

Report on an unannounced inspection of

# **HMP Brixton**

by HM Chief Inspector of Prisons

**4 March 2019, 11–15 March 2019**

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



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### **Glossary of terms**

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

# Introduction

HMP Brixton is a category C men's resettlement prison situated in the heart of south London. This year marks 200 years since it opened. At the time of this latest inspection, it held around 740 prisoners, of whom more than 200 were sex offenders. In many ways it is a very traditional inner-city jail, with all the challenges that such institutions face. However, this inspection showed that with focused leadership, some bold decision-making and a highly committed staff group, much can be achieved even in the most challenging of circumstances.

At the time of the last inspection in January 2017, we found that the prison was fundamentally unsafe, and we gave our lowest judgement of 'poor' for both safety and purposeful activity. Respect was on that occasion judged to be 'not sufficiently good' and resettlement was 'reasonably good'. Brixton is now a prison in transition, with many new staff, a cohort of prisoners that has changed in nature, and a further clarification in role (since the last inspection it no longer has a category D resettlement function). The fact that it is in a state of transition might go some way to explaining why there have been changes in each of our healthy prison assessments – three showing improvement and one, rehabilitation and release planning, slipping back to be 'not sufficiently good'.

It is no exaggeration to say that in the two years since the last inspection, there has been a transformation in some key areas of the prison's performance. The key to much of what has happened is, in my view, to be found in the determined, pragmatic and bold approach taken to dealing with the problem of illicit drugs which had been dominating prison life and driving very high levels of violence. Two years ago, some 50% of prisoners told us it was easy to get hold of drugs. That figure has now reduced to 30%. The positive rate for mandatory drug tests was 25% at the last inspection, but at that time the figure did not include new psychoactive substances (NPS) such as Spice, which in all probability, based upon what we have seen elsewhere, would have pushed the figure up to around 35% or higher. The current figure, including NPS, sits at 15%.

This dramatic improvement has not come about by chance. There had been a number of what could be described as routine security initiatives, such as scanning post for drug-impregnated paper, putting up security netting and responding in a timely way to intelligence reports. But in addition to all of this, the prison was faced with the question of how to respond to very clear intelligence that prisoners released on temporary licence were being pressurised to bring drugs back into the prison, usually concealed within their body and therefore undetectable by the technology available to the establishment. The decision was taken to stop the use of release on temporary licence (ROTL), and the evidence shows that this clearly had a huge impact on the availability of drugs. This was obviously a very serious step to take, and there was some concern that HM Inspectorate of Prisons would criticise the decision. On the contrary, my view is that this was precisely the type of bold, strategic decision that senior management needed to take when faced with a problem that was making the prison dangerous for both prisoners and staff, and therefore unable to achieve improvements in many areas of prison life. Far from criticising, I congratulate the senior management for having the courage to take this essential step. I believe the right balance was struck between assessing the impact that losing ROTL opportunities would have for some prisoners, and the catastrophic effect that illicit drugs were having within the prison. Clearly this is a policy that will need to be regularly reviewed to ensure that it remains a proportionate measure particularly if, for instance, the prison were to be equipped with the more effective detection equipment that is now available elsewhere.

The improvement in performance against illicit drugs had unsurprisingly been followed by a decrease in violence. When one considers the overall trends in prisons in recent times, this was a remarkable achievement for a prison such as Brixton. The whole atmosphere within the prison had changed, and was far more relaxed and constructive than in the past. There were of course still many challenges. Living conditions were far from acceptable. Too many prisoners lived in overcrowded cells that were much too small, and the amount of time that prisoners were out of their cells varied from wing to wing. Many had a reasonable amount of time unlocked, but some had a very poor regime.

Our colleagues from Ofsted judged that there had been significant improvement in the provision of education, skills and learning which, in the space of two years, was creditable. Nevertheless, there was still much to do. It must become a priority to give sex offenders proper access to training and meaningful work, and also access to interventions that can help them address their offending behaviour. It would be quite wrong if a perception were to be allowed to take hold that large numbers of sex offenders had been moved to Brixton to stabilise the prison (whether or not this was the case) and that the prison had then failed to meet their particular needs and risks.

The decline in our assessment of what was being provided in terms of rehabilitation and release planning was disappointing, but perhaps not entirely unexpected given the focus that had been put on dealing with other issues. Nevertheless, it was concerning that offender assessment system (OASys) reports, a key tool in offender and risk management, were either missing or out of date in more than two-thirds of cases. This was a systemic failure that we have seen in far too many prisons, and needs effective action at regional or even national level. We have made this point many times before, but disappointingly little seems to have been done in terms of remedial action.

Overall, this was a heartening inspection of what has traditionally been a very difficult prison to run well. Although as an inspectorate we focus on the treatment and conditions experienced by prisoners, it would be perverse were we not to reflect on the impact of good leadership and a committed staff group. Both were clear to see at Brixton. As an indication of how the staff were fully behind what had happened, we were told that in the space of two years, staff sickness levels had dropped from 25% to 4.6%. I also took note of the fact that in the short time since the last inspection, 68% of HMIP recommendations had been fully or partially achieved.

Brixton will always be a difficult prison to keep safe, decent and purposeful. My hope is that the progress of the past two years does not turn out to be a temporary blip, and that the improvements we saw can be sustained into the future. Our judgements were that outcomes in two areas were 'not sufficiently good', so there is no room at all for complacency, but at the same time there should be some satisfaction drawn from what has been achieved.

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

May 2019

# Fact page

## Task of the establishment

A category C men's resettlement prison

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

Prisoners held at the time of inspection: 738

Baseline certified normal capacity: 529

In-use certified normal capacity: 529

Operational capacity: 789

## Notable features from this inspection

*The prison was 200 years old and much of the accommodation was in poor condition.*

*60% of cells held more prisoners than they were designed for.*

*There had been no self-inflicted deaths since the previous inspection.*

*52% of the population were black or from a minority ethnic background.*

*29% of the population were held because of a sexual offence.*

*The prison did not run any accredited offending behaviour programmes.*

## Prison status and key providers

Public

Physical health provider: Care UK

Mental health provider: Barnet, Enfield and Haringey Mental Health NHS Trust

Substance use provider: Forward Trust

Learning and skills provider: Novus

Community rehabilitation company (CRC): London CRC (MTCNovo)

Escort contractor: Serco

## Prison group

Public Sector Prisons South, London

## Brief history

HMP Brixton opened in 1819 as the Surrey House of Correction. It was subsequently a prison for women and later a military prison. In 1898, it was turned into an adult male local prison, serving London, particularly south London. In July 2012, it became a category C and D resettlement prison for the local area. In February 2017, the role of the prison changed to a category C-only resettlement prison.

<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**

- A wing: Category C prisoners as well as the London Pathways Unit (for prisoners with personality disorders that were being released in London); temporary location for the segregation unit
- B wing: First night and induction unit
- C wing: Enhanced level prisoners and full-time workers
- D wing: Drug recovery and health and well-being unit
- G wing: Sexual offender prisoners.

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

Dave Bamford, September 2016

**Independent Monitoring Board chair**

Graham King

**Date of last inspection**

9–13 January 2017



# 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>

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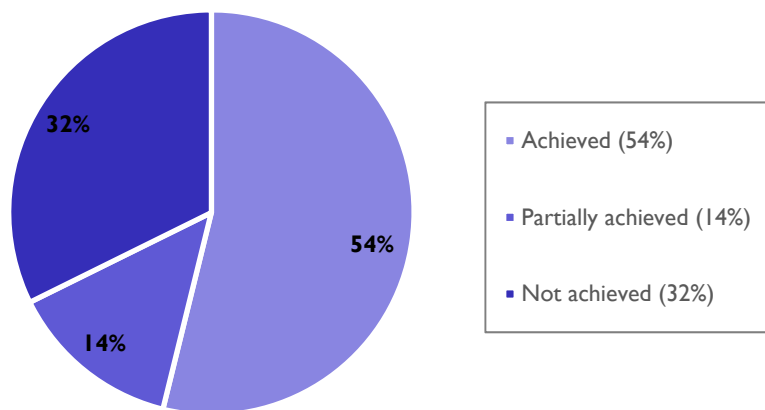
<sup>2</sup> <https://www.justiceinspectorates.gov.uk/hmiprison/our-expectations/prison-expectations/>

<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

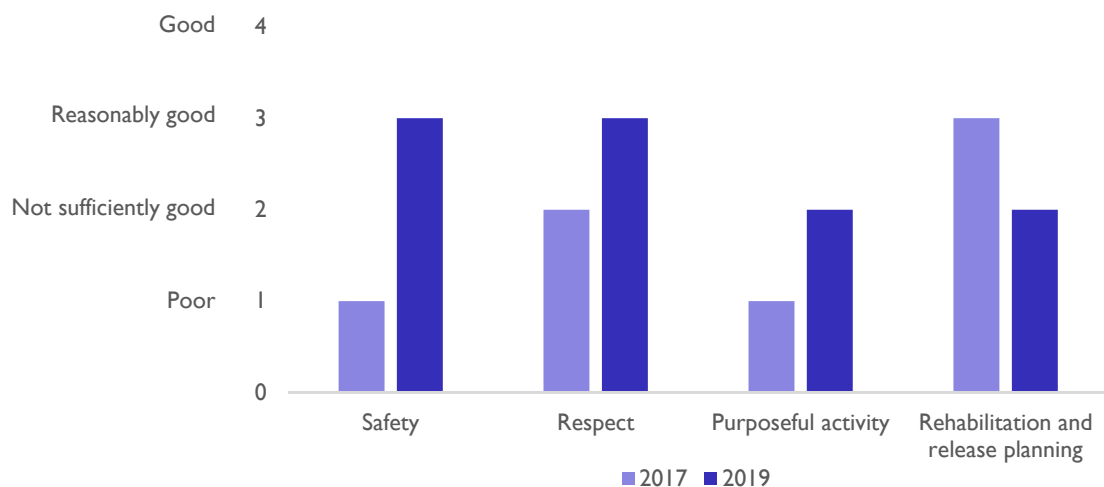
- S1 We last inspected HMP Brixton in 2017 and made 65 recommendations overall. The prison fully accepted 52 of the recommendations and partially (or subject to resources) accepted nine. It rejected four of the recommendations.
- S2 At this follow up inspection we found that the prison had achieved 35 of those recommendations, partially achieved nine recommendations and not achieved 21 recommendations.

Figure 1: HMP Brixton progress on recommendations from last inspection (n=65)



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

Figure 2: HMP Brixton healthy prison outcomes 2017 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 *Arrival and early days procedures had improved and were good. There had been a strong management focus on safety and the prison was notably calmer and safer than at the last inspection. The incentives and earned privileges (IEP) scheme did not provide sufficient support to those on the basic level. Adjudications were managed effectively. Use of force was lower than at similar establishments and governance had improved significantly. The inadequate segregation unit had been closed and the temporary unit was managed well. Security was also well managed and a range of measures taken to reduce the illicit drug supply had been effective. Support for those at risk of self-harm had improved significantly. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S5 *At the last inspection in 2017 we found that outcomes for prisoners in Brixton were poor against this healthy prison test. We made 19 recommendations in the area of safety.<sup>5</sup> At this inspection we found that 13 of the recommendations had been achieved, four had been partially achieved and two had not been achieved.*

S6 The reception environment had been improved since our previous inspection and it was now reasonably welcoming and decent. Risk interviews were robust and took place in private. We observed good interactions between reception staff and prisoners. First night processes ensured basic needs were met. Induction was prompt and good efforts were made to deliver essential information in an accessible way.

S7 There had been concerted and successful efforts to reduce violence. A more predictable regime, increased staffing, robust measures to reduce the drug supply and population changes had all contributed. There was also a more focused day-to-day approach to managing conflict and violence, including regular meetings to identify and respond to emerging concerns and the introduction of trained violence reduction representatives. Incidents were now recorded properly and investigations into violent incidents were thorough and took place promptly. A new case management process, introduced to manage the most challenging perpetrators of antisocial behaviour and to support victims, was proving reasonably effective.

S8 The IEP scheme did not contribute sufficiently well to the prison's efforts to promote positive behaviour. The regime for prisoners on the basic level was poor and too many remained on it for lengthy periods with insufficient support and little opportunity to show they had improved their behaviour. Adjudications were managed more effectively than at the previous inspection, and the introduction of digital recording allowed a more meaningful and mutual exchange to take place. The process was fair and we saw good examples of impartial chairing.

S9 Force was used less frequently than at similar prisons. Use of force reports had improved and there was no backlog. Footage of planned interventions showed good examples of de-escalation. The use of body-worn video cameras was well embedded. Recordings of spontaneous incidents showed good practice, but also some less proficient use of restraint, not all of which had been identified through the quality assurance process. A new incident grading system was a promising means of targeting resources.

S10 The previously inadequate segregation unit had been closed for refurbishment. The temporary unit was well governed. It was used appropriately and usually for short periods.

<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.

The prisoner's segregation term was reviewed regularly and decreased in line with good behaviour. Prisoners were positive about their treatment in the unit. Staff were respectful and helpful.

- S11 The prison had implemented a range of security measures to bring greater stability and control to the establishment. Action to reduce the drug supply included reinforcing physical security, targeted staff searching and routinely using a scanning machine to detect illicit substances in the post. Release on temporary licence had also been suspended because it had been linked to a high level of drugs entering the prison. While justified to achieve stability, it was out of keeping with the prison's resettlement role and required regular and careful reviews to ensure ongoing proportionality. The mandatory drug testing (MDT) positive rate, including tests for new psychoactive substances<sup>6</sup>, was 15%, significantly lower than at our last inspection. A positive MDT result did not automatically trigger a referral to services, but we were told that this shortcoming had been addressed during the inspection. In our survey, 30% of prisoners said it was easy to get illegal drugs, lower than at similar prisons. The flow of intelligence into the security department was good. Information was processed quickly and shared effectively, but not all required follow-up action was taken. Local corruption prevention measures were good and promoted well among staff. Several corrupt staff had been identified and dismissed. Links with the local police were improving, but too many police referrals were outstanding, in some cases for lengthy periods.
- S12 Self-harm was less prevalent than at similar prisons, and some individuals accounted for a large number of incidents. There had been no self-inflicted deaths since our previous inspection. A comprehensive safer custody strategy identified risks at an early stage and positive interventions were delivered. Assessment, care in custody and teamwork case management processes for prisoners at risk of suicide or self-harm were generally carried out well. Staff knew about the prisoners in their care. The Brixton Men's Club, a group where prisoners met and discussed their concerns, helped manage prisoners' anxieties, and could have been extended. The monthly safer custody meeting monitored a broad range of data and identified relevant follow-up action. The prison had an adequate number of trained Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners). The head of safer custody had re-established contact with the Lambeth Adult Safeguarding Board and attended its meetings.

## Respect

S13 *Staff-prisoner relationships were good and the keyworker scheme was well embedded. The physical environment for many prisoners remained very poor, and overcrowded cells did not provide decent living accommodation. The applications and complaints systems were managed effectively. Equality and diversity work had improved significantly, but some areas remained underdeveloped. Much of the prison was not suitable for prisoners with mobility difficulties. Faith provision was good. Health services, particularly mental health provision, were also good. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S14 *At the last inspection in 2017 we found that outcomes for prisoners in Brixton were not sufficiently good against this healthy prison test. We made 19 recommendations in the area of respect. At this inspection we found that 11 of the recommendations had been achieved, two had been partially achieved and six had not been achieved.*

<sup>6</sup> New psychoactive substances generally refer 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.

- S15 In our survey, prisoners were generally positive about staff, although interactions we saw were mixed. The establishment was fully staffed and all prisoners had an allocated keyworker. Most prisoners we spoke to had met with them. The prison had produced some very good tools to help keyworkers improve the standard of their work. Keyworkers' recorded entries that we saw were mostly good. Some positive initiatives were promoting a rehabilitative culture, for example, prisoners met newly appointed staff to tell them about their experiences and concerns.
- S16 Despite a significant ongoing refurbishment and maintenance programme, many cells remained in a poor state of repair. Far too many cells designed for one person were holding two, and conditions were unacceptably cramped. Toilets and showers did not have sufficient screening to ensure privacy. Men could wear and wash their own clothes, take a daily shower and obtain cleaning material. Managers monitored cell bell responses every day, analysing the data to identify where and when bells were most frequently used and why.
- S17 Catering management responded to prisoners' needs. Prisoners were extremely positive about the food. The menu range was particularly good even though the catering manager did not receive any more funding than was available at other prisons. Prisoners could order items from an extensive range of catalogues.
- S18 Prisoner consultation was extensive and had led to some helpful outcomes for prisoners. Responses to complaints were polite and timely, and addressed the issues raised. Quality assurance for complaints was good. Prisoner information desk workers managed the applications process well, logging receipts and replies. Responses were usually very prompt. Prisoners could use a computer to write and print letters for legal purposes, and a reasonable range of legal texts was available in the library.
- S19 There had been a significant improvement in the management of equality and diversity since the previous inspection. The prison's new equality policy was good and equality meetings resulted in useful action. Some progress had been made in establishing consultation forums for minority groups, but they did not take place regularly. Equality monitoring data were being examined but not routinely, and some data suggesting possible unfair treatment had not been addressed. Events promoting diversity were celebrated, for example Black and LGBT history months. The system for reporting discrimination incidents was well used, but responses were generally poor, despite independent quality assurance.
- S20 The majority of black and minority ethnic prisoners we spoke to did not feel staff discriminated against them. However, monitoring data suggesting areas of potential concern had not been investigated. There was little targeted provision for foreign national prisoners. Older prisoners' needs were reasonably well met. However, prisoners with disabilities were less well catered for, and some prisoners with mobility problems did not have sufficiently adapted cells. LGBT prisoners were positive about the level of support they received.
- S21 Faith and pastoral care provided by the large and active chaplaincy were good, and the coordinating chaplain was involved in key prison meetings. Faith facilities were reasonable and prisoners said they had good access to corporate worship and religious education classes.
- S22 Health care governance was effective and health services were well led. Like many other parts of the prison, the health care centre needed redecoration and refurbishment. A suitable range of primary care services was offered and waiting times for most clinics were short. Nurses who led triage sessions on wings undertook prompt assessments and provided good support. Social care processes had not been developed sufficiently, but where needs were identified, support was good. Many prisoners had mental health problems and demand for services was high. A positive new model for mental health and well-being support had

been introduced. It offered a wide range of interventions to meet varied needs and had improved patients' access to services and outcomes. Most prison officers had attended mental health awareness training. Clinical substance use treatment was sound and flexible. Over a third of prisoners were receiving psychosocial support, and the provision was mostly good. Medicine administration on the wings was clinically sound, but inconsistent officer oversight meant prisoners' medication could have been diverted. Prisoners had reasonable access to an adequate range of dental services.

## Purposeful activity

*S23 Time out of cell had improved significantly and was good for most prisoners. The library provision was also good and the gym reasonable. Leadership and management of activities had improved, but was not yet sufficiently effective. There were enough activity places for the population, but few vocational training places for vulnerable prisoners. Allocation processes and attendance were now reasonably good. The quality of teaching and learning was not consistently good. Achievements were high in most courses, but too low in English and maths. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

*S24 At the last inspection in 2017 we found that outcomes for prisoners in Brixton were poor against this healthy prison test. We made 12 recommendations in the area of purposeful activity. At this inspection we found that six of the recommendations had been achieved, one had been partially achieved and five had not been achieved.*

S25 Most prisoners could spend a good amount of time out of their cells, in some cases up to 10 hours. The regime usually ran as scheduled. During our roll checks, very few prisoners were locked up. However, the small number of unemployed prisoners on the basic level of the IEP scheme only left their cells for half an hour a day for association and domestic tasks, which was unacceptable. Immediate action was taken to address this concern and most of these prisoners had jobs by the end of the inspection. Prisoners on the standard level also spent too long locked up at weekends. The library remained cramped but access had improved and was now good. The library stocked a wide range of books and ran a good selection of reading programmes. Prisoners had good access to physical education facilities. Sessions were available for older prisoners and those with health needs. There were plans to refurbish the well-used outdoor all-weather pitch.

S26 Education, skills and work required improvement. Leadership and management had improved and relationships between the prison and Novus, the learning and skills provider, were better. Quality assurance arrangements for teaching and learning had not led to improvements in the quality of teaching, particularly in English and maths. The prison's self-evaluation process and quality improvement planning were not sufficiently well developed. Sufficient, full- and part-time activities were available for the population, but wing workers were not fully occupied. The work allocation process was more robust and centrally managed. Most prisoners were allocated to an activity within a few days of induction. Attendance at activities was monitored rigorously. Prisoner representatives were used well during prisoners' induction into education.

S27 The education and training provision required improvement, although it provided most prisoners with the skills required by employers. Managers had improved the education provision for vulnerable prisoners, but the amount of work and the number of vocational training places open to them were limited, and the standard of the provision was not sufficiently high. The prison continued to support prisoners following Open University and distance learning courses. Careers information, advice and guidance was limited.

- S28 Although teaching and learning was effective on many courses, it was weak in most functional skills sessions. Teaching and learning on vocational courses were effective and helped prisoners to develop good practical skills. Tutors provided constructive feedback to most prisoners on their work, although trainers did not always correct spelling or grammar, particularly in vocational training.
- S29 Education staff used individual learning plans more effectively than at the previous inspection. The plans enabled them to set individual targets and monitor prisoners' progress. Trainers successfully integrated maths into vocational training courses. Tutors used qualified and experienced peer mentors effectively in learning sessions. Insufficient structured support was available for prisoners with specific additional learning support needs.
- S30 The vast majority of prisoners took part in activities. Most were motivated, participated well in activities and were respectful to each other and to members of prison and other staff. Most prisoners' attendance was good. Participation and attendance in some English and maths sessions were low. Over the previous six months, approximately half of prisoners released had entered education, training or employment, which was much higher than we usually see.
- S31 Prisoners' achievements were high on most accredited education courses. Most prisoners who completed their courses achieved a qualification, and there were no significant differences in achievement between different groups of prisoners. However, achievements in English and maths continued to be low. Standards of work were generally satisfactory. Prisoners developed good skills and produced high standards of work in the Clink restaurant and in the Bad Boys Bakery as well as on fashion and graphics programmes.

## Rehabilitation and release planning

- S32 *The provision for visits had improved and there was a very good range of support to help prisoners maintain contact with their families and children. The strategic management of rehabilitation work was reasonably good. The offender management unit (OMU) was now reasonably well resourced, but staff struggled to undertake routine work because of the large number of prisoners with an incomplete offender assessment system (OASys) report. Not enough was being done to address the offending-related needs of the large sex offender population. There were some shortcomings in public protection procedures. Categorisation and home detention curfew (HDC) processes were reasonably effective. Too many prisoners were released without stable accommodation despite good efforts to help them. The community rehabilitation company (CRC) was doing useful work, but it was not yet sufficiently resourced or embedded. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S33 *At the last inspection in 2017 we found that outcomes for prisoners in Brixton were reasonably good against this healthy prison test. We made 15 recommendations in the area of resettlement.<sup>7</sup> At this inspection we found that five of the recommendations had been achieved, two had been partially achieved and eight had not been achieved.*

- S34 The provision for visits was generally good and prisoners could receive regular visits from their families. A good range of courses was available to help them sustain and improve their relationships with their families and friends. The full-time family engagement worker was

<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.



- helping prisoners maintain contact with their children. The visitors' centre was in poor condition, but it was shortly to be replaced.
- S35 Strategic management of rehabilitation work was reasonably good and joined up working between departments was improving. The OMU was well staffed and the training provision for prison offender managers was good and developing. However, probation staff did not receive sufficiently regular or good enough supervision.
- S36 It was unacceptable that in the previous six months, over two-thirds of prisoners had arrived at Brixton without an up-to-date OASys report. Despite local efforts to complete the assessments, too many prisoners did not have an OASys report, which seriously hindered the staff's ability to manage risks and limited prisoners' progression opportunities. Concerted regional action was required to address the problem.
- S37 Prisoners had a good level of contact with offender supervisors who helped them prepare for release. However, caseloads were high and there was little meaningful contact throughout the sentence for many prisoners, including some high-risk sex offenders. Sex offenders often arrived at the prison with outstanding treatment needs. The prison's psychological services met some of their needs, but too many were held for long periods without sufficient intervention. At the time of our inspection, 52 sex offenders were waiting to be transferred to another establishment so that they could begin treatment.
- S38 HDC applications were timely. Many were rejected because of a lack of suitable accommodation. Release on temporary licence had not been used at the prison since 2017.
- S39 About 30 prisoners were serving indeterminate sentences. The prison held lifer days, enabling prisoners to have longer family visits. Monthly lifer meetings were also held. Some prisoners serving indeterminate sentences received good support in the London Pathways Unit (LPU) or the health and well-being unit.
- S40 Contact restrictions and mail monitoring processes were proportionate. In our sample of cases, prisoners who were released and assessed as presenting a high risk of serious harm had thorough risk management plans. However, the inter-departmental risk management team did not consider all relevant cases, and the prison did not check that multi-agency public protection arrangement levels had been set before a prisoner's release. This latter concern was addressed during the inspection.
- S41 Re-categorisations took place reasonably promptly and category D prisoners were usually transferred to open conditions swiftly. Prisoners were not always invited to contribute to their re-categorisation board decision, and some decisions were taken without any contributions from offender supervisors. In one case, this led to an incorrect decision.
- S42 There were few accredited offending behaviour programmes available at the establishment. However, the prison offered several useful non-accredited programmes. The LPU continued to provide prisoners with personality disorders with a positive and constructive therapeutic environment.
- S43 Prisoners on C wing, the resettlement unit, received reasonable support in preparing for release. CRC staff saw all prisoners before their release and undertook some useful work. However, other staff had a limited awareness of their role. Despite the efforts of housing workers, who provided housing advice, nearly a third of prisoners had been released without an address in the previous six months. Data were not collected on the sustainability of the accommodation to which prisoners were released.

## Main concerns and recommendations

S44 Concern: Too many prisoners were held in overcrowded and poorly maintained cells.

**Recommendation: Prisoners should not be held in overcrowded conditions.**  
(Repeated recommendation S45)

**Recommendation: All cells should provide decent, hygienic and well-maintained conditions, including effective toilet screening and sufficient furniture.**

S45 Concern: Vulnerable prisoners had little access to vocational training and meaningful work.

**Recommendation: All vulnerable prisoners should be able to participate in a range of vocational training and meaningful work to ensure they can attain useful skills for education, training or employment on their release.**

S46 Concern: A large number of prisoners arrived from other establishments without a complete OASys report. This took up a great deal of staff time and affected staff's ability to assess prisoners' risks effectively, hindering planning for resettlement before release.

**Recommendation: Concerted regional action should be taken to ensure that all prisoners who need one have a complete and up-to-date OASys document.**

S47 Concern: Insufficient offence-focused work was undertaken with sex offenders at the establishment. Some had been there for lengthy periods without undertaking any meaningful work to address their offending behaviour before their release.

**Recommendation: All sex offenders, including those who deny their offences, should have access to a range of offending behaviour interventions.**

# Section 1. Safety

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

## Early days in custody

### Expected outcomes:

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

- I.1 Most prisoners travelled from other prisons in London so their journeys to the prison were short. The cellular vehicles we inspected were clean and carried suitable first aid equipment, and all prisoners were offered food and water during the transfer. However, none of the prisoners we interviewed had received adequate notice of their transfer, and had mostly been informed only on the morning of the move. They told us this had added to the stress of being transferred.
- I.2 The reception area had been refurbished since the previous inspection and was welcoming. A new seating area displaying information had been created for prisoners waiting to see medical staff. However, holding rooms were bare and poorly ventilated.
- I.3 Warrants and paperwork were checked before prisoners were disembarked. This included reviewing cell-sharing risk assessments against pre-arrival checks carried out by the offender management unit. Initial risk interviews, covering key safety issues, took place in private. We observed staff interacting well with prisoners, offering hot drinks to all and food to those who had arrived at lunch-time.
- I.4 Prisoners were met by prison Insiders (prisoners who introduce new arrivals to prison life) who answered questions and provided basic advice. They also gave them a welcome pack, which included written information and forms for making an application, submitting a complaint and applying for visits or emergency phone credit. However, Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) were only available in reception for those moving to the vulnerable prisoner wing.
- I.5 All new arrivals received a free reception pack of essential items and the option of buying either a vaper's pack or grocery pack. This partially offset having to wait for between eight and 10 days before they could receive their first order from the prison shop.
- I.6 First night arrangements had improved since the previous inspection. Staff, along with an Insider, escorted prisoners to the induction room, which had been refurbished and was welcoming. They were met by the induction officer and a first night orderly, who went through a checklist with each prisoner.
- I.7 The induction officer conducted first night interviews promptly and undertook another more in-depth interview the following morning. First night cells we saw, although extremely cramped (see paragraph 2.5 and main recommendation S44), were clean and equipped with basic items. In our survey, more prisoners than at our previous inspection said they were offered a shower (34% compared with 15%), a free phone call (52% against 22%) and something to eat (78% compared with 50%).

- I.8** A comprehensive induction process began the morning after arrival – the induction orderly who had met prisoners on their first night gave an informative talk. Education assessments also started that day and most prisoners could start activities one to two weeks after arrival (see also paragraph 3.16).
- I.9** A weekly induction fair took place in the chaplaincy where new arrivals could obtain information about services available in the prison directly from those who provided them. They included those involved in the Clink restaurant, prison radio, library, chaplaincy as well as staff from the health care and safer custody departments and the community rehabilitation company. Prisoner representatives also helped explain services and an Insider provided further information about visits, the shop, phone credit or other basic services. Listeners were also present. The fair was relaxed and accessible, and provided information in an engaging way.

### Good practice

- I.10** *A weekly induction fair allowed prisoners to obtain information, advice and support from a wide range of departments and prisoner representatives in a relaxed and engaging way.*

## 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.11** Management of safer custody was good and managers had a clear understanding of the main drivers of violence. Violence reduction data and trends were analysed at a monthly safer custody meeting, while complex individual cases were discussed at a weekly safety interventions meeting (see paragraph 1.32). A comprehensive safer custody policy had been published in November 2018.
- I.12** Since the previous inspection, concerted and successful attempts had been made to decrease the level of violence, manage conflict and reduce the drug supply (see section on security). Staffing levels had improved, the regime was more predictable and the population had changed – there had been an influx of older prisoners and those who were easier to manage. Violent incidents were now robustly recorded, unlike at the previous inspection, but recorded violence had still decreased. Incidents were investigated thoroughly and promptly.
- I.13** In our survey, 18% of prisoners said they felt unsafe at the time of the inspection. Forty-four per cent said they had felt unsafe at some time during their time at the prison, a significant improvement on the previous inspection when the figure was 60%. The introduction of trained violence reduction representatives on each wing had helped to address low-level conflict. The initiative was promising, but outcomes were not sufficiently recorded.
- I.14** Challenge, support and intervention plans (CSIPs) had been introduced to help manage the most violent prisoners and support the most vulnerable in the system. They appeared to identify risk factors and management strategies for suspected perpetrators and victims. The process included monthly reviews and good detailed records. Case management was

generally robust, but in about a third of our sample, reviews were too basic and lacked valid objectives or interventions.

- I.15** The safer custody team was proactive and effective. A new safer custody activity log enabled staff to identify, monitor and support prisoners who might have experienced violence or intimidation, and to record interventions. The log included those who had isolated themselves for 48 consecutive hours. However, not enough was done during the first two days to ensure prisoners felt safe enough to come out of their cells.
- I.16** The incentives and earned privileges (IEP) policy had been revised following staff and prisoner consultation. Keyworkers now contributed to IEP boards. In our survey, over half of prisoners felt the scheme encouraged them to improve their behaviour, more than the comparator of 39%. However, the scheme was not yet sufficiently effective in promoting good behaviour, especially among basic level prisoners. The regime for these prisoners was poor and if they were not involved in activities, they were only out of their cells for 30 minutes a day (see paragraphs 3.1, 3.2 and 3.3). Many remained on the basic level for long periods without support or the opportunity to demonstrate that their behaviour had improved. The enhanced unit on C wing was a positive environment which provided a meaningful incentive for prisoners; all prisoners on C wing were working and had good time out of cell (see paragraph 3.1).

## Adjudications

- I.17** There had been a decrease in the number of adjudications from 2,481 to 1,527 since our previous inspection. It followed a concerted effort to ensure other behaviour management mechanisms were employed before using adjudications. Adjudication hearings took place in meeting rooms across the wings because the segregation unit was closed (see paragraph I.25). Hearings were conducted fairly and we saw good examples of impartial chairing. Hearings were now digitally recorded, which allowed a more meaningful and mutual exchange to take place between prisoners and adjudicators, who were no longer required to write contemporaneous accounts.

## Use of force

- I.18** Use of force was low compared to similar prisons. Although recorded incidents had risen since the previous inspection, this was due partly to much more rigorous recording. More use of force reports were being completed by staff and the standard of reports had improved. A robust monitoring system was also in place. There was no backlog during the inspection. Footage of planned interventions showed good de-escalation, which often led to the prisoner's compliance without resorting to force.
- I.19** The introduction of body-worn video cameras had been embedded well and we saw de-escalation techniques being used. We also saw prisoners being removed from high-risk restraint holds at the earliest opportunity. However, in a small number of cases holds were not being applied correctly and not all weaker practice had been identified through the quality assurance process. A new incident grading system was a promising initiative – it enabled staff to identify and better understand the seriousness of incidents and to target resources proportionately. In the previous six months, special accommodation had been used on three occasions for short periods of no more than a few hours. Use of the accommodation was justified by the prisoner's behaviour and properly authorised.

## Segregation

- I.20** The use of segregation had decreased since our previous inspection, and remained lower than at similar category C prisons. We were pleased to see the austere segregation unit had been closed pending refurbishment. In the meantime, four cells had been cordoned off on A-wing and were used as a temporary segregation unit. The cells were maintained to a good standard. Staff were decent, respectful and helpful. Segregated prisoners were positive about how they were treated. Governance of segregation was good. Segregated prisoners had their cases reviewed regularly and the length of time they spent there was reduced if their behaviour improved. We did not find any prisoners who were segregated for prolonged or unjustified periods. They had access to a reasonable daily regime, which included exercise, showers and phone calls; they could also use a library.

## Security

### Expected outcomes:

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

- I.21** Strategic oversight of security was generally good. Up-to-date threat assessments were undertaken, but some key departments did not regularly attend monthly security meetings. The prison had implemented a broad range of security measures to bring greater stability and control. The action taken was proportionate to presenting risks, although some was not consistent with the resettlement role of the prison. For example, release on temporary licence had been suspended because of evidence that it was linked to drugs entering the prison. While senior managers were clearly concerned about the impact of such measures on prisoners, we found no documented evidence that there was a careful and ongoing review of them to ensure proportionality.
- I.22** The flow of intelligence into the security department was good; an average of 678 intelligence reports were submitted each month, more than at the previous inspection and compared with similar prisons. The standard of reports was reasonable and they were analysed promptly and shared effectively with relevant departments through a daily security briefing.
- I.23** In the previous six months, intelligence-led searches had uncovered 32 mobile phones, 20 drug packages and other illicit items, such as improvised weapons and mobile phone accessories. Although most requested cell searches were completed (85%), the response to intelligence in other areas was not sufficiently robust.
- I.24** In the previous six months, 263 suspicion drug tests had been requested, but only 118 (45%) had been completed. There was a positive rate of 49%, but few referrals were subsequently made to available drug services. Those found guilty following mandatory drug testing (MDT) or suspected of using new psychoactive substances (NPSs)<sup>8</sup> were not being referred to substance use services; managers addressed this oversight during the inspection.
- I.25** In our survey, 30% of prisoners said it was easy to get illegal drugs, fewer than at similar prisons (50%). The prison had taken steps to reduce the drug supply, for example, by reinforcing physical security through additional netting and CCTV coverage, carrying out

<sup>8</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.

targeted staff searches and routinely using a scanning machine to detect illicit substances impregnated in items of post. Between August 2018 and January 2019, of those prisoners randomly tested for drugs, including NPSs, the positive rate was 15%. These figures were significantly lower than at our previous inspection. Drug testing facilities were reasonable.

- I.26** Corruption prevention work was good and well promoted among staff. The department received about 100 relevant incident reports a month and had identified a number of corrupt staff who had been dismissed. While joint work with the police was improving, too many police referrals were outstanding, in some cases for lengthy periods.
- I.27** Escort risk assessments were completed efficiently and handcuffing was proportionate in the cases seen. Only two prisoners were on closed visits during the inspection compared with 57 during the previous inspection. The restriction was now only imposed for offences related to visits and was subject to regular review, including with a member of the Independent Monitoring Board.

## Recommendations

- I.28** **The suspension of release on temporary licence to reduce the drug supply should be subject to regular and documented review to ensure that it remains proportionate.**
- I.29** **The MDT programme should be adequately resourced so that the required level of target testing is completed and all requested suspicion tests are undertaken within required timeframes.**

## 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.30** Recorded incidents of self-harm in the previous six months were lower than at similar prisons, and a few individuals were responsible for multiple incidents. There had been no self-inflicted deaths since our previous inspection. A number of incidents had required hospital treatment, but none had been life-threatening or sufficiently serious to warrant an overnight stay.
- I.31** A newly developed safer custody strategy focused on identifying risks at an early stage and delivering effective interventions. A monthly safer custody meeting, which included senior managers and prisoner representatives, provided strategic oversight and allowed Listeners to have their views heard. Data monitoring and analysis identified trends and helped focus efforts. Agreed action was monitored and mostly followed through within a reasonable timeframe, but measures that had been implemented were not always recorded in the minutes.

- I.32** A weekly safety interventions meeting enabled staff to share information and plan action to support prisoners at risk. Action agreed was generally suitable and monitored to ensure delivery.
- I.33** In the previous six months, the number of assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm opened was similar to comparable establishments. The standard of documents had improved since the previous inspection; about a fifth were better than we usually see. Multidisciplinary reviews were conducted within required timescales and care maps were adequate. However, there was evidence that not all interventions were delivered before the ACCT case was closed.
- I.34** Observation records demonstrated that meaningful interactions took place between staff and prisoners, and the quality assurance process was good. In our survey, 65% of prisoners who had been on an ACCT said they had felt cared for, as did those we spoke to, and staff managing ACCTs knew the prisoners in their care well. Most staff had been trained in suicide and self-harm awareness, although awareness of self-harm triggers was less well embedded. Distraction packs were good and contained puzzles and playing cards.
- I.35** The prison had an adequate number of trained Listeners, although some told us they found it difficult to get to other wings for follow-up visits. Prisoners valued the Brixton Men's Club, where they could meet and discuss their concerns. It was designed to help prisoners manage anxieties on the induction wing and could have been extended to other areas.
- I.36** There were two constant supervision cells in residential units and a third was to be available in the segregation unit once it had been refurbished. The existing cells were rarely used – four times in the previous six months – but they were bare and unwelcoming and did not offer a therapeutic environment for those at risk of self-harm. The prison did not have a crisis suite for prisoners who needed more care and support.

### Protection of adults at risk<sup>9</sup>

- I.37** Links with the Lambeth Safeguarding Adults Board had been re-established. The head of safer custody was now a member of the board and attended meetings. A safeguarding policy was in place, although not all staff were aware of the process for making referrals. In the previous six months, one referral had been made to the board for an adult at risk on their release.

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<sup>9</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).



## 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, 72% of men said staff treated them with respect and 78% (compared to 61% at the previous inspection) said they had a member of staff to turn to. Fifty-three per cent said a member of staff had talked to them about how they were getting on in the previous week, compared with 20% last time and 29% in similar prisons. We observed mixed staff interactions with prisoners – some were proactive, but other staff kept a distance and were less confident.
- 2.2** The prison was fully staffed. Sixty-three per cent of staff were within their first 12 months in post. Most new staff we spoke to said they had been reasonably well supported, but the standard of staff mentoring was not consistent. All prisoners had an assigned keyworker and most of those we spoke to on wings had met with them. A very detailed and helpful handbook had been produced to help keyworkers carry out and improve the standard of their work; another handbook specifically for those working with those who had committed sexual offences was also available. Keyworker case note entries on P-Nomis (the Prison Service IT system) were mostly good, but there was evidence that interactions with more challenging prisoners were less effective. A quality assurance system was in place and 10% of random entries were checked every week. Feedback was passed on to the keyworker. HM Prison and Probation Service's Offender Management in Custody<sup>10</sup> national implementation team had shared the Brixton approach to key working widely as an example of good practice.
- 2.3** Some positive initiatives were in place to promote a rehabilitative culture. They included prisoners meeting newly appointed staff to tell them about their experiences and concerns.

### Good practice

- 2.4** *Detailed staff handbooks provided a step-by-step guide to key working and supported staff to deliver more effective key work sessions so that they could provide prisoners with better support.*

<sup>10</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 (POMs) is being introduced gradually, from 2019.

## Daily life

### Expected outcomes:

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

### Living conditions

- 2.5** The outside areas of the prison were reasonably clean and tidy, but there was an ongoing problem with rats. A significant rolling programme of refurbishment was taking place. Cells were being fitted with new wooden bunk beds and furniture, floors were being painted and screening around toilets and on windows was being installed. An ongoing maintenance project was also in place to keep window grilles free of rubbish with a good degree of success. Despite this, many cells remained in a poor state of repair and had broken chairs and cupboards. Some cells accommodating two prisoners only had one chair and lacked sufficient storage space and we saw bags of clothes being stored under beds. In-cell toilets had seats, but some still lacked adequate screening, as did the showers. Far too many cells designed for one person were still holding two (around 60%) and conditions were unacceptably cramped for many (see main recommendation S44). Some communal areas were grubby and shabby. An offensive displays policy was in place, and there was little visible graffiti on the wings.
- 2.6** Men could wear their own clothes, have a shower every day, obtain cleaning materials and use the wing laundry every week. In our survey 79% of prisoners said they had access to clean sheets every week which was better than at other prisons and at the previous inspection (64%).
- 2.7** Cell bells that rang for over five minutes without being answered were monitored every day, and trends were established following analysis. Managers were aware that the greatest number of occurrences were on A wing, usually during free-flow time (during which prisoners are allowed to move about the prison unescorted), medication administration times and the start of visiting times. This indicated that the cell bell was being used to ask to be unlocked rather than in an emergency. In our survey, 40% of men said their bell was answered within five minutes, compared with only 14% at the previous inspection.

### Recommendation

- 2.8 All showers should be clean, well maintained and screened to provide full privacy.** (Repeated recommendation 2.10)

### Good practice

- 2.9** *Managers monitored cell bell response times every day. By analysing this data, managers identified the time and location of cell bells that were not answered promptly and addressed the delays.*

### Residential services

- 2.10** Prisoners were extremely positive about the food. In our survey 86% said it was good compared with 39% in similar prisons, and most prisoners we talked to said the food was a

significant positive. The menu was better than we normally see and a good range of hot meals was provided at lunch and dinner time, even though spending per prisoner was about the same as at other prisons. Specialist diets were catered for. The wing serveries and main kitchen were clean.

- 2.11** The catering manager was responsive to prisoners' views and took robust action following feedback. A food survey was conducted in 2018 and a detailed analysis of the results undertaken. A monthly food committee meeting was held, during which menu issues and preferences were raised.
- 2.12** In our survey, 74% of prisoners said they could buy most things they needed from the shop list, compared to only 36% at the previous inspection. Prisoners could also order clothing and other items from an extensive range of catalogues.

### Good practice

- 2.13** *In our survey, 86% of prisoners said that the food was good or very good, an exceptionally positive result. Despite receiving no more funding than other similar prisons, a dynamic and skilled catering manager, who was responsive to prisoners' feedback, delivered consistently high-quality meals, significantly improving prisoners' quality of life.*

### Prisoner consultation, applications and redress

- 2.14** Consultation was extensive and all levels of management facilitated it. A well-attended monthly prisoner council meeting, chaired by the head of residence, covered topics, such as the regime, catering, offending behaviour courses and pay. Prisoners wrote up the minutes, which showed there had been some helpful outcomes, such as an improvement in the application process and a clarification of how offender management information was shared with prisoners. There was also a monthly governor's surgery on each wing, where the head and/or deputy head of residence met with prisoners for 10 minutes to discuss any residential issues. Custodial managers also convened monthly wing consultation meetings with prisoners, and two forums had been held to look at equality.
- 2.15** In our survey, 67% of respondents said it was easy to make a complaint, significantly better than at the previous inspection (49%), and 35% said complaints were dealt with fairly (19% previously). There had been 1230 complaints in the previous six months, of which about 80% had received a prompt response. A quality assurance system was in place, and responses we looked at were generally very polite and addressed the issue. Complaints were also a standing agenda item at the prisoner council meeting. There were complaints boxes on the wings, but they did not all have a good supply of forms, although on some wings forms could be obtained from the prisoner information desk (PID).
- 2.16** PID workers managed the applications process well – they logged all applications submitted and the date of the response. Most applications received a swift response, many on the same day they had been submitted. The PID workers were managed by the deputy head of residence who met with them every two weeks.
- 2.17** A reasonable range of legal textbooks was available in the library. While prisoners did not have Access to Justice laptops (which enable those who are eligible to progress legal proceedings), prisoners had the use of two computers to type legal correspondence and conduct research, and staff printed material out for them. The Prisoners' Advice Service held an occasional surgery on rights, conditions of imprisonment and prison rules. There was also a video link facility for court hearings.

## 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

- 2.18** The management of equality and diversity had significantly improved since the previous inspection. A full-time equality officer was beginning to make an impact. The new equality strategy and policy were good and the monthly diversity and equality action team meeting monitored an action plan. Equality monitoring data had been considered at some meetings in 2018, but not routinely. Areas of concern were not followed up sufficiently (see paragraphs 2.24, 2.27 and 2.30).
- 2.19** The prison had organised a number of groups for prisoners from minorities, which had given staff a better understanding of their needs. However, the meetings were not yet being held regularly. Events, such as Black and LGBT history months, were celebrated (see also paragraph 2.29).
- 2.20** The prison had raised the profile of the system for reporting discrimination incidents and more discrimination incident reporting forms (DIRFs) had been received in 2018 than in previous years – on average eight a month. However, overall, responses were poor, even though external independent bodies undertook quality assurance.
- 2.21** The four prisoner equality representatives had received training and were active in their role but did not meet as a group. About 40% of staff had received half a day's training in equality and diversity. Those who had received it considered it useful.

### Recommendations

- 2.22 Managers should scrutinise equality monitoring data regularly. Areas of possible discrimination should be thoroughly investigated and robust action taken to address any disadvantages.**
- 2.23 DIRFs should be thoroughly investigated and subject to effective quality assurance.**

### Protected characteristics

- 2.24** Black and minority ethnic prisoners made up about half the population. Most prisoners we spoke to said staff did not discriminate against them. However, data from the equality monitoring tool showed that black and mixed-race prisoners were more likely to face an adjudication charge than white prisoners. The prison had not adequately explored or addressed this issue.

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

- 2.25** The Irish Council for Prisoners Overseas and the Irish Chaplaincy had facilitated two forums for those from the Gypsy, Roma and Traveller community. They had raised a number of concerns, but there was no evidence that they had been followed up.
- 2.26** Fifty foreign national prisoners were held during our inspection, including one detained beyond the end of his sentence. Those we spoke to told us that telephone interpretation was used when it was requested and that they could see Home Office immigration enforcement officers, who visited every week. They could make a free five-minute phone call to their family abroad in lieu of visits. Overall, the treatment of most was reasonable, but there was no forum for them and little targeted provision to meet their needs.
- 2.27** Almost a quarter of the population were Muslims. Equality monitoring data suggested Muslims were more likely to be on the basic level of the incentives and earned privileges (IEP) scheme and to face an adjudication charge than other prisoners. In our survey, fewer Muslims (58%) than non-Muslims (85%) said their visitors were treated with respect and fewer Muslims (29%) than non-Muslims (62%) said they would report victimisation by staff. Two forums had been held for Muslim prisoners, but no action had been taken as a result.
- 2.28** The prison did not have complete information on prisoners with disabilities, and could not tell us how many there were. In our survey, a third of prisoners considered themselves to have a disability. Wing staff could not locate prisoners' personal emergency evacuation plans (PEEPs) and staff could not show us care plans for disabled prisoners. While we saw some adjustments to cells on G wing, such as grab-rails beside toilets and beds, we found no adjustments on other wings. On G wing, where many disabled prisoners were located, only one cell was on the ground floor, and there was no stair lift to the other floors. The prison had secured social care from Lambeth social services for one prisoner on G wing (see paragraph 2.56).
- 2.29** LGBT prisoners said staff generally treated them with respect. Their needs were well catered for. During LGBT month, uniformed staff wore a rainbow epaulette and non-uniformed staff wore Brixton LGBT wristbands. LGBT prisoners appreciated the gesture of support.
- 2.30** Equality monitoring data suggested younger prisoners were over-represented on the basic level of the incentives and earned privileges scheme, as well as among those facing an adjudication charge and being found guilty. As with other groups, they had no forums or other targeted provision.
- 2.31** About 19% of prisoners were aged 50 or over – the oldest prisoner was 83. Provision for older prisoners had improved since our previous inspection and their needs were reasonably well met. They valued their designated room on G wing. The gym ran activities for older prisoners, such as walking football, bowls and seated aerobics.

## Recommendation

- 2.32** **Prisoners with disabilities should be identified on arrival and provided with reasonable adjustments, care plans and evacuation plans as necessary.**

## Faith and religion

- 2.33** Faith provision was good. A full-time Anglican chaplain had been recruited and the team was now at full capacity. All faiths were now covered either by a full-time or visiting chaplain. Religious services were available for the main faiths and there were prayer and study

meetings throughout the week. Prisoners reported generally good access to worship and religious education.

- 2.34** Pastoral care was strong. When a prisoner's relative was seriously ill or had passed away, the chaplaincy liaised with the family and arranged trips to the hospital or attendance at funerals. The chaplaincy ran the Sycamore Tree programme to promote victim awareness, but it had only run once in 2018 because of staffing issues. Three courses were scheduled for 2019 for up to 20 prisoners at a time.
- 2.35** Chaplains saw all new arrivals on B wing within their first 24 hours, and visited the segregation unit every day. The coordinating chaplain was a member of the senior management team and attended all key prison meetings. The chaplaincy maintained good links with outside religious and voluntary groups, including those that helped resettle prisoners.
- 2.36** Faith facilities, including a large chapel, were reasonable, although they were all upstairs, potentially hindering access.

## 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.**

- 2.37** 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.

### Strategy, clinical governance and partnerships

- 2.38** Care UK was the prime provider of health care services and Barnet, Enfield and Haringey Mental Health NHS Trust (BEH) was subcontracted to deliver primary and specialist secondary mental health services. Interagency working was impressive and an integrated approach to health delivery had been established. Integrated governance arrangements held providers to account, but there had been a six-month gap since the last local partnership board meeting. A recent health needs analysis had been undertaken.
- 2.39** Feedback about patients' experiences of services was actively encouraged. The head of health care organised wing-based forums where prisoners were able to challenge the way services were delivered. There was a clear mechanism for reporting incidents, which staff we spoke to understood; lessons were learned and informed practice.
- 2.40** Clinical and managerial leadership arrangements were robust and we saw evidence of senior staff spending time on the wings to observe and interact with prisoners. Nurses worked from 7.30am to 6.30pm Monday to Friday and 8.30am to 6pm at the weekend. The health care department relied on agency cover, but outcomes for patients had not been significantly affected and many vacant posts had now been filled. Overall, we found staffing levels and the skills mix met most needs.

<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>.

- 2.41** Training, and professional development opportunities were generally good, and although staff told us they received good support, management and clinical supervision arrangements were not sufficiently embedded, particularly in the primary care team. Clinical records we reviewed described interventions and clinical contact well, and we observed patients being treated with dignity and respect.
- 2.42** The health care centre and main waiting area needed redecorating and refurbishment. Wing treatment areas were also run-down and hard to keep clean; they did not comply with infection prevention standards.
- 2.43** Arrangements for dealing with medical emergencies were sound. Nursing staff were trained to deliver immediate life support and had access to suitable equipment. Custody staff we spoke to knew how to access support, including how to call for external emergency services, and the vast majority had received first aid training.
- 2.44** The response to health complaints was generally reasonable, but there was no quality assurance process.
- 2.45** The CQC found there were no breaches of the relevant regulations.

### Recommendation

- 2.46** **Treatment rooms should comply with infection prevention and control standards.**

### Promoting health and well-being

- 2.47** Care UK had introduced a holistic approach to prisoner well-being, which underpinned all health activities. Prisoners received a comprehensive information booklet on arrival. Health promotion material was displayed throughout the prison, and prisoners participated in awareness campaigns. Barrier protection was not widely available, but this was addressed during the inspection.
- 2.48** Access to most health checks and screening programmes was satisfactory, but the sexual health clinic was oversubscribed and the waiting list for smoking cessation support was too long.
- 2.49** The excellent health trainer and peer mentoring programmes run by the charity Certitude were now part of the well-being model and provided patients with valuable support. Initiatives such as remedial gym sessions and a new chair exercise class encouraged those with restricted mobility to be active.

### Recommendation

- 2.50** **Support for prisoners should include timely access to sexual health advice and smoking cessation support.**

## Primary care and inpatient services

- 2.51** Reception health screening was thorough, enabled staff to identify issues early on and offer access to a specialist health professional if clinically indicated. Follow-up secondary screenings were offered to all patients.
- 2.52** Prisoners could make written applications for a health care appointment or directly approach staff with their health concerns. Wing-based nurses and pharmacy-led triage clinics provided patients with timely access to health care support. In addition, a range of accessible clinics ran from the health care centre, although podiatry, spirometry and bowel screening services had long waiting times. The GP provided 10 sessions a week and patients were seen promptly. Non-attendance rates were low and we saw senior staff undertaking outreach to prisoners who failed to attend appointments. Prisoners were not systematically advised of appointment slots until the day of the appointment and they were sometimes unsure about why some follow-up appointments had been made. We observed clinically effective and positive interactions with prisoners when they attended the health care centre.
- 2.53** The health care team adopted a pragmatic and effective approach to chronic disease management and a practice nurse, supported by the GP, oversaw care. Access to external specialist input was good. However, local care plans were too generic and some review dates had been rescheduled. A multi-professional complex case clinic, ran every week and was attended by senior managers and professionals to discuss and review patients with challenging needs. A lead professional was assigned to each case, which was positive.
- 2.54** Access to routine external hospital appointments was good and there was little evidence of any curtailments due to prison demands. An excellent pre-release clinic ensured patients with ongoing needs received effective support, and all prisoners were offered a physical health check regardless of whether they had accessed health care during their stay.

## Recommendation

- 2.55 Prisoners should have timely access to all primary care and screening services.**

## Social care

- 2.56** Lambeth local authority was responsible for the delivery of social care, and although a memorandum of understanding had been drafted with the prison, it was still unratified. Prison staff identified referrals, but no data was available about the number of assessments or their outcomes. Care UK reviewed all prisoners over the age of 60 and screened prisoners at reception. Personal care requirements had been identified for one individual and a full-time health care assistant ensured his needs were being met.

## Recommendation

- 2.57 A memorandum of understanding between the prison and local authority should determine a pathway from assessment to the delivery of personal care.**

## Mental health care

- 2.58** A holistic health and well-being model had been introduced at the prison, which was addressing the high demand for mental health support. It involved coordinating and



prioritising prisoners' mental health needs to improve access and patient outcomes. A well-being coordinator organised meetings every day except Monday to assess and allocate referrals to the most appropriate service. The Awareness Centre (TAC) (which provides counselling and psychotherapy), BEH and The Forward Trust (a crime and addiction charity) routinely attended the meetings. This ensured effective support was provided to over 130 referrals a month through an integrated and responsive approach to care.

- 2.59** BEH delivered most primary care support and specialist services. They ranged from facilitated self-help, psychological interventions through to complex case management. The team employed nurses, an occupational therapist and psychologists and received regular input from a consultant psychiatrist. BEH staff also responded to crises through a duty worker system, for example by attending all initial ACCT reviews.
- 2.60** BEH had a caseload of about 125, and 34 prisoners experiencing enduring and severe mental health problems were managed under the care programme approach (mental health services for individuals diagnosed with a mental illness). A clinical psychologist oversaw a neuro-developmental pathway (for those with conditions such as learning difficulties, autism and spectrum disorders, and brain injury), which assisted a small number of prisoners with a learning disability or other developmental problems, through agreed support plans.
- 2.61** The TAC team offered an extensive and impressive range of individually tailored counselling support and psychological interventions for conditions such as anxiety, depression and post-traumatic stress disorder for about 40 patients. Waiting times for services were short. Group work was limited, although the prison had started to develop it. D wing provided effective well-being support (see paragraph 2.66). Care was coordinated effectively across all health partners, and clinical records reflected regular contact.
- 2.62** Relationships with the prison were positive and most prison staff had undertaken mental health awareness training. Pre-discharge support was good and there was evidence that staff liaised effectively with community teams to ensure prisoners received ongoing support. Patients who needed to be moved to hospital under the Mental Health Act were transferred promptly.

## Good practice

- 2.63** *The health and well-being model delivered an integrated and responsive approach to care, which provided effective support to over 130 prisoners a month.*

## Substance use treatment<sup>13</sup>

- 2.64** The prison had developed a more strategic approach to reducing the drug supply and demand, but there was still a lack of joined-up working to support prisoners testing positive under mandatory drug testing or suspected of psychoactive drug use.
- 2.65** The Forward Trust provided psychosocial interventions to 277 clients (37% of the population). The service was well advertised on the wings, and a peer supporter offered induction input. New referrals were assessed within five days and allocated to a practitioner or service at daily health and well-being meetings. There was no waiting list for one-to-one work, but a lack of group work facilities meant prisoners on G wing could not access substance use awareness, family ties or well-being workshops. Self-help groups, such as

<sup>13</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).

Narcotics Anonymous, Alcoholics Anonymous, Cocaine Anonymous and Self-Management and Recovery training were largely restricted to D wing.

- 2.66** D wing now provided both drug recovery assistance and support through the health and well-being unit, and all 47 prisoners had signed up to compact-based drug testing (where the prisoner signs an agreement on drug testing). The six-month long abstinence-based Substance Dependent Treatment Programme was still running in the unit, but prisoners whose methadone doses had been reduced and who required mental health support could now also be located on D wing. There they could participate in a wide range of well-being groups and activities and benefit from the unit's therapeutic ethos and sense of community.
- 2.67** Care UK provided clinical substance use services. Care for prisoners requiring opiate substitution therapy was flexible, patient-focused and well-coordinated. During the inspection, 52 patients were prescribed methadone or buprenorphine (heroin substitutes), and clinical and psychosocial staff jointly undertook monthly treatment reviews. All three substance use nurse posts were filled by agency staff, but pharmacy and advanced nurse prescribers offered weekly review clinics, which was positive. A substance use consultant psychiatrist also provided specialist input and held clinics for those with complex needs, including pain management issues. They also offered policy guidance and staff training. Care for patients with drug and mental health problems was well managed.
- 2.68** Substance use staff linked effectively with local community agencies so that treatment could continue on release, and prisoners consistently received harm reduction information pre-release. However, training on overdose management and the use of naloxone (a drug to manage a substance use overdose) was still not available.

## Recommendation

- 2.69** **Training on overdose management and access to naloxone on release should be provided.**

## Medicines optimisation and pharmacy services

- 2.70** Pharmacy services were provided on site. Medicines were supplied promptly and stored securely. Medicines, including controlled drugs, were delivered to the front gate and collected by pharmacy staff. Staff had no radio but had to walk through the health care waiting area with the drugs, although officers were always present. Medicines were transported in lockable containers to wing treatment rooms at times when prisoners were secured in their cells. Medicines requiring refrigeration were stored in medical fridges and monitored daily, although records showed maximum temperatures exceeded 8°C in several locations without prompting remedial action.
- 2.71** Staffing was appropriate and both pharmacists were independent prescribers. Prisoners had access to a range of vaccinations and over-the-counter medicines and supplies were recorded on SystemOne (the electronic clinical information system). There were several helpful pharmacy-led clinics on the wings, including those for minor ailments, substance use support and smoking cessation.
- 2.72** About 70% of prisoners had their medicines in possession, subject to a risk assessment. Prisoners could ask to have secure storage in their cells for their medicines. Nursing staff administered medicines, including controlled drugs, from wing treatment rooms. The supervision and management of queues during medicine administration that we observed was

mostly adequate, but not consistent on all wings, increasing the risk of medicines being diverted.

- 2.73** Medicines were administered twice a day, and night-time doses were provided in-possession during afternoon administration once the prisoner had been risk assessed. We found some medicines that were not provided in clinically appropriate doses. They included co-codamol at 30mg/500mg twice a day, which might not have achieved the desired pain relief, and low doses of mirtazapine (an anti-depressant) being prescribed to aid sleep. Possible alternatives, including planned sleep support clinics, were being explored. Medicine administration and supplies were appropriately recorded, although the pharmacy was not consistently informed when a patient missed multiple administration sessions.
- 2.74** Governance and oversight of medicines was effective. One pharmacist chaired the medicines management monthly meeting. The agenda included: a review of medicine incidents and trends; prescribing patterns, such as high-risk medicines; abusable medicines; safety indicators; and lessons learned from other prisons.

## Recommendation

- 2.75 Medication administration should be consistently and adequately supervised by prison staff, to ensure privacy and compliance, and reduce the risk of bullying and diversion.** (Repeated recommendation 2.65)

## Good practice

- 2.76** *Pharmacy clinics on the wings gave prisoners access to a flexible range of prompt and effective treatments.*

## Dental services and oral health

- 2.77** A full range of NHS dental treatments was available. Waiting times for an appointment and ongoing treatment were short. Most prisoners we spoke to confirmed care was good once they had secured an appointment. Appointments were ring-fenced for acute problems. All dental equipment had been serviced and maintained appropriately. However, we found the washer disinfectant had not worked since December 2018, and a dispute between agencies about who was responsible meant it had still not been fixed. The problem had been logged as an incident. Patient safety was not compromised because manual disinfection was taking place, but the dental nurse was potentially at risk from sharps injuries as a result.

## Recommendation

- 2.78 The essential repairs to the washer disinfectant should be carried out expeditiously.**



## Section 3. Purposeful activity

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

### Time out of cell

#### **Expected outcomes:**

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

- 3.1 Most prisoners could spend a good amount of time out of their cells on week days. During our roll checks, only 9% of prisoners were locked up during the working day. The amount of time a prisoner had out of cell depended on their wing, their incentives and earned privileges (IEP) scheme level and their employment status. Time out of cell was particularly good on the enhanced wing (C wing). Fully employed prisoners on this wing were out of their cells for about 10 hours a day.
- 3.2 At the beginning of our inspection, 15 unemployed prisoners were on the basic level of the IEP scheme. These prisoners were only unlocked for about half an hour a day, which was unacceptable. To offset the problem, a member of staff met all 15 prisoners individually and encouraged them to take up employment. By the end of the inspection, work had been arranged for nine of the 15 prisoners.
- 3.3 Prisoners on the standard level of the IEP scheme on A and B wings spent too long in their cells at weekends. They were only unlocked for about two and quarter hours on Saturdays and Sundays. Other than collecting their meals, standard level prisoners on A wing were generally locked in their cells from 11.15am on Saturday until 2pm on Sunday. Again, this was unacceptable.
- 3.4 The regime usually ran as scheduled. When there were curtailments, delays were short. During the week, most prisoners had good access to exercise yards, which were in reasonably good condition and had exercise equipment (see Appendix III: Photos).
- 3.5 The library remained small and cramped, but access had improved since the previous inspection and was now good. It was open on Thursday evenings and Saturday mornings. In our survey, more prisoners (49%) than at our last inspection (13%) said they typically went to the library once a week or more. Prisoners could also help themselves to books from well-stocked cabinets on their wings. The relationship between Lambeth council, which ran the library and the prison was underpinned by a memorandum of understanding. The library was staffed by an enthusiastic qualified librarian and two prison orderlies. Seven prisoner representatives promoted the library on their wings.
- 3.6 The stock of over 8,800 books reflected the diverse backgrounds of the population and included black fiction, foreign language books and publications of interest to Gypsy, Traveller and Romany prisoners. The library helped run a good range of programmes to promote reading, including Turning Pages (a reading scheme delivered by peer mentors), Reading Ahead (where prisoners pick six books to read) and Storybook Dads (which helps prisoners to record a story for their children to listen to at home). The library also ran a monthly reading group with Roehampton Institute and a weekly Book at Breakfast Club. Events where prisoners could meet published authors were occasionally held.

- 3.7** Prisoners' access to physical education (PE) facilities was good. In our survey, 60% of prisoners said they went to the gym twice a week or more. Enhanced level prisoners could attend five times a week. The prison had two gyms with weights machines, free weights and cardiovascular equipment (see Appendix III: Photos). Nearly all the equipment was in good working order. Showers were in good condition in the larger new gym but in poor repair in the older smaller gym. Appropriate sessions for older prisoners and those with health issues included walking football, bowls and seated aerobics. Team sports were restricted to the small well-used all-weather pitch (see Appendix III: Photos). Work to replace the poor surface of the pitch was set to begin the week after our inspection. The PE department now ran accredited training, such as gym and fitness instructor and first aid courses. The prison worked with Fulham Football Club to deliver football coaching skills. The department did not have a well-equipped classroom where these courses could have been taught adequately.

## Recommendations

- 3.8 All prisoners, including those who are unemployed, should have sufficient time out of their cells to carry out domestic tasks and, in addition, have at least one hour of association every day.**
- 3.9 All standard level prisoners should be unlocked for domestic routines and association in the morning and afternoons at weekends.**
- 3.10 The PE department should have a suitable classroom where accredited courses can be taught. The classroom should be well-equipped with audio-visual equipment.**

## Education, skills and work activities (Ofsted)<sup>14</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>15</sup>**

- 3.11** *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>Requires improvement</i>
<i>Quality of education, skills and work provision, including the quality of teaching, training, learning and assessment:</i>	<i>Requires improvement</i>
<i>Personal development and behaviour:</i>	<i>Requires improvement</i>
<i>Leadership and management of education, skills and work:</i>	<i>Requires improvement</i>

<sup>14</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>15</sup> In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

## Management of education, skills and work

- 3.12** Education, skills and work required improvement, as did its leadership and management. The prison was properly staffed and ran a full regime, which was a significant improvement. Prison senior managers provided full-time and part-time activity places for about 90% of the population and most prisoners participated. About 90 prisoners were unemployed, which was approximately half the number at the previous inspection. However, prisoners working on the wings were under-occupied.
- 3.13** Prison leaders and managers were now working more closely with the education provider Novus and, as a result, relationships were positive and productive. The education curriculum broadly met the needs of most prisoners. Novus staff offered prisoners most courses at levels 1 and 2, but there were very few opportunities to progress to higher levels. Tutors continued to support about 20 prisoners following Open University and distance learning courses. Prisoners could participate in a narrow range of vocational training and work, which included the Clink restaurant and the Bad Boys Bakery. A good range of construction courses were offered and managed effectively. Managers had improved the education provision for vulnerable prisoners. However, prison managers provided a limited range of vocational training and meaningful work for the large number of vulnerable prisoners, who were mainly restricted to accredited horticulture and kitchen work. In our survey, only 24% of vulnerable prisoners found it easy to get into vocational or skills training, and only about half of those who were undertaking vocational and skills training thought it would help them on release (see main recommendation S45).
- 3.14** The quality of education and training provided by Novus required improvement. A new education manager had been appointed and had begun to manage the performance of staff more effectively. New staff were recruited, but it was too early to see any improvements in the quality of teaching and learning. During the inspection, it was clear to inspectors and Novus managers that the teaching and learning in some areas was weaker than in others and required improvement overall.
- 3.15** Prison leaders had restructured the management of learning, skills and work since the previous inspection and as a result, prison-wide quality assurance processes had stalled. Too few staff attended the quality improvement group meetings and they were no longer effective. Self-evaluation and quality improvement planning arrangements highlighted what was working well and what needed to improve further. However, managers did not focus enough on setting targets for improvement.
- 3.16** All prisoners received a well-planned induction to the prison and education, and most prisoners were allocated to an activity within a few days of induction. Prisoner representatives supported staff effectively. Prisoners received an initial assessment of their English and maths skills, where one was needed. Assessments informed the allocation process. Managers had changed the allocation process to ensure it was fair and equitable. The allocation process was robust and prisoners' attendance at activities was monitored rigorously. As a result, prison and Novus staff were informed promptly about the reasons for non-attendance; this was a significant improvement since the previous inspection.
- 3.17** Prisoners had to be qualified to at least level 1 in English and maths before they were allocated to an activity. Those who attended education or vocational training sessions were paid at a higher rate than those in other activities. This encouraged prisoners to participate in education. However, the education timetable did not allow prisoners to attend English and maths sessions in the same week and both courses lasted up to 10 weeks. This meant prisoners were slow to develop their skills because they had to wait to complete one programme before starting another.

- 3.18** Managers had forged very good links with employers and other agencies, such as local football clubs, which enabled prisoners to build up a range of useful practical skills, as well as develop their employability and interpersonal skills. Prison and Novus staff provided good informal careers advice and guidance. Prisoners had no access to the virtual campus (prisoner access to community education, training and employment opportunities via the internet) to help them look for jobs in the wider community.

## Recommendations

- 3.19** **The range of vocational training and meaningful work should meet the needs of all vulnerable prisoners.**
- 3.20** **Novus should raise the standard of teaching and learning to at least good and identify and share good practice.**
- 3.21** **The prison should have a cohesive approach to self-evaluation and quality improvement planning across all education, skills and work.**

## Quality of provision

- 3.22** The quality of teaching, learning and assessment required improvement. In education sessions teaching and learning was not consistently good across all subjects or levels. Teaching was effective in graphics, fashion and music and in a minority of English sessions on the vulnerable prisoner wing. In these subjects, prisoners made the progress expected of them. In entry level functional skills sessions, too much teaching was weak and tutors made inefficient use of the time in lessons, for example by taking too long to start activities. This hindered prisoners' learning and many became disengaged and bored.
- 3.23** Trainers in vocational workshops used their expertise and experience well to motivate prisoners and provide good teaching. Prisoners worked well individually as well as in pairs and small groups, particularly in the Clink restaurant and staff canteen, and in scaffolding. Prisoners who participated in vocational training and work developed relevant skills and understanding in learning sessions and at work. In horticulture, prisoners developed good skills in laying blockwork and produced hanging baskets to a good standard. In painting and decorating prisoners developed their employability skills in 'cutting in' and patching walls before painting.
- 3.24** Most tutors used qualified and experienced peer mentors and learning assistants effectively in sessions to support prisoners who needed extra help. For example, in English functional skills, mentors supported vulnerable prisoners to increase their confidence when they prepared for presentations. Peer mentors supported prisoners very effectively through the Turning Pages reading scheme (see paragraph 3.6). Many prisoners said they valued the help they received. In vocational training, instructors supported prisoners well to develop their maths skills, reinforcing topics through practical tasks, such as measuring walls to find out how many rolls of wallpaper or what quantity of paint were needed. However, insufficient structured support was available for prisoners with specific additional learning support needs.
- 3.25** Most prisoners in education received frequent and helpful feedback on their work. It enabled them to improve their work and deepen their understanding of the topics studied. In vocational training, trainers marked prisoners' work frequently. However, they did not always provide sufficient information on how they could improve. They did not systematically correct prisoners' spelling or grammar mistakes.



- 3.26** Tutors now set individual targets and used individual learning plans more effectively than at the previous inspection to identify prisoners' short- and long-term aims and to track prisoners' progress towards their qualifications. However, in too many cases in vocational training sessions, targets focused on completing tasks and units of qualifications and did not include personal development targets.
- 3.27** Equality and diversity were promoted well in education, for example, through displays and themed work. Learning sessions included references to tolerance and respect, and tutors confidently explored these areas with prisoners. In most vocational training, these values were less well promoted.

## Recommendations

- 3.28** **Managers should provide structured support for prisoners with specific additional learning needs.**
- 3.29** **Individual learning plans should show what prisoners need to do to improve their personal development.**

## Personal development and behaviour

- 3.30** Prisoners who attended activities generally arrived on time. In most classes in education, and particularly in English and maths, prisoners' attendance was low. Attendance at most vocational training sessions was good and often higher for vulnerable prisoners than mainstream prisoners. The majority of prisoners made reasonable progress in developing their skills and achieving their qualifications.
- 3.31** In education, most prisoners were motivated, took pride in their work and behaved well. However, tutors and trainers seldom challenged low-level disruption in learning sessions.
- 3.32** Validated data from the community rehabilitation company showed that over the previous six months, approximately 50% of prisoners released from Brixton entered education, training or employment.

## Outcomes and achievements

- 3.33** Prisoners' outcomes and achievements required improvement. Retention continued to be very high and most prisoners who completed their courses, achieved their qualification. Prisoners' achievements in cleaning services, horticulture, level 1 in information technology web software and level 1 in food preparation, as well as on most personal and social development courses were high.
- 3.34** Prisoners' achievements in construction, graphics and media, and information, advice and guidance at level 1 were low. In English at levels 1 and 2 and maths at level 1 they were too low and had not improved since the previous inspection. There were no noticeable variations in achievements for different groups of prisoners.
- 3.35** Prisoners developed good skills and produced high standards of work in the Clink restaurant and in the Bad Boys Bakery. Prisoners produced good standards of practical work in fashion and graphics. Those on Open University courses produced good written work.

## Recommendation

- 3.36 Prisoners should attain English and maths qualifications so that they can progress to the next stage of their education and into employment.**

## 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 A full-time family engagement worker employed by the Prison Advice and Care Trust (PACT) helped prisoners to maintain and renew contact with their families and children, and had a caseload of over 80. PACT also ran three courses to help prisoners improve their relationships with partners, families and children. There had been nine courses over the previous 12 months. About 100 prisoners had signed up for them, although only about 50 had completed them. Feedback from participants was very positive. In our survey, 48% of prisoners said that staff encouraged them to keep in touch with family and friends, more than at similar prisons (26%).
- 4.2 The provision for visits was generally good. Visitors said it was straightforward to book a visit online or by phone, and that visits starting late were normally extended. Visitors were processed through the visits hall efficiently and respectfully. The visitors' centre was cramped and in poor condition, but we saw plans for a new facility.
- 4.3 The visits hall was bright and in reasonably good decorative order. It had colourful, comfortable seating. Closed visits booths still had no privacy screening. A good range of hot and cold refreshments was available.
- 4.4 Staff supervised the visits we observed effectively but unobtrusively and there was a relaxed atmosphere. Fathers could hold their children, and couples could hold hands. The play area was a reasonable size and had plenty of toys.
- 4.5 The prison ran family visiting sessions during which visitors, prisoners and their children could move more freely around the hall. Not all prisoners knew these sessions were available.
- 4.6 Those who were not on the enhanced level of the incentives and earned privileges scheme could only receive two one-hour visits a month, although the number of visiting days and slots had been increased.
- 4.7 In our survey, 92% of prisoners said they could use the phone every day. In addition, prisoners could use a prison voicemail service to listen to messages left by their families. As well as being able to receive letters, families could use the Email a Prisoner service. The prison printed out about 50 emails a day to give to prisoners.

## Recommendation

### 4.8 Prisoners should be able to receive a visitor at least once a week.

## Reducing risk, rehabilitation and progression

### Expected outcomes:

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

- 4.9** Strategic management of resettlement and reducing reoffending work was reasonably good. While some departments were poorly represented at the monthly reducing reoffending meeting, overall, joined up working was improving. The provision was informed by a needs analysis, but it had not been updated since 2017. A separate needs analysis that considered the needs of prisoners held for sex offences had been completed in 2018.
- 4.10** In our survey, only 45% of prisoners said they had a sentence plan, lower than the comparator of 58%. However, of those prisoners who said they had one, 62% (against a comparator of 43%) said staff were helping them achieve their objectives or targets.
- 4.11** The offender management unit (OMU) was well staffed during our inspection. The team consisted of five National Probation Service (NPS) offender supervisors, who managed high-risk cases, and nine prison offender managers (POMs) who managed medium- and lower-risk cases. They were all managed by a senior probation officer. The new POMs were mostly from non-prison service backgrounds and had received training before beginning their roles. POMs were mentored by probation staff and shadowing opportunities were available for development purposes; they also attended useful monthly group supervision sessions, although individual case supervision was limited. Supervision of probation staff themselves was not meaningful and took place infrequently, thereby limiting the quality assurance of the largely high-risk cases that they managed.
- 4.12** Key workers had regular and purposeful contact with prisoners and case records were detailed (see also paragraph 2.2). OMU staff had started running useful weekly surgeries on the wings to encourage prisoners to work with offender supervisors. A peer mentor helped prisoners book appointments and promoted the service. In the previous three months, 223 prisoners had used the service to support a variety of OMU functions, such as home detention curfew (HDC), housing support and categorisation. Prisoners we spoke to, found the service useful because it provided better access to their offender supervisors.
- 4.13** Caseloads for offender supervisors were high – about 50 to 60 prisoners were allocated to one offender supervisor. This restricted meaningful contact throughout many prisoners' sentences. This was a particular concern in light of the large number of sex offenders at the prison (see paragraphs 4.15 and 4.31). Most prisoners had a good level of contact with their offender supervisors at the important pre-release stage. In our sample of cases, prisoners who were released and assessed as high-risk of serious harm had thorough risk management plans.
- 4.14** In the three months before our inspection, 69% of prisoners had arrived at the prison with no offender assessment system (OASys) report. The number of prisoners held at the prison without an OASys report had increased since the previous inspection. The backlog affected the routine work of the OMU and hindered the ability of staff to manage risks and plan for prisoners' release in good time. The prison had developed a plan for escalating these concerns and was attempting to reduce the backlog. The senior probation officer and two

probation staff countersigned OASys reports and more members of staff were being trained to complete them.

- 4.15** During the inspection, approximately 215 prisoners were held for sex offences, 136 of whom had no time left to complete any treatment to address their offending behaviour. Fifty-two were awaiting a transfer to a different establishment to access treatment. Some sex offenders took part in group work or accredited offending behaviour programmes (see paragraph 4.31). However, although the prison made efforts to ensure that prisoners were assessed for treatment at the earliest opportunity and transferred to a treatment site as soon as possible, this did not happen every time. We saw evidence of some prisoners being released without having completed any intervention to address their offending behaviour (see main recommendation S47).
- 4.16** In the six months before our inspection, 211 applications had been made for home detention curfew (HDC), 131 of which had been approved. However, 76 applications were rejected because there were problems finding a suitable address on release. During our inspection, limited Bail Accommodation and Support Service (BASS) placements were available in London.
- 4.17** While HDC processes were mostly well managed, communication between the community rehabilitation company (CRC) and the OMU was inconsistent, and CRC staff were not always sure if the prisoner still required their assistance after an HDC refusal.
- 4.18** Since early 2017, senior managers had suspended release on temporary licence (ROTL) to improve the stability of the prison (see paragraph 1.21). We were told about the prison's plans to restart it in the future. However, during our inspection, prisoners who would have benefited from ROTL were unable to participate.
- 4.19** There were 30 indeterminate sentence prisoners (ISPs), 13 of whom were subject to a life sentence and 17 to an indeterminate sentence for public protection. All ISPs were managed by probation officer offender supervisors. Some received support through the London Pathways Unit (see section on the London Pathways Unit) or the health and well-being unit (see paragraph 2.66), and had access to a good regime and psychological interventions.
- 4.20** Some ISPs were transferred to Brixton to be in London while preparing for their release. Three lifer family days had taken place in 2018, which prisoners had found helpful. They assisted them in rebuilding relationships with their families. Monthly lifer meetings were also held for prisoners and staff. This enabled them to discuss any presenting issues for this population on a regular basis.

## Recommendations

- 4.21 All probation staff should receive regular, planned supervision to support case management.**
- 4.22 The CRC should be informed at the earliest opportunity when a prisoner's HDC application has been refused to ensure they are offered pre-release support.**

## Public protection

- 4.23** During the inspection, 22 prisoners were subject to mail monitoring and contact restrictions. This was a significant increase since the previous inspection and had created additional work for the prison. However, restrictions were proportionate and staff across other

departments, such as security, understood how they should be applied. Any changes in circumstances or new intelligence were discussed and managed at the monthly inter-departmental risk management team (IDRMT) meeting.

- 4.24** However, there were some weaknesses in public protection work. Not all relevant multi-agency public protection arrangement (MAPPA) cases were considered by the IDRMT; there was an over-reliance on offender supervisors to refer individuals for discussion. Some prisoners were also approaching release without their MAPPA levels having been set; 21 cases were listed as not yet having had their level set. During the inspection, managers addressed this problem by carrying out checks six months before release. A spreadsheet was used to manage all MAPPA cases. However, there were inconsistencies between the spreadsheet and records on P-Nomis (the Prison Service IT system), which meant some MAPPA information was out of date. There were 187 cases recorded as being managed at level 1 (the lowest risk level), 16 at level 2 (where the active involvement of one or more agency is required), and two at level 3 (the highest risk level).

## Recommendation

- 4.25 The IDRMT meeting should systematically oversee and manage MAPPA cases.**

## Categorisation and transfers

- 4.26** Re-categorisation decisions were generally prompt. However, it was not always clear from the paperwork if the prisoner had been invited to contribute to the process. In three cases in our sample, there had been no contribution from the offender supervisor. One refusal was based partly on an OASys report, which suggested that a prisoner had not made progress towards his sentence plan objectives, although the report was six months out of date and did not contain information based on an up-to-date assessment.
- 4.27** Five hundred and seventy-three re-categorisation boards had been held in the six months before our inspection and 33 prisoners had been granted category D status. Prisoners were usually transferred to open conditions swiftly. During our inspection, 26 prisoners were waiting for a transfer, although 10 were due to be transferred within two weeks.

## Recommendation

- 4.28 Prisoners and offender supervisors should be invited to contribute to decisions about categorisation and allocation.**

## Interventions

### Expected outcomes:

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

- 4.29** In 2018, 18 prisoners had completed two accredited offending behaviour programmes – Resolve (a cognitive-behavioural intervention for violent offenders) and the Thinking Skills Programme (TSP). Ongoing problems with recruiting programme facilitators meant fewer accredited programmes were due to take place in 2019. Prisoners considered suitable for accredited programmes could be transferred to another establishment to complete the intervention there.

- 4.30** Some non-accredited interventions were also available, including the Sycamore Tree programme, which promotes victim awareness, and Key4Life, a 12-month mentoring programme bridging custody and community.
- 4.31** There were insufficient interventions for the sex offender population. Some were assessed as unsuitable for accredited programmes and no alternative interventions were available at the prison for those in denial of their offences. In one case, a sex offender who had been sentenced to five years, was in denial of his offending behaviour and had not undertaken any sex offender programme work throughout his sentence.
- 4.32** The CRC provided a range of ‘through-the-gate’ services, but it was not fully staffed (see paragraph 4.38). In the previous six months, 44 prisoners had received help to set up a bank account. Prisoners were also provided with support to obtain a birth certificate. New CRC provision was due to start and would include a money management course. Jobcentre Plus offered benefits advice.
- 4.33** The CRC assessed prisoners’ housing needs and made referrals to a homelessness charity. During the inspection, there was one full-time and one part-time housing adviser. The service was well used and supported by a peer mentor. However, in the six months before our inspection, a general shortage of accommodation meant that 30% of prisoners were released with no fixed address. Staff did not track housing outcomes post release and there were no data on the long-term sustainability of the accommodation to which prisoners were released.

## Recommendation

- 4.34** **Post-release accommodation checks should clarify whether a prisoner has sustainable, long-term accommodation or temporary housing, and housing outcomes data should be used to determine the most effective interventions for prisoners.**

## Specialist units

### Expected outcomes:

**Personality disorder units and therapeutic communities provide a safe, respectful and purposeful environment which allows prisoners to confront their offending behaviour.**

### London Pathways Unit

- 4.35** The London Pathways Unit (LPU), a dedicated facility on A wing, catered for up to 36 prisoners. The service provided effective support for prisoners with complex personality difficulties as part of a structured approach to safer release planning.
- 4.36** A clinical psychologist led a team of forensic psychologists from Oxleas NHS Foundation Trust who coordinated the assessment of selected prisoners. They received support through a challenging and therapeutic regime that was tailored to meet individual needs, undertaking agreed programmes of one-to-one work and group activities. A group of committed prison officers supported prisoners on the wing. A consultant forensic psychiatrist from South London and Maudsley NHS Foundation Trust provided the unit with medical oversight and support. Each prisoner was required to work with a named officer, who had been selected and trained for the role and received regular supervision.

- 4.37** Prisoners participated in a range of intensive therapeutic and challenging work to help them address unhelpful patterns of behaviour and develop coping skills. Prisoners were not isolated on the wing and were expected to take part in the full range of prison services. Prisoners stressed the importance of peer support to help them participate effectively in the regime, and those we spoke to appreciated the opportunities the unit provided. The service continued to offer a critical and valuable level of support for a group of potentially high-risk prisoners.

## 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.**

- 4.38** The CRC team was based on C wing and, during the inspection, was not fully staffed. The team consisted of two full-time caseworkers and one manager. Two more caseworkers were due to be recruited. Staff were meant to contact prisoners 12 weeks before their release, but staff shortages meant it mostly occurred 10 weeks before. Nevertheless, the range of support available was good, and a reducing reoffending spreadsheet enabled staff across the prison to identify work that was being carried out with each prisoner to meet their resettlement needs. It enabled keyworkers and OMU and CRC staff to share casework information. The manager also quality assured casework every six weeks during supervision and observation.
- 4.39** The CRC was not yet fully embedded at the prison and not all staff or prisoners understood its purpose. However, CRC staff were beginning to attend strategic meetings to better integrate with other departments and promote resettlement services. In addition to the work carried out in the prison, 'through the gate' mentoring services provided prisoners with continued support in the community on release (see paragraph 4.32).

## Recommendation

- 4.40 All prisoners should have their resettlement needs assessed 12 weeks before their release.**



# Section 5. Summary of recommendations and good practice

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

## Main recommendations

To the governor

- 5.1** Prisoners should not be held in overcrowded conditions. (S44, repeated recommendation S45)
- 5.2** All cells should provide decent, hygienic and well-maintained conditions, including effective toilet screening and sufficient furniture. (S44)
- 5.3** All vulnerable prisoners should be able to participate in a range of vocational training and meaningful work to ensure they can attain useful skills for education, training or employment on their release. (S45)
- 5.4** Concerted regional action should be taken to ensure that all prisoners who need one have a complete and up-to-date OASys document. (S46)
- 5.5** All sex offenders, including those who deny their offences, should have access to a range of offending behaviour interventions. (S47)

## Recommendations

### Security

- 5.6** The suspension of release on temporary licence to reduce the drug supply should be subject to regular and documented review to ensure that it remains proportionate. (1.28)
- 5.7** The MDT programme should be adequately resourced so that the required level of target testing is completed and all requested suspicion tests are undertaken within required timeframes. (1.29)

### Daily life

- 5.8** All showers should be clean, well maintained and screened to provide full privacy. (2.8, repeated recommendation 2.10)

### Equality, diversity and faith

- 5.9** Managers should scrutinise equality monitoring data regularly. Areas of possible discrimination should be thoroughly investigated and robust action taken to address any disadvantages. (2.22)
- 5.10** DIRFs should be thoroughly investigated and subject to effective quality assurance. (2.23)

- 5.11** Prisoners with disabilities should be identified on arrival and provided with reasonable adjustments, care plans and evacuation plans as necessary. (2.32)

#### **Health, well-being and social care**

- 5.12** Treatment rooms should comply with infection prevention and control standards. (2.46)
- 5.13** Support for prisoners should include timely access to sexual health advice and smoking cessation support. (2.50)
- 5.14** Prisoners should have timely access to all primary care and screening services. (2.55)
- 5.15** A memorandum of understanding between the prison and local authority should determine a pathway from assessment to the delivery of personal care. (2.57)
- 5.16** Training on overdose management and access to naloxone on release should be provided. (2.69)
- 5.17** Medication administration should be consistently and adequately supervised by prison staff, to ensure privacy and compliance, and reduce the risk of bullying and diversion. (2.75, repeated recommendation 2.65)
- 5.18** The essential repairs to the washer disinfectant should be carried out expeditiously. (2.78)

#### **Time out of cell**

- 5.19** All prisoners, including those who are unemployed, should have sufficient time out of their cells to carry out domestic tasks and, in addition, have at least one hour of association every day. (3.8)
- 5.20** All standard level prisoners should be unlocked for domestic routines and association in the morning and afternoons at weekends. (3.9)
- 5.21** The PE department should have a suitable classroom where accredited courses can be taught. The classroom should be well-equipped with audio-visual equipment. (3.10)

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

- 5.22** The range of vocational training and meaningful work should meet the needs of all vulnerable prisoners. (3.19)
- 5.23** Novus should raise the standard of teaching and learning to at least good and identify and share good practice. (3.20)
- 5.24** The prison should have a cohesive approach to self-evaluation and quality improvement planning across all education, skills and work. (3.21)
- 5.25** Managers should provide structured support for prisoners with specific additional learning needs. (3.28)
- 5.26** Individual learning plans should show what prisoners need to do to improve their personal development. (3.29)

- 5.27** Prisoners should attain English and maths qualifications so that they can progress to the next stage of their education and into employment. (3.36)

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

- 5.28** Prisoners should be able to receive a visitor at least once a week. (4.8)

### Reducing risk, rehabilitation and progression

- 5.29** All probation staff should receive regular, planned supervision to support case management. (4.21)
- 5.30** The CRC should be informed at the earliest opportunity when a prisoner's HDC application has been refused to ensure they are offered pre-release support. (4.22)

### Public protection

- 5.31** The IDRMT meeting should systematically oversee and manage MAPPA cases. (4.25)

### Categorisation and transfers

- 5.32** Prisoners and offender supervisors should be invited to contribute to decisions about categorisation and allocation. (4.28)

### Interventions

- 5.33** Post-release accommodation checks should clarify whether a prisoner has sustainable, long-term accommodation or temporary housing, and housing outcomes data should be used to determine the most effective interventions for prisoners. (4.34)

### Release planning

- 5.34** All prisoners should have their resettlement needs assessed 12 weeks before their release. (4.40)

## Examples of good practice

- 5.35** A weekly induction fair allowed prisoners to obtain information, advice and support from a wide range of departments and prisoner representatives in a relaxed and engaging way. (1.10)
- 5.36** Detailed staff handbooks provided a step-by-step guide to key working and supported staff to deliver more effective key work sessions so that they could provide prisoners with better support. (2.4)
- 5.37** Managers monitored cell bell response times every day. By analysing this data, managers identified the time and location of cell bells that were not answered promptly and addressed the delays. (2.9)
- 5.38** In our survey, 86% of prisoners said that the food was good or very good, an exceptionally positive result. Despite receiving no more funding than other similar prisons, a dynamic and

skilled catering manager, who was responsive to prisoners' feedback, delivered consistently high-quality meals, significantly improving prisoners' quality of life. (2.13)

- 5.39** The health and well-being model delivered an integrated and responsive approach to care, which provided effective support to over 130 prisoners a month. (2.63)
- 5.40** Pharmacy clinics on the wings gave prisoners access to a flexible range of prompt and effective treatments. (2.76)

## Section 6. Appendices

### Appendix I: Inspection team

Peter Clarke	Chief Inspector
Hindpal Singh Bhui	Team leader
Bev Alden	Inspector
Colin Carroll	Inspector
Paddy Doyle	Inspector
Michael Dunkley	Inspector
Keith Humphreys	Inspector
Gordon Riach	Inspector
Fran Russell	Inspector
Kam Sarai	Inspector
Rebecca Stanbury	Inspector
Nadia Syed	Inspector
Sharlene Andrew	Researcher
Charli Bradley	Researcher
Becky Duffield	Researcher
Rachel Duncan	Researcher
Steve Eley	Lead health and social care inspector
Sigrid Engelen	Health and social care inspector
Andrea Crosby-Joseph	Care Quality Commission inspector
Nicola Carlisle	General Pharmacy Council inspector
Bob Cowdrey	Ofsted lead inspector
Jane Hughes	Ofsted inspector
Steve Lambert	Ofsted inspector



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

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

### Safety

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

*At the last inspection, in 2017, reception risk assessment and first night arrangements were inadequate. The level of violence was high and strategic violence reduction work was poor. The number of self-harm incidents had increased sharply since the previous inspection and we found some dangerous shortcomings in support procedures. Security arrangements were improving but endemic drug use contributed to significant instability in the prison. The segregation unit was a poor environment. Use of force was usually proportionate. Governance of the special cell was weak. Substance use services were good, but limited by the restricted regime. Outcomes for prisoners were poor against this healthy prison test.*

#### Main recommendations

The high levels of violence should be systematically addressed through a comprehensive violence reduction strategy informed by an up-to-date analysis of data and consultation with prisoners. All violent incidents should be investigated thoroughly, perpetrators should be managed consistently and victims supported. (S42)

**Achieved**

Prisoners at risk of self-harm should be given consistent care, attention and supervision. Support should be in line with promptly completed and comprehensive assessment, care in custody and teamwork (ACCT) documentation and processes. (S43)

**Achieved**

There should be a whole prison strategy for managing substance misuse, informed by an up-to-date needs assessment. The drug and alcohol strategy committee should meet regularly to generate and oversee implementation of strategic action plans to reduce drug supply and demand. Prisoners should have easy and timely access to psychosocial support. (S44)

**Partially achieved**

#### Recommendations

Reception staff should engage proactively with newly arrived prisoners, and both they and induction staff should effectively support and supervise prisoner peer workers. (1.7)

**Achieved**

Risk interviews in reception should be carried out in private and risk information should be routinely shared with induction staff. (1.8)

**Achieved**

First night cells should be prepared in advance for newly arrived prisoners. (1.9)

**Achieved**

Death in custody action plans should be fully implemented and monitored over time. (1.20)

**Achieved**

The constant supervision cell for those at risk of self-harm should not be located in the segregation unit. (1.21)

**Not achieved**

All prisoners, including those in reception and on the induction unit, should have easy access to a Listener. Listeners should attend safer custody meetings. (1.22)

**Partially achieved**

The governor should re-establish contact with the local director of adult social services and the local safeguarding adults board to develop safeguarding processes. (1.25)

**Achieved**

Visits restrictions should only be imposed in response to visits-related activities. (1.32)

**Achieved**

The strategic management of security risks should include stronger links with the police. (1.33)

**Partially achieved**

The IEP scheme should encourage prisoners to improve their behaviour and not interfere with their ability to maintain basic hygiene and contact with families. (1.36)

**Partially achieved**

Senior managers should quality assure adjudication hearings and outcomes to ensure fairness and consistency. (1.38)

**Achieved**

There should be effective management oversight of the use of force, including special accommodation, and any emerging trends should be identified through systematic data analysis. (1.41)

**Achieved**

Every use of special accommodation should be comprehensively documented to demonstrate that it is used legitimately and proportionately. It should not be used for anything other than serious refractory behaviour. (1.42)

**Achieved**

The segregation unit should be maintained to a high standard and the cells should be clean, free of graffiti and well lit. Toilets, showers and windows should be in full working order. (1.46)

**Achieved**

Senior managers should monitor the use of the segregation unit to ensure it is used appropriately. (1.47)

**Achieved**

All prisoners with substance misuse concerns should have easy access to mutual aid groups and peer support. (1.55)

**Not achieved**



## Respect

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

*At the last inspection, in 2017, residential units were in poor condition. Cells were cramped and many toilets were unscreened. Staffing levels were low and staff-prisoner relationships were characterised by disengagement. Equality work had been neglected. Faith provision was adequate. Responses to complaints were appropriate but too many complaints related to unanswered applications. Health services were reasonably good. The quality of food was good. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

### Main recommendations

Prisoners should not be held in overcrowded conditions. (S45)

**Not achieved** (recommendation repeated, S44)

Managers should systematically consult prisoners from minority groups, identify and meet support needs, address negative perceptions, and investigate and act on adverse monitoring data. (S46)

**Partially achieved**

### Recommendations

All showers should be clean, well maintained and screened to provide full privacy. (2.10)

**Not achieved** (recommendation repeated, 2.8)

Emergency cell bells should be answered promptly at all times. (2.11)

**Achieved**

The prisoner information desks (PIDs) should be embedded on all units and PID workers should be supported and adequately supervised by staff. All applications should be effectively tracked. (2.12)

**Achieved**

Managers should ensure that there are sufficient staff and that they engage positively with prisoners and act as positive role models. (2.17)

**Achieved**

Reports of discrimination should be thoroughly and promptly investigated. Timely quality control measures should be taken by a senior manager with external scrutiny in place. (2.21)

**Not achieved**

A full-time Anglican chaplain should be recruited without delay. (2.31)

**Achieved**

Designated leads should be introduced for older people and long-term conditions to support a systematic and evidence-based approach to care. (2.47)

**Achieved**

Prison staff should be trained in resuscitation skills to ensure they can respond appropriately to medical emergencies. (2.48)

**Achieved**

Wing treatment rooms should be cleaned regularly and fulfil national infection control requirements. (2.49)

**Not achieved**

Reception screening should include identification of key issues such as social care needs and learning disabilities. Nursing staff should be proactive in their communication with reception staff in relation to key health indicators. (2.57)

**Achieved**

Prisoner access to primary care, dental and hospital appointments should reflect community waiting times. (2.58)

**Achieved**

Medication administration should be consistently and adequately supervised by prison staff, to ensure privacy and compliance, and reduce the risk of bullying and diversion. (2.65)

**Not achieved** (recommendation repeated, 2.75)

Prisoners with significant mental health problems should be transferred to hospital without delay. (2.73)

**Achieved**

Prison officers should receive mental health awareness training to help them to recognise when a prisoner requires assistance from mental health practitioners. (2.74)

**Achieved**

There should be a formal agreement between the prison and the local authority which reflects a shared approach to the identification and referral of prisoners with social care needs. (2.76)

**Not achieved**

Wing serveries, hotplates and trolleys should meet required food hygiene standards and food should be served at the required temperature. (2.83)

**Achieved**

Prisoners on the main wings should be able to eat out of their cells. (2.84)

**Partially achieved**

## Purposeful activity

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

*At the last inspection, in 2017, time out of cell had deteriorated. While the temporary regime had brought more predictability, it was still implemented inconsistently and attendance at many activities was poor. There were enough activity places for the population but unemployment was high and allocation procedures were weak. The standard of teaching and learning was variable. Vocational training was very good and provided opportunities to develop valuable work skills. With the exception of English and mathematics, achievements were good for those who attended education and training. The library was welcoming but too small. PE provision was reasonable but affected by low staffing. Outcomes for prisoners were poor against this healthy prison test.*

### **Main recommendation**

Prisoners should be unlocked and able to attend appointments and engage in constructive activity during the working day. (S47)

**Achieved**

### **Recommendations**

All prisoners should have the opportunity of evening association and at least one hour of exercise outside each day. (3.2)

**Not achieved**

The allocations process should be equitable and not carried out by wing staff. (3.8)

**Achieved**

Education and vocational training programmes should provide relevant progression for prisoners to improve their chances of getting into jobs, further education and training. (3.9)

**Achieved**

A wider range of work should be provided and places should be filled according to prisoners' resettlement needs. (3.14)

**Not achieved**

The standard of teaching and learning in education and vocational training should be raised further, learning sessions should start and finish on time and be effectively planned. (3.20)

**Not achieved**

Tutors should ensure that, in setting targets in individual learning plans and in the assessment of prisoners' work, they refer to the specific skills and knowledge that prisoners need to develop. (3.21)

**Achieved**

The prison should increase support for prisoners with additional learning needs, particularly in English and mathematics to ensure that they achieve. (3.22)

**Not achieved**

All prisoners should be able to use the library at least once a week, including at weekends. (3.30)

**Partially achieved**

Managers should analyse data on non-library users and implement strategies to increase usage, including making the library available at weekends. (3.31)

**Achieved**

Prisoners should be able to undertake an appropriate range of accredited vocational PE training courses. (3.35)

**Achieved**

The outside all-weather surface should be resurfaced to the latest standards, to ensure that continued use is made of the facility. (3.36)

**Not 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 2017, reasonable resettlement work was taking place, but different departments were not sufficiently well coordinated. Offender supervisor contact was variable but key processes of importance to prisoners, such as parole hearings and home detention curfew (HDC), were managed appropriately. Good efforts had been made to reduce the offender assessment system (OASys) backlog, but it remained high and far too many prisoners still arrived without an OASys. Public protection work was sound. Categorisation processes had improved and release on temporary licence (ROTL) was used well to support resettlement. Links with community organisations were good. Reintegration work varied; too many prisoners were still released without accommodation. Some very good work was done to help prisoners into employment and to promote family ties. Outcomes for prisoners were reasonably good against this healthy prison test.*

### Recommendations

There should be effective strategic integration between the reducing re-offending and offender management functions, which places offender management at the centre of service delivery to prisoners. (4.3)

**Not achieved**

All prisoners should have an up-to-date OASys assessment, sentence plan and an effective risk management plan. (4.10)

**Not achieved**

Offender supervisors should have regular planned contact with prisoners allocated to them. (4.11)

**Not achieved**

Resettlement frameworks should support and enable IPP prisoners to progress effectively towards release. (4.19)

**Achieved**

Basic custodial screenings and resettlement plans should be fully completed and use all relevant information, including OASys where it is available. (4.22)

**Not achieved**

The CRC and housing advice providers should establish why prisoners are being released without settled accommodation and take concerted action to address the problem. (4.25)

**Partially achieved**

Validated data on education, training and employment places when prisoners are released should be collected and analysed to measure the effectiveness of the resettlement work. (4.27)

**Achieved**

All prisoners should be able to use the virtual campus to research employment opportunities. (4.28)

**Not achieved**

Prisoners should be able to access training on overdose management, including the use of Naloxone, before release. (4.32)

**Not achieved**

Prisoners' financial needs should be assessed on arrival and there should be services which meet the needs of all prisoners. (4.34)

**Partially achieved**

Family days should be widely promoted on induction and on the wings. (4.40)

**Achieved**

Social visits should start on time. (4.41)

**Achieved**

The visitors' centre should be expanded to meet the needs of the population. (4.42)

**Not achieved**

A detailed needs analysis of the population should be undertaken to inform the provision of offending behaviour programmes which meet the needs of prisoners. (4.45)

**Not achieved**



## Appendix III: Photographs



Cell



Cell



Cell



Cell

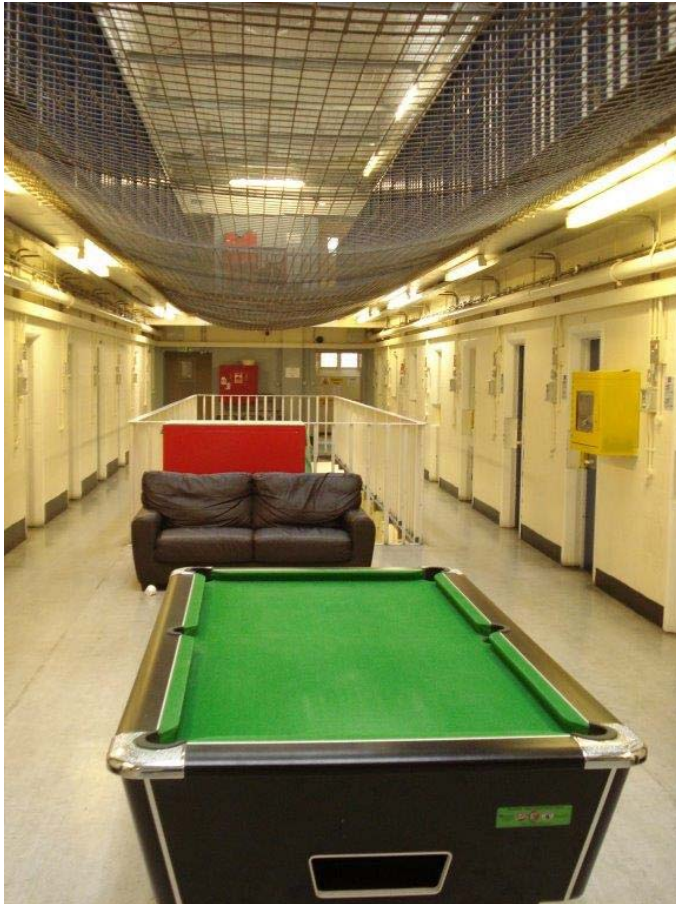




Cell



Wing



Wing



Induction room



Reception interview desk



## Appendix IV: Prison population profile

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

### Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced		685	92.8
Recall		52	7
Convicted unsentenced		0	
Remand		0	
Civil prisoners		1	0.1
Detainees		0	
<b>Total</b>		<b>738</b>	<b>100</b>

Sentence	18–20 yr olds	21 and over	%
Unsentenced		0	0
Less than 6 months		0	0
6 months to less than 12 months		14	1.9
12 months to less than 2 years		92	12.5
2 years to less than 4 years		340	46.1
4 years to less than 10 years		221	29.9
10 years and over (not life)		41	5.6
ISPP (indeterminate sentence for public protection)		15	2.0
Life		15	2.0
<b>Total</b>		<b>738</b>	<b>100</b>

Age	Number of prisoners	%
Please state minimum age here:	21	
Under 21 years	0	0
21 years to 29 years	262	35.5
30 years to 39 years	206	27.9
40 years to 49 years	129	17.5
50 years to 59 years	81	11
60 years to 69 years	37	5
70 plus years	23	3.1
Please state maximum age here:	83	
<b>Total</b>	<b>738</b>	<b>100</b>

Nationality	18–20 yr olds	21 and over	%
British		688	93.2
Foreign nationals		50	6.8
<b>Total</b>		<b>738</b>	<b>100</b>

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced		0	
Uncategorised sentenced		0	
Category A		0	
Category B		1	0.1
Category C		711	96.3
Category D		26	3.5
Other		0	
<b>Total</b>		<b>738</b>	<b>100</b>

Ethnicity	18–20 yr olds	21 and over	%
White			
British		296	40.1
Irish		11	1.5
Gypsy/Irish Traveller		14	1.9
Other white		32	4.3
Mixed			
White and black Caribbean		23	3.1
White and black African		8	1.1
White and Asian		4	0.5
Other mixed		12	1.6
Asian or Asian British			
Indian		18	2.4
Pakistani		9	1.2
Bangladeshi		22	3
Chinese		2	0.3
Other Asian		27	3.7
Black or black British			
Caribbean		110	14.9
African		74	10.1
Other black		42	5.7
Other ethnic group			
Arab		2	0.3
Other ethnic group		21	2.8
Not stated		11	1.5
<b>Total</b>		<b>738</b>	<b>100</b>



<b>Religion</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
Baptist		2	0.3
Church of England		135	18.3
Roman Catholic		145	19.6
Other Christian denominations		106	14.4
Muslim		182	24.7
Sikh		2	0.3
Hindu		6	0.8
Buddhist		14	1.9
Jewish		4	0.5
Other		26	3.4
No religion		116	15.7
<b>Total</b>		<b>738</b>	<b>100</b>

<b>Other demographics</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
Veteran (ex-armed services)		0	
<b>Total</b>			

### Sentenced prisoners only

<b>Length of stay</b>	<b>18–20 yr olds</b>		<b>21 and over</b>	
	<b>Number</b>	<b>%</b>	<b>Number</b>	<b>%</b>
Less than 1 month			99	13.4
1 month to 3 months			188	25.5
3 months to 6 months			205	27.8
6 months to 1 year			164	22.2
1 year to 2 years			53	7.2
2 years to 4 years			28	3.8
4 years or more			1	0.1
<b>Total</b>			<b>738</b>	<b>100</b>

### Sentenced prisoners only

	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
Foreign nationals detained post sentence expiry		1	0
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions)		0	0
<b>Total</b>		<b>1</b>	<b>0</b>

**Unsentenced prisoners only**

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month			0	
1 month to 3 months			0	
3 months to 6 months			0	
6 months to 1 year			0	
1 year to 2 years			0	
2 years to 4 years			0	
4 years or more			0	
<b>Total</b>			<b>0</b>	

Main offence	18–20 yr olds	21 and over	%
Violence against the person		105	14.2
Sexual offences		199	27
Burglary		91	12.3
Robbery		57	7.8
Theft and handling		17	2.3
Fraud and forgery		14	1.9
Drugs offences		167	22.7
Other offences		86	11.7
Civil offences		1	0.1
Offence not recorded /holding warrant			



# Appendix V: Prisoner survey methodology and results

## Prisoner survey methodology

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

HM Inspectorate of Prisons (HMI Prisons) researchers have developed a self-completion questionnaire to support HMI Prisons' *Expectations*. The questionnaire consists of structured questions covering the prisoner 'journey' from reception to release, together with demographic and background questions which enable us to compare responses from different sub-groups of the prisoner population. There are also three open questions at the end of the questionnaire which allow prisoners to express, in their own words, what they find most positive and negative about the prison.<sup>16</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 power calculation, HMI Prisons researchers calculate the minimum sample size required to ensure that the survey findings can be generalised to the entire population of the establishment.<sup>17</sup>

### 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>18</sup> Prisoners are made aware that participation in the survey is voluntary; prisoners who decline to participate are not replaced within the sample. Those who agree to participate are provided with a sealable envelope for their completed questionnaire and told when we will be returning to collect it. We make arrangements to administer the questionnaire via a face-to-face interview for respondents who disclose literacy difficulties.

### Survey response

At the time of the survey on 4 March 2019 the prisoner population at HMP Brixton was 732. Using the sampling method described above, questionnaires were distributed to 193 prisoners. We received a total of 151 completed questionnaires, a response rate of 78%. This included one questionnaire completed via face-to-face interviews. Twenty prisoners declined to participate in the survey and 22 questionnaires were either not returned at all, or returned blank.

<sup>16</sup> Qualitative analysis of these written comments is undertaken by HMI Prisons researchers and used by inspectors.

<sup>17</sup> 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments).

<sup>18</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 Brixton. For the comparator analyses, each question was reformulated into a binary ‘yes/no’ format and affirmative responses compared.<sup>19</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 Brixton 2019<sup>20</sup> compared with those from other HMI Prisons surveys<sup>21</sup>

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

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

- Responses of prisoners on G wing (the vulnerable prisoner unit) compared with those from the rest of the establishment.

### Comparisons between sub-populations of prisoners within HMP XXX 2019<sup>22</sup>

- White prisoners’ responses compared with those of prisoners from black or minority ethnic groups.
- Muslim prisoners’ responses compared with those of non-Muslim prisoners.
- Disabled prisoners’ responses compared with those who do not have a disability.
- Responses of prisoners with mental health problems compared with those who do not have mental health problems.
- Responses of prisoners aged 50 and over compared with those under 50.
- Responses of prisoners aged 25 and under compared with those over 25.

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group.<sup>23</sup>

In the comparator analyses, statistically significant differences are indicated by shading.<sup>24</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.

<sup>19</sup> Using the Chi-square test (or Fisher’s exact test if there are fewer than five responses in a group).

<sup>20</sup> Percentages shown in the full breakdown may differ slightly from those shown in the comparative analyses. This is because the data has been weighted to enable valid statistical comparison between establishments.

<sup>21</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>22</sup> These analyses are carried out on summary data from selected survey questions only.

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

<sup>24</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.

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

# Survey

## Background information

<b>I.1</b>	<b>What wing or houseblock are you currently living on?</b>	
	A wing.....	33 (22%)
	B wing.....	27 (18%)
	C wing.....	28 (19%)
	D wing.....	9 (6%)
	G wing.....	48 (32%)
	London Pathways Unit.....	6 (4%)
<b>I.2</b>	<b>How old are you?</b>	
	Under 21.....	0 (0%)
	21 - 25.....	29 (19%)
	26 - 29.....	23 (15%)
	30 - 39.....	43 (29%)
	40 - 49.....	26 (17%)
	50 - 59.....	16 (11%)
	60 - 69.....	8 (5%)
	70 or over.....	5 (3%)
<b>I.3</b>	<b>What is your ethnic group?</b>	
	White - English/ Welsh/ Scottish/ Northern Irish/ British.....	62 (42%)
	White - Irish.....	4 (3%)
	White - Gypsy or Irish Traveller.....	3 (2%)
	White - any other White background.....	3 (2%)
	Mixed - White and Black Caribbean.....	5 (3%)
	Mixed - White and Black African.....	1 (1%)
	Mixed - White and Asian.....	2 (1%)
	Mixed - any other Mixed ethnic background.....	2 (1%)
	Asian/ Asian British - Indian.....	1 (1%)
	Asian/ Asian British - Pakistani.....	1 (1%)
	Asian/ Asian British - Bangladeshi.....	8 (5%)
	Asian/ Asian British - Chinese.....	2 (1%)
	Asian - any other Asian Background.....	1 (1%)
	Black/ Black British - Caribbean.....	26 (18%)
	Black/ Black British - African.....	17 (12%)
	Black - any other Black/ African/ Caribbean background.....	5 (3%)
	Arab.....	1 (1%)
	Any other ethnic group.....	2 (1%)
<b>I.4</b>	<b>How long have you been in this prison?</b>	
	Less than 6 months.....	71 (48%)
	6 months or more.....	77 (52%)
<b>I.5</b>	<b>Are you currently serving a sentence?</b>	
	Yes.....	138 (93%)
	Yes - on recall.....	9 (6%)
	No - on remand or awaiting sentence.....	1 (1%)
	No - immigration detainee.....	1 (1%)

<b>1.6</b>	<b>How long is your sentence?</b>	
	Less than 6 months.....	3 (2%)
	6 months to less than 1 year.....	16 (11%)
	1 year to less than 4 years.....	79 (53%)
	4 years to less than 10 years.....	35 (23%)
	10 years or more.....	9 (6%)
	IPP (indeterminate sentence for public protection).....	3 (2%)
	Life.....	3 (2%)
	Not currently serving a sentence.....	2 (1%)

## Arrival and reception

<b>2.1</b>	<b>Were you given up-to-date information about this prison before you came here?</b>	
	Yes.....	24 (16%)
	No.....	120 (80%)
	Don't remember.....	6 (4%)
<b>2.2</b>	<b>When you arrived at this prison, how long did you spend in reception?</b>	
	Less than 2 hours.....	71 (47%)
	2 hours or more.....	74 (49%)
	Don't remember.....	5 (3%)
<b>2.3</b>	<b>When you were searched in reception, was this done in a respectful way?</b>	
	Yes.....	118 (80%)
	No.....	23 (16%)
	Don't remember.....	6 (4%)
<b>2.4</b>	<b>Overall, how were you treated in reception?</b>	
	Very well.....	45 (30%)
	Quite well.....	83 (55%)
	Quite badly.....	10 (7%)
	Very badly.....	10 (7%)
	Don't remember.....	2 (1%)
<b>2.5</b>	<b>When you first arrived here, did you have any of the following problems?</b>	
	Problems getting phone numbers.....	36 (24%)
	Contacting family.....	36 (24%)
	Arranging care for children or other dependants.....	2 (1%)
	Contacting employers.....	5 (3%)
	Money worries.....	21 (14%)
	Housing worries.....	30 (20%)
	Feeling depressed.....	50 (34%)
	Feeling suicidal.....	8 (5%)
	Other mental health problems.....	28 (19%)
	Physical health problems.....	24 (16%)
	Drug or alcohol problems (e.g. withdrawal).....	7 (5%)
	Problems getting medication.....	23 (16%)
	Needing protection from other prisoners.....	6 (4%)
	Lost or delayed property.....	35 (24%)
	Other problems.....	20 (14%)
	Did not have any problems.....	32 (22%)
<b>2.6</b>	<b>Did staff help you to deal with these problems when you first arrived?</b>	
	Yes.....	44 (30%)
	No.....	72 (49%)
	Did not have any problems when I first arrived.....	32 (22%)

## First night and induction

<b>3.1</b>	<b>Before you were locked up on your first night here, were you offered any of the following things?</b>			
	Tobacco or nicotine replacement.....			97 (65%)
	Toiletries / other basic items .....			82 (55%)
	A shower.....			50 (34%)
	A free phone call.....			77 (52%)
	Something to eat.....			116 (78%)
	The chance to see someone from health care .....			91 (61%)
	The chance to talk to a Listener or Samaritans.....			36 (24%)
	Support from another prisoner (e.g. Insider or buddy).....			38 (26%)
	Wasn't offered any of these things .....			8 (5%)
<b>3.2</b>	<b>On your first night in this prison, how clean or dirty was your cell?</b>			
	Very clean .....			8 (5%)
	Quite clean .....			44 (30%)
	Quite dirty .....			40 (27%)
	Very dirty .....			56 (38%)
	Don't remember .....			1 (1%)
<b>3.3</b>	<b>Did you feel safe on your first night here?</b>			
	Yes.....			110 (75%)
	No.....			33 (22%)
	Don't remember .....			4 (3%)
<b>3.4</b>	<b>In your first few days here, did you get:</b>			
		Yes	No	Don't remember
	Access to the prison shop / canteen?	60 (42%)	80 (56%)	4 (3%)
	Free PIN phone credit?	79 (56%)	61 (43%)	1 (1%)
	Numbers put on your PIN phone?	58 (44%)	65 (50%)	8 (6%)
<b>3.5</b>	<b>Did your induction cover everything you needed to know about this prison?</b>			
	Yes.....			83 (57%)
	No.....			56 (38%)
	Have not had an induction.....			7 (5%)

## On the wing

<b>4.1</b>	<b>Are you in a cell on your own?</b>	
	Yes.....	34 (23%)
	No, I'm in a shared cell or dormitory .....	116 (77%)
<b>4.2</b>	<b>Is your cell call bell normally answered within 5 minutes?</b>	
	Yes.....	59 (40%)
	No.....	68 (46%)
	Don't know.....	20 (14%)
	Don't have a cell call bell.....	0 (0%)

<b>4.3</b>	<b>Please answer the following questions about the wing or houseblock you are currently living on:</b>			
		Yes	No	Don't know
	Do you normally have enough clean, suitable clothes for the week?	122 (82%)	25 (17%)	1 (1%)
	Can you shower every day?	133 (90%)	14 (10%)	0 (0%)
	Do you have clean sheets every week?	116 (79%)	28 (19%)	3 (2%)
	Do you get cell cleaning materials every week?	100 (68%)	42 (29%)	4 (3%)
	Is it normally quiet enough for you to relax or sleep at night?	100 (68%)	44 (30%)	2 (1%)
	Can you get your stored property if you need it?	38 (26%)	60 (41%)	49 (33%)

<b>4.4</b>	<b>Normally, how clean or dirty are the communal / shared areas of your wing or houseblock (landings, stairs, wing showers etc.)?</b>	
	Very clean .....	10 (7%)
	Quite clean .....	62 (42%)
	Quite dirty .....	52 (35%)
	Very dirty .....	23 (16%)

### Food and canteen

<b>5.1</b>	<b>What is the quality of food like in this prison?</b>	
	Very good .....	41 (28%)
	Quite good .....	87 (58%)
	Quite bad .....	16 (11%)
	Very bad .....	5 (3%)
<b>5.2</b>	<b>Do you get enough to eat at mealtimes?</b>	
	Always .....	28 (19%)
	Most of the time .....	61 (41%)
	Some of the time .....	46 (31%)
	Never .....	15 (10%)
<b>5.3</b>	<b>Does the shop / canteen sell the things that you need?</b>	
	Yes .....	110 (74%)
	No .....	34 (23%)
	Don't know .....	4 (3%)

### Relationships with staff

<b>6.1</b>	<b>Do most staff here treat you with respect?</b>	
	Yes .....	106 (72%)
	No .....	41 (28%)
<b>6.2</b>	<b>Are there any staff here you could turn to if you had a problem?</b>	
	Yes .....	116 (78%)
	No .....	32 (22%)
<b>6.3</b>	<b>In the last week, has any member of staff talked to you about how you are getting on?</b>	
	Yes .....	80 (53%)
	No .....	70 (47%)

<b>6.4</b>	<b>How helpful is your personal or named officer?</b>	
	Very helpful.....	45 (30%)
	Quite helpful.....	48 (32%)
	Not very helpful .....	24 (16%)
	Not at all helpful.....	13 (9%)
	Don't know.....	8 (5%)
	Don't have a personal / named officer .....	10 (7%)
<b>6.5</b>	<b>How often do you see prison governors, directors or senior managers talking to prisoners?</b>	
	Regularly.....	10 (7%)
	Sometimes.....	24 (16%)
	Hardly ever.....	99 (67%)
	Don't know.....	14 (10%)
<b>6.6</b>	<b>Do you feel that you are treated as an individual in this prison?</b>	
	Yes.....	61 (42%)
	No.....	84 (58%)
<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.....	35 (24%)
	Yes, but things don't change.....	50 (34%)
	No.....	37 (25%)
	Don't know.....	26 (18%)

## Faith

<b>7.1</b>	<b>What is your religion?</b>	
	No religion.....	25 (17%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations) .....	69 (48%)
	Buddhist.....	4 (3%)
	Hindu.....	1 (1%)
	Jewish .....	1 (1%)
	Muslim.....	31 (22%)
	Sikh .....	0 (0%)
	Other .....	12 (8%)
<b>7.2</b>	<b>Are your religious beliefs respected here?</b>	
	Yes.....	87 (60%)
	No.....	17 (12%)
	Don't know.....	16 (11%)
	Not applicable (no religion).....	25 (17%)
<b>7.3</b>	<b>Are you able to speak to a chaplain of your faith in private, if you want to?</b>	
	Yes.....	67 (46%)
	No.....	16 (11%)
	Don't know.....	39 (27%)
	Not applicable (no religion).....	25 (17%)
<b>7.4</b>	<b>Are you able to attend religious services, if you want to?</b>	
	Yes.....	107 (73%)
	No.....	9 (6%)
	Don't know.....	6 (4%)
	Not applicable (no religion).....	25 (17%)



### 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 .....	71 (48%)
	No.....	77 (52%)
<b>8.2</b>	<b>Have you had any problems with sending or receiving mail (letters or parcels)?</b>	
	Yes .....	65 (44%)
	No.....	82 (56%)
<b>8.3</b>	<b>Are you able to use a phone every day (if you have credit)?</b>	
	Yes .....	132 (92%)
	No.....	12 (8%)
<b>8.4</b>	<b>How easy or difficult is it for your family and friends to get here?</b>	
	Very easy .....	25 (17%)
	Quite easy .....	57 (39%)
	Quite difficult .....	28 (19%)
	Very difficult .....	19 (13%)
	Don't know.....	18 (12%)
<b>8.5</b>	<b>How often do you have visits from family or friends?</b>	
	More than once a week.....	6 (4%)
	About once a week.....	23 (16%)
	Less than once a week.....	77 (53%)
	Not applicable (don't get visits).....	39 (27%)
<b>8.6</b>	<b>Do visits usually start and finish on time?</b>	
	Yes .....	67 (63%)
	No.....	39 (37%)
<b>8.7</b>	<b>Are your visitors usually treated respectfully by staff?</b>	
	Yes .....	80 (78%)
	No.....	23 (22%)

### 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 .....	77 (54%)
	Yes, but these times are not usually kept to .....	56 (39%)
	No.....	10 (7%)
<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 .....	17 (12%)
	2 to 6 hours.....	79 (55%)
	6 to 10 hours .....	34 (24%)
	10 hours or more .....	8 (6%)
	Don't know.....	5 (3%)

<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 .....	43 (30%)
	2 to 6 hours.....	79 (55%)
	6 to 10 hours .....	12 (8%)
	10 hours or more .....	5 (3%)
	Don't know.....	4 (3%)
<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 .....	2 (1%)
	1 or 2 .....	17 (12%)
	3 to 5.....	38 (26%)
	More than 5.....	85 (59%)
	Don't know.....	3 (2%)
<b>9.5</b>	<b>How many days in a typical week do you get association, if you want it?</b>	
	None .....	5 (3%)
	1 or 2 .....	10 (7%)
	3 to 5.....	19 (13%)
	More than 5.....	105 (72%)
	Don't know.....	6 (4%)
<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 .....	8 (5%)
	3 to 5.....	35 (24%)
	More than 5.....	87 (60%)
	Don't know.....	11 (8%)
<b>9.7</b>	<b>Typically, how often do you go to the gym?</b>	
	Twice a week or more .....	88 (60%)
	About once a week.....	13 (9%)
	Less than once a week.....	9 (6%)
	Never .....	36 (25%)
<b>9.8</b>	<b>Typically, how often do you go to the library?</b>	
	Twice a week or more .....	19 (13%)
	About once a week.....	50 (35%)
	Less than once a week.....	24 (17%)
	Never .....	48 (34%)
<b>9.9</b>	<b>Does the library have a wide enough range of materials to meet your needs?</b>	
	Yes .....	49 (37%)
	No.....	36 (27%)
	Don't use the library .....	48 (36%)

### Applications, complaints and legal rights

<b>10.1</b>	<b>Is it easy for you to make an application?</b>	
	Yes .....	110 (75%)
	No.....	30 (21%)
	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?	71 (54%)	56 (43%)	4 (3%)	
	Are applications usually dealt with within 7 days?	49 (38%)	77 (59%)	4 (3%)	
<b>10.3</b>	<b>Is it easy for you to make a complaint?</b>				
	Yes .....			98 (67%)	
	No .....			23 (16%)	
	Don't know .....			26 (18%)	
<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?	30 (22%)	57 (42%)	48 (36%)	
	Are complaints usually dealt with within 7 days?	17 (13%)	66 (50%)	48 (37%)	
<b>10.5</b>	<b>Have you ever been prevented from making a complaint here when you wanted to?</b>				
	Yes .....			29 (21%)	
	No .....			76 (55%)	
	Not wanted to make a complaint .....			33 (24%)	
<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?	44 (31%)	33 (23%)	38 (27%)	27 (19%)
	Attend legal visits?	60 (44%)	11 (8%)	40 (29%)	25 (18%)
	Get bail information?	17 (13%)	24 (18%)	50 (37%)	44 (33%)
<b>10.7</b>	<b>Have staff here ever opened letters from your solicitor or legal representative when you were not present?</b>				
	Yes .....			53 (37%)	
	No .....			46 (32%)	
	Not had any legal letters .....			46 (32%)	

## 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	12 (8%)	42 (29%)	39 (27%)	36 (25%)	16 (11%)
	Nurse	28 (19%)	62 (43%)	31 (22%)	14 (10%)	9 (6%)
	Dentist	8 (6%)	19 (13%)	37 (26%)	52 (36%)	28 (19%)
	Mental health workers	11 (8%)	35 (24%)	34 (24%)	19 (13%)	44 (31%)
<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	25 (18%)	56 (39%)	21 (15%)	16 (11%)	24 (17%)
	Nurse	27 (19%)	66 (47%)	17 (12%)	15 (11%)	15 (11%)
	Dentist	28 (20%)	30 (22%)	15 (11%)	17 (12%)	47 (34%)
	Mental health workers	17 (12%)	37 (27%)	14 (10%)	18 (13%)	52 (38%)

<b>11.3</b>	<b>Do you have any mental health problems?</b>	
	Yes .....	68 (48%)
	No .....	73 (52%)
<b>11.4</b>	<b>Have you been helped with your mental health problems in this prison?</b>	
	Yes .....	32 (23%)
	No .....	36 (26%)
	Don't have any mental health problems .....	73 (52%)
<b>11.5</b>	<b>What do you think of the overall quality of the health services here?</b>	
	Very good.....	16 (11%)
	Quite good.....	59 (42%)
	Quite bad .....	32 (23%)
	Very bad .....	20 (14%)
	Don't know.....	15 (11%)

### 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 .....	46 (33%)
	No .....	95 (67%)
<b>12.2</b>	<b>If you have a disability, are you getting the support you need?</b>	
	Yes .....	16 (12%)
	No .....	28 (20%)
	Don't have a disability .....	95 (68%)
<b>12.3</b>	<b>Have you been on an ACCT in this prison?</b>	
	Yes .....	24 (17%)
	No .....	117 (83%)
<b>12.4</b>	<b>If you have been on an ACCT in this prison, did you feel cared for by staff?</b>	
	Yes .....	15 (11%)
	No .....	8 (6%)
	Have not been on an ACCT in this prison .....	117 (84%)
<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 .....	35 (25%)
	Quite easy .....	35 (25%)
	Quite difficult .....	5 (4%)
	Very difficult .....	10 (7%)
	Don't know.....	56 (39%)
	No Listeners at this prison .....	1 (1%)

### Alcohol and drugs

<b>13.1</b>	<b>Did you have an alcohol problem when you came into this prison?</b>	
	Yes .....	24 (17%)
	No .....	120 (83%)
<b>13.2</b>	<b>Have you been helped with your alcohol problem in this prison?</b>	
	Yes .....	11 (8%)
	No .....	12 (8%)
	Did not / do not have an alcohol problem .....	120 (84%)

<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 .....	36 (25%)
	No .....	108 (75%)
<b>13.4</b>	<b>Have you developed a problem with illicit drugs since you have been in this prison?</b>	
	Yes .....	18 (13%)
	No .....	124 (87%)
<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 .....	14 (10%)
	No .....	128 (90%)
<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 .....	17 (12%)
	No .....	21 (15%)
	Did not / do not have a drug problem.....	100 (72%)
<b>13.7</b>	<b>Is it easy or difficult to get illicit drugs in this prison?</b>	
	Very easy .....	26 (18%)
	Quite easy .....	16 (11%)
	Quite difficult .....	6 (4%)
	Very difficult .....	6 (4%)
	Don't know.....	87 (62%)
<b>13.8</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	Very easy .....	16 (11%)
	Quite easy .....	15 (11%)
	Quite difficult .....	6 (4%)
	Very difficult .....	9 (6%)
	Don't know.....	94 (67%)
<b>Safety</b>		
<b>14.1</b>	<b>Have you ever felt unsafe here?</b>	
	Yes .....	64 (44%)
	No .....	83 (56%)
<b>14.2</b>	<b>Do you feel unsafe now?</b>	
	Yes .....	26 (18%)
	No .....	118 (82%)
<b>14.3</b>	<b>Have you experienced any of the following types of bullying / victimisation from other prisoners here? (Please tick all that apply to you.)</b>	
	Verbal abuse .....	45 (33%)
	Threats or intimidation.....	33 (24%)
	Physical assault.....	15 (11%)
	Sexual assault.....	4 (3%)
	Theft of canteen or property.....	23 (17%)
	Other bullying / victimisation .....	22 (16%)
	Not experienced any of these from prisoners here.....	81 (60%)
<b>14.4</b>	<b>If you were being bullied / victimised by other prisoners here, would you report it?</b>	
	Yes .....	60 (43%)
	No .....	78 (57%)

<b>14.5</b>	<b>Have you experienced any of the following types of bullying / victimisation from staff here?</b>	
	Verbal abuse .....	33 (24%)
	Threats or intimidation.....	33 (24%)
	Physical assault.....	8 (6%)
	Sexual assault.....	1 (1%)
	Theft of canteen or property.....	5 (4%)
	Other bullying / victimisation .....	30 (22%)
	Not experienced any of these from staff here.....	85 (63%)

<b>14.6</b>	<b>If you were being bullied / victimised by staff here, would you report it?</b>	
	Yes .....	76 (55%)
	No.....	63 (45%)

### 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 .....	73 (52%)
	No.....	48 (34%)
	Don't know what the incentives / rewards are .....	19 (14%)

<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 .....	53 (37%)
	No.....	67 (47%)
	Don't know.....	17 (12%)
	Don't know what this is .....	7 (5%)

<b>15.3</b>	<b>Have you been physically restrained by staff in this prison in the last 6 months?</b>	
	Yes .....	14 (10%)
	No.....	133 (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 .....	4 (3%)
	No.....	7 (5%)
	Don't remember .....	2 (1%)
	Not been restrained here in last 6 months .....	133 (91%)

<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 .....	13 (9%)
	No.....	132 (91%)

<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?	10 (77%)	3 (23%)
	Could you shower every day?	9 (69%)	4 (31%)
	Could you go outside for exercise every day?	8 (67%)	4 (33%)
	Could you use the phone every day (if you had credit)?	7 (64%)	4 (36%)

**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	87 (63%)	23 (17%)	28 (20%)	1 (1%)
Vocational or skills training	55 (40%)	36 (26%)	42 (31%)	3 (2%)
Prison job	63 (46%)	48 (35%)	25 (18%)	0 (0%)
Voluntary work outside of the prison	7 (5%)	29 (21%)	53 (39%)	47 (35%)
Paid work outside of the prison	7 (5%)	30 (22%)	48 (35%)	52 (38%)

**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	51 (39%)	46 (35%)	35 (27%)
Vocational or skills training	52 (40%)	23 (18%)	56 (43%)
Prison job	37 (29%)	51 (40%)	40 (31%)
Voluntary work outside of the prison	18 (14%)	17 (14%)	90 (72%)
Paid work outside of the prison	23 (19%)	13 (10%)	88 (71%)

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

Yes .....	80 (58%)
No.....	50 (36%)
Not applicable (e.g. if you are retired, sick or on remand) .....	9 (6%)

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

Yes .....	62 (45%)
No.....	77 (55%)

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

Yes .....	54 (87%)
No.....	7 (11%)
Don't know what my objectives or targets are.....	1 (2%)

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

Yes .....	38 (62%)
No.....	22 (36%)
Don't know what my objectives or targets are.....	1 (2%)

**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	20 (36%)	7 (13%)	29 (52%)
Other programmes	18 (36%)	8 (16%)	24 (48%)
One to one work	20 (38%)	8 (15%)	25 (47%)
Being on a specialist unit	8 (16%)	11 (22%)	31 (62%)
ROTL - day or overnight release	4 (9%)	5 (11%)	37 (80%)

**Preparation for release**

<b>18.1</b>	<b>Do you expect to be released in the next 3 months?</b>			
	Yes .....			58 (40%)
	No .....			77 (53%)
	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 .....			6 (11%)
	Quite near .....			25 (45%)
	Quite far .....			17 (31%)
	Very far .....			7 (13%)
<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 .....			33 (58%)
	No .....			24 (42%)
<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	15 (27%)	27 (48%)	14 (25%)
	Getting employment	11 (22%)	26 (51%)	14 (27%)
	Setting up education or training	8 (15%)	18 (35%)	26 (50%)
	Arranging benefits	17 (31%)	26 (47%)	12 (22%)
	Sorting out finances	9 (16%)	31 (55%)	16 (29%)
	Support for drug or alcohol problems	7 (13%)	12 (22%)	36 (65%)
	Health / mental health support	9 (17%)	18 (33%)	27 (50%)
	Social care support	5 (9%)	15 (28%)	34 (63%)
	Getting back in touch with family or friends	7 (13%)	11 (20%)	36 (67%)

**More about you**

<b>19.1</b>	<b>Do you have children under the age of 18?</b>			
	Yes .....			68 (47%)
	No .....			77 (53%)
<b>19.2</b>	<b>Are you a UK / British citizen?</b>			
	Yes .....			140 (97%)
	No .....			5 (3%)
<b>19.3</b>	<b>Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?</b>			
	Yes .....			5 (3%)
	No .....			140 (97%)
<b>19.4</b>	<b>Have you ever been in the armed services (e.g. army, navy, air force)?</b>			
	Yes .....			9 (6%)
	No .....			135 (94%)
<b>19.5</b>	<b>What is your gender?</b>			
	Male .....			141 (98%)
	Female .....			1 (1%)
	Non-binary .....			2 (1%)
	Other .....			0 (0%)



<b>19.6</b>	<b>How would you describe your sexual orientation?</b>	
	Straight / heterosexual.....	136 (95%)
	Gay / lesbian / homosexual.....	3 (2%)
	Bisexual.....	2 (1%)
	Other.....	2 (1%)
<b>19.7</b>	<b>Do you identify as transgender or transsexual?</b>	
	Yes.....	2 (1%)
	No.....	138 (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.....	12 (9%)
	Less likely to offend.....	75 (55%)
	Made no difference.....	49 (36%)

## HMP Brixton 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 Brixton 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 (20 prisons). Please note that this does not include all category C training prisons.
- Summary statistics from HMP Brixton in 2019 are compared with those from HMP Brixton in 2017. 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 Brixton 2019)*

HMP Brixton 2019	All other category C training prisons surveyed since September 2017	HMP Brixton 2019	HMP Brixton 2017
151	3,441	151	173

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION						
1.2	Are you under 21 years of age?	<i>n=150</i>	0%	6%	0%	1%
	Are you 25 years of age or younger?	<i>n=150</i>	19%	27%	19%	
	Are you 50 years of age or older?	<i>n=150</i>	19%	11%	19%	11%
	Are you 70 years of age or older?	<i>n=150</i>	3%	1%	3%	0%
1.3	Are you from a minority ethnic group?	<i>n=146</i>	51%	31%	51%	57%
1.4	Have you been in this prison for less than 6 months?	<i>n=148</i>	48%	34%	48%	
1.5	Are you currently serving a sentence?	<i>n=149</i>	99%	100%	99%	100%
	Are you on recall?	<i>n=149</i>	6%	9%	6%	9%
1.6	Is your sentence less than 12 months?	<i>n=150</i>	13%	8%	13%	12%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n=150</i>	2%	3%	2%	5%
7.1	Are you Muslim?	<i>n=143</i>	22%	17%	22%	26%
11.3	Do you have any mental health problems?	<i>n=141</i>	48%	44%	48%	
12.1	Do you consider yourself to have a disability?	<i>n=141</i>	33%	34%	33%	29%
19.1	Do you have any children under the age of 18?	<i>n=145</i>	47%	50%	47%	54%
19.2	Are you a foreign national?	<i>n=145</i>	3%	10%	3%	8%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n=145</i>	3%	5%	3%	3%
19.4	Have you ever been in the armed services?	<i>n=144</i>	6%	6%	6%	2%
19.5	Is your gender female or non-binary?	<i>n=144</i>	2%	1%	2%	
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n=143</i>	5%	4%	5%	1%
19.7	Do you identify as transgender or transsexual?	<i>n=140</i>	1%	2%	1%	
ARRIVAL AND RECEPTION						
2.1	Were you given up-to-date information about this prison before you came here?	<i>n=150</i>	16%	16%	16%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n=150</i>	47%	48%	47%	53%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n=147</i>	80%	82%	80%	80%
2.4	Overall, were you treated very / quite well in reception?	<i>n=150</i>	85%	85%	85%	

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	HMP Brixton 2019	Prisoner category C training prisons surveyed since September 2017	HMP Brixton 2019	HMP Brixton 2017
<b>Number of completed questionnaires returned</b>	<b>151</b>	<b>3,441</b>	<b>151</b>	<b>173</b>

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

2.5	When you first arrived, did you have any problems?	n=147	78%	72%	78%	80%
2.5	Did you have problems with:					
	- Getting phone numbers?	n=147	25%	26%	25%	14%
	- Contacting family?	n=147	25%	26%	25%	28%
	- Arranging care for children or other dependents?	n=147	1%	2%	1%	
	- Contacting employers?	n=147	3%	2%	3%	2%
	- Money worries?	n=147	14%	16%	14%	20%
	- Housing worries?	n=147	20%	13%	20%	24%
	- Feeling depressed?	n=147	34%	29%	34%	
	- Feeling suicidal?	n=147	5%	9%	5%	
	- Other mental health problems?	n=147	19%	21%	19%	
	- Physical health problems?	n=147	16%	13%	16%	19%
	- Drugs or alcohol (e.g. withdrawal)?	n=147	5%	11%	5%	
	- Getting medication?	n=147	16%	21%	16%	
	- Needing protection from other prisoners?	n=147	4%	6%	4%	11%
	- Lost or delayed property?	n=147	24%	22%	24%	24%
	<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	n=116	38%	32%	38%	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?	n=149	65%	66%	65%	82%
	- Toiletries / other basic items?	n=149	55%	51%	55%	35%
	- A shower?	n=149	34%	45%	34%	15%
	- A free phone call?	n=149	52%	44%	52%	22%
	- Something to eat?	n=149	78%	75%	78%	50%
	- The chance to see someone from health care?	n=149	61%	60%	61%	64%
	- The chance to talk to a Listener or Samaritans?	n=149	24%	27%	24%	12%
	- Support from another prisoner (e.g. Insider or buddy)?	n=149	26%	22%	26%	
	- None of these?	n=149	5%	7%	5%	
3.2	On your first night in this prison, was your cell very / quite clean?	n=149	35%	39%	35%	
3.3	Did you feel safe on your first night here?	n=147	75%	73%	75%	64%
3.4	In your first few days here, did you get:					
	- Access to the prison shop / canteen?	n=144	42%	41%	42%	17%
	- Free PIN phone credit?	n=141	56%	47%	56%	
	- Numbers put on your PIN phone?	n=131	44%	48%	44%	
3.5	Have you had an induction at this prison?	n=146	95%	95%	95%	86%
	<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	n=139	60%	55%	60%	

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Number of completed questionnaires returned

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HMP Brixton 2019	Prisoner category C training prisons surveyed since September 2017	HMP Brixton 2019	HMP Brixton 2017
151	3,441	151	173

ON THE WING						
4.1	Are you in a cell on your own?	n=150	23%	63%	23%	
4.2	Is your cell call bell normally answered within 5 minutes?	n=147	40%	30%	40%	14%
4.3	On the wing or houseblock you currently live on:					
	- Do you normally have enough clean, suitable clothes for the week?	n=148	82%	68%	82%	59%
	- Can you shower every day?	n=147	91%	89%	91%	61%
	- Do you have clean sheets every week?	n=147	79%	64%	79%	64%
	- Do you get cell cleaning materials every week?	n=146	69%	58%	69%	55%
	- Is it normally quiet enough for you to relax or sleep at night?	n=146	69%	67%	69%	54%
	- Can you get your stored property if you need it?	n=147	26%	25%	26%	11%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	n=147	49%	60%	49%	
FOOD AND CANTEEN						
5.1	Is the quality of the food in this prison very / quite good?	n=149	86%	39%	86%	
5.2	Do you get enough to eat at meal-times always / most of the time?	n=150	59%	34%	59%	
5.3	Does the shop / canteen sell the things that you need?	n=148	74%	61%	74%	36%
RELATIONSHIPS WITH STAFF						
6.1	Do most staff here treat you with respect?	n=147	72%	68%	72%	65%
6.2	Are there any staff here you could turn to if you had a problem?	n=148	78%	69%	78%	61%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	n=150	53%	29%	53%	20%
6.4	Do you have a personal officer?	n=148	93%	83%	93%	
	<i>For those who have a personal officer:</i>					
6.4	Is your personal or named officer very / quite helpful?	n=138	67%	45%	67%	
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	n=147	7%	10%	7%	
6.6	Do you feel that you are treated as an individual in this prison?	n=145	42%	42%	42%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	n=148	57%	51%	57%	
	If so, do things sometimes change?	n=85	41%	31%	41%	
FAITH						
7.1	Do you have a religion?	n=143	83%	68%	83%	82%
	<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	n=120	73%	70%	73%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	n=122	55%	70%	55%	
7.4	Are you able to attend religious services, if you want to?	n=122	88%	88%	88%	

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HMP Brixton 2019	For other category C training prisons surveyed since September 2017
151	3,441

HMP Brixton 2019	HMP Brixton 2017
151	173

**Number of completed questionnaires returned**

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

<b>CONTACT WITH FAMILY AND FRIENDS</b>					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	<i>n=148</i>	48%	26%	48%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	<i>n=147</i>	44%	59%	44%
8.3	Are you able to use a phone every day (if you have credit)?	<i>n=144</i>	92%	88%	92%
8.4	Is it very / quite easy for your family and friends to get here?	<i>n=147</i>	56%	34%	56%
8.5	Do you get visits from family/friends once a week or more?	<i>n=145</i>	20%	17%	20%
<i>For those who get visits:</i>					
8.6	Do visits usually start and finish on time?	<i>n=106</i>	63%	49%	63%
8.7	Are your visitors usually treated respectfully by staff?	<i>n=103</i>	78%	74%	78%
<b>TIME OUT OF CELL</b>					
9.1	Do you know what the unlock and lock-up times are supposed to be here?	<i>n=143</i>	93%	91%	93%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>					
9.1	Are these times usually kept to?	<i>n=133</i>	58%	56%	58%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	<i>n=143</i>	12%	17%	12%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	<i>n=143</i>	6%	8%	6%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	<i>n=143</i>	30%	21%	30%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	<i>n=143</i>	4%	3%	4%
9.4	Do you have time to do domestics more than 5 days in a typical week?	<i>n=145</i>	59%	57%	59%
9.5	Do you get association more than 5 days in a typical week, if you want it?	<i>n=145</i>	72%	65%	72%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	<i>n=146</i>	60%	66%	60%
9.7	Do you typically go to the gym twice a week or more?	<i>n=146</i>	60%	53%	60%
9.8	Do you typically go to the library once a week or more?	<i>n=141</i>	49%	49%	49%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	<i>n=85</i>	58%	57%	58%
<b>APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS</b>					
10.1	Is it easy for you to make an application?	<i>n=146</i>	75%	73%	75%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	<i>n=127</i>	56%	49%	56%
	Are applications usually dealt with within 7 days?	<i>n=126</i>	39%	36%	39%
10.3	Is it easy for you to make a complaint?	<i>n=147</i>	67%	62%	67%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	<i>n=87</i>	35%	30%	35%
	Are complaints usually dealt with within 7 days?	<i>n=83</i>	21%	25%	21%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	<i>n=105</i>	28%	28%	28%

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

Number of completed questionnaires returned

HMP Brixton 2019	Prisoner category C training prisons surveyed since September 2017	HMP Brixton 2019	HMP Brixton 2017
151	3,441	151	173

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

<i>For those who need it, is it easy to:</i>						
10.6	Communicate with your solicitor or legal representative?	n=115	38%	40%	38%	
	Attend legal visits?	n=111	54%	48%	54%	
	Get bail information?	n=91	19%	16%	19%	
<i>For those who have had legal letters:</i>						
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=99	54%	58%	54%	49%
<b>HEALTH CARE</b>						
11.1	Is it very / quite easy to see:					
	- Doctor?	n=145	37%	31%	37%	
	- Nurse?	n=144	63%	51%	63%	
	- Dentist?	n=144	19%	15%	19%	
	- Mental health workers?	n=143	32%	23%	32%	
11.2	Do you think the quality of the health service is very / quite good from:					
	- Doctor?	n=142	57%	47%	57%	
	- Nurse?	n=140	66%	57%	66%	
	- Dentist?	n=137	42%	34%	42%	
	- Mental health workers?	n=138	39%	28%	39%	
11.3	Do you have any mental health problems?	n=141	48%	44%	48%	
<i>For those who have mental health problems:</i>						
11.4	Have you been helped with your mental health problems in this prison?	n=68	47%	41%	47%	
11.5	Do you think the overall quality of the health services here is very / quite good?	n=142	53%	42%	53%	
<b>OTHER SUPPORT NEEDS</b>						
12.1	Do you consider yourself to have a disability?	n=141	33%	34%	33%	29%
<i>For those who have a disability:</i>						
12.2	Are you getting the support you need?	n=44	36%	31%	36%	
12.3	Have you been on an ACCT in this prison?	n=141	17%	16%	17%	
<i>For those who have been on an ACCT:</i>						
12.4	Did you feel cared for by staff?	n=23	65%	43%	65%	
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=142	49%	38%	49%	
<b>ALCOHOL AND DRUGS</b>						
13.1	Did you have an alcohol problem when you came into this prison?	n=144	17%	14%	17%	17%
<i>For those who had / have an alcohol problem:</i>						
13.2	Have you been helped with your alcohol problem in this prison?	n=23	48%	51%	48%	73%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=144	25%	28%	25%	38%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=142	13%	17%	13%	20%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=142	10%	10%	10%	
<i>For those who had / have a drug problem:</i>						
13.6	Have you been helped with your drug problem in this prison?	n=38	45%	48%	45%	69%
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=141	30%	50%	30%	
13.8	Is it very / quite easy to get alcohol in this prison?	n=140	22%	33%	22%	

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Number of completed questionnaires returned

HMP Brixton 2019	Prisoner category C training prisoners surveyed since September 2017	HMP Brixton 2019	HMP Brixton 2017
151	3,441	151	173

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

SAFETY						
14.1	Have you ever felt unsafe here?	n=147	44%	48%	44%	60%
14.2	Do you feel unsafe now?	n=144	18%	23%	18%	29%
14.3	Have you experienced any of the following from other prisoners here:					
	- Verbal abuse?	n=136	33%	34%	33%	
	- Threats or intimidation?	n=136	24%	30%	24%	
	- Physical assault?	n=136	11%	18%	11%	
	- Sexual assault?	n=136	3%	2%	3%	
	- Theft of canteen or property?	n=136	17%	25%	17%	
	- Other bullying / victimisation?	n=136	16%	17%	16%	
	- Not experienced any of these from prisoners here	n=136	60%	54%	60%	
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	n=138	44%	32%	44%	
14.5	Have you experienced any of the following from staff here:					
	- Verbal abuse?	n=136	24%	30%	24%	
	- Threats or intimidation?	n=136	24%	23%	24%	
	- Physical assault?	n=136	6%	11%	6%	
	- Sexual assault?	n=136	1%	2%	1%	
	- Theft of canteen or property?	n=136	4%	9%	4%	
	- Other bullying / victimisation?	n=136	22%	17%	22%	
	- Not experienced any of these from staff here	n=136	63%	57%	63%	
14.6	If you were being bullied / victimised by staff here, would you report it?	n=139	55%	48%	55%	
BEHAVIOUR MANAGEMENT						
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	n=140	52%	39%	52%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	n=144	37%	37%	37%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	n=147	10%	13%	10%	10%
<i>For those who have been restrained in the last 6 months:</i>						
15.4	Did anyone come and talk to you about it afterwards?	n=13	31%	20%	31%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	n=145	9%	9%	9%	
<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>						
15.6	Were you treated well by segregation staff?	n=13	77%	57%	77%	
	Could you shower every day?	n=13	69%	76%	69%	
	Could you go outside for exercise every day?	n=12	67%	77%	67%	
	Could you use the phone every day (if you had credit)?	n=11	64%	66%	64%	

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HMP Brixton 2019	All other category C training prisons surveyed since September 2017	Number of completed questionnaires returned	
		151	3,441
HMP Brixton 2019	HMP Brixton 2017	151	173

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

EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	n=139	63%	62%	63%
	- Vocational or skills training?	n=136	40%	41%	40%
	- Prison job?	n=136	46%	47%	46%
	- Voluntary work outside of the prison?	n=136	5%	5%	5%
	- Paid work outside of the prison?	n=137	5%	4%	5%
16.2	In this prison, have you done the following activities:				
	- Education?	n=132	74%	80%	74%
	- Vocational or skills training?	n=131	57%	69%	57%
	- Prison job?	n=128	69%	81%	69%
	- Voluntary work outside of the prison?	n=125	28%	33%	28%
	- Paid work outside of the prison?	n=124	29%	33%	29%
<i>For those who have done the following activities, do you think they will help you on release:</i>					
	- Education?	n=97	53%	61%	53%
	- Vocational or skills training?	n=75	69%	66%	69%
	- Prison job?	n=88	42%	40%	42%
	- Voluntary work outside of the prison?	n=35	51%	53%	51%
	- Paid work outside of the prison?	n=36	64%	57%	64%
16.3	Do staff encourage you to attend education, training or work?			62%	60%
<b>PLANNING AND PROGRESSION</b>					
17.1	Do you have a custody plan?			45%	58%
<i>For those who have a custody plan:</i>					
17.2	Do you understand what you need to do to achieve your objectives or targets?			87%	83%
17.3	Are staff helping you to achieve your objectives or targets?			62%	43%
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	n=56	48%	49%	48%
	- Other programmes?	n=50	52%	42%	52%
	- One to one work?	n=53	53%	37%	53%
	- Been on a specialist unit?	n=50	38%	19%	38%
	- ROTL - day or overnight release?	n=46	20%	14%	20%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>					
	- Offending behaviour programmes?	n=27	74%	70%	74%
	- Other programmes?	n=26	69%	65%	69%
	- One to one work?	n=28	71%	65%	71%
	- Being on a specialist unit?	n=19	42%	46%	42%
	- ROTL - day or overnight release?	n=9	44%	38%	44%



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	HMP Brixton 2019	HMP Brixton 2017
	151	173
	3,441	

Number of completed questionnaires returned

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

PREPARATION FOR RELEASE					
18.1	Do you expect to be released in the next 3 months?	n=144	40%	25%	40%
<i>For those who expect to be released in the next 3 months:</i>					
18.2	Is this prison very / quite near to your home area or intended release address?	n=55	56%	40%	56%
18.3	Is anybody helping you to prepare for your release?	n=57	58%	58%	58%
18.4	Do you need help to sort out the following for when you are released:				
	- Finding accommodation?	n=56	75%	62%	75%
	- Getting employment?	n=51	73%	62%	73%
	- Setting up education or training?	n=52	50%	48%	50%
	- Arranging benefits?	n=55	78%	67%	78%
	- Sorting out finances?	n=56	71%	56%	71%
	- Support for drug or alcohol problems?	n=55	35%	44%	35%
	- Health / mental Health support?	n=54	50%	50%	50%
	- Social care support?	n=54	37%	35%	37%
	- Getting back in touch with family or friends?	n=54	33%	39%	33%
18.4	Are you getting help to sort out the following for when you are released, if you need it:				
	- Finding accommodation?	n=42	36%	38%	36%
	- Getting employment?	n=37	30%	24%	30%
	- Setting up education or training?	n=26	31%	24%	31%
	- Arranging benefits?	n=43	40%	29%	40%
	- Sorting out finances?	n=40	23%	25%	23%
	- Support for drug or alcohol problems?	n=19	37%	51%	37%
	- Health / mental Health support?	n=27	33%	31%	33%
	- Social care support?	n=20	25%	24%	25%
	- Getting back in touch with family or friends?	n=18	39%	32%	39%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	n=136	55%	49%	55%

## HMP Brixton 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.

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
74	72	31	112

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	27%	10%	32%	16%
	Are you 50 years of age or older?	11%	29%	3%	25%
1.3	Are you from a minority ethnic group?			87%	39%
7.1	Are you Muslim?	38%	6%		
11.3	Do you have any mental health problems?	44%	54%	39%	50%
12.1	Do you consider yourself to have a disability?	25%	43%	21%	35%
19.2	Are you a foreign national?	3%	4%	7%	3%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	3%	4%	3%	4%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	82%	79%	70%	83%
2.4	Overall, were you treated very / quite well in reception?	84%	86%	74%	88%
2.5	When you first arrived, did you have any problems?	80%	77%	81%	78%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	38%	36%	28%	41%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	66%	83%	59%	79%
3.5	Have you had an induction at this prison?	99%	92%	97%	95%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	54%	65%	46%	65%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	43%	38%	32%	43%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	81%	85%	77%	85%
	- Can you shower every day?	88%	94%	77%	95%
	- Do you have clean sheets every week?	77%	80%	74%	80%
	- Do you get cell cleaning materials every week?	63%	73%	53%	73%
	- Is it normally quiet enough for you to relax or sleep at night?	70%	67%	73%	69%
	- Can you get your stored property if you need it?	23%	29%	19%	28%

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Number of completed questionnaires returned

Black and minority ethnic	White
74	72

Muslim	Non-Muslim
31	112

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	55%	63%
5.3	Does the shop / canteen sell the things that you need?	64%	85%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	69%	76%
6.2	Are there any staff here you could turn to if you had a problem?	77%	81%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	50%	57%
6.6	Do you feel that you are treated as an individual in this prison?	36%	46%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	79%	65%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	60%	50%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	45%	54%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	51%	37%
8.3	Are you able to use a phone every day (if you have credit)?	87%	96%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	72%	85%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	16%	7%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	9%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	51%	63%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	78%	73%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	55%	57%
10.3	Is it easy for you to make a complaint?	62%	72%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	30%	38%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	38%	17%

52%	64%
68%	79%
60%	76%
71%	81%
32%	60%
32%	45%
67%	74%
55%	57%
40%	51%
48%	42%
86%	93%
58%	85%
13%	11%
0%	8%
50%	62%
70%	77%
44%	59%
57%	70%
31%	35%
38%	23%

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Number of completed questionnaires returned

	Black and minority ethnic	White		Muslim	Non-Muslim
	74	72		31	112

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	37%	36%	21%	41%
	- Nurse?	59%	67%	55%	64%
	- Dentist?	16%	22%	7%	21%
	- Mental health workers?	21%	42%	14%	38%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	37%	57%	9%	56%
11.5	Do you think the overall quality of the health services here is very / quite good?	56%	50%	48%	53%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	38%	36%	33%	40%
SAFETY					
14.1	Have you ever felt unsafe here?	51%	37%	50%	39%
14.2	Do you feel unsafe now?	21%	15%	13%	20%
14.3	Not experienced bullying / victimisation by other prisoners	63%	57%	78%	57%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	41%	47%	32%	47%
14.5	Not experienced bullying / victimisation by members of staff	56%	68%	44%	69%
14.6	If you were being bullied / victimised by staff here, would you report it?	50%	58%	29%	62%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	52%	53%	43%	54%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	32%	44%	21%	43%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	14%	6%	17%	7%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	14%	3%	11%	8%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	61%	63%	48%	64%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	49%	40%	43%	44%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	67%	58%	42%	65%
PREPARATION FOR RELEASE					
<i>For those who expect to be released in the next 3 months:</i>					
18.3	Is anybody helping you to prepare for your release?	69%	46%	78%	52%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	56%	58%	46%	56%

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

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

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Number of completed questionnaires returned

Mental health problems	No mental health problems	Have a disability	Do not have a disability
68	73	46	95

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	16%	22%	13%	22%
	Are you 50 years of age or older?	9%	29%	28%	15%
1.3	Are you from a minority ethnic group?	45%	56%	37%	57%
7.1	Are you Muslim?	17%	24%	14%	24%
11.3	Do you have any mental health problems?			74%	36%
12.1	Do you consider yourself to have a disability?	51%	17%		
19.2	Are you a foreign national?	2%	4%	2%	3%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	5%	3%	9%	1%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	83%	77%	80%	79%
2.4	Overall, were you treated very / quite well in reception?	81%	89%	80%	86%
2.5	When you first arrived, did you have any problems?	91%	66%	94%	70%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	39%	33%	33%	39%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	70%	78%	76%	72%
3.5	Have you had an induction at this prison?	95%	96%	96%	96%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	60%	61%	58%	61%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	32%	45%	39%	40%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	72%	90%	67%	89%
	- Can you shower every day?	88%	93%	89%	91%
	- Do you have clean sheets every week?	73%	83%	78%	77%
	- Do you get cell cleaning materials every week?	64%	75%	62%	72%
	- Is it normally quiet enough for you to relax or sleep at night?	59%	76%	61%	72%
	- Can you get your stored property if you need it?	20%	31%	31%	23%

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

Number of completed questionnaires returned

	Mental health problems	No mental health problems	Have a disability	Do not have a disability
	<b>68</b>	<b>73</b>	<b>46</b>	<b>95</b>

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	<b>50%</b>	<b>66%</b>	<b>54%</b>	<b>61%</b>
5.3	Does the shop / canteen sell the things that you need?	<b>66%</b>	<b>80%</b>	<b>69%</b>	<b>75%</b>
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	<b>64%</b>	<b>79%</b>	<b>67%</b>	<b>74%</b>
6.2	Are there any staff here you could turn to if you had a problem?	<b>75%</b>	<b>79%</b>	<b>76%</b>	<b>78%</b>
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<b>49%</b>	<b>58%</b>	<b>52%</b>	<b>55%</b>
6.6	Do you feel that you are treated as an individual in this prison?	<b>42%</b>	<b>41%</b>	<b>46%</b>	<b>40%</b>
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	<b>65%</b>	<b>75%</b>	<b>73%</b>	<b>70%</b>
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	<b>58%</b>	<b>51%</b>	<b>65%</b>	<b>47%</b>
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	<b>52%</b>	<b>43%</b>	<b>50%</b>	<b>47%</b>
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	<b>46%</b>	<b>44%</b>	<b>42%</b>	<b>46%</b>
8.3	Are you able to use a phone every day (if you have credit)?	<b>95%</b>	<b>90%</b>	<b>96%</b>	<b>91%</b>
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	<b>77%</b>	<b>78%</b>	<b>78%</b>	<b>78%</b>
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	<b>11%</b>	<b>15%</b>	<b>18%</b>	<b>10%</b>
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	<b>6%</b>	<b>6%</b>	<b>7%</b>	<b>6%</b>
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	<b>45%</b>	<b>68%</b>	<b>48%</b>	<b>60%</b>
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	<b>69%</b>	<b>79%</b>	<b>76%</b>	<b>75%</b>
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	<b>48%</b>	<b>63%</b>	<b>43%</b>	<b>60%</b>
10.3	Is it easy for you to make a complaint?	<b>67%</b>	<b>70%</b>	<b>80%</b>	<b>63%</b>
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	<b>32%</b>	<b>38%</b>	<b>27%</b>	<b>40%</b>
10.5	Have you ever been prevented from making a complaint here when you wanted to?	<b>31%</b>	<b>24%</b>	<b>29%</b>	<b>27%</b>

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Number of completed questionnaires returned

	Mental health problems	No mental health problems	Have a disability	Do not have a disability
	68	73	46	95

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	39%	37%	41%	35%
	- Nurse?	66%	58%	76%	55%
	- Dentist?	21%	17%	22%	17%
	- Mental health workers?	41%	26%	44%	27%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	48%		64%	29%
11.5	Do you think the overall quality of the health services here is very / quite good?	48%	56%	54%	51%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	41%	25%	36%	
SAFETY					
14.1	Have you ever felt unsafe here?	46%	41%	46%	42%
14.2	Do you feel unsafe now?	24%	14%	27%	15%
14.3	Not experienced bullying / victimisation by other prisoners	51%	68%	48%	64%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	44%	41%	54%	37%
14.5	Not experienced bullying / victimisation by members of staff	52%	72%	49%	69%
14.6	If you were being bullied / victimised by staff here, would you report it?	56%	54%	61%	52%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	49%	54%	47%	54%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	33%	39%	35%	39%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	15%	6%	15%	7%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	14%	6%	9%	10%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	55%	67%	60%	63%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	39%	50%	40%	46%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	68%	58%	71%	59%
PREPARATION FOR RELEASE					
<i>For those who expect to be released in the next 3 months:</i>					
18.3	Is anybody helping you to prepare for your release?	63%	50%	53%	58%
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%	57%	52%	58%

## HMP Brixton 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.

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Number of completed questionnaires returned

25 and under	Over 25	50 and over	Under 50
29	121	29	121

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	0%			0%
	Are you 70 years of age or older?		4%	17%	
1.3	Are you from a minority ethnic group?	74%	45%	28%	56%
7.1	Are you Muslim?	36%	18%	3%	26%
11.3	Do you have any mental health problems?	41%	50%	22%	54%
12.1	Do you consider yourself to have a disability?	22%	35%	48%	29%
19.2	Are you a foreign national?	7%	3%	7%	3%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	7%	3%	3%	3%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	69%	83%	82%	80%
2.4	Overall, were you treated very / quite well in reception?	76%	88%	93%	84%
2.5	When you first arrived, did you have any problems?	86%	76%	79%	78%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	25%	41%	48%	36%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	71%	76%	83%	73%
3.5	Have you had an induction at this prison?	96%	95%	90%	97%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	54%	61%	50%	62%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	35%	42%	43%	40%
4.3					
	- Do you normally have enough clean, suitable clothes for the week?	75%	84%	86%	82%
	- Can you shower every day?	86%	92%	96%	89%
	- Do you have clean sheets every week?	69%	81%	90%	76%
	- Do you get cell cleaning materials every week?	45%	74%	75%	67%
	- Is it normally quiet enough for you to relax or sleep at night?	75%	67%	71%	68%
	- Can you get your stored property if you need it?	17%	28%	45%	21%



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

Number of completed questionnaires returned

25 and under	Over 25
29	121

50 and over	Under 50
29	121

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	45%	63%
5.3	Does the shop / canteen sell the things that you need?	68%	76%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	57%	76%
6.2	Are there any staff here you could turn to if you had a problem?	69%	81%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	38%	57%
6.6	Do you feel that you are treated as an individual in this prison?	28%	46%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	58%	76%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	33%	60%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	31%	52%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	62%	40%
8.3	Are you able to use a phone every day (if you have credit)?	86%	93%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	71%	80%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	25%	9%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	0%	7%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	55%	58%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	68%	77%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	35%	61%
10.3	Is it easy for you to make a complaint?	54%	70%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	31%	35%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	21%	29%

83%	54%
86%	71%
86%	69%
83%	77%
62%	51%
44%	42%
76%	72%
64%	53%
55%	46%
43%	45%
93%	91%
94%	75%
7%	13%
14%	4%
80%	53%
86%	73%
58%	55%
79%	64%
28%	36%
24%	29%

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

Number of completed questionnaires returned

25 and under	Over 25
29	121

50 and over	Under 50
29	121

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	26%	40%
	- Nurse?	33%	69%
	- Dentist?	15%	20%
	- Mental health workers?	25%	34%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	55%	46%
11.5	Do you think the overall quality of the health services here is very / quite good?	44%	55%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	50%	34%
SAFETY			
14.1	Have you ever felt unsafe here?	50%	42%
14.2	Do you feel unsafe now?	19%	18%
14.3	Not experienced bullying / victimisation by other prisoners	69%	57%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	19%	49%
14.5	Not experienced bullying / victimisation by members of staff	54%	65%
14.6	If you were being bullied / victimised by staff here, would you report it?	39%	58%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	42%	54%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	25%	40%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	14%	8%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	18%	7%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	52%	64%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	39%	46%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	64%	62%
PREPARATION FOR RELEASE			
<i>For those who expect to be released in the next 3 months:</i>			
18.3	Is anybody helping you to prepare for your release?	39%	63%
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?	39%	58%

43%	36%
67%	62%
19%	19%
19%	35%
50%	47%
56%	52%
39%	36%
29%	47%
15%	19%
56%	61%
74%	36%
70%	61%
78%	49%
54%	52%
55%	32%
0%	12%
0%	11%
75%	59%
44%	45%
58%	63%
53%	59%
62%	54%

## HMP Brixton 2019

### Comparison of survey responses from different residential locations

In this table responses from the vulnerable prisoner unit (G wing) are compared with those from the rest of the establishment (A, B, C, D wings and LPU).

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Number of completed questionnaires returned

Vulnerable prisoner unit (G wing)	Rest of the establishment (A, B, C, D wings and LPU)
48	103

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	0%
	Are you 25 years of age or younger?	2%	28%
	Are you 50 years of age or older?	40%	10%
	Are you 70 years of age or older?	8%	1%
1.3	Are you from a minority ethnic group?	27%	62%
1.4	Have you been in this prison for less than 6 months?	52%	46%
1.5	Are you currently serving a sentence?	96%	100%
	Are you on recall?	4%	7%
1.6	Is your sentence less than 12 months?	19%	10%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	2%	2%
7.1	Are you Muslim?	13%	26%
11.3	Do you have any mental health problems?	51%	47%
12.1	Do you consider yourself to have a disability?	41%	28%
19.1	Do you have any children under the age of 18?	25%	58%
19.2	Are you a foreign national?	4%	3%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	2%	4%
19.4	Have you ever been in the armed services?	13%	3%
19.5	Is your gender female or non-binary?	2%	2%
19.6	Are you homosexual, bisexual or other sexual orientation?	9%	3%
19.7	Do you identify as transgender or transsexual?	2%	1%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	13%	18%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	48%	47%
2.3	When you were searched in reception, was this done in a respectful way?	81%	80%
2.4	Overall, were you treated very / quite well in reception?	85%	85%

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Number of completed questionnaires returned

Vulnerable prisoner unit (G wing)	48	Rest of the establishment (A, B, C, D wings and LPU)	103
-----------------------------------	----	--	-----

2.5	When you first arrived, did you have any problems?	81%	77%
2.5	Did you have problems with:		
	- Getting phone numbers?	26%	24%
	- Contacting family?	21%	26%
	- Arranging care for children or other dependents?	0%	2%
	- Contacting employers?	2%	4%
	- Money worries?	13%	15%
	- Housing worries?	17%	22%
	- Feeling depressed?	40%	31%
	- Feeling suicidal?	9%	4%
	- Other mental health problems?	23%	17%
	- Physical health problems?	28%	11%
	- Drugs or alcohol (e.g. withdrawal)?	2%	6%
	- Getting medication?	17%	15%
	- Needing protection from other prisoners?	4%	4%
	- Lost or delayed property?	15%	28%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	45%	35%
<b>FIRST NIGHT AND INDUCTION</b>			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	54%	70%
	- Toiletries / other basic items?	52%	56%
	- A shower?	33%	34%
	- A free phone call?	23%	65%
	- Something to eat?	79%	77%
	- The chance to see someone from health care?	54%	64%
	- The chance to talk to a Listener or Samaritans?	31%	21%
	- Support from another prisoner (e.g. Insider or buddy)?	23%	27%
	- None of these?	6%	5%
3.2	On your first night in this prison, was your cell very / quite clean?	53%	27%
3.3	Did you feel safe on your first night here?	81%	72%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	47%	39%
	- Free PIN phone credit?	29%	68%
	- Numbers put on your PIN phone?	44%	45%
3.5	Have you had an induction at this prison?	98%	94%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	63%	58%

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Number of completed questionnaires returned

Vulnerable prisoner unit (C wing)	48	Rest of the establishment (A, B, C, D wings and LPU)	103
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ON THE WING			
4.1	Are you in a cell on your own?	35%	17%
4.2	Is your cell call bell normally answered within 5 minutes?	53%	34%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	90%	79%
	- Can you shower every day?	96%	88%
	- Do you have clean sheets every week?	83%	77%
	- Do you get cell cleaning materials every week?	75%	66%
	- Is it normally quiet enough for you to relax or sleep at night?	62%	72%
	- Can you get your stored property if you need it?	28%	25%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	49%	49%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	90%	84%
5.2	Do you get enough to eat at meal-times always / most of the time?	67%	56%
5.3	Does the shop / canteen sell the things that you need?	89%	67%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	77%	70%
6.2	Are there any staff here you could turn to if you had a problem?	85%	75%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	63%	49%
6.4	Do you have a personal officer?	94%	93%
<i>For those who have a personal officer:</i>			
6.4	Is your personal or named officer very / quite helpful?	73%	65%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	2%	9%
6.6	Do you feel that you are treated as an individual in this prison?	44%	41%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	57%	57%
	If so, do things sometimes change?	41%	41%
FAITH			
7.1	Do you have a religion?	72%	88%
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	71%	73%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	53%	56%
7.4	Are you able to attend religious services, if you want to?	85%	89%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	55%	45%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	33%	49%
8.3	Are you able to use a phone every day (if you have credit)?	98%	89%
8.4	Is it very / quite easy for your family and friends to get here?	38%	64%
8.5	Do you get visits from family/friends once a week or more?	11%	24%
<i>For those who get visits:</i>			
8.6	Do visits usually start and finish on time?	61%	64%
8.7	Are your visitors usually treated respectfully by staff?	82%	77%

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Number of completed questionnaires returned

	Vulnerable prisoner unit (G wing)	Rest of the establishment (A, B, C, D wings and LPU)
Number of completed questionnaires returned	48	103

TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	91%	94%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
9.1	Are these times usually kept to?	50%	61%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	7%	14%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	13%	2%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	18%	35%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	11%	0%
9.4	Do you have time to do domestics more than 5 days in a typical week?	67%	55%
9.5	Do you get association more than 5 days in a typical week, if you want it?	76%	71%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	56%	61%
9.7	Do you typically go to the gym twice a week or more?	46%	67%
9.8	Do you typically go to the library once a week or more?	41%	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?	58%	58%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	83%	72%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	51%	58%
	Are applications usually dealt with within 7 days?	39%	39%
10.3	Is it easy for you to make a complaint?	79%	61%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	35%	35%
	Are complaints usually dealt with within 7 days?	28%	17%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	17%	33%

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Number of completed questionnaires returned

Vulnerable prisoner unit (G wing)	48
Rest of the establishment (A, B, C, D wings and LPU)	103

<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	31%	41%
	Attend legal visits?	47%	57%
	Get bail information?	12%	21%
<i>For those who have had legal letters:</i>			
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	47%	57%
<b>HEALTH CARE</b>			
11.1	Is it very / quite easy to see:		
	- Doctor?	36%	38%
	- Nurse?	67%	60%
	- Dentist?	22%	17%
	- Mental health workers?	38%	30%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	63%	54%
	- Nurse?	72%	64%
	- Dentist?	44%	42%
	- Mental health workers?	50%	34%
11.3	Do you have any mental health problems?	51%	47%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	61%	40%
11.5	Do you think the overall quality of the health services here is very / quite good?	53%	53%
<b>OTHER SUPPORT NEEDS</b>			
12.1	Do you consider yourself to have a disability?	41%	28%
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	32%	40%
12.3	Have you been on an ACCT in this prison?	13%	19%
<i>For those who have been on an ACCT:</i>			
12.4	Did you feel cared for by staff?	80%	61%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	63%	43%
<b>ALCOHOL AND DRUGS</b>			
13.1	Did you have an alcohol problem when you came into this prison?	13%	18%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	50%	47%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	22%	27%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	4%	17%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	7%	12%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	56%	41%
13.7	Is it very / quite easy to get illicit drugs in this prison?	26%	32%
13.8	Is it very / quite easy to get alcohol in this prison?	28%	19%

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Number of completed questionnaires returned

Vulnerable prisoner unit (G wing)	48	Rest of the establishment (A, B, C, D wings and LPU)	103
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SAFETY			
14.1	Have you ever felt unsafe here?	34%	48%
14.2	Do you feel unsafe now?	21%	17%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	39%	30%
	- Threats or intimidation?	26%	23%
	- Physical assault?	4%	14%
	- Sexual assault?	4%	2%
	- Theft of canteen or property?	13%	19%
	- Other bullying / victimisation?	26%	11%
	- Not experienced any of these from prisoners here	59%	60%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	75%	28%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	13%	30%
	- Threats or intimidation?	16%	29%
	- Physical assault?	0%	9%
	- Sexual assault?	2%	0%
	- Theft of canteen or property?	0%	6%
	- Other bullying / victimisation?	20%	23%
	- Not experienced any of these from staff here	69%	59%
14.6	If you were being bullied / victimised by staff here, would you report it?	76%	44%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	59%	49%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	44%	33%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	2%	13%
	<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%	33%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	2%	12%
	<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?	0%	83%
	Could you shower every day?	0%	75%
	Could you go outside for exercise every day?	0%	73%
	Could you use the phone every day (if you had credit)?	0%	70%



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Number of completed questionnaires returned

Vulnerable prisoner unit (C wing)	48	Rest of the establishment (A, B, C, D wings and LPU)	103
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EDUCATION, SKILLS AND WORK			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	54%	67%
	- Vocational or skills training?	24%	48%
	- Prison job?	36%	52%
	- Voluntary work outside of the prison?	0%	8%
	- Paid work outside of the prison?	0%	8%
16.2	In this prison, have you done the following activities:		
	- Education?	75%	73%
	- Vocational or skills training?	46%	62%
	- Prison job?	71%	67%
	- Voluntary work outside of the prison?	17%	33%
	- Paid work outside of the prison?	22%	33%
<i>For those who have done the following activities, do you think they will help you on release:</i>			
	- Education?	55%	52%
	- Vocational or skills training?	53%	75%
	- Prison job?	43%	41%
	- Voluntary work outside of the prison?	57%	50%
	- Paid work outside of the prison?	78%	59%
16.3	Do staff encourage you to attend education, training or work?	61%	62%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	35%	49%
<i>For those who have a custody plan:</i>			
17.2	Do you understand what you need to do to achieve your objectives or targets?	80%	89%
17.3	Are staff helping you to achieve your objectives or targets?	53%	65%
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	33%	54%
	- Other programmes?	29%	61%
	- One to one work?	47%	55%
	- Been on a specialist unit?	21%	44%
	- ROTL - day or overnight release?	7%	25%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>			
	- Offending behaviour programmes?	80%	73%
	- Other programmes?	75%	68%
	- One to one work?	71%	71%
	- Being on a specialist unit?	0%	50%
	- ROTL - day or overnight release?	0%	50%

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PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	38%	42%
<i>For those who expect to be released in the next 3 months:</i>			
18.2	Is this prison very / quite near to your home area or intended release address?	38%	64%
18.3	Is anybody helping you to prepare for your release?	71%	53%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	83%	71%
	- Getting employment?	71%	74%
	- Setting up education or training?	47%	51%
	- Arranging benefits?	94%	70%
	- Sorting out finances?	72%	71%
	- Support for drug or alcohol problems?	28%	38%
	- Health / mental Health support?	59%	46%
	- Social care support?	24%	43%
	- Getting back in touch with family or friends?	29%	35%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	40%	33%
	- Getting employment?	25%	32%
	- Setting up education or training?	25%	33%
	- Arranging benefits?	35%	42%
	- Sorting out finances?	23%	22%
	- Support for drug or alcohol problems?	40%	36%
	- Health / mental Health support?	20%	41%
	- Social care support?	0%	31%
	- Getting back in touch with family or friends?	60%	31%
FINAL QUESTION ABOUT THIS PRISON			
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	64%	51%