

Report on an unannounced inspection of

# **HMP Stocken**

by HM Chief Inspector of Prisons

**22 January – 8 February 2019**

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



Crown copyright 2019

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

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

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

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

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

# Contents

Introduction	5
Fact page	7
About this inspection and report	9
Summary	11
Section 1. Safety	21
Section 2. Respect	29
Section 3. Purposeful activity	43
Section 4. Rehabilitation and release planning	51
Section 5. Summary of recommendations and good practice	57
Section 6. Appendices	63
Appendix I: Inspection team	63
Appendix II: Progress on recommendations from the last report	65
Appendix III: Care Quality Commission Requirement Notice	73
Appendix IV: Prison population profile	77
Appendix V: Photographs	81
Appendix VI: Prisoner survey methodology and results	85

### **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 Stocken is a category C training prison located in a rural setting near Oakham in Rutland, a few miles to the south of Grantham. At the time of this inspection it held some 833 adult male prisoners, more than 50% of whom had been convicted of crimes of violence. Nearly all of the prisoners were serving sentences of more than four years. We had last inspected the prison in July 2015.

Overall, we found a mixed picture of progress since 2015, with improvements in one area and declines in performance in two – purposeful activity and rehabilitation and release planning. The approach to implementing our previous recommendations was reasonable, and better than we sometimes see. Some 48% had been fully achieved, and a further 7% partially achieved, and it was clear that the leadership of the prison was fully committed to maintaining and improving performance. There was also a very clear commitment from the governor to promulgating the values he wished all his staff to adhere to when going about their work.

A very obvious sign of success is that the rating we awarded for safety, so often a challenge for prisons in recent times, had risen from not sufficiently good at the last inspection to reasonably good on this occasion. This is a very real achievement. Levels of violence had not increased, and were lower than at similar prisons. HMP Stocken had managed to defy the national trend of year-on-year increases in violence. There was good analysis of violence with a strong focus on safety. There was strong leadership in this area, and this had clearly paid off. It is also notable that there had been significant improvement in the governance of the use of force by staff since the last inspection. Levels of self-harm were similar to comparable prisons, and the fact that more than 50% of the 184 incidents in the past six months were carried out by only eight prisoners showed the complex challenges posed by some of the prisoners held in the jail.

The presence of illicit drugs in prisons is often a key factor in the levels of violence, and HMP Stocken needed to review and develop its strategy in this area. The whole prison needed to be involved in this, with every function contributing as they could and recognising they had a role to play. In particular, there needed to be a focus on the threat posed by new psychoactive substances (NPS), which did not receive sufficient attention in the strategy. Nevertheless, there had been some good work carried out, and although the mandatory drug testing positive results were high for the previous six months at around 26%, there were some encouraging signs of improvement in the period leading up to the inspection, and it is to be hoped that this continues.

It was reassuring to see that relationships between staff and prisoners were generally positive, and we witnessed many constructive interactions. However, there had been insufficient attention paid to equalities since the last inspection some four years ago, and a lack of direct personal involvement from the most senior leadership of the prison in driving progress. We were concerned by some serious weaknesses in the area of health care, with some poor practice evident in medicines management, stock control and unsafe storage. There was also a worrying lack of managerial and clinical supervision of primary care staff.

It was disappointing, both for the Inspectorate and the prison, to find that performance in the area of purposeful activity had fallen away. At the previous inspection we had awarded our highest grade of 'good', but this had now declined to 'not sufficiently good'. While the quality of what was being delivered was frequently good, our colleagues from Ofsted found that the overall effectiveness of education, skills and work required improvement. Broadly speaking there were enough activity places and those that attended generally achieved well. However, we found that only 60% of prisoners actually left their wings to attend activities, and a further 16% were wing workers who for much of the time were not gainfully employed. Our assessment was that only around three-quarters of prisoners were engaged in genuinely purposeful activity. For those who did get to their allocated activities, punctuality was often poor and they frequently failed to settle into work promptly.

We also had a major concern about the risks to public protection potentially posed by the small number of prisoners, around eight each month, released from Stocken into the community. Stocken is not designated as a resettlement prison, and as such does not receive services from a community rehabilitation company (CRC). Most prisoners were transferred to a resettlement prison prior to release, but a small number were not. This created potentially serious risks, given the profile of the prisoner population at Stocken, and those risks were compounded by weaknesses in the internal assessment of risk as set out in Section 4 of this report.

In conclusion, I would recommend that this report is read very carefully to appreciate the evidence which sits behind our judgements, both those that were positive and those that were less so. Some of those judgements were finely balanced, but the main concerns we have identified will, I hope, give a clear steer for where the undoubted energy and commitment of the leadership and staff at Stocken can best be focused.

**Peter Clarke CVO OBE QPM**  
HM Chief Inspector of Prisons

March 2019

# Fact page

## Task of the establishment

HMP Stocken is an adult male category C training prison

## Certified normal accommodation and operational capacity<sup>1</sup>

Prisoners held at the time of inspection: 833

Baseline certified normal capacity: 768

In-use certified normal capacity: 768

Operational capacity: 853

## Notable features from this inspection

*34.4% of prisoners were under the age of 29 years.*

*97% of prisoners were serving four years or more.*

*Just over 50% of prisoners had been convicted of a violent offence.*

*45% of prisoners had been at the prison for less than six months.*

*Only 23% of prisoners in our survey said that it was very or quite easy for family or friends to get to the prison to visit them.*

*In our survey, 44% of prisoners said that drugs, and 39% alcohol, were easily available.*

## Prison status (public or private) and key providers

Public

Physical health provider: Care UK Health and Rehabilitation Services Limited

Mental health provider: Northamptonshire Foundation NHS Trust

Substance use provider: Inclusion–Midlands Partnership NHS Foundation Trust

Learning and skills provider: Milton Keynes College

Community rehabilitation company (CRC): None

Escort contractor: GeoAmey

## Prison group/Department

North Midlands Prison Group

## Brief history

Built in 1985 as a young offender institution, HMP Stocken then re-roled as a category C closed training prison. It has since expanded, with new accommodation added in 1990, 1997, 1998, 2003, 2008 and 2011, which significantly expanded the roll. A new wing (N wing) for around 200 prisoners was due to open in June 2019.

<sup>1</sup> 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.

**Short description of residential units**

F wing – General population

H wing – Induction unit

I wing – Drug recovery unit

K wing – Integrated drug treatment system wing

L wing – General population

M wing – General population

**Name of governor/director and date in post**

Neil Thomas (30 January 2017)

**Independent Monitoring Board chair**

Ruth Bray

**Date of last inspection**

29–30 June; 6–10 July 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)*.<sup>2</sup> 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.<sup>3</sup>

---

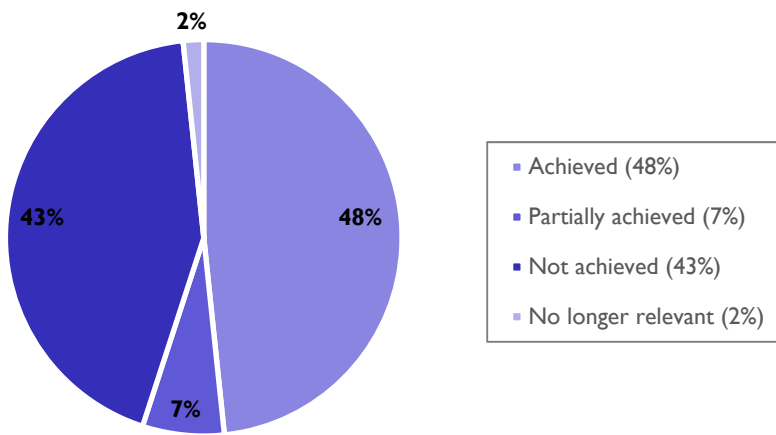
<sup>2</sup> <https://www.justiceinspectors.gov.uk/hmiprisoners/our-expectations/prison-expectations/>

<sup>3</sup> 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 Stocken in 2015 and made 60 recommendations overall. The prison fully accepted 46 of the recommendations and partially (or subject to resources) accepted six. It rejected eight of the recommendations.
- S2 At this follow-up inspection, we found that the prison had achieved 29 of those recommendations, partially achieved four recommendations and not achieved 26 recommendations. One recommendation was no longer relevant.

Figure 1: HMP Stocken progress on recommendations from last inspection (n=60)



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

Figure 2: HMP Stocken healthy prison outcomes 2015 and 2019<sup>4</sup>



<sup>4</sup> Please note that the criteria assessed under each healthy prison area were amended in September 2017. Healthy prison outcomes reflect the expectations in place at the time of each inspection.

## Safety

S4 *Prisoners received good support during their early days at the prison. Too many prisoners experienced violence, although levels were lower than in similar prisons and had not risen since the previous inspection. There was a strong focus on reducing violence, much of which was due to drugs and debt. The number of adjudications was comparable with that at similar prisons but too many were not proceeded with. Levels of use of force had increased but governance arrangements had improved. Security processes were well managed and the number of incidents of disorder had reduced. Segregation was well governed and its use had reduced. Drug availability, particularly new psychoactive substances, was problematic. There was a good reactive approach to reduce supply but the overall strategy to limit illicit drug use and drive improvement was underdeveloped. Some good support was provided for prisoners at risk of self-harm but this was not evidenced in assessment, care in custody and teamwork (ACCT) processes. **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 Stocken were not sufficiently good against this healthy prison test. We made 14 recommendations in the area of safety.<sup>5</sup> At this inspection we found that nine of the recommendations had been achieved, one had been partially achieved and four had not been achieved.*

S6 The reception area was clean, bright, calm and welcoming. There was good support for new arrivals from peer workers, and staff were friendly and efficient. The first night safety interview was now held in private, but professional telephone interpreting services were not always appropriately used when needed.

S7 All new prisoners were taken to the induction unit, and first night cells were clean and well equipped. In our survey, 80% of respondents said that they had felt safe on their first night.

S8 Induction was reliably delivered, and the information and support provided on the first night and in the following week was comprehensive.

S9 Levels of violence were now lower than in similar prisons and had not increased since the previous inspection, which was a considerable achievement considering the overall rise in violence across the prison estate. Nevertheless, around one in five prisoners said that they currently felt unsafe, and the number of prisoners who experienced violence remained too high and included a substantial proportion who had experienced serious injury. Much of the violence and victimisation were related to drug use and debt.

S10 Analysis of violence was comprehensive. There was a strong focus on reducing violence across the prison, led by the governor. A range of actions had been taken to make the prison safer, although strategic planning was underdeveloped and actions were not coordinated or monitored through a comprehensive action plan. The weekly violence reduction tasking, and support and intervention meetings were excellent initiatives aimed at reducing violence.

S11 A casework approach to managing perpetrators of violence and victims had been introduced and looked promising. Challenge, support, intervention plans (CSIPs) were often limited and did not always address the relevant issues. The regime for the few prisoners self-isolating on residential units was poor.

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

- S12 A reasonable range of incentives and rewards was offered through the incentives and earned privileges scheme to encourage prisoners to behave. However, in practice, the opportunity to progress, particularly to category D status, was the most powerful incentive.
- S13 The number of adjudications had increased but was now similar to that at other category C prisons. Some charges could have been dealt with less formally and too many had been remanded for long periods, and some were out of time, which undermined efforts to address poor behaviour.
- S14 Levels of use of force had increased but were comparable with those at similar prisons. Governance arrangements had improved substantially and accounts from officers gave assurance that the use of force had been justified. All planned incidents were video-recorded, and the footage we viewed showed that incidents were well managed and that de-escalation was used. However, on at least three occasions masks or balaclavas had been worn during planned incidents, which was inappropriate.
- S15 The use of segregation had reduced and was lower than we see at similar prisons. Managerial oversight was good and relationships between staff and prisoners on the unit were positive. Living conditions on the unit were generally good but exercise yards were stark. The regime for segregated prisoners was limited but lengths of stay were not excessive and reintegration planning was improving.
- S16 Security arrangements were broadly proportionate, and the management and dissemination of intelligence were very good. Security-related meetings were well attended and links with the rest of the prison, particularly safer custody, had improved considerably in the previous year. The number of incidents of disorder had reduced substantially and the prison was suitably focused on the key threats of drugs and violence.
- S17 The use of illicit drugs, particularly new psychoactive substances (NPS),<sup>6</sup> remained a serious problem. In our survey, nearly half of prisoners said that it was easy to get drugs at the prison. The mandatory drug testing (MDT) positive rate was high, at around 26% over the previous six months, and almost exclusively for NPS. There had been a reduction in the MDT positive rate and NPS-related incidents in the previous two months. Although there was a good reactive approach to supply reduction, the strategy to provide a whole-prison approach to limiting illicit drug use and driving improvement was underdeveloped. The drug strategy was not based on an assessment of local issues. The drug reduction action plan was incomplete, did not address the use of NPS or the emerging increase in alcohol use, and did not adequately measure progress.
- S18 There had been two self-inflicted deaths since the previous inspection. Prisons and Probation Ombudsman recommendations were not always implemented or embedded. Levels of self-harm had increased substantially since the previous inspection and were now comparable with those at similar prisons. Over half of the 184 incidents in the previous six months had concerned just eight prisoners. Investigations of serious incidents of self-harm were good and identified lessons learned. There was no local strategy for reducing self-harm, and insufficient analysis of self-harm incidents to inform strategic action.
- S19 Although prisoners subject to assessment, care in custody and teamwork (ACCT) case management for prisoners at risk of suicide or self-harm told us that they felt well cared for by staff, there were serious deficiencies in care planning, reviews and recorded interaction. Prisoners on ACCT supervision who were located on the segregation unit did not always have their risk reviewed. Access to Listeners (prisoners trained by the Samaritans to provide

<sup>6</sup> NPS generally refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vaporized and inhaled in e-cigarettes and other devices.

confidential emotional support to fellow prisoners) was good, and a counselling service was also available.

## Respect

*S20 We saw generally positive staff–prisoner relationships. Living conditions were clean and decent, and prisoners had good access to basic essentials. The food provided was reasonable and access to the prison shop was good. Applications processes were weak. Complaints were well managed. There was too little focus on equality work and there was insufficient provision for prisoners within protected groups. Faith provision was good. Health provision had deteriorated and required improvement. **Outcomes for prisoners were reasonably good against this healthy prison test.***

*S21 At the last inspection in 2015 we found that outcomes for prisoners in Stocken were reasonably good against this healthy prison test. We made 27 recommendations in the area of respect. At this inspection we found that eight of the recommendations had been achieved, two had been partially achieved and 17 had not been achieved.*

S22 In our survey, most prisoners, and a similar percentage to that found at the time of the previous inspection, said that staff treated them respectfully. We saw some positive interactions between staff and prisoners, and staff generally knew prisoners well. Most prisoners we spoke to reported having a member of staff they could talk to if they had a problem. Although in its infancy, the implementation of the Offender Management in Custody (OMiC) model was positive, and most prisoners who had a key worker had meaningful contact with them.

S23 Living conditions were good. Outside and communal areas were clean. Cells were well equipped, and innovative use of peer-led audits led to improvements. Prisoners had good access to showers, kit and cleaning equipment. Although monitoring took place, only 23% of call cell bells were answered within five minutes.

S24 Some prisoners, and more than at the time of the previous inspection, were sharing cells designed for one, and these were cramped and lacked privacy.

S25 The food provided was reasonable. Breakfast packs, although not served on the day they were intended to be eaten, had been enhanced with additional food. Since the previous inspection, provision for prisoners to dine communally had increased, and every wing now provided some limited self-catering facilities, which were valued by prisoners. All prisoners could now access a reception shop, which was good practice and reduced the risk of getting into debt.

S26 Consultation arrangements were adequate, but not as effective as those at the time of the previous inspection.

S27 Prisoners had little confidence in the applications process. There was no longer any effective tracking, monitoring or quality assurance of the process.

S28 Few complaints were responded to late and 27% had been upheld in the previous six months. Responses were generally adequate, although some were terse and some failed to address all the issues raised. More matters should have been resolved earlier, without recourse to the complaints process.

- S29 Prisoners had access to regular family law advice sessions. Access to suitable private legal visit facilities had improved, but not all could be held in private.
- S30 The strategic oversight of equality work was weak. Action planning and consultation with prisoners in protected groups were poor. Prisoners had little confidence in the discrimination incident report form (DIRF) process. Most DIRFs were responded to late, and some had not been responded to at all. However, the quality of DIRF responses was improving and more recent responses were good. Equality monitoring data for the last two quarters showed little disproportionate treatment of prisoners in protected groups.
- S31 The lack of consultation left the prison poorly placed to understand some adverse survey results for black and minority ethnic prisoners. There was insufficient provision for prisoners in most groups, including Travellers, foreign national prisoners and older prisoners. The prison was not meeting all the needs of some with disabilities. Poor supervision of informal wing care arrangements was a serious concern.
- S32 Faith provision was reasonable. There was good pastoral care and almost all prisoners now had access to a chaplain of their own faith.
- S33 Several aspects of health provision had deteriorated since the previous inspection and, overall, the service required improvement. Some areas lacked effective oversight. Waiting times for most primary care services were acceptable, apart from long waits to see the physiotherapist and for a routine GP appointment.
- S34 Long-term health conditions were managed effectively. However, a lack of oversight of some patients with complex nursing care needs led to poor outcomes. A social care pathway was in place but the recording of planned care was poor. Staff shortages had had an impact on the delivery of some mental health services, including delays in routine assessments, but urgent referrals were seen promptly.
- S35 The drug recovery unit on I wing provided a positive environment, with a wide range of psychosocial support available. Not all patients on opiate substitution therapy received regular and timely clinical reviews.
- S36 The management of medicines had deteriorated. Security arrangements for the storage of medicines were unsafe, and required immediate action. Dental provision was good but waiting times were too long.

## Purposeful activity

- S37 *The regime was predictable and the amount of time out of cell for prisoners engaged in activities was good. Too many prisoners were locked up during the working day. PE and library services were very good. The leadership and management of education skills and work required improvement. There were enough activity places for the population but too many prisoners failed to attend or were under-employed. A wide range and variety of provision were offered. The quality of teaching and learning was good, with a suitable focus on English and mathematics. Not enough prisoners developed a suitable work ethic. Qualification achievement rates were high but employability skills were not always recognised. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S38 *At the last inspection in 2015 we found that outcomes for prisoners in Stocken were good against this healthy prison test. We made nine recommendations in the area of purposeful activity. At this inspection we found that six of the recommendations had been achieved and three had not been achieved.*
- S39 The amount of time unlocked was good. Prisoners who were in full-time work could be out of their cell for more than 10 hours during the week. The regime was predictable and there had been no regime curtailments in the previous six months. During our roll checks, we found 15% of prisoners locked up during the working day, which was more than at the time of the previous inspection.
- S40 A wide range of association equipment was available and some creative activities were delivered, but not on every wing. Prisoners had good access to the library. It was well stocked and there was excellent promotion of literacy. There was now good access to computers. Prisoners engaged in a wide range of sports activities, and PE facilities were good. There was a commendable focus on health and well-being.
- S41 The leadership and management of education, skills and work activity required improvement overall. Prison and Milton Keynes College managers' partnership working was good. Senior leaders suitably prioritised the improvement of prisoners' English and mathematics skills. The range and variety of accredited courses were good.
- S42 There were sufficient purposeful activity places for the prison population, and allocation processes were generally fair. We found only around 60% of prisoners leaving the wing to attend education, training and workshops. Session attendance rates were too low and punctuality was not consistently good enough. A further 16% of prisoners were employed as wing workers but they were not gainfully employed for the full working day.
- S43 Quality assurance of college provision was good. However, measures to evaluate the quality of prison-delivered sessions, which made up a substantial part of the provision, required improvement. Prisoners did not receive sufficient and appropriately synchronised careers information, advice and guidance.
- S44 Generally, prisoners received good teaching and individual coaching within education classes and vocational training sessions. Tutors and instructors managed peer mentors well to support prisoners' achievement. In English and mathematics sessions, prisoners swiftly developed their skills and knowledge. Assessment in vocational training was well planned to meet prisoners' needs. Most prisoners received regular feedback, although it was too often celebratory rather than developmental. In education classes, tutors did not ensure that the more able prisoners were always suitably set challenging work.



- S45 Prisoners' behaviour was usually good and the learning environment evidenced mutual respect. In education classes, prisoners participated in enrichment activities that ensured that they developed a good understanding of how to apply their learning to a range of contexts. Most prisoners developed useful team and independent working skills. Not enough prisoners demonstrated a sound work ethic or attitude to being punctual. Most prisoners in workshops did not develop the necessary skills and attitudes to meet realistic commercial deadlines.
- S46 Achievement rates were high. Most prisoners made at least the expected progress from their starting points. The standards of completed practical and written work were generally good and, at level 1, exceeded expectations. Prisoners' employability skills within non-accredited provision were not adequately recognised and promoted.

## Rehabilitation and release planning

- S47 *Work to support family ties was good overall but more needed to be done to assist with visits travelling arrangements. Offender management was compromised by staff shortages, lack of professional oversight and a backlog of offender assessment system (OASys) assessments. Offender supervisors did not routinely drive forward sentence progression. Home detention curfew and recategorisation processes were sound but prisoners waited too long for transfer to open conditions. Public protection arrangements were poor and presented an unacceptable risk. Few prisoners were released directly from the prison but, in the absence of a local community resettlement company, resettlement provision was limited. Interventions and programmes to address offending behaviour were good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S48 *At the last inspection in 2015 we found that outcomes for prisoners in 2015 were reasonably good against this healthy prison test. We made 10 recommendations in the area of resettlement.<sup>7</sup> At this inspection we found that five of the recommendations had been achieved, one had been partially achieved, three had not been achieved and one was no longer relevant.*

- S49 Children and family provision was generally good. There was a wide and improved range of interventions to support prisoners and their relationships with their families. The visitors centre and visits hall were well equipped, and the interactions we observed between staff and visiting children were exceptional. Visits regularly did not start on time. Many prisoners were located far from home, and in our survey far fewer prisoners than at comparator prisons said that it was easy for their family to visit them. Security processes delayed prisoners receiving their mail.
- S50 The prison had done some good work to understand the needs of its population but this did not inform the strategic management of reducing reoffending, which was weak. The reducing reoffending strategy did not clearly identify strengths and challenges, in order to set priorities and drive improvement.
- S51 Over a third of the population was assessed as presenting a high risk of harm, and almost all were serving long sentences, of four years or more. Too many prisoners, nearly a third, arrived at the establishment without an offender assessment system (OASys) assessment of their risk and needs. Although the prison had worked hard to address the backlog of OASys assessments, over 200 prisoners were currently without an up-to-date assessment. Too

<sup>7</sup> 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.

much uniformed offender supervisors' time was lost to other duties, and this undermined offender management work.

- S52 Recorded levels of contact from offender supervisors were inconsistent and too often weak. We found too little evidence of offender supervisors routinely driving forward sentence progression. Although uniformed offender supervisors supervised high-risk cases, they were still not professionally supported and guided. Home detention curfew processes were well managed.
- S53 Public protection processes were poor. The interdepartmental risk management team (IRMT) meeting was poorly attended and did not routinely consider high-risk prisoners approaching release, to provide assurance that risks were being properly managed. Multi-agency public protection arrangements (MAPPA) management levels were not routinely confirmed before release, which prevented the prison from contributing to release arrangements. Child contact restrictions and arrangements to conduct and review telephone monitoring were poorly managed and presented possible risks to the public.
- S54 Recategorisation processes were sound, but it took too long for prisoners approved for category D to be moved to an open prison because of the lack of open prison places. This caused considerable frustration.
- S55 Stocken was not a designated resettlement prison, and therefore did not have a community rehabilitation company to provide resettlement services. Despite strenuous efforts by the offender management unit (OMU), some prisoners were unable to move back to their local resettlement prison before release, and as a result about eight prisoners were released directly from the establishment each month, some of whom were high risk. There was no systematic review of prisoners' resettlement needs before they were released. However, parole processes and some work by individual offender supervisors with high-risk prisoners often provided a safety net. The Lincolnshire Action Trust worked with some prisoners to address their resettlement needs but, as a result of their restrictive referral criteria, most prisoners being released could not access their help.
- S56 The provision of offending behaviour programmes was reasonably good. More work was required to understand the need in relation to domestic abuse within the population and ensure that provision was adequate. There was a wide range of other short-term interventions to help prisoners to address their attitudes, thinking and behaviour.
- S57 There was still no consistent support to help all prisoners approaching release to find accommodation and manage their finances.

## Main concerns and recommendations

- S58 Concern: The availability and use of illicit drugs, particularly NPS, remained a serious problem. There was a good reactive approach to supply reduction, but the strategy to provide a whole-prison approach to limiting illicit drug use and driving improvement was underdeveloped, was not based on an assessment of local issues, did not address NPS or the emerging increase in alcohol use, and did not adequately measure progress.

**Recommendation: A comprehensive strategy and action plan should be introduced to drive and coordinate a drug supply and demand reduction. Actions should be monitored for effectiveness.**

S59 Concern: The strategy, action planning and oversight of equality work were weak. Poor consultation with prisoners in protected groups left the prison poorly placed to identify, understand and act on concerns, such as those shown by poor survey results for black and minority ethnic prisoners. Weak oversight meant that the risks faced by some prisoners, such as those with disabilities, were not sufficiently well managed.

**Recommendation: Equality strategy, action planning and oversight should be robust, informed by routine consultation and ensure that the needs of prisoners in protected groups are identified and addressed.**

S60 Concern: Many aspects of health care provision had deteriorated since the previous inspection. There was a lack of robust governance for several areas of health care, including poor oversight of medicines management, with poor stock control and unsafe storage that needed immediate attention. Some patients requiring nursing care did not always receive the treatment they needed, which left patients at risk of their health deteriorating. Care plans were not always followed or regularly reviewed, and primary care staff did not receive regular managerial or clinical supervision.

**Recommendation: Effective and robust governance structures should be in place, to ensure that all aspects of health delivery meet the needs of prisoners and are safe, including effective oversight of patient care and the immediate implementation of robust and secure medicines management arrangements.**

S61 Concern: Too few prisoners were engaged in purposeful activity. Session attendance rates were too low and too many prisoners were working in areas where they were not gainfully employed for the full working day.

**Recommendation: Prisoners should be engaged in work that is purposeful and keeps them fully occupied. Prisoners allocated to activities should attend.**

S62 Concern: Public protection procedures to manage the risk that prisoners presented, both in custody and on release, were poor. Arrangements to impose and review child contact restrictions and to conduct and review telephone monitoring were both poorly managed and presented an unacceptable risk. The IRMT did not routinely consider high-risk prisoners approaching release, to provide assurance that their risk would be appropriately managed. MAPPA management levels were not routinely confirmed before release, to allow the OMU to contribute effectively to release arrangements.

**Recommendation: Public protection procedures should be given urgent and sustained attention, to ensure that prisoners' risks, both in custody and on release, are appropriately managed.**



# 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 There was an average of 24 new receptions each week. New arrivals said that they had received good treatment by escort staff.
- I.2 The reception area was clean, bright, calm and welcoming, with relevant information displayed on the walls to explain to prisoners what to expect during their early days. Prisoners were not locked in holding rooms and were able to move freely within the reception area. Staff were friendly and efficient, and in our survey, 79% of respondents said that they had been treated well in reception.
- I.3 There was good support from induction orderlies, who had easy access to new arrivals and provided hot drinks and snacks.
- I.4 A short, private interview was held by a supervising officer, who identified any immediate concerns. However, while we were observing, a prisoner whose first language was not English did not have his needs fully addressed, and professional telephone interpreting services were not used (see also paragraph 2.44).
- I.5 During the inspection, we saw new arrivals being held in reception for two to three hours. The time spent there was meaningful. Property was issued, and reception staff were trained in portable appliance testing, which meant that there was no delay for prisoners in receiving their electrical items. All prisoners were provided with a quilt and they could buy vaping materials and basic items immediately from a reception shop (see also para 2.17 and Appendix V), reducing the potential for accruing debt.
- I.6 Prisoners were escorted to the induction wing (H wing) by the induction orderlies and were greeted there by officers, who took them to their cells. Cells were clean and well equipped. All new receptions completed a cell inventory with a member of staff which highlighted any lack of equipment, damage or maintenance issues that needed actioning, and staff chased any outstanding issues. Induction orderlies also helped prisoners to order prison shop items and clothing, and submit food choices for their first week at the prison.
- I.7 A comprehensive first night safety interview, which addressed relevant risks, was now held in private. Interviewing staff were not aware of professional telephone interpreting facilities, and the safety concerns of the prisoner we observed, whose first language was not English (see above), were not explored. Night staff were not aware of new arrivals, and no additional checks were carried out on them during the night. However, newly arrived prisoners we spoke to, and 80% of respondents to our survey, said that they had felt safe on their first night.
- I.8 During their first five days at the establishment, prisoners received a peer-led induction, providing comprehensive information relating to key areas including rules, safety,

employment opportunities and offender management. This was followed by an optional learning and skills course, which provided signposting to employment opportunities (see also section on education, skills and work). In our survey, 99% of respondents said that they had received an induction, and 62% that it had covered everything they needed to know.

- I.9** Prisoners had their own personal record of progression through the induction programme, and a central record was kept to ensure that all those who were eligible had completed it.

## Recommendation

- I.10 The needs of newly arrived prisoners whose first language is not English should be assessed with the use of professional telephone interpreting services.**

## Good practice

- I.11** *New prisoners conducted a cell inventory with a member of staff, to check that their cell was appropriately equipped and maintained, and staff chased any outstanding issues.*

## 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** In our survey, 44% of prisoners said that they had felt unsafe at some time at the prison, and 21% that they felt unsafe currently, which was comparable with the results at the previous inspection and at other category C prisons. Nearly half of prisoners said that they had been bullied or victimised by other prisoners.
- I.13** Levels of violence were broadly similar to those at the time of the previous inspection. The prison data we examined indicated that the number of violent incidents was lower than in similar prisons and below the national average, with 88 assaults on staff and prisoners, and 27 fights in the previous six months; this was a considerable achievement, considering the rise in violence across the prison estate. Nevertheless, a substantial number of violent incidents were serious; some involved weapons and too many resulted in serious injuries, such as broken bones and hospital treatment. In the previous six months, 25% of all assaults had been reported as such.
- I.14** There was a strong focus on reducing violence across the prison, led by the governor. Much of the violence was associated with drugs and debt. There was good analysis of violence data, and evidence that this was used to inform some violence reduction measures. There were good links between safety, security, health services and drug services staff, who attended the weekly violence reduction tasking, and support and intervention meetings, which were excellent initiatives aimed at responding quickly to emerging issues.
- I.15** Strategically, the management of violence was underdeveloped. The strategic plan did not cover all areas of concern, and actions were not always coordinated or monitored through a

comprehensive action plan. There also remained gaps in the provision of simple interventions, such as mediation and peer support, although some were being developed.

- I.16** The prison had recently introduced a casework approach to manage perpetrators and victims, and to change violent behaviour, and early signs were positive. Challenge, support, intervention plans (CSIPs) were raised for prisoners whose behaviour in custody posed a risk to others, to identify the support they needed. This CSIP approach seemed a sensible way to help to deal with violence at the establishment but many staff, particularly prison officers, were unfamiliar with some of its processes. The quality of CSIPs was mixed. Although some were reasonably good, many we saw were inadequate; targets were often superficial, and there was little evidence that changes in behaviour or circumstances were monitored well enough or acted on by residential officers.
- I.17** Support plans were in place for the few prisoners who were self-isolating, but these were not sufficiently well managed. The regime for these prisoners was poor and, apart from short periods of exercise and access to a telephone and shower, they spent nearly all day locked in their cells.
- I.18** The incentives and earned privileges (IEP) scheme offered appropriate differentials between the levels. However, in our survey only 40% of prisoners said that the incentives and rewards encouraged them to behave well. In reality, most prisoners told us that their primary incentive to behave was to obtain category D status.
- I.19** Since the previous inspection, more prisoners had gained enhanced status (45% compared with 13%). The prison had created more mentoring roles, to help prisoners to demonstrate good behaviour. We saw good examples of key workers (see also paragraph 2.2) encouraging prisoners to behave through short-term target setting in their weekly sessions.
- I.20** Although regular IEP reviews took place, the reason for decisions was not always thoroughly recorded, and feedback to prisoners was poor. There was also no robust mechanism for monitoring the quality of IEP reviews. Prisoners had been consulted about the IEP scheme and a new policy was about to be introduced, to help to improve transparency and quality assurance.

## Recommendations

- I.21** **A comprehensive violence reduction strategy and action plan should be introduced, to drive and coordinate violence reduction. Actions should be monitored for effectiveness.**
- I.22** **Individualised plans to support those who self-isolate to deal with the issues that cause their behaviour should be improved, and their regime should include reasonable access to time out of cell and purposeful activity.**

## Adjudications

- I.23** The number of adjudications had increased but was similar to that at other category C training prisons. Most charges related to more serious offences, such as violence and drug-related activity, but some could have been dealt with by less formal means, such as an IEP warning.
- I.24** The governance of adjudication processes was generally good. Data about the number and nature of adjudications were presented at segregation management meetings and were

noted, categorised and used to identify and address trends. Adjudicating governors attended the meetings regularly, and minutes reflected good levels of discussion of relevant issues. The governor carried out quality checks of written records.

- I.25** There was a large backlog of outstanding adjudications. Too many of these related to charges that had been laid but then remanded several months earlier, and some were out of time, which undermined efforts to address poor behaviour.

## Recommendation

- I.26** **Disciplinary hearings should be dealt with in a timely fashion.**

## Use of force

- I.27** Levels of use of force had increased but were broadly comparable with those at similar prisons. In the previous six months, there had been 143 incidents in which force had been used. Most use of force was spontaneous, and in response to fights or assaults.
- I.28** Governance arrangements had improved considerably since the previous inspection, and most aspects were very good. A monthly use of force committee, usually chaired by the deputy governor, was held to oversee processes and provide governance. Information, including the nature of the incident and its location, was collated and presented for analysis. Trends were identified and appropriate action was taken.
- I.29** The use of force paperwork we examined was usually of good quality, although some injury report forms were missing. Accounts from officers demonstrated that when force was used it was justified, and that it was used as a last resort. All planned incidents were video-recorded, and the footage of planned incidents showed examples of de-escalation being used to beneficial effect. However, we found at least three occasions where officers had worn masks or balaclavas during planned incidents, which was inappropriate.
- I.30** The use of special accommodation appeared justified, authorisation paperwork was completed correctly and prisoners were returned to normal cells as soon as possible.

## Recommendation

- I.31** **Masks or balaclavas should not be worn by officers during use of force incidents.**

## Segregation

- I.32** The use of segregation had decreased, and was lower than at similar prisons, with 125 uses in the previous six months.
- I.33** The average duration of segregation was about three weeks for those segregated under Prison Rule 45 (good order and/or discipline/segregation for own protection), with a few notable exceptions, when segregation had lasted for longer than 42 days. At the time of the inspection, there were nine prisoners on the segregation unit, of whom two were there as punishment and seven under Prison Rule 45 for reasons of good order.
- I.34** Living conditions on the unit were generally good. Most cells were clean and reasonably well furnished, and most communal areas were clean. Exercise yards were stark and dirty.



- I.35** Governance arrangements were good. A local segregation policy had been published and a segregation monitoring group met every month to review cases.
- I.36** Relationships between staff and prisoners on the unit were very good. We saw all officers interacting positively with prisoners on a day-to-day basis, and they managed challenging behaviour well. Reviews of longer-stay prisoners were timely and plans to return them to normal location were being developed. Individual management plans had been raised for longer-stay prisoners, and there was evidence that staff supported individuals and dealt with some of the issues that had caused their segregation.
- I.37** The regime on the unit was basic. Prisoners had access to exercise, a telephone and a shower every day. A few longer-stay prisoners were given in-cell education work and could attend a gym session once a week.

## Security

### Expected outcomes:

**Security and good order are maintained through an attention to physical and procedural matters, including effective security intelligence and positive staff-prisoner relationships. Prisoners are safe from exposure to substance misuse and effective drug supply reduction measures are in place.**

- I.38** Procedural security arrangements were proportionate and supported prisoners' access to the regime. Searching was driven by intelligence, productive and detected a sizable number of prohibited articles. The recent introduction of a small dedicated search team was proving effective and enabled the prison to conduct intelligence-led target searching quickly.
- I.39** The principal elements of dynamic security<sup>8</sup> were in place, and the management and use of intelligence were very good. Relationships between staff and prisoners were generally positive and the interactions we observed indicated that many, particularly residential, officers knew about the personal circumstances of the prisoners in their care (see also section on staff-prisoner relationships). Supervision in key areas around the prison, such as residential wings, education classrooms and prison workshops, was generally effective. The number of incidents of disorder had reduced substantially since the previous inspection and the prison was suitably focused on the key threats of drugs and violence.
- I.40** Security-led meetings were well attended and examined a wide range of data. Links with other departments had improved, in particular with safer custody. Security objectives and priorities were based on intelligence and reflected the key risks to prison security. The management of members of organised criminal networks was robust, and the identification and management of gangs were good. Work to tackle staff corruption had been effective.
- I.41** Links with local police were good, and a police intelligence officer had been appointed to collate and help to manage useful information. There was also a dedicated crime liaison officer, to help with investigations relating to criminal activity within the prison.
- I.42** The illicit use of alcohol and drugs, particularly new psychoactive substances (NPS),<sup>9</sup> was a serious problem. Drug use and associated debts contributed to much of the violence and

<sup>8</sup> Dynamic security is where prison staff develop awareness of individual prisoner behaviour and risk and use this understanding to help create a safe and secure prison.

<sup>9</sup> NPS generally refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vaporized and inhaled in e-cigarettes and other devices.

victimisation. In our survey, 44% of respondents said that it was easy to get drugs, and 39% alcohol, at the prison.

- I.43** Although there had been a reduction in the random mandatory drug testing positive rate in the previous two months, it was still high, at about 26% over the previous six months, and almost exclusively for NPS. About 75 intelligence-led tests had also been carried out in the previous six months, 50% of which had been positive.
- I.44** A number of measures had been introduced to tackle drug supply, and the prison reacted quickly to intelligence. However, the strategy to provide a whole-prison approach to reducing illicit drug use and driving improvement was underdeveloped. The published drug strategy document was out of date and not based on an assessment of local issues. The drug reduction action plan was incomplete, was not reviewed often enough, did not adequately measure progress and did not address many principal issues, such as the use of NPS or the emerging increase in alcohol use. Multidisciplinary meetings to bring together various strands of the drug strategy were too infrequent, and meetings were sometime cancelled (see main recommendation S58).

## 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.45** Levels of self-harm had increased substantially since the previous inspection, but were comparable with those at similar prisons. There had been 184 self-harm incidents in the previous six months. Over half of these (53%) had involved just eight prisoners, demonstrating the complex needs of a small number of prisoners held at the establishment.
- I.46** There had been two self-inflicted deaths since the previous inspection. There was an action plan to respond to recommendations from Prisons and Probation Ombudsman investigations into these deaths, and specified actions had been implemented. However, there was no ongoing monitoring and checking to ensure that actions were embedded, and we found that staff were not always confident in implementing them.
- I.47** The establishment held well-attended weekly and monthly safety meetings, which provided good, reactive support to individuals. However, there was insufficient analysis to inform strategic action, and there was no local strategy for reducing self-harm.
- I.48** Investigations following serious incidents were of high quality, and lessons learned were shared with appropriate people through case manager meetings and in the weekly safety meeting.
- I.49** A total of 115 assessment, care in custody and teamwork (ACCT) case management documents had been opened in the previous six months, which represented an increase since the previous inspection but was below the number we usually find at similar prisons. Prisoners we spoke to who were subject to ACCT supervision said that they felt well cared for by residential staff but we found serious deficiencies in ACCT management. Some care

plans did not include triggers, reviews were not always carried out when there had been a change in the prisoner's circumstances, and recorded interaction was poor.

- I.50** In the previous six months, 40 prisoners on an ACCT had been located on the segregation unit. These prisoners had been segregated because of their behaviour and not for their risk alone (which was an improvement since the time of the previous inspection), but their risks were not always reviewed. We found some examples where the authority to locate a prisoner on an ACCT in segregation had not been completed on time.
- I.51** There were three constant watch cells, one of which was in the segregation unit. This was an inappropriate location for this cell, which had been used on seven occasions in the previous six months.
- I.52** There was good support for prisoners, including a counselling service and an adequate number (seven) of Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners). All of the Listeners were trained, and they had regular meetings with the Samaritans and the safer custody team.

## Recommendations

- I.53** **Actions planned in response to recommendations from Prisons and Probation Ombudsman investigations into deaths in custody should be kept under review, to ensure that they are embedded in practice.**
- I.54** **Based on an analysis of incidents, the establishment should implement a local strategy and action plan to reduce levels of self-harm.**
- I.55** **The quality of assessment, care in custody and teamwork (ACCT) management should be improved by ensuring that care plans include actions to mitigate all relevant risks, that there are meaningful interactions between staff and prisoners at risk and that reviews take place whenever there is a change in the prisoner's circumstances.**
- I.56** **Prisoners located on the segregation unit on an open ACCT should have their risks reviewed and authorisation completed on arrival.**

## Protection of adults at risk<sup>10</sup>

- I.57** There was a local policy and memorandum of understanding with Leicestershire and Rutland Safeguarding Adults Board. The head of safer prisons attended monthly safeguarding meetings and had a level 4 qualification in safeguarding children and adults at risk of harm. Prisoners who raised concerns about their vulnerability were highlighted to the safer custody team.
- I.58** The weekly safety meeting considered safeguarding referrals. However, this process was not well understood; during the inspection, we came across an older prisoner with disabilities who had had items stolen from him but had not been identified as vulnerable or discussed at

<sup>10</sup> 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).

the weekly safety meeting for a consideration of safeguarding (see also paragraphs 2.46 and 2.87).

## **Recommendation**

- 1.59 The process to identify and protect adults at risk of harm, abuse and neglect should be understood by all staff.**

## Section 2. Respect

**Prisoners are treated with respect for their human dignity.**

### Staff-prisoner relationships

#### **Expected outcomes:**

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

- 2.1 In our survey, most prisoners, and a similar percentage to that found at the time of the previous inspection, said that staff treated them respectfully. We saw some positive interactions between staff and prisoners, and staff generally knew prisoners well.
- 2.2 Although 90% of respondents to our survey said that they had a personal officer, only 31% said that a member of staff had spoken to them in the last week to see how they were getting on. The prison had started rolling out the Offender Management in Custody (OMiC) model in November 2018 and aimed to allocate all prisoners a key worker by April 2019. Under the scheme, key workers met prisoners weekly. At the time of the inspection, just over a third of prisoners had a key worker. For those who did, we saw evidence of meaningful interaction, and prisoners were positive about the scheme (see also paragraph 4.15).
- 2.3 Prisoners were encouraged to contribute positively to the prison community by becoming peer mentors. They had clearly defined roles and appropriate training. Wing mentors were available on every wing, and prisoners we spoke to knew who their wing mentor was. However, they did not always have a room to work from; some mentors worked from their cell, which was not appropriate and cramped, especially those in cells with double occupancy.

### 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 Cells were clean and in good condition. Prisoners told us that they had access to appropriate materials to keep them clean. The prison had developed an innovative peer-led approach to ensuring that cells were decent and had the appropriate facilities, which involved prisoners collating information to highlight what was missing in their cells. The missing items were then ordered, and progress was monitored at monthly meetings. The prison completed an annual survey using the information gathered, to ensure that standards were maintained.
- 2.5 Some single cells were still used to house two prisoners, and were cramped. In these cells, curtains were used to screen the toilet, which did not provide adequate privacy. More prisoners than at the time of the previous inspection (15% versus 8%) were sharing cells designed for one.

- 2.6** Showers were generally in a good state of repair, with appropriate screening. In our survey, far more prisoners than elsewhere, and at the time of the previous inspection, said that they could shower every day. Most prisoners said that they could access clean kit and bedding every week, and there were working laundry facilities on every wing.
- 2.7** Communal facilities on the wings were good, with pool tables and soft chairs for prisoners to use during association. I wing also had access to a well-equipped music room. However, the exercise yards were bleak, with no seating or recreational equipment. Communal and outside areas were clean and litter free. The corridors were filled with art by prisoners, created through the Art Academy, which improved the atmosphere.
- 2.8** All cells had emergency call bells, and the prison monitored and followed up response times. However, in our survey only 35% of respondents said that call bells were answered within five minutes, and in the sample of data we looked at, only 23% had been answered within this time.
- 2.9** Prisoners reported frustration about accessing their stored property. In our survey, far fewer prisoners than elsewhere and at the time of the previous inspection said that they could access their stored property. However, at the time of this inspection there were no outstanding property applications in reception, and the process was well organised.

## Recommendation

- 2.10 In-cell toilets in shared single cells should be adequately screened.**

## Good practice

- 2.11** *Innovative peer-led audits took place, to ensure consistent and decent living conditions.*

## Residential services

- 2.12** In our survey, 43% of prisoners said that the food provided was very or quite good, which was similar to the figure at other category C prisons. During the inspection, we found portion sizes to be adequate, and the food we tasted was reasonable.
- 2.13** Lunch and the evening meal were served at appropriate times but breakfast packs were distributed on the day before they were due to be eaten. However, the prison had taken steps to enhance breakfast packs and increase the amount of food in them. Serveries were appropriately supervised and clean. The kitchen was also clean and well organised. Prisoners working there could achieve relevant qualifications.
- 2.14** Since the previous inspection, the number of prisoners who could dine communally had increased and self-catering facilities had been introduced on every wing. The self-catering facilities were clean, and valued by prisoners, but the range of facilities varied between wings because damaged equipment had not been replaced.
- 2.15** There was a four-week menu cycle which catered for all diets. There was good consultation with prisoners about the food provided, with an annual survey and monthly focus groups. Comment books were present on every wing, and these were monitored by kitchen staff.
- 2.16** Prisoners could order a wide range of items from the prison shop, including religious, ethnic and craft products. In our survey, more prisoners than at the time of the previous inspection

said that the shop sold the things they needed, and the responses of black and ethnic minority prisoners to this survey question were now similar to those of white prisoners (see also paragraph 2.39).

- 2.17** Depending on the day of the week that a prisoner arrived, they could wait up to a week to make an order from the full shop list. However, since the previous inspection the prison had introduced a reception shop (see Appendix V), where new prisoners could use £25 of credit to buy items from a reduced, but reasonable, shop list. This reduced the likelihood of a prisoner getting into debt in their first week and mitigated the delay in ordering from the full shop list.
- 2.18** Prisoners could also order items from a range of catalogues, which were reviewed regularly following prisoner feedback.

## Recommendation

- 2.19 Self-catering facilities should be consistent across all wings.**

## Good practice

- 2.20** *The introduction of a reception shop, where new prisoners had access to a reduced shop list with credit, reduced their likelihood of getting into debt.*

## Prisoner consultation, applications and redress

- 2.21** The prison was developing a new model for consulting with prisoners. At the time of the inspection, interim consulting arrangements were in place, which were adequate, but these were not as effective as those at the time of the previous inspection.
- 2.22** Prison-wide consultation was conducted through a prisoner focus group. It had met three times in the previous six months to discuss general prison-related matters, some of which were repeatedly carried over without being addressed. The group had also been used well to consult on a review of the prison's incentives and earned privileges policy. Since August 2018, there had been fairly regular wing consultation meetings but, as with the focus group meetings, some matters were repeatedly carried over without being addressed.
- 2.23** Prisoners had little confidence in the applications process. We were told that many applications were not responded to, or were responded to late. Only 39% of prisoners in our survey said that applications were dealt with within seven days, compared with 57% at the time of the previous inspection. There was no longer any effective tracking, monitoring or quality assurance of the process.
- 2.24** In the previous six months, 1,089 complaints had been submitted, and complaint forms were freely available on the wings. In our survey, of those who had made a complaint, only 35% said that they were usually dealt with fairly. The quality of the responses we looked at was generally adequate, and some were detailed and helpful. Twenty-seven per cent of complaints had been upheld over the previous six months, but data on success rates were not publicised, to help to build confidence in the process. Furthermore, in some positive responses, there was no clear statement that the complaint had been upheld, and apologies were not routinely offered when they were due. Some handwritten complaint responses were illegible and not all responses addressed all the issues raised. More matters should have been resolved earlier, without recourse to the complaints process.

- 2.25** There was effective monitoring of the timeliness of complaint responses. Seven per cent of complaints were responded to late, a lower percentage than we often see. There was appropriate quality assurance of complaint responses and we saw some evidence that this was effective. There was reasonable analysis of complaint trends, and evidence that concerning trends were identified and acted on as a systemic problem.
- 2.26** There was limited support to help prisoners with their legal matters, although the prison was exploring innovative ways to address this. A family law solicitor visited the prison regularly and had a large, active caseload. In addition, the prison was about to launch a promising legal information service with the law department of Lincoln University and the local Citizens Advice branch.
- 2.27** There were now five private legal visits rooms, which, although an improvement, was still insufficient; some legal interviews took place in an area only partially partitioned off from the area for domestic visits, which took place at the same time.
- 2.28** There were some out-of-date legal texts in the library, which was poor practice (see also paragraphs 2.43 and 3.6). However, access to computers in the library had improved considerably (see also paragraph 3.6).

## Recommendations

- 2.29** **There should be effective tracking, monitoring and quality assurance of the applications process.**
- 2.30** **Responses to prisoners' complaints should be clear, helpful and deal with the issue raised.**

## 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 characteristics<sup>11</sup> 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

- 2.31** The strategic oversight of equality work was weak and poorly resourced. A custodial manager in the safer custody team spent only about three hours a week on equality work. The prison had recognised these deficiencies; it had recently put in place a new structure to manage this work and was about to appoint a full-time equality manager.
- 2.32** There were just three prisoner equality representatives, and their role was underdeveloped. Consultation with prisoners in protected groups was poor. Apart from a recent forum for prisoners from the Travelling community, there had been no forums with prisoners in protected groups in the previous year (see main recommendation S59).

---

<sup>11</sup> The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).



- 2.33** The diversity and equality action team (DEAT) did not always meet as scheduled and was not led by either the governor or deputy governor. Prisoner representatives attended the meeting, but otherwise attendance was inconsistent. The meeting had been too slow to address key basic deficiencies in provision, such as inadequate staffing in the equality team and poor consultation. Action planning was poor, and most actions in the plan were basic and overdue (see main recommendation S59).
- 2.34** There were long delays in Her Majesty's Prison and Probation Service (HMPPS) making equality monitoring tool (EMT) data available to the prison, and the data produced were not comprehensive. The latest available data showed little disproportionate treatment of prisoners in protected groups over the last two quarters, and there had been sufficient scrutiny of the small number of areas of concern.
- 2.35** A total of 26 discrimination incident report forms (DIRFs) had been submitted in the six months to the end of 2018. DIRF forms were freely available on the wings, and staff we spoke to were aware of the process. However, prisoners had little confidence in the system. The DIRF log showed that most were responded to late, and during the same six-month period five had not been responded to at all. The quality of DIRF responses was improving; some older responses did not evidence a thorough investigation of the matter, but more recent responses were good. There was no external quality assurance of the process.
- 2.36** There had been some celebration of Black History Month and some promotion of issues for Travellers, but the promotion of equality work for other groups was weak.

## Recommendations

- 2.37 Her Majesty's Prison and Probation Service should provide prompt comprehensive equality monitoring data reports.**
- 2.38 Discrimination incident report forms should be responded to promptly.**

## Protected characteristics

- 2.39** At the time of the inspection, 28% of the prison population were from a black and minority ethnic background. In our survey, these prisoners generally reported similarly to white prisoners, apart from some questions about their time in reception. However, a recent HMPPS survey showed black and minority ethnic prisoners reporting worse treatment than their white counterparts across many areas examined. The lack of consultation with these prisoners left the prison poorly placed to understand these results.
- 2.40** In our survey, 4% of respondents said that they were from a Traveller community, suggesting a population of over 30 such prisoners; however, the prison had a record of only 13. There had been a Travellers awareness week, but otherwise provision for this group was limited.
- 2.41** At the time of the inspection, 17% of prisoners were Muslim. EMT data showed few concerns about this group. However, in our survey, respondents in this group reported a worse experience than others in their relationships with staff. There had been no forums for prisoners in this group, and little discussion about them in the DEAT meeting.
- 2.42** There were only 48 foreign national prisoners at the time of the inspection. None were being held beyond the end of their sentence. Provision for this group was underdeveloped. There had been no foreign national prisoner forums and little discussion of this group in the DEAT meeting. Foreign nationals who did not receive visits could apply for a free five-minute

telephone call to their country of origin once a month; however, in recent months as few as two such prisoners had received this, and some told us that applications for this entitlement went unanswered. The prison's foreign national prisoner policy was inaccurate and out of date.

- 2.43** Despite quarterly Home Office surgeries, foreign national prisoners we spoke to complained of poor communication from the Home Office about their immigration status. They expressed considerable frustration at long delays in Home Office decision making and we saw some documentary evidence supporting this view. These prisoners had poor access to free independent advice, and the prison had no up-to-date information about support groups such as Bail for Immigration Detainees. The library stocked some long out-of-date immigration law textbooks (see also paragraphs 2.28 and 3.6).
- 2.44** There was little evidence of translated materials at the prison. We observed one case in which professional telephone interpreting services were not used for an arriving prisoner who spoke little English (see also paragraph 1.4). However, more had been spent on telephone interpreting services in the previous six months than we usually see.
- 2.45** In our survey, 33% of respondents said that they considered themselves to have a disability; however, the prison records did not tally with our survey findings, so staff were not aware of all those with a disability. Provision for these prisoners was mixed. There were four dedicated cells for prisoners with disabilities, and we found some examples of good support. Those who could not work because of their disability were not locked up during the core day. However, we identified some significant unmet need. We were not satisfied that there was sufficient support for prisoners refusing social care who did not have wing care plans. One prisoner had been held for eight months beyond his release date because of various problems, beyond the prison's control, with the provision of suitable accommodation for him in the community.
- 2.46** There were no paid carers. Prisoners nominated to assist in the evacuation of prisoners with disabilities were also expected to help to meet some of their day-to-day needs, such as fetching food and keeping cells clean. These arrangements were ill defined and poorly supervised, and staff told us that they were allowed to develop on an ad hoc basis. We were not satisfied that the risks posed by such arrangements were sufficiently managed (see also paragraphs 1.58 and 2.87).
- 2.47** At the time of the inspection, 10% of prisoners were over 50 years of age. There was good gym provision for prisoners in this group. Beyond this, provision was limited and the prison no longer ran a dedicated library session.

## Recommendations

- 2.48 Foreign national prisoners should have ready access to independent immigration advice and be kept informed of their immigration status by the Home Office.**  
(Repeated recommendation 2.34)
- 2.49 There should be appropriate formal, supervised arrangements for the care of prisoners with disabilities by wing staff, including the use of wing care plans and paid carers, as necessary.**
- 2.50 All staff should be aware of which prisoners need assistance in the event of an evacuation.**

## Faith and religion

- 2.51** Faith provision was reasonable, and in our survey 71% of respondents said that their religious beliefs were respected, which was in line with comparator prisons. The chaplaincy covered almost all faith groups, which was an improvement since the previous inspection, when coverage of some groups had been poor.
- 2.52** The team met all new arrivals within 24 hours, and prisoners could apply to attend services at this initial meeting. In our survey, 86% of respondents said that they were able to attend religious services if they wanted to.
- 2.53** Worship facilities were reasonable. The main chapel provided a bright, pleasant environment for worship, and the multi-faith room was adequate. There were religious classes for all faith groups. The chaplaincy maintained an annual programme of major festivals, covering all faiths.
- 2.54** The team attended assessment, care in custody and teamwork (ACCT) case management reviews for prisoners most in need. The duty member of the team visited the segregation unit daily. The team facilitated the Sycamore Tree victim awareness course, which ran four times a year.
- 2.55** There was evidence of some good pastoral care, and effective monitoring and care of prisoners who had recently experienced a bereavement. The team was visible around the prison during the inspection. The intensive one-week 'Kairos' course paired 22 prisoners with external volunteers, helping to support some prisoners with more complex needs and also build connections with the community.
- 2.56** The team saw all prisoners before their release, and links with community faith groups were being developed. However, there was no volunteer prison visitors group to provide support for those who did not receive visits.

## Health, well-being and social care

### Expected outcomes:

**Patients are cared for by services that assess and meet their health, social care and substance use needs and promote continuity of care on release. The standard of provision is similar to that which patients could expect to receive elsewhere in the community.**

- 2.57** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)<sup>12</sup> and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. Areas have been identified that require improvement, with subsequent notices issued by the CQC which have been detailed within Appendix III of this report.

### Strategy, clinical governance and partnerships

- 2.58** The Care Quality Commission issued 'requirement to improve' notices following the inspection (see Appendix III).

<sup>12</sup> CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

- 2.59** NHS England had commissioned Care UK Health and Rehabilitation Services Limited as the lead provider of health services since June 2016. Mental health services were subcontracted to Northamptonshire Healthcare NHS Foundation Trust (NHFT), and Inclusion – Midlands Partnership NHS Foundation Trust provided psychosocial services.
- 2.60** Some aspects of health provision had deteriorated since the previous inspection and now lacked effective oversight, with weaknesses in several areas of governance (see main recommendation S60). Local partnership board meetings had not taken place since April 2018 and the health needs analysis, published in 2015, was out of date, although one was being commissioned. Additional health services staffing had been agreed, to meet the need of the increased population with the opening of the new wing in June 2019 (see also fact page and paragraph 4.9).
- 2.61** Incident reporting was effective, with thorough investigations and learning shared with staff. Progress had been made on some of the Prisons and Probation Ombudsman recommendations into deaths in custody.
- 2.62** No patient consultation forums had been established and there was no embedded system to gather patient feedback for primary care services. The health care complaints system was confidential. Responses we sampled addressed concerns in a timely and courteous manner, and detailed how to escalate to the next level if the patient remained dissatisfied.
- 2.63** The health service was not a 24-hour provision. Health services staff responded to all emergencies while on duty. All registered staff were trained in intermediate life support. Suitable emergency equipment was available but daily checking systems were not fully embedded.
- 2.64** There had been frequent emergency calls due to incidents involving new psychoactive substances (NPS),<sup>13</sup> which had had an impact on the service (see below and section on security).
- 2.65** Staffing levels had improved in the primary care team, although vacancies and absences affected the whole service. Regular agency staff filled some vacancies and there was an active recruitment campaign.
- 2.66** We observed staff interacting sensitively and caringly with patients. Mandatory training was well managed, with some opportunities for professional development. Managerial and clinical supervision was in place for mental health and psychosocial staff but there were gaps in primary care managerial supervision, and clinical supervision was not offered, and this needed to be addressed.
- 2.67** Clinical records were stored on SystmOne (the electronic clinical record) and could be accessed by all teams. Standards of documentation were variable, with good examples within the mental health and substance use teams, but in some primary care cases insufficient detail had been provided.
- 2.68** The health centre was clean and treatment rooms generally met clinical requirements, including regularly checked and calibrated equipment. However, some of the wing-based medication administration rooms did not meet infection prevention and control (IPC) standards. Daily cleaning checks for clinical rooms were not consistently completed. An IPC audit completed in September 2018 had identified some deficits and there was not a clear action plan to demonstrate how the service was addressing these areas.

---

<sup>13</sup> NPS generally refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vaporized and inhaled in e-cigarettes and other devices.

- 2.69** The waiting area was bright and welcoming, with health information on display. Some seats had recently been removed as they were non-compliant with IPC standards, and more seating was on order.

## Recommendation

- 2.70** **Local partnership board meetings should occur more frequently, to provide strategic oversight and effective governance of the service.**

## Promoting health and well-being

- 2.71** There was a health promotion strategy document but it lacked overarching prison engagement. The gym contributed to the well-being of prisoners, particularly those who were hard to engage, providing several weekly bespoke sessions.
- 2.72** Health promotion literature was available in the health centre but limited elsewhere, which was a missed opportunity to promote health initiatives. Inclusion had several eye-catching displays about substance use information around the prison.
- 2.73** Smoking cessation support was available for those who wished to stop nicotine vaping. Two peer health orderlies had been involved in this with health services staff, but these posts had recently become vacant.
- 2.74** Blood-borne virus screening was not offered routinely during prisoners' early days at the establishment and there were delays in administering hepatitis B vaccinations. Aortic aneurism, retinal and tuberculosis screening was conducted when necessary. However, chlamydia screening and National Health Service health check delivery were minimal and no prisoners had received a measles, mumps and rubella vaccination in the previous nine months.
- 2.75** Condoms were available on request and on release, but this was not well advertised. Some sexual health services were delivered in-house but prisoners needing specialised services were required to access them under escort, which compromised patient confidentiality.

## Recommendations

- 2.76** **Screening, immunisation and vaccinations should be offered and implemented in a timely fashion.**
- 2.77** **Specialist sexual health services should be available within the prison, to ensure privacy and dignity.**

## Primary care and inpatient services

- 2.78** All new arrivals received a health care screen in reception, and appropriate referrals were made. No written information about health services was provided. Professional telephone interpreting services were available and generally used by health services staff, although one notable exception occurred during the inspection (see paragraph 1.4). Secondary screening was completed within an acceptable timeframe.

- 2.79** A suitable range of primary care services were offered, including GP and nurse-led clinics, and an optician. The use of telemedicine had begun to reduce the number of external appointments needed. Prison staff used the NHS 111 telephone line out of hours but health staff did not monitor this activity robustly.
- 2.80** Patients who required planned, coordinated nursing care did not always receive the treatment they needed. There was a lack of oversight of care plans, which meant that patients were not always followed in practice or reviewed regularly, and left them at risk of their health deteriorating (see main recommendation S60). Patients with long-term conditions such as asthma and diabetes were well managed by GPs and the advanced nurse practitioner.
- 2.81** Health care applications were triaged by non-clinical staff, so we could not be sure that patients needing an urgent appointment would be identified, posing a potential clinical risk. Waiting times were adequate for most primary care services, but too long for physiotherapy, dental and routine GP appointments. There were urgent appointment slots available in each GP clinic.
- 2.82** There was an effective system to manage the booking of external hospital appointments. There were sufficient prison officer escorts, which meant that few hospital appointments were cancelled for operational reasons.
- 2.83** Health care release and transfer planning arrangements were effective, when health services staff were given sufficient notice. However, there had been occasions when the transfer of a patient's care had been arranged only after the patient had left the prison, and when prisoners on release had received only a limited supply of medicines.

## Recommendations

- 2.84** **There should be clinical oversight of the appointment system, to ensure that patients are appropriately booked into clinics.**
- 2.85** **Waiting times for some primary care services, including physiotherapy, the GP and dental services, should not exceed clinically acceptable waiting times in the community.**

## Social care

- 2.86** There was a memorandum of understanding with Rutland County Council (RCC) for the provision of social care. Social care needs were screened on arrival at the prison, and there was an established referral process to RCC for a full assessment if required. Health services staff had a good understanding of the referral pathway, although most referrals were made by the prison. Prisoners could also self-refer.
- 2.87** There was limited information about social care throughout the prison. The introduction of prison officer key workers was ongoing and health services staff said that this would help to improve the identification of social care needs after reception. Care UK Health and Rehabilitation Services Limited was contracted to provide social care, and two prisoners were funded to receive a care package at the time of the inspection. Care was offered in line with the care plan, but staff did not always maintain accurate records. Peer supporters helped some prisoners with non-intimate care, but there was limited supervision of their work, which presented a risk (see also paragraph 2.46).

## Mental health care

- 2.88** In our survey, 45% of prisoners said that they had mental health problems, and 58% of these said that they had been helped with these at the prison.
- 2.89** NHFT provided an integrated mental health service via a stepped model of care, for patients with mild to moderate mental health needs to those with more complex needs. During the inspection, the team had 60 patients on their caseload, including six with severe and enduring mental health needs.
- 2.90** Staff shortages, including vacant posts and sickness absence, had affected the delivery of some aspects of the service. The waiting time for a routine assessment was six weeks, which was too long. The manager triaged referrals each morning, prioritising them on clinical need. The team responded to urgent referrals promptly. There was an effective weekly team meeting and good interaction with prison staff.
- 2.91** The team manager was a mental health nurse, and an agency nurse had just started to cover one of two vacant mental health nursing posts, both of which were out to advert. There was also a full-time mental health social worker, which added to the multidisciplinary team approach. Two experienced support workers provided primary mental health interventions under the supervision of the full-time clinical psychologist.
- 2.92** The team supported and reviewed patients on the segregation unit well, and staff attended ACCT reviews for prisoners on their caseload, and others when they could. Despite staff shortages, two groups were run – managing trauma and emotional regulation – facilitated by the clinical psychologist and one of the support workers. Positive feedback had been received from participants of both groups.
- 2.93** There was only one psychiatry session per week, which meant that some patients waited too long for a routine appointment and medication reviews, but this was due to be increased to two sessions per week.
- 2.94** The team received approximately 50 referrals per month from reception, self-referral, and health services and custody staff.
- 2.95** The clinical records we sampled were good, with thorough risk assessments, clear progress notes and care plans demonstrating patient involvement, and records were audited regularly.
- 2.96** Four patients had been transferred to secure services under the Mental Health Act in the previous year. All had exceeded the 14-day transfer guidance, mainly owing to a lack of bed availability, with the longest wait being 16 weeks.
- 2.97** There had been no rolling mental health awareness training for officers over the previous three years, although the mental health team had offered to deliver it.

## Recommendations

- 2.98 Prisoners should have timely access to mental health services, including routine mental health assessments.**
- 2.99 Prisoners needing treatment for their condition in hospital under the Mental Health Act should be transferred within the timescales established by the Department of Health.**

## Substance use treatment<sup>14</sup>

- 2.100** The prison's drug strategy was not informed by a current needs assessment of local issues, and needed further development (see also paragraph 1.44). There were regular drug strategy meetings, which Care UK Health and Rehabilitation Services Limited and Inclusion staff attended. Joint working with wider prison staff was good.
- 2.101** In our survey, 23% of prisoners reported an alcohol problem, and 33% a drug problem, on arrival; of these, 61% and 63%, respectively, said that they had been helped with this while at the prison.
- 2.102** Illicit drug availability, particularly NPS, was problematic, although over the previous two months there had been fewer incidents relating to NPS, with 'hooch' (illicitly brewed alcohol) incidents more prevalent (see also section on security). All incidents were followed up and prisoners were encouraged to engage with the service.
- 2.103** The Inclusion team, although stretched because of staff absence, was actively engaged with 279 prisoners (33% of the population). A wide range of recovery-based group work programmes was available, and short interventions addressed harm reduction issues for specific substances, including NPS and alcohol awareness. Officers had also received training and information on these issues.
- 2.104** The recovery wing (I wing) provided a positive and calm environment. Inclusion staff were based there and had access to good facilities to run groups and individual sessions. The recovery wing and other substance use work was enhanced by the input of four dedicated substance use officers, who provided good support. Alcoholics Anonymous fellowship meetings took place weekly. A peer mentor co-facilitated some group sessions, and three champions promoted the service on other wings. Inclusion staff saw newly arrived prisoners at an induction session and provided them with harm minimisation and service information.
- 2.105** Eighty-one prisoners (10% of the population) were prescribed methadone, which was the only opiate substitution therapy available at the time of the inspection and limited patient treatment options. A third were on reducing doses. The prison did not receive any prisoners on buprenorphine (a heroin substitute), which needed to be reviewed.
- 2.106** There was only one substance use specialist GP session per week, where a nurse administered methadone and undertook reviews, together with the GP and Inclusion staff. However, some prisoners on opiate substitution therapy had experienced delays in receiving their 13-week reviews. No prisoners had needed alcohol detoxification in the previous six months.
- 2.107** We saw good interactions between the nurse and prisoners at the hatch on K wing, where methadone was administered. This was carried out competently, and the queue was managed well by officers.
- 2.108** For the few prisoners who were released from the prison, links with community teams and harm minimisation advice were provided, although naloxone (an opiate reversal agent) was not directly available.

<sup>14</sup> 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).



## Recommendations

- 2.109 Wider options for clinical treatment should be available, in line with national clinical guidance.**
- 2.110 Joint clinical and psychosocial reviews should be timely, to support effective management and care of prisoners on opiate substitution therapy.**

## Medicines optimisation and pharmacy services

- 2.111** Medicines were supplied by Sigma. Deliveries were received from Tuesday to Saturday, which could cause a delay of 72 hours if drugs were needed outside of this window; this occasionally caused the prison to return patients to their sending establishment if essential drugs could not be sourced.
- 2.112** Nurses undertook medicines reconciliation and in possession (IP) risk assessments for new arrivals, using national templates. Although they were cautious in carrying out these assessments, in reality these did not always reflect prescribing practice. The change in the local policy to review IP status annually meant that many patients remained on non-IP medication for their first year at the prison, which was too long to wait for a review.
- 2.113** Medicines were administered from five areas, including the segregation unit, and electronic clinical prescribing was used in all areas. Nurses and pharmacy technicians administered medicines three times a day, between 7.45am and 5.30pm, and this was carried out appropriately. However, the administration times were not in line with therapeutic doses, and storage and recording in some areas were poor. Officers supervised the administration of medicines but the quality of oversight to prevent diversion and bullying was variable. Patients were now able to discuss any medicinal concerns with the newly appointed pharmacist, although this was yet to be embedded. The administration rooms had a poor layout and poor IPC compliance.
- 2.114** The management of medicines had deteriorated. Security arrangements for the storage of medicines were unsafe, and required immediate action (see main recommendation S60). Although some of the cabinetry in the main administration room was locked at night, the key-safe, in which the keys were placed, did not lock. There was no stock reconciliation, and stock levels did not reflect the stock balance. The ordering of medicines was not in line with expected practice; one patient had 11 boxes of his diabetic tablets, which indicated a lack of control of repeat medications. There were out-of-date drugs in the cupboards, including antipsychotic drug injections and emergency adrenaline. The stock available did not always reflect the needs of those patients transferring into the establishment, which created a problem with continuity of care on arrival. Some medicines did not contain patient information leaflets.
- 2.115** Controlled drugs were stored safely, and the site held appropriate licences.
- 2.116** Some medicines monitoring took place within the medicines management meetings, and the most recent controlled drugs audit had been undertaken in November 2018. Incidents were reported on Datix (the electronic health care incident reporting system), with appropriate learning. However, the lack of awareness of the poor security arrangements for the storage of medicines (see above) indicated a lack of management supervision and oversight.
- 2.117** There were no lockable cupboards in single cells, for prisoners to store medicines safely. This was a risk when prisoners were away from their cells and cell doors were left unlocked.

## Recommendations

- 2.118 Medicines should be prescribed and administered at clinically appropriate times, to ensure optimal treatment.**
- 2.119 Medication administration should be supervised effectively by prison staff, to ensure confidentiality and compliance, and reduce the risk of bullying and diversion.**
- 2.120 The medicines management quorate should ensure that medicines storage and oversight are in line with legal and professional standards, and deficits should be immediately resolved.**

## Dental services and oral health

- 2.121** Time for Teeth provided NHS-equivalent dental services. However, the waiting time for routine appointments was too long, at 13 weeks (see recommendation 2.85). There were plans to provide additional clinics to reduce the waiting times. At the time of the inspection, four dental sessions and two dental therapist sessions were held each week.
- 2.122** There was good provision of oral health advice and information. Staff completed a range of effective local audits, including prescribing and X-ray quality. A new digital X-ray machine was due to be installed. The dental facility was spacious, clean and had a separate decontamination room. All equipment was maintained appropriately.

## Section 3. Purposeful activity

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

### Time out of cell

#### **Expected outcomes:**

**All prisoners have sufficient time out of cell and are encouraged to engage in activities which support their rehabilitation.**

- 3.1 The amount of time out of cell for most prisoners was good. Prisoners in full-time employment had over 10 hours out of their cell from Monday to Friday, and about six hours over the weekend. In our survey, most prisoners said that unlock and lock-up times were kept to, and we saw no evidence of regime curtailments within the previous six months. However, during our roll checks we found 15% of prisoners locked up during the working day, which was too many for a training prison and more than at the time of the previous inspection.
- 3.2 Wings were well equipped with facilities for recreational activity. There were some opportunities for prisoners to engage in creative activities, such as busking and music lessons (see Appendix V), but the full range of activities was not available on every wing.
- 3.3 The library was well organised and managed by a full-time library manager and two part-time assistants, supported by a part-time reader/adviser. Seven prison orderlies worked there, one of whom had qualified as a Shannon Trust mentor, helping other prisoners learn to read. However, none of them held formal qualifications – for example, in library work or customer service.
- 3.4 Library services and additions to the book stock were well publicised in a monthly newsletter shared with all prison staff and posted on each wing. The library was well furnished and welcoming.
- 3.5 Most prisoners could attend two 30-minute library visits each week, although evening sessions were not generally well attended because of clashes with other activities. Library staff did not collect sufficiently detailed data on library usage, to determine whether all prisoners were receiving their weekly entitlement or to identify which groups of prisoners were not accessing library services.
- 3.6 The stock of books was appropriate for the population and included a wide range of fiction and non-fiction items, foreign language texts, easy-read texts and audio books. There was appropriate access to additional books and newspapers through inter-library loan arrangements. However, the prison stocked some long out-of-date legal texts, which was poor practice. Access to computer facilities had improved, and was now reasonable.
- 3.7 There was excellent promotion of literacy, through a number of schemes, such as Reading Ahead (an initiative inviting individuals to select six books and record their reading in a diary) and Turning Pages (a mentoring scheme to help prisoners learn to read). The library also hosted the 'Stocken Book Club', which was currently running two reading groups. A uniformed officer was assigned, for six hours a week, to act as a Shannon Trust coordinator for the active team of peer mentors. Peer mentors used the library facilities to deliver one-to-one sessions to improve prisoners' literacy.

- 3.8** Gym provision was good and there was a commendable focus on health and well-being. There was good access to the gym, and more prisoners in our survey than at similar prisons said that they typically went to the gym twice a week or more (63% versus 52%). Access to the gym was by application, which would have helped to ensure equitable access; however, the prison did not monitor access by wing, to check if this was the case.
- 3.9** PE facilities were good, well maintained and comprised a large sports hall, a well-equipped cardiovascular suite, a weights area, an exercise bicycle room and a classroom. An all-weather sports pitch was a good resource.
- 3.10** There was a wide range of recreational sports and leisure activities, including competitive team games. There were some good links with the community, including a new initiative being developed with Leicester City Football Club.
- 3.11** There were well-attended well-man gym sessions, which took referrals from the health care department for prisoners who were overweight, had high blood pressure or who were over 50. A well-man session was also provided for prisoners who were engaging with the mental health team. The team ran a rolling six-week healthy living course, which 10 prisoners were attending at the time of the inspection.
- 3.12** The team offered a wide range of courses, accredited up to level 3, for which success rates were high.

## Recommendation

- 3.13** **There should be effective monitoring of library and gym use, to ensure equitable access to these services.**

## Education, skills and work activities (Ofsted)<sup>15</sup>

### 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.<sup>16</sup>**

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

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

### Management of education, skills and work

- 3.14** Leaders and managers had not ensured that prisoners' session attendance was consistently high enough. The prison offered 769 purposeful activity places. This was enough for 92% of the prison population to undertake full-time education, training or work. However, we found only around 60% of prisoners leaving the wings to participate in purposeful activities. A large proportion of those employed in the production workshops and the 16% of prisoners employed as wing workers were not gainfully employed during the working day (see main recommendation S61). Too often, prisoners failed to arrive punctually for their planned session or engage promptly in the work set for them (see also paragraph 3.36 and recommendation 3.40).
- 3.15** Prison leaders and managers had an incomplete understanding of the quality of the provision's teaching, learning and assessment. Measures to evaluate the quality of prison staffs' taught sessions, which made up a substantial part of the provision, were not comprehensive or rigorous enough. Prison managers' routine setting and use of challenging performance targets required improvement. This limited their ability to improve professional practice and standards across all of the provision. Milton Keynes College managers made effective use of quality assurance arrangements to improve programme delivery. This contributed to the good standard of provision delivered by the college.
- 3.16** Prisoners did not receive sufficient or appropriately synchronised high-quality careers information, advice and guidance. Consequently, the planning of education and training to meet their career aspirations was weak. Lincolnshire Action Trust provided help for those with multiple needs who met their participation criteria. However, pre-release preparation for the very small number of prisoners released from the establishment was too limited.

<sup>15</sup> 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.

<sup>16</sup> In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

- 3.17** When available, managers ensured that sentence plans informed activity allocation, and this process was generally fair. Staff managed the waiting lists for activity places effectively. Pay rates were proportionate to the roles and tasks undertaken. However, managers had a poor oversight of wing work allocation undertaken by residential staff.
- 3.18** Senior leaders suitably prioritised the improvement of prisoners' English and mathematics skills. The allocations process adhered well to the prison's requirement that prisoners needed to achieve a minimum of level 1 in these subjects before beginning an activity. Managers ensured that prisoners who could not attend classroom-taught sessions received effective support.
- 3.19** Prison and Milton Keynes College managers' partnership working was good. It had successfully contributed to the implementation of the wide range and breadth of provision on offer. Since the previous inspection, managers had introduced relevant qualifications, including in customer service and information technology for vocational training. The Trackwork programme had closed because of factors beyond the prison's control, and had been replaced by motorcycle maintenance programmes. Prison managers were in the process of establishing horticulture, waste management, catering, and warehouse and distribution qualifications. Prison managers were not promoting or recording the development of prisoners' employability skills in the relevant non-accredited provision (see also paragraph 3.45).
- 3.20** Most resources and facilities in education classes and vocational workshops were of high quality, particularly in the bistro and the motorcycle maintenance workshop. Only prisoners in education classes were able to access the wide range of resources offered by the virtual campus (internet access for prisoners to community education, training and employment opportunities). At the time of the inspection, 31 prisoners were receiving effective support from either Milton Keynes College (for Open University courses) or prison staff (for distance learning programmes).

## Recommendations

- 3.21 Arrangements should be introduced to evaluate and improve rapidly the quality of prison-delivered teaching, learning and assessment.**
- 3.22 Prisoners should have access to sufficient and appropriately synchronised high-quality careers information, advice and guidance.**
- 3.23 Effective preparation should be available for prisoners who are released from the establishment.**
- 3.24 Effective promotion and recording of prisoners' employability skills development should be introduced, where relevant.**

## Quality of provision

- 3.25** Prisoners received good teaching and individual coaching during education classes and vocational training sessions. Tutors and instructors effectively managed the well-trained prisoner mentors to support prisoners' participation in learning activities. As a result, these prisoners achieved their learning goals at a rapid pace, and this was particularly the case for those with learning needs or those for whom English was not their native language.

- 3.26** In most accredited programme sessions, tutors and instructors ensured that prisoners improved their skills, so that they were well prepared for examinations. As a result, the proportion of prisoners who achieved these qualifications on their first attempt was large. Tutors adeptly used a wide range of effective classroom-based strategies, so that prisoners swiftly enhanced their competence in English and mathematics.
- 3.27** Prisoners received a thorough induction to learning and skills activities. Peer mentors worked closely with prisoners to identify their long-term targets and aspirations. The quality of outreach support delivered away from classrooms, including for prisoners on the segregation unit, was good, ensuring that prisoners made good progress and continued to engage in learning. However, within most prison-run workshops, insufficient attention was given to supporting the improvement of prisoners' English and mathematics skills.
- 3.28** Prisoners followed safe working practices in most workshops and work areas. Those in vocational training workshops had effective inductions into the use of equipment, delivered by suitably competent peer mentors. However, prisoners preparing breakfast packs did not follow the requirements to wear protective smocks.
- 3.29** Tutors' and instructors' feedback to prisoners was too often celebratory, and did not always recognise existing areas for improvement, to help prisoners to avoid repeating mistakes. However, tutors routinely highlighted errors in prisoners' written English, contributing to improvements in the standards of work over time.
- 3.30** The quality of short-term targets that tutors and instructors set for prisoners were not consistently of a high enough standard; they were often vague and lacked clear timescales for achievement. By contrast, the long-term targets they set were effective, appropriately linked to sentence plans and promoted prisoners' rapid achievement.
- 3.31** Tutors gathered detailed information about prisoners' starting points and used it to identify and give them support as needed. However, this session planning failed to ensure that all of the more able prisoners were challenged to make the rapid progress of which they were capable. Within most industrial workshops and wing work, prisoners did not have the opportunity to undertake progressively more demanding activities. This limited their development and preparation for moving to an open prison regime. In vocational training, tutors and instructors planned activities effectively to meet prisoners' needs using tasks at levels that suitably tested them to achieve more.

## Recommendations

- 3.32** Prisoners should routinely use appropriate protective clothing in food packing areas.
- 3.33** Tutors and instructors should provide prisoners with feedback that helps them to improve.
- 3.34** Tutors and instructors should set and monitor effective short-term targets that help prisoners to succeed.
- 3.35** More able prisoners and those employed in industrial workshops and on the wings should engage in activities that challenge them to attain quickly their full potential.

## Personal development and behaviour

- 3.36** Not enough prisoners demonstrated a sound work ethic or attitude to attending sessions as planned and being punctual (see main recommendation S61). Those who arrived on time often waited idly until others arrived, before starting their activities. This failed to prepare prisoners effectively for the needs of future employment on release or following transfer to another prison.
- 3.37** Prisoners in production workshops were not gaining the necessary skills and attitudes expected of commercial enterprises. In these workshops, prisoners' understanding of the importance that employers placed on meeting deadlines and working towards demanding standards was weak. Wing workers were not acquiring the employment behaviours and ethos they needed.
- 3.38** Prisoners' behaviour was usually good, and they showed respectful attitudes towards each other and to staff. They generally developed good team and independent working skills. This was particularly the case for those employed in the bistro and prison shop packing store. Prisoners studying for qualifications were very positive about their learning and took pride in their completed work. This motivated them to take up further learning, either through participation in prison provision or independently.
- 3.39** Prisoners enrolled on education programmes benefited from a wide range of enrichment activities. These made a valuable contribution to their raised awareness of how to apply their learning to the various contexts they might encounter.

## Recommendations

- 3.40** **In all education, skills and work areas, prisoners should attend punctually and develop an appropriate work ethic.**
- 3.41** **Production workshops and wing work should ensure that prisoners develop the relevant skills and attitudes expected of commercial enterprises.**

## Outcomes and achievements

- 3.42** The proportion of prisoners who remained on programmes and achieved their qualifications had improved since the previous inspection and was high. This trend was reflected in the large proportion of prisoners who achieved their English and mathematics functional skills qualifications, including at the higher levels.
- 3.43** Around half the prison population studied for qualifications, and usually made good progress from their starting points. Achievement gaps between different groups of prisoners were minimal; leaders had taken swift and effective action to narrow these gaps through regular data monitoring. Prisoners with complex special educational needs and/or learning difficulties and disabilities often made better than expected progress. However, the most able prisoners did not always make the rapid advancement of which they were capable.
- 3.44** The standards of education and vocational training course work were good and, at level 1, exceeded expectations. Assessment in vocational training was well planned to meet prisoners' needs.
- 3.45** A large proportion of prisoners progressed to higher-level courses and achieved multiple qualifications, including in functional skills. In a small minority of non-accredited vocational



workshops, most production workshops and all wing work, prisoners' employment skills development was impaired as tutors and instructors did not recognise and promote it sufficiently (see also recommendation 3.24).



## 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 Lincolnshire Action Trust (LAT), a family support charity, offered good support to prisoners and their families. They were present in the visitors centre and visits hall, and carried out one-to-one inductions with families during their first visit, to understand their needs. LAT also worked with 30 prisoners and their families on a one-to-one basis to provide more tailored support. There was a wide and improved range of interventions to help prisoners to improve their relationships with families, such as Storybook Dads (in which prisoners record stories for their children), Father's Inside (a parenting skills course for prisoners) and a Positive Lifestyles course. Other initiatives, such as 'Me and My Dad' (where fathers and their children complete structured activities and send them to each other) helped to promote both literacy and family contact.
- 4.2 The prison had run 10 family days in 2018, which had positive feedback from prisoners and their families. Prisoners on the basic level of the incentives and earned privileges scheme could also access family days.
- 4.3 Visits provision was good. The visitors centre and visits hall had recently been refurbished, improving the environment for children and families. There was a well-used bistro, where families could buy hot food, and a supervised children's area with toys. The prison had increased the level of searching for visitors in 2018 because of security concerns. This, alongside the layout of searching areas, meant that many visits started late, and occasionally prisoners did not get their full hour. The interactions we observed between staff and children during the searching process were exceptional.
- 4.4 In our survey, far fewer prisoners than at comparator prisons (23% versus 35%) said that it was very or quite easy for their family and friends to visit them. Many prisoners were far from home, and many we spoke to said that they wanted a transfer to be closer to family for visits. The prison was aware of prisoners' concerns, through regular consultation, and had developed an action plan to start to address them.
- 4.5 In our survey, far more prisoners than at comparator prisons and at the time of the previous inspection said that they had problems with sending or receiving mail. Since the previous inspection, because of security concerns around mail impregnated with new psychoactive

substances (NPS),<sup>17</sup> the prison had started photocopying all incoming mail. This was causing some delays, and prisoners did not always receive their mail within 24 hours of its arrival.

## Recommendation

### 4.6 Visits should start at the advertised time for all prisoners.

## 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.**

- 4.7** The prison had done some good work to understand the needs of its population. A useful population analysis had been completed in 2018 and the reducing reoffending team had recently started compiling a helpful dashboard based on interviews with new arrivals. However, none of this work yet informed the strategic management of reducing reoffending, which was weak.
- 4.8** The reducing reoffending strategy set out processes but did not clearly identify strengths and challenges, in order to set priorities and clearly drive improvement. For example, the strategy described the intention to move prisoners to their local resettlement prison before release, but did not address the reality of eight prisoners having to be directly released from the establishment each month (see paragraph 4.35) and what might be done to support them systematically.
- 4.9** The bimonthly reducing reoffending meeting was well attended, but did not routinely review strategic goals or measure progress. A new residential unit (N wing) was due to open in June 2019, but the impact of the imminent increase in the population on provision was not routinely considered at the meeting.
- 4.10** Overall, the leadership of reducing reoffending and offender management had been transient, and this had affected some key aspects of the work. The head of reducing reoffending had been in post for only a few months, the acting head of the offender management unit (OMU) was about to be replaced by another acting manager, and the senior probation officer was typically on site only about once a week.
- 4.11** Among the population, 38% of prisoners had been assessed as presenting a high risk of harm and almost all (97%) were serving long sentences, of four years or more. A large proportion of the population did not stay long (45% of prisoners had only been at the prison for six months), an unusual feature of a training prison, where prisoners would usually spend much of their sentence completing offending behaviour work.
- 4.12** Too many prisoners, about 30%, arrived at the establishment without an offender assessment system (OASys) assessment of their risk and needs to inform their move to the prison. This jeopardised the prison's ability to provide these prisoners with the right interventions to reduce their risk. Although the prison had worked hard to address the backlog of OASys assessments, 63 prisoners currently did not have an initial assessment and 167 prisoners had an assessment which had not been reviewed in the previous 12 months.

<sup>17</sup> NPS generally refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vaporized and inhaled in e-cigarettes and other devices.

This meant that, in total, 230 prisoners – over a quarter of the population – were currently without an up-to-date assessment of their risk and needs. Some OASys assessments that were the responsibility of the prison were not of sufficiently good quality, and more work was needed to ensure that quality assurance procedures in the OMU were rigorous.

- 4.13** In the cases we looked at, recorded levels of contact from offender supervisors were inconsistent and too often weak. There was no widely understood expectation of the frequency of prisoner contact among offender supervisors. Too much uniformed offender supervisors' time, about 30% in the previous six months, was lost to cross-deployment on the wings, and this undermined offender management work. We found too little evidence of offender supervisors routinely and coherently driving forward sentence progression. A weekly induction session attended by OMU staff was an effective way of promoting the work of the OMU to new arrivals.
- 4.14** There were not enough probation officers to manage all high-risk cases, so uniformed offender supervisors supervised about 100 high-risk prisoners. However, uniformed staff were still not professionally supported and guided in order to supervise these cases.
- 4.15** The Offender Management in Custody (OMiC) model was gradually being introduced, and so far about 300 prisoners had a key worker. It was too early to judge the impact on offender management, but managers had concerns about recruiting the additional probation officers needed to make the model work, given a shortage of nearly 150 probation officers in the region (see also paragraph 2.2).<sup>18</sup>
- 4.16** Only 3% of the population were serving under four years and therefore eligible for home detention curfew, and these processes were well managed.
- 4.17** There was not enough support for prisoners serving indeterminate sentences. Although the OMU held quarterly forums with lifer peer workers, they had not yet adopted a strategic approach to managing and progressing the 27 prisoners serving indeterminate sentences for public protection, most of whom were over tariff.

## Recommendations

- 4.18 Prisoners should have regular contact with an offender supervisor and an up-to-date offender assessment system (OASys) assessment to help them to address their offending behaviour and ensure that their progression is monitored effectively.**
- 4.19 Uniformed offender supervisors should receive regular professional supervision, to help them to manage high-risk prisoners.**

## Public protection

- 4.20** Public protection processes were weak and not always well understood within the OMU. The interdepartmental risk management team (IRMT) meeting was poorly attended and was not given sufficient priority across the prison. Although the establishment routinely released about eight prisoners each month (see paragraph 4.35), the meeting did not routinely consider high-risk prisoners approaching release, to provide assurance that their risks were

<sup>18</sup> 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 (POM) is being introduced gradually, from 2019.

being managed appropriately. We looked at the cases of four high-risk prisoners who were due to be released in February 2019, and none of them had been discussed at the IRMT meeting in the previous six months (see main recommendation S62).

- 4.21** The OMU did not routinely confirm multi-agency public protection arrangements (MAPPA) management levels before prisoners were released. In the four high-risk release cases we looked at, the OMU had managed to confirm the level in only one case. Although a routine request was sent to the community offender manager about eight months before release, we found no evidence of subsequent escalation. Without an understanding of the prisoner's MAPPA management level, the prison was unable to contribute effectively to release arrangements (see main recommendation S62).
- 4.22** Child contact restrictions and arrangements to conduct and review telephone monitoring were both poorly managed, and presented possible risks to the public. The identification of prisoners potentially posing a risk to children was devolved to administrative staff, who typically inherited existing restriction levels from previous prisons. Contrary to public protection guidance, there were no up-to-date assessments by offender supervisors in place to determine whether these prisoners, once identified, presented an ongoing risk to children. There were also no annual reviews of existing contact restrictions, to determine if they were still necessary or relevant – for example, if the child had since turned 18 (see main recommendation S62).
- 4.23** Telephone monitoring arrangements needed urgent attention. As a result of staffing problems, there was a backlog of calls waiting to be listened to. Some logs for prisoners who were subject to this monitoring had stopped many weeks before the inspection. In a couple of cases, foreign language calls had not been translated for up to six months and the prison did not know what these prisoners had been saying, and therefore what risk they posed. There was a lack of resilience in existing OMU processes, with only one member of staff trained to complete the reviews of monitoring to determine if arrangements should cease or continue. These reviews had not been completed for several months and so prisoners had remained under monitoring for long periods without proper authorisation (see main recommendation S62).

## Categorisation and transfers

- 4.24** Recategorisation processes were sound and, in the cases we checked, decisions were reasonable. We found evidence that, when a review was due to be completed and there was not an up-to-date OASys assessment available, the offender supervisor consulted the community offender manager for an update.
- 4.25** It took too long for prisoners approved for category D conditions to be moved to an open prison. Although 94 prisoners had moved to open prisons in the previous six months, which equated to about a third of all transfers, during the inspection there were 53 prisoners who had been awarded category D status and were still waiting for a transfer. Most had been approved in the previous three months, but in a few cases prisoners had waited four or five months, which was much too long. Delays were due to the lack of open prison places, and moving prisoners to establishments out of Stocken's region was especially challenging. This caused considerable frustration to prisoners.

## Recommendation

### 4.26 Prisoners awarded category D status should move promptly to an open prison.

## Interventions

### Expected outcomes:

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

- 4.27** The provision of offending behaviour programmes was reasonably good, and in the cases we looked at we saw some good evidence of interventions being delivered. In our survey, far more prisoners than at similar prisons said that they had done some form of work to address their attitudes, thinking and behaviour.
- 4.28** The prison ran three accredited offending behaviour programmes: the thinking skills programme (TSP), Resolve (a moderate-intensity programme to address general violence) and Kaizen Intimate Partner Violence (IPV). In total, across these three programmes, the prison was on course to deliver 106 completions in the financial year, as contracted. Waiting lists were manageable, with the longest being for TSP, with 26 prisoners assessed and ready to start. Although a new residential unit was due to open in June 2019 (see paragraph 4.9), programmes provision was not due to expand to accommodate the larger population until April 2020 at the earliest.
- 4.29** The monthly accredited interventions managers meeting provided an excellent forum to integrate the programmes team into the wider work of the OMU and the reducing reoffending team.
- 4.30** The prison's own population analysis indicated that just over half of prisoners were convicted of a violent offence, but had been unable to determine how many within this group had perpetrated domestic abuse. The prison's moderate-intensity domestic abuse programme, Building Better Relationships, had stopped running and the current provision, Kaizen IPV, was high intensity and could cater for only about 12 prisoners each year. More work was needed to understand the needs relating to domestic abuse within the population and ensure that provision was adequate.
- 4.31** There was a wide range of other, short-term offending behaviour interventions. Milton Keynes College delivered a personal and social development course. In the previous 18 months, 285 prisoners had completed the assertiveness and decision-making module. However, there was no feedback to offender supervisors after prisoners completed this intervention. The chaplaincy provided up to 88 places on the Sycamore Tree victim awareness programme each year.
- 4.32** Although Milton Keynes college offered a personal finance course, and just over 200 prisoners had completed this in the previous 18 months, there was still no consistent support to help them to manage their individual finances. Prisoners had to meet restrictive criteria in order to access LAT's help (see paragraph 4.37). In a handful of cases, this lack of support in relation to finance was a serious concern. For instance, under the terms of their contract, LAT was only allowed to set up bank accounts for prisoners of working age. Despite the efforts of senior managers to resolve this issue, two retired prisoners had been unable to get help to set up bank accounts in order to receive their pensions.
- 4.33** There was still no consistent support available to help prisoners approaching release to find accommodation. In the cases we checked, prisoners had often gone to approved premises, typically as a condition of their parole. When prisoners were released to other types of

accommodation, the prison did not measure how sustainable this had proven to be (see recommendation 4.39).

## Recommendation

- 4.34 The prison should understand the extent of need for work to address domestic abuse and ensure that provision is adequate.**

## 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.**

- 4.35** Stocken was not a designated resettlement prison, and therefore did not have a community rehabilitation company to provide resettlement services. In the previous six months, the OMU had made strenuous efforts to move nearly 100 prisoners back to a prison in their local resettlement area for release. However, this had not been possible in all cases, and about eight prisoners were released directly from the establishment each month. Of the 27 prisoners with a release date in the three months following the inspection, nearly half were assessed as high risk.
- 4.36** There was no systematic review of all prisoners' resettlement needs before they were released – a significant gap in provision. However, parole processes and some work by individual offender supervisors with high-risk prisoners often provided a safety net and ensured that prisoners were often released to a probation-approved premises under licence conditions.
- 4.37** Aside from the actions of individual offender supervisors, LAT was the only provider in the prison that could potentially cater for resettlement needs. However, this work was not their primary focus, as they were funded by CF03, the European Social Fund, to help the most complex prisoners to reintegrate into society. They worked with about a quarter of the prison population.
- 4.38** As a result of LAT's restrictive referral criteria, most prisoners being released did not access their help. Of the 27 prisoners approaching release in the following three months, only 11 had accessed help from LAT. Of the remaining 16, some had been refused help because their resettlement needs had been identified when they had less than three months left to serve, which meant that, contractually, LAT could not help them.

## Recommendation

- 4.39 Prisoners should not be released directly from Stocken unless adequate provision is put in place to review and address their resettlement needs.**



# Section 5. Summary of recommendations and good practice

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

## Main recommendations

### To the governor

- 5.1** A comprehensive strategy and action plan should be introduced to drive and coordinate a drug supply and demand reduction. Actions should be monitored for effectiveness. (S58)
- 5.2** Equality strategy, action planning and oversight should be robust, informed by routine consultation and ensure that the needs of prisoners in protected groups are identified and addressed. (S59)
- 5.3** Effective and robust governance structures should be in place, to ensure that all aspects of health delivery meet the needs of prisoners and are safe, including effective oversight of patient care and the immediate implementation of robust and secure medicines management arrangements. (S60)
- 5.4** Prisoners should be engaged in work that is purposeful and keeps them fully occupied. Prisoners allocated to activities should attend. (S61)
- 5.5** Public protection procedures should be given urgent and sustained attention, to ensure that prisoners' risks, both in custody and on release, are appropriately managed. (S62)

## Recommendations

### To HMPPS

#### Equality, diversity and faith

- 5.6** Her Majesty's Prison and Probation Service should provide prompt comprehensive equality monitoring data reports. (2.37)

#### Release planning

- 5.7** Prisoners should not be released directly from Stocken unless adequate provision is put in place to review and address their resettlement needs. (4.39)

## Recommendations

### To the governor

#### Early days in custody

- 5.8** The needs of newly arrived prisoners whose first language is not English should be assessed with the use of professional telephone interpreting services. (1.10)

### Managing behaviour

- 5.9** A comprehensive violence reduction strategy and action plan should be introduced, to drive and coordinate a violence reduction. Actions should be monitored for effectiveness. (1.21)
- 5.10** Individualised plans to support those who self-isolate to deal with the issues that cause their behaviour should be improved, and their regime should include reasonable access to time out of cell and purposeful activity. (1.22)
- 5.11** Disciplinary hearings should be dealt with in a timely fashion. (1.26)
- 5.12** Masks or balaclavas should not be worn by officers during use of force incidents. (1.31)

### Safeguarding

- 5.13** Actions planned in response to recommendations from Prisons and Probation Ombudsman investigations into deaths in custody should be kept under review, to ensure that they are embedded in practice. (1.53)
- 5.14** Based on an analysis of incidents, the establishment should implement a local strategy and action plan to reduce levels of self-harm. (1.54)
- 5.15** The quality of assessment, care in custody and teamwork (ACCT) management should be improved by ensuring that care plans include actions to mitigate all relevant risks, that there are meaningful interactions between staff and prisoners at risk and that reviews take place whenever there is a change in the prisoner's circumstances. (1.55)
- 5.16** Prisoners located on the segregation unit on an open ACCT should have their risks reviewed and authorisation completed on arrival. (1.56)
- 5.17** The process to identify and protect adults at risk of harm, abuse and neglect should be understood by all staff. (1.59)

### Daily life

- 5.18** In-cell toilets in shared single cells should be adequately screened. (2.10)
- 5.19** Self-catering facilities should be consistent across all wings. (2.19)
- 5.20** There should be effective tracking, monitoring and quality assurance of the applications process. (2.29)
- 5.21** Responses to prisoners' complaints should be clear, helpful and deal with the issue raised. (2.30)

### Equality, diversity and faith

- 5.22** Discrimination incident report forms should be responded to promptly. (2.38)
- 5.23** Foreign national prisoners should have ready access to independent immigration advice and be kept informed of their immigration status by the Home Office. (2.48, repeated recommendation 2.34)

- 5.24** There should be appropriate formal, supervised arrangements for the care of prisoners with disabilities by wing staff, including the use of wing care plans and paid carers, as necessary. (2.49)
- 5.25** All staff should be aware of which prisoners need assistance in the event of an evacuation. (2.50)

### Health, well-being and social care

- 5.26** Local partnership board meetings should occur more frequently, to provide strategic oversight and effective governance of the service. (2.70)
- 5.27** Screening, immunisation and vaccinations should be offered and implemented in a timely fashion. (2.76)
- 5.28** Specialist sexual health services should be available within the prison, to ensure privacy and dignity. (2.77)
- 5.29** There should be clinical oversight of the appointment system, to ensure that patients are appropriately booked into clinics. (2.84)
- 5.30** Waiting times for some primary care services, including physiotherapy, the GP and dental services, should not exceed clinically acceptable waiting times in the community. (2.85)
- 5.31** Prisoners should have timely access to mental health services, including routine mental health assessments. (2.98)
- 5.32** Prisoners needing treatment for their condition in hospital under the Mental Health Act should be transferred within the timescales established by the Department of Health. (2.99)
- 5.33** Wider options for clinical treatment should be available, in line with national clinical guidance. (2.109)
- 5.34** Joint clinical and psychosocial reviews should be timely, to support effective management and care of prisoners on opiate substitution therapy. (2.110)
- 5.35** Medicines should be prescribed and administered at clinically appropriate times, to ensure optimal treatment. (2.118)
- 5.36** Medication administration should be supervised effectively by prison staff, to ensure confidentiality and compliance, and reduce the risk of bullying and diversion. (2.119)
- 5.37** The medicines management quorate should ensure that medicines storage and oversight are in line with legal and professional standards, and deficits should be immediately resolved. (2.120)

### Time out of cell

- 5.38** There should be effective monitoring of library and gym use, to ensure equitable access to these services. (3.13)

### **Education, skills and work activities**

- 5.39** Arrangements should be introduced to evaluate and improve rapidly the quality of prison-delivered teaching, learning and assessment. (3.21)
- 5.40** Prisoners should have access to sufficient and appropriately synchronised high-quality careers information, advice and guidance. (3.22)
- 5.41** Effective preparation should be available for prisoners who are released from the establishment. (3.23)
- 5.42** Effective promotion and recording of prisoners' employability skills development should be introduced, where relevant. (3.24)
- 5.43** Prisoners should routinely use appropriate protective clothing in food packing areas. (3.32)
- 5.44** Tutors and instructors should provide prisoners with feedback that helps them to improve. (3.33)
- 5.45** Tutors and instructors should set and monitor effective short-term targets that help prisoners to succeed. (3.34)
- 5.46** More able prisoners and those employed in industrial workshops and on the wings should engage in activities that challenge them to attain quickly their full potential. (3.35)
- 5.47** In all education, skills and work areas, prisoners should attend punctually and develop an appropriate work ethic. (3.40)
- 5.48** Production workshops and wing work should ensure that prisoners develop the relevant skills and attitudes expected of commercial enterprises. (3.41)

### **Children and families and contact with the outside world**

- 5.49** Visits should start at the advertised time for all prisoners. (4.6)

### **Reducing risk, rehabilitation and progression**

- 5.50** Prisoners should have regular contact with an offender supervisor and an up-to-date offender assessment system (OASys) assessment to help them to address their offending behaviour and ensure that their progression is monitored effectively. (4.18)
- 5.51** Uniformed offender supervisors should receive regular professional supervision, to help them to manage high-risk prisoners. (4.19)

### **Categorisation and transfers**

- 5.52** Prisoners awarded category D status should move promptly to an open prison. (4.26)

### **Interventions**

- 5.53** The prison should understand the extent of need for work to address domestic abuse and ensure that provision is adequate. (4.34)

## Examples of good practice

### Early days in custody

- 5.54** New prisoners conducted a cell inventory with a member of staff, to check that their cell was appropriately equipped and maintained, and staff chased any outstanding issues. (1.11)

### Daily life

- 5.55** Innovative peer-led audits took place, to ensure consistent and decent living conditions. (2.11)
- 5.56** The introduction of a reception shop, where new prisoners had access to a reduced shop list with credit, reduced their likelihood of getting into debt. (2.20)



## Section 6. Appendices

### Appendix I: Inspection team

Peter Clarke	Chief Inspector
Alison Perry	Team leader
Natalie Heeks	Inspector
Alice Hovington	Inspector
Deri Hughes Roberts	Inspector
Gordon Riach	Inspector
Andrew Rooke	Inspector
Fran Russell	Inspector
Jonathan Tickner	Inspector
Caroline Wright	Inspector
Sharlene Andrew	Researcher
Becky Duffield	Researcher
Rachel Duncan	Researcher
Patricia Taflan	Researcher
Maureen Jamieson	Lead health and social care inspector
Shaun Thomson	Health and social care inspector
Tania Osborne	Health and social care inspector
Matthew Tedstone	Care Quality Commission inspector
Nigel Bragg	Ofsted inspector
Rebecca Parry	Ofsted inspector
Allan Shaw	Ofsted inspector
Keith Humphreys	Offender management inspector





## Appendix II: Progress on recommendations from the last report

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

### Safety

#### **Prisoners, particularly the most vulnerable, are held safely.**

*At the last inspection, in 2015, most prisoners were positive about escort staff. Early days processes were generally good and the induction programme was effective. Prisoners reported high levels of victimisation and many said that they felt unsafe. There had been a number of serious violent incidents. The overall number of assaults was relatively high. Such incidents were investigated well and general strategic management was good. Care for prisoners at risk of self-harm was good. Safeguarding and social care arrangements were reasonable. Security was generally proportionate but there were some exceptions. Procedural security was reasonably well managed but a few practices were disproportionate. There was a growing drug problem involving new psychoactive substances. Suitable prisoners were not always able to access the enhanced level of the incentives and earned privileges scheme. The level of use of force was high. Documentation usually suggested the use of force was justified, but we were not assured that de-escalation was fully used in all appropriate cases. The use of segregation was high but reintegration planning had improved. Substances use services were good. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

#### **Main recommendations**

The prison should address the high levels of violence and negative prisoner perceptions relating to safety and victimisation revealed in our survey. The contribution of staff attitudes and behaviour to the lack of safety should be specifically addressed. (S39)

#### **Partially achieved**

#### **Recommendations**

Unless there are overriding security reasons, prisoners should be given 24 hours' notice of planned transfers. (I.4)

#### **Not achieved**

Prisoners should move through reception quickly and have a private first night interview that focuses on vulnerabilities. (I.11)

#### **Achieved**

Victims of violence should be supported and perpetrators monitored as specified in their respective support and violence reduction plans. (I.17)

#### **Achieved**

All staff should be trained in safer custody procedures and ACCT documents should be completed to a high standard. (1.25)

**Not achieved**

Prisoners in crisis should not be held in the segregation unit for reasons of self harm risk alone. (1.26)

**Achieved**

The prison should develop guidance and procedures to help to prevent the harm or abuse of at-risk adults. (1.29)

**Achieved**

Staff should adequately supervise prisoners on residential units. (1.37)

**Achieved**

Prisoners should not be strip-searched unless an individual risk assessment justifies this step being taken. (1.38)

**Achieved**

All motivated prisoners should have opportunities to obtain enhanced status. (1.44)

**Achieved**

Prisoners should be allowed to retain their enhanced status when they arrive at the establishment. (1.45)

**Achieved**

Minor infringements of prison rules should be dealt with without resorting to the formal adjudications process. (1.49)

**Not achieved**

Managerial oversight of, and the monitoring and analysis of information about, use of force should be robust. (1.52)

**Achieved**

The cage-like exercise yards should be replaced to allow segregated prisoners to exercise in decent conditions. (1.58)

**Not achieved**

## Respect

### Prisoners are treated with respect for their human dignity.

*At the last inspection, in 2015, the prison was generally clean, but some prisoners were in cramped cells and had inadequately screened toilets. We saw some good staff–prisoner relationships but also too much distant and dismissive staff behaviour. There was an inadequate focus on equality and diversity issues. In our survey, minority groups reported more negatively than others. Faith provision was good. Too many responses to complaints were inadequate. Health services were good. The standard of the food provided was good. Outcomes for prisoners were reasonably good against this healthy prison test.*

### Main recommendations

The management and promotion of equality should be robust and informed by routine consultation with groups with protected characteristics. The negative perceptions of minority groups and the disparities in treatment suggested by monitoring data should be rigorously investigated and addressed. (S40)

**Not achieved**

### Recommendations

Prisoners should have access to the grounds on the basis of an appropriate risk assessment. (2.7)

**Not achieved**

Two prisoners should not share cells designed for one. (2.8)

**Not achieved**

In-cell toilets should be adequately screened and showers should be maintained in a decent state. (2.9)

**Achieved**

All prisoners should see their personal officer regularly. (2.16)

**Not achieved**

Prisoner representatives should have a defined role, appropriate training and meet regularly with each other and with staff. (2.24)

**Not achieved**

All staff and prisoners should be aware of the discrimination incident report form (DIRF) system, and DIRFs should be available on all wings. External monitoring of DIRF responses should be established. (2.25)

**Partially achieved**

Reasonable adaptations to assist prisoners with disabilities should be implemented promptly. (2.33)

**Achieved**

Foreign national prisoners should have ready access to independent immigration advice and be kept informed of their immigration status by the Home Office. (2.34)

**Not achieved** (recommendation repeated, 2.48)

Personal emergency evacuation plans should be accurate and all staff should be aware of which prisoners need assistance in the event of an evacuation. (2.35)

**Not achieved**

Responses to prisoners' complaints should be clear, helpful and deal with the issue raised, and they should be subject to effective quality assurance. (2.44)

**Not achieved**

Legal visits should take place in private. (2.48)

**Achieved**

The negative findings in our survey in relation to legal rights should be investigated and acted on. (2.49)

**Not achieved**

All clinical areas should meet relevant cleaning and infection control standards. (2.63)

**Not achieved**

An ambulance should be called immediately when an emergency code is called. (2.64)

**Not achieved**

Prisoners should have access to regular systematic health promotion throughout the prison and on release, including easy, confidential access to barrier protection. (2.65)

**Achieved**

Waiting times for primary care services, including the optician, podiatry and physiotherapy, should not exceed clinically acceptable waiting times in the community. (2.74)

**Not achieved**

Prisoners should have access to a pharmacist for advice and medicine use reviews. (2.79)

**Not achieved**

The in-possession policy should be followed and all prisoners should have recorded in-possession risk assessments that are regularly reviewed. (2.80)

**Not achieved**

The wing-based dispensary rooms on the wings should support easy communication with prisoners, and safe and timely drug administration. (2.81)

**Not achieved**

A full range of patient group directions should be in place to enable the supply of a greater range of more potent medications by nursing staff so that unnecessary consultations with the doctor can be avoided. (2.82)

**Achieved**

Discipline staff should have regular mental health awareness training, to enable them to identify and support prisoners with mental health problems. (2.91)

**Not achieved**

Breakfast packs should be more substantial and served on the day they are to be eaten. (2.97)

**Partially achieved**

All prisoners should have the opportunity to dine in association. (2.98)

**Achieved**

Prisoners should be able to make purchases from the shop within 24 hours of arrival. (2.105)

**Achieved**

Managers should investigate why some minority groups are less positive about the canteen list and take remedial action as necessary. (2.106)

**Achieved**

There should be no administration charge for catalogue orders. (2.107)

**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, the amount of time out of cell was generally good and most prisoners were usefully occupied for the full working day. There were enough activity spaces for the population. Although some work was insufficiently challenging, most workshops provided meaningful employment. There was effective use of peer workers. The quality of education was good. Achievements were good overall and prisoners could develop a wide range of vocational skills. Library provision was reasonable. PE provision was generally good. Outcomes for prisoners were good against this healthy prison test.*

### Recommendations

The amount of time that prisoners spend locked up on the induction wing should be brought in line with the rest of the establishment. (3.5)

**Achieved**

The college should ensure that post-observation action plans are sufficiently detailed and challenging to enable teachers to develop further. (3.13)

**Achieved**

The prison should provide opportunities for prisoners working in laundry and the gardens to study and achieve a relevant vocational qualification. (3.18)

**Not achieved**

All prisoners should benefit from work opportunities that are challenging, stimulating and that enhance their employability skills. (3.25)

**Not achieved**

Targets in individual learning plans should be clear, achievable and time bound, so that learners' progress and achievements are recorded and recognised. (3.26)

**Not achieved**

Arrangements for supporting distance learning should be better coordinated. (3.27)

**Achieved**

The reasons for learners' poor performance in English and mathematics should be analysed and actions taken to ensure that recent improvements in outcomes continue. (3.32)

**Achieved**

The prison should provide increased access to the library's computers. (3.37)

**Achieved**

PE and college staff should work together to provide further opportunities for prisoners to attend health and fitness programmes and courses. (3.44)

**Achieved**

## Resettlement

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

*At the last inspection, in 2015, current resettlement outcomes were good but the offender management unit was not sufficiently driving prisoners' sentence plans. Most prisoners had limited offender supervisor contact and there was a large backlog of offender assessment system (OASys) assessments. Public protection work was generally good. Recategorisation processes and assessments were completed well and progressive moves were not problematic. There were few current resettlement needs and they were being met. Visits provision and work to promote family ties were good. Prisoners could access a range of appropriate offending behaviour courses. Outcomes for prisoners were reasonably good against this healthy prison test.*

### Main recommendations

The offender management unit and the sentence planning process should drive all work undertaken with prisoners, and offender supervisors should have regular and meaningful contact with prisoners to motivate and support them throughout their sentence. This work should be subject to robust management oversight and quality assurance of offender supervisor work. (S41)

**Not achieved**

### Recommendations

The reducing reoffending strategy should be updated to reflect the current strategic challenges following reconfiguration. (4.6)

**Not achieved**

Prisoners approved for home detention curfew should be released on the earliest eligible date. (4.13)

**Achieved**

Representatives from all relevant departments should consistently attend the interdepartmental risk management team meeting, which should be sufficiently informed by offender supervisors to enable all relevant cases to be discussed. (4.17)

**Not achieved**

Recategorisation decisions should be informed by up-to-date offender assessment system (OASys) assessments. (4.23)

**Achieved**

The prison should develop services such as lifer days and consultation forums, to help indeterminate-sentenced prisoners to understand and engage with risk reduction and reintegration work. Lifers should be better prepared for open conditions. (4.29)

**Partially achieved**

Prospects should make good use of all of the information available on prisoners, such as in sentence plans, when providing careers advice and guidance for the few prisoners who are released from the establishment. (4.35)

**No longer relevant**

Prisoners who do not receive visits because of the distance they are held from home should have access to accumulated visits. (4.45)

**Achieved**

Prisoners should have access to relationship education. (4.46)

**Achieved**

The provision of victim awareness work should be increased to meet the identified need. (4.49)

**Achieved**





# Appendix III: Care Quality Commission Requirement Notice



## Requirement Notices

**Provider:** Care UK Health & Rehabilitation Services Limited

**Location:** HMP Stocken

**Location ID:** 1-4057485730

**Regulated activities:** Treatment of disease, disorder, or injury; Diagnostic and screening procedures & Personal care.

### Action we have told the provider to take

The table below shows the regulations that were not being met. The provider must send CQC a report that says what action it is going to take to meet these regulations.

#### Regulation 9 – Person-centred care

9. –

1. The care and treatment of service users must  
 (a) be appropriate,  
 (b) meet their needs, and  
 (c) reflect their preferences.

### How the regulation was not being met:

The care and treatment of patients was not always appropriate and did not always meet their needs or reflect their preferences.

- Patients did not always receive timely reviews of their substance misuse treatment plans because there was insufficient clinic capacity.
- Healthcare applications were not screened by clinical staff to determine their urgency and whether they needed to see a GP or if the issue could be resolved by nursing staff. This posed a risk that patients with an urgent clinical need may not have timely access to the most appropriate service. The waiting time for a routine GP appointment was three weeks. In addition to the waiting time for a nurse triage appointment this meant that some patients waited up to four weeks to see a GP.

- Chlamydia screening and NHS health check activity was minimal and no MMR vaccinations had been offered in the nine months prior to the inspection. This meant that eligible prisoners' needs were not being consistently met.

**Regulation 12 – Safe care & treatment**

12. –

1. Care and treatment must be provided in a safe way for service users.

2. Without limiting paragraph (1), the things which a registered person must do to comply with that paragraph include—

(a) Assessing the risks to the health and safety of service users of receiving the care or treatment;

(b) Doing all that is reasonably practicable to mitigate any such risks;

(g) The proper and safe management of medicines.

**How the regulation was not being met:**

Risks to the health and safety of patients were not always assessed and steps to mitigate risks were not consistently taken.

- Risks to three patients who required pressure area care were not routinely assessed to inform the care they received. Their care plans directed staff to carry out Waterlow assessments on a monthly basis, this was not being done despite the high level of risk of those three patients developing a pressure ulcer. Steps to mitigate these risks, such as regular skin checks and dressing changes, were not being carried out in a consistent manner. Equipment provided to patients to reduce the risks of pressure ulcers developing was not always in working order and staff did not routinely check that equipment was working. For example, we saw that one patient's pressure relieving mattress had torn and was not functioning properly.
- In possession (IP) medication risk assessments were not being reviewed in line with the provider's local policy which was that IP risk assessments would be reviewed every 12 months unless there was reason to review it sooner. We found numerous examples of IP risk assessments that had not been reviewed for over 12 months. Many patients were not receiving their medicines in possession when their risk assessment indicated that they could.

The management of medicines was not proper and safe. There were risks to the safety and security of medicines as well as issues with the administration of medicines to patients.

- Patients' dispensed IP medicines were not stored securely prior to administration. We observed medicines left unattended and unsecured when a member of staff was called to respond to an emergency.
- The system to follow up patients who did not attend for their medicines did not identify those medically unstable or chronically ill patients who required closer monitoring. One such incident was noted during the inspection and had not been followed up by staff.
- Patients could buy paracetamol from the prison canteen as well as receiving these from healthcare staff. There was no system to enable healthcare staff to check the amount of paracetamol taken by patients before providing them with a supply.

**Regulation 17 – Good governance**

17.—

1. Systems or processes must be established and operated effectively to ensure compliance with the requirements in this Part.

2. Without limiting paragraph (1), such systems or processes must enable the registered person, in particular, to—

(a) Assess, monitor and improve the quality and safety of the services provided in the carrying on of the regulated activity (including the quality of the experience of service users in receiving those services);

(b) Assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk which arise from the carrying on of the regulated activity;

(c) Maintain securely an accurate, complete and contemporaneous record in respect of each service user, including a record of the care and treatment provided to the service user and of decisions taken in relation to the care and treatment provided;

	(e) Seek and act on feedback from relevant persons and other persons on the services provided in the carrying on of the regulated activity, for the purposes of continually evaluating and improving such services;
<p><b>How the regulation was not being met:</b></p> <p>Governance and risk management systems were not effective in identifying and resolving quality and safety issues.</p> <ul style="list-style-type: none"> <li>• Four relevant recommendations issued by Her Majesty’s Inspectorate of Prisons (HMIP) at the last inspection in 2015 had not been addressed at the time of this inspection. Care UK had failed to act upon known issues and take action to bring about improvements.</li> <li>• Local governance and audit processes had not detected or resolved the concerns found during this inspection in relation to Regulations 9 and 12.</li> <li>• Medicines administration and controlled drugs records were not consistently audited and we noted errors and gaps in those records that had not been addressed with staff.</li> <li>• Risks relating to the supply of medicines had not been identified or addressed. The schedule of deliveries of medicines meant that there could be delays of several days before patients received their prescribed medicines. In addition, there were excessive quantities of medicines stored, some of which had expired and not been disposed of which increased the risk of administration errors.</li> <li>• The quality of incident reports logged on the ‘Datix’ system was variable which posed a risk that not all appropriate actions would be taken in response to incidents. When medicines errors occurred which impacted on patients, it was not clear if the provider had informed those patients.</li> <li>• Records relating to care and treatment were not complete and not always completed contemporaneously.</li> <li>• Records of social care visits were not always completed on the electronic patient record system. Therefore, there was no assurance that care had been offered or provided to patients or if patients had declined. The registered manager was aware of this issue, however, the actions taken had not brought about an improvement in record keeping.</li> <li>• Patients’ feedback about the quality of the primary care service they received was not being proactively sought which meant such information could not be evaluated or used to improve the service. There was no patient forum or other system to obtain patient feedback. and to identify potential areas for improvement.</li> </ul>	

## Appendix IV: Prison population profile

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

Status	18–20-year-olds	21 and over	%
Sentenced	0	706	84.3
Recall	0	73	8.7
Convicted unsentenced	0	1	0.1
Remand	0	1	0.1
Civil prisoners	0	0	0
Detainees	0	0	0
Indeterminate sentence	0	56	6.7
<b>Total</b>	<b>0</b>	<b>837</b>	<b>100</b>

Sentence	18–20-year-olds	21 and over	%
Unsentenced	0	0	0
Less than six months	0	0	0
six months to less than 12 months	0	0	0
12 months to less than 2 years	0	0	0
2 years to less than 3 years	0	5	0.6
3 years to less than 4 years	0	19	2.3
4 years to less than 10 years	0	661	79.0
10 years and over (not life)	0	78	9.3
ISPP (indeterminate sentence for public protection)	0	27	3.2
Life	0	47	8.8
<b>Total</b>	<b>0</b>	<b>837</b>	<b>100</b>

Age	Number of prisoners	%
Please state minimum age here: 21		
Under 21 years	0	0
21 years to 29 years	288	34.4
30 years to 39 years	306	36.6
40 years to 49 years	160	19.1
50 years to 59 years	57	6.8
60 years to 69 years	23	2.7
70 plus years	3	0.4
Please state maximum age here: 76		
<b>Total</b>	<b>837</b>	<b>100</b>

Nationality	18–20-year-olds	21 and over	%
British	0	789	94.3
Foreign nationals	0	48	5.7
Not stated	0	0	0
<b>Total</b>	<b>0</b>	<b>837</b>	<b>100</b>

<b>Security category</b>	<b>18–20-year-olds</b>	<b>21 and over</b>	<b>%</b>
Uncategorised unsentenced	0	0	0
Provisional A	0	0	0
Category A	0	0	0
Category B	0	1	0.1
Category C	0	782	93.4
Category D	0	54	6.5
YOI Closed	0	0	0
Other	0	0	0
<b>Total</b>	<b>0</b>	<b>837</b>	<b>100</b>

<b>Ethnicity</b>	<b>18–20-year-olds</b>	<b>21 and over</b>	<b>%</b>
White	0		
British	0	544	65.0
Irish	0	12	1.4
Gypsy/Irish Traveller	0	13	1.6
Other white	0	28	3.3
Mixed			
White and black Caribbean	0	31	3.7
White and black African	0	3	0.4
White and Asian	0	6	0.7
Other mixed	0	8	1.0
Asian or Asian British			
Indian	0	29	3.5
Pakistani	0	32	3.8
Bangladeshi	0	3	0.4
Chinese	0	0	0
Other Asian	0	18	2.2
Black or black British			
Caribbean	0	61	7.3
African	0	24	2.9
Other black	0	19	2.3
Other ethnic group			
Arab	0	1	0.1
Other ethnic group	0	2	0.2
Not stated	0	6	0.8
<b>Total</b>	<b>0</b>	<b>837</b>	<b>100</b>

<b>Religion</b>	<b>18–20-year-olds</b>	<b>21 and over</b>	<b>%</b>
Baptist	0	0	0
Church of England	0	127	15.2
Roman Catholic	0	169	20.2
Other Christian denominations	0	121	14.5
Muslim	0	139	16.6
Sikh	0	18	2.2
Hindu	0	4	0.5
Buddhist	0	12	1.4
Jewish	0	6	0.7
Other	0	31	3.7
No religion	0	209	25.0
Not stated	0	1	0.1
<b>Total</b>	<b>0</b>	<b>837</b>	<b>100</b>

**Sentenced prisoners only**

<b>Length of stay</b>	<b>18–20-year-olds</b>		<b>21 and over</b>	
	<b>Number</b>	<b>%</b>	<b>Number</b>	<b>%</b>
Less than 1 month	0	0	61	7.3
1 month to 3 months	0	0	147	17.6
3 months to six months	0	0	175	20.9
six months to 1 year	0	0	206	24.6
1 year to 2 years	0	0	173	20.7
2 years to 4 years	0	0	56	6.7
4 years or more	0	0	19	2.3
<b>Total</b>	<b>0</b>	<b>0</b>	<b>837</b>	<b>100</b>

**Sentenced prisoners only**

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

**Unsentenced prisoners only**

<b>Length of stay</b>	<b>18–20-year-olds</b>		<b>21 and over</b>	
	<b>Number</b>	<b>%</b>	<b>Number</b>	<b>%</b>
Less than 1 month	0	0	0	0
1 month to 3 months	0	0	0	0
3 months to six months	0	0	0	0
six months to 1 year	0	0	0	0
1 year to 2 years	0	0	0	0
2 years to 4 years	0	0	0	0
4 years or more	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>





## Appendix V: Photographs



Reception shop



Music room



Stocken buskers stop



# Appendix VI: 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.<sup>19</sup>

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

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

### Sampling

On the day of the survey a stratified random sample is drawn by HMI Prisons researchers from a P-NOMIS prisoner population printout ordered by cell location. Using a robust statistical formula HMI Prisons researchers calculate the minimum sample size required to ensure that the survey findings can be generalised to the entire population of the establishment.<sup>20</sup> In smaller establishments we may offer a questionnaire to the entire population.

### Distributing and collecting questionnaires

HMI Prisons researchers distribute and collect the questionnaires in person. So that prisoners can give their informed consent to participate, the purpose of the survey is explained and assurances are given about confidentiality and anonymity.<sup>21</sup> 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 22 January 2019, the prisoner population at HMP Stocken was 834. Using the sampling method described above, questionnaires were distributed to 209 prisoners. We received a total of 166 completed questionnaires, a response rate of 79%. This included one questionnaire completed via face-to-face interview. Twenty-one prisoners declined to participate in the survey and 22 questionnaires were either not returned at all, or returned blank.

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

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

<sup>21</sup> 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 Stocken. For the comparator analyses, each question was reformulated into a binary 'yes/no' format and affirmative responses compared.<sup>22</sup> Missing responses have been excluded from all analyses.

### Full survey results

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

#### Responses from HMP Stocken 2019 compared with those from other HMIP surveys<sup>23</sup>

- Survey responses from HMP Stocken in 2019 compared with survey responses from other category C training prisons inspected since September 2017.
- Survey responses from HMP Stocken in 2019 compared with survey responses from HMP Stocken in 2015.

#### Comparisons between different residential locations within HMP Stocken 2019

- responses of prisoners on the IDTS unit (K wing) compared with those from the rest of the establishment.
- responses of prisoners on the progression unit (I wing) compared with those from the rest of the establishment.

#### Comparisons between sub-populations of prisoners within HMP Stocken 2019<sup>24</sup>

- responses of prisoners aged 25 and under compared with those over 25.
- responses of prisoners aged 50 and over compared with those under 50.
- white prisoners' responses compared with those of prisoners from black or minority ethnic groups.
- Muslim prisoners' responses compared with those of non-Muslim prisoners.
- responses of prisoners who reported that they had mental health problems compared with those who did not.

responses of prisoners who reported that they had a disability compared to those who did not.

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group.<sup>25</sup>

In the comparator analyses, statistically significant differences are indicated by shading.<sup>26</sup> Results that are significantly more positive are indicated by green shading and results that are significantly more negative are indicated by blue shading. Orange shading has been used to show a statistically significant difference in demographic or other background details. If there is no shading, any difference between the two results is not statistically significant and may have occurred by chance. Grey shading indicates that there is no valid comparative data for that question.

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

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

<sup>23</sup> 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.

<sup>24</sup> These analyses are carried out on summary data from selected survey questions only.

<sup>25</sup> A minimum of 10 responses which must also represent at least 10% of the total response.

<sup>26</sup> A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. In order to appropriately adjust p-values in light of multiple testing,  $p < 0.01$  is considered statistically significant for all comparisons undertaken. This means there is only a 1% likelihood that the difference is due to chance.

respondents filtered to that question. For all other questions, percentages refer to the total number of valid responses to the question.

## Survey summary

### Background information

<b>I.1</b>	<b>What wing or house block are you currently living on?</b>	
	F Wing	19 (12%)
	H Wing	24 (15%)
	I Wing	18 (11%)
	K Wing	26 (16%)
	L Wing	33 (20%)
	M Wing	44 (27%)
	Segregation unit	2 (1%)
<b>I.2</b>	<b>How old are you?</b>	
	Under 21	0 (0%)
	21 - 25	28 (17%)
	26 - 29	25 (15%)
	30 - 39	63 (38%)
	40 - 49	29 (18%)
	50 - 59	13 (8%)
	60 - 69	7 (4%)
	70 or over	0 (0%)
<b>I.3</b>	<b>What is your ethnic group?</b>	
	White - English/ Welsh/ Scottish/ Northern Irish/ British	98 (60%)
	White - Irish	2 (1%)
	White - Gypsy or Irish Traveller	7 (4%)
	White - any other White background	7 (4%)
	Mixed - White and Black Caribbean	8 (5%)
	Mixed - White and Black African	1 (1%)
	Mixed - White and Asian	2 (1%)
	Mixed - any other Mixed ethnic background	1 (1%)
	Asian/ Asian British - Indian	3 (2%)
	Asian/ Asian British - Pakistani	6 (4%)
	Asian/ Asian British - Bangladeshi	1 (1%)
	Asian/ Asian British - Chinese	0 (0%)
	Asian - any other Asian Background	2 (1%)
	Black/ Black British - Caribbean	12 (7%)
	Black/ Black British - African	7 (4%)
	Black - any other Black/ African/ Caribbean background	3 (2%)
	Arab	1 (1%)
	Any other ethnic group	3 (2%)
<b>I.4</b>	<b>How long have you been in this prison?</b>	
	Less than 6 months	33 (21%)
	6 months or more	127 (79%)
<b>I.5</b>	<b>Are you currently serving a sentence?</b>	
	Yes	147 (91%)
	Yes - on recall	15 (9%)
	No - on remand or awaiting sentence	0 (0%)
	No - immigration detainee	0 (0%)



<b>1.6</b>	<b>How long is your sentence?</b>	
	Less than 6 months	1 (1%)
	6 months to less than 1 year	3 (2%)
	1 year to less than 4 years	18 (11%)
	4 years to less than 10 years	106 (64%)
	10 years or more	18 (11%)
	IPP (indeterminate sentence for public protection)	7 (4%)
	Life	12 (7%)
	Not currently serving a sentence	0 (0%)

### Arrival and reception

<b>2.1</b>	<b>Were you given up-to-date information about this prison before you came here?</b>	
	Yes	20 (12%)
	No	138 (83%)
	Don't remember	8 (5%)
<b>2.2</b>	<b>When you arrived at this prison, how long did you spend in reception?</b>	
	Less than 2 hours	88 (53%)
	2 hours or more	71 (43%)
	Don't remember	7 (4%)
<b>2.3</b>	<b>When you were searched in reception, was this done in a respectful way?</b>	
	Yes	125 (75%)
	No	31 (19%)
	Don't remember	10 (6%)
<b>2.4</b>	<b>Overall, how were you treated in reception?</b>	
	Very well	44 (27%)
	Quite well	87 (53%)
	Quite badly	18 (11%)
	Very badly	12 (7%)
	Don't remember	4 (2%)
<b>2.5</b>	<b>When you first arrived here, did you have any of the following problems?</b>	
	Problems getting phone numbers	41 (26%)
	Contacting family	34 (21%)
	Arranging care for children or other dependants	7 (4%)
	Contacting employers	6 (4%)
	Money worries	25 (16%)
	Housing worries	25 (16%)
	Feeling depressed	50 (31%)
	Feeling suicidal	12 (8%)
	Other mental health problems	37 (23%)
	Physical health problems	18 (11%)
	Drug or alcohol problems (e.g. withdrawal)	24 (15%)
	Problems getting medication	35 (22%)
	Needing protection from other prisoners	7 (4%)
	Lost or delayed property	42 (26%)
	Other problems	19 (12%)
	Did not have any problems	49 (31%)

<b>2.6</b>	<b>Did staff help you to deal with these problems when you first arrived?</b>	
	Yes	34 (22%)
	No	74 (47%)
	Did not have any problems when I first arrived	49 (31%)

### First night and induction

#### 3.1 Before you were locked up on your first night here, were you offered any of the following things?

Tobacco or nicotine replacement	113 (70%)
Toiletries / other basic items	107 (66%)
A shower	93 (57%)
A free phone call	67 (41%)
Something to eat	128 (79%)
The chance to see someone from health care	98 (60%)
The chance to talk to a Listener or Samaritans	43 (27%)
Support from another prisoner (e.g. Insider or buddy)	43 (27%)
Wasn't offered any of these things	13 (8%)

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

Very clean	17 (10%)
Quite clean	70 (43%)
Quite dirty	39 (24%)
Very dirty	30 (19%)
Don't remember	6 (4%)

#### 3.3 Did you feel safe on your first night here?

Yes	129 (80%)
No	29 (18%)
Don't remember	3 (2%)

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

	Yes	No	Don't remember
Access to the prison shop / canteen?	83 (53%)	69 (44%)	5 (3%)
Free PIN phone credit?	88 (56%)	60 (38%)	9 (6%)
Numbers put on your PIN phone?	84 (55%)	57 (37%)	12 (8%)

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

Yes	98 (61%)
No	61 (38%)
Have not had an induction	2 (1%)

### On the wing

#### 4.1 Are you in a cell on your own?

Yes	133 (82%)
No, I'm in a shared cell or dormitory	29 (18%)

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

Yes	56 (35%)
No	89 (55%)
Don't know	15 (9%)
Don't have a cell call bell	1 (1%)

#### 4.3 Please answer the following questions about the wing or house block you are currently living on:

	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	109 (67%)	52 (32%)	1 (1%)
Can you shower every day?	155 (96%)	6 (4%)	0 (0%)
Do you have clean sheets every week?	106 (67%)	50 (31%)	3 (2%)
Do you get cell cleaning materials every week?	101 (65%)	55 (35%)	0 (0%)
Is it normally quiet enough for you to relax or sleep at night?	101 (62%)	60 (37%)	1 (1%)
Can you get your stored property if you need it?	23 (14%)	97 (61%)	39 (25%)

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

Very clean	14 (9%)
Quite clean	70 (44%)
Quite dirty	39 (24%)
Very dirty	37 (23%)

### Food and canteen

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

Very good	12 (7%)
Quite good	57 (35%)
Quite bad	58 (36%)
Very bad	34 (21%)

#### 5.2 Do you get enough to eat at mealtimes?

Always	14 (9%)
Most of the time	52 (32%)
Some of the time	70 (43%)
Never	26 (16%)

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

Yes	106 (67%)
No	52 (33%)
Don't know	1 (1%)

### Relationships with staff

#### 6.1 Do most staff here treat you with respect?

Yes	103 (65%)
No	55 (35%)

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

Yes	107 (67%)
No	53 (33%)

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

Yes	50 (31%)
No	109 (69%)

<b>6.4</b>	<b>How helpful is your personal or named officer?</b>	
	Very helpful	20 (13%)
	Quite helpful	30 (20%)
	Not very helpful	21 (14%)
	Not at all helpful	43 (28%)
	Don't know	24 (16%)
	Don't have a personal / named officer	15 (10%)
<b>6.5</b>	<b>How often do you see prison governors, directors or senior managers talking to prisoners?</b>	
	Regularly	36 (23%)
	Sometimes	54 (34%)
	Hardly ever	64 (40%)
	Don't know	5 (3%)
<b>6.6</b>	<b>Do you feel that you are treated as an individual in this prison?</b>	
	Yes	70 (45%)
	No	86 (55%)
<b>6.7</b>	<b>Are prisoners here consulted about things like food, canteen, health care or wing issues?</b>	
	Yes, and things sometimes change	37 (23%)
	Yes, but things don't change	48 (30%)
	No	53 (33%)
	Don't know	23 (14%)

## Faith

<b>7.1</b>	<b>What is your religion?</b>	
	No religion	50 (31%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	74 (46%)
	Buddhist	1 (1%)
	Hindu	0 (0%)
	Jewish	0 (0%)
	Muslim	25 (16%)
	Sikh	3 (2%)
	Other	7 (4%)
<b>7.2</b>	<b>Are your religious beliefs respected here?</b>	
	Yes	79 (49%)
	No	23 (14%)
	Don't know	9 (6%)
	Not applicable (no religion)	50 (31%)
<b>7.3</b>	<b>Are you able to speak to a chaplain of your faith in private, if you want to?</b>	
	Yes	85 (53%)
	No	11 (7%)
	Don't know	15 (9%)
	Not applicable (no religion)	50 (31%)
<b>7.4</b>	<b>Are you able to attend religious services, if you want to?</b>	
	Yes	94 (59%)
	No	11 (7%)
	Don't know	5 (3%)
	Not applicable (no religion)	50 (31%)

**Contact with family and friends**

<b>8.1</b>	<b>Have staff here encouraged you to keep in touch with your family / friends?</b>	
	Yes	42 (26%)
	No	120 (74%)
<b>8.2</b>	<b>Have you had any problems with sending or receiving mail (letters or parcels)?</b>	
	Yes	104 (64%)
	No	58 (36%)
<b>8.3</b>	<b>Are you able to use a phone every day (if you have credit)?</b>	
	Yes	151 (93%)
	No	12 (7%)
<b>8.4</b>	<b>How easy or difficult is it for your family and friends to get here?</b>	
	Very easy	7 (4%)
	Quite easy	30 (18%)
	Quite difficult	35 (21%)
	Very difficult	88 (54%)
	Don't know	4 (2%)
<b>8.5</b>	<b>How often do you have visits from family or friends?</b>	
	More than once a week	1 (1%)
	About once a week	16 (10%)
	Less than once a week	80 (50%)
	Not applicable (don't get visits)	62 (39%)
<b>8.6</b>	<b>Do visits usually start and finish on time?</b>	
	Yes	38 (39%)
	No	59 (61%)
<b>8.7</b>	<b>Are your visitors usually treated respectfully by staff?</b>	
	Yes	62 (65%)
	No	34 (35%)

**Time out of cell**

<b>9.1</b>	<b>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)?</b>	
	Yes, and these times are usually kept to	99 (61%)
	Yes, but these times are not usually kept to	49 (30%)
	No	14 (9%)
<b>9.2</b>	<b>How long do you usually spend out of your cell on a typical weekday (including time spent at education, work etc.)?</b>	
	Less than 2 hours	9 (6%)
	2 to 6 hours	46 (29%)
	6 to 10 hours	72 (45%)
	10 hours or more	21 (13%)
	Don't know	13 (8%)

<b>9.3</b>	<b>How long do you usually spend out of your cell on a typical Saturday or Sunday?</b>	
	Less than 2 hours	16 (10%)
	2 to 6 hours	65 (40%)
	6 to 10 hours	66 (40%)
	10 hours or more	4 (2%)
	Don't know	12 (7%)
<b>9.4</b>	<b>How many days in a typical week do you have time to do domestics (shower, clean cell, use the wing phones etc.)?</b>	
	None	5 (3%)
	1 or 2	13 (8%)
	3 to 5	27 (16%)
	More than 5	113 (69%)
	Don't know	6 (4%)
<b>9.5</b>	<b>How many days in a typical week do you get association, if you want it?</b>	
	None	2 (1%)
	1 or 2	4 (2%)
	3 to 5	14 (9%)
	More than 5	138 (85%)
	Don't know	5 (3%)
<b>9.6</b>	<b>How many days in a typical week could you go outside for exercise, if you wanted to?</b>	
	None	5 (3%)
	1 or 2	6 (4%)
	3 to 5	15 (9%)
	More than 5	129 (80%)
	Don't know	7 (4%)
<b>9.7</b>	<b>Typically, how often do you go to the gym?</b>	
	Twice a week or more	100 (63%)
	About once a week	9 (6%)
	Less than once a week	7 (4%)
	Never	43 (27%)
<b>9.8</b>	<b>Typically, how often do you go to the library?</b>	
	Twice a week or more	37 (23%)
	About once a week	50 (31%)
	Less than once a week	40 (25%)
	Never	34 (21%)
<b>9.9</b>	<b>Does the library have a wide enough range of materials to meet your needs?</b>	
	Yes	94 (59%)
	No	31 (19%)
	Don't use the library	34 (21%)

### Applications, complaints and legal rights

<b>10.1</b>	<b>Is it easy for you to make an application?</b>	
	Yes	115 (72%)
	No	39 (24%)
	Don't know	6 (4%)

<b>10.2</b>	<b>If you have made any applications here, please answer the questions below:</b>		Yes	No	Not made any applications
		Are applications usually dealt with fairly?	66 (43%)	78 (50%)	11 (7%)
		Are applications usually dealt with within 7 days?	54 (36%)	83 (56%)	11 (7%)

<b>10.3</b>	<b>Is it easy for you to make a complaint?</b>	Yes	109 (68%)
		No	30 (19%)
		Don't know	22 (14%)

<b>10.4</b>	<b>If you have made any complaints here, please answer the questions below:</b>		Yes	No	Not made any complaints
		Are complaints usually dealt with fairly?	38 (26%)	70 (47%)	40 (27%)
		Are complaints usually dealt with within 7 days?	22 (16%)	79 (56%)	40 (28%)

<b>10.5</b>	<b>Have you ever been prevented from making a complaint here when you wanted to?</b>	Yes	33 (21%)
		No	93 (60%)
		Not wanted to make a complaint	29 (19%)

<b>10.6</b>	<b>In this prison, is it easy or difficult for you to...</b>		Easy	Difficult	Don't know	Don't need this
		Communicate with your solicitor or legal representative?	60 (38%)	47 (30%)	24 (15%)	25 (16%)
		Attend legal visits?	74 (48%)	16 (10%)	33 (22%)	30 (20%)
		Get bail information?	16 (11%)	30 (20%)	49 (33%)	55 (37%)

<b>10.7</b>	<b>Have staff here ever opened letters from your solicitor or legal representative when you were not present?</b>	Yes	86 (54%)
		No	41 (26%)
		Not had any legal letters	33 (21%)

## Health care

<b>11.1</b>	<b>How easy or difficult is it to see the following people?</b>		Very easy	Quite easy	Quite difficult	Very difficult	Don't know
		Doctor	13 (8%)	37 (23%)	56 (35%)	48 (30%)	6 (4%)
		Nurse	20 (13%)	69 (43%)	40 (25%)	23 (14%)	7 (4%)
		Dentist	8 (5%)	28 (18%)	40 (25%)	73 (46%)	8 (5%)
		Mental health workers	9 (6%)	28 (18%)	31 (20%)	39 (25%)	46 (30%)

<b>11.2</b>	<b>What do you think of the quality of the health service from the following people?</b>		Very good	Quite good	Quite bad	Very bad	Don't know
		Doctor	24 (15%)	71 (44%)	28 (17%)	25 (16%)	13 (8%)
		Nurse	30 (19%)	77 (48%)	28 (17%)	20 (12%)	6 (4%)
		Dentist	14 (9%)	47 (30%)	29 (18%)	36 (23%)	32 (20%)
		Mental health workers	13 (8%)	42 (27%)	23 (15%)	18 (12%)	60 (38%)

<b>11.3</b>	<b>Do you have any mental health problems?</b>	
	Yes	74 (45%)
	No	90 (55%)
<b>11.4</b>	<b>Have you been helped with your mental health problems in this prison?</b>	
	Yes	38 (24%)
	No	33 (20%)
	Don't have any mental health problems	90 (56%)
<b>11.5</b>	<b>What do you think of the overall quality of the health services here?</b>	
	Very good	13 (8%)
	Quite good	65 (40%)
	Quite bad	46 (28%)
	Very bad	31 (19%)
	Don't know	8 (5%)

### Other support needs

<b>12.1</b>	<b>Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?</b>	
	Yes	54 (33%)
	No	110 (67%)
<b>12.2</b>	<b>If you have a disability, are you getting the support you need?</b>	
	Yes	23 (14%)
	No	29 (18%)
	Don't have a disability	110 (68%)
<b>12.3</b>	<b>Have you been on an ACCT in this prison?</b>	
	Yes	22 (14%)
	No	138 (86%)
<b>12.4</b>	<b>If you have been on an ACCT in this prison, did you feel cared for by staff?</b>	
	Yes	12 (8%)
	No	10 (6%)
	Have not been on an ACCT in this prison	138 (86%)
<b>12.5</b>	<b>How easy or difficult is it for you to speak to a Listener, if you need to?</b>	
	Very easy	20 (12%)
	Quite easy	33 (20%)
	Quite difficult	10 (6%)
	Very difficult	4 (2%)
	Don't know	84 (52%)
	No Listeners at this prison	10 (6%)

### Alcohol and drugs

<b>13.1</b>	<b>Did you have an alcohol problem when you came into this prison?</b>	
	Yes	37 (23%)
	No	125 (77%)
<b>13.2</b>	<b>Have you been helped with your alcohol problem in this prison?</b>	
	Yes	23 (14%)
	No	15 (9%)
	Did not / do not have an alcohol problem	125 (77%)



<b>13.3</b>	<b>Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?</b>	
	Yes	53 (33%)
	No	108 (67%)
<b>13.4</b>	<b>Have you developed a problem with illicit drugs since you have been in this prison?</b>	
	Yes	27 (17%)
	No	133 (83%)
<b>13.5</b>	<b>Have you developed a problem with taking medication not prescribed to you since you have been in this prison?</b>	
	Yes	12 (7%)
	No	149 (93%)
<b>13.6</b>	<b>Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?</b>	
	Yes	36 (23%)
	No	21 (14%)
	Did not / do not have a drug problem	97 (63%)
<b>13.7</b>	<b>Is it easy or difficult to get illicit drugs in this prison?</b>	
	Very easy	44 (28%)
	Quite easy	27 (17%)
	Quite difficult	9 (6%)
	Very difficult	6 (4%)
	Don't know	74 (46%)
<b>13.8</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	Very easy	34 (21%)
	Quite easy	28 (18%)
	Quite difficult	10 (6%)
	Very difficult	9 (6%)
	Don't know	78 (49%)

## Safety

<b>14.1</b>	<b>Have you ever felt unsafe here?</b>	
	Yes	71 (44%)
	No	91 (56%)
<b>14.2</b>	<b>Do you feel unsafe now?</b>	
	Yes	33 (21%)
	No	126 (79%)
<b>14.3</b>	<b>Have you experienced any of the following types of bullying / victimisation from other prisoners here?</b>	
	Verbal abuse	50 (31%)
	Threats or intimidation	41 (26%)
	Physical assault	27 (17%)
	Sexual assault	3 (2%)
	Theft of canteen or property	40 (25%)
	Other bullying / victimisation	29 (18%)
	Not experienced any of these from prisoners here	86 (54%)

<b>14.4</b>	<b>If you were being bullied / victimised by other prisoners here, would you report it?</b>	
	Yes	39 (25%)
	No	116 (75%)
<b>14.5</b>	<b>Have you experienced any of the following types of bullying / victimisation from staff here?</b>	
	Verbal abuse	46 (29%)
	Threats or intimidation	30 (19%)
	Physical assault	14 (9%)
	Sexual assault	2 (1%)
	Theft of canteen or property	18 (11%)
	Other bullying / victimisation	28 (18%)
	Not experienced any of these from staff here	90 (56%)
<b>14.6</b>	<b>If you were being bullied / victimised by staff here, would you report it?</b>	
	Yes	67 (42%)
	No	91 (58%)

### Behaviour management

<b>15.1</b>	<b>Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?</b>		
	Yes	64 (40%)	
	No	85 (53%)	
	Don't know what the incentives / rewards are	10 (6%)	
<b>15.2</b>	<b>Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?</b>		
	Yes	70 (43%)	
	No	71 (44%)	
	Don't know	16 (10%)	
	Don't know what this is	4 (2%)	
<b>15.3</b>	<b>Have you been physically restrained by staff in this prison in the last 6 months?</b>		
	Yes	16 (10%)	
	No	146 (90%)	
<b>15.4</b>	<b>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?</b>		
	Yes	3 (2%)	
	No	13 (8%)	
	Don't remember	0 (0%)	
	Not been restrained here in last 6 months	146 (90%)	
<b>15.5</b>	<b>Have you spent one or more nights in the segregation unit in this prison in the last 6 months?</b>		
	Yes	12 (7%)	
	No	150 (93%)	
<b>15.6</b>	<b>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:</b>		
		Yes	No
	Were you treated well by segregation staff?	8 (67%)	4 (33%)
	Could you shower every day?	11 (92%)	1 (8%)
	Could you go outside for exercise every day?	11 (92%)	1 (8%)
	Could you use the phone every day (if you had credit)?	11 (92%)	1 (8%)

## 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	130 (84%)	9 (6%)	16 (10%)	0 (0%)
Vocational or skills training	103 (68%)	24 (16%)	24 (16%)	0 (0%)
Prison job	96 (63%)	38 (25%)	17 (11%)	1 (1%)
Voluntary work outside of the prison	11 (7%)	29 (19%)	41 (28%)	68 (46%)
Paid work outside of the prison	7 (5%)	27 (18%)	42 (28%)	76 (50%)

### 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	86 (58%)	44 (30%)	18 (12%)
Vocational or skills training	98 (65%)	33 (22%)	19 (13%)
Prison job	49 (33%)	77 (52%)	22 (15%)
Voluntary work outside of the prison	25 (17%)	22 (15%)	96 (67%)
Paid work outside of the prison	23 (16%)	20 (14%)	99 (70%)

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

Yes	99 (63%)
No	52 (33%)
Not applicable (e.g. if you are retired, sick or on remand)	5 (3%)

## Planning and progression

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

Yes	128 (80%)
No	32 (20%)

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

Yes	121 (95%)
No	5 (4%)
Don't know what my objectives or targets are	1 (1%)

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

Yes	58 (45%)
No	69 (54%)
Don't know what my objectives or targets are	1 (1%)

### 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	59 (47%)	26 (21%)	40 (32%)
Other programmes	45 (38%)	26 (22%)	48 (40%)
One to one work	36 (31%)	26 (22%)	54 (47%)
Being on a specialist unit	8 (7%)	24 (21%)	82 (72%)
ROTL - day or overnight release	6 (5%)	15 (14%)	90 (81%)

**Preparation for release**

<b>18.1</b>	<b>Do you expect to be released in the next 3 months?</b>		
	Yes		11 (7%)
	No		140 (88%)
	Don't know		9 (6%)
<b>18.2</b>	<b>How close is this prison to your home area or intended release address?</b>		
	Very near		2 (20%)
	Quite near		2 (20%)
	Quite far		1 (10%)
	Very far		5 (50%)
<b>18.3</b>	<b>Is anybody helping you to prepare for your release (e.g. a home probation officer, responsible officer, case worker)?</b>		
	Yes		9 (82%)
	No		2 (18%)
<b>18.4</b>	<b>Are you getting help to sort out the following things for when you are released?</b>		
		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	4 (36%)	3 (27%)
	Getting employment	2 (22%)	4 (44%)
	Setting up education or training	1 (13%)	3 (38%)
	Arranging benefits	0 (0%)	6 (67%)
	Sorting out finances	4 (44%)	2 (22%)
	Support for drug or alcohol problems	3 (33%)	1 (11%)
	Health / mental health support	2 (20%)	3 (30%)
	Social care support	0 (0%)	4 (44%)
	Getting back in touch with family or friends	1 (11%)	3 (33%)

**More about you**

<b>19.1</b>	<b>Do you have children under the age of 18?</b>	
	Yes	94 (59%)
	No	65 (41%)
<b>19.2</b>	<b>Are you a UK / British citizen?</b>	
	Yes	153 (96%)
	No	6 (4%)
<b>19.3</b>	<b>Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?</b>	
	Yes	7 (4%)
	No	152 (96%)
<b>19.4</b>	<b>Have you ever been in the armed services (e.g. army, navy, air force)?</b>	
	Yes	10 (6%)
	No	149 (94%)
<b>19.5</b>	<b>What is your gender?</b>	
	Male	159 (100%)
	Female	0 (0%)
	Non-binary	0 (0%)
	Other	0 (0%)

<b>19.6</b>	<b>How would you describe your sexual orientation?</b>	
	Straight / heterosexual	154 (97%)
	Gay / lesbian / homosexual	4 (3%)
	Bisexual	1 (1%)
	Other	0 (0%)
<b>19.7</b>	<b>Do you identify as transgender or transsexual?</b>	
	Yes	1 (1%)
	No	157 (99%)

### Final questions about this prison

<b>20.1</b>	<b>Do you think your experiences in this prison have made you more or less likely to offend in the future?</b>	
	More likely to offend	13 (8%)
	Less likely to offend	84 (53%)
	Made no difference	63 (39%)

## HMP Stocken 2019

### 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 Stocken 2019 are compared with the following HMIP survey data:

- Summary statistics from surveys of category C training prisons conducted since the introduction of the new questionnaire in September 2017 (17 prisons). Please note that this does not include all category C training prisons.
- Summary statistics from HMP Stocken in 2019 are compared with those from HMP Stocken in 2015. Please note that we do not have comparable data for the new questions introduced in September 2017.

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

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

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

#### Number of completed questionnaires returned

*n=number of valid responses to question (HMP Stocken 2019)*

		HMP Stocken 2019	Prisoner category C training prisons surveyed since September 2017	HMP Stocken 2019	HMP Stocken 2015	
		166	2,905	166	194	
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION						
1.2	Are you under 21 years of age?	<i>n</i> =165	0%	7%	0%	1%
	Are you 25 years of age or younger?	<i>n</i> =165	17%	29%	17%	
	Are you 50 years of age or older?	<i>n</i> =165	12%	11%	12%	12%
	Are you 70 years of age or older?	<i>n</i> =165	0%	1%	0%	0%
1.3	Are you from a minority ethnic group?	<i>n</i> =164	31%	32%	31%	29%
1.4	Have you been in this prison for less than 6 months?	<i>n</i> =160	21%	35%	21%	
1.5	Are you currently serving a sentence?	<i>n</i> =162	100%	100%	100%	100%
	Are you on recall?	<i>n</i> =162	9%	9%	9%	10%
1.6	Is your sentence less than 12 months?	<i>n</i> =165	2%	7%	2%	1%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n</i> =165	4%	3%	4%	11%
7.1	Are you Muslim?	<i>n</i> =160	16%	17%	16%	13%
11.3	Do you have any mental health problems?	<i>n</i> =164	45%	43%	45%	
12.1	Do you consider yourself to have a disability?	<i>n</i> =164	33%	33%	33%	18%
19.1	Do you have any children under the age of 18?	<i>n</i> =159	59%	50%	59%	56%
19.2	Are you a foreign national?	<i>n</i> =159	4%	10%	4%	3%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n</i> =159	4%	5%	4%	4%
19.4	Have you ever been in the armed services?	<i>n</i> =159	6%	6%	6%	5%
19.5	Is your gender female or non-binary?	<i>n</i> =159	0%	1%	0%	
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n</i> =159	3%	4%	3%	2%
19.7	Do you identify as transgender or transsexual?	<i>n</i> =158	1%	2%	1%	
ARRIVAL AND RECEPTION						
2.1	Were you given up-to-date information about this prison before you came here?	<i>n</i> =166	12%	15%	12%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n</i> =166	53%	48%	53%	43%

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

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

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

**Number of completed questionnaires returned**

*n=number of valid responses to question (HMP Stocken 2019)*

	HMP Stocken 2019	HMP Stocken 2015
Prisoners surveyed since September 2017	166	194
Prisoners in training category	2,905	

2.3	When you were searched in reception, was this done in a respectful way?	<i>n=166</i>	75%	83%	75%	81%
2.4	Overall, were you treated very / quite well in reception?	<i>n=165</i>	79%	86%	79%	

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

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

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

**Number of completed questionnaires returned**

*n=number of valid responses to question (HMP Stocken 2019)*

HMP Stocken 2019	Prisoner category C training prisons surveyed since September 2017	HMP Stocken 2019	HMP Stocken 2015
166	2,905	166	194

2.5	When you first arrived, did you have any problems? <span style="float: right;"><i>n</i>=159</span>	69%	72%	69%	63%
2.5	Did you have problems with:				
	- Getting phone numbers? <span style="float: right;"><i>n</i>=159</span>	26%	25%	26%	18%
	- Contacting family? <span style="float: right;"><i>n</i>=159</span>	21%	26%	21%	21%
	- Arranging care for children or other dependents? <span style="float: right;"><i>n</i>=159</span>	4%	2%	4%	
	- Contacting employers? <span style="float: right;"><i>n</i>=159</span>	4%	2%	4%	2%
	- Money worries? <span style="float: right;"><i>n</i>=159</span>	16%	16%	16%	13%
	- Housing worries? <span style="float: right;"><i>n</i>=159</span>	16%	13%	16%	6%
	- Feeling depressed? <span style="float: right;"><i>n</i>=159</span>	31%	29%	31%	
	- Feeling suicidal? <span style="float: right;"><i>n</i>=159</span>	8%	9%	8%	
	- Other mental health problems? <span style="float: right;"><i>n</i>=159</span>	23%	20%	23%	
	- Physical health problems? <span style="float: right;"><i>n</i>=159</span>	11%	13%	11%	13%
	- Drugs or alcohol (e.g. withdrawal)? <span style="float: right;"><i>n</i>=159</span>	15%	11%	15%	
	- Getting medication? <span style="float: right;"><i>n</i>=159</span>	22%	20%	22%	
	- Needing protection from other prisoners? <span style="float: right;"><i>n</i>=159</span>	4%	6%	4%	3%
	- Lost or delayed property? <span style="float: right;"><i>n</i>=159</span>	26%	22%	26%	25%
	<i>For those who had any problems when they first arrived.</i>				
2.6	Did staff help you to deal with these problems? <span style="float: right;"><i>n</i>=108</span>	32%	32%	32%	25%
<b>FIRST NIGHT AND INDUCTION</b>					
3.1	Before you were locked up on your first night, were you offered:				
	- Tobacco or nicotine replacement? <span style="float: right;"><i>n</i>=162</span>	70%	65%	70%	72%
	- Toiletries / other basic items? <span style="float: right;"><i>n</i>=162</span>	66%	50%	66%	61%
	- A shower? <span style="float: right;"><i>n</i>=162</span>	57%	44%	57%	40%
	- A free phone call? <span style="float: right;"><i>n</i>=162</span>	41%	46%	41%	37%
	- Something to eat? <span style="float: right;"><i>n</i>=162</span>	79%	75%	79%	50%
	- The chance to see someone from health care? <span style="float: right;"><i>n</i>=162</span>	61%	60%	61%	69%
	- The chance to talk to a Listener or Samaritans? <span style="float: right;"><i>n</i>=162</span>	27%	28%	27%	38%
	- Support from another prisoner (e.g. Insider or buddy)? <span style="float: right;"><i>n</i>=162</span>	27%	23%	27%	
	- None of these? <span style="float: right;"><i>n</i>=162</span>	8%	7%	8%	
3.2	On your first night in this prison, was your cell very / quite clean? <span style="float: right;"><i>n</i>=162</span>	54%	35%	54%	
3.3	Did you feel safe on your first night here? <span style="float: right;"><i>n</i>=161</span>	80%	72%	80%	82%
3.4	In your first few days here, did you get:				
	- Access to the prison shop / canteen? <span style="float: right;"><i>n</i>=157</span>	53%	39%	53%	29%
	- Free PIN phone credit? <span style="float: right;"><i>n</i>=157</span>	56%	46%	56%	
	- Numbers put on your PIN phone? <span style="float: right;"><i>n</i>=153</span>	55%	47%	55%	





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

- Green shading shows results that are significantly more positive than the comparator
  - Blue shading shows results that are significantly more negative than the comparator
  - Orange shading shows significant differences in demographics and background information
  - No shading means that differences are not significant and may have occurred by chance
  - Grey shading indicates that we have no valid data for this question
- \* less than 1% probability that the difference is due to chance

	HMP Stocken 2019	All other Category C training prisons surveyed since September 2017	HMP Stocken 2019	HMP Stocken 2015
<b>Number of completed questionnaires returned</b>	166	2,905	166	194

n=number of valid responses to question (HMP Stocken 2019)

<b>ON THE WING</b>					
4.1	Are you in a cell on your own?	n=162	82%	63%	82%
4.2	Is your cell call bell normally answered within 5 minutes?	n=161	35%	29%	35%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	n=162	67%	66%	67%
	- Can you shower every day?	n=161	96%	88%	96%
	- Do you have clean sheets every week?	n=159	67%	63%	67%
	- Do you get cell cleaning materials every week?	n=156	65%	57%	65%
	- Is it normally quiet enough for you to relax or sleep at night?	n=162	62%	68%	62%
	- Can you get your stored property if you need it?	n=159	15%	26%	15%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	n=160	53%	60%	53%
<b>FOOD AND CANTEEN</b>					
5.1	Is the quality of the food in this prison very / quite good?	n=161	43%	38%	43%
5.2	Do you get enough to eat at meal-times always / most of the time?	n=162	41%	33%	41%
5.3	Does the shop / canteen sell the things that you need?	n=159	67%	60%	67%
<b>RELATIONSHIPS WITH STAFF</b>					
6.1	Do most staff here treat you with respect?	n=158	65%	69%	65%
6.2	Are there any staff here you could turn to if you had a problem?	n=160	67%	70%	67%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	n=159	31%	29%	31%
6.4	Do you have a personal officer?	n=153	90%	82%	90%
<i>For those who have a personal officer:</i>					
6.4	Is your personal or named officer very / quite helpful?	n=138	36%	44%	36%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	n=159	23%	10%	23%
6.6	Do you feel that you are treated as an individual in this prison?	n=156	45%	42%	45%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	n=161	53%	51%	53%
	If so, do things sometimes change?	n=85	44%	30%	44%
<b>FAITH</b>					
7.1	Do you have a religion?	n=160	69%	68%	69%
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	n=111	71%	70%	71%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	n=111	77%	70%	77%
7.4	Are you able to attend religious services, if you want to?	n=110	86%	88%	86%

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

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

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

Number of completed questionnaires returned

n=number of valid responses to question (HMP Stocken 2019)

HMP Stocken 2019	For other category C training prisons surveyed since September 2017	HMP Stocken 2019	HMP Stocken 2015
166	2,905	166	194

CONTACT WITH FAMILY AND FRIENDS						
8.1	Have staff here encouraged you to keep in touch with your family / friends?	n=162	26%	26%	26%	
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	n=162	64%	57%	64%	44%
8.3	Are you able to use a phone every day (if you have credit)?	n=163	93%	87%	93%	
8.4	Is it very / quite easy for your family and friends to get here?	n=164	23%	35%	23%	
8.5	Do you get visits from family/friends once a week or more?	n=159	11%	16%	11%	
<i>For those who get visits:</i>						
8.6	Do visits usually start and finish on time?	n=97	39%	49%	39%	
8.7	Are your visitors usually treated respectfully by staff?	n=96	65%	74%	65%	
TIME OUT OF CELL						
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=162	91%	91%	91%	
<i>For those who know what the unlock and lock-up times are supposed to be.</i>						
9.1	Are these times usually kept to?	n=148	67%	56%	67%	
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	n=161	6%	18%	6%	8%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	n=161	13%	8%	13%	26%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=163	10%	23%	10%	
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=163	3%	3%	3%	
9.4	Do you have time to do domestics more than 5 days in a typical week?	n=164	69%	55%	69%	
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=163	85%	62%	85%	
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=162	80%	64%	80%	
9.7	Do you typically go to the gym twice a week or more?	n=159	63%	52%	63%	
9.8	Do you typically go to the library once a week or more?	n=161	54%	49%	54%	46%
<i>For those who use the library:</i>						
9.9	Does the library have a wide enough range of materials to meet your needs?	n=125	75%	55%	75%	77%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS						
10.1	Is it easy for you to make an application?	n=160	72%	73%	72%	89%
<i>For those who have made an application:</i>						
10.2	Are applications usually dealt with fairly?	n=144	46%	50%	46%	60%
	Are applications usually dealt with within 7 days?	n=137	39%	36%	39%	57%
10.3	Is it easy for you to make a complaint?	n=161	68%	62%	68%	71%
<i>For those who have made a complaint:</i>						
10.4	Are complaints usually dealt with fairly?	n=108	35%	30%	35%	36%
	Are complaints usually dealt with within 7 days?	n=101	22%	25%	22%	39%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=126	26%	28%	26%	

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

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

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

**Number of completed questionnaires returned**

*n=number of valid responses to question (HMP Stocken 2019)*

HMP Stocken 2019	For other category C training prisons surveyed since September 2017	HMP Stocken 2019	HMP Stocken 2015
166	2,905	166	194

<i>For those who need it, is it easy to:</i>						
10.6	Communicate with your solicitor or legal representative?	<i>n=131</i>	46%	39%	46%	
	Attend legal visits?	<i>n=123</i>	60%	47%	60%	
	Get bail information?	<i>n=95</i>	17%	16%	17%	
<i>For those who have had legal letters:</i>						
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	<i>n=127</i>	68%	57%	68%	56%
<b>HEALTH CARE</b>						
11.1	Is it very / quite easy to see:					
	- Doctor?	<i>n=160</i>	31%	32%	31%	
	- Nurse?	<i>n=159</i>	56%	52%	56%	
	- Dentist?	<i>n=157</i>	23%	15%	23%	
	- Mental health workers?	<i>n=153</i>	24%	23%	24%	
11.2	Do you think the quality of the health service is very / quite good from:					
	- Doctor?	<i>n=161</i>	59%	46%	59%	
	- Nurse?	<i>n=161</i>	67%	57%	67%	
	- Dentist?	<i>n=158</i>	39%	34%	39%	
	- Mental health workers?	<i>n=156</i>	35%	28%	35%	
11.3	Do you have any mental health problems?	<i>n=164</i>	45%	43%	45%	
<i>For those who have mental health problems:</i>						
11.4	Have you been helped with your mental health problems in this prison?	<i>n=71</i>	54%	41%	54%	
11.5	Do you think the overall quality of the health services here is very / quite good?	<i>n=163</i>	48%	42%	48%	
<b>OTHER SUPPORT NEEDS</b>						
12.1	Do you consider yourself to have a disability?	<i>n=164</i>	33%	33%	33%	18%
<i>For those who have a disability:</i>						
12.2	Are you getting the support you need?	<i>n=52</i>	44%	30%	44%	
12.3	Have you been on an ACCT in this prison?	<i>n=160</i>	14%	16%	14%	
<i>For those who have been on an ACCT:</i>						
12.4	Did you feel cared for by staff?	<i>n=22</i>	55%	42%	55%	
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	<i>n=161</i>	33%	39%	33%	
<b>ALCOHOL AND DRUGS</b>						
13.1	Did you have an alcohol problem when you came into this prison?	<i>n=162</i>	23%	14%	23%	18%
<i>For those who had / have an alcohol problem:</i>						
13.2	Have you been helped with your alcohol problem in this prison?	<i>n=38</i>	61%	52%	61%	59%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	<i>n=161</i>	33%	28%	33%	22%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	<i>n=160</i>	17%	18%	17%	9%

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

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

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

**Number of completed questionnaires returned**

HMP Stocken 2019	All other category C training prisons surveyed since September 2017	HMP Stocken 2019	HMP Stocken 2015
166	2,905	166	194

*n=number of valid responses to question (HMP Stocken 2019)*

13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison? <span style="float: right;"><i>n=161</i></span>	8%	10%	8%	
<i>For those who had / have a drug problem:</i>					
13.6	Have you been helped with your drug problem in this prison? <span style="float: right;"><i>n=57</i></span>	63%	47%	63%	50%
13.7	Is it very / quite easy to get illicit drugs in this prison? <span style="float: right;"><i>n=160</i></span>	44%	51%	44%	
13.8	Is it very / quite easy to get alcohol in this prison? <span style="float: right;"><i>n=159</i></span>	39%	32%	39%	

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

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

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

**Number of completed questionnaires returned**

*n=number of valid responses to question (HMP Stocken 2019)*

HMP Stocken 2019	All other category C training prisons surveyed since September 2017	HMP Stocken 2019	HMP Stocken 2015
166	2,905	166	194

SAFETY						
14.1	Have you ever felt unsafe here?	<i>n</i> =162	44%	47%	44%	46%
14.2	Do you feel unsafe now?	<i>n</i> =159	21%	23%	21%	19%
14.3	Have you experienced any of the following from other prisoners here:					
	- Verbal abuse?	<i>n</i> =160	31%	33%	31%	
	- Threats or intimidation?	<i>n</i> =160	26%	30%	26%	
	- Physical assault?	<i>n</i> =160	17%	18%	17%	
	- Sexual assault?	<i>n</i> =160	2%	2%	2%	
	- Theft of canteen or property?	<i>n</i> =160	25%	25%	25%	
	- Other bullying / victimisation?	<i>n</i> =160	18%	17%	18%	
	- Not experienced any of these from prisoners here	<i>n</i> =160	54%	54%	54%	
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<i>n</i> =155	25%	32%	25%	
14.5	Have you experienced any of the following from staff here:					
	- Verbal abuse?	<i>n</i> =160	29%	30%	29%	
	- Threats or intimidation?	<i>n</i> =160	19%	23%	19%	
	- Physical assault?	<i>n</i> =160	9%	11%	9%	
	- Sexual assault?	<i>n</i> =160	1%	2%	1%	
	- Theft of canteen or property?	<i>n</i> =160	11%	9%	11%	
	- Other bullying / victimisation?	<i>n</i> =160	18%	16%	18%	
	- Not experienced any of these from staff here	<i>n</i> =160	56%	58%	56%	
14.6	If you were being bullied / victimised by staff here, would you report it?	<i>n</i> =158	42%	48%	42%	
BEHAVIOUR MANAGEMENT						
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<i>n</i> =159	40%	39%	40%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<i>n</i> =161	44%	37%	44%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<i>n</i> =162	10%	13%	10%	7%
	<i>For those who have been restrained in the last 6 months.</i>					
15.4	Did anyone come and talk to you about it afterwards?	<i>n</i> =16	19%	20%	19%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	<i>n</i> =162	7%	10%	7%	
	<i>For those who have spent one or more nights in the segregation unit in the last 6 months</i>					
15.6	Were you treated well by segregation staff?	<i>n</i> =12	67%	57%	67%	
	Could you shower every day?	<i>n</i> =12	92%	76%	92%	
	Could you go outside for exercise every day?	<i>n</i> =12	92%	76%	92%	
	Could you use the phone every day (if you had credit)?	<i>n</i> =12	92%	65%	92%	

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

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

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

Number of completed questionnaires returned

n=number of valid responses to question (HMP Stocken 2019)

HMP Stocken 2019	For owner category C training prisons surveyed since September 2017	HMP Stocken 2019	HMP Stocken 2015
166	2,905	166	194

EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	n=155	84%	59%	84%
	- Vocational or skills training?	n=151	68%	39%	68%
	- Prison job?	n=152	63%	46%	63%
	- Voluntary work outside of the prison?	n=149	7%	5%	7%
	- Paid work outside of the prison?	n=152	5%	4%	5%
16.2	In this prison, have you done the following activities:				
	- Education?	n=148	88%	79%	88%
	- Vocational or skills training?	n=150	87%	68%	87%
	- Prison job?	n=148	85%	81%	85%
	- Voluntary work outside of the prison?	n=143	33%	33%	33%
	- Paid work outside of the prison?	n=142	30%	33%	30%
<i>For those who have done the following activities, do you think they will help you on release.</i>					
	- Education?	n=130	66%	60%	66%
	- Vocational or skills training?	n=131	75%	66%	75%
	- Prison job?	n=126	39%	40%	39%
	- Voluntary work outside of the prison?	n=47	53%	54%	53%
	- Paid work outside of the prison?	n=43	54%	58%	54%
16.3	Do staff encourage you to attend education, training or work?	n=151	66%	59%	66%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	n=160	80%	58%	80%
<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=127	95%	82%	95%
17.3	Are staff helping you to achieve your objectives or targets?	n=128	45%	43%	45%
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	n=125	68%	47%	68%
	- Other programmes?	n=119	60%	41%	60%
	- One to one work?	n=116	53%	36%	53%
	- Been on a specialist unit?	n=114	28%	19%	28%
	- ROTL - day or overnight release?	n=111	19%	14%	19%
<i>For those who have done the following, did they help you to achieve your objectives or targets</i>					
	- Offending behaviour programmes?	n=85	69%	70%	69%
	- Other programmes?	n=71	63%	65%	63%
	- One to one work?	n=62	58%	67%	58%

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

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

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

**Number of completed questionnaires returned**

*n=number of valid responses to question (HMP Stocken 2019)*

HMP Stocken 2019	All other category C prisons surveyed since September 2017	HMP Stocken 2019	HMP Stocken 2015
<b>166</b>	<b>2,905</b>	<b>166</b>	<b>194</b>

	- Being on a specialist unit?	<i>n=32</i>	<b>25%</b>	<b>47%</b>	<b>25%</b>	
	- ROTL - day or overnight release?	<i>n=21</i>	<b>29%</b>	<b>39%</b>	<b>29%</b>	



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

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

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

**Number of completed questionnaires returned**

*n=number of valid responses to question (HMP Stocken 2019)*

HMP Stocken 2019	All other Category C training prisons surveyed since September 2017	HMP Stocken 2019	HMP Stocken 2015
166	2,905	166	194

PREPARATION FOR RELEASE						
18.1	Do you expect to be released in the next 3 months?	<i>n=160</i>	7%	26%	7%	
<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=10</i>	40%	40%	40%	
18.3	Is anybody helping you to prepare for your release?	<i>n=11</i>	82%	57%	82%	
18.4	Do you need help to sort out the following for when you are released:					
	- Finding accommodation?	<i>n=11</i>	64%	62%	64%	
	- Getting employment?	<i>n=9</i>	67%	62%	67%	
	- Setting up education or training?	<i>n=8</i>	50%	49%	50%	
	- Arranging benefits?	<i>n=9</i>	67%	66%	67%	
	- Sorting out finances?	<i>n=9</i>	67%	57%	67%	
	- Support for drug or alcohol problems?	<i>n=9</i>	44%	43%	44%	
	- Health / mental Health support?	<i>n=10</i>	50%	49%	50%	
	- Social care support?	<i>n=9</i>	44%	36%	44%	
	- Getting back in touch with family or friends?	<i>n=9</i>	44%	39%	44%	
18.4	Are you getting help to sort out the following for when you are released, if you need it:					
	- Finding accommodation?	<i>n=7</i>	57%	38%	57%	
	- Getting employment?	<i>n=6</i>	33%	23%	33%	
	- Setting up education or training?	<i>n=4</i>	25%	25%	25%	
	- Arranging benefits?	<i>n=6</i>	0%	27%	0%	
	- Sorting out finances?	<i>n=6</i>	67%	24%	67%	
	- Support for drug or alcohol problems?	<i>n=4</i>	75%	51%	75%	
	- Health / mental Health support?	<i>n=5</i>	40%	31%	40%	
	- Social care support?	<i>n=4</i>	0%	24%	0%	
	- Getting back in touch with family or friends?	<i>n=4</i>	25%	31%	25%	
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=160</i>	53%	50%	53%	

## HMP Stocken 2019

### Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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

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

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

Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
50	114	25	135

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION		Black and minority ethnic	White	Muslim	Non-Muslim
1.2	Are you under 25 years of age?	33%	10%	36%	13%
	Are you 50 years of age or older?	4%	16%	0%	14%
1.3	Are you from a minority ethnic group?			88%	18%
7.1	Are you Muslim?	48%	3%		
11.3	Do you have any mental health problems?	24%	55%	20%	49%
12.1	Do you consider yourself to have a disability?	18%	40%	16%	36%
19.2	Are you a foreign national?	4%	3%	4%	4%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	6%	0%	5%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	52%	85%	56%	80%
2.4	Overall, were you treated very / quite well in reception?	61%	87%	56%	84%
2.5	When you first arrived, did you have any problems?	69%	69%	75%	68%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	21%	36%	27%	33%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	74%	83%	68%	83%
3.5	Have you had an induction at this prison?	100%	98%	100%	99%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	60%	62%	64%	61%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	29%	38%	25%	36%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	63%	69%	64%	69%
	- Can you shower every day?	98%	96%	100%	96%
	- Do you have clean sheets every week?	53%	72%	46%	71%
	- Do you get cell cleaning materials every week?	52%	70%	52%	67%
	- Is it normally quiet enough for you to relax or sleep at night?	60%	63%	52%	64%
	- Can you get your stored property if you need it?	8%	16%	8%	16%

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

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

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

Number of completed questionnaires returned

Black and minority ethnic	White
50	114

Muslim	Non-Muslim
25	135

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	35%	44%	40%	42%
5.3	Does the shop / canteen sell the things that you need?	52%	74%	58%	70%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	53%	70%	48%	69%
6.2	Are there any staff here you could turn to if you had a problem?	53%	73%	40%	72%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	19%	37%	17%	34%
6.6	Do you feel that you are treated as an individual in this prison?	32%	51%	17%	50%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	59%	78%	64%	73%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	64%	83%	76%	79%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	12%	31%	12%	29%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	70%	62%	64%	63%
8.3	Are you able to use a phone every day (if you have credit)?	88%	95%	100%	93%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	52%	70%	56%	68%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	6%	5%	4%	5%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	10%	14%	4%	15%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	65%	82%	67%	77%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	65%	75%	56%	76%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	34%	51%	26%	51%
10.3	Is it easy for you to make a complaint?	69%	67%	71%	67%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	27%	39%	24%	39%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	19%	30%	20%	28%

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

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

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

Number of completed questionnaires returned

Black and minority ethnic	White
50	114

Muslim	Non-Muslim
25	135

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	29%	33%	36%	31%
	- Nurse?	52%	57%	52%	57%
	- Dentist?	19%	25%	17%	23%
	- Mental health workers?	15%	28%	24%	25%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	50%	54%	60%	54%
11.5	Do you think the overall quality of the health services here is very / quite good?	48%	48%	48%	48%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	22%	49%	25%	46%
SAFETY					
14.1	Have you ever felt unsafe here?	42%	44%	48%	42%
14.2	Do you feel unsafe now?	24%	19%	16%	21%
14.3	Not experienced bullying / victimisation by other prisoners	57%	52%	56%	54%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	15%	30%	8%	29%
14.5	Not experienced bullying / victimisation by members of staff	45%	61%	36%	62%
14.6	If you were being bullied / victimised by staff here, would you report it?	36%	46%	27%	46%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	33%	43%	32%	42%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	29%	50%	21%	49%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	10%	10%	17%	9%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	4%	9%	4%	8%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	57%	69%	58%	68%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	81%	79%	83%	79%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	39%	48%	37%	47%
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?	100%	75%	100%	80%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	57%	50%	52%	52%

## HMP Stocken 2019

### 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.

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

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

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

Number of completed questionnaires returned

		Have a disability	Do not have a disability	
		54	110	
		Mental health problems	No mental health problems	
		74	90	

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	9%	20%	10%	23%
	Are you 50 years of age or older?	19%	9%	10%	15%
1.3	Are you from a minority ethnic group?	17%	38%	16%	43%
7.1	Are you Muslim?	8%	20%	7%	23%
11.3	Do you have any mental health problems?	67%	35%		
12.1	Do you consider yourself to have a disability?			49%	20%
19.2	Are you a foreign national?	2%	5%	1%	6%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	6%	4%	7%	2%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	74%	76%	81%	70%
2.4	Overall, were you treated very / quite well in reception?	81%	78%	88%	72%
2.5	When you first arrived, did you have any problems?	84%	62%	82%	59%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	30%	32%	35%	28%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	71%	84%	74%	85%
3.5	Have you had an induction at this prison?	98%	99%	97%	100%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	61%	63%	57%	66%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	32%	36%	28%	40%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	64%	70%	64%	71%
	- Can you shower every day?	93%	98%	94%	98%
	- Do you have clean sheets every week?	66%	67%	64%	68%
	- Do you get cell cleaning materials every week?	71%	62%	65%	65%
	- Is it normally quiet enough for you to relax or sleep at night?	64%	62%	64%	61%
	- Can you get your stored property if you need it?	20%	12%	13%	16%

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

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

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

Have a disability	Do not have a disability
<b>54</b>	<b>110</b>

Mental health problems	No mental health problems
<b>74</b>	<b>90</b>

Number of completed questionnaires returned

<b>FOOD AND CANTEEN</b>			
5.2	Do you get enough to eat at meal-times always / most of the time?	32%	45%
5.3	Does the shop / canteen sell the things that you need?	60%	70%
<b>RELATIONSHIPS WITH STAFF</b>			
6.1	Do most staff here treat you with respect?	64%	67%
6.2	Are there any staff here you could turn to if you had a problem?	71%	65%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	39%	28%
6.6	Do you feel that you are treated as an individual in this prison?	47%	44%
<b>FAITH</b>			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	75%	69%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	74%	77%
<b>CONTACT WITH FAMILY AND FRIENDS</b>			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	19%	29%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	66%	63%
8.3	Are you able to use a phone every day (if you have credit)?	94%	92%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	73%	61%
<b>TIME OUT OF CELL</b>			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	8%	5%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	10%	15%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	68%	78%
<b>APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS</b>			
10.1	Is it easy for you to make an application?	69%	73%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	43%	47%
10.3	Is it easy for you to make a complaint?	67%	68%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	28%	40%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	42%	18%

<b>39%</b>	<b>43%</b>
<b>69%</b>	<b>64%</b>
<b>68%</b>	<b>64%</b>
<b>67%</b>	<b>66%</b>
<b>36%</b>	<b>28%</b>
<b>46%</b>	<b>44%</b>
<b>78%</b>	<b>66%</b>
<b>82%</b>	<b>72%</b>
<b>27%</b>	<b>25%</b>
<b>67%</b>	<b>62%</b>
<b>92%</b>	<b>93%</b>
<b>67%</b>	<b>63%</b>
<b>7%</b>	<b>5%</b>
<b>17%</b>	<b>10%</b>
<b>77%</b>	<b>74%</b>
<b>70%</b>	<b>74%</b>
<b>46%</b>	<b>46%</b>
<b>70%</b>	<b>66%</b>
<b>41%</b>	<b>30%</b>
<b>31%</b>	<b>22%</b>

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

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

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

Number of completed questionnaires returned

Have a disability	Do not have a disability
54	110

Mental health problems	No mental health problems
74	90

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	31%	32%
	- Nurse?	57%	56%
	- Dentist?	22%	24%
	- Mental health workers?	25%	24%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	57%	50%
11.5	Do you think the overall quality of the health services here is very / quite good?	38%	53%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	44%	
SAFETY			
14.1	Have you ever felt unsafe here?	57%	38%
14.2	Do you feel unsafe now?	28%	18%
14.3	Not experienced bullying / victimisation by other prisoners	33%	64%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	25%	26%
14.5	Not experienced bullying / victimisation by members of staff	50%	59%
14.6	If you were being bullied / victimised by staff here, would you report it?	51%	38%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	43%	39%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	40%	45%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	15%	7%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	13%	5%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	63%	67%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	76%	82%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	46%	45%
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?	86%	75%
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?	51%	53%

26%	36%
58%	54%
21%	25%
25%	23%
54%	
40%	54%
40%	53%
52%	37%
28%	15%
38%	67%
24%	26%
51%	60%
44%	41%
33%	46%
41%	46%
15%	6%
11%	5%
67%	65%
78%	81%
45%	46%
67%	100%
51%	53%

## HMP Stocken 2019

### Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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

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

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

Number of completed questionnaires returned

25 and under	Over 25	50 and over	Under 50
28	137	20	145

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	0%			0%
	Are you 70 years of age or older?		0%		
1.3	Are you from a minority ethnic group?	59%	24%	10%	33%
7.1	Are you Muslim?	35%	12%	0%	18%
11.3	Do you have any mental health problems?	26%	49%	35%	47%
12.1	Do you consider yourself to have a disability?	19%	36%	50%	31%
19.2	Are you a foreign national?	0%	5%	5%	4%
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?	61%	79%	80%	75%
2.4	Overall, were you treated very / quite well in reception?	67%	82%	85%	79%
2.5	When you first arrived, did you have any problems?	62%	71%	61%	70%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	6%	37%	50%	30%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	82%	80%	90%	79%
3.5	Have you had an induction at this prison?	100%	99%	100%	99%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	48%	65%	61%	62%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	19%	38%	63%	31%
4.3					
	- Do you normally have enough clean, suitable clothes for the week?	70%	66%	79%	66%
	- Can you shower every day?	96%	96%	95%	97%
	- Do you have clean sheets every week?	62%	68%	79%	66%
	- Do you get cell cleaning materials every week?	63%	65%	74%	63%
	- Is it normally quiet enough for you to relax or sleep at night?	67%	62%	74%	61%
	- Can you get your stored property if you need it?	11%	15%	21%	14%



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

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

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

25 and under	Over 25
<b>28</b>	<b>137</b>

50 and over	Under 50
<b>20</b>	<b>145</b>

Number of completed questionnaires returned

<b>FOOD AND CANTEEN</b>			
5.2	Do you get enough to eat at meal-times always / most of the time?	41%	41%
5.3	Does the shop / canteen sell the things that you need?	70%	66%
<b>RELATIONSHIPS WITH STAFF</b>			
6.1	Do most staff here treat you with respect?	42%	70%
6.2	Are there any staff here you could turn to if you had a problem?	50%	71%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	28%	32%
6.6	Do you feel that you are treated as an individual in this prison?	27%	49%
<b>FAITH</b>			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	47%	76%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	73%	78%
<b>CONTACT WITH FAMILY AND FRIENDS</b>			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	30%	25%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	70%	63%
8.3	Are you able to use a phone every day (if you have credit)?	93%	93%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	62%	65%
<b>TIME OUT OF CELL</b>			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	0%	7%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	23%	11%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	61%	77%
<b>APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS</b>			
10.1	Is it easy for you to make an application?	63%	74%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	35%	48%
10.3	Is it easy for you to make a complaint?	59%	69%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	25%	37%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	36%	24%

<b>68%</b>	<b>37%</b>
<b>84%</b>	<b>64%</b>
<b>90%</b>	<b>62%</b>
<b>90%</b>	<b>64%</b>
<b>37%</b>	<b>31%</b>
<b>63%</b>	<b>43%</b>
<b>86%</b>	<b>70%</b>
<b>93%</b>	<b>75%</b>
<b>32%</b>	<b>25%</b>
<b>53%</b>	<b>66%</b>
<b>95%</b>	<b>92%</b>
<b>73%</b>	<b>63%</b>
<b>10%</b>	<b>5%</b>
<b>5%</b>	<b>14%</b>
<b>94%</b>	<b>72%</b>
<b>85%</b>	<b>70%</b>
<b>69%</b>	<b>43%</b>
<b>65%</b>	<b>68%</b>
<b>56%</b>	<b>33%</b>
<b>14%</b>	<b>28%</b>

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

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

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

Number of completed questionnaires returned

	25 and under	Over 25	50 and over	Under 50
	28	137	20	145

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	27%	32%	40%	30%
	- Nurse?	50%	57%	60%	55%
	- Dentist?	24%	22%	40%	20%
	- Mental health workers?	24%	24%	26%	24%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	43%	55%	86%	50%
11.5	Do you think the overall quality of the health services here is very / quite good?	52%	47%	60%	46%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	40%	45%	70%	38%
SAFETY					
14.1	Have you ever felt unsafe here?	26%	47%	26%	46%
14.2	Do you feel unsafe now?	15%	22%	11%	22%
14.3	Not experienced bullying / victimisation by other prisoners	85%	48%	63%	53%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	24%	26%	53%	22%
14.5	Not experienced bullying / victimisation by members of staff	52%	57%	63%	55%
14.6	If you were being bullied / victimised by staff here, would you report it?	30%	45%	68%	39%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	27%	42%	53%	38%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	26%	47%	58%	41%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	19%	8%	5%	11%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	7%	8%	10%	7%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	42%	71%	71%	65%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	80%	80%	80%	80%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	29%	49%	63%	43%
PREPARATION FOR RELEASE					
<i>For those who expect to be released in the next 3 months:</i>					
18.3	Is anybody helping you to prepare for your release?	50%	89%	100%	78%
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?	52%	52%	58%	51%

## HMP Stocken 2019

### Comparison of survey responses from different residential locations

In this table responses from the IDTS unit (K Wing ) are compared with those from the rest of the establishment (F, H, K, L and M wings).

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

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

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

Number of completed questionnaires returned

IDTS unit (K wing)	Rest of the establishment
26	138

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	0%
	Are you 25 years of age or younger?	4%	18%
	Are you 50 years of age or older?	8%	13%
	Are you 70 years of age or older?	0%	0%
1.3	Are you from a minority ethnic group?	23%	31%
1.4	Have you been in this prison for less than 6 months?	23%	21%
1.5	Are you currently serving a sentence?	100%	100%
	Are you on recall?	16%	8%
1.6	Is your sentence less than 12 months?	4%	2%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	4%	4%
7.1	Are you Muslim?	12%	16%
11.3	Do you have any mental health problems?	81%	38%
12.1	Do you consider yourself to have a disability?	46%	31%
19.1	Do you have any children under the age of 18?	65%	59%
19.2	Are you a foreign national?	0%	5%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	8%	4%
19.4	Have you ever been in the armed services?	4%	7%
19.5	Is your gender female or non-binary?	0%	0%
19.6	Are you homosexual, bisexual or other sexual orientation?	0%	4%
19.7	Do you identify as transgender or transsexual?	0%	1%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	15%	12%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	54%	53%
2.3	When you were searched in reception, was this done in a respectful way?	73%	76%
2.4	Overall, were you treated very / quite well in reception?	85%	78%

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

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

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

	IDTS unit (K wing)	Rest of the establishment
<b>Number of completed questionnaires returned</b>	<b>26</b>	<b>138</b>

2.5	When you first arrived, did you have any problems?	84%	67%
2.5	Did you have problems with:		
	- Getting phone numbers?	40%	24%
	- Contacting family?	36%	19%
	- Arranging care for children or other dependents?	8%	4%
	- Contacting employers?	4%	4%
	- Money worries?	20%	15%
	- Housing worries?	24%	14%
	- Feeling depressed?	48%	29%
	- Feeling suicidal?	16%	6%
	- Other mental health problems?	48%	19%
	- Physical health problems?	20%	10%
	- Drugs or alcohol (e.g. withdrawal)?	40%	10%
	- Getting medication?	40%	19%
	- Needing protection from other prisoners?	8%	4%
	- Lost or delayed property?	20%	28%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	32%	32%
<b>FIRST NIGHT AND INDUCTION</b>			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	77%	69%
	- Toiletries / other basic items?	65%	66%
	- A shower?	62%	57%
	- A free phone call?	58%	38%
	- Something to eat?	69%	81%
	- The chance to see someone from health care?	73%	58%
	- The chance to talk to a Listener or Samaritans?	31%	25%
	- Support from another prisoner (e.g. Insider or buddy)?	27%	26%
	- None of these?	8%	8%
3.2	On your first night in this prison, was your cell very / quite clean?	46%	55%
3.3	Did you feel safe on your first night here?	73%	82%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	56%	52%
	- Free PIN phone credit?	67%	54%
	- Numbers put on your PIN phone?	46%	57%
3.5	Have you had an induction at this prison?	96%	99%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	68%	61%

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

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

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

Number of completed questionnaires returned

IDTS unit (K wing)	26	Rest of the establishment	138
--------------------	----	---------------------------	-----

<b>ON THE WING</b>			
4.1	Are you in a cell on your own?	85%	81%
4.2	Is your cell call bell normally answered within 5 minutes?	29%	36%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	58%	69%
	- Can you shower every day?	92%	97%
	- Do you have clean sheets every week?	69%	66%
	- Do you get cell cleaning materials every week?	76%	62%
	- Is it normally quiet enough for you to relax or sleep at night?	50%	64%
	- Can you get your stored property if you need it?	8%	16%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	46%	54%
<b>FOOD AND CANTEEN</b>			
5.1	Is the quality of the food in this prison very / quite good?	23%	47%
5.2	Do you get enough to eat at meal-times always / most of the time?	35%	42%
5.3	Does the shop / canteen sell the things that you need?	69%	66%
<b>RELATIONSHIPS WITH STAFF</b>			
6.1	Do most staff here treat you with respect?	67%	64%
6.2	Are there any staff here you could turn to if you had a problem?	54%	69%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	28%	32%
6.4	Do you have a personal officer?	92%	90%
	<i>For those who have a personal officer:</i>		
6.4	Is your personal or named officer very / quite helpful?	32%	37%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	8%	25%
6.6	Do you feel that you are treated as an individual in this prison?	36%	47%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	58%	52%
	If so, do things sometimes change?	53%	42%
<b>FAITH</b>			
7.1	Do you have a religion?	81%	66%
	<i>For those who have a religion:</i>		
7.2	Are your religious beliefs respected here?	76%	69%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	80%	75%
7.4	Are you able to attend religious services, if you want to?	95%	83%
<b>CONTACT WITH FAMILY AND FRIENDS</b>			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	27%	26%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	69%	63%
8.3	Are you able to use a phone every day (if you have credit)?	92%	93%
8.4	Is it very / quite easy for your family and friends to get here?	15%	24%
8.5	Do you get visits from family/friends once a week or more?	4%	12%
	<i>For those who get visits:</i>		
8.6	Do visits usually start and finish on time?	70%	37%
8.7	Are your visitors usually treated respectfully by staff?	80%	63%

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

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

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

Number of completed questionnaires returned

IDTS unit (K wing)	Rest of the establishment
26	138

TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	100%	90%
<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?	68%	67%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	16%	4%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	32%	10%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	15%	9%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	0%	3%
9.4	Do you have time to do domestics more than 5 days in a typical week?	58%	71%
9.5	Do you get association more than 5 days in a typical week, if you want it?	77%	86%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	72%	81%
9.7	Do you typically go to the gym twice a week or more?	42%	67%
9.8	Do you typically go to the library once a week or more?	56%	55%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	85%	73%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	64%	74%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	44%	47%
	Are applications usually dealt with within 7 days?	50%	38%
10.3	Is it easy for you to make a complaint?	56%	69%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	35%	36%
	Are complaints usually dealt with within 7 days?	25%	22%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	18%	28%

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

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

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

Number of completed questionnaires returned

IDTS unit (K wing)	26
Rest of the establishment	138

<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	52%	44%
	Attend legal visits?	80%	55%
	Get bail information?	24%	15%
<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?	70%	67%
<b>HEALTH CARE</b>			
11.1	Is it very / quite easy to see:		
	- Doctor?	36%	30%
	- Nurse?	67%	53%
	- Dentist?	29%	21%
	- Mental health workers?	13%	26%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	56%	60%
	- Nurse?	72%	66%
	- Dentist?	46%	38%
	- Mental health workers?	38%	35%
11.3	Do you have any mental health problems?	81%	38%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	40%	60%
11.5	Do you think the overall quality of the health services here is very / quite good?	48%	49%
<b>OTHER SUPPORT NEEDS</b>			
12.1	Do you consider yourself to have a disability?	46%	31%
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	55%	42%
12.3	Have you been on an ACCT in this prison?	15%	14%
<i>For those who have been on an ACCT:</i>			
12.4	Did you feel cared for by staff?	75%	50%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	46%	30%
<b>ALCOHOL AND DRUGS</b>			
13.1	Did you have an alcohol problem when you came into this prison?	32%	22%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	67%	59%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	77%	23%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	23%	15%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	12%	6%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	72%	58%
13.7	Is it very / quite easy to get illicit drugs in this prison?	60%	41%
13.8	Is it very / quite easy to get alcohol in this prison?	56%	36%

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

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

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

	IDTS unit (K wing)	Rest of the establishment
<b>Number of completed questionnaires returned</b>	<b>26</b>	<b>138</b>

<b>SAFETY</b>			
14.1	Have you ever felt unsafe here?	<b>58%</b>	<b>40%</b>
14.2	Do you feel unsafe now?	<b>27%</b>	<b>18%</b>
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	<b>36%</b>	<b>29%</b>
	- Threats or intimidation?	<b>44%</b>	<b>22%</b>
	- Physical assault?	<b>32%</b>	<b>13%</b>
	- Sexual assault?	<b>0%</b>	<b>2%</b>
	- Theft of canteen or property?	<b>40%</b>	<b>22%</b>
	- Other bullying / victimisation?	<b>32%</b>	<b>15%</b>
	- Not experienced any of these from prisoners here	<b>28%</b>	<b>59%</b>
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<b>16%</b>	<b>27%</b>
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	<b>28%</b>	<b>29%</b>
	- Threats or intimidation?	<b>20%</b>	<b>19%</b>
	- Physical assault?	<b>12%</b>	<b>8%</b>
	- Sexual assault?	<b>0%</b>	<b>2%</b>
	- Theft of canteen or property?	<b>16%</b>	<b>10%</b>
	- Other bullying / victimisation?	<b>24%</b>	<b>16%</b>
	- Not experienced any of these from staff here	<b>56%</b>	<b>57%</b>
14.6	If you were being bullied / victimised by staff here, would you report it?	<b>31%</b>	<b>45%</b>
<b>BEHAVIOUR MANAGEMENT</b>			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<b>44%</b>	<b>40%</b>
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<b>35%</b>	<b>46%</b>
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<b>8%</b>	<b>9%</b>
	<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?	<b>0%</b>	<b>25%</b>
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	<b>8%</b>	<b>6%</b>
	<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?	<b>50%</b>	<b>75%</b>
	Could you shower every day?	<b>100%</b>	<b>88%</b>
	Could you go outside for exercise every day?	<b>100%</b>	<b>88%</b>
	Could you use the phone every day (if you had credit)?	<b>100%</b>	<b>88%</b>



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

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

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

Number of completed questionnaires returned

IDTS unit (K wing)	26	Rest of the establishment	138
--------------------	----	---------------------------	-----

EDUCATION, SKILLS AND WORK			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	77%	85%
	- Vocational or skills training?	68%	68%
	- Prison job?	58%	65%
	- Voluntary work outside of the prison?	12%	7%
	- Paid work outside of the prison?	4%	5%
16.2	In this prison, have you done the following activities:		
	- Education?	82%	89%
	- Vocational or skills training?	79%	89%
	- Prison job?	91%	84%
	- Voluntary work outside of the prison?	44%	31%
	- Paid work outside of the prison?	36%	29%
	<i>For those who have done the following activities, do you think they will help you on release:</i>		
	- Education?	72%	66%
	- Vocational or skills training?	84%	74%
	- Prison job?	55%	37%
	- Voluntary work outside of the prison?	60%	53%
	- Paid work outside of the prison?	63%	53%
16.3	Do staff encourage you to attend education, training or work?	60%	68%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	73%	82%
	<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?	95%	95%
17.3	Are staff helping you to achieve your objectives or targets?	58%	44%
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	61%	69%
	- Other programmes?	56%	61%
	- One to one work?	63%	52%
	- Been on a specialist unit?	38%	27%
	- ROTL - day or overnight release?	31%	17%
	<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>		
	- Offending behaviour programmes?	73%	69%
	- Other programmes?	56%	65%
	- One to one work?	70%	55%
	- Being on a specialist unit?	33%	23%
	- ROTL - day or overnight release?	40%	25%

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

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

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

	IDTS unit (K wing)	Rest of the establishment
Number of completed questionnaires returned	26	138

PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	12%	6%
<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?	0%	57%
18.3	Is anybody helping you to prepare for your release?	67%	88%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	67%	63%
	- Getting employment?	100%	50%
	- Setting up education or training?	100%	33%
	- Arranging benefits?	100%	50%
	- Sorting out finances?	100%	50%
	- Support for drug or alcohol problems?	100%	17%
	- Health / mental Health support?	67%	43%
	- Social care support?	67%	33%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	50%	60%
	- Getting employment?	33%	33%
	- Setting up education or training?	50%	0%
	- Arranging benefits?	0%	0%
	- Sorting out finances?	67%	67%
	- Support for drug or alcohol problems?	67%	100%
	- Health / mental Health support?	0%	67%
	- Social care support?	0%	0%
- Getting back in touch with family or friends?	50%	0%	
FINAL QUESTION ABOUT THIS PRISON			
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	40%	55%

## HMP Stocken 2019

### Comparison of survey responses from different residential locations

In this table responses from the progression unit (I wing) are compared with those from the rest of the establishment (F, H, K, L and M wings).

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

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

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

Number of completed questionnaires returned

	Progression unit (I wing)	Rest of the establishment
Number of completed questionnaires returned	18	146

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	0%
	Are you 25 years of age or younger?	0%	18%
	Are you 50 years of age or older?	33%	10%
	Are you 70 years of age or older?	0%	0%
1.3	Are you from a minority ethnic group?	6%	33%
1.4	Have you been in this prison for less than 6 months?	6%	23%
1.5	Are you currently serving a sentence?	100%	100%
	Are you on recall?	11%	9%
1.6	Is your sentence less than 12 months?	0%	3%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	5%
7.1	Are you Muslim?	0%	17%
11.3	Do you have any mental health problems?	72%	42%
12.1	Do you consider yourself to have a disability?	44%	32%
19.1	Do you have any children under the age of 18?	61%	60%
19.2	Are you a foreign national?	0%	4%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	5%
19.4	Have you ever been in the armed services?	17%	5%
19.5	Is your gender female or non-binary?	0%	0%
19.6	Are you homosexual, bisexual or other sexual orientation?	0%	4%
19.7	Do you identify as transgender or transsexual?	0%	1%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	28%	10%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	50%	53%
2.3	When you were searched in reception, was this done in a respectful way?	94%	73%
2.4	Overall, were you treated very / quite well in reception?	94%	77%

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

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

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

Number of completed questionnaires returned

Progression unit (1 wing)	18	Rest of the establishment	146
---------------------------	----	---------------------------	-----

2.5	When you first arrived, did you have any problems?	65%	71%
2.5	Did you have problems with:		
	- Getting phone numbers?	24%	26%
	- Contacting family?	18%	22%
	- Arranging care for children or other dependents?	0%	5%
	- Contacting employers?	0%	4%
	- Money worries?	29%	14%
	- Housing worries?	35%	14%
	- Feeling depressed?	53%	29%
	- Feeling suicidal?	12%	7%
	- Other mental health problems?	35%	22%
	- Physical health problems?	0%	13%
	- Drugs or alcohol (e.g. withdrawal)?	29%	14%
	- Getting medication?	24%	22%
	- Needing protection from other prisoners?	6%	4%
	- Lost or delayed property?	12%	29%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	75%	26%
<b>FIRST NIGHT AND INDUCTION</b>			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	94%	67%
	- Toiletries / other basic items?	72%	66%
	- A shower?	72%	56%
	- A free phone call?	50%	40%
	- Something to eat?	89%	78%
	- The chance to see someone from health care?	56%	61%
	- The chance to talk to a Listener or Samaritans?	33%	25%
	- Support from another prisoner (e.g. Insider or buddy)?	44%	24%
	- None of these?	0%	9%
3.2	On your first night in this prison, was your cell very / quite clean?	82%	50%
3.3	Did you feel safe on your first night here?	100%	78%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	71%	51%
	- Free PIN phone credit?	65%	55%
	- Numbers put on your PIN phone?	65%	54%
3.5	Have you had an induction at this prison?	100%	99%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	77%	61%

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

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

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

Number of completed questionnaires returned

Progression unit (1 wing)	18
Rest of the establishment	146

ON THE WING			
4.1	Are you in a cell on your own?	65%	84%
4.2	Is your cell call bell normally answered within 5 minutes?	65%	32%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	88%	64%
	- Can you shower every day?	100%	96%
	- Do you have clean sheets every week?	94%	63%
	- Do you get cell cleaning materials every week?	94%	61%
	- Is it normally quiet enough for you to relax or sleep at night?	94%	58%
	- Can you get your stored property if you need it?	24%	14%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	88%	48%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	88%	37%
5.2	Do you get enough to eat at meal-times always / most of the time?	53%	39%
5.3	Does the shop / canteen sell the things that you need?	77%	65%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	88%	62%
6.2	Are there any staff here you could turn to if you had a problem?	94%	63%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	47%	29%
6.4	Do you have a personal officer?	94%	90%
<i>For those who have a personal officer:</i>			
6.4	Is your personal or named officer very / quite helpful?	60%	33%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	35%	21%
6.6	Do you feel that you are treated as an individual in this prison?	65%	43%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	59%	52%
	If so, do things sometimes change?	50%	43%
FAITH			
7.1	Do you have a religion?	53%	70%
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	100%	68%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	100%	74%
7.4	Are you able to attend religious services, if you want to?	100%	84%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	24%	27%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	50%	66%
8.3	Are you able to use a phone every day (if you have credit)?	100%	92%
8.4	Is it very / quite easy for your family and friends to get here?	33%	22%
8.5	Do you get visits from family/friends once a week or more?	0%	12%
<i>For those who get visits:</i>			
8.6	Do visits usually start and finish on time?	40%	40%
8.7	Are your visitors usually treated respectfully by staff?	60%	65%

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

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

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

Number of completed questionnaires returned

Progression unit (1 wing)	18	Rest of the establishment	146
---------------------------	----	---------------------------	-----

TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	89%	92%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
9.1	Are these times usually kept to?	88%	65%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	6%	6%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	11%	14%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	6%	11%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	6%	2%
9.4	Do you have time to do domestics more than 5 days in a typical week?	83%	67%
9.5	Do you get association more than 5 days in a typical week, if you want it?	88%	84%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	89%	78%
9.7	Do you typically go to the gym twice a week or more?	61%	63%
9.8	Do you typically go to the library once a week or more?	72%	53%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	93%	73%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	82%	71%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	67%	44%
	Are applications usually dealt with within 7 days?	62%	38%
10.3	Is it easy for you to make a complaint?	78%	66%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	71%	33%
	Are complaints usually dealt with within 7 days?	25%	22%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	27%	26%

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

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

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

Number of completed questionnaires returned

Progression unit (1 wing)	18	Rest of the establishment	146
---------------------------	----	---------------------------	-----

<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	54%	45%
	Attend legal visits?	60%	60%
	Get bail information?	29%	15%
<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?	57%	69%
<b>HEALTH CARE</b>			
11.1	Is it very / quite easy to see:		
	- Doctor?	39%	30%
	- Nurse?	72%	53%
	- Dentist?	28%	22%
	- Mental health workers?	31%	23%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	56%	60%
	- Nurse?	61%	67%
	- Dentist?	56%	37%
	- Mental health workers?	65%	32%
11.3	Do you have any mental health problems?	72%	42%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	77%	49%
11.5	Do you think the overall quality of the health services here is very / quite good?	56%	48%
<b>OTHER SUPPORT NEEDS</b>			
12.1	Do you consider yourself to have a disability?	44%	32%
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	63%	41%
12.3	Have you been on an ACCT in this prison?	11%	14%
<i>For those who have been on an ACCT:</i>			
12.4	Did you feel cared for by staff?	100%	50%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	44%	31%
<b>ALCOHOL AND DRUGS</b>			
13.1	Did you have an alcohol problem when you came into this prison?	44%	20%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	88%	53%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	50%	30%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	35%	14%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	11%	6%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	83%	57%
13.7	Is it very / quite easy to get illicit drugs in this prison?	41%	45%
13.8	Is it very / quite easy to get alcohol in this prison?	18%	41%

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

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

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

Number of completed questionnaires returned

	Progression unit (1 wing)	Rest of the establishment
	18	146

SAFETY			
14.1	Have you ever felt unsafe here?	53%	42%
14.2	Do you feel unsafe now?	25%	19%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	41%	29%
	- Threats or intimidation?	35%	24%
	- Physical assault?	24%	15%
	- Sexual assault?	0%	2%
	- Theft of canteen or property?	35%	23%
	- Other bullying / victimisation?	12%	18%
	- Not experienced any of these from prisoners here	41%	56%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	33%	24%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	44%	28%
	- Threats or intimidation?	6%	20%
	- Physical assault?	0%	10%
	- Sexual assault?	0%	1%
	- Theft of canteen or property?	6%	11%
	- Other bullying / victimisation?	6%	18%
	- Not experienced any of these from staff here	44%	59%
14.6	If you were being bullied / victimised by staff here, would you report it?	44%	42%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	35%	41%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	65%	42%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	6%	9%
	<i>For those who have been restrained in the last 6 months:</i>		
15.4	Did anyone come and talk to you about it afterwards?	0%	25%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	6%	6%
	<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>		
15.6	Were you treated well by segregation staff?	100%	67%
	Could you shower every day?	100%	89%
	Could you go outside for exercise every day?	100%	89%
	Could you use the phone every day (if you had credit)?	100%	89%



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

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

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

Number of completed questionnaires returned

Progression unit (1 wing)	18	Rest of the establishment	146
---------------------------	----	---------------------------	-----

EDUCATION, SKILLS AND WORK				
16.1	In this prison, is it easy to get into the following activities:			
	- Education?	94%	82%	
	- Vocational or skills training?	88%	65%	
	- Prison job?	82%	61%	
	- Voluntary work outside of the prison?	13%	7%	
	- Paid work outside of the prison?	6%	5%	
16.2	In this prison, have you done the following activities:			
	- Education?	77%	89%	
	- Vocational or skills training?	94%	86%	
	- Prison job?	94%	84%	
	- Voluntary work outside of the prison?	20%	34%	
	- Paid work outside of the prison?	20%	31%	
<i>For those who have done the following activities, do you think they will help you on release:</i>				
	- Education?	85%	65%	
	- Vocational or skills training?	88%	74%	
	- Prison job?	60%	37%	
	- Voluntary work outside of the prison?	67%	54%	
	- Paid work outside of the prison?	33%	56%	
16.3	Do staff encourage you to attend education, training or work?		94%	63%
PLANNING AND PROGRESSION				
17.1	Do you have a custody plan?		89%	79%
<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?		100%	95%
17.3	Are staff helping you to achieve your objectives or targets?		75%	41%
17.4	In this prison, have you done:			
	- Offending behaviour programmes?	69%	68%	
	- Other programmes?	67%	59%	
	- One to one work?	62%	52%	
	- Been on a specialist unit?	18%	29%	
	- ROTL - day or overnight release?	0%	21%	
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>				
	- Offending behaviour programmes?	100%	64%	
	- Other programmes?	100%	59%	
	- One to one work?	88%	53%	
	- Being on a specialist unit?	50%	23%	
	- ROTL - day or overnight release?		29%	

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

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

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

Number of completed questionnaires returned

Progression unit (1 wing)	18
Rest of the establishment	146

PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	11%	6%
<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?	0%	50%
18.3	Is anybody helping you to prepare for your release?	100%	78%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	50%	67%
	- Getting employment?	50%	71%
	- Setting up education or training?	50%	50%
	- Arranging benefits?	50%	71%
	- Sorting out finances?	50%	71%
	- Support for drug or alcohol problems?	50%	43%
	- Health / mental Health support?	50%	50%
	- Social care support?	50%	43%
	- Getting back in touch with family or friends?	50%	43%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	100%	50%
	- Getting employment?	0%	40%
	- Setting up education or training?	0%	33%
	- Arranging benefits?	0%	0%
	- Sorting out finances?	100%	60%
	- Support for drug or alcohol problems?	100%	67%
	- Health / mental Health support?	100%	25%
	- Social care support?	0%	0%
	- Getting back in touch with family or friends?	0%	33%
<b>FINAL QUESTION ABOUT THIS PRISON</b>			
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	72%	50%