the problem. Many prisoners thought it was easy to get hold of illicit substances and testing suggested a high but reducing positive rate.

Care for those at risk of self-harm was reasonably good, but too many lived an isolated experience and levels of self-harm were now much higher than the previous inspection. Case management was, however, reasonable and efforts to include families, if possible, were a good thing. Prisoners in crisis told us they felt well supported by staff. The prison had met all previous recommendations made by the Prison and Probation Ombudsman (PPO).

Staff-prisoner relationships in general were very good, with 84% of prisoners telling us they felt respected by staff. The lived environment was bright and spacious and outside areas were clean and well maintained. Cellular accommodation was reasonable, as was the food, and there were reasonable attempts at formal consultation with prisoners. Attempts to improve the way prisoners made applications were not yet, however, working effectively and the complaints process was undermined by delays. Work to improve the promotion of equality had started recently but it was too early to be sure whether this initiative would lead to substantive and sustained improvement. Outcomes for differing groups with protected characteristics remained mixed. The provision of health care, like many other areas, was improving and was satisfactory overall, despite often long

¹ Challenge, Support and Intervention Plan (CSIP) is a system used by some prisons to manage the most violent prisoners and support the most vulnerable prisoners in the system. Prisoners who are identified as the perpetrator of serious or repeated violence, or who are vulnerable due to being the victim of violence or bullying behaviour, are managed and supported on a plan with individualised targets and regular reviews.

waits for access. Drug services, aided by a new well-being unit for those recovering from drug abuse, were very good.

Time out of cell was reasonable, as was access to the gym and library. There was good support for family ties and visits, thanks in considerable measure to the work of the Prison Advice and Care Trust (PACT) and Partners of Prisoners (PoPs), and there was sufficient activity for all prisoners following recent increases to the number of places available. Despite this, many of the weaknesses identified at the previous inspection had still to be addressed. Too few prisoners attended education or work regularly or on time and cover for staff absences was insufficient, leading to the frequent cancellation of activities. Allocation to learning activity too often did not recognise a learner's abilities or experience, and learning targets were of limited use. Basic skills were not well supported in vocational training and shortcomings in teaching, learning and assessment all combined to limit learner progress. For those prisoners able to complete a course, however, the achievement of qualifications was high on most courses. Overall our partners in Ofsted judged the effectiveness of provision as 'requires improvement'.

There was some improved collaborative work between departments to support rehabilitation and resettlement, but many weaknesses persisted. Many prisoners did not have an up-to-date offender assessment system (OASys) assessment or arrived at Lancaster Farms without one. Contact with offender supervisors was too limited or reactive, and the shortage of probation staff was a concern regarding higher-risk cases and the overall quality of risk management. Some of the case work we inspected was poor. Public protection work had improved but remained insufficiently robust, particularly concerning support for multi-agency public protection arrangements (MAPPA). Offending behaviour work was narrow but resettlement assessments and work with those about to be released were much better.

The evidence of this inspection confirmed to us that Lancaster Farms remained a competent prison enabled by a capable management team and a generally confident staff. There was a definite sense that if you were a motivated prisoner with a determination to improve your own life chances, there were opportunities and resources that were available for you in the prison. In contrast, if you were less motivated, you could easily opt out with too little challenge from the institution. This was a missed opportunity. Lancaster Farms was a decent enough place in comparison to many similar prisons, but it can do more and do it better.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

January 2019

Fact page

Task of the establishment

A category C adult male resettlement prison.

Certified normal accommodation and operational capacity²

Prisoners held at the time of inspection: 545

Baseline certified normal capacity: 495

In-use certified normal capacity: 495

Operational capacity: 560

Notable features from this inspection

89 new prisoners were received every month and 289 had been released into the community in the previous six months.

185 incidents involved force in the previous six months.

196 prisoners were receiving support for substance use.

Living conditions were generally good and 68% of prisoners in our survey said the food was good.

300 prisoners were referred for a mental health assessment each month.

About a third of prisoners were locked up during the working day.

Nearly 200 prisoners did not have an up-to-date offender assessment system report.

Prison status (public or private) and key providers

Public

Physical health provider: Spectrum Community Health CIC

Mental health provider: Tees, Esk and Wear Valleys NHS Foundation Trust

Substance use provider: Spectrum Community Health CIC

Learning and skills provider: Novus

Community rehabilitation company: Cumbria and Lancashire CRC

Escort contractor: GEOAmey

Prison group

Cumbria and Lancashire

Brief history

The prison opened in 1993 as a remand centre and young offender institution (YOI). In 2008–2009, it became the sole dedicated YOI for the north west. In 2011, the establishment changed its role from

² Baseline CNA is the sum total of all certified accommodation in an establishment except cells in segregation units, health care cells or rooms that are not routinely used to accommodate long stay patients. In-use CNA is baseline CNA less those places not available for immediate use, such as damaged cells, cells affected by building works, and cells taken out of use due to staff shortages. Operational capacity is the total number of prisoners that an establishment can hold without serious risk to good order, security and the proper running of the planned regime.

a category B YOI to a category C YOI training prison. In 2014, the prison became a category C resettlement prison for adults.

Short description of residential units

The prison has four main residential units, each split into two wings. Each wing has two landings, which mainly consist of single cells and a small number of doubles on the ground floor.

Grizedale – First night centre

Coniston 1 – Well-being unit

Coniston 2 – General population

Derwent – General population

Windermere – General population

Buttermere – General population

Ullswater – Segregation unit

Name of governor and date in post

Derek Harrison, March 2013

Independent Monitoring Board chairs

David Skinns and David Forrest

Date of last inspection

20 April–1 May 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)*.³ 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.⁴

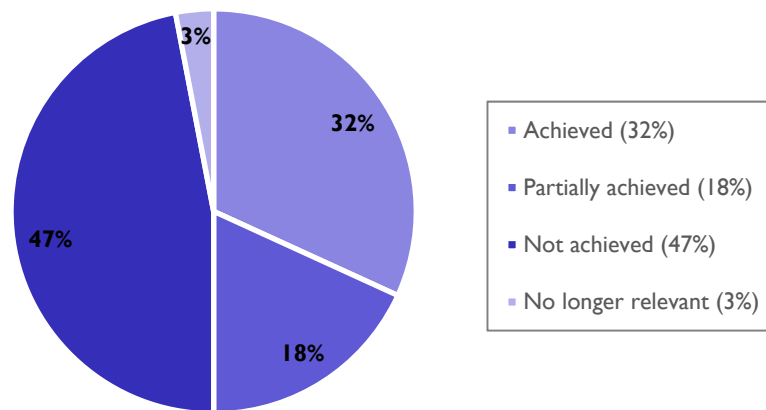
³ <https://www.justiceinspectorates.gov.uk/hmiprison/our-expectations/prison-expectations/>

⁴ 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

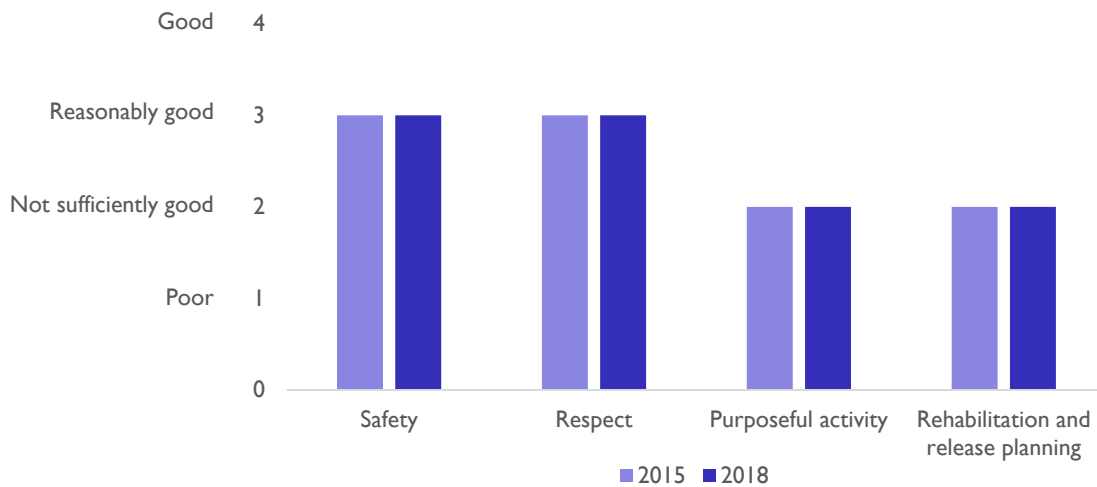
- S1 We last inspected HMP Lancaster Farms in 2015 and made 66 recommendations. The prison fully accepted 49 of the recommendations and partially (or subject to resources) accepted 12. It rejected five of the recommendations.
- S2 At this follow up inspection we found that the prison had achieved 21 of those recommendations, partially achieved 12 recommendations and not achieved 31 recommendations. Two recommendations were no longer relevant.

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



- S3 Since our last inspection outcomes for prisoners stayed the same in all healthy prison areas. Outcomes were reasonably good in Safety and Respect and were not sufficiently good in Purposeful activity and Rehabilitation and release planning.

Figure 2: HMP Lancaster Farms healthy prison outcomes 2015 and 2018⁵



⁵ 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** *Procedures during prisoners' arrival and early days were good. The prison was reasonably calm and most prisoners felt safe. A sizeable number of prisoners isolated themselves and violence reduction work was still developing. Use of force had increased and governance was weak. The segregation unit provided a reasonable environment and relationships with staff were good, but some prisoners spent too long in the unit. Security was generally proportionate, but there were some procedural weaknesses. The supply of drugs had been reduced, but remained too high. Care for those at risk of self-harm was generally good. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S5** *At the last inspection in 2015 we found that outcomes for prisoners in Lancaster Farms were reasonably good against this healthy prison test. We made 16 recommendations in the area of safety.⁶ At this inspection we found that six of the recommendations had been achieved, two had been partially achieved, seven had not been achieved and one was no longer relevant.*
- S6** Journeys to the prison were short and in our survey 95% of prisoners said they were treated respectfully in reception. Reception staff were welcoming and all new arrivals now had a comprehensive confidential interview. First night arrangements were good and the new custody care record was a positive initiative. The introduction of a dedicated first night centre was welcome. However, prisoners could spend several days there with very little time out of their cell and no exercise. The prisoner-led induction was informative but lacked staff oversight.
- S7** The prison was reasonably calm and in our survey and group meetings most prisoners said they felt safe. Levels of violence were similar to other category C prisons. A new casework approach introduced to reduce levels of violence was not fully embedded. Managers had improved support for prisoners who were isolating themselves, but the issues that caused them to do so were not sufficiently addressed. Safer intervention meetings were a useful way of supporting perpetrators and prisoners with vulnerabilities, although action was often not implemented. The incentives and earned privileges (IEP) scheme was not used to promote positive behaviour.
- S8** Adjudication hearings were usually conducted well. Use of force had increased since the previous inspection and was high. Managers had improved governance in some areas, but records were often not completed on time and a large number not at all. Few incidents were video-recorded and the footage available did not assure us that force was always justified or that de-escalation was used effectively. Governance of special accommodation was especially poor and paperwork did not demonstrate that its use was justified.
- S9** Living conditions in the segregation unit were reasonably good, but toilets in many cells were dirty and the exercise yards were stark. The unit was consistently full and the regime, particularly for longer stay prisoners, was limited. Relationships between staff and prisoners were reasonably good. Planning for prisoners' return to the normal prison location or for dealing with the issues that had led to their segregation was underdeveloped.
- S10** Security was managed reasonably well and a weekly intelligence meeting identified concerns. Physical and procedural security were generally proportionate, although there were some weaknesses. An average of 527 intelligence reports was submitted and analysed promptly. However, action arising from a minority of intelligence reports was not implemented

⁶ This included recommendations about substance use treatment, which in our updated Expectations (Version 5, 2017) now appear under the healthy prison area of respect.

promptly and there was no triage process to ensure that the most urgent concerns were addressed first. Managers had taken a range of measures to reduce the supply of drugs, such as additional fencing and netting in exercise yards. However, few suspicion drug tests had been requested or carried out and only 57% of target searches had been undertaken in the previous six months. Nearly two-thirds of prisoners responding to our survey said it was easy to get illegal drugs. The positive mandatory drug testing rate was still too high at nearly 35%, including new psychoactive substances⁷, but it had decreased substantially since the previous year. Some notable outcomes had been achieved as a result of local corruption prevention measures.

- S11 Levels of self-harm were higher than at the previous inspection. Care for men at risk of self-harm was reasonably good and prisoners with low-level needs were managed well. However, those isolating themselves who were subject to assessment, care in custody and teamwork (ACCT) case management for prisoners at risk of suicide or self-harm, spent 23 hours a day in their cells and had insufficient support. ACCT documentation was reasonable and prisoners told us staff supported them. Reviews were multidisciplinary and families were included in the ACCT process where possible. Logs to show why prisoners on ACCTs were held in the segregation unit provided insufficient information or justification. Prisoners did not have enough night-time access to Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) and the single Samaritans phone was not sufficient. There was a comprehensive safeguarding policy and staff knew whom to contact for assistance if they had any safeguarding issues.

Respect

S12 *Staff-prisoner relationships were good and were being further enhanced by the keyworker scheme. Living conditions were generally good. Food was above average. Consultation was reasonable. There were ongoing weaknesses in the applications procedure. Responses to complaints were good but most were late. Equality and diversity work was improving but underdeveloped. Faith provision was very good. Health services were reasonably good, but there were some shortfalls and waiting lists were too long. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S13 *At the last inspection in 2015 we found that outcomes for prisoners in Lancaster Farms were reasonably good against this healthy prison test. We made 26 recommendations in the area of respect. At this inspection we found that eight of the recommendations had been achieved, three had been partially achieved and 15 had not been achieved.*

S14 In our survey, 84% of prisoners said that most staff treated them with respect, more than in similar recently inspected prisons (69%). Staff were respectful and helpful when approached, but they did not always interact with prisoners proactively. The keyworker⁸ scheme had improved support for prisoners. Early signs were encouraging, but too many prisoners did not see keyworkers regularly.

S15 The wings were open, light and spacious and had large association areas and dining tables. Outside and communal areas were clean and well-maintained. Cells were generally clean and in good repair, although the flooring in a number of areas was damaged. Most cells were

⁷ 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.

⁸ Under the new offender management model, prison officer 'key workers' are given dedicated time each week to meet with prisoners in order to support and challenge them to work towards rehabilitation and resettlement.

adequately furnished. Toilets now had seats, although toilet screening remained poor. Access to showers was good, but they were insufficiently screened. There were ongoing problems with the distribution of cleaning material and equipment.

- S16 The food we sampled was nutritious and varied. In our survey, 68% of prisoners said the food was good or very good, much higher than in comparable recently inspected prisons. However, serveries were not always properly supervised and food sometimes ran out. Canteen arrangements were reasonable and a new shop initiative meant prisoners could receive essential items promptly after their arrival, reducing the potential for debt.
- S17 Prisoner representatives' attendance at the monthly consultation meetings was usually good. The meetings, chaired by the head of residence, led to some changes, but a few concerns arose at successive meetings without resolution. In our survey, only 39% said they received a response to applications within seven days. A new system had been implemented to track application timeliness, but wing staff's routine failure to record response dates meant it was ineffectual. Replies to complaints were polite and addressed the issues raised, and managers had put in place a robust and effective quality assurance system that involved prisoners. However, only about a third of prisoners in our survey said complaints were dealt with fairly. Managers had not ensured responses to complaints were timely; most were answered late and some were overdue by several months, affecting prisoners' confidence in the system. The legal visits provision was insufficient to meet prisoners' needs and the video link facility was underused. Legal sessions held in the library were useful.
- S18 Equality work had improved since the previous inspection, but managers had only recently started to pay attention to this area and prisoners' needs were not yet systematically identified or met. Equalities monitoring data were not sufficiently analysed. Our own analysis suggested only a small number of concerns, but they were not being investigated to ensure discrimination was not taking place. The investigation of most discrimination incidents was adequate, but witnesses were not always interviewed and replies were late. Muslim prisoners had ongoing concerns about dietary and other issues, which staff were actively addressing. More consultation with foreign national prisoners took place than we usually see, but they had poor access to free legal advice. In our survey, 82% of prisoners with a disability said most staff treated them with respect. Support for most prisoners with higher-level needs was adequate, but some low-level needs were not met, for example, because of the lack of adaptations to cells and showers. Provision for younger and older prisoners and those from Gypsy, Romany and Traveller communities was not sufficient. Faith provision was very good and pastoral care particularly effective. Chaplaincy support for bereaved prisoners was very good.
- S19 Health care clinical governance had improved. Primary care services were generally satisfactory, but treatment for long-term conditions was underdeveloped. Prisoners often waited too long to see the GP and dentist for routine care, and the non-attendance rate for some clinics was high. Social care provision was good, but local authority assessments took far too long, in one case, as long as four months. The prison did not have a memorandum of understanding with the local authority to ensure assessments were undertaken more promptly. Mental health services were good and included counselling and trauma therapy, but staff shortages in key skills areas led to a reduced service. Transfers from the prison to mental health units took too long. Pharmacy services were generally effective, but lacked professional oversight. Supervision of medicine administration queues in the health centre was not sufficiently robust. Substance use services had improved and were very good. The new well-being unit provided prisoners recovering from drug use with a supportive environment.

Purposeful activity

S20 *Time out of cell was reasonable during week days, but not at weekends. The library provided a good service and the gym provision was reasonable. There were now enough activity places. However, many weaknesses in the leadership and management of activities remained, especially in the Novus provision. Too many prisoners were unoccupied during the working day. Attendance and punctuality were poor. Education was at too low a level, and teaching was not sufficiently good. Vocational training and industries workshops taught useful skills. Achievement of qualifications was good for those who completed courses. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S21 *At the last inspection in 2015 we found that outcomes for prisoners in Lancaster Farms were not sufficiently good against this healthy prison test. We made 13 recommendations in the area of purposeful activity. At this inspection we found that three of the recommendations had been achieved, four had been partially achieved, five had not been achieved and one was no longer relevant.*

S22 Most prisoners had reasonable time out of cell, but weekend restrictions to the regime had become common and unemployed prisoners on a basic regime could be locked up for 22 hours. A third of prisoners were locked up during our roll checks, which took place during the working day. Prisoners had regular evening association but the exercise period was only 30 minutes long and clashed with other domestic activities. Prisoners had reasonable access to the library, which was well-run and welcoming; it had a good range of books and other resources. Access to the gym was adequate, but only a limited number of accredited courses was available and there were no outdoor team activities.

S23 Prison managers had increased the number and range of activity places and there were enough places for all prisoners. However, most of the other weaknesses identified at the previous inspection had yet to be fully resolved. Despite some improvements, not enough prisoners attended lessons and activities regularly and on time. Education attendance was particularly low: in most sessions during the inspection, only about half of prisoners were on time. A needs analysis had led to some positive changes, but plans to increase the range and take-up of functional skills courses at level 2 had not been implemented. Prison managers had a realistic understanding of the provision's strengths and weaknesses, but the Novus self-assessment report was inaccurate. Novus managers had not developed suitable cover arrangements to ensure lessons were not cancelled. They required tutors to produce excessively detailed planning documents, many of which were unnecessary. Few prisoners used computers for learning or developing skills that could assist in employment.

S24 Tutors did not use information about prisoners' existing knowledge, skills or understanding to set them activities matching their abilities and previous learning experiences. A lack of resources to aid learning affected prisoners' motivation and enthusiasm. Very few tutors set clear or useful individual learning and personal development targets. Prisoners in vocational training and prison industries did not receive sufficient support to improve their English or maths. Most tutors and instructors developed effective working relationships with prisoners. Instructors in most prison workshops used their industrial experience effectively to help prisoners understand their work and learn new skills.

S25 Irregular attendance and late arrival disrupted activities and prevented prisoners from developing a work ethic. Once in prison industries and vocational training, prisoners' behaviour was good. Equality and diversity were not well promoted in education, vocational training or industries workshops.

- S26 Shortcomings in teaching, learning and assessment meant that prisoners often did not make good progress. For those who remained on courses, achievement of qualifications was high. The standard of prisoners' work in industries and vocational training was good, but far fewer prisoners produced a good standard of work in lessons. Prisoners' achievements on a minority of courses were low. Those in prison work industries could not gain qualifications to help them with employment after their release.

Rehabilitation and release planning

S27 *Family support was improving and visiting arrangements were reasonably good. Offender supervisors did not have enough contact with prisoners. Too many high risk cases were managed by staff without sufficient training. There was a large offender assessment system (OASys) report backlog, which hindered sentence planning and progression. Public protection procedures had improved, but some weaknesses remained. Re-categorisation and home detention curfew (HDC) processes were completed efficiently. Resettlement services were good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S28 *At the last inspection in 2015 we found that outcomes for prisoners in Lancaster Farms were not sufficiently good against this healthy prison test. We made 11 recommendations in the area of resettlement.⁹ At this inspection we found that four of the recommendations had been achieved, three had been partially achieved and four had not been achieved.*

S29 Work focused on family contact was good. The number of family days had increased and sessions were well-attended. The Prison Advice and Care Trust delivered useful family support work to a small number of prisoners, but managers were extending the provision. Families were encouraged to get involved in key processes. Partners of Prisoners provided visitors with a good service. The visits hall was reasonably welcoming – it now had better refreshments and a refurbished supervised play area. However, visitors still had to leave the hall to use the toilet, despite facilities being available. Personal mail had to be photocopied, but it compromised the quality of pictures and cards sent in by prisoners' children and families. The prison now had the technology to provide an alternative to photocopying mail, which could have resolved this problem.

S30 The strategic management of prisoners' risks of reoffending had improved since our previous inspection, and there was some good collaborative work between different departments, although significant weaknesses remained. Nearly 200 prisoners did not have an up-to-date OASys report, which hindered planning and progression. Many prisoners who should have had an OASys report completed at a previous establishment arrived without one. While some offender supervisors worked well with prisoners, contact with them was insufficient and largely reactive. Offender supervisors' initial interviews were generally timely, but objectives were not tailored to prisoners' individual needs. Prison staff managed most high risk cases because of a shortage of probation staff. They lacked the training and confidence to manage these cases consistently well and we saw some examples of poor case management. Release on temporary licence was not used to support rehabilitation.

S31 Public protection work had improved since our previous inspection, but the process for identifying public protection cases that required monitoring was insufficiently robust. Information reports submitted to inform prisoners' multi-agency public protection arrangement (MAPPA) level were variable and processes for assigning MAPPA levels were

⁹ This included recommendations about reintegration planning for drugs and alcohol and reintegration issues for education, skills and work, which in our updated Expectations (Version 5, 2017) now appear under the healthy prison areas of respect and purposeful activity respectively.

often delayed. The inter-departmental risk management team met regularly and focused well on the management of high and very high risk cases. Categorisation reviews were timely. Relevant information was considered, some reviews involved the prisoner and prisoners were advised in person of refusals.

- S32 The range of accredited offending behaviour programmes was too narrow and waiting lists too long. Only 53 prisoners had completed courses in the previous year. Many had unaddressed domestic violence issues; however, a non-accredited offending behaviour course was to be introduced in 2019. Shelter's accommodation, finance, benefit and debt provision was good. Many also received help to open bank accounts.
- S33 Resettlement assessments, held 12 weeks before prisoners' release, were multidisciplinary. They accurately identified needs and resulted in good plans.

Main concerns and recommendations

- S34 Concern: Use of force had increased significantly. Although its governance had improved in some areas, there were still serious gaps in managerial oversight. We were not confident that force was always used proportionately or as a last resort or that the use of special accommodation was always properly authorised or justified.

Recommendation: The prison should robustly govern the use of force, including special accommodation, to help ensure force is employed proportionately and only as a last resort.

- S35 Concern: There had been a continuing decline in the standard of Novus's provision. Prison and Novus leaders and managers had not effectively addressed the weaknesses identified at the previous inspection. Too many prisoners did not attend their allocated activities regularly or on time and cover arrangements for absent tutors were ineffective.

Recommendation: Prison and Novus leaders and managers should exercise robust leadership and management of education, skills and work, to ensure that identified weaknesses are addressed, especially ongoing problems with prisoners attending their allocated activities regularly and on time. Reliable arrangements should be introduced to ensure that prisoners' learning is not interrupted when tutors are absent.

- S36 Concern: The strategic management of rehabilitation had improved since our previous inspection but weakness remained. Nearly 200 OASys reports had not been completed or were not up to date, and too many prisoners continued to arrive without one. High risk prisoners were allocated offender supervisors who lacked confidence and had not been sufficiently trained.

Recommendation: Local and regional managers should ensure that weaknesses in sentence planning and risk management are effectively addressed. All prisoners should have an up-to-date assessment report to inform sentence planning and risk reduction work, and only staff with the necessary skills and training should manage high risk cases.

Section 1. Safety

Prisoners, particularly the most vulnerable, are held safely.

Early days in custody

Expected outcomes:

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

- I.1 Most prisoners travelled from other prisons in the north-west so their journeys to the prison were short. In our survey, 95% of prisoners said reception staff treated them respectfully. The cellular vehicles were clean but in poor repair and graffiti was evident in some cells. All prisoners had been offered food and water. However, none of the prisoners we interviewed said they had received adequate notification of their transfer.
- I.2 Prisoners were not routinely handcuffed or strip-searched on arrival. For reasons that were unclear to managers and to us, all those leaving the establishment under escort were strip-searched. The decision to handcuff prisoners during escorts was based on an individual risk assessment.
- I.3 Reception remained closed over lunchtime, which meant prisoners were either held in cellular vehicles or in prison cells over for the duration. The reception area was clean and tidy and staff were welcoming and informative. The process was swift and all prisoners were interviewed in private.
- I.4 The new custody care record was a positive initiative. First night staff conducted interviews in private and records consisted of a comprehensive assessment of prisoners' risks. Prisoners also received a directory of all available services at Lancaster Farms. There were no Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) in reception, but they were available in the first night centre.
- I.5 First night arrangements were good and 90% of prisoners in our survey said they felt safe on their first night, better than the comparators. All prisoners could have a shower and make a phone call on their first night, and phone accounts were transferred electronically from sending prisons. Prisoners had access to a reduced shop list on arrival, which allowed them to receive an order on the day of their arrival, reducing stress and the risk of loans and associated bullying (see also paragraph 2.15).
- I.6 A dedicated first night centre had been introduced since our last inspection and had improved prisoners' early days' experience. First night cells were clean and had all essentials items. However, there was graffiti in some and they were sparsely furnished. Prisoners spending their first night at the prison had a sign on their door indicating that they were new arrivals, but night staff did not routinely undertake additional welfare checks.
- I.7 Prisoners could spend up to five days in the first night centre and the regime was poor – prisoners spent too much time in cells and had no exercise. Prisoners sometimes moved to the first night centre after being segregated or if they were isolating themselves. There was no evidence that this mix of prisoners was having a negative impact on new receptions, but the limited regime was a problem for all. (See also paragraph 1.28.)

- I.8** The induction process was prisoner-led and involved a range of peer supporters. For example, an employment peer helped prisoners to apply for activities. The induction was informative and wide-ranging. In our survey, 72% of prisoners, against 55% at other recently inspected prisons, said it covered all they needed to know. The induction would have benefited from better staff oversight.

Recommendations

- I.9 Strip-searching of prisoners on escorted journeys from the prison should be based on a well-evidenced assessment of the risks posed by the individual.**
- I.10 Prisoners in the first night centre should have access to a full regime.**

Good practice

- I.11** *Managers arranged for new prisoners to receive a first shop order on the day of their arrival. This reduced stress and the risk of loans and associated bullying.*

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.12** The prison was reasonably calm and in our survey and group meetings, most prisoners said they felt safe. Although levels of violence had increased since the last inspection, they were no higher than we usually see at category C prisons. Most violent incidents were at a low level, but some were serious and a few involved weapons. In the previous six months, there had been 58 assaults compared with 42 at the previous inspection. Of these, nine were assaults on staff, and 49 were assaults on prisoners. In addition, there had been 25 fights (20 at the previous inspection).
- I.13** A third of prisoners in our survey said they had experienced some form of intimidation from other prisoners. A smaller but significant number of prisoners refused to interact with other prisoners because they felt unsafe. During the inspection, 26 prisoners were isolating themselves in residential units. The segregation unit routinely accommodated prisoners refusing to return to the wings because they felt unsafe there. They said it was often related to illicit drug debt. Support for these prisoners had improved since the last inspection, but planning to help them deal with the issues that caused them to isolate themselves was inadequate. Their regime remained impoverished and prisoners could receive, at most, about an hour out of their cells every day. (See also paragraphs I.29 and I.30.)
- I.14** A new casework approach to managing poor behaviour and supporting vulnerable prisoners through support and intervention plans had been introduced but not yet embedded.

Challenge, Support and Intervention Plans (CSIPs)¹⁰ for prisoners whose behaviour in custody posed a risk to others were established so that the support they needed to change their behaviour could be identified. Referrals for CSIPs were made through the safer custody team, following an investigation of a violent incident, and decisions made at a multidisciplinary team meeting. However, prison officers we spoke to and some managers did not understand the new procedures. With a few exceptions, the plans we saw were not sufficient – targets were often superficial, and there was little evidence that changes in behaviour or circumstances were monitored well enough or acted on.

- I.15** A new multidisciplinary safer intervention meeting, held every week to help direct and monitor the prison's work with perpetrators and victims of violence, was promising. However, staff relied too much on the prison's safer custody team to manage day-to-day problems with violence and some action agreed at meetings had not been implemented.
- I.16** There was little evidence of the incentives and earned privileges (IEP) scheme being used to promote good behaviour. Less than half of respondents to our survey said the prison's incentives or rewards encouraged them to behave well and the enhanced unit, popular with prisoners at the last inspection, had closed.
- I.17** About 6% of the population were on the basic level of the IEP scheme and remained there for a minimum of 14 days. We saw little evidence of any meaningful target setting and in a few cases, prisoners had been demoted to the basic level following a single alleged incident of poor behaviour without a sufficiently thorough investigation of the facts having taken place.

Recommendation

- I.18** **Vulnerable prisoners, particularly those who isolate themselves, should receive individual support that seeks to understand and respond to the causes of their fears, and that enables them to participate in a range of activities out of their cells.**

Adjudications

- I.19** The number of adjudications was high – 2,171 in the previous six months, more than double the number at the last inspection and higher than in similar prisons. Most charges related to violence and drug-related activity, but a large number were minor infringements that could have been dealt with in other ways, such as through the IEP scheme.
- I.20** Records we examined assured us that hearings were usually well conducted; however, we found that some cases were not investigated thoroughly enough. There was also a backlog of remanded adjudications – we found cases that had not been heard or reviewed because prisoners had been transferred to other prisons.
- I.21** Adjudication standardisation meetings took place at least quarterly and information was sufficiently analysed to help identify issues that required attention.

¹⁰ Challenge, Support and Intervention Plan (CSIP) is a system used by some prisons to manage the most violent prisoners and support the most vulnerable prisoners in the system. Prisoners who are identified as the perpetrator of serious or repeated violence, or who are vulnerable due to being the victim of violence or bullying behaviour, are managed and supported on a plan with individualised targets and regular reviews.

Recommendation

- I.22** Disciplinary charges should be thoroughly investigated and minor infringements of prison rules should be dealt with informally.

Use of force

- I.23** Use of force had increased significantly since the previous inspection and was very high. During the previous six months, 185 incidents had involved force, double the number at the previous inspection. Force was usually used spontaneously and in response to fights or assaults. There were also examples of force being used proportionately to prevent prisoners self-harming following illicit drug use, usually involving new psychoactive substances (NPSs)¹¹.
- I.24** Although the management and monitoring of use of force had improved since the last inspection, there remained some significant gaps in governance. A small use of force review committee, led by the head of safety governor, met every month to oversee processes and provide oversight, while a larger use of force committee meeting analysed information for trends and patterns every quarter. The committee checked samples of paperwork and examined video-recordings of incidents, where they were available. However, we saw video evidence showing that de-escalation was not always used effectively and we were not confident that force was always used as a last resort or that all incidents requiring further investigation were identified or acted on. On occasion, officers wore balaclavas during removals involving force, which was unnecessary. Although officers often used body-worn cameras during incidents, the video quality was poor and did not always show what was happening.
- I.25** Paperwork we examined was mixed. Although some was completed correctly, too many accounts failed to demonstrate effective de-escalation. There were unacceptable delays in completing use of force reports and too many contributions from officers were missing from incident records. During the inspection over 250 officers' reports were missing.
- I.26** Special accommodation had been used 11 times in the previous six months and was nearly three times the level we found in 2015. Governance of special accommodation was poor. Most authorisation forms we examined were not completed fully or at all. This meant that we could not make a judgement on whether or not use of special accommodation was justified. Half of the forms were missing and we saw at least one case where special accommodation was not authorised by a senior member of staff. (See main recommendation S34.)

Segregation

- I.27** Living conditions in the segregation unit were reasonably good. Most communal areas were clean, but exercise yards were stark and dirty. Most cells were clean and reasonably well-furnished, but some toilets were very dirty.
- I.28** The use of segregation remained higher than at similar prisons. We calculated that in the six months prior to the inspection there had been about 200 cases. Records we examined indicated that the unit was usually full. The first night centre on the floor above was sometimes used as an overspill for compliant segregated prisoners when the segregation unit was full. (See also paragraph I.7.)

¹¹ 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.29** During the inspection, 11 of the 12 cells in the segregation unit were occupied. Nine prisoners were being held for good order and discipline, one was awaiting adjudication and another was confined to his cell as punishment following an adjudication. Many of them had refused to move to the normal residential units because they felt unsafe there (see also paragraph I.12). Most prisoners had been segregated for between one and five weeks.
- I.30** Formal segregation reviews were poorly attended and there was still little planning to help prisoners return to the mainstream prison or to deal with the issues that had caused their segregation. However, monitoring of segregation was improving and plans to address the needs of longer stay prisoners through safer intervention meetings were promising (see paragraph I.15).
- I.31** Relationships between staff and prisoners were reasonably good but the regime for longer stay prisoners was poor and, at most, prisoners could have a shower, make a phone call and take an hour's exercise every day. Prisoners' isolation was exacerbated by the fact that, regardless of the reason for their segregation, they had little access to education or the gym.

Recommendation

- I.32 Segregation reviews should be meaningful and should involve the prisoner in a forum consisting of staff from relevant departments and their unit. Reintegration plans should be actively promoted.** (Repeated recommendation I.72)

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 use and effective drug supply reduction measures are in place.

- I.33** Security outcomes were reasonable, but there were some structural and procedural weaknesses. An up-to-date tactical assessment identified the establishment's key risks and weekly intelligence review meetings enabled short-term action to be taken promptly.
- I.34** However, security meetings were not always well-attended and not all key departments were represented. Health care staff had not attended for at least six months, while other departments, such as the offender management unit, were only represented on some occasions. Meeting minutes did not outline action showing how longer-term security objectives would be achieved. Action was often generic and did not always refer to the latest available intelligence.
- I.35** Physical and procedural security arrangements were largely proportionate, although there were some exceptions (see paragraphs I.2 and 4.1).
- I.36** Every month, an average of 527 intelligence reports was submitted, more than at our last inspection and compared with similar prisons. The reports we viewed were reasonable, although we found that not all incidents were being reported.
- I.37** In the previous six months, intelligence-led searches had resulted in significant finds of mobile phones, phone chargers, illicit drugs and alcohol. However, in the previous six months, only 57% of recommended intelligence-led searches had been completed. During the inspection, a

backlog of approximately 75 reports were awaiting a manager's sign-off and action. There was no triage process to ensure that the most urgent concerns were addressed first.

- I.38** Bi-monthly meetings were held on corruption prevention work; 116 incident reports relating to professional standards issues had been submitted over the previous six months. In the previous 12 months, one member of staff had been dismissed and three staff from partner agencies had been excluded. Routine, intelligence-led searching of staff took place.
- I.39** Meetings which monitor prisoners convicted of terrorist and extremist offences were held every month and the prison worked with the regional Prevent (counter-terrorism) prison lead staff member. Attendance at these meetings was adequate and included the prison's Muslim chaplain. Counter-terrorism awareness training had been delivered to 36% of officers and 25% of administrative staff.
- I.40** Escort risk assessments were completed adequately and handcuffing was usually considered and proportionate. However, strip-searching during escorts was disproportionate (see paragraph 1.2). Only eight prisoners were subject to closed visits during the inspection. All were for visits-related offences and the restriction was reviewed every month, although in a small minority of cases, prisoners were unnecessarily subject to closed visits for a minimum of three months even in the absence of any further relevant corroborating intelligence.
- I.41** The strategic approach to supply reduction was good. It included a broad range of measures to address weaknesses in the prison's physical security and to remove drug supply routes into the prison. Examples included additional fencing, netting in exercise yards, cooperative working with Lancashire police and the north-east prison search team, and the use of an itemiser (technology that can detect whether mail is being used to traffic drugs). The itemiser was used to test legal correspondence and the police was notified when results were positive (see also paragraph 4.4).
- I.42** Despite considerable efforts to tackle illicit drugs, they remained too accessible, particularly NPS. In our survey, 63% of prisoners said it was easy to get illicit drugs and 39% that it was easy to obtain alcohol. Mandatory drug testing (MDT) between April and September 2018 showed a random positive test rate of 16.2%, rising to 34.8% when NPSs were included. These levels were high, but represented a significant reduction when compared with the previous year.
- I.43** As with intelligence-led searching, the suspicion testing programme remained inadequate and failed to address illegal drugs in the prison. The prison did not know how many suspicion tests had been requested, but only 20 had been completed in the six months prior to our inspection, resulting in a positive rate of 75%. The number of tests was insufficient considering the intelligence being received, the positive MDT rate and the strategic importance of addressing illicit substance use within the prison.

Recommendations

- I.44** **Action to address security objectives should be specific and respond to up-to-date intelligence.**
- I.45** **Intelligence reports should be acted on swiftly and recommended action, including intelligence-led searches, target and suspicion drug tests, conducted promptly.**

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.46** Levels of self-harm were higher than at the last inspection. There was a comprehensive suicide and self-harm policy and a new safety framework document. A monthly safer prisons meeting was well attended and a weekly safety intervention meeting also took place.
- I.47** There had been three deaths, one self-inflicted, since the previous inspection. The prison had achieved all the Prisons and Probation Ombudsman's recommendations relating to the deaths.
- I.48** Care for those at risk of self-harm was generally good and prisoners with low-level needs were managed well, but we found some acute cases where the care was inadequate. Prisoners who were subject to assessment, care in custody and teamwork (ACCT) case management for prisoners at risk of suicide or self-harm and who were isolating themselves spent 23 hours a day in their cells (see paragraph 1.13 and recommendation 1.18). The location of a constant watch cell in the well-being unit was positive, but the cell was occupied by a prisoner who was not on constant supervision who would have had to be relocated if it was required.
- I.49** ACCT documentation was reasonable, although some entries were superficial. Eighteen prisoners had been segregated while on an ACCT document in the previous six months. Logs were poor and provided insufficient information or justification for the decision. All prisoners subject to ACCT case management had a named case manager, but case managers were not always present at case reviews. Some did not know who their case manager was. Investigations into serious 'near miss' incidents had only just started. In some cases, investigations into alleged harm and abuse had been weak.
- I.50** ACCT reviews were multidisciplinary and mental health and chaplaincy staff attended at least 80% of all reviews. It was positive that the prison involved prisoners' families in the ACCT process, but their participation could have been extended further. Care maps provided time-bound, specific targets in most cases. Eighty-four per cent of staff had been trained in the ACCT process. Prisoners said it was difficult to see a Listener at night and the single Samaritans phone was not sufficient.

Recommendation

- I.51 A comprehensive decision log should be completed following the segregation of a prisoner who is at risk of self-harm. It should include sufficient information and justify their segregation.**

Protection of adults at risk¹²

- 1.52** The safeguarding policy was comprehensive. The prison worked with the local adults safeguarding board, and the governor attended the board's meetings. A manager was responsible for protecting adults at risk. Staff had a basic understanding of safeguarding and knew whom to contact for help with safeguarding issues.

¹² Safeguarding duties apply to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs); and
- is experiencing, or is at risk of, abuse or neglect; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse and neglect (Care Act 2014).

Section 2. Respect

Prisoners are treated with respect for their human dignity.

Staff-prisoner relationships

Expected outcomes:

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

- 2.1 We observed respectful, relaxed and appropriate interactions between staff and prisoners. In our survey, 84% of prisoners compared with 69% in similar recently inspected prisons said that most staff treated them with respect; 78% said they had a member of staff they could turn to if they had a problem. Although many staff were relatively new, we did not see them lack control or confidence, and custodial managers were often visible across the units.
- 2.2 Staff responded well when prisoners approached them and mixed with them during key periods, such as their return from work or education. However, they did not proactively supervise the many prisoners who remained in the units at other times (see paragraphs 1.13 and 3.2).
- 2.3 All staff had been trained as keyworkers and prisoners benefited from the enhanced contact and support that this involved. However, not all prisoners received routine keyworker contact. New staff were due to arrive shortly after the inspection.

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 The wings were well-designed. They were open, light and spacious and had large and well-equipped association areas and dining tables. External and communal areas were clean and well-maintained. Cells were clean and in good repair, although the lino on a number of floors was damaged.
- 2.5 Most cells were adequately furnished and most prisoners had single cells. However, up to 10 cells per wing were designed for one prisoner but used for two. They were too small and did not have sufficient furniture for two prisoners. Most prisoners had cell privacy keys. We were pleased to see that most toilets now had seats, although toilet screening remained poor in some cells. Access to showers was good, but they were insufficiently screened and some were not working. Funding had been secured to install cubicles, but staff and prisoners could currently see into the shower area from the landing.
- 2.6 Good laundry facilities were available on all wings. There were ongoing problems with the distribution of cleaning material and equipment, which required more staff oversight. Families

were still not permitted to send in clothing. Cell call bell responses were not monitored; in our survey 44% of prisoners said cell bells were answered within five minutes which was better than the comparators, and prisoners we spoke to said response times were reasonable.

Recommendations

- 2.7 Cells designed to hold one prisoner should not be used to hold two.** (Repeated recommendation 2.10)
- 2.8 All showers should be in good working order and adequately screened.**

Residential services

- 2.9** In our survey, 68% of prisoners (against the recent comparator of 37%) said the food was good or very good. The food we sampled was nutritious and accompanied by freshly made bread rolls, and hot choices were available at lunchtime.
- 2.10** A rolling four-week menu provided prisoners with a reasonable choice of meals – vegetarian, vegan and halal options and fruit and vegetables were available at each meal. Special meals were prepared for a small number of religious and cultural celebrations.
- 2.11** Breakfast packs were delivered the evening before they were to be consumed. Food was served at about 11.30am for lunch and 4.30pm for dinner, which was too early. Prisoners could eat their lunch together.
- 2.12** Staff did not supervise some serveries adequately and serveries doors and shutters were missing on most wings. Many prisoners complained about other prisoners taking their meals and kitchen staff told us that about 700 items of food went missing from trolleys on wings every month. This meant that food ran out before all prisoners had had a full meal.
- 2.13** The kitchen areas were clean, but some floor tiling required replacement. Food was safely stored. All prisoners working in the kitchen were suitably qualified in food hygiene (see paragraph 3.35).
- 2.14** In our survey, 69% of prisoners (against the comparator of 54%) said the range of prison shop goods was sufficient to meet their needs. Prisoners were consulted about the shop list through the prisoners' council and items were added or removed in response.
- 2.15** Shop orders were efficiently processed every week, and new arrivals could choose from a stock of popular items, which could be supplied on the same day, reducing the potential for debt (see also paragraph 1.5 and good practice 1.11). In our survey, 58% of prisoners said they had access to the shop in the first few days of their arrival, which was higher than the comparators. A loan was available for those arriving without funds. Prisoners could order items from a good range of catalogues, but a 50p administration charge was applied.

Recommendations

- 2.16** Breakfast should be provided on the day it is to be eaten, lunch should not be served before noon and the evening meal not before 5pm.
- 2.17** Prison officers should supervise serveries effectively to ensure all prisoners receive equitable portions.

Prisoner consultation, applications and redress

- 2.18** Attendance by prisoner representatives was usually good. The meetings were chaired by the head of residence and led to changes, particularly in relation to the food and shop. However, some concerns, usually relating to maintenance issues in the units, arose at successive meetings without being resolved.
- 2.19** Application forms were easily available on the wings. In our survey, about two-thirds of prisoners said they were answered fairly, but only 39% said they were answered within seven days. We heard many complaints about how long it took to reply to applications and some prisoners said they received no response at all.
- 2.20** Managers recognised the concern and put in place a basic application tracking system. However, the system required staff to log when applications had been made and when they had been answered. Log books we examined showed that applications made in early October 2018, when the system was implemented, were usually answered within a week. However, recent applications were still awaiting an answer after nearly two weeks, and for long periods, no applications at all had been logged because the system was not being used. Staff in some units said they distributed responses but forgot to log the dates, making the assurance system ineffectual.
- 2.21** There had been 1,871 complaints in the previous six months, an increase from 1,010 at the last inspection. They related to issues such as property, finance and offender management. There were enough complaint forms and complaint boxes in all units.
- 2.22** Replies to a sample of complaints inspected were polite and addressed the issues raised. Managers had put in place a quality assurance system in the form of a monthly complaints focus group, which staff and prisoners attended, and which provided feedback on responses. Despite this, in our survey only 36% of respondents said they felt complaints were dealt with fairly. Managers did not ensure responses to complaints were timely and only 471 of the total had been answered within the required timescale. Some were overdue by several months, affecting prisoners' confidence in the system.
- 2.23** The library stocked a range of legal books, but there were no Access to Justice laptops to help prisoners with their legal representations. However, prisoners could book legal sessions in the library, which gave them supervised access to a computer to research legal matters and look at Prison Service policies.
- 2.24** Legal visits sessions were only available two days a week and they were frequently full – there were delays of up to three weeks before bookings could be made. Legal visiting facilities were good and there were six confidential booths in the main visits room.
- 2.25** The video link was underused. It was not used for eligible court cases and prisoners were unnecessarily transferred. Nor was it used to facilitate legal consultations, which might have offset the lack of legal visits provision. A few meetings with external offender managers were held by video link; 28 had taken place in the six months before our inspection.

Recommendations

- 2.26** The application process should be efficiently tracked and managed. (Repeated recommendation 2.12)
- 2.27** Responses to all complaints should be timely.
- 2.28** Legal representatives should be able to book legal visits reasonably promptly.
- 2.29** The prison should broaden the use of the video link facility to include court hearings and other legal consultations.

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 characteristics¹³ 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

- 2.30** Equality work had improved since the last inspection, but more needed to be done to ensure prisoners' needs were identified and met.
- 2.31** Quarterly equality action team meetings took place as scheduled, but attendance was inconsistent. Meetings lacked focus and were undermined by delays in producing equality monitoring data, insufficient data analysis and insufficient use of prisoner equality representatives. Action planning was limited and was not strategically focused.
- 2.32** Our own analysis of equality monitoring tool data suggested broadly equitable treatment of most prisoners with protected characteristics. However, the prison had not investigated adverse monitoring data for younger prisoners across most of the areas measured. A small number of issues arising for other protected groups had also not been investigated adequately.
- 2.33** Consultation for prisoners with protected characteristics, although improving, was still insufficient. There were prisoner equality representatives on each wing, but their role was limited. Representatives had not been trained and lacked an understanding of equality issues. There were few links with external support agencies for groups with protected characteristics and diversity was not sufficiently celebrated.
- 2.34** Thirty-four discrimination incident reporting forms (DIRFs) had been submitted in the six months before the inspection. Investigations into most incidents were adequate, although witnesses were not always interviewed when necessary and replies were often late. Responses were generally polite, but some were terse. Oversight of the process was poor. Individual responses were not, as required, approved by a senior manager. However, the introduction of a complaints focus group, where a sample of anonymised responses was reviewed with prisoner representatives, was a positive initiative (see paragraph 2.22).

¹³ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

- 2.35** The prison recognised weaknesses in the provision and steps were being taken to improve it. Senior management team lead staff had been appointed to oversee work with prisoners from each of the protected characteristic groups. Regular meetings had been scheduled with peer representatives to develop the role, and a local equality organisation had agreed to attend equality action team meetings and help the prison develop its work.

Recommendation

- 2.36** **The needs of prisoners with protected characteristics should be identified and met promptly through monitoring, regular and direct consultation and effective use of prisoner representatives.**

Protected characteristics

- 2.37** Eighteen per cent of prisoners were from a black and minority ethnic background and 12% were Muslim. Two consultation forums had been held since the beginning of the year, which was insufficient. A limited celebration of Black History Month took place. However, monitoring data showed no disproportionate treatment of black and minority ethnic or Muslim prisoners across the areas measured. Muslim prisoners had ongoing concerns about dietary and other issues, but they were being managed adequately.
- 2.38** Prison managers were not aware of all prisoners from a Traveller community. There had been just one forum for prisoners from this group in the previous year and there was otherwise little provision.
- 2.39** There were 16 foreign national prisoners. There had been three forums for prisoners in this group during 2018. Immigration officials attended the forums, but not consistently. Prisoners complained about slow Home Office decision-making and limited rehabilitation opportunities pending completion of their cases. Most of those facing deportation that we spoke to had family in the UK. Legal aid was no longer available to help them with their cases and the majority spent their own financial resources on private legal representation. Neither prisoners nor staff could recall any being held who did not speak English. Not all prisoners we spoke to were aware of their entitlement to a free monthly five-minute phone call to their family.
- 2.40** In our survey, 82% of prisoners with a disability said that most staff treated them with respect. Support for most prisoners with higher-level needs was adequate, although we found some prisoners who were unable to work or who were retired, locked in their cells during the working day. Some low-level needs were not met, for example, there was a lack of adaptations to cells and showers. However, new adapted cells were to be brought into use on each wing. Wing staff had a poor awareness of less obvious needs, such as learning disabilities. Personal emergency and evacuation plans were adequate, although arrangements were sometimes not sufficiently clear. Some night staff could not locate these plans promptly enough. Only one prisoner had a paid carer. Some prisoners who would have benefited from a wing care plan did not have one.
- 2.41** Little dedicated provision was available for younger or older prisoners. No forums had been held for prisoners in these groups (see also paragraph 2.32). Some good support was available for veterans, including one-to-one assistance from a voluntary organisation. There were no forums for prisoners in this group.

Recommendation

- 2.42 All disabled prisoners who need them should have a multidisciplinary support plan and a paid carer.**
- 2.43 Unit staff, including those on night duty, should be familiar with the support and evacuation plans for disabled prisoners.**

Faith and religion

- 2.44** Faith provision was very good. The small core team of employed and sessional chaplains, covered the main religious affiliations of the prison population. In our survey, 75% of prisoners said they could speak to a chaplain of their faith in private and 85% said they could attend religious services if they wanted to.
- 2.45** The chapel was bright and clean and the multi-faith room, which was used for Muslim prayers, was adequate. Segregated prisoners could, subject to a risk assessment, attend corporate worship and had attended on six occasions in the previous month. A reasonable range of classes was offered.
- 2.46** Pastoral support was particularly effective. The weekly Time Out group for prisoners who were struggling to cope with life in the prison was a positive initiative. The chaplaincy attended a large proportion of assessment, care in custody and teamwork (ACCT) case management reviews for prisoners at risk of suicide or self-harm and far more than we usually see. They regularly worked with prisoners on family issues. One chaplain focused on supporting bereaved prisoners and had a caseload of about eight prisoners at any one time. The support provided was very good.
- 2.47** The team was well integrated into the work of the prison. The managing chaplain was a member of the senior management team, attended key meetings, and assisted with family days. There were reasonable links with outside faith groups, although those for Muslim prisoners were not strong enough.

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.

- 2.48** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)¹⁴ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. The CQC found there were no breaches of the relevant regulations.

¹⁴ 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>.

Strategy, clinical governance and partnerships

- 2.49** A comprehensive up-to-date health and social care needs assessment informed health care developments. Working relationships between the prison and the provider Spectrum Community Health CIC were good, as were business and governance monitoring systems.
- 2.50** Prisoners told us they were generally satisfied with health care, although a minority were dissatisfied with pain management. The prisoners' forum, patients' forum and surveys were used effectively to consult service users. Health care complaints were now managed confidentially and had decreased to 35 per month in 2018–2019 to date from about 40 per month in the previous year. Responses we sampled were timely, sensitive and addressed the issues highlighted.
- 2.51** The health centre was clean and bright, and met infection control standards. Emergency equipment, which including automated external defibrillators (AED) and oxygen, was checked regularly. Half of prison staff who had regular prisoner contact had been trained in first aid and the use of the AED.
- 2.52** Nurses worked from 7.30am until 7.30pm from Monday to Thursday, and 7.30am to 6pm on Friday. At weekends they worked from 8am until 5.30pm. The team was well-managed despite ongoing recruitment challenges. The skills mix was limited because of vacancies within the team. However, specialists were brought in from the community to supplement it. Minimum training requirements were being achieved. Managerial supervision arrangements had been established, but supervision did not always take place, although staff had group clinical supervision and records demonstrated reflective practices (learning from experience).
- 2.53** Health care staff were easily identifiable and the interactions we observed were caring and professional. As in 2015, an appropriate range of policies was in place, including on safeguarding and the management of communicable diseases.

Promoting health and well-being

- 2.54** Health promotion material was widely available, but prisoners lacked access to barrier protection. Access to national health screening campaigns, smoking cessation support, advice on blood borne viruses, age-appropriate immunisations and vaccinations was good. There were designated gym sessions for prisoners with physical and mental health problems and for older prisoners. The effective peer supporter was to be joined by others and their role was to be revised in 2019.

Recommendation

- 2.55** **Barrier protection such as condoms and sexual advice should be available to prisoners while in prison and on release.**

Primary care and inpatient services

- 2.56** Prisoners received a combined primary and secondary health screening on the day of reception, but the template on SystemOne (the electronic clinical information system) had not yet been introduced. The absence of a screening room in reception meant patients could have missed their initial screening. Assessments we reviewed identified prisoners' individual needs and onward referrals were made where necessary.

- 2.57** The main appointments system was effective, and an appropriate range of primary care services was available. Easy access daily nurse triage clinics were in place for prisoners reporting sick. Appointments for nurse and health care assistant clinics were available within five days if necessary.
- 2.58** Prisoners could now move promptly to and from the health centre although non-attendance rates for some clinics, such as the GP (13%), were high.
- 2.59** Waiting lists for routine GP appointments exceeded four weeks during our inspection, which was far too long, although action was being taken to deal with this problem. Prisoners were triaged and prioritised appropriately and review clinics with a nurse prescriber and mental health nurse had been established to address the long waiting times.
- 2.60** Prisoners with long-term conditions were identified during reception screening and their care was managed by a GP or senior nurse. Prisoners with long-term conditions were registered on SystemOne and had care plans. Nurse-led clinics for long-term conditions were scheduled regularly and plans were underway to offer prisoners help to manage their long-term conditions.
- 2.61** Effective joint working arrangements with external providers offered onsite provision, such as visiting X-ray services, regular attendance by a hepatitis C nurse and visits from a sexual health nurse.
- 2.62** Health administrators managed external health care appointments well. Two escort slots were available every day, but unscheduled emergency appointments meant routine appointments had to be cancelled and re-booked. Despite this, prisoners had access to external health care services within community-equivalent waiting times.
- 2.63** During our inspection, no one was receiving palliative care. We were confident that palliative care needs would be identified through the reception screening process and routine health care appointments. Health care managers informed us that a regional end of life care pathway was in place for Lancashire cluster prisons. However, while links had been established with a local hospice, no formal pathway for joint working with the hospice had been established.
- 2.64** Pre-discharge clinics, unusually run by pharmacy technicians, were good. All prisoners being released were seen and given advice on how to register with a local GP and dentist. They also received a reasonable supply of medication to take away with them.

Recommendations

- 2.65** **Non-attendance rates and waiting times should be assertively managed; the wait for a routine GP appointment should not exceed two weeks.**
- 2.66** **A local pathway should be developed for patients requiring end of life care.**

Social care

- 2.67** There was no memorandum of understanding between the prison, Lancashire County Council (LCC) and Spectrum Community Health CIC, and there were no regular meetings to oversee social care arrangements. However, a pathway for the referral, assessment and ongoing care arrangements of prisoners with social care needs had been introduced.

- 2.68** Prisoners with social care needs were identified and referred to LCC. However, social care assessments were not always carried out promptly and we found a prisoner who had been waiting four months for an assessment.
- 2.69** An occupational therapist carried out assessments, but health care staff told us they could be delayed, which meant prisoners could wait too long for equipment.
- 2.70** During the inspection, one prisoner was receiving a social care package. Care was delivered through a personal care plan. A peer support system was in place and 'buddies' received suitable training.

Recommendations

- 2.71** **The prison should develop a memorandum of understanding for social care with the local authority and social care provider.**
- 2.72** **Prisoners' social care and occupational therapy needs should be assessed promptly.**

Mental health care

- 2.73** Mental health services, provided by Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV), were good. In our survey, a large number (53%) of respondents said they had a mental health problem and half of prison staff had been trained to identify prisoners with potential problems, an improvement on 2015.
- 2.74** The referral system was efficient and new cases were discussed every working day. Those assessed as having an urgent problem were seen by the duty worker on the next working day and less urgent cases within three days. Prisoners and prison staff said they appreciated the service.
- 2.75** TEWV had been experiencing staffing shortages in 2018, but the mental health nurses, visiting psychiatrist, counsellors and trauma therapist offered a solid and responsive service.
- 2.76** Sixty-five prisoners were on the caseload. Therapeutic approaches were tailored to the individual and included: support for those with serious and enduring disorders; client-centred and solution-based therapies; therapy for psychological trauma; and some types of cognitive therapy. Waiting times for therapies were short, although too many patients were waiting for higher-level cognitive therapy. Some group therapies were available through the team of substance use workers. TEWV workers and prisoners used clinical rooms, which were not ideally suited to psychological therapies.
- 2.77** The care programme approach (mental health services for individuals diagnosed with a mental illness) was used to support over 58 prisoners, a large number of whom were cases with complex problems, placing a heavy bureaucratic burden on staff. In 2018, four out of five prisoners had waited more than two weeks for a transfer to a mental health hospital, which was too long.

Recommendation

- 2.78** **Prisoners requiring care in a mental health hospital should be transferred within the current transfer guideline.**

Substance use treatment¹⁵

- 2.79** An up-to-date substance use policy contained a detailed action log and substance use staff worked well with supply reduction staff to undertake strategic oversight of the work. Integrated clinical and psychosocial interventions were now provided and access to SystemOne was shared, which improved support for prisoners.
- 2.80** The recovery team was based in Coniston unit 1, the designated recovery wing within the well-being unit, but clinics were also held in the health centre. The service was available Monday to Saturday and more effective use of resources had led to better accessibility, and more targeted interventions. A designated worker targeted prolific users of new psychoactive substances (NPS) (see also paragraphs 1.42–1.43) and her involvement in adjudications was particularly noteworthy.
- 2.81** About a third of prisoners (196) were involved with the team. The range of support now included an alcohol treatment module, NPS awareness sessions and the eight-week accredited Gateway programme (consisting of education, therapy, group work, self-help and voluntary drug testing), as well as an active peer mentor support scheme and self-help groups.
- 2.82** An additional substance use officer was based in the well-being and recovery unit. Partnership working between prison staff and inclusion substance use workers in the unit was good. The drug-free ethos was supported by robust drug testing in the unit.
- 2.83** Prescribing regimes for opiate-dependent prisoners were still limited to methadone, and one prescribing clinic per week was not sufficient. While we saw examples of joint working between substance use, primary and mental health services, there was no multidisciplinary forum for planning and coordinating the treatment of those with complex needs.
- 2.84** Pre-release harm reduction advice included training in naloxone (a drug to manage substance use overdose), and prisoners could also be prescribed the opiate blocker naltrexone to assist in their recovery. Useful links with community drug services enabled prisoners to continue with their treatment on release.
- 2.85** The Recovery in the Community service was impressive. A worker attended resettlement boards, worked with the offender management unit and started preparation work with prisoners 12 weeks before their release. Enhanced release support continued for 12 weeks post-release and could include arranging rehabilitation and supported housing placements.

Recommendation

- 2.86** **Sufficient, flexible clinical substance use treatment services should be available to provide regular treatment reviews and coordinate the care of prisoners with complex needs.**

Good practice

- 2.87** *The Recovery in the Community programme offered prisoners with drug or alcohol problems a good level of assistance with their reintegration and release, and ensured that they continued to receive transitional support in the community.*

¹⁵ 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).

Medicines optimisation and pharmacy services

- 2.88** Medicine was supplied as named patient medication and items were clearly labelled. Packaging leaflets were not always supplied but could be printed out if requested.
- 2.89** The pharmacist spent only one day a week at the prison, but we were informed that funding had been obtained for them to attend the prison four days a week.
- 2.90** Nurses or pharmacy technicians administered medicines, including methadone, efficiently twice a day from treatment rooms in the health centre and Coniston unit 2. One or two prisoners received short-term sedatives every day in possession, because evening medicines were administered too early for overnight therapeutic effect.
- 2.91** SystmOne was used to record prescribing, administration and clinical notes, but GPs sometimes stopped a prisoner's medicines while a prescription was still active without informing the pharmacy. This meant the change might have been overlooked.
- 2.92** Seventy per cent of medicines were supplied in possession, which was low but properly justified. An in-possession policy was in place and risk assessments were completed on reception and reviewed in full when changes occurred. Most cells contained lockable cabinets so prisoners could store their medication securely. Arrangements for the administration of in-possession medication were less secure than those for medication that was not in possession.
- 2.93** Prison officers' supervision of medicine administration queues had improved, although queues in the health centre were not managed or supervised effectively enough, compromising confidentiality and increasing the risk of diversion.
- 2.94** The transportation of medicines had improved, storage was secure, stock levels were robustly audited and fridge temperatures were monitored appropriately.
- 2.95** A reasonable range of patient group directions (which authorise appropriate health care professionals to supply and administer prescription-only medicine) was available and a nurse prescriber could prescribe an additional range of medicines. Prisoners could receive a comprehensive range of medication for treating minor ailments without a prescription. There was an appropriate range of out-of-hours stock. A pharmacy-led discharge clinic was available for prisoners who were being released (see paragraph 2.64).
- 2.96** The quarterly medicine management group meeting, which the pharmacist attended, monitored tradable medicines and clinical audits well. The pharmacist clinically screened some prescriptions, but only one medicine use review had been completed. Prisoners were not made aware of the availability of the pharmacist. There was a relevant prescribing formulary (list of medications used to inform prescribing), which was available on SystmOne.

Recommendations

- 2.97** **Prison officers should supervise prisoners effectively while medication is being administered and collected in the health centre to minimise potential bullying and the diversion of supplies.**
- 2.98** **Professional pharmacist services should be extended to include pharmacist-led clinics and medicine use reviews, and access to the pharmacist should be advertised.**

Dental services and oral health

- 2.99** The prison had an excellent dental suite with separate decontamination facilities. The equipment had full safety certification and was infection-control compliant. Dental waste was disposed of professionally.
- 2.100** There were two hygienists and two dentistry sessions per week, which did not meet the demand – 79 prisoners had been waiting for up to 16 weeks for routine treatment, a deterioration since 2015. A full range of treatment was provided, including oral health promotion. Appointments were allocated according to prisoners' needs.

Recommendation

- 2.101 Prisoners should have access to routine dental appointments within six weeks.**
(Repeated recommendation 2.91)

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 core day provided a consistent regime on weekdays, but there were regular restrictions over the weekend. Full-time workers generally received approximately nine hours a day out of their cells on weekdays, which was reasonable, while on weekends, it was reduced to less than four hours. However, prisoners' time out of cell on weekdays was adversely affected by persistent curtailments and delays.
- 3.2 Unemployed prisoners on the basic level of the incentives and earned privileges (IEP) scheme could spend 22 hours a day locked in their cells, which was too long. Our roll checks during the working day showed a third of prisoners locked up, which was excessive.
- 3.3 In our survey, only 42% of prisoners said they could go out for exercise more than five times a week. Although exercise was always offered, it was only for 30 minutes in the morning, which was too short. It also clashed with other domestic activities, including collecting medication or preparing for work, problems that were highlighted at the last inspection.
- 3.4 Exercise yards were litter-free and most had exercise equipment. However, there was not enough seating. All prisoners had evening association until 7pm on week days, which was rarely cancelled.
- 3.5 Prisoners had reasonable access to a good library. The library was welcoming and well-organised. It stocked a good range of books, including fiction, non-fiction, easy-read books, audiobooks and publications on vocational subjects related to prison work and on vocational training, as well as legal texts and books in languages other than English. Prisoners could also borrow from an extensive selection of DVDs and other resources, such as puzzles, mindfulness material and art therapy colouring sheets.
- 3.6 Library staff were proactive and undertook useful outreach work with, for example, those isolating themselves (see paragraphs 1.7 and 1.13), and ensured wing libraries, including the segregation unit, were adequately stocked. However, computers were not available for prisoners to undertake private study or research. One computer was available for word processing and staff printed out documents for prisoners.
- 3.7 Library staff supported a variety of mentoring projects, including the Reading Ahead and Turning Pages reading schemes, Books on Prescription (which makes self-help publications available to those suffering with health problems), Three out of Five Maths Challenge and Storybook Dads (in which prisoners record stories for their children). They also produced the prison newsletter and supported other departments in promoting events, including poetry competitions and Black History Month.
- 3.8 Data on library use was maintained, including those covering protected characteristics. There was evidence that they had been analysed and used to increase user participation.

- 3.9** Gym facilities consisted of one weights room and a separate fitness suite with a sports hall. There was no provision for outdoor team activities – a rugby pitch was not in use and an artificial turf pitch had fallen into disrepair. Several pieces of equipment needed to be repaired, but the work had been scheduled for the week following our inspection. Showers in both facilities were in reasonable condition and privacy screening was in place.
- 3.10** New arrivals received a weekly gym induction, which covered areas such as healthy living, manual handling and safety awareness. During the working day, gym sessions were only available for those undertaking accredited courses, on induction, on the Gateways Substance Misuse programme or who had been referred by health services. However, courses were limited to a level 1 healthy living course and an emergency first aid qualification.
- 3.11** Prisoners had adequate access to the gym – all prisoners could use the gym for recreation on a rota basis at the end of the working day. In our survey, 59% of prisoners said they could go to the gym twice a week or more. Prisoners on the enhanced level of the IEP scheme could attend five gym sessions a week; those on the standard regime could attend three and basic level prisoners had access to two. Prisoners could participate in an outdoor running activity four days a week.
- 3.12** The department had good links with the health care department and substance use team, and tailored sessions were provided for referrals. Sessions could also cater for older prisoners or others with specific needs. Links with the community had become weaker, in part because of the prison's inability to organise outdoor team events or matches.
- 3.13** Prisoners completed feedback questionnaires after they had finished a course, but there was no formal consultation to inform gym delivery. Physical education staff gathered a variety of data, but it was not being analysed to ensure equal access or to promote health and fitness to non-users.

Recommendations

- 3.14 All prisoners, including those on the basic level of the IEP scheme, should have access to a full and consistently delivered regime with sufficient time out of their cells, including on weekends. They should also be able to take an hour's exercise every day.**
- 3.15 An appropriate area should be re-established for outdoor sports and games.**
(Repeated recommendation 3.46)
- 3.16 A wide range of accredited gym courses should be available.**

Education, skills and work activities (Ofsted)¹⁶

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.¹⁷

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

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

Management of education, skills and work

3.18 Despite some improvements in vocational training and prison work, several weaknesses found at the previous inspection remained, including in the planning of teaching and learning. Prison managers had an accurate understanding of the improvements required, but Novus managers were too positive about the standard of their provision and the self-assessment report was inaccurate. This meant their improvement action plan was also inaccurate. Leaders and managers had failed to prevent the Novus provision from declining. The education and vocational training provision, provided by Novus, required improvement (see main recommendation S35).

3.19 Managers had increased the number and range of education courses, vocational training options and prison work activities and they were now sufficient for the population. However, we found around a third of prisoners were locked up when they should have been in lessons or attending their allocated activities (see main recommendation S35). Prisoners who chose to stay in their cells for their own safety, benefited from suitable education and work. No education was offered to prisoners in the segregation unit.

3.20 Prison staff failed to ensure prisoners arrived on time to their activities. Although prisoners' attendance at vocational and prison work activities was good, about a third of prisoners did not attend education lessons regularly. During the inspection, only about half of the prisoners who were expected to be in their lessons attended. Prison staff did not challenge prisoners who took too long to get to their lessons or the few who disturbed sessions by behaving inappropriately outside the classroom (see main recommendation S35). Managers had set pay rates so they did not put prisoners who attended lessons at a financial disadvantage.

¹⁶ 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.

¹⁷ In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

- 3.21** During classroom observations, Novus managers did not identify tutors' strengths or weaknesses accurately, because they did not focus on their impact on prisoners' development or progress. As a result, the observations did not provide tutors with feedback on how to improve. Prison managers also recognised that further improvements in the observation of training in prison work were required.
- 3.22** Tutors had to produce excessively detailed planning documents, such as lesson plans, that did not help them deliver the teaching and learning that individual prisoners required. Too much emphasis on paperwork had diverted tutors' focus away from improving their teaching practices, such as producing good quality resources for their lessons.
- 3.23** Novus managers had not developed suitable arrangements to ensure that lessons were not cancelled when tutors were absent. Tutors covering sessions were not sufficiently familiar with the needs of the prisoners they were teaching, which meant prisoners learned at a slow pace.
- 3.24** Managers had conducted a review of prisoners' educational and skills needs and of employment opportunities in the northwest. They had changed the provision to better meet prisoners' education and training needs; for example, more than half the education courses were in functional skills English and maths. Plans were in place to increase the range of functional skills courses at level 2 and to encourage take-up of this qualification as part of sentence planning. However, this strategy had not been implemented.
- 3.25** Managers had set up appropriate advice and guidance sessions for prisoners to help them find suitable courses and activities during their resettlement. However, too few prisoners used computers for learning or to develop skills that would assist them in finding employment on release.

Recommendations

- 3.26** **Novus managers should evaluate accurately the standard of teaching and learning and ensure that the self-assessment report is accurate. They should concentrate on teaching practices that improve individual prisoners' learning.**
- 3.27** **Learning opportunities should be available for segregated prisoners.**
- 3.28** **Managers should develop prisoners' computer skills to enhance their learning and help them find a job on release.**

Quality of provision

- 3.29** In classrooms, tutors' teaching did not inspire or challenge prisoners. Not all tutors had high enough expectations of prisoners. In most lessons, prisoners of different abilities spent too long completing identical, poor quality handouts. As a result, they lacked motivation and were bored and unenthusiastic – the most able prisoners found the tasks too easy while others struggled.
- 3.30** In about a third of lessons, tutors planned activities that engaged prisoners' interest and enhanced their learning well. For example, in a maths functional skills lesson, the use of cardboard models of differently shaped containers helped prisoners understand the concept of flow rates.

- 3.31** Too often, instructors and tutors did not set learning or developmental targets that related closely enough to individual prisoners' needs or employment plans on release. As a result, prisoners did not know exactly what they were expected to learn and did not develop their knowledge, skills or understanding sufficiently or rapidly enough. The lack of clarity when learning targets were set for prisoners meant that instructors and tutors could not review or record prisoners' progress accurately.
- 3.32** The extra support that prisoners with additional learning needs received was not consistently effective. Instructors and tutors did not pay sufficient attention to planning mentors' deployment in lessons, vocational training or prison work or ensure that prisoners who needed additional support got the most out of it.
- 3.33** Instructors and tutors assessed prisoners' work regularly and gave them immediate useful feedback, for example, on how to use different functions in computer software to create presentations. However, too often in lessons, tutors did not recognise prisoners' spelling, punctuation or grammatical errors. In too many instances, prisoners were not told how they could improve the standard of their work.
- 3.34** Instructors integrated English and maths in vocational training and prison work, but not always successfully. In about a third of sessions, such as in joinery, they helped prisoners put their maths skills into practice. However, too often, instructors did not ensure prisoners developed their use of English and maths in real-life situations or work settings.
- 3.35** Instructors used their industrial experience effectively to coach prisoners so they gained an understanding of their work and learned new practical skills. Prisoners were proud of the skills that they gained in their vocational training sessions and prison work. The individual coaching they received from competent instructors was good and helped them work independently and complete work to a high standard. For example, prisoners working in the kitchens followed instructions for cooking different recipes methodically and adhered to good food hygiene standards.
- 3.36** Instructors and tutors had productive working relationships with prisoners, which helped most of them to stay on task during their lessons and training sessions. Where prisoners displayed challenging behaviour or were reluctant to become involved in learning, tutors worked hard and patiently to persuade them to participate.
- 3.37** Twelve prisoners had participated in a 10-week high-level course run in conjunction with the local university. The Learning Together course explored various aspects of criminology. These prisoners were highly motivated and benefited considerably from the course. Those who completed it gained credit points towards further study.

Recommendations

- 3.38 Tutors should use relevant and good quality resources and handouts that build on prisoners' existing skills and knowledge.**
- 3.39 Tutors and instructors should use information about prisoners' existing skills and employment plans to set them challenging targets. They should review their progress against these targets.**
- 3.40 The extra support that peer mentors provide should be planned effectively so that prisoners who require it always receive effective support.**

- 3.41 Feedback on prisoners' work should be accurate and show prisoners how to improve.**
- 3.42 Tutors and instructors should use tasks and activities that will improve prisoners' skills in English and maths.**

Personal development and behaviour

- 3.43** Too many prisoners did not gain the essential employment skills they needed to help them get a job on release and reduce their risk of reoffending because of poor attendance and punctuality (see main recommendation S35). Tutors included some activities to increase prisoners' understanding of fair treatment, respecting differences and tolerance. However, instructors in prison work and vocational training did not promote these values adequately.
- 3.44** In education and workshops, about 95% of prisoners behaved well. When a minority of prisoners did not behave well, instructors and tutors challenged them to improve their conduct.
- 3.45** Prisoners took part in a wide range of extra activities that developed their personal skills and knowledge. For example, prisoners who were involved in a research project on the life of Alan Turing learned about his contribution to the development of computers.
- 3.46** Prisoners in vocational training and prison work followed good health and safety practices.

Outcomes and achievements

- 3.47** Not enough prisoners progressed at the pace or to the level that reflected their potential. Prisoners who regularly attended their lessons did not make good enough progress because most tutors did not plan work that interested or extended individual prisoners' learning and development.
- 3.48** In 2017–2018, of the prisoners who remained on their courses, including their vocational courses, about 94% achieved their qualifications. Achievements of functional skills qualifications in 2017–2018 had improved and were high, although the number of prisoners on functional skills courses had declined in that year.
- 3.49** In work activities, prisoners did not have a clear understanding of the skills they had developed because instructors did not identify them precisely or record them, which impeded prisoners' ability to demonstrate their achievements to potential employers on release. Prisoners in work activities could not gain qualifications.
- 3.50** Novus managers rightly recognised that prisoners from some minority ethnic groups on education courses in 2017–2018 did not achieve as well as most other prisoners.

Recommendations

- 3.51 Instructors should recognise and record accurately the skills that prisoners develop in prison work.**
- 3.52 Prisoners should always be able to gain qualifications when engaged in work activities.**

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 Work focused on family contact was good. Criminal justice support charity Partners of Prisoners (PoPs), which ran the visitors' centre, provided a good service. Staff welcomed visitors to the centre, provided them with refreshments and offered to interview them in private. Too many lockers in the centre were broken and the carpet needed deep cleaning.
- 4.2 The visits hall was reasonably welcoming. Refreshments were now provided at a small shop instead of through vending machines, and the play area had been refurbished and was supervised by PoPs staff during each session. However, the furniture was still fixed in place. Visits could be booked online or via a booking line, which we reached only after two attempts. Visitors who had booked two one-hour slots no longer had to leave the visits hall in-between each session and prisoners no longer had to wear coloured bibs. However, visitors still had to leave the hall to use the toilet even though facilities were available in the hall. In our survey, 93% of prisoners said staff treated their visitors with respect and 89% said visits started and finished on time.
- 4.3 The number of family days had increased from four to six and was due to increase to eight in the following year. Attendance was good and access was only restricted for those on the basic level of the incentives and earned privileges scheme. The Prison Advice and Care Trust (PACT) delivered useful one-to-one family support to a small number of prisoners. The prison was increasing resources to enhance the provision of family support. Families' involvement in key processes was encouraged and we saw evidence of their participation (see paragraph 1.50). There was no parenting programme.
- 4.4 Some prisoners said there were delays in receiving mail. Staff photocopied all personal mail for security reasons, gave prisoners the copy and filed the original. This compromised the quality of pictures and cards sent in by prisoners' children and families. It was not clear why the itemiser (technology that can detect whether mail is being used to traffic drugs) was not routinely used instead. (See also paragraph 1.41.) There were sufficient phones on the wings.

Recommendations

- 4.5** Visitors should be permitted to use the toilet in the visits hall, subject to suitable security measures.
- 4.6** Family support and a parenting programme should be developed to ensure the needs of the population are met.
- 4.7** The itemiser should be used routinely to scan personal mail so that prisoners do not have to receive photocopies.

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.

- 4.8** The strategic management of prisoners' risks of reoffending had improved since our previous inspection but weaknesses remained. The prison's reducing reoffending strategy was reasonably good. It was informed by consultation with prisoners and a needs analysis. The offender management unit (OMU) policy document clearly explained the responsibilities of the unit and the roles within it.
- 4.9** The OMU, the reducing reoffending department and the treatment team (comprised of psychologists) collaborated well to promote prisoners' rehabilitation.
- 4.10** The OMU was not adequately resourced to fulfil its function. The unit comprised eight offender supervisors, two part-time probation officers and a part-time senior probation officer. The shortage of probation officers with the skills to manage high-risk cases meant that most of the 248 prisoners assessed as high or very high risk of harm were managed by the prison offender supervisors. They lacked the training and confidence to manage these cases consistently well and we saw some examples of poor case management (see main recommendation S36).
- 4.11** The first phase of the new offender management model was being implemented during our inspection¹⁸. All but five key workers had been trained and we saw evidence of better contact with prisoners, although not all prisoners saw their key workers regularly or for long enough. The second phase of the model was to be introduced in 2019 and the prison planned to recruit more probation officers to work in the OMU.
- 4.12** At the start of our inspection, 188 prisoners did not have an up-to-date offender assessment system (OASys) report, which hindered planning and progression. The OMU had a plan to deal with the backlog, but as prisoners regularly arrived from other establishments without an up-to-date report, the numbers remained high (see main recommendation S36).
- 4.13** Some offender supervisors' work was good, but their contact with prisoners was too infrequent and largely reactive. Offender supervisors met prisoners shortly after their arrival. All new arrivals were set the same objectives rather than ones that were tailored to the individual's circumstances and needs. Apart from the initial meeting, offender supervisors

¹⁸ Following a review of offender management in 2015, HMPPS began to introduce a new offender management model from 2017. The new model is being implemented in stages, starting with new prison officer key workers. The second phase, core offender management, and the introduction of prison offender managers is being introduced gradually, from 2019.

usually only saw prisoners when a sentence event dictated, such as a when parole hearings or categorisation reviews were due to take place or a home detention curfew (HDC) application was made.

- 4.14** Procedures for managing HDC were generally good. In the previous six months, the prison had considered 145 applications and approved 124. However, OMU staff confirmed there was a shortage of approved premises for those released on HDC. Three prisoners were held beyond their HDC date because suitable accommodation could not be found for them.
- 4.15** Release on temporary licence (ROTL) was not used to support prisoners' rehabilitation. The prison had published a ROTL policy in January 2018. In the previous six months, seven prisoners had applied for temporary release, but only two had been granted – one to attend a funeral and another for medical purposes.
- 4.16** Management information on the effectiveness of the prison's rehabilitation work remained limited. Systematic information on reoffending rates was not yet available.

Recommendations

- 4.17 Offender supervisors should have regular contact with prisoners proportionate to their level of risk and needs.** (Repeated recommendation 4.21)
- 4.18 Effective use should be made of ROTL for suitable prisoners.** (Repeated recommendation 4.9)

Public protection

- 4.19** Work to protect the public had improved since our previous inspection but remained insufficiently robust. The public protection strategy document was good. Probation officers did not screen all newly arrived prisoners to identify their risks to the public. Instead, case administrators were left to screen prisoners and alert probation officers if they had any concerns. Information reports about prisoners' behaviour in custody were variable – some were excellent and had a lot of detail and analysis of prisoners' risks, others were weak. Processes for assigning the correct multi-agency public protection arrangement (MAPPA) level were often delayed. Case administrators were meant to write to offender managers in the community eight months before a prisoner's release to find out what MAPPA level the prisoner should be placed on. However, during our inspection, this did not happen and letters following up cases were not being sent until three months before the prisoner's release.
- 4.20** The senior probation officer chaired monthly inter-departmental risk management team meetings. A range of representatives from different departments attended. The meeting focused well on high and very high risk cases. Appropriate action was set to address risks and reviewed at subsequent meetings, but the discussion that had led to action being established was not always recorded. Published terms of reference set out the purpose of the meetings.

Recommendations

- 4.21** Probation officers should screen all newly arrived prisoners to identify risks to the public.
- 4.22** MAPPA levels should be identified substantially in advance of release.

Categorisation and transfers

- 4.23** Re-categorisation procedures were sound. In the previous six months, 315 re-categorisation reviews had been held, only three of which were conducted late. Custodial managers held face-to-face reviews with prisoners where necessary. Categorisation paperwork was accurate and detailed. Where prisoners had their re-categorisation refused, OMU staff explained the reasons to the prisoner face-to-face. We were told this had reduced the number of complaints. Category D prisoners were transferred promptly to open conditions.

Good practice

- 4.24** *OMU staff met prisoners in person if their re-categorisation application was refused. This enabled prisoners to gain an understanding of the reasons behind the decision, ask questions and maintain positive communication with offender supervisors.*

Interventions

Expected outcomes:

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

- 4.25** The head of reducing reoffending oversaw the resettlement work of different departments in the prison. He chaired a productive monthly committee meeting where department heads reported on their resettlement work. A useful action plan helped drive improvement.
- 4.26** The range of accredited offending programmes was still too narrow and waiting lists too long. The prison's treatment team only ran two programmes – the Thinking Skills Programme (TSP), a cognitive behavioural intervention to support pro-social behaviour, and Resolve, a medium intensity programme for violent offenders. In the previous year only 53 prisoners had completed one of these courses. Waiting lists were long, for example, 46 prisoners were waiting to have their suitability assessed for the TSP. The next TSP course did not start for another four months and only had four places.
- 4.27** Many prisoners had a history of domestic violence, but there were no interventions to address this need during our inspection. The prison had identified the gap and were working with a third sector organisation to deliver an approved intervention. A three-week programme involving drama was to be introduced in January 2019. The prison also had plans to introduce a low intensity programme to help motivate prisoners to work on their sentence plans.
- 4.28** The community rehabilitation company (CRC) subcontracted Shelter to help prisoners with their accommodation. The work was very good. In the six months before our inspection, 291 prisoners were discharged from the prison, 39% went to permanent or stable accommodation, 57% to short-term accommodation and only 4% to no fixed address. Shelter staff said it was easier to accommodate prisoners in Greater Manchester than in Lancashire.

- 4.29** Shelter also assisted prisoners with their finance benefit and debt problems. They could liaise with creditors, apply for credit checks and help prisoners apply to open bank accounts.

Recommendation

- 4.30** **A range of interventions should be developed to meet the assessed offending behaviour needs of the prison population.** (Repeated recommendation 4.65)

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.

- 4.31** Prisoners' resettlement needs were assessed 12 weeks before their release. The assessments, chaired by a representative from Shelter, were multidisciplinary and involved offender supervisors. The assessments we observed were very good; they accurately identified prisoners' needs and resulted in good action plans. The assessments enabled prisoners who were motivated to change to get help.

Good practice

- 4.32** *Needs assessments conducted 12 weeks before release were multidisciplinary, face-to-face and of high quality. The process ensured that prisoners' needs were accurately identified and their action plans relevant, which helped them prepare for their resettlement into the community.*

Section 5. Summary of recommendations and good practice

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

Main recommendation

To HMPPS and the governor

- 5.1** Local and regional managers should ensure that weaknesses in sentence planning and risk management are effectively addressed. All prisoners should have an up-to-date assessment report to inform sentence planning and risk reduction work, and only staff with the necessary skills and training should manage high risk cases. (S36)

Main recommendations

To the governor

- 5.2** The prison should robustly govern the use of force, including special accommodation, to help ensure force is employed proportionately and only as a last resort. (S34)
- 5.3** Prison and Novus leaders and managers should exercise robust leadership and management of education, skills and work, to ensure that identified weaknesses are addressed, especially ongoing problems with prisoners attending their allocated activities regularly and on time. Reliable arrangements should be introduced to ensure that prisoners' learning is not interrupted when tutors are absent. (S35)

Recommendations

To the governor

Early days in custody

- 5.4** Strip-searching of prisoners on escorted journeys from the prison should be based on a well-evidenced assessment of the risks posed by the individual. (1.9)
- 5.5** Prisoners in the first night centre should have access to a full regime. (1.10)

Managing behaviour

- 5.6** Vulnerable prisoners, particularly those who isolate themselves, should receive individual support that seeks to understand and respond to the causes of their fears, and that enables them to participate in a range of activities out of their cells. (1.18)
- 5.7** Disciplinary charges should be thoroughly investigated and minor infringements of prison rules should be dealt with informally. (1.22)
- 5.8** Segregation reviews should be meaningful and should involve the prisoner in a forum consisting of staff from relevant departments and their unit. Reintegration plans should be actively promoted. (1.32, repeated recommendation 1.72)

Security

- 5.9** Action to address security objectives should be specific and respond to up-to-date intelligence. (1.44)
- 5.10** Intelligence reports should be acted on swiftly and recommended action, including intelligence-led searches, target and suspicion drug tests, conducted promptly. (1.45)

Safeguarding

- 5.11** A comprehensive decision log should be completed following the segregation of a prisoner who is at risk of self-harm. It should include sufficient information and justify their segregation. (1.51)

Daily life

- 5.12** Cells designed to hold one prisoner should not be used to hold two. (2.7, repeated recommendation 2.10)
- 5.13** All showers should be in good working order and adequately screened. (2.8)
- 5.14** Breakfast should be provided on the day it is to be eaten, lunch should not be served before noon and the evening meal not before 5pm. (2.16)
- 5.15** Prison officers should supervise serveries effectively to ensure all prisoners receive equitable portions. (2.17)
- 5.16** The application process should be efficiently tracked and managed. (2.26, repeated recommendation 2.12)
- 5.17** Responses to all complaints should be timely. (2.27)
- 5.18** Legal representatives should be able to book legal visits reasonably promptly. (2.28)
- 5.19** The prison should broaden the use of the video link facility to include court hearings and other legal consultations. (2.29)

Equality, diversity and faith

- 5.20** The needs of prisoners with protected characteristics should be identified and met promptly through monitoring, regular and direct consultation and effective use of prisoner representatives. (2.36)
- 5.21** All disabled prisoners who need them should have a multidisciplinary support plan and a paid carer. (2.42)
- 5.22** Unit staff, including those on night duty, should be familiar with support and evacuation plans for disabled prisoners. (2.43)

Health, well-being and social care

- 5.23** Barrier protection such as condoms and sexual advice should be available to prisoners while in prison and on release. (2.55)

- 5.24** Non-attendance rates and waiting times should be assertively managed; the wait for a routine GP appointment should not exceed two weeks. (2.65)
- 5.25** A local pathway should be developed for patients requiring end of life care. (2.66)
- 5.26** The prison should develop a memorandum of understanding for social care with the local authority and social care provider. (2.71)
- 5.27** Prisoners' social care and occupational therapy needs should be assessed promptly. (2.72)
- 5.28** Prisoners requiring care in a mental health hospital should be transferred within the current transfer guideline. (2.78)
- 5.29** Sufficient, flexible clinical substance use treatment services should be available to provide regular treatment reviews and coordinate the care of prisoners with complex needs. (2.86)
- 5.30** Prison officers should supervise prisoners effectively while medication is being administered and collected in the health centre to minimise potential bullying and the diversion of supplies. (2.97)
- 5.31** Professional pharmacist services should be extended to include pharmacist-led clinics and medicine use reviews, and access to the pharmacist should be advertised. (2.98)
- 5.32** Prisoners should have access to routine dental appointments within six weeks. (2.101, repeated recommendation 2.91)

Time out of cell

- 5.33** All prisoners, including those on the basic level of the IEP scheme, should have access to a full and consistently delivered regime with sufficient time out of their cells, including on weekends. They should also be able to take an hour's exercise every day. (3.14)
- 5.34** An appropriate area should be re-established for outdoor sports and games. (3.15, repeated recommendation 3.46)
- 5.35** A wide range of accredited gym courses should be available. (3.16)

Education, skills and work activities

- 5.36** Novus managers should evaluate accurately the standard of teaching and learning and ensure that the self-assessment report is accurate. They should concentrate on teaching practices that improve individual prisoners' learning. (3.26)
- 5.37** Learning opportunities should be available for segregated prisoners. (3.27)
- 5.38** Managers should develop prisoners' computer skills to enhance their learning and help them find a job on release. (3.28)
- 5.39** Tutors should use relevant and good quality resources and handouts that build on prisoners' existing skills and knowledge. (3.38)
- 5.40** Tutors and instructors should use information about prisoners' existing skills and employment plans to set them challenging targets. They should review their progress against these targets. (3.39)

- 5.41** The extra support that peer mentors provide should be planned effectively so that prisoners who require it always receive effective support. (3.40)
- 5.42** Feedback on prisoners' work should be accurate and show prisoners how to improve. (3.41)
- 5.43** Tutors and instructors should use tasks and activities that will improve prisoners' skills in English and maths. (3.42)
- 5.44** Instructors should recognise and record accurately the skills that prisoners develop in prison work. (3.51)
- 5.45** Prisoners should always be able to gain qualifications when engaged in work activities. (3.52)

Children and families and contact with the outside world

- 5.46** Visitors should be permitted to use the toilet in the visits hall, subject to suitable security measures. (4.5)
- 5.47** Family support and a parenting programme should be developed to ensure the needs of the population are met. (4.6)
- 5.48** The itemiser should be used routinely to scan personal mail so that prisoners do not have to receive photocopies. (4.7)

Reducing risk, rehabilitation and progression

- 5.49** Offender supervisors should have regular contact with prisoners proportionate to their level of risk and needs. (4.17, repeated recommendation 4.21)
- 5.50** Effective use should be made of ROTL for suitable prisoners. (4.18, repeated recommendation 4.9)

Public protection

- 5.51** Probation officers should screen all newly arrived prisoners to identify risks to the public. (4.21)
- 5.52** MAPPA levels should be identified substantially in advance of release. (4.22)

Interventions

- 5.53** A range of interventions should be developed to meet the assessed offending behaviour needs of the prison population. (4.30, repeated recommendation 4.65)

Examples of good practice

- 5.54** Managers arranged for new prisoners to receive a first shop order on the day of their arrival. This reduced stress and the risk of loans and associated bullying. (1.11)
- 5.55** The Recovery in the Community programme offered prisoners with drug or alcohol problems a good level of assistance with their reintegration and release, and ensured that they continued to receive transitional support in the community. (2.87)

- 5.56** OMU staff met prisoners in person if their re-categorisation application was refused. This enabled prisoners to gain an understanding of the reasons behind the decision, ask questions and maintain positive communication with offender supervisors. (4.24)

- 5.57** Needs assessments conducted 12 weeks before release were multidisciplinary, face-to-face and of high quality. The process ensured that prisoners' needs were accurately identified and their action plans relevant, which helped them prepare for their resettlement into the community. (4.32)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy chief inspector
Hindpal Singh Bhui	Team leader
Bev Alden	Inspector
Colin Carroll	Inspector
Paddy Doyle	Inspector
Michael Dunkley	Inspector
Deri Hughes-Roberts	Inspector
Gordon Riach	Inspector
Kam Sarai	Inspector
Esra Sari	Inspector
Emma Sunley	Inspector
Charli Bradley	Researcher
Emma Seymour	Researcher
Patricia Taflan	Researcher
Paul Tarbuck	Lead health and social care inspector
Sigrid Engelen	Health and social care inspector
Rachel O'Callaghan	Pharmacist
Dayni Johnson	Care Quality Commission inspector
Ken Fisher	Ofsted inspector
Darryl Jones	Ofsted inspector
Shahram Safavi	Ofsted inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2015, most prisoners' journeys to the prison were short. Reception and first night arrangements were good but induction processes needed to be improved. Most prisoners felt safe and fewer prisoners than at comparator prisons said they were victimised. Some safer custody processes were underdeveloped. Prisoners at risk of self-harm were well cared for but arrangements for adult safeguarding needed to be developed. Security arrangements were generally proportionate. The incentives and earned privileges (IEP) scheme promoted positive behaviour. The availability of drugs was high and the prison was taking a robust approach to the significant challenge of new psychoactive substances (NPSs) (new drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life threatening effects). The number of adjudications was high but the process was reasonably well managed. Force was used proportionately. Relationships in the segregation unit were good and the general environment reasonable but exercise yards were grim. The regime and reintegration planning needed to be improved. Substance misuse support was improving. Outcomes for prisoners were reasonably good against this healthy prison test.

Recommendations

All property should arrive with prisoners on transfer. (1.5)

Achieved

Prisoners should only be handcuffed subject to an individual risk assessment. (1.6)

Achieved

There should be arrangements to process prisoners arriving during the lunch period. (1.7)

Not achieved

Induction should ensure prisoners are equipped with the information they need about the prison. (1.13)

Achieved

An effective anti-bullying system should be in place to monitor and deter prisoners suspected of involvement in violence and to support victims. (1.23)

Achieved

Prisoners subject to ACCT procedures should have a consistent case manager and care plans should contain specific, measurable, achievable, realistic and time-bound objectives. (1.30)

Partially achieved

A senior manager should identify and record the exceptional circumstances to justify a prisoner on an ACCT document being held in segregation. (1.31)

Not achieved

The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes and to satisfy the requirements of the Care Act 2014. (1.35)

Achieved

Searches should be carried out promptly once the need is identified. (1.45)

Not achieved

Facilities in the Grizedale unit should be improved to provide prisoners on the enhanced regime with greater incentives. (1.52)

No longer relevant

The disciplinary approach adopted should be proportionate to the seriousness of the alleged offence. (1.59)

Not achieved

Segregated prisoners should be able to exercise in clean open areas. (1.71)

Not achieved

Segregation reviews should be meaningful and should involve the prisoner in a forum consisting of staff from relevant departments and their unit, and reintegration plans should be actively promoted where possible. (1.72)

Not achieved (recommendation repeated, 1.32)

The Inspire service should deploy resources to reduce the length of time prisoners have to wait between induction and triage. (1.80)

Achieved

Prescribing regimes for drug dependency should be flexible and tailored to the individual and reflect national guidance. (1.81)

Not achieved

The establishment should ensure that all administration of medication substance misuse treatment is adequately supervised by suitably trained officers. (1.82)

Partially achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2015, living conditions were good although some areas needed redecoration or refurbishment. Single cells were used for two but the units were well designed. Prisoners were very positive about relationships with staff and the personal officer scheme worked well. Equalities and diversity work needed attention, but many prisoners reported that outcomes were reasonable. Faith provision was very good. Complaints were well managed but legal services were underdeveloped. Health services were reasonable overall. The food was good and canteen arrangements were adequate. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

The needs of prisoners with protected characteristics should be identified and met promptly through monitoring, regular and direct consultation, effective use of prisoner representatives, individual assessment and when needed effective care planning. (S38)

Not achieved

Recommendations

All showers should be screened, kept in good condition and supplied with constant water pressure and temperature. (2.8)

Not achieved

All cells should be provided with lockable cabinets. (2.9)

Not achieved

Cells designed to hold one prisoner should not be used to hold two. (2.10)

Not achieved (recommendation repeated, 2.7)

Prisoners should be able to receive clothing sent in through the post and have quicker access to their stored property. (2.11)

Not achieved

The application process should be efficiently tracked and managed. (2.12)

Not achieved (recommendation repeated, 2.26)

The prisoner consultation process should ensure that effective and timely action is taken to resolve prisoner concerns. (2.17)

Partially achieved

The prison should develop and maintain a foreign national prisoner action plan based on a regular review of the needs of this group. (2.34)

Achieved

The Home Office should serve all decisions to detain a prisoner at least one month before the end of a prisoner's sentence. (2.35)

Achieved

There should be a paid carer scheme for prisoners with disabilities and the role of carers should be clearly defined. (2.36)

Not achieved

Older prisoners and those with disabilities should, where necessary, have an up-to-date PEEP and a multidisciplinary support plan with which all unit staff, including those on night duty, should be familiar. (2.37)

Not achieved

Custody staff should all be trained in basic life support and the use of the automated defibrillator. (2.63)

Partially achieved

The complaints system should maintain medical confidentiality and prisoners should have access to information on how to make a health complaint. (2.64)

Achieved

Waiting times for primary care services including the GP should not exceed clinically acceptable waiting times in the community. (2.72)

Not achieved

The prison should have adequate escort arrangements for external hospital appointments to avoid unnecessary cancellations and meet the health care needs of the prison population. (2.73)

Achieved

Prisoners should have access to a complete pharmaceutical service, including pharmacy-led medicine use reviews and audits. (2.84)

Not achieved

Custody staff should be present when medicines are being dispensed to manage queues and ensure confidentiality. (2.85)

Partially achieved

In-possession risk assessments - which consider the risk of the patient having the drug in possession, and the risks of trading and diversion - should be completed consistently and all staff should have access to them. (2.86)

Achieved

Security during the transportation of medicines within the prison should be improved. (2.87)

Achieved

Prisoners should have access to routine dental appointments within six weeks. (2.91)

Not achieved (recommendation repeated, 2.101)

Prisoners should have prompt access to a full range of support for mild and moderate mental health problems, including counselling, clinical psychology and group therapies. (2.99)

Achieved

Breakfast should be issued on the day it is to be eaten. (2.105)

Not achieved

Lunch should not be served before 12 noon and the evening meal not before 5pm. (2.106)

Not achieved

Serveries should be adequately supervised. (2.107)

Not achieved

New arrivals should be able to submit orders for the shop within their first 24 hours at the prison. (2.111)

Achieved

There should be no administration charge for catalogue orders. (2.112)

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, far too many prisoners were locked up during the working day and access to outside exercise was restricted. While there was a plan to provide more work for prisoners the current range of activities did not reflect prisoners' needs. Too many activity places were not being used. Personal development was effective and in education, there was also a good focus on prisoners developing employability skills. The standard of work was generally good, although success rates on a small number of functional skills courses needed to improve. Achievements of accredited qualifications for those in activities were good. The library and gym provided some good opportunities. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

The prison should ensure there are sufficient prison work opportunities for the population and that work skills prisoners develop are recognised and recorded. The available activity places should be used fully. (S39)

Partially achieved

Recommendations

The full prison regime should be provided, more prisoners should be unlocked during the working day and men should have at least an hour a day of outside exercise. (3.7)

Not achieved

The environment in exercise yards should be improved and they should be better equipped. (3.8)

Achieved

All areas of the OLASS provision identified for improvement through teaching and learning observations should be dealt with swiftly. (3.16)

Not achieved

Quality improvement arrangements should be developed for the non-OLASS provision particularly for the observation of teaching, learning and coaching. (3.17)

Partially achieved

The overall quality of individual learning plans should be improved to ensure targets are clear and meaningful. (3.28)

Not achieved

Feedback from teachers should provide prisoners with clear information on what they need to do to progress. (3.29)

Partially achieved

Library sessions should be better linked to lesson plans and classroom learning. (3.30)

No longer relevant

The achievement of qualifications in under-performing courses should be improved. (3.32)

Partially achieved

Managers should record, monitor and analyse the use of the library by individual prisoners in order to maximise the use of the facility by various groups of prisoners. (3.37)

Achieved

Showers in the new gym should be re-decorated and waterproofed to ensure the facility is usable. (3.44)

Achieved

A management and monitoring system should be introduced for the cardiovascular equipment in the units and all equipment should be kept in good repair. (3.45)

Not achieved

An appropriate area should be re-established for outdoor sports and games. (3.46)

Not achieved (recommendation repeated, 3.15)

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, resettlement and offender management were in transition and some arrangements did not meet the needs of the new adult population. Joint work was developing. Offender management work was too mixed; many assessments had not been completed and some were poor; and contact with prisoners was generally insufficient. Public protection arrangements required urgent attention. Reintegration work was reasonable and support in most of the reducing reoffending pathways was good. Efforts were being made to increase the range of group-based programmes offered and expand support to help prisoners maintain contact with their children and families. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

Offender management work should ensure that all prisoners have a good quality and up-to-date assessment to inform sentence planning and risk reduction work. (S40)

Not achieved

The prison should introduce effective management oversight of all public protection procedures. All prisoners should be reviewed for MAPPA eligibility and their potential risks to children, and public protection issues should be correctly recorded on P-Nomis. (S41)

Partially achieved

Recommendations

The reducing reoffending strategy should be updated to ensure the resettlement needs of the population have been identified and a suitable range of services are provided and monitored. (4.8)

Achieved

Effective use should be made of ROTL for suitable prisoners. (4.9)

Not achieved (recommendation repeated, 4.18)

Offender supervisors should have regular contact with prisoners proportionate to their level of risk and needs. (4.21)

Not achieved (recommendation repeated, 4.17)

IRMT arrangements, including terms of reference and meeting minutes, should be revised to ensure all high risk cases are fully considered, record keeping is comprehensive and MAPPA risk levels are identified in a timely way pre-release. (4.28)

Partially achieved

Categorisation reviews should be undertaken at appropriate times and prisoners should be invited to contribute to and attend boards. (4.31)

Achieved

The prison should ensure that the visitors' centre can comfortably manage the significant increase in children attending visits sessions. (4.54)

Achieved

There should be a greater variety of refreshments in the visits hall. (4.55)

Achieved

Family support provision should be developed to ensure it meets the needs of the new prisoner population. (4.56)

Partially achieved

A range of interventions should be developed to meet the assessed offending behaviour needs of the prison population. (4.65)

Not achieved (recommendation repeated, 4.30)

Appendix III: Photographs



External view of house blocks



House block



Cell



House block



House block



Education centre garden

Appendix IV: Prison population profile

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

Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced		465	85.3
Recall		80	14.7
Convicted unsentenced			
Remand			
Civil prisoners			
Detainees			
Total		545	

Sentence	18–20 yr olds	21 and over	%
Unsentenced		1	
Less than 6 months		3	0.2
6 months to less than 12 months		13	0.6
12 months to less than 2 years		45	8.3
2 years to less than 4 years		200	36.7
4 years to less than 10 years		227	41.7
10 years and over (not life)		20	3.7
ISPP (indeterminate sentence for public protection)		21	3.9
Life		15	6.6
Total		545	

Age	Number of prisoners	%
Please state minimum age here: 21		
Under 21 years		
21 years to 29 years	234	42.9
30 years to 39 years	181	33.2
40 years to 49 years	97	17.8
50 years to 59 years	26	4.8
60 years to 69 years	6	1.1
70 plus years	1	0.2
Please state maximum age here: 80		
Total		

Nationality	18–20 yr olds	21 and over	%
British		529	97.1
Foreign nationals		16	2.9
Total		545	

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced		1	
Uncategorised sentenced			
Category A			
Category B			
Category C		524	96.1
Category D		20	3.7
Other			
Total		545	

Ethnicity	18–20 yr olds	21 and over	%
White			
British		446	81.8
Irish		4	0.7
Gypsy/Irish Traveller		2	0.4
Other white		10	1.8
Mixed			
White and black Caribbean		11	2.0
White and black African		2	0.4
White and Asian		1	0.2
Other mixed		4	0.7
Asian or Asian British			
Indian		4	0.7
Pakistani		38	7.0
Bangladeshi		1	0.2
Chinese		0	0
Other Asian		7	1.3
Black or black British			
Caribbean		7	1.3
African		3	0.6
Other black		3	0.6
Other ethnic group			
Arab		0	0
Other ethnic group		2	0.4
Not stated		0	0
Total		545	

Religion	18–20 yr olds	21 and over	%
Baptist		0	0
Church of England		106	19.4
Roman Catholic		157	28.8
Other Christian denominations		47	8.6
Muslim		65	11.9
Sikh		2	0.4
Hindu		0	0
Buddhist		5	0.9
Jewish		1	0.2
Other		2	0.4
No religion		160	29.4
Total		545	

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month			80	14.7
1 month to 3 months			148	27.2
3 months to 6 months			135	24.8
6 months to 1 year			118	21.7
1 year to 2 years			50	9.2
2 years to 4 years			13	2.4
4 years or more			0	0
Total			544	99.8

Sentenced prisoners only

	18–20 yr olds	21 and over	%
Foreign nationals detained post sentence expiry		0	
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions).		174	
Total			

Main offence	18–20 yr olds	21 and over	%
Violence against the person		118	
Sexual offences		0	
Burglary		110	
Robbery		82	
Theft and handling		6	
Fraud and forgery		5	
Drugs offences		111	
Other offences		113	
Civil offences		0	
Offence not recorded/holding warrant		0	
Total		545	

Appendix V: Prisoner survey methodology and results

Prisoner survey methodology

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

HM Inspectorate of Prisons (HMI Prisons) researchers have developed a self-completion questionnaire to support HMI Prisons' *Expectations*. The questionnaire consists of structured questions covering the prisoner 'journey' from reception to release, together with demographic and background questions which enable us to compare responses from different sub-groups of the prisoner population. There are also three open questions at the end of the questionnaire which allow prisoners to express, in their own words, what they find most positive and negative about the prison.¹⁹

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

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

Sampling

On the day of the survey a stratified random sample is drawn by HMI Prisons researchers from a P-NOMIS prisoner population printout ordered by cell location. Using a power calculation, HMI Prisons researchers calculate the minimum sample size required to ensure that the survey findings are representative of the entire population of the establishment.²⁰

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.²¹ 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 29 October 2018 the prisoner population at HMP Lancaster Farms was 543. Using the sampling method described above, questionnaires were distributed to 197 prisoners. We received a total of 156 completed questionnaires, a response rate of 79%. Twenty-one prisoners declined to participate in the survey and 20 questionnaires were either not returned at all, or returned blank.

¹⁹ Qualitative analysis of these written comments is undertaken by HMI Prisons researchers and used by inspectors.

²⁰ 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments).

²¹ 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 Lancaster Farms. For the comparator analyses, each question was reformulated into a binary ‘yes/no’ format and affirmative responses compared.²² Missing responses have been excluded from all analyses and for some questions, responses from a sub-group of the sample are reported (as indicated in the data).

Full survey results

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

Responses from HMP Lancaster Farms 2018²³ compared with those from other HMI Prisons surveys²⁴

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

Comparisons between different residential locations within HMP Lancaster Farms in 2018

- Responses of prisoners on health and well-being wing (Coniston 1) compared with those from the rest of the establishment.

Comparisons between sub-populations of prisoners within HMP Lancaster Farms in 2018²⁵

- White prisoners’ responses compared with those of prisoners from black or minority ethnic groups.
- Muslim prisoners’ responses compared with those of non-Muslim prisoners.
- Disabled prisoners’ responses compared with those who do not have a disability.
- Responses of prisoners with mental health problems compared with those who do not have mental health problems.
- Responses of prisoners aged 25 and under compared with those over 25.

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group.²⁶

In the comparator analyses, statistically significant differences are indicated by shading.²⁷ 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

²² Using the Chi-square test (or Fisher’s exact test if there are fewer than five responses in a group).

²³ Percentages shown in the full breakdown may differ slightly from those shown in the comparative analyses. This is because the data has been weighted to enable valid statistical comparison between establishments.

²⁴ 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.

²⁵ These analyses are carried out on summary data from selected survey questions only.

²⁶ A minimum of 10 responses which must also represent at least 10% of the total response.

²⁷ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. In order to appropriately adjust p-values in light of multiple testing, $p < 0.01$ is considered statistically significant for all comparisons undertaken. This means there is only a 1% likelihood that the difference is due to chance.

the two results is not statistically significant and may have occurred by chance. Grey shading indicates that there is no valid comparative data for that question.

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

Survey results

Background information

I.1	What wing or houseblock are you currently living on?	
	Buttermere	34 (22%)
	Coniston 1 (Health and Wellbeing unit)	22 (14%)
	Coniston 2	18 (12%)
	Derwent	36 (23%)
	Grizedale	6 (4%)
	Windemere.....	38 (24%)
	Ullswater (Segregation unit).....	2 (1%)
I.2	How old are you?	
	Under 21	1 (1%)
	21 - 25.....	27 (18%)
	26 - 29.....	20 (13%)
	30 - 39.....	59 (38%)
	40 - 49.....	33 (21%)
	50 - 59.....	10 (6%)
	60 - 69.....	3 (2%)
	70 or over	1 (1%)
I.3	What is your ethnic group?	
	White - English/ Welsh/ Scottish/ Northern Irish/ British	121(78%)
	White - Irish.....	6 (4%)
	White - Gypsy or Irish Traveller.....	2 (1%)
	White - any other White background	2 (1%)
	Mixed - White and Black Caribbean	7 (5%)
	Mixed - White and Black African	0 (0%)
	Mixed - White and Asian	1 (1%)
	Mixed - any other Mixed ethnic background	0 (0%)
	Asian/ Asian British - Indian.....	0 (0%)
	Asian/ Asian British - Pakistani.....	11(7%)
	Asian/ Asian British - Bangladeshi.....	2 (1%)
	Asian/ Asian British - Chinese.....	0 (0%)
	Asian - any other Asian Background	1 (1%)
	Black/ Black British - Caribbean.....	0 (0%)
	Black/ Black British - African	1 (1%)
	Black - any other Black/ African/ Caribbean background.....	0 (0%)
	Arab.....	1 (1%)
	Any other ethnic group	0 (0%)
I.4	How long have you been in this prison?	
	Less than 6 months.....	69 (45%)
	6 months or more	85 (55%)
I.5	Are you currently serving a sentence?	
	Yes	128 (83%)
	Yes - on recall	27 (17%)
	No - on remand or awaiting sentence.....	0 (0%)
	No - immigration detainee.....	0 (0%)

1.6	How long is your sentence?	
	Less than 6 months.....	5 (3%)
	6 months to less than 1 year.....	8 (5%)
	1 year to less than 4 years.....	62 (40%)
	4 years to less than 10 years.....	49 (32%)
	10 years or more.....	11 (7%)
	IPP (indeterminate sentence for public protection).....	11 (7%)
	Life.....	9 (6%)
	Not currently serving a sentence.....	0 (0%)

Arrival and reception

2.1	Were you given up-to-date information about this prison before you came here?	
	Yes.....	25 (16%)
	No.....	118 (76%)
	Don't remember.....	12 (8%)
2.2	When you arrived at this prison, how long did you spend in reception?	
	Less than 2 hours.....	119 (77%)
	2 hours or more.....	25 (16%)
	Don't remember.....	11 (7%)
2.3	When you were searched in reception, was this done in a respectful way?	
	Yes.....	139 (90%)
	No.....	11 (7%)
	Don't remember.....	5 (3%)
2.4	Overall, how were you treated in reception?	
	Very well.....	91 (58%)
	Quite well.....	57 (37%)
	Quite badly.....	6 (4%)
	Very badly.....	2 (1%)
	Don't remember.....	0 (0%)
2.5	When you first arrived here, did you have any of the following problems?	
	Problems getting phone numbers.....	15 (10%)
	Contacting family.....	27 (18%)
	Arranging care for children or other dependants.....	1 (1%)
	Contacting employers.....	0 (0%)
	Money worries.....	19 (13%)
	Housing worries.....	9 (6%)
	Feeling depressed.....	34 (23%)
	Feeling suicidal.....	8 (5%)
	Other mental health problems.....	31 (21%)
	Physical health problems.....	14 (9%)
	Drug or alcohol problems (e.g. withdrawal).....	14 (9%)
	Problems getting medication.....	22 (15%)
	Needing protection from other prisoners.....	5 (3%)
	Lost or delayed property.....	20 (13%)
	Other problems.....	10 (7%)
	Did not have any problems.....	63 (42%)
2.6	Did staff help you to deal with these problems when you first arrived?	
	Yes.....	42 (28%)
	No.....	44 (30%)
	Did not have any problems when I first arrived.....	63 (42%)

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.....	123 (81%)
Toiletries / other basic items	79 (52%)
A shower.....	99 (66%)
A free phone call.....	71 (47%)
Something to eat.....	121 (80%)
The chance to see someone from health care	88 (58%)
The chance to talk to a Listener or Samaritans.....	41 (27%)
Support from another prisoner (e.g. Insider or buddy).....	35 (23%)
Wasn't offered any of these things	4 (3%)

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

Very clean	24 (16%)
Quite clean	68 (44%)
Quite dirty	36 (23%)
Very dirty	25 (16%)
Don't remember	1 (1%)

3.3 Did you feel safe on your first night here?

Yes.....	138 (90%)
No.....	13 (8%)
Don't remember	2 (1%)

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

	Yes	No	Don't remember
Access to the prison shop / canteen?	87 (58%)	58 (38%)	6 (4%)
Free PIN phone credit?	74 (50%)	67 (46%)	6 (4%)
Numbers put on your PIN phone?	80 (58%)	48 (35%)	9 (7%)

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

Yes.....	105 (69%)
No.....	40 (26%)
Have not had an induction.....	7 (5%)

On the wing

4.1 Are you in a cell on your own?

Yes.....	125 (82%)
No, I'm in a shared cell or dormitory.....	28 (18%)

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

Yes.....	65 (44%)
No.....	60 (40%)
Don't know.....	24 (16%)
Don't have a cell call bell.....	0 (0%)

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

	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	109 (71%)	43 (28%)	1 (1%)
Can you shower every day?	146 (95%)	7 (5%)	0 (0%)
Do you have clean sheets every week?	97 (64%)	50 (33%)	5 (3%)
Do you get cell cleaning materials every week?	90 (60%)	54 (36%)	5 (3%)
Is it normally quiet enough for you to relax or sleep at night?	110 (75%)	35 (24%)	1 (1%)
Can you get your stored property if you need it?	38 (26%)	56 (39%)	51 (35%)

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

Very clean	16 (10%)
Quite clean	80 (52%)
Quite dirty	48 (31%)
Very dirty	9 (6%)

Food and canteen

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

Very good	18 (12%)
Quite good	87 (56%)
Quite bad	38 (25%)
Very bad	11 (7%)

5.2 Do you get enough to eat at mealtimes?

Always	33 (21%)
Most of the time	56 (36%)
Some of the time	49 (32%)
Never	17 (11%)

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

Yes	103 (69%)
No	45 (30%)
Don't know	2 (1%)

Relationships with staff

6.1 Do most staff here treat you with respect?

Yes	127 (84%)
No	24 (16%)

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

Yes	119 (78%)
No	34 (22%)

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

Yes	62 (41%)
No	91 (59%)

6.4	How helpful is your personal or named officer?	
	Very helpful.....	34 (22%)
	Quite helpful.....	40 (26%)
	Not very helpful	11 (7%)
	Not at all helpful.....	20 (13%)
	Don't know.....	26 (17%)
	Don't have a personal / named officer	22 (14%)
6.5	How often do you see prison governors, directors or senior managers talking to prisoners?	
	Regularly.....	19 (12%)
	Sometimes.....	32 (21%)
	Hardly ever.....	89 (58%)
	Don't know.....	13 (8%)
6.6	Do you feel that you are treated as an individual in this prison?	
	Yes.....	94 (64%)
	No.....	54 (36%)
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	
	Yes, and things sometimes change.....	30 (19%)
	Yes, but things don't change.....	46 (30%)
	No.....	47 (31%)
	Don't know.....	31 (20%)

Faith

7.1	What is your religion?	
	No religion.....	52 (34%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	83 (54%)
	Buddhist.....	2 (1%)
	Hindu.....	0 (0%)
	Jewish	0 (0%)
	Muslim.....	17 (11%)
	Sikh	0 (0%)
	Other	0 (0%)
7.2	Are your religious beliefs respected here?	
	Yes.....	70 (46%)
	No.....	12 (8%)
	Don't know.....	18 (12%)
	Not applicable (no religion).....	52 (34%)
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	
	Yes.....	76 (50%)
	No.....	9 (6%)
	Don't know.....	16 (10%)
	Not applicable (no religion).....	52 (34%)
7.4	Are you able to attend religious services, if you want to?	
	Yes.....	87 (56%)
	No.....	10 (6%)
	Don't know.....	5 (3%)
	Not applicable (no religion).....	52 (34%)

Contact with family and friends

8.1	Have staff here encouraged you to keep in touch with your family / friends?	
	Yes	52 (34%)
	No	102 (66%)
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	68 (45%)
	No	83 (55%)
8.3	Are you able to use a phone every day (if you have credit)?	
	Yes	142 (93%)
	No	10 (7%)
8.4	How easy or difficult is it for your family and friends to get here?	
	Very easy	14 (10%)
	Quite easy	45 (31%)
	Quite difficult	36 (24%)
	Very difficult	43 (29%)
	Don't know	9 (6%)
8.5	How often do you have visits from family or friends?	
	More than once a week	4 (3%)
	About once a week	20 (13%)
	Less than once a week	67 (44%)
	Not applicable (don't get visits)	60 (40%)
8.6	Do visits usually start and finish on time?	
	Yes	79 (89%)
	No	10 (11%)
8.7	Are your visitors usually treated respectfully by staff?	
	Yes	79 (93%)
	No	6 (7%)

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	103 (69%)
	Yes, but these times are not usually kept to	39 (26%)
	No	8 (5%)
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	33 (22%)
	2 to 6 hours	50 (34%)
	6 to 10 hours	46 (31%)
	10 hours or more	8 (5%)
	Don't know	11 (7%)

9.3	How long do you usually spend out of your cell on a typical Saturday or Sunday?	
	Less than 2 hours	55 (37%)
	2 to 6 hours.....	83 (56%)
	6 to 10 hours	4 (3%)
	10 hours or more	0 (0%)
	Don't know.....	7 (5%)
9.4	How many days in a typical week do you have time to do domestics (shower, clean cell, use the wing phones etc.)?	
	None	4 (3%)
	1 or 2	15 (10%)
	3 to 5.....	24 (16%)
	More than 5.....	100 (67%)
	Don't know.....	7 (5%)
9.5	How many days in a typical week do you get association, if you want it?	
	None	9 (6%)
	1 or 2	5 (3%)
	3 to 5.....	19 (13%)
	More than 5.....	114 (77%)
	Don't know.....	2 (1%)
9.6	How many days in a typical week could you go outside for exercise, if you wanted to?	
	None	19 (13%)
	1 or 2	13 (9%)
	3 to 5.....	39 (27%)
	More than 5.....	62 (42%)
	Don't know.....	14 (10%)
9.7	Typically, how often do you go to the gym?	
	Twice a week or more	87 (59%)
	About once a week.....	8 (5%)
	Less than once a week.....	3 (2%)
	Never	49 (33%)
9.8	Typically, how often do you go to the library?	
	Twice a week or more	17 (11%)
	About once a week.....	53 (36%)
	Less than once a week.....	26 (18%)
	Never	52 (35%)
9.9	Does the library have a wide enough range of materials to meet your needs?	
	Yes	56 (40%)
	No.....	32 (23%)
	Don't use the library	52 (37%)

Applications, complaints and legal rights

10.1	Is it easy for you to make an application?	
	Yes	120 (81%)
	No.....	25 (17%)
	Don't know.....	3 (2%)

I0.2	If you have made any applications here, please answer the questions below:				
		Yes	No	Not made any applications	
	Are applications usually dealt with fairly?	76 (55%)	46 (34%)	15 (11%)	
	Are applications usually dealt with within 7 days?	46 (34%)	73 (54%)	15 (11%)	
I0.3	Is it easy for you to make a complaint?				
	Yes			99 (67%)	
	No			28 (19%)	
	Don't know.....			21 (14%)	
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?	32 (23%)	57 (41%)	51 (36%)	
	Are complaints usually dealt with within 7 days?	24 (18%)	61 (45%)	51 (38%)	
I0.5	Have you ever been prevented from making a complaint here when you wanted to?				
	Yes			25 (17%)	
	No			83 (57%)	
	Not wanted to make a complaint			38 (26%)	
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?	55 (38%)	34 (23%)	27 (18%)	30 (21%)
	Attend legal visits?	53 (38%)	21 (15%)	34 (24%)	33 (23%)
	Get bail information?	18 (13%)	19 (14%)	48 (35%)	51 (38%)
I0.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?				
	Yes			62 (42%)	
	No			40 (27%)	
	Not had any legal letters			45 (31%)	

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	10 (7%)	35 (24%)	50 (34%)	38 (26%)	14 (10%)
	Nurse	22 (15%)	64 (44%)	30 (21%)	16 (11%)	13 (9%)
	Dentist	4 (3%)	14 (10%)	38 (27%)	69 (49%)	17 (12%)
	Mental health workers	9 (6%)	31 (21%)	29 (20%)	36 (25%)	40 (28%)
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	23 (15%)	45 (30%)	26 (17%)	22 (15%)	33 (22%)
	Nurse	30 (20%)	59 (40%)	22 (15%)	17 (12%)	19 (13%)
	Dentist	13 (9%)	34 (23%)	26 (18%)	24 (16%)	50 (34%)
	Mental health workers	18 (12%)	32 (22%)	20 (14%)	16 (11%)	61 (41%)
I1.3	Do you have any mental health problems?					
	Yes					78 (53%)
	No					69 (47%)

11.4	Have you been helped with your mental health problems in this prison?	
	Yes	39 (26%)
	No.....	40 (27%)
	Don't have any mental health problems	69 (47%)
11.5	What do you think of the overall quality of the health services here?	
	Very good	13 (9%)
	Quite good	51 (35%)
	Quite bad	38 (26%)
	Very bad	27 (18%)
	Don't know.....	17 (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	52 (36%)
	No.....	93 (64%)
12.2	If you have a disability, are you getting the support you need?	
	Yes	17 (12%)
	No.....	35 (24%)
	Don't have a disability	93 (64%)
12.3	Have you been on an ACCT in this prison?	
	Yes	27 (19%)
	No.....	118 (81%)
12.4	If you have been on an ACCT in this prison, did you feel cared for by staff?	
	Yes	12 (8%)
	No.....	17 (12%)
	Have not been on an ACCT in this prison	118 (80%)
12.5	How easy or difficult is it for you to speak to a Listener, if you need to?	
	Very easy	29 (20%)
	Quite easy	38 (26%)
	Quite difficult	3 (2%)
	Very difficult	6 (4%)
	Don't know.....	69 (47%)
	No Listeners at this prison	3 (2%)

Alcohol and drugs

13.1	Did you have an alcohol problem when you came into this prison?	
	Yes	33 (22%)
	No.....	116 (78%)
13.2	Have you been helped with your alcohol problem in this prison?	
	Yes	13 (9%)
	No.....	19 (13%)
	Did not / do not have an alcohol problem	116 (78%)
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	61 (41%)
	No.....	89 (59%)

13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	26 (18%)
	No	122 (82%)
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	14 (9%)
	No	135 (91%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	29 (20%)
	No	36 (25%)
	Did not / do not have a drug problem.....	81 (55%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy	72 (48%)
	Quite easy	22 (15%)
	Quite difficult	7 (5%)
	Very difficult	7 (5%)
	Don't know.....	41 (28%)
13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy	27 (18%)
	Quite easy	30 (21%)
	Quite difficult	16 (11%)
	Very difficult	7 (5%)
	Don't know.....	66 (45%)

Safety

14.1	Have you ever felt unsafe here?	
	Yes	71 (49%)
	No	74 (51%)
14.2	Do you feel unsafe now?	
	Yes	36 (25%)
	No	108 (75%)
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	46 (33%)
	Threats or intimidation.....	46 (33%)
	Physical assault.....	28 (20%)
	Sexual assault.....	2 (1%)
	Theft of canteen or property	25 (18%)
	Other bullying / victimisation	20 (14%)
	Not experienced any of these from prisoners here.....	75 (54%)
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	
	Yes	42 (29%)
	No	103 (71%)

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	24 (17%)
	Threats or intimidation.....	20 (14%)
	Physical assault.....	16 (11%)
	Sexual assault.....	3 (2%)
	Theft of canteen or property.....	12 (9%)
	Other bullying / victimisation	20 (14%)
	Not experienced any of these from staff here.....	100 (71%)

14.6	If you were being bullied / victimised by staff here, would you report it?	
	Yes	70 (49%)
	No.....	73 (51%)

Behaviour management

15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?		
	Yes	65 (45%)	
	No.....	58 (40%)	
	Don't know what the incentives / rewards are	22 (15%)	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?		
	Yes	77 (53%)	
	No.....	44 (30%)	
	Don't know.....	20 (14%)	
	Don't know what this is	5 (3%)	
15.3	Have you been physically restrained by staff in this prison in the last 6 months?		
	Yes	15 (10%)	
	No.....	132 (90%)	
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	5 (3%)	
	No.....	8 (5%)	
	Don't remember	1 (1%)	
	Not been restrained here in last 6 months	132 (90%)	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?		
	Yes	13 (9%)	
	No.....	134 (91%)	
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?	7 (64%)	4 (36%)
	Could you shower every day?	8 (73%)	3 (27%)
	Could you go outside for exercise every day?	8 (73%)	3 (27%)
	Could you use the phone every day (if you had credit)?	7 (70%)	3 (30%)

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	114 (80%)	11 (8%)	17 (12%)	1 (1%)
Vocational or skills training	69 (50%)	29 (21%)	39 (28%)	1 (1%)
Prison job	66 (48%)	47 (34%)	25 (18%)	0 (0%)
Voluntary work outside of the prison	8 (6%)	33 (25%)	42 (32%)	49 (37%)
Paid work outside of the prison	6 (5%)	35 (27%)	42 (32%)	49 (37%)

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

	Yes, will help	No, won't help	Not done this
Education	52 (38%)	61 (45%)	24 (18%)
Vocational or skills training	58 (45%)	36 (28%)	36 (28%)
Prison job	44 (35%)	62 (49%)	21 (17%)
Voluntary work outside of the prison	22 (18%)	16 (13%)	85 (69%)
Paid work outside of the prison	22 (18%)	15 (12%)	84 (69%)

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

Yes	100 (68%)
No.....	37 (25%)
Not applicable (e.g. if you are retired, sick or on remand)	9 (6%)

Planning and progression

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

Yes	94 (65%)
No.....	50 (35%)

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

Yes	76 (81%)
No.....	13 (14%)
Don't know what my objectives or targets are.....	5 (5%)

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

Yes	52 (58%)
No.....	33 (37%)
Don't know what my objectives or targets are.....	5 (6%)

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

	Yes, this helped	No, this didn't help	Not done / don't know
Offending behaviour programmes	30 (35%)	14 (16%)	42 (49%)
Other programmes	24 (31%)	13 (17%)	41 (53%)
One to one work	22 (28%)	15 (19%)	42 (53%)
Being on a specialist unit	10 (13%)	11 (15%)	54 (72%)
ROTL - day or overnight release	7 (9%)	8 (11%)	59 (80%)

Preparation for release

18.1	Do you expect to be released in the next 3 months?			
	Yes			49 (33%)
	No			88 (60%)
	Don't know			10 (7%)
18.2	How close is this prison to your home area or intended release address?			
	Very near			3 (6%)
	Quite near			17 (35%)
	Quite far			19 (40%)
	Very far			9 (19%)
18.3	Is anybody helping you to prepare for your release (e.g. a home probation officer, responsible officer, case worker)?			
	Yes			25 (52%)
	No			23 (48%)
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	10 (22%)	16 (35%)	20 (43%)
	Getting employment	8 (17%)	23 (49%)	16 (34%)
	Setting up education or training	4 (9%)	16 (36%)	24 (55%)
	Arranging benefits	6 (13%)	23 (50%)	17 (37%)
	Sorting out finances	6 (13%)	20 (44%)	19 (42%)
	Support for drug or alcohol problems	14 (30%)	11 (23%)	22 (47%)
	Health / mental health support	6 (13%)	18 (40%)	21 (47%)
	Social care support	4 (9%)	15 (33%)	26 (58%)
	Getting back in touch with family or friends	5 (11%)	11 (24%)	29 (64%)

More about you

19.1	Do you have children under the age of 18?		
	Yes		84 (58%)
	No		60 (42%)
19.2	Are you a UK / British citizen?		
	Yes		142 (98%)
	No		3 (2%)
19.3	Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?		
	Yes		6 (4%)
	No		138 (96%)
19.4	Have you ever been in the armed services (e.g. army, navy, air force)?		
	Yes		6 (4%)
	No		138 (96%)
19.5	What is your gender?		
	Male		142 (99%)
	Female		1 (1%)
	Non-binary		1 (1%)
	Other		0 (0%)

19.6	How would you describe your sexual orientation?	
	Straight / heterosexual.....	139 (97%)
	Gay / lesbian / homosexual.....	3 (2%)
	Bisexual.....	1 (1%)
	Other.....	0 (0%)
19.7	Do you identify as transgender or transsexual?	
	Yes.....	4 (3%)
	No.....	135 (97%)

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.....	11 (8%)
	Less likely to offend.....	70 (49%)
	Made no difference.....	61 (43%)

HMP Lancaster Farms 2018

Survey responses compared with those from other HMIP surveys of category C training prisons and with those from the previous survey

In this table summary statistics from HMP Lancaster Farms 2018 are compared with the following HMIP survey data:

- Summary statistics from most recent surveys of all other category C training prisons (39 prisons). Please note that we do not have comparable data for the new questions introduced in September 2017.
- Summary statistics from surveys of category C training prisons conducted since the introduction of the new questionnaire in September 2017 (13 prisons). Please note that this does not include all category C training prisons.
- Summary statistics from HMP Lancaster Farms 2018 are compared with those from HMP Lancaster Farms 2015. Please note that we do not have comparable data for the new questions introduced in September 2017.

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DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			HMP Lancaster Farms 2018	All other category C training prisons	HMP Lancaster Farms 2018	All other category C training prisons surveyed since September 2017	HMP Lancaster Farms 2018	HMP Lancaster Farms 2015
1.2	Are you under 21 years of age?	<i>n</i> =154	1%	4%	1%	8%	1%	0%
	Are you 25 years of age or younger?	<i>n</i> =154	18%		18%	30%	18%	
	Are you 50 years of age or older?	<i>n</i> =154	9%	18%	9%	11%	9%	3%
	Are you 70 years of age or older?	<i>n</i> =154	1%	2%	1%	1%	1%	0%
1.3	Are you from a minority ethnic group?	<i>n</i> =155	16%	27%	16%	32%	16%	21%
1.4	Have you been in this prison for less than 6 months?	<i>n</i> =154	45%		45%	33%	45%	
1.5	Are you currently serving a sentence?	<i>n</i> =155	100%	100%	100%	99%	100%	100%
	Are you on recall?	<i>n</i> =155	17%	8%	17%	8%	17%	13%
1.6	Is your sentence less than 12 months?	<i>n</i> =155	8%	6%	8%	7%	8%	12%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n</i> =155	7%	7%	7%	3%	7%	3%
7.1	Are you Muslim?	<i>n</i> =154	11%	14%	11%	17%	11%	17%
11.3	Do you have any mental health problems?	<i>n</i> =147	53%		53%	42%	53%	
12.1	Do you consider yourself to have a disability?	<i>n</i> =145	36%	27%	36%	33%	36%	27%
19.1	Do you have any children under the age of 18?	<i>n</i> =144	58%	48%	58%	48%	58%	55%
19.2	Are you a foreign national?	<i>n</i> =145	2%	11%	2%	11%	2%	2%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n</i> =144	4%	4%	4%	5%	4%	1%
19.4	Have you ever been in the armed services?	<i>n</i> =144	4%	7%	4%	6%	4%	5%
19.5	Is your gender female or non-binary?	<i>n</i> =144	1%		1%	1%	1%	
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n</i> =143	3%	4%	3%	4%	3%	1%
19.7	Do you identify as transgender or transsexual?	<i>n</i> =139	3%		3%	2%	3%	
ARRIVAL AND RECEPTION								
2.1	Were you given up-to-date information about this prison before you came here?	<i>n</i> =155	16%		16%	16%	16%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n</i> =155	77%	54%	77%	46%	77%	83%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n</i> =155	90%	85%	90%	82%	90%	92%
2.4	Overall, were you treated very / quite well in reception?	<i>n</i> =156	95%		95%	85%	95%	

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2.5	When you first arrived, did you have any problems?	n=150	58%	66%	58%	73%	58%	56%
2.5	Did you have problems with:							
	- Getting phone numbers?	n=150	10%	19%	10%	26%	10%	6%
	- Contacting family?	n=150	18%	22%	18%	27%	18%	10%
	- Arranging care for children or other dependents?	n=150	1%		1%	2%	1%	
	- Contacting employers?	n=150	0%	2%	0%	2%	0%	0%
	- Money worries?	n=150	13%	14%	13%	17%	13%	10%
	- Housing worries?	n=150	6%	12%	6%	13%	6%	17%
	- Feeling depressed?	n=150	23%		23%	30%	23%	
	- Feeling suicidal?	n=150	5%		5%	9%	5%	
	- Other mental health problems?	n=150	21%		21%	20%	21%	
	- Physical health problems?	n=150	9%	14%	9%	14%	9%	9%
	- Drugs or alcohol (e.g. withdrawal)?	n=150	9%		9%	11%	9%	
	- Getting medication?	n=150	15%		15%	21%	15%	
	- Needing protection from other prisoners?	n=150	3%	5%	3%	6%	3%	8%
	- Lost or delayed property?	n=150	13%	21%	13%	23%	13%	18%
	<i>For those who had any problems when they first arrived:</i>							
2.6	Did staff help you to deal with these problems?	n=86	49%	35%	49%	31%	49%	51%
FIRST NIGHT AND INDUCTION								
3.1	Before you were locked up on your first night, were you offered:							
	- Tobacco or nicotine replacement?	n=151	82%	66%	82%	64%	82%	83%
	- Toiletries / other basic items?	n=151	52%	52%	52%	51%	52%	48%
	- A shower?	n=151	66%	33%	66%	41%	66%	38%
	- A free phone call?	n=151	47%	41%	47%	42%	47%	43%
	- Something to eat?	n=151	80%	61%	80%	75%	80%	50%
	- The chance to see someone from health care?	n=151	58%	66%	58%	58%	58%	69%
	- The chance to talk to a Listener or Samaritans?	n=151	27%	32%	27%	25%	27%	31%
	- Support from another prisoner (e.g. Insider or buddy)?	n=151	23%		23%	23%	23%	
	- None of these?	n=151	3%		3%	7%	3%	
3.2	On your first night in this prison, was your cell very / quite clean?	n=154	60%		60%	35%	60%	
3.3	Did you feel safe on your first night here?	n=153	90%	77%	90%	72%	90%	89%
3.4	In your first few days here, did you get:							
	- Access to the prison shop / canteen?	n=151	58%	30%	58%	39%	58%	27%
	- Free PIN phone credit?	n=147	50%		50%	45%	50%	
	- Numbers put on your PIN phone?	n=137	58%		58%	47%	58%	
3.5	Have you had an induction at this prison?	n=152	95%	92%	95%	94%	95%	90%
	<i>For those who have had an induction:</i>							
3.5	Did your induction cover everything you needed to know about this prison?	n=145	72%		72%	55%	72%	

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ON THE WING								
4.1	Are you in a cell on your own?	<i>n=153</i>	82%		82%	62%	82%	
4.2	Is your cell call bell normally answered within 5 minutes?	<i>n=149</i>	44%	33%	44%	28%	44%	39%
4.3	On the wing or houseblock you currently live on:							
	- Do you normally have enough clean, suitable clothes for the week?	<i>n=153</i>	71%	69%	71%	66%	71%	75%
	- Can you shower every day?	<i>n=153</i>	95%	88%	95%	87%	95%	87%
	- Do you have clean sheets every week?	<i>n=152</i>	64%	67%	64%	62%	64%	77%
	- Do you get cell cleaning materials every week?	<i>n=149</i>	60%	62%	60%	58%	60%	79%
	- Is it normally quiet enough for you to relax or sleep at night?	<i>n=146</i>	75%	68%	75%	67%	75%	76%
	- Can you get your stored property if you need it?	<i>n=145</i>	26%	25%	26%	26%	26%	17%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	<i>n=153</i>	63%		63%	60%	63%	
FOOD AND CANTEEN								
5.1	Is the quality of the food in this prison very / quite good?	<i>n=154</i>	68%		68%	37%	68%	
5.2	Do you get enough to eat at meal-times always / most of the time?	<i>n=155</i>	57%		57%	32%	57%	
5.3	Does the shop / canteen sell the things that you need?	<i>n=150</i>	69%	54%	69%	59%	69%	54%
RELATIONSHIPS WITH STAFF								
6.1	Do most staff here treat you with respect?	<i>n=151</i>	84%	75%	84%	69%	84%	89%
6.2	Are there any staff here you could turn to if you had a problem?	<i>n=153</i>	78%	72%	78%	70%	78%	73%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<i>n=153</i>	41%	30%	41%	27%	41%	34%
6.4	Do you have a personal officer?	<i>n=153</i>	86%		86%	82%	86%	
<i>For those who have a personal officer:</i>								
6.4	Is your personal or named officer very / quite helpful?	<i>n=131</i>	57%		57%	42%	57%	
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	<i>n=153</i>	12%		12%	10%	12%	
6.6	Do you feel that you are treated as an individual in this prison?	<i>n=148</i>	64%		64%	41%	64%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	<i>n=154</i>	49%		49%	51%	49%	
	If so, do things sometimes change?	<i>n=76</i>	40%		40%	30%	40%	
FAITH								
7.1	Do you have a religion?	<i>n=154</i>	66%	70%	66%	68%	66%	66%
<i>For those who have a religion:</i>								
7.2	Are your religious beliefs respected here?	<i>n=100</i>	70%		70%	69%	70%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	<i>n=101</i>	75%		75%	70%	75%	
7.4	Are you able to attend religious services, if you want to?	<i>n=102</i>	85%		85%	87%	85%	

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CONTACT WITH FAMILY AND FRIENDS							
8.1	Have staff here encouraged you to keep in touch with your family / friends?	n=154	34%				
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	n=151	45%	47%	45%	59%	45% 38%
8.3	Are you able to use a phone every day (if you have credit)?	n=152	93%		93%	86%	93%
8.4	Is it very / quite easy for your family and friends to get here?	n=147	40%		40%	38%	40%
8.5	Do you get visits from family/friends once a week or more?	n=151	16%		16%	17%	16%
For those who get visits:							
8.6	Do visits usually start and finish on time?	n=89	89%		89%	47%	89%
8.7	Are your visitors usually treated respectfully by staff?	n=85	93%		93%	73%	93%
TIME OUT OF CELL							
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=150	95%		95%	91%	95%
For those who know what the unlock and lock-up times are supposed to be:							
9.1	Are these times usually kept to?	n=142	73%		73%	54%	73%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	n=148	22%	13%	22%	18%	22% 18%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	n=148	5%	15%	5%	8%	5% 8%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=149	37%		37%	21%	37%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=149	0%		0%	3%	0%
9.4	Do you have time to do domestics more than 5 days in a typical week?	n=150	67%		67%	55%	67%
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=149	77%		77%	62%	77%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=147	42%		42%	65%	42%
9.7	Do you typically go to the gym twice a week or more?	n=147	59%		59%	53%	59%
9.8	Do you typically go to the library once a week or more?	n=148	47%	46%	47%	48%	47% 42%
For those who use the library:							
9.9	Does the library have a wide enough range of materials to meet your needs?	n=88	64%	60%	64%	55%	64% 55%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS							
10.1	Is it easy for you to make an application?	n=148	81%	79%	81%	73%	81% 85%
For those who have made an application:							
10.2	Are applications usually dealt with fairly?	n=122	62%	56%	62%	51%	62% 58%
	Are applications usually dealt with within 7 days?	n=119	39%	39%	39%	37%	39% 35%
10.3	Is it easy for you to make a complaint?	n=148	67%	59%	67%	61%	67% 56%
For those who have made a complaint:							
10.4	Are complaints usually dealt with fairly?	n=89	36%	32%	36%	30%	36% 40%
	Are complaints usually dealt with within 7 days?	n=85	28%	27%	28%	26%	28% 24%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=108	23%		23%	28%	23%

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For those who need it, is it easy to:								
10.6	Communicate with your solicitor or legal representative?	n=116	47%		47%	38%	47%	
	Attend legal visits?	n=108	49%		49%	47%	49%	
	Get bail information?	n=85	21%		21%	15%	21%	
For those who have had legal letters:								
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=102	61%	51%	61%	56%	61%	49%
HEALTH CARE								
11.1	Is it very / quite easy to see:							
	- Doctor?	n=147	31%		31%	31%	31%	
	- Nurse?	n=145	59%		59%	52%	59%	
	- Dentist?	n=142	13%		13%	15%	13%	
	- Mental health workers?	n=145	28%		28%	23%	28%	
11.2	Do you think the quality of the health service is very / quite good from:							
	- Doctor?	n=149	46%		46%	46%	46%	
	- Nurse?	n=147	61%		61%	56%	61%	
	- Dentist?	n=147	32%		32%	34%	32%	
	- Mental health workers?	n=147	34%		34%	28%	34%	
11.3	Do you have any mental health problems?	n=147	53%		53%	42%	53%	
For those who have mental health problems:								
11.4	Have you been helped with your mental health problems in this prison?	n=79	49%		49%	40%	49%	
11.5	Do you think the overall quality of the health services here is very / quite good?	n=146	44%		44%	41%	44%	
OTHER SUPPORT NEEDS								
12.1	Do you consider yourself to have a disability?	n=145	36%	27%	36%	33%	36%	27%
For those who have a disability:								
12.2	Are you getting the support you need?	n=52	33%		33%	32%	33%	
12.3	Have you been on an ACCT in this prison?	n=145	19%		19%	16%	19%	
For those who have been on an ACCT:								
12.4	Did you feel cared for by staff?	n=29	41%		41%	42%	41%	
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=148	45%		45%	41%	45%	
ALCOHOL AND DRUGS								
13.1	Did you have an alcohol problem when you came into this prison?	n=149	22%	15%	22%	13%	22%	18%
For those who had / have an alcohol problem:								
13.2	Have you been helped with your alcohol problem in this prison?	n=32	41%	60%	41%	51%	41%	62%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=150	41%	25%	41%	27%	41%	27%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=148	18%	13%	18%	18%	18%	9%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=149	9%		9%	11%	9%	
For those who had / have a drug problem:								
13.6	Have you been helped with your drug problem in this prison?	n=65	45%	56%	45%	44%	45%	61%
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=149	63%		63%	50%	63%	
13.8	Is it very / quite easy to get alcohol in this prison?	n=146	39%		39%	32%	39%	

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Number of completed questionnaires returned

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

HMP Lancaster Farms 2018	All other category C training prisons	HMP Lancaster Farms 2018	All other category C training prisons surveyed since September 2017	HMP Lancaster Farms 2018	HMP Lancaster Farms 2015
156	6,707	156	2,275	156	156

SAFETY								
14.1	Have you ever felt unsafe here?	<i>n=145</i>	49%	43%	49%	47%	49%	23%
14.2	Do you feel unsafe now?	<i>n=144</i>	25%	19%	25%	22%	25%	11%
14.3	Have you experienced any of the following from other prisoners here:							
	- Verbal abuse?	<i>n=139</i>	33%		33%	34%	33%	
	- Threats or intimidation?	<i>n=139</i>	33%		33%	30%	33%	
	- Physical assault?	<i>n=139</i>	20%		20%	17%	20%	
	- Sexual assault?	<i>n=139</i>	1%		1%	2%	1%	
	- Theft of canteen or property?	<i>n=139</i>	18%		18%	26%	18%	
	- Other bullying / victimisation?	<i>n=139</i>	14%		14%	17%	14%	
	- Not experienced any of these from prisoners here	<i>n=139</i>	54%		54%	54%	54%	
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<i>n=145</i>	29%		29%	34%	29%	
14.5	Have you experienced any of the following from staff here:							
	- Verbal abuse?	<i>n=140</i>	17%		17%	30%	17%	
	- Threats or intimidation?	<i>n=140</i>	14%		14%	23%	14%	
	- Physical assault?	<i>n=140</i>	11%		11%	10%	11%	
	- Sexual assault?	<i>n=140</i>	2%		2%	2%	2%	
	- Theft of canteen or property?	<i>n=140</i>	9%		9%	9%	9%	
	- Other bullying / victimisation?	<i>n=140</i>	14%		14%	15%	14%	
	- Not experienced any of these from staff here	<i>n=140</i>	71%		71%	59%	71%	
14.6	If you were being bullied / victimised by staff here, would you report it?	<i>n=143</i>	49%		49%	49%	49%	
BEHAVIOUR MANAGEMENT								
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<i>n=145</i>	45%		45%	39%	45%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<i>n=146</i>	53%		53%	36%	53%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<i>n=147</i>	10%	10%	10%	13%	10%	6%
<i>For those who have been restrained in the last 6 months:</i>								
15.4	Did anyone come and talk to you about it afterwards?	<i>n=14</i>	36%		36%	20%	36%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	<i>n=147</i>	9%		9%	9%	9%	
<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>								
15.6	Were you treated well by segregation staff?	<i>n=11</i>	64%		64%	58%	64%	
	Could you shower every day?	<i>n=11</i>	73%		73%	76%	73%	
	Could you go outside for exercise every day?	<i>n=11</i>	73%		73%	77%	73%	
	Could you use the phone every day (if you had credit)?	<i>n=10</i>	70%		70%	64%	70%	

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Number of completed questionnaires returned

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EDUCATION, SKILLS AND WORK						
16.1	In this prison, is it easy to get into the following activities:					
	- Education?	n=143	80%		80%	
	- Vocational or skills training?	n=138	50%		50%	
	- Prison job?	n=138	48%		48%	
	- Voluntary work outside of the prison?	n=132	6%		6%	
	- Paid work outside of the prison?	n=132	5%		5%	
16.2	In this prison, have you done the following activities:					
	- Education?	n=137	83%	81%	83%	76%
	- Vocational or skills training?	n=130	72%	74%	72%	70%
	- Prison job?	n=127	84%	85%	84%	70%
	- Voluntary work outside of the prison?	n=123	31%		31%	
	- Paid work outside of the prison?	n=121	31%		31%	
<i>For those who have done the following activities, do you think they will help you on release:</i>						
	- Education?	n=113	46%	59%	46%	46%
	- Vocational or skills training?	n=94	62%	61%	62%	56%
	- Prison job?	n=106	42%	43%	42%	47%
	- Voluntary work outside of the prison?	n=38	58%		58%	
	- Paid work outside of the prison?	n=37	60%		60%	
16.3	Do staff encourage you to attend education, training or work?	n=137	73%		73%	
PLANNING AND PROGRESSION						
17.1	Do you have a custody plan?	n=144	65%		65%	
<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=94	81%		81%	
17.3	Are staff helping you to achieve your objectives or targets?	n=90	58%		58%	
17.4	In this prison, have you done:					
	- Offending behaviour programmes?	n=86	51%		51%	
	- Other programmes?	n=78	47%		47%	
	- One to one work?	n=79	47%		47%	
	- Been on a specialist unit?	n=75	28%		28%	
	- ROTL - day or overnight release?	n=74	20%		20%	
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>						
	- Offending behaviour programmes?	n=44	68%		68%	
	- Other programmes?	n=37	65%		65%	
	- One to one work?	n=37	60%		60%	
	- Being on a specialist unit?	n=21	48%		48%	
	- ROTL - day or overnight release?	n=15	47%		47%	

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156	6,707	156	2,275	156	156

Number of completed questionnaires returned
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PREPARATION FOR RELEASE							
18.1	Do you expect to be released in the next 3 months?	<i>n=147</i>	33%		33%	25%	33%
<i>For those who expect to be released in the next 3 months:</i>							
18.2	Is this prison very / quite near to your home area or intended release address?	<i>n=48</i>	42%		42%	43%	42%
18.3	Is anybody helping you to prepare for your release?	<i>n=48</i>	52%		52%	58%	52%
18.4	Do you need help to sort out the following for when you are released:						
	- Finding accommodation?	<i>n=46</i>	57%		57%	61%	57%
	- Getting employment?	<i>n=47</i>	66%		66%	61%	66%
	- Setting up education or training?	<i>n=44</i>	46%		46%	49%	46%
	- Arranging benefits?	<i>n=46</i>	63%		63%	66%	63%
	- Sorting out finances?	<i>n=45</i>	58%		58%	56%	58%
	- Support for drug or alcohol problems?	<i>n=47</i>	53%		53%	41%	53%
	- Health / mental Health support?	<i>n=45</i>	53%		53%	47%	53%
	- Social care support?	<i>n=45</i>	42%		42%	35%	42%
	- Getting back in touch with family or friends?	<i>n=45</i>	36%		36%	41%	36%
18.4	Are you getting help to sort out the following for when you are released, if you need it:						
	- Finding accommodation?	<i>n=26</i>	39%		39%	37%	39%
	- Getting employment?	<i>n=31</i>	26%		26%	23%	26%
	- Setting up education or training?	<i>n=20</i>	20%		20%	26%	20%
	- Arranging benefits?	<i>n=29</i>	21%		21%	26%	21%
	- Sorting out finances?	<i>n=26</i>	23%		23%	23%	23%
	- Support for drug or alcohol problems?	<i>n=25</i>	56%		56%	48%	56%
	- Health / mental Health support?	<i>n=24</i>	25%		25%	30%	25%
	- Social care support?	<i>n=19</i>	21%		21%	24%	21%
	- Getting back in touch with family or friends?	<i>n=16</i>	31%		31%	31%	31%
FINAL QUESTION ABOUT THIS PRISON							
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	<i>n=142</i>	49%		49%	50%	49%

HMP Lancaster Farms 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:
 - responses of prisoners from black and minority ethnic groups are compared with those of white prisoners
 - Muslim prisoners' responses are compared with those of non-Muslim prisoners
 Please note that these analyses are based on summary data from selected survey questions only.

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
24	131	17	137

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	21%	18%	29%	16%
	Are you 50 years of age or older?	4%	10%	0%	10%
1.3	Are you from a minority ethnic group?			88%	7%
7.1	Are you Muslim?	63%	2%		
11.3	Do you have any mental health problems?	36%	56%	14%	57%
12.1	Do you consider yourself to have a disability?	23%	38%	14%	38%
19.2	Are you a foreign national?	5%	2%	7%	2%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	5%	0%	5%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	92%	89%	94%	90%
2.4	Overall, were you treated very / quite well in reception?	92%	96%	88%	96%
2.5	When you first arrived, did you have any problems?	58%	58%	59%	58%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	54%	48%	44%	49%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	83%	92%	75%	92%
3.5	Have you had an induction at this prison?	96%	95%	100%	95%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	77%	72%	81%	71%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	30%	46%	29%	46%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	75%	71%	59%	73%
	- Can you shower every day?	88%	97%	82%	97%
	- Do you have clean sheets every week?	67%	63%	53%	65%
	- Do you get cell cleaning materials every week?	46%	63%	35%	64%
	- Is it normally quiet enough for you to relax or sleep at night?	59%	78%	60%	77%
	- Can you get your stored property if you need it?	26%	26%	19%	27%

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Number of completed questionnaires returned

Black and minority ethnic	White
24	131

Muslim	Non-Muslim
17	137

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	54%	58%
5.3	Does the shop / canteen sell the things that you need?	59%	70%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	70%	87%
6.2	Are there any staff here you could turn to if you had a problem?	87%	76%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	35%	42%
6.6	Do you feel that you are treated as an individual in this prison?	67%	63%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	55%	74%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	70%	77%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	25%	35%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	41%	46%
8.3	Are you able to use a phone every day (if you have credit)?	96%	93%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	91%	93%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	19%	23%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	14%	4%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	73%	62%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	70%	83%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	47%	65%
10.3	Is it easy for you to make a complaint?	50%	70%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	25%	38%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	39%	21%

35%	60%
60%	70%
60%	87%
81%	77%
19%	43%
63%	64%
50%	74%
75%	75%
18%	36%
40%	46%
94%	93%
89%	93%
36%	21%
7%	5%
100%	61%
67%	83%
25%	66%
40%	70%
38%	36%
38%	22%

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Number of completed questionnaires returned

	Black and minority ethnic	White	Muslim	Non-Muslim
	24	131	17	137

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	25%	32%	14%	32%
	- Nurse?	60%	59%	50%	60%
	- Dentist?	10%	13%	0%	14%
	- Mental health workers?	20%	29%	7%	30%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	50%	49%	50%	49%
11.5	Do you think the overall quality of the health services here is very / quite good?	32%	46%	21%	46%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	20%	34%	0%	34%
SAFETY					
14.1	Have you ever felt unsafe here?	68%	46%	64%	47%
14.2	Do you feel unsafe now?	43%	22%	46%	23%
14.3	Not experienced bullying / victimisation by other prisoners	43%	56%	50%	54%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	29%	29%	39%	28%
14.5	Not experienced bullying / victimisation by members of staff	64%	73%	50%	74%
14.6	If you were being bullied / victimised by staff here, would you report it?	52%	48%	54%	49%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	46%	45%	29%	47%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	50%	53%	43%	54%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	14%	10%	14%	10%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	14%	8%	7%	9%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	71%	73%	54%	75%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	68%	65%	64%	65%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	50%	59%	44%	59%
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?	25%	55%	50%	52%
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?	41%	50%	50%	49%

HMP Lancaster Farms 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

- responses of prisoners who reported that they had a disability compared with those who did not.
- responses of prisoners who reported that they had mental health problems compared with those who did not.

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

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Number of completed questionnaires returned

	Have a disability	Do not have a disability		Mental health problems	No mental health problems		
	52	93		78	69		

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	8%	23%	12%	25%
	Are you 50 years of age or older?	18%	5%	14%	4%
1.3	Are you from a minority ethnic group?	10%	18%	10%	20%
7.1	Are you Muslim?	4%	13%	3%	17%
11.3	Do you have any mental health problems?	79%	39%		
12.1	Do you consider yourself to have a disability?			53%	16%
19.2	Are you a foreign national?	4%	1%	4%	0%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	8%	1%	8%	0%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	85%	93%	89%	91%
2.4	Overall, were you treated very / quite well in reception?	96%	95%	95%	96%
2.5	When you first arrived, did you have any problems?	78%	46%	72%	42%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	49%	49%	47%	52%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	89%	91%	86%	96%
3.5	Have you had an induction at this prison?	94%	96%	92%	99%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	65%	78%	66%	79%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	44%	42%	41%	45%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	67%	74%	65%	78%
	- Can you shower every day?	92%	98%	95%	97%
	- Do you have clean sheets every week?	56%	69%	60%	68%
	- Do you get cell cleaning materials every week?	67%	57%	60%	60%
	- Is it normally quiet enough for you to relax or sleep at night?	70%	79%	73%	76%
	- Can you get your stored property if you need it?	22%	29%	24%	28%

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Number of completed questionnaires returned

Have a disability	Do not have a disability
52	93

Mental health problems	No mental health problems
78	69

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	60%	57%
5.3	Does the shop / canteen sell the things that you need?	65%	69%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	82%	87%
6.2	Are there any staff here you could turn to if you had a problem?	75%	78%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	44%	39%
6.6	Do you feel that you are treated as an individual in this prison?	58%	67%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	73%	65%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	82%	72%
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)?	44%	45%
8.3	Are you able to use a phone every day (if you have credit)?	94%	95%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	92%	95%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	33%	16%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	4%	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?	62%	64%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	75%	86%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	62%	65%
10.3	Is it easy for you to make a complaint?	71%	66%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	33%	39%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	32%	17%

60%	55%
65%	72%
83%	85%
77%	77%
41%	40%
64%	62%
79%	57%
79%	70%
35%	32%
42%	47%
95%	93%
93%	93%
26%	17%
8%	3%
57%	72%
79%	82%
62%	66%
64%	71%
30%	44%
25%	22%

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Number of completed questionnaires returned

Have a disability	Do not have a disability
52	93

Mental health problems	No mental health problems
78	69

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	28%	32%
	- Nurse?	60%	58%
	- Dentist?	15%	11%
	- Mental health workers?	34%	24%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	44%	58%
11.5	Do you think the overall quality of the health services here is very / quite good?	39%	46%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	33%	
SAFETY			
14.1	Have you ever felt unsafe here?	67%	38%
14.2	Do you feel unsafe now?	37%	18%
14.3	Not experienced bullying / victimisation by other prisoners	32%	66%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	26%	31%
14.5	Not experienced bullying / victimisation by members of staff	63%	75%
14.6	If you were being bullied / victimised by staff here, would you report it?	46%	51%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	41%	48%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	52%	53%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	16%	7%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	20%	2%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	61%	79%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	61%	66%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	57%	60%
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?	61%	47%
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?	45%	50%

38%	24%
62%	57%
16%	9%
38%	16%
50%	
45%	43%
33%	36%
63%	33%
34%	15%
41%	68%
29%	29%
69%	74%
44%	55%
42%	49%
56%	49%
13%	8%
12%	6%
73%	73%
60%	70%
50%	66%
50%	54%
42%	56%

HMP Lancaster Farms 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.

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Number of completed questionnaires returned

25 and under	Over 25
28	126

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	4%	0%
	Are you 50 years of age or older?	0%	11%
1.3	Are you from a minority ethnic group?	18%	15%
7.1	Are you Muslim?	19%	10%
11.3	Do you have any mental health problems?	35%	57%
12.1	Do you consider yourself to have a disability?	16%	40%
19.2	Are you a foreign national?	4%	2%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	4%	4%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	93%	89%
2.4	Overall, were you treated very / quite well in reception?	96%	95%
2.5	When you first arrived, did you have any problems?	48%	60%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	58%	48%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	92%	90%
3.5	Have you had an induction at this prison?	96%	95%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	77%	72%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	24%	47%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	67%	73%
	- Can you shower every day?	96%	95%
	- Do you have clean sheets every week?	62%	65%
	- Do you get cell cleaning materials every week?	46%	63%
	- Is it normally quiet enough for you to relax or sleep at night?	69%	77%
	- Can you get your stored property if you need it?	23%	27%

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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
	28	126

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	48%	59%
5.3	Does the shop / canteen sell the things that you need?	68%	69%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	84%	84%
6.2	Are there any staff here you could turn to if you had a problem?	69%	79%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	35%	42%
6.6	Do you feel that you are treated as an individual in this prison?	70%	62%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	63%	71%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	75%	75%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	37%	33%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	54%	43%
8.3	Are you able to use a phone every day (if you have credit)?	96%	93%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	93%	93%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	33%	19%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	7%	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?	54%	66%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	78%	83%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	55%	64%
10.3	Is it easy for you to make a complaint?	65%	68%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	20%	40%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	29%	22%

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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
28	126

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	35%	30%
	- Nurse?	48%	62%
	- Dentist?	15%	12%
	- Mental health workers?	35%	26%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	67%	48%
11.5	Do you think the overall quality of the health services here is very / quite good?	40%	45%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	50%	32%
SAFETY			
14.1	Have you ever felt unsafe here?	48%	50%
14.2	Do you feel unsafe now?	29%	24%
14.3	Not experienced bullying / victimisation by other prisoners	54%	54%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	24%	30%
14.5	Not experienced bullying / victimisation by members of staff	73%	71%
14.6	If you were being bullied / victimised by staff here, would you report it?	44%	50%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	32%	48%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	40%	55%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	12%	10%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	4%	10%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	71%	73%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	60%	67%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	47%	60%
PREPARATION FOR RELEASE			
<i>For those who expect to be released in the next 3 months:</i>			
18.3	Is anybody helping you to prepare for your release?	42%	57%
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?	35%	52%

HMP Lancaster Farms 2018

Comparison of survey responses from different residential locations

In this table responses from the health and well being unit (Coniston 1) are compared with those from the rest of the establishment.

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

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Number of completed questionnaires returned

Coniston 1 (Health and Well Being Unit)	Rest of the establishment
22	132

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	1%
	Are you 25 years of age or younger?	5%	21%
	Are you 50 years of age or older?	27%	6%
	Are you 70 years of age or older?	5%	0%
1.3	Are you from a minority ethnic group?	5%	17%
1.4	Have you been in this prison for less than 6 months?	46%	45%
1.5	Are you currently serving a sentence?	100%	100%
	Are you on recall?	18%	17%
1.6	Is your sentence less than 12 months?	18%	7%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	8%
7.1	Are you Muslim?	5%	12%
11.3	Do you have any mental health problems?	48%	53%
12.1	Do you consider yourself to have a disability?	38%	34%
19.1	Do you have any children under the age of 18?	57%	58%
19.2	Are you a foreign national?	0%	3%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	4%
19.4	Have you ever been in the armed services?	5%	4%
19.5	Is your gender female or non-binary?	0%	2%
19.6	Are you homosexual, bisexual or other sexual orientation?	0%	3%
19.7	Do you identify as transgender or transsexual?	0%	3%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	9%	18%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	77%	78%
2.3	When you were searched in reception, was this done in a respectful way?	91%	90%
2.4	Overall, were you treated very / quite well in reception?	100%	95%

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Number of completed questionnaires returned

	Coniston 1 (Health and Well Being Unit)	Rest of the establishment
Number of completed questionnaires returned	22	132

2.5	When you first arrived, did you have any problems?	67%	56%
2.5	Did you have problems with:		
	- Getting phone numbers?	10%	10%
	- Contacting family?	10%	20%
	- Arranging care for children or other dependents?	0%	1%
	- Contacting employers?	0%	0%
	- Money worries?	14%	13%
	- Housing worries?	5%	6%
	- Feeling depressed?	38%	21%
	- Feeling suicidal?	0%	6%
	- Other mental health problems?	33%	18%
	- Physical health problems?	19%	8%
	- Drugs or alcohol (e.g. withdrawal)?	10%	9%
	- Getting medication?	14%	14%
	- Needing protection from other prisoners?	0%	3%
	- Lost or delayed property?	19%	12%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	43%	50%
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	82%	81%
	- Toiletries / other basic items?	41%	54%
	- A shower?	55%	68%
	- A free phone call?	27%	51%
	- Something to eat?	68%	83%
	- The chance to see someone from health care?	41%	62%
	- The chance to talk to a Listener or Samaritans?	27%	28%
	- Support from another prisoner (e.g. Insider or buddy)?	14%	25%
	- None of these?	9%	2%
3.2	On your first night in this prison, was your cell very / quite clean?	64%	59%
3.3	Did you feel safe on your first night here?	96%	89%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	59%	58%
	- Free PIN phone credit?	52%	50%
	- Numbers put on your PIN phone?	61%	59%
3.5	Have you had an induction at this prison?	96%	95%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	71%	73%

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Number of completed questionnaires returned

Coniston 1 (Health and Well Being Unit)	22	Rest of the establishment	132
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ON THE WING			
4.1	Are you in a cell on your own?	86%	81%
4.2	Is your cell call bell normally answered within 5 minutes?	67%	40%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	82%	70%
	- Can you shower every day?	100%	95%
	- Do you have clean sheets every week?	76%	62%
	- Do you get cell cleaning materials every week?	76%	58%
	- Is it normally quiet enough for you to relax or sleep at night?	77%	75%
	- Can you get your stored property if you need it?	25%	26%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	77%	60%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	82%	65%
5.2	Do you get enough to eat at meal-times always / most of the time?	50%	59%
5.3	Does the shop / canteen sell the things that you need?	68%	69%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	95%	83%
6.2	Are there any staff here you could turn to if you had a problem?	86%	77%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	46%	40%
6.4	Do you have a personal officer?	100%	85%
	<i>For those who have a personal officer:</i>		
6.4	Is your personal or named officer very / quite helpful?	52%	57%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	5%	13%
6.6	Do you feel that you are treated as an individual in this prison?	71%	62%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	59%	49%
	If so, do things sometimes change?	46%	38%
FAITH			
7.1	Do you have a religion?	50%	69%
	<i>For those who have a religion:</i>		
7.2	Are your religious beliefs respected here?	70%	71%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	82%	75%
7.4	Are you able to attend religious services, if you want to?	82%	85%
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)?	50%	44%
8.3	Are you able to use a phone every day (if you have credit)?	86%	95%
8.4	Is it very / quite easy for your family and friends to get here?	29%	43%
8.5	Do you get visits from family/friends once a week or more?	18%	16%
	<i>For those who get visits:</i>		
8.6	Do visits usually start and finish on time?	80%	90%
8.7	Are your visitors usually treated respectfully by staff?	100%	92%

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Number of completed questionnaires returned

Coniston 1 (Health and Well Being Unit)	22	Rest of the establishment	132
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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?	96%	94%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
9.1	Are these times usually kept to?	76%	71%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	20%	22%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	15%	4%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	23%	39%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	0%	0%
9.4	Do you have time to do domestics more than 5 days in a typical week?	55%	69%
9.5	Do you get association more than 5 days in a typical week, if you want it?	73%	78%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	29%	44%
9.7	Do you typically go to the gym twice a week or more?	52%	61%
9.8	Do you typically go to the library once a week or more?	48%	47%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	75%	63%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	86%	81%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	63%	62%
	Are applications usually dealt with within 7 days?	39%	38%
10.3	Is it easy for you to make a complaint?	82%	65%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	38%	37%
	Are complaints usually dealt with within 7 days?	20%	31%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	6%	26%

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

Number of completed questionnaires returned

Coniston 1 (Health and Well Being Unit)	Rest of the establishment
22	132

<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	58%	45%
	Attend legal visits?	59%	47%
	Get bail information?	39%	19%
<i>For those who have had legal letters:</i>			
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	33%	66%
HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	36%	29%
	- Nurse?	59%	59%
	- Dentist?	9%	14%
	- Mental health workers?	23%	29%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	50%	45%
	- Nurse?	57%	61%
	- Dentist?	23%	33%
	- Mental health workers?	27%	36%
11.3	Do you have any mental health problems?	48%	53%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	60%	49%
11.5	Do you think the overall quality of the health services here is very / quite good?	41%	44%
OTHER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	38%	34%
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	67%	27%
12.3	Have you been on an ACCT in this prison?	19%	17%
<i>For those who have been on an ACCT:</i>			
12.4	Did you feel cared for by staff?	50%	39%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	77%	40%
ALCOHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	27%	21%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	80%	35%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	36%	41%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	9%	19%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	5%	10%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	83%	42%
13.7	Is it very / quite easy to get illicit drugs in this prison?	67%	62%
13.8	Is it very / quite easy to get alcohol in this prison?	38%	38%

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Number of completed questionnaires returned

	Coniston 1 (Health and Well Being Unit)	Rest of the establishment
	22	132

SAFETY			
14.1	Have you ever felt unsafe here?	50%	48%
14.2	Do you feel unsafe now?	14%	26%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	43%	30%
	- Threats or intimidation?	29%	33%
	- Physical assault?	5%	22%
	- Sexual assault?	0%	1%
	- Theft of canteen or property?	24%	16%
	- Other bullying / victimisation?	10%	14%
	- Not experienced any of these from prisoners here	48%	56%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	27%	30%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	9%	18%
	- Threats or intimidation?	0%	16%
	- Physical assault?	0%	13%
	- Sexual assault?	0%	2%
	- Theft of canteen or property?	5%	9%
	- Other bullying / victimisation?	5%	16%
	- Not experienced any of these from staff here	82%	70%
14.6	If you were being bullied / victimised by staff here, would you report it?	59%	48%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	50%	43%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	81%	48%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	0%	11%
	<i>For those who have been restrained in the last 6 months:</i>		
15.4	Did anyone come and talk to you about it afterwards?		39%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	0%	9%
	<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?		67%
	Could you shower every day?		78%
	Could you go outside for exercise every day?		67%
	Could you use the phone every day (if you had credit)?		75%

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Coniston 1 (Health and Well Being Unit)		Rest of the establishment
	22	

EDUCATION, SKILLS AND WORK			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	77%	80%
	- Vocational or skills training?	36%	54%
	- Prison job?	57%	46%
	- Voluntary work outside of the prison?	0%	7%
	- Paid work outside of the prison?	0%	6%
16.2	In this prison, have you done the following activities:		
	- Education?	82%	82%
	- Vocational or skills training?	68%	73%
	- Prison job?	84%	84%
	- Voluntary work outside of the prison?	28%	32%
	- Paid work outside of the prison?	28%	32%
<i>For those who have done the following activities, do you think they will help you on release:</i>			
	- Education?	44%	47%
	- Vocational or skills training?	62%	63%
	- Prison job?	38%	43%
	- Voluntary work outside of the prison?	60%	58%
	- Paid work outside of the prison?	60%	59%
16.3	Do staff encourage you to attend education, training or work?	75%	73%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	81%	63%
<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?	77%	82%
17.3	Are staff helping you to achieve your objectives or targets?	63%	58%
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	60%	49%
	- Other programmes?	71%	41%
	- One to one work?	67%	41%
	- Been on a specialist unit?	39%	26%
	- ROTL - day or overnight release?	15%	22%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>			
	- Offending behaviour programmes?	78%	68%
	- Other programmes?	80%	62%
	- One to one work?	70%	58%
	- Being on a specialist unit?	80%	38%
	- ROTL - day or overnight release?	50%	46%

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Coniston 1 (Health and Well Being Unit)	22	Rest of the establishment	132
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PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	43%	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?	44%	42%
18.3	Is anybody helping you to prepare for your release?	67%	50%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	56%	56%
	- Getting employment?	67%	65%
	- Setting up education or training?	44%	47%
	- Arranging benefits?	67%	61%
	- Sorting out finances?	56%	57%
	- Support for drug or alcohol problems?	78%	46%
	- Health / mental Health support?	56%	51%
	- Social care support?	33%	43%
	- Getting back in touch with family or friends?	44%	31%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	40%	40%
	- Getting employment?	33%	25%
	- Setting up education or training?	25%	19%
	- Arranging benefits?	33%	18%
	- Sorting out finances?	40%	20%
	- Support for drug or alcohol problems?	86%	47%
	- Health / mental Health support?	40%	22%
	- Social care support?	33%	20%
	- Getting back in touch with family or friends?	25%	36%
FINAL QUESTION ABOUT THIS PRISON			
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	68%	47%