

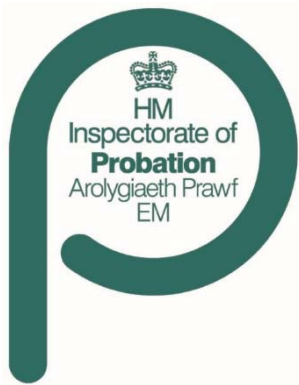
Report on an unannounced inspection of

# **HMP Forest Bank**

by HM Chief Inspector of Prisons

**13, 14, 20 – 24 May 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.justiceinspectors.gov.uk/hmiprisons/about-our-inspections/>

# Introduction

Forest Bank is a category B local prison in Salford, Greater Manchester, with an operational capacity of 1,460. Soon to be designated a reception prison, Forest Bank's main function is to serve the local courts and receive newly remanded or newly convicted prisoners from the community. As such the prison holds the full range and type of prisoner with all the risks and challenges that implies. Opening in 2000, the prison is relatively modern and has for the last 19 years been managed by the private operator, Sodexo.

Forest Bank was last inspected in 2016 when we found a well-led, competent and confident prison that was ensuring reasonably good or better outcomes against all four of our healthy prison tests. At this inspection we reported broadly similar outcomes, although a deterioration of outcomes in safety was evident.

Reception and induction arrangements were adequate and functional, although undermined by some tardy processes. Technology that had been acquired to improve security on reception was underused and the whole early days experience was something of a missed opportunity, which would have benefited from more management attention and grip.

A third of prisoners told us they felt unsafe, a situation that was even worse among vulnerable prisoners where the finding was 52%. Violence had more than doubled since our last inspection in 2016, and much of it was serious. Structures were in place to analyse and combat the problem and there were interventions to confront perpetrators, but actions were not always followed to a conclusion and low level antisocial behaviour was not addressed sufficiently. There needed to be greater focus and coordination to address violence, by, for example, incentivising good behaviour and consistently holding to account those who behaved poorly.

Use of force was more prevalent and at a level now comparable with similar prisons. Incidents were properly recorded in documentation, although oversight was lacklustre and limited use was made of body-worn camera footage. Use of segregation had also risen and it too was now comparable to similar prisons. Cellular accommodation in the segregation unit required improvement, as did the very basic regime and reintegration arrangements.

Security generally was applied proportionately, and we identified the management and use of intelligence as a strength of the establishment. Close working relationships with local police and robust staff anti-corruption arrangements were also in place. Many prisoners suggested to us that access to drugs was comparatively easy, although, while still too high, positive mandatory drug test data of about 15% was lower than at most similar prisons.

Self-harm had increased significantly since we last inspected and was much higher than we expected to see. There had also sadly been one self-inflicted death. The prison had access to good data concerning the problem of self-harm, and recommendations made by the Prisons and Probation Ombudsman, who investigated the death, were being implemented. Some improvements had been made to case management support (ACCT) processes, although a good scheme to invite families to case management reviews was only used intermittently.

Relationships between staff and prisoners were respectful and polite. However, we were concerned that staff, many of whom were very inexperienced, did not assert sufficient authority when supervising prisoners, with the danger that some prisoner groups were able to take advantage. Most prisoners were positive about most aspects of daily life at Forest Bank – for example, the food and good access to the shop – and accommodation was generally clean and bright. However, some 60% of single cells were doubled up and therefore overcrowded, and much furniture and cell equipment was damaged or missing. We also saw some cells with broken windows and there was some evidence of delays in responding to cell call bells.

Diversity and equality was promoted reasonably well through a comprehensive action plan and helpful consultation, including innovative one-to-one surgeries for prisoners with protected characteristics. Follow-up action on identified inequalities or disproportionalities was, however, often lacking. Health services had improved since the last inspection, although more improvements were still needed to make the inpatient facility a fully therapeutic environment.

Time out of cell was better than we often see and the daily routine, including access to evening association, was reliable, although nearly half the population was locked up during the working day. There were sufficient places in work and education for all and attendance, if not punctuality, were good. We were not confident, however, that allocation to some wing roles was always equitable or fair. Our colleagues in Ofsted judged the overall effectiveness of education, skills and work as 'good'; a not insignificant achievement in a local prison. In keeping with how we have reported previously, rehabilitation and release planning continued to be a real strength of the prison. Assessment (OASys) and sentence management were reasonably good, and public protection arrangements robust, with the prison's whole approach to resettlement supported by strong community links. Support for family ties and engagement was similarly very positive.

Forest Bank continued to be a reasonably well ordered and settled prison delivering generally good outcomes. Prisoners could, for example, access a better regime than we normally see for this type of prison. Rehabilitation and resettlement work was consistently a strength. Overall this is an encouraging report, although we do identify more work to do in safety and in providing support to staff. We left the prison with a number of recommendations, which we hope will assist the process of improvement.

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

July 2019

# Fact page

## Task of the establishment

Category B local prison for adult and young adult men

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

Prisoners held at the time of inspection: 1,436

Baseline certified normal capacity: 1,064

In-use certified normal capacity: 1,064

Operational capacity: 1,460

## Notable features from this inspection

*90% of prisoners lived within 18 miles of the prison.*

*Almost 60% of prisoners were sharing a cell designed for one.*

*63% of prisoners said in our survey that they had mental health issues.*

*In 2018 there had been 600 completions of interventions to reduce the risk of reoffending.*

*Prisoners had access to evening association four days a week.*

*51% of prison officers had less than two years' experience, 37% had under 12 months.*

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

Private: Sodexo Justice Services

Physical health provider: Sodexo

Mental health provider: Sodexo/NHS England/Greater Manchester Health Foundation

Substance use treatment provider: Sodexo

Learning and skills provider: Sodexo

Community rehabilitation company (CRC): Purple Futures

Escort contractor: GeoAmey

## Prison group/Department

North-west

## Brief history

The prison was opened in 2000 under a 25-year private finance initiative contract to provide 800 places as a category B local prison. Spaces gradually increased to 1,160 before a 264-place extension was opened in November 2009. Following an increase in prison places, the establishment now holds 1,460 remand and sentenced adult males and remand and sentenced (up to 12 months) young adults aged 18 to 21.

<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**

Residential wings A–H

A1 Young adults

A2, B1, B2, C1 General

C2, D1, D2 Vulnerable prisoners

E1 First night and induction

E2, F1, F2 General

G1 Recovery wing

G2 Resettlement

H1 First night ISMS

H2 ISMS motivational unit

Health care inpatients (19)

**Name of director and date in post**

Matt Spencer, January 2015

**Independent Monitoring Board chair**

Joe Walker

**Date of last inspection**

February 2016



# 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:
- **key concerns and recommendations:** identify the issues of most importance to improving outcomes for prisoners and are designed to help establishments prioritise and address the most significant weaknesses in the treatment and conditions of prisoners.
  - **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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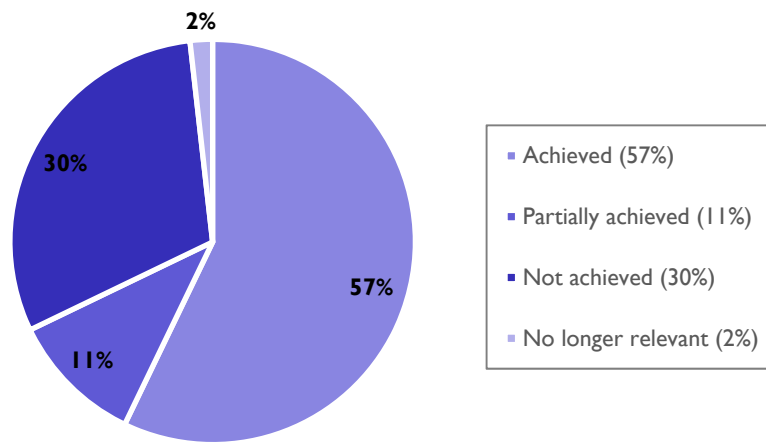
<sup>2</sup> <https://www.justiceinspectorates.gov.uk/hmiprison/our-expectations/prison-expectations/>

<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

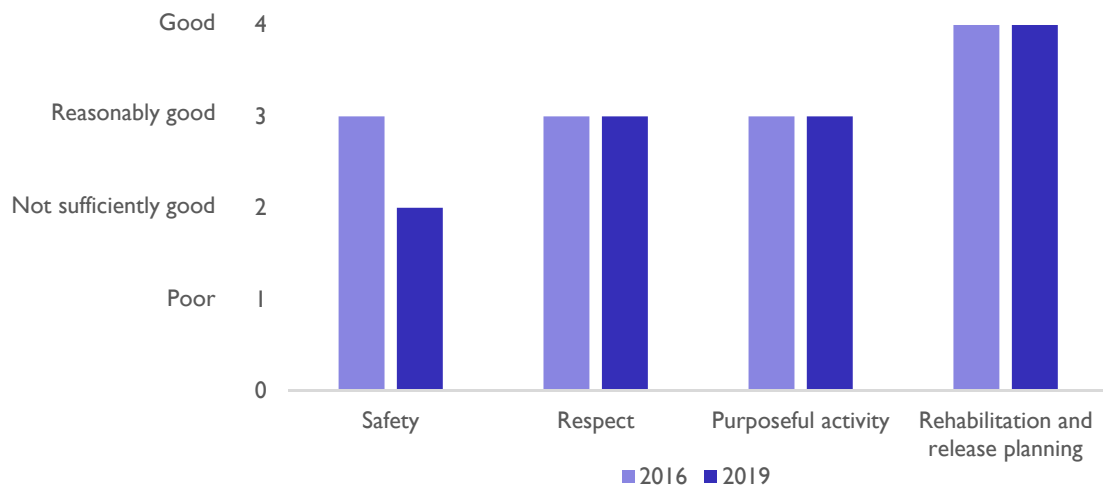
- S1 We last inspected HMP Forest Bank in 2016 and made 56 recommendations overall. The prison fully accepted 44 of the recommendations and partially (or subject to resources) accepted nine. It rejected three of the recommendations.
- S2 At this follow-up inspection we found that the prison had achieved 32 of those recommendations, partially achieved six recommendations and not achieved 17 recommendations. One recommendation was no longer relevant.

Figure 1: HMP Forest Bank progress on recommendations from last inspection (n=56)



- S3 Since our last inspection outcomes for prisoners stayed the same in all healthy prison areas apart from safety which had declined. Outcomes were reasonably good in the areas of respect and purposeful activity and good in the area of rehabilitation and release planning. Outcomes for prisoners in safety were not sufficiently good.

Figure 2: HMP Forest Bank healthy prison outcomes 2016 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** *Work to support prisoners in their early days was adequate. Levels of violence had doubled since the last inspection and were high. Too many vulnerable prisoners did not feel safe. CSIP was used to manage the most serious perpetrators. The incentives scheme focused too much on punitive measures to deal with most antisocial behaviour. Too many adjudications were not concluded. Governance procedures did not provide adequate assurance that the use of force was always justified. There were weaknesses in the management of prisoners in segregation. Security arrangements were well managed. Supply reduction measures were broadly effective and MDT rates were lower than comparators. Self-harm incidents had increased significantly and were much higher than in comparable prisons. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S5** *At the last inspection in 2016, we found that outcomes for prisoners in Forest Bank were reasonably good against this healthy prison test. We made 17 recommendations in the area of safety.<sup>5</sup> At this inspection we found that seven of the recommendations had been achieved and 10 had not been achieved.*
- S6** Movement time from court to reception had improved. There was a good range of modern technology to detect drugs and contraband being brought into the prison, but the body scanner was underused. Reception processes were functional and staff carried out appropriate risk assessments before moving prisoners to the induction wing, although some prisoners spent too long in reception. First night cells were not always ready for new prisoners and some lacked basic items of furniture such as cupboards. With the exception of young adults, there were no overnight welfare checks on new arrivals. The induction programme was very basic, with only a few modules, and prisoners spent too long locked up during the induction period. Fortunately, allocation to activities was swift for most.
- S7** A third of prisoners said they felt unsafe at the time of our inspection. Levels of violence had doubled since the last inspection, and much more was serious. A weekly safety meeting conducted a useful analysis of data, but actions were not always progressed. Violent incidents were investigated promptly and the most serious perpetrators of violence were managed through the challenge support intervention plan (CSIP) process. The incentives scheme focused too much on punitive measures and there was a lack of effective interventions to address lower level bullying and violence. A significant number of prisoners had been the victim of canteen theft. In our survey, 52% of vulnerable prisoners said they felt unsafe at the time of inspection. The risk assessment process to determine allocation to the vulnerable prisoners' unit on C2 was poor. The adjudication system was undermined by the high number of charges that were not concluded, which meant that some serious incidents went unpunished.
- S8** The use of force had increased significantly since our last inspection. Levels were, however, comparable to similar prisons. A monthly use of force meeting reviewed a range of data, which provided some strategic oversight. Use of force paperwork was completed within the required timescales and was completed to a very good standard. However, body-worn cameras were not switched on routinely and the scrutiny of all camera footage was limited. This did not provide managers with adequate assurance that the use of force was always justified.

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

- S9 The use of segregation had increased since our last inspection and was comparable with similar prisons. Communal areas were generally clean, but prisoners were being placed in dirty cells. The regime provided was basic. There was evidence of reintegration planning, but this was not well recorded.
- S10 The management of intelligence was good and intelligence objectives were well communicated. The positive mandatory drug testing rate, including NPS<sup>6</sup>, was lower than we find in similar prisons. Relationships with the police were positive and supported the prison's proactive approach to supply reduction. Work to prevent staff corruption was robust.
- S11 Self-harm incidents had increased significantly and were much higher than in comparable prisons. A monthly safety meeting provided a comprehensive breakdown of data. However, there was no evidence that the data analysis was used to inform an action plan to reduce self-harm. Improvements had been made to care maps in assessment, care in custody and teamwork (ACCT) documents, and more case reviews were better attended. Quality assurance procedures were weak.

## Respect

- S12 *Relationships between staff and prisoners were respectful but too few prisoners had a keyworker. Prisoners were generally positive about daily life. Shared cells were ill equipped for two people. Food was reasonable and the prison shop arrangements were excellent. General consultation arrangements were not effective. Prisoners valued wing kiosks and were positive about the applications process.<sup>7</sup> There were weaknesses in the management of complaints. Equality work was managed well and there was good support for prisoners with protected characteristics. Health services had improved since the last inspection and were good. The inpatient facility was not sufficiently therapeutic. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S13 *At the last inspection in 2016, we found that outcomes for prisoners in Forest Bank were reasonably good against this healthy prison test. We made 22 recommendations in the area of respect. At this inspection we found that 10 of the recommendations had been achieved, five had been partially achieved, six had not been achieved and one was no longer relevant.*

- S14 Relationships between staff and prisoners were respectful but on some wings authority lay disproportionately with cleaners and orderlies. Most staff had been trained as keyworkers. However, only about 25% of prisoners had an allocated keyworker, and not all sessions were being delivered as planned. A review of P-Nomis (prison service IT system) case notes and discussion with keyworkers demonstrated a lack of in-depth knowledge of individual prisoners.
- S15 In our survey, prisoners were more positive than in comparator prisons about most aspects of daily life. Communal areas were clean and bright, although communal showers were still not private enough. Around 60% of prisoners were sharing cells designed for one. There was not enough storage space for two people and no lockable cupboards. Most cells were clean but there were too many missing televisions and curtains, and toilet screening was inadequate. Some cells had broken windows. In our survey, only 23% of prisoners said their cell call bell was answered within five minutes and we witnessed some delays.

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

<sup>7</sup> Wing kiosks are electronic kiosks, which enable prisoners to deal with most day-to-day requests and transactions.

- S16 In our survey, more prisoners than in comparator prisons said the food was good, and we found the menu to be reasonable. Staff were not in control of servery arrangements and did not ensure that portion sizes were fair or that all health and hygiene practices were adhered to. Prisoners could have two shop orders every week and within 24 hours of arrival, which was excellent.
- S17 The monthly prisoner consultation meeting had an appropriate agenda, but little progress was evident. Prisoners valued the wing kiosks, which allowed them to take responsibility for organising important aspects of daily life such as booking visits and making applications. Prisoners were generally positive about the applications process. Complaint forms were not readily available on the wings. Replies to complaints were prompt, but the level of investigation was often inadequate and too many did not fully answer the issues raised. Legal rights arrangements were very good.
- S18 A comprehensive action plan was reviewed at the diversity and inclusion action team meeting every two months. There was good identification and support for prisoners with protected characteristics. The prison held regular consultative forums and innovative one-to-one surgeries. Eleven trained peer representatives provided additional support to protected groups.
- S19 Our survey identified some negative perceptions from prisoners from a black, Asian, and minority ethnic background. The prison's data monitoring system had identified disproportionality in some important areas, but there was little evidence of action to address this. Foreign national prisoners who spoke little English were disadvantaged by the absence of translated material and limited use of telephone interpreting services. However, support for young prisoners was better than we see in similar establishments. Two dedicated case workers provided one-to-one and group interventions for younger prisoners alongside support from community agencies. The chaplaincy was well led and integrated across the prison. It carried out all core tasks and provided good support to prisoners.
- S20 Health services had improved since the last inspection. Assurance systems were tighter and developments were evident. Prisoners continued to have access to an appropriate range of primary care services with acceptable waiting times. Long-term conditions were well managed. However, the range of clinical services had outgrown the clinical facilities available. Although basic care in the inpatient unit had improved, the physical environment remained poor and the range of therapeutic activities was insufficient. Social care arrangements were well established. Primary mental health support for prisoners with mild to moderate needs had improved significantly since the last inspection, and secondary mental health care remained good. Integrated substance misuse services continued to deliver a very good and responsive clinical and recovery focused service. Dental services were good, with short waits for appointments. Medicines management had improved, with good clinical management of the prescribing of tradeable medication.

## Purposeful activity

S21 *Time out of cell during the working day was worse than at the last inspection, although most prisoners had good access to evening association. Prisoners on the basic regime could be locked in their cells for 23 hours a day. Attendance at the library and gym was poor. Leadership and management of education, skills and work were effective. There was sufficient activity for most prisoners to work at least part time and the curriculum was appropriate for a local prison. Attendance at work was high and had improved in education. Punctuality was not consistently good. The quality of teaching, learning and assessment in education and training was good. Prisoner behaviour was exemplary. Outcomes and achievements were also good. Access to careers information and guidance was limited. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S22 *At the last inspection in 2016, we found that outcomes for prisoners in Forest Bank were reasonably good against this healthy prison test. We made nine recommendations in the area of purposeful activity. At this inspection we found that all the recommendations had been achieved.*

S23 During our roll checks we found 50% of prisoners locked up during the core day, which was too many and worse than at the last inspection. Ten percent of prisoners were on the basic level of the incentives and earned privileges scheme and these prisoners could have as little as one hour out of their cells each day. The majority of prisoners worked part time, but full-time employed prisoners could be out of their cell for between eight and 12 hours a day. Most prisoners had regular access to evening association, which was better than we usually see.

S24 In our survey, only 36% of prisoners said they attended the library once a week and the range of resources was inadequate. The prison did not capture comprehensive attendance data or consult prisoners to understand their negative views about the facility.

S25 Gym facilities were good with a wide range of qualifications on offer. However, only 30% of prisoners used the gym and the prison had done little to identify the reasons for this.

S26 The prison had sufficient activity places for all prisoners to have at least a part-time role. Much of the work was low level and repetitive, but well organised and productive. Allocations to education and training took appropriate account of prisoners' needs and length of stay. The appointment of wing workers and orderlies was not managed well enough to ensure it was fair and equitable. The curriculum was designed well for the majority of prisoners with short stays, but education provision for those who stayed longer was limited. Vulnerable prisoners had equitable access to work, education and training. Quality assurance arrangements were good and data were used well to monitor performance and drive improvement. Managers' assessment of the provision was accurate and observations of teaching and learning were effective in bringing about improvement.

S27 Prisoners' induction to education was basic. There was little focus on career aspirations or detailed information on the pathways and activities available. Teaching, learning and assessment in education and vocational training were good. Teachers and trainers provided effective support to ensure prisoners achieved their learning goals and qualifications. Teachers quickly identified and met the needs of prisoners needing additional support. Most prisoners developed new practical skills as a result of the training they received at work. Prisoners in education developed their English and mathematics skills well, but workshop instructors did not identify prisoners' mistakes in spelling, punctuation or grammar.

- S28 Prisoner behaviour was exemplary in lessons, training and work. Prisoners took pride in their work and enjoyed their learning, and most produced work of a high standard. Attendance in industries and most work areas was high. In education, attendance had improved since the last inspection but was still not high enough. Punctuality was not consistently good. Access to careers information and guidance was limited.
- S29 Almost all prisoners who completed their education and vocational programmes achieved their qualifications, including a good proportion at levels 2 and 3.

## Rehabilitation and release planning

S30 *Work to help prisoners maintain contact with their families was good. Strategic management of resettlement was effective. Management of OASys and sentence planning was reasonably good, albeit with some weaknesses in assessment of risk. Good relationships had been forged with community partners. Public protection processes were robust. There was a good range of interventions except for prisoners convicted of a sexual offence. Progress for some prisoners was severely affected by a lack of spaces at category B training prisons. Joint efforts by departments including the 'integrated through the gate' team supported some effective through-the-gate work. Release on home detention curfew and rehabilitation generally were hampered by a lack of housing in the community. **Outcomes for prisoners were good against this healthy prison test.***

S31 *At the last inspection in 2016, we found that outcomes for prisoners in Forest Bank were good against this healthy prison test. We made eight recommendations in the area of resettlement.<sup>8</sup> At this inspection we found that six of the recommendations had been achieved, one had been partially achieved and one had not been achieved.*

- S32 The prison offered a wide range of activity in support of family life. The family support staff were well integrated into safeguarding and rehabilitative aspects of prisoner management. The visits facilities were spacious and reasonably well equipped. Staff were approachable and there was regular consultation with visitors. Prisoners were content with their access to telephones, although a number of in-cell phones were missing and some wing phones were out of order.
- S33 An annual needs analysis informed a comprehensive resettlement strategy. There was good coordination and momentum across the resettlement function. Consistent and effective management had achieved a good quality of delivery across all elements of rehabilitative work. Most OASys assessments were of a good standard, but a number of cases lacked sufficient appreciation and analysis of risk. Sentence plans generally focused on outcomes and appropriately concentrated on interventions deliverable at Forest Bank. Allocation of cases on a geographical basis had forged strong links with community probation services, and the level of attendance by community offender managers at sentence planning and other meetings was impressive. The work of the new 'integrated through the gate' (ITTG) team was promising, and resettlement services were increasingly and effectively aligned with the 10 boroughs of Greater Manchester. Home detention curfew was efficiently administered, but too many prisoners were not released on time because of a lack of accommodation in the community.
- S34 Categorisation processes were efficient and thorough. However, many category B prisoners, especially those with sexual offences, were not being given spaces at training prisons.

<sup>8</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.



- Prisoners serving indeterminate sentences were supported by the small probation team, and forums for this group had recently restarted.
- S35 Public protection processes were robust and thorough, and multi-agency public protection arrangements were well supported. The interdepartmental risk management team meeting was effective and well managed, but referrals to the meeting predominantly came from offender management unit (OMU) staff, rather than from staff who worked with prisoners in areas such as residence.
- S36 The large programmes team delivered a good range of interventions to address the risk of reoffending. However, little was available for those with a sexual offending history. Accommodation on release was a major challenge. Shelter staff achieved good results, supported by an active resettlement chaplain, but still too many were released without a settled address. A reasonable range of support on finance, benefits and debt was provided by Shelter, the education team and Jobcentre Plus.
- S37 Services for those being released from Forest Bank were improving through the work of Shelter, the ITTG team and the resettlement chaplain. The establishment of single points of contact for each of the boroughs supported some effective through-the-gate mentoring and assistance.

## Key concerns and recommendations

- S38 Concern: The amount of self-harm had increased significantly and was now exceptionally high. While data collated were useful and pertinent, there was no evidence of the information being used to inform a strategy aimed at reducing self-harm figures.
- Recommendation: Self-harm should be reduced. Managers should devise a strategy and action plan to achieve that aim.**
- S39 Concern: Levels of violence had doubled since the last inspection, and much more was serious. The incentives scheme focused too much on punitive measures rather than incentivising pro-social behaviour. There was a lack of effective interventions to address lower level bullying and violence. The adjudication system was undermined by the high number of charges that were not concluded, which meant that some serious incidents went unpunished.
- Recommendation: Violence in the prison should be reduced. Strategies to achieve this requirement should include measures that incentive good behaviour whilst ensuring those who offend are held properly to account.**
- S40 Concern: In our survey, 53% of vulnerable prisoners said they felt unsafe at the time of inspection and half indicated they had been bullied or victimised. The risk assessment process to determine the appropriate allocation of prisoners to C2, the vulnerable prisoner unit, was poor. Assessments were often incomplete or lacking depth, and consequently failed to identify potential risks.
- Recommendation: Vulnerable prisoners should be kept safe and protected from victimisation. Those seeking protection should be subject to effective risk assessment and risk management.**

S41 Concern: Staff and prisoner relationships were respectful but passive, lacking sufficient meaningful engagement. The keyworker scheme was not yet fully implemented and generally staff did not know prisoners well enough to offer them the care and practical support that impact lives positively. Staff were also too reticent in some circumstances in exercising proper authority and control.

**Recommendation: Strategies should be put in place that provide staff with meaningful support and give them the confidence to exercise effective and impartial authority and control when supervising prisoners.**

S42 Concern: Despite the relatively modern buildings and in-house maintenance contract, many cells had deficiencies, which were exacerbated by the fact that nearly 60% of prisoners shared cells designed for one. Too many cells lacked equipment such as televisions, telephones, aerials, curtains and mirrors. Some had very thin mattresses and a few had broken window panes. None had any facilities for securing personal possessions and medication. Many of these cells were cramped with poor ventilation, insufficient privacy when using the toilet and too little storage space.

**Recommendation: Cells should provide a decent environment which is in a good state of repair and fit for purpose.**

S43 Concern: The inpatient unit appeared unchanged since 2016 and was a poor environment in which to encourage recovery from illness. The lack of clinical leadership, lack of awareness of admission criteria, meagre time out of cell for some patients, and lack of therapeutic activities had led to an impoverished social and therapeutic environment. This did not assist, encourage or support the well-being of those recovering from illness.

**Recommendation: Consistent clinical leadership should ensure that the admission criteria, environment and regime for inpatients provide therapeutic value and encourage recovery.**

S44 Concern: We found 50% of prisoners locked up during the core day, many of whom were part-time workers. Some prisoners who were retired or had disabilities were locked up for most of the day. Unemployed prisoners on the basic level of the incentives scheme were unlocked for less than an hour a day. Attendance at the gym and the library was low.

**Recommendation: Time out of cell for prisoners who do not work full time should be increased to enable them to take part in other purposeful activity such as gym, library or supervised association.**

S45 Concern: Too many sentenced prisoners, especially those convicted of sexual offences, were held at Forest Bank for periods in excess of a year with little opportunity to make progress in their sentences or address their risks or offending behaviour. A lack of spaces in training prisons limited movement, but the prison did not take measures to ameliorate this.

**Recommendation: Sentenced prisoners should be given progressive moves to another establishment or provided with appropriate interventions and opportunities for progression at Forest Bank.**

# 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 Forest Bank served local courts within a reasonable radius of the prison, so escort and transfer times between the prison and court were generally short. Escort vehicles, however, needed to be cleaner and some were graffitied. In one vehicle cell we observed dried blood.
- I.2 The quality of person escort records (PERs) had improved, but deficiencies remained in a number of the samples we reviewed. For example, details regarding a detoxification programme for one new arrival we observed were not communicated to staff.
- I.3 The prison utilised a number of effective security tools to reduce the ingress of illicit items through reception, including a body scanner (see paragraph I.45), mobile pole scanner and an amnesty bin. Despite these measures, prisoners were still subject to an intrusive strip search on arrival, without reference to a risk assessment.
- I.4 Reception was spacious and clean, with good lines of sight to observe new arrivals. There was some information in the communal areas, but none in the holding rooms where prisoners had the time and opportunity to familiarise themselves with the procedures at Forest Bank. Each holding room was equipped with a television.
- I.5 Most reception staff were courteous and friendly. A one-to-one interview took place in a private setting and issues of risk, safety and vulnerability were appropriately explored. ACCT<sup>9</sup> documents were opened if there were self-harm concerns. However, we observed a prisoner threatening violence against others who was then placed in a holding cell with another new prisoner.
- I.6 An experienced induction peer mentor went through basic information with prisoners in a private setting.
- I.7 In our survey, 65% of respondents said they waited in reception for two or more hours and we found evidence to support this. The GP and health care nurse only attended reception at set times to complete health assessments and this contributed to the delays.
- I.8 First night accommodation was reasonably clean, but the standard of the cells varied. Some were ready for occupancy, while others had no bedding or toiletries, with graffiti and holes in cell windows. The toilets lacked sufficient screening and the toilet seats were not fit for purpose (see paragraph 2.6).
- I.9 Prisoners were still unable to shower on their first night. With the exception of young adults, there were no overnight welfare checks on new prisoners. Written information was

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<sup>9</sup> Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

provided on the first night with a useful illustrated guide to the prison, but there was still no information in languages other than English.

- I.10** The induction programme had recently been extended from one-and-a-half to three days. In our survey, 41% of prisoners said the induction did not tell them everything they needed to know about the prison and this was reflected in prisoners' discussions with us. Prisoners spent long periods behind their cell doors during their early days. That said, allocation to work or education was swift.

## Recommendations

- I.11 Prisoners should not be unnecessarily delayed in reception before moving to the first night centre.**
- I.12 Induction information should be available in a variety of languages.** (Repeated recommendation I.17)
- I.13 First night cells should be clean, fit for purpose and should contain basic amenities.**

## 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.14** About a third of prisoners in our survey said that they felt unsafe at the time of inspection and more than half had felt unsafe at some point. A third had been victimised and 44% said they had had canteen or property stolen (see paragraph 2.11).
- I.15** The levels of violence had doubled since the last inspection, and many more incidents were serious. During the previous six months, almost a quarter of the 400 recorded acts of violence were serious. Prisoner-on-prisoner violence accounted for much of the increase.
- I.16** The management of violence was overseen by a small safer custody team of three people who were also responsible for overseeing other aspects of safety, such as ACCT management. This limited much of their work to the most serious cases of violence.
- I.17** The establishment had a written violence reduction strategy but it was not effective in addressing violence at all levels. A monthly safer prisons strategy meeting provided a comprehensive breakdown of violence data. There was some evidence of data being used to develop the strategy, for example hotspots of violence had been identified which informed the revision of the core day. A weekly safety intervention meeting had been introduced to review immediate concerns and identify outstanding actions following recent acts of violence. However, the records of neither meeting demonstrated that all the identified concerns were consistently followed up.
- I.18** Most violent incidents were investigated promptly: those identified as serious were investigated by the safer custody team and the remainder by residential managers. The most

serious perpetrators of violence were managed through the HMPPS challenge support intervention plan (CSIP)<sup>10</sup> process. However, only 22 CSIP referrals had been made so far in 2019 and less than half had been completed to an adequate standard.

- I.19** Investigations carried out by residential managers often lacked depth and resulted in limited action. In most cases the response was to place the perpetrator on report and demote them to the basic level of the privilege scheme. Victims were often simply moved to another location. Rarely did managers seek to identify underlying causes or triggers for more low-level incidents of violence. Perpetrators were not referred for more constructive interventions and support for victims was inadequate.
- I.20** In our survey, 53% of vulnerable prisoners said they felt unsafe at the time of inspection and 50% said that they had been bullied or victimised.
- I.21** Prisoners who felt vulnerable and asked for help, for example with debt, were placed on C2 which was one of the vulnerable prisoner locations. However, the risk assessment process to determine their suitability was poor and most risk assessments had been completed in the week before our inspection. Assessments were incomplete and failed to examine fully the reasons for location to C2 or identify any potential risk to others located there.
- I.22** Four prisoners were self-isolating in their cells at the time of the inspection and were known to the safer custody team. Their access to the regime was limited and reintegration planning was not well documented.
- I.23** The incentives scheme focused heavily on punitive measures, and very little had been done to provide incentives for good behaviour.
- I.24** About 10% of the population were on the basic regime with no more than an hour out of cell each day, making it difficult to demonstrate improved behaviour (see paragraph 3.2). Reviews for those on basic level were scheduled for once a week, but the process remained too rigid and in most cases prisoners remained on basic for at least 28 days. We found evidence of segregated prisoners who did not receive regular reviews and spent extended periods on basic level. Target setting was inadequate for prisoners on basic: some were given generic targets and others had no targets at all.
- I.25** One residential unit (FI) took a more imaginative and proactive approach to managing prisoners on the basic level of the incentives scheme. Managers had opened a small fitness suite on the unit as part of the reintegration to a full regime, and a prisoner peer support worker encouraged those willing to engage in a range of activities several times a week. Staff referred to this approach as ‘support through enhanced management’, which they considered to be a more effective alternative to the establishment’s traditional management of prisoners on the basic level of the incentives scheme. However, senior managers had not yet evaluated or drawn up plans to adopt this more proactive response to poor behaviour across the other wings.

## Recommendation

- I.26** **Challenge, support and intervention plans (CSIPs) should be used effectively to address violent behaviour and support victims.**

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<sup>10</sup> CSIP is the national case management model for those who are violent or pose a raised risk of harming others through violence. Prisoners identified as the perpetrator of serious or repeated violence are managed and supported by a plan with individual targets and regular reviews.

## Adjudications

- I.27** There had been just over 2,000 adjudications during the six months leading up to the inspection, a slight increase since the last inspection, although this remained lower than at similar prisons. Some of the charges laid could have been dealt with more effectively through the incentives scheme although there were also weaknesses in that system (see section above). The prison no longer sanctioned young adults using minor reports, which was positive.
- I.28** Oversight of the adjudication process was weak. Some useful adjudication data were presented at the quarterly segregation management and review group meeting, but there was no evidence of concerns being identified or addressed. Quality assurance was similarly poor and fewer than 2% of all charges had been subject to checks over the previous six months.
- I.29** At the time of the inspection there were approximately 200 remanded adjudications, some of which had been outstanding for several months. Around one-quarter of these charges were delayed waiting for the reporting officer to be available to give evidence and, in some cases, the prisoner had refused to attend. A further 75 charges were with the police or the independent adjudicator and not yet concluded. There was no evidence that managers were proactive in their response to these delays, despite some of the charges being for serious violence and drug misuse. As a result, the adjudication system had been completely undermined as a deterrent (see key concern and recommendation S39).

## Recommendation

- I.30** **Adjudications should be concluded swiftly to ensure that the system acts as a deterrent to violence and drug misuse.**

## Use of force

- I.31** Use of force had increased significantly since our last inspection and was now comparable with similar prisons. There had been 413 incidents involving the use of force in the previous six months, compared with 267 at the previous inspection, the increase correlating with a surge in the number of violent incidents over the same period of time (see paragraph I.15).
- I.32** A use of force committee met monthly to review incidents of force. There was a detailed analysis of data which had highlighted some areas of concern, but no clear evidence that this analysis was used to take action to reduce the use of force. Body-worn video cameras were not being used effectively to capture incidents, and video footage of force and planned interventions were not subject to regular scrutiny.
- I.33** The sample of use of force documents that we examined were completed to a very good standard and demonstrated good de-escalation. The limited video footage available also supported this. There was no backlog of incident reports.
- I.34** Planned interventions were managed well and some were concluded without the use of force, demonstrating effective de-escalation. However, we saw one planned intervention where there were missed opportunities to de-escalate.
- I.35** Special cells were rarely used. There had only been one use in the previous six months.

## Recommendation

- I.36** Records of the use of force and planned interventions should be scrutinised, including viewing CCTV and body-worn video camera footage, to ensure that the force used is necessary, justified and proportionate.

## Segregation

- I.37** The use of segregation had increased since the last inspection from 215 to 362 in the six months preceding the inspections.
- I.38** The use of segregation was monitored adequately at management meetings. However, the rationale for segregation was not always recorded in authorisation documentation and this had not been picked up through monitoring.
- I.39** Living conditions in segregation were variable. The communal areas were clean, but some cells were dirty. We spoke to one prisoner who had moved cells because his cell was unfit, only for another prisoner to be located in the same dirty cell.
- I.40** The relationships that we observed between segregation staff and prisoners were good.
- I.41** The regime for segregated prisoners was adequate but basic. They could shower, exercise in the open air and use the telephone and kiosk each day. Basic in-cell activities were provided on request.
- I.42** The regime for prisoners with complex mental health needs or self-harm concerns was the same as for other segregated prisoners. This did not provide assurance that the wellbeing and potential psychological deterioration of these prisoners was monitored and acted on accordingly.
- I.43** Care plans were implemented to address the individual needs of segregated prisoners, but progress was not clearly recorded. There was some credible evidence of effective reintegration planning, but again this had not been centrally recorded by the prison making it difficult to track progress.

## Recommendation

- I.44** The care and reintegration planning for prisoners segregated on an ACCT, or those with complex needs, should include clear evidence of measures to reintegrate them to the main population as soon as practically possible.

## 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.45** Security arrangements were proportionate and did not restrict prisoners' access to the regime. However, despite investment in advanced equipment such as a full body scanner, prisoners were still routinely strip-searched in reception and when entering the segregation

unit. HMPPS protocols restricted the use of the body scanner to intelligence-based searching only, despite it offering a more effective and less intrusive means of identifying illicit items (see paragraph I.3).

- I.46** The management and use of intelligence remained a key strength in the establishment. There was a good flow of information into the security department and a well organised team of analysts efficiently processed over 1,000 security intelligence reports each month. Findings from the reports were discussed at a weekly assessment meeting and key security objectives were presented at a monthly security forum.
- I.47** A small group of operational staff had been recruited to conduct intelligence-led searching and each residential unit had identified security liaison officers to improve communication with the security department. Searching had yielded impressive results during the previous six months.
- I.48** About 65 prisoners identified as members of organised crime gangs were held at the prison. There were appropriate systems to manage these prisoners and others convicted of terrorism offences or holding extremist views.
- I.49** In our survey, 61% of prisoners said it was easy to get illicit drugs at the prison and 26% said that they had developed a drug problem while at Forest Bank against the comparator of 16%. Mandatory drug test results were lower than at most other local prisons at around 15%, including psychoactive substances<sup>11</sup>. We did not encounter prisoners under the influence of illicit substances in the way we have at some other local prisons.
- I.50** There was no dedicated supply reduction action plan to record and progress the establishment's efforts to reduce the use of drugs. However, there was substantial evidence that the prison was aware of the risks posed by illicit items and took a wide range of actions to address the threat. Intelligence-led searching, effective drug testing technology to examine mail, and increased security netting supported the supply reduction strategy. The installation of a full body scanner offered an excellent opportunity to detect illicit articles being brought into the prison but its use was limited by HMPPS protocol (see paragraph I.45). The security department was represented at the monthly substance misuse strategy meeting and links with the local and regional police were good. A member of the North-west Regional Organised Crime Unit offered daily support to the prison, and local mounted police assisted with perimeter patrols.
- I.51** The close working partnership with the police and robust local systems to manage staff corruption had resulted in the successful prosecution of several staff for misconduct, including theft and trafficking. Appropriate staff support was offered to new employees as part of the prison's strategy to tackle corruption effectively.

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<sup>11</sup> Drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects.



## 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.52** The levels of self-harm had increased significantly since the previous inspection and were concerning. There had been 734 incidents of self-harm by 177 prisoners during the previous six months.
- I.53** A monthly safer prisons strategy meeting provided a comprehensive analysis of data which added context to the self-harm figures. For example, in March 2019 the analysis showed that 10 individuals were responsible for 48% of self-harm incidents. However, there was no evidence that these data were used to inform strategy aimed at reducing self-harm figures and the prison was unable to demonstrate that action had been taken to address the high levels of self-harm.
- I.54** Some improvements had been made to the management of ACCT documentation. Care maps were more tailored to the prisoners' needs and progress against set objectives were recorded. Attendance at case reviews had improved since the previous inspection, but not enough to ensure that a multidisciplinary approach was taken to decision-making. There was still little done to keep prisoners at risk of self-harm occupied to reduce their self-harm. Records of contacts were mainly observational and few meaningful interactions were recorded.
- I.55** A process had been introduced whereby families were invited to contribute to the care of prisoners subject to ACCT management which was very positive but not routinely used.
- I.56** Managers claimed to operate a three-tier quality assurance process to ensure that ACCT processes were properly managed but, in the documents that we examined, there was minimal evidence of the process being followed.
- I.57** Since the previous inspection, there had been one self-inflicted death in September 2018. The draft Prisons and Probation Ombudsman (PPO) report had been issued in March 2019 and the recommendations were being implemented. Action plans were completed in response to a death in custody which incorporated PPO recommendations and actions taken by the prison.
- I.58** A dedicated team of Listeners (prisoners trained and supported by the Samaritans) provided support to their peers. The Listeners spoke positively of their experience and said they were well supported in their roles. However, they expressed concern that requests for support during the night were rarely facilitated.

## Protection of adults at risk<sup>12</sup>

- I.59** An adult safeguarding policy had been implemented since the previous inspection which gave detailed guidance on ensuring the protection of adults at risk. No safeguarding referrals had been made in the previous six months.
- I.60** A single point review meeting took place each month to discuss prisoners of concern, including those with ill health. However, the protection of prisoners who chose to isolate themselves in their cells needed to improve (see paragraph I.22).
- I.61** Senior managers attended a number of community forums, including Salford Safeguarding Adults Board, community safety partnership, Prevent meeting and North-west prisons regional group.

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<sup>12</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** Interactions between staff and prisoners on residential units were polite and respectful, but generally brief and focused on tasks. Most staff referred to prisoners by their surname and we saw limited evidence of staff spending time building relationships, except with the cleaners, servery workers and wing orderlies. This group of prisoners was often unsupervised and their relationships with staff tended to be over-familiar. We felt that sometimes authority lay disproportionately with wing workers and threatened to undermine the control exercised by staff (see paragraphs 2.9 and 3.12). Other prisoners complained about favouritism. More than a third of officers had less than one year's experience and the appointment of additional managers had been put in place to increase support for junior staff.
- 2.2** The keyworker scheme was not yet fully implemented. Most staff were trained keyworkers but to date only 25% of prisoners had a named keyworker and only about 50% of the planned weekly sessions took place. Written records of these meetings were mixed. We saw some examples of good practice and evidence of strengthening relationships, but most records were short and superficial and failed to demonstrate in-depth knowledge of individual prisoners. Our conversations with keyworkers revealed that not all fully understood how their role complemented offender supervision and that few knew about prisoners' family circumstances.
- 2.3** Peer workers were used in various departments across the prison (see paragraphs 1.25, 1.61, 2.92 and 3.23), but not on the residential units.

### Daily life

#### **Expected outcomes:**

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

### Living conditions

- 2.4** In our survey, prisoners were more positive than in comparator prisons about most aspects of daily life, such as access to showers and cleaning materials. Communal areas were clean and bright. Despite refurbishment since our previous inspection, the showers were still not sufficiently private. We found some broken electronic kiosks and hot water boilers.
- 2.5** Most cells were clean, but too many had no television or telephone (see paragraph 4.8). Several had makeshift aerials and some had faulty aerial and telephone sockets. Some cells lacked curtains or had very thin mattresses and a few had broken window panes. Cells on G

and H wings were generally better than on A to F wings. Staff told us that cell equipment was in short supply and we saw that the backlog of maintenance requests was significant. Around 60% of prisoners shared a cell designed for one. Many were cramped with poor ventilation, inadequate privacy when using the toilet and too little storage space.

- 2.6** There was some graffiti, but we did not find displays of offensive pictures. Staff supplied prisoners with flimsy unhygienic toilet covers during our inspection. Most prisoners had flasks for making hot drinks, but many complained that the flasks were ineffective. Some prisoners had no flask and no prisoners were allowed kettles.
- 2.7** Many prisoners covered the observation panel in their cell door, particularly at night, to the extent that some night staff used the inundation port as an alternative means of observation. This was not sufficiently challenged by staff and presented a significant safety risk. In our survey, only 23% of prisoners said their cell call bell was normally answered within five minutes and we witnessed some delays. Despite courtesy locks fitted in every cell door, courtesy keys were not available and there were no lockable cupboards in cells. This failing contributed to our survey finding that on average 44% of prisoners (and 69% of prisoners on C2, D1 and D2) had experienced theft of canteen or property (see paragraphs 1.14 and 2.11).
- 2.8** Most prisoners wore their own clothes. Arrangements for handing in property were reasonable. There were many complaints about property and, although we saw examples of prisoners being compensated where appropriate, not enough was done to protect prisoners' belongings.

## Residential services

- 2.9** Kitchen staff provided two hot meals every day and, in our survey, 45% of prisoners against the comparator of 33% said the food was quite or very good. However, in conversations, prisoners said the food was often not hot enough and that portion sizes were small. Staff did not ensure that temperature probes were used routinely and when we probed a meal we found that the food was not hot enough. Food was left uncovered on top of the servery for more than 20 minutes while prisoners on the basic regime and wing workers ate their meals before the rest of the prisoners were served. In addition, one of the servery heating lamps was not working. Supervision was not good enough to ensure that portion sizes were fairly distributed or that servery workers wore appropriate approved clothing for serving food.
- 2.10** The menu was reasonable and informed by consultation with a wide range of prisoners, but staff did not ensure that food comments books were routinely available. By choosing carefully, prisoners could ensure they had five portions of fruit and vegetables each day. Muslims were broadly content with the arrangements for Ramadan. Special dietary requirements were met. However, breakfast was no longer served on the morning it was to be eaten, and wing toasters had been removed.
- 2.11** Prisoners had two opportunities every week to purchase from the shop and could buy items within 24 hours of arrival, which was excellent. In our survey, only 47% of prisoners said the shop sold the things they needed, and we found that consultation about the range of goods had been inadequate. Prisoners' principal concerns were the lack of canned fish (tin cans were not allowed for security reasons) and fresh fruit. The volume of goods on offer was limited by the size of the stock room. The method of distributing shop orders had changed in April 2019 and was now more secure, but our survey still suggested high levels of canteen theft (see paragraph 1.14).

- 2.12** Prisoners could purchase clothes, music and DVDs through catalogues. The prison had devised a fair system to spread the cost of delivery charges.

## Recommendation

- 2.13** **Meals should be served at the correct temperature.**

## Good practice

- 2.14** *Prisoners had access to the prison shop twice a week and within 24 hours of arrival, which reduced the potential for debt.*

## Prisoner consultation, applications and redress

- 2.15** Consultation arrangements in respect of daily life were not yet strong enough. In our survey, only 47% of prisoners said they were consulted about things like food and health care. Managers held a meeting most months with an appropriate agenda, but attendance was poor, there was much repetition from month to month and very little evidence of resulting change. User Voice (an organisation specialising in prisoner consultation) had been engaged and managers planned to hold prisoner council elections in July 2019.
- 2.16** Prisoners valued the wing kiosks which allowed them to take responsibility for organising important aspects of daily life such as booking visits and making applications. In our survey, 61% of prisoners against the comparator of 33% said that applications were dealt with within seven days. Prisoners told us that most responses were helpful but a small proportion of applications were never answered and this needed attention.
- 2.17** Complaint forms were not readily available on the wings and the volume of complaints received was lower than we would expect. Complaints about staff accounted for about 8% of the total. Uniformed staff were responsible for emptying complaint boxes at night and some prisoners believed this allowed staff to read and destroy complaints.
- 2.18** Managers answered complaints promptly, but frequently failed to discuss the complaint with the complainant and often failed to investigate sufficiently. Most replies did not fully answer the issues raised and sometimes avoided the key concern, particularly if it suggested criticism of a member of staff or related to a different department. A few replies were dismissive in tone. Some handwritten replies were difficult to read and the name of the author was sometimes illegible. Some complaints against staff were dealt with at too low a level. There was no prisoner consultation about complaints and no external validation of replies. Health care complaints were appropriately managed separately.
- 2.19** Legal rights arrangements were very good. A trained legal services officer saw all new arrivals and progressed bail applications as appropriate, but her work was hampered by an acute shortage of Bail Accommodation and Support Service (BASS) beds. She also helped prisoners find or change solicitors and provided information. In our survey, 55% of prisoners said it was easy to communicate with their solicitor against the comparator of 40%. It was easy to book legal visits and the booths were private. Legal visitors reported some frustration with delays entering the prison and waiting for prisoners to arrive. The new video conferencing centre was impressive, but prisoners had to wear bibs identifying them as a prisoner while in the virtual courts, which was unnecessary and inappropriate.

- 2.20** In our survey, 54% of prisoners said that staff had opened legal letters in their absence compared with 37% at the previous inspection. Records in the post room showed that 39 letters had been opened (either in error or because the letter was not appropriately marked) since January 2019. The post room procedures we reviewed were appropriate.

## Recommendation

- 2.21** **Answers to complaints should fully address all the issues raised.**

## Equality, diversity and faith

### Expected outcomes:

**There is a clear approach to promoting equality of opportunity, eliminating unlawful discrimination and fostering good relationships. The distinct needs of prisoners with particular protected characteristics<sup>13</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

- 2.22** An enthusiastic and well-established equality team was supported by a manager and full-time equality lead.
- 2.23** Diversity and inclusion action team (DIAT) meetings took place every two months and were generally well attended, including by representatives from prisoner focus groups. The meeting monitored a comprehensive action plan. Neither the director nor deputy director had attended any meetings, although the equality manager progressed relevant outstanding actions at senior management meetings.
- 2.24** There had been long delays in HMPPS making equality monitoring tool data available to the prison and the tool had only recently been relaunched. The prison had made no attempt to gather and analyse its own data in the interim which had left the DIAT meeting poorly informed over the past six months. The latest available data showed disproportionate outcomes in most protected groups, most significantly for younger prisoners, but this had not been adequately investigated.
- 2.25** The work of the equality team was supported by an excellent group of 11 diversity representatives who were well trained and enthusiastic about their work. They helped to identify and support vulnerable prisoners on the wings and fed back any concerns at a regular forum and DIAT meetings. The prison also held innovative one-to-one surgeries for new arrivals with reported protected characteristics to ensure they had adequate support. This could also be accessed via a kiosk appointment.
- 2.26** Twenty discrimination incident report forms (DIRFs) had been submitted in the past six months, less than at our last inspection. DIRF forms were not always available on every wing and were not available in languages other than English. Responses to DIRFs had improved; those we reviewed were timely, polite and adequately investigated. The independent monitoring board provided some external scrutiny, but it was superficial and did not provide learning points for improvement.

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

- 2.27** Most protected groups and vulnerable prisoners had access to regular consultative forums. Discussion points were fed into the DIAT meetings for action. However, black and minority ethnic and foreign national prisoners were in a joint group, which indicated a lack of understanding about both groups and their distinct protected characteristics. The prison had established a 'majority' forum in response to complaints from prisoners who did not have a protected characteristic. Again, this demonstrated a monumental misunderstanding of equality and the need to protect marginalised groups, although it was not done maliciously and the team readily accepted our interpretation and criticism.
- 2.28** Community involvement and support for prisoners with protected characteristics were limited. The prison recognised this and was seeking to address it.

## Good practice

- 2.29** *The prison held innovative one-to-one surgeries to provide support for prisoners with protected characteristics.*

## Protected characteristics

- 2.30** At the time of the inspection, 20% of prisoners were from a black and minority ethnic background. The most recent equality monitoring tool data showed some over-representation in adjudications, incentives and earned privileges levels and complaints, but little had been done to investigate this.
- 2.31** In our survey, 48% of black and minority ethnic prisoners said they spent less than two hours out of their cell a day and only 29% that it was easy to make a complaint against respective figures for white prisoners of 18% and 64%.
- 2.32** In our survey, 6% of prisoners said they were from a Gypsy, Roma or Traveller background, suggesting a potential population of more than 80 prisoners. The prison records showed only five such prisoners. There was no established means of consultation or community support in place for Gypsy, Roma and Traveller prisoners.
- 2.33** At the time of the inspection, the prison held 125 foreign national prisoners, 16 of whom were being held beyond the end of their sentence. Provision for this group was reasonably good. There were regular consultative forums and prisoners we spoke to said they had no problems accessing additional phone credit and making international phone calls. Monthly Home Office surgeries took place and a dedicated officer helped prisoners to contact the Home Office. However, surgeries were not promoted well and some prisoners were not aware they took place, complaining about a lack of communication about their deportation.
- 2.34** Prisoners valued the wing kiosks which gave access to information in multiple languages. Other translated material was limited. Use of the telephone interpreting service was also limited but had increased since the equality team had started to monitor its use in January 2019.
- 2.35** Half of the prisoners in our survey considered themselves to have a disability. The prison had a record of nearly 500 prisoners with a disability and staff had a good understanding of their needs. Regular disability forums took place which informed the DIAT meetings. A significant population of prisoners had learning difficulties. A regular learning disability forum took place and prison staff worked collaboratively with education to create learning and care plans.

- 2.36** In our survey, 44% of prisoners with disabilities said they felt unsafe against 18% of prisoners without a disability. The physical layout of the prison was suitable for prisoners with disabilities and they could access all amenities on the wings. However, we found prisoners unfit for work locked in their cells during the core day despite this being raised in disability forums and DIAT meetings. Evacuation planning remained inadequate and staff could not explain evacuation procedures for prisoners who would require additional help during an emergency. Social care procedures were well organised.
- 2.37** At the time of the inspection, 125 prisoners were over the age of 50 and they reported similar experiences to the rest of the population in our survey. There was a dedicated gym session and regular consultative forum for these prisoners. However, support for this group was more limited than it had been in the past: work with Age UK had stalled and the prison no longer held the over-50s day care centre in the visits area.
- 2.38** There was a dedicated team to support the 95 prisoners aged 18 to 21 which was better than we usually see. Two young prisoner case workers provided one-to-one and group rehabilitative interventions alongside young prisoner mentors. Equality monitoring tool data showed that young prisoners were disproportionately represented in areas such as adjudications and complaints. Little work had been done to explore this.
- 2.39** In our survey, 4% of prisoners said they were homosexual or bisexual, suggesting a potential population of 40. However, prison records only listed six such prisoners suggesting a reluctance by gay prisoners to be open about their sexuality. A regular supportive forum took place but, other than in some education classes, little was done to promote tolerance and challenge bigotry. The prison had not engaged community groups to support this agenda despite being located in Manchester, a city that prides itself on inclusivity.

## Recommendation

- 2.40** **The personal emergency evacuation plan system should be applied consistently and provide assurance that the safety of all identified prisoners is assured in an emergency.** (Repeated recommendation 2.28)

## Faith and religion

- 2.41** Faith provision was good and the chaplaincy covered almost all faith groups. In our survey, 75% of prisoners said they could speak to a chaplain of their faith in private if they wanted to and 90% said they could attend a service. Services were well attended and vulnerable prisoners also had good access to religious services.
- 2.42** The chapel was clean, bright and welcoming with adequate space to meet the needs of prisoners. A member of the chaplaincy met all new arrivals within 24 hours and visited those in the segregation unit and on ACCTs<sup>14</sup> every day. Chaplains also attended a high proportion of ACCT reviews which was better than we usually see. The chaplaincy was well integrated into the work of the prison and the managing chaplain attended key meetings.
- 2.43** The chaplaincy maintained an annual programme of major religious festivals for all faiths and there was appropriate celebration of key events. At the time of the inspection, it was Ramadan and the chaplaincy was heavily involved in the practical arrangements. We observed Muslim prisoners receiving their hot evening food at 9pm, but they told us that it was difficult to have a hot drink because there were no kettles in cells (see paragraph 2.6).

<sup>14</sup> Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.



- 2.44** All prisoners were seen before their release and a dedicated resettlement chaplain had established good links with community faith groups.

## 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.**

- 2.45** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)<sup>15</sup> and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies.

### Strategy, clinical governance and partnerships

- 2.46** The CQC found there were no breaches of the relevant regulations. Health services had generally improved. Sodexo Justice Services delivered health services, and they sub-commissioned specialist services. Regular recorded contract and governance meetings were well attended. The 2017 health needs assessment was out of date and was being revised.
- 2.47** There was evidence of learning from deaths in custody, and from serious and untoward incidents which resulted in some changes to health services.
- 2.48** The complaints system was now confidential with work in progress to differentiate complaints more clearly from applications and concerns. Most patients expressed dissatisfaction with medication issues. Written responses to complaints were courteous, timely and apologetic where necessary. Patients could influence health services development through regular user surveys and the monthly consultative meeting (see paragraph 2.15).
- 2.49** Clinical leadership (other than in in-patients) was good with experienced staff providing primary care, with 24-hour nursing cover. Sodexo had recently submitted a business case for more staff resources to meet the needs of the population better. Sodexo-employed mental health nurses regularly dealt with physical health conditions to ensure coverage. Health staff mandatory and further training was very good, and now included safeguarding of adults.
- 2.50** Annual appraisal and managerial supervision arrangements were in place and staff generally felt supported. Clinical supervision was voluntary and not all primary care staff took advantage of it, although Sodexo were examining ways to improve uptake in 2019.
- 2.51** Most clinics were held in the health centre where the range of clinical activities had outgrown the space available. The waiting area was well supervised and contained relevant health promotion materials. Patients spent less time there than in 2016. The temporary waiting room facilities for vulnerable prisoners were sparse and unwelcoming. New facilities for vulnerable prisoners had been created on D wing and were due to open when SystmOne (electronic patient records) had been installed. Cleanliness was good and compliance with infection control standards was high.

<sup>15</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>.

- 2.52** SystmOne records that we sampled were informative and subject to clinical audit. Audits demonstrated good compliance with information governance standards. An active programme of other clinical audits ensured compliance with expected standards.
- 2.53** Emergency equipment, including automated external defibrillators and oxygen, were placed strategically across the prison and documented checks were now carried out each day.
- 2.54** A senior nurse had been identified for the care of older prisoners and nurses took the lead in delivering well-man clinics for other age groups. We observed professional interactions with patients by health care staff.

## Promoting health and well-being

- 2.55** There was a prison-wide approach to health promotion and the multidisciplinary action board met every two months to promote wellbeing across the prison. National health campaigns were promoted by identified staff. Health-related materials were displayed throughout the wings, health care and the gym. Supportive self-help materials were available in the library.
- 2.56** At time of inspection, there were no health champion peer workers, although there were advanced plans to start recruitment.
- 2.57** Sexual health advice was offered by health care staff and supplemented by a visiting specialist. Condoms were advertised and available from sexual health staff.
- 2.58** Opt-out screening and treatment of blood-borne viruses were very effective, supported by good links with a local specialist service. There was good access to age-appropriate immunisations and vaccinations, national screening campaigns, such as abdominal aortic aneurysm and bowel cancer, and smoking cessation.
- 2.59** Appropriate policies were in place to manage outbreaks of communicable diseases.

## Primary care and inpatient services

- 2.60** Initial health screening was undertaken promptly by a registered nurse. Attendance rates at secondary health assessments had improved significantly, ensuring good support during prisoners' early days. Staff made appropriate referrals to other clinicians from these initial assessments.
- 2.61** The appointments system was effective, although appointment slips were handed to officers without a sealed envelope, which compromised confidentiality. The provider told us that they were reviewing this process.
- 2.62** There was a wide range of nurse-led clinics to carry out triage and administer treatments. At the time of the inspection, 355 patients had long-term conditions such as asthma, diabetes or epilepsy and were regularly reviewed by competent staff, with care plans and evidence-based practices.
- 2.63** GP services were available each weekday and Saturdays, and out-of-hours cover had been introduced but rarely used. Patients had good access to urgent same-day GP appointments and non-urgent appointments within 10 days, which was reasonable. The did-not-attend (DNA) rate was 16% for the GP which was an improvement. While DNA rates for some other clinics remained high, innovative ways to engage patients and reduce DNAs had been

introduced, such as a clinic in the gym. The range of specialist clinics was good and included physiotherapy, ophthalmics and podiatry, with short waiting lists.

- 2.64** External health care appointments were well managed by an administrator, with clinical input where required. Few were cancelled for security reasons. Telemedicine equipment was installed during the inspection to enable specialist consultations without leaving the prison.
- 2.65** All patients were reviewed before release by a nurse and given any ordered medication to take home, along with advice on accessing community health services and a care summary record. While most released and transferred prisoners left with their required medication, recording of this was inaccurate and ineffective, despite recent measures implemented to monitor and improve compliance. Palliative care was well supported by the Macmillan National Gold Standard Framework and links with the local hospice.
- 2.66** The inpatient unit remained a poor environment with 19 beds in single and double cells, and one four-bed bay. The unit was stark and sometimes excessively noisy.
- 2.67** Bed occupancy ran at about 63%, far lower than the NHS. One bay was in use as a temporary waiting room for vulnerable prisoners attending out-patients, which was not ideal.
- 2.68** Prison and health staff we spoke to were not familiar with the admission criteria, though these were updated and re-issued at the time of the inspection. Between the well-attended weekly multidisciplinary care team meetings, admissions were made to the unit for non-clinical reasons, which was not appropriate.
- 2.69** Regular prison officers staffed the unit and provided good support with the daily activities of patients. In most cases, officers encouraged patients to use the garden area and attend the gym or library. However, one elderly patient told us that he was not regularly offered time outside. Gym equipment and soft furnishing had been acquired since 2016 but were in storage.
- 2.70** The therapeutic regime had been impoverished since the therapist, a teacher, became temporarily unavailable. Although teachers continued to visit individually, the effect was to severely restrict diversionary and social activities so that patients had little opportunity to manage their illnesses in prosocial ways or to support each other.
- 2.71** We observed no permanent nursing presence on the ward despite the presence of 11 seriously ill patients, though mental health staff visited patients on a one-to-one basis. About 80% of patients had complex mental illnesses and only 50% could safely mix together so that time out of cell was often restricted, which was not therapeutic.

## Recommendations

- 2.72** **Appointment slips for health appointments should be distributed in a way that preserves the patient's confidential medical status.**
- 2.73** **All prisoners should be released or transferred with their required medication, and this process should be recorded accurately and regularly monitored.**

## Good practice

- 2.74** *The novel introduction of a nurse-led clinic in the gym enabled patients who preferred to attend the gym to access health care. Long-term condition monitoring was improved by arranging health checks in the gym.*

## Social care

- 2.75** Salford Royal Hospital NHS Foundation Trust continued to commission Sodexo to deliver social care. Regular contract meetings were held to monitor care against the 2017 service specification.
- 2.76** Useful links between the prison, health care and the Trust ensured that referrals were promptly assessed by two social workers. Prisoners could also self-refer using the wing electronic kiosks. In the previous six months, 10 referrals had been made for assessments, six of whom met the threshold and were currently receiving packages of care.
- 2.77** Sodexo employed two social care assistants to deliver social care packages in the prison, and they worked closely with health care assistants. Aids and adaptation equipment were held centrally in the prison with good access, and specialist equipment was provided by the Trust.
- 2.78** Effective communication with community services ensured support for patients following their release.

## Mental health care

- 2.79** In our survey, 63% of prisoners said that they had mental health problems. While only 32% said they received help with these problems, we found that mental health provision had improved since our last inspection, despite high demand for support.
- 2.80** The integrated mental health team comprising staff from Sodexo and Greater Manchester NHS Foundation Mental Health NHS Trust (GM) was well staffed and provided daily support to prisoners, including attendance at ACCT reviews. Three registered mental health nurses employed by Sodexo regularly covered general primary care duties, which affected their capacity to deliver mental health care.
- 2.81** New referrals and complex cases were reviewed at an effective weekly team meeting and single point referral meeting with multidisciplinary input.
- 2.82** The waiting list for initial triage appointments had halved since our last inspection. Prisoners could wait up to three weeks for an initial triage appointment, which was too long. However, appointments were prioritised according to need and prisoners who required an emergency response or had urgent needs were seen immediately. Attendance at mental health appointments was good, and staff appropriately followed up those who did not attend.
- 2.83** Prisoners with mild to moderate mental health conditions had access to planned, responsive treatment, and 39 prisoners were receiving continuing support at the time of the inspection. Psychological wellbeing practitioners and a counsellor delivered additional therapies, a good range of self-help material was available, and there was a weekly primary care psychiatric clinic.
- 2.84** The in-reach team provided good support to 58 men with more severe mental health conditions using the care programme approach<sup>16</sup>. There was prompt access to the service and prisoners were reviewed regularly, including physical health checks and psychiatric consultations. Clinical records that we sampled contained evidence of responsive and personal care planning and regular risk assessment.

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<sup>16</sup> Mental health services for individuals diagnosed with a mental illness.

- 2.85** Sixty per-cent of prison officers had received mental health awareness training, which was an improvement since 2016. The psychological wellbeing practitioner had recently started delivering a more detailed training programme for prison staff.
- 2.86** Between September 2018 and April 2019, nine prisoners had been transferred to hospital under the Mental Health Act, all but one of whom had exceeded the 14-day transfer guidance. Delays were mainly caused by the limited availability of beds. Staff had developed helpful links with hospitals and community partners to help expedite transfers where possible.

## Recommendation

- 2.87 Patients requiring mental health inpatient care should be transferred within the national guidance timeframe.**

## Substance use treatment<sup>17</sup>

- 2.88** Integrated substance misuse services (ISMS) were delivered by GM and Sodexo and were very good. In our survey, 49% of respondents said they had a drug problem on arrival at the prison against the comparator of 34%. At the time of inspection, 402 prisoners were engaged with ISMS work focused on recovery.
- 2.89** New referrals were seen within five days and there were robust systems for urgent referrals to be seen promptly. All prisoners arriving in reception were seen by an ISMS worker for assessment. They could see a clinical prescriber if necessary and were given harm reduction advice and materials as appropriate.
- 2.90** Effective multi-agency working between the ISMS, health care and the prison was evident with recorded monthly meetings to share information and intelligence. There was a drug strategy but no action plan (see paragraph 1.53). The prison programme manager was co-located with ISMS team managers which facilitated effective communications.
- 2.91** The governance of the ISMS was very good, compliance with staff mandatory training was excellent, and clinical and managerial supervision was well embedded. Staff we spoke to valued weekly group supervision sessions and felt supported in their roles. A recent prisoner consultation (February 2019) had informed service delivery.
- 2.92** At time of inspection, 192 prisoners were in receipt of methadone opiate substitution therapy (OST) and four were receiving rapid release buprenorphine. The majority (85%) were receiving maintenance doses, which was clinically appropriate. Prescribing was flexible and medicines were administered from G/H wing. We observed a noisy and poorly controlled medication queue, but the risks were addressed immediately when we raised concerns.
- 2.93** G/H wing was the dedicated recovery wing providing support to prisoners which included detoxification, stabilisation, enhancing motivation and maintaining abstinence. Three trained and well supervised peer mentors provided support. Alcoholics Anonymous, Cocaine Anonymous and Narcotics Anonymous delivered fortnightly sessions and the ISMS delivered a good range of one-to-one and group therapies including SMART recovery, awareness of spice and dual diagnosis.

<sup>17</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).

- 2.94** Naloxone (to reverse the effects of opiates) was provided where indicated to prisoners being released, which minimised risk.

## Good practice

- 2.95** *Integrated substance misuse services (ISMS) workers were aligned with identified community services which created a 'virtual' through-the-gate team ensuring seamless, collaborative release planning and aftercare.*

## Medicines optimisation and pharmacy services

- 2.96** Medicines were supplied by a local Boots pharmacy. Most medicines were supplied labelled for named patients. The supply chain in the prison was secure.
- 2.97** About 87% of patients had medicines in possession (50% in 2016). The policy was applied and risk assessments were completed and repeated as necessary. Patients received in-possession medications in health care. There was still no lockable storage for patients to store medicines in their cells safely (see paragraph 2.7).
- 2.98** The pharmacist continued to undertake general medicine use reviews and clinical audits, reviewed prescribing data and attended monthly clinical governance and medicines management meetings. Standing operational procedures were in date and signed, and prescribers followed the Sodexo formulary (a list of medications used to inform prescribing).
- 2.99** Nurses used patient group directions (which enable nurses to supply and administer prescription-only medicine) to supply medicines for minor ailments and a wider range of vaccines and treatments. This was efficient. Nurse prescribers were on the staff, and some were in training, to support the GPs.
- 2.100** Controlled drugs were carefully managed and the register in the pharmacy now complied with expected standards, with a clear audit trail of the receipt and transfer of methadone solution for G and H wings. The small number of tradeable medications being prescribed was impressive, reducing the risks of bullying. However, many prisoners complained that they were not receiving medicines that their GPs prescribed in the community.
- 2.101** Health care practitioners entered the pharmacy to access stock medicines but at times this led to congestion and excessive noise in the room. The new Sodexo head pharmacist assured us she would address these risks following consultation. Stock medicines were well monitored by the pharmacy technicians.
- 2.102** Nurses administered medicines up to three times a day at appropriate times. The medicines queue at the administration room on the A-F hub was congested but well supervised. Patients sometimes experienced delays in receiving their medicines, causing gaps in their treatment, but many did not request repeat prescriptions despite reminders to do so.

## Dental services and oral health

- 2.103** A visiting dentist and dental nurse delivered community-equivalent care. Dental services were responsive to need and at time of inspection the waiting time for an appointment was just one week, which was impressive.

- 2.104** Dental equipment was regularly maintained, serviced and certificated, with separate decontamination facilities. The nurse had implemented a robust infection prevention schedule and undertook regular audits. Sterile supplies and waste management processes were sound.
- 2.105** There was good provision of oral health advice and information and clinical records were detailed and contained treatment plans.





## 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 Prisoners had a reliable regime and time out of cell was better than we usually see. In our survey, 77% of prisoners said they had association five days a week compared to 41% at other local prisons. Most prisoners had access to more than two hours of evening association from Monday to Thursday which was greatly valued.
- 3.2 Prisoners in full-time employment could expect to spend over 10 hours out of their cell on weekdays and eight hours at weekends. Most prisoners had part-time employment and spent about six hours out of their cell on weekdays. Basic level prisoners, who were not in education or employment, only spent up to one hour out of their cell (see paragraph 1.24).
- 3.3 During roll checks in the middle of the day, we found 50% of prisoners locked in their cells compared to 40% at our last inspection, which was too many. Many of those locked up were in part-time employment and would be unlocked during the other half of the day. However, this represented a missed opportunity for prisoners to take part in other productive activities such as gym or library. Staff we spoke to were unsure which prisoners were retired or had disabilities and whether they should be unlocked.
- 3.4 In our survey, only 36% of prisoners said they attended the library once a week or more. Only 21% of these said the library had a wide enough range of resources to meet their needs against the comparator of 56%.
- 3.5 The library was warm and welcoming. It was managed by one librarian, supported by four prison orderlies, who had good knowledge of the resources available. The range of resources was poor. The library had fiction and non-fiction items, foreign language texts and audio books but there was a limited selection in each category.
- 3.6 Most prisoners could make two 30-minute visits to the library each week and those in full-time employment also had the opportunity to attend. Vulnerable prisoners could attend at lunchtimes. However, attendance at the library was low. Library staff did not collect sufficiently detailed data on use of the library to determine whether all prisoners were receiving their weekly entitlement or to identify which groups of prisoners were not using library services so they could target promotion.
- 3.7 The library promoted literacy across the prison through a number of schemes including the Six-book Challenge (inviting individuals to select six books and record their reading in a diary) and Turning Pages (a mentoring scheme to help prisoners learn to read). In the past 12 months, Turning Pages mentors had supported 50 prisoners individually to improve their literacy. The library also ran a creative writing course one evening a week.
- 3.8 Prisoners had good access to a range of indoor and outdoor sports facilities and equipment, which were well maintained. Most areas were clean but the showers remained unscreened.

Prisoners had access to an astroturf pitch which was used regularly for football courses. Wing staff could arrange for other prisoners to use the pitch during evening association, but decisions were not always transparent and caused frustration to prisoners.

- 3.9** Gym sessions were well managed and all prisoners could use the gym, including full-time workers and vulnerable prisoners. The gym also ran separate sessions for over 50s and prisoners with additional health needs. The gym gathered snapshot attendance data four times a year. The most recent data showed that only 31% of prisoners had used the gym but there had been no further analysis or action to improve attendance. Despite the high turnover of prisoners, the gym offered a good range of qualifications.

## Education, skills and work activities (Ofsted)<sup>18</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>19</sup>**

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

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

### Management of education, skills and work

- 3.11** Education, skills and work activities were managed well. Prison leaders had responded well to the recommendations from the previous inspection and had made improvements in all areas. Teaching and learning had improved and was good; outcomes for prisoners had significantly improved.
- 3.12** The prison provided enough activity places for every prisoner. A significant number of prisoners were not occupied for the full working day as much of the work was part time, routine and repetitive. Staff allocated most prisoners to an activity very soon after they arrived. Oversight by managers was not adequate to ensure that the appointment of wing workers and orderlies was fair and equitable (see paragraph 2.1).

<sup>18</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>19</sup> In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

- 3.13** Managers had implemented an appropriate education curriculum for the majority of prisoners and ensured that vulnerable prisoners were able to access equitable work, education and training. There were not enough education opportunities for the minority of prisoners who stayed for longer periods, or for those who already had higher-level skills, to extend their learning. Managers had not provided prisoners with careers education of sufficiently high quality throughout their stay at the prison.
- 3.14** A range of vocational training courses, including one at level 3, were available, including recycling, assembly, warehousing, and basic construction. Accredited learning for personal trainers was available in the gym. Work activities consisted of electrical assembly, furniture assembly, recycling and packaging. Additional roles were available for cleaners, orderlies, mentors, work parties and kitchen work.
- 3.15** Quality assurance arrangements were good. Managers collected accurate and comprehensive performance data, which they used very well to monitor performance and to target areas for improvement. Their assessment of the provision was mostly accurate, and they used their observations of learning sessions effectively to bring about improvement in the quality of teaching. Managers used their standardisation meetings with education staff very effectively to share good practice and eliminate weaker aspects of teaching and learning.
- 3.16** Prison managers had effective oversight of education and training activities. The quality improvement group was well attended and considered a good range of data on the quality of the provision. Senior managers had clear aspirations for the development and continued improvement of learning and skills, including plans to introduce a broader range of training opportunities. Managers' vision for improvements was not clearly articulated in strategic documents and few measurable and challenging targets were agreed.
- 3.17** Pay rates were fair and did not demotivate prisoners from attending education or training in favour of other work or activity. Tutors supported prisoners in health care and those unable to attend education to continue their learning. Staff provided effective support for the small number of prisoners who undertook distance learning and Open University courses.
- 3.18** A good range of courses were available to support prisoners approaching release, including money management and work preparation. Managers ensured the effective use of the virtual campus<sup>20</sup> to enable prisoners to develop a CV and access on-line courses. The impact of preparation for release activities on prisoners entering employment, training or education could not be determined because there was a lack of data on prisoners' destinations after release.

## Recommendations

- 3.19** **Managers should ensure that all allocations to work and training are fair and that all eligible prisoners have an opportunity to apply for all jobs.**
- 3.20** **Managers should provide enough activity places to enable most prisoners to be occupied for the full working day. These should include more demanding and interesting work.**
- 3.21** **Managers should provide prisoners with relevant careers guidance, particularly during induction, so that they can develop realistic and challenging plans for their future.**

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<sup>20</sup> Prisoner access to community education, training and employment opportunities via the internet.

## Quality of provision

- 3.22** The quality of teaching, learning and assessment was good. Staff identified prisoners' starting points appropriately at induction and used this information well to plan learning. Teachers and trainers knew their learners well. They provided effective individual support to help prisoners complete activities and achieve their learning goals. Most teachers and trainers used questioning techniques skilfully to check prisoners' knowledge and understanding. In a few education lessons teachers did not plan or deliver activities which enabled all learners to make the progress of which they were capable. Teaching environments were calm, professional and conducive to learning.
- 3.23** Most teachers and trainers made good use of peer mentors to support prisoners in lessons and workshops. Training for peer mentors was relatively new and mentors were not available in all lessons. In industries, staff used experienced workers very effectively to train new prisoners to become productive workers. A minority of trainers did not organise workshops well enough to ensure that all prisoners had access to continuous purposeful activity.
- 3.24** Most teachers gave prisoners detailed feedback, which helped them to correct errors and improve their knowledge and skills. However, a minority of teachers and trainers did not provide enough guidance or challenge to help prisoners make even better progress and further improve their understanding.
- 3.25** Teachers quickly identified prisoners who needed additional support. They adapted resources accordingly and provided highly effective support, enabling those prisoners to make at least expected progress.
- 3.26** Most prisoners in education developed their English and mathematics skills and improved their prospects for employment. However, prisoners in industries and work did not develop their written skills well enough because trainers did not identify their errors in spelling, punctuation or grammar. Too often, trainers in the workshops made errors in their own written work and in their feedback to prisoners.
- 3.27** Teachers in education skilfully developed prisoners' awareness of equality and diversity.

## Recommendation

- 3.28** **Managers should ensure that all teachers and trainers support prisoners to improve their written English skills.**

## Personal development and behaviour

- 3.29** Prisoners' behaviour was exemplary. In lessons, training and work, prisoners were respectful to their teachers, supervisors and peers. They were productive and behaved professionally. Prisoners kept workshops and their work environments clean and tidy. They followed appropriate health and safety standards closely.
- 3.30** Prisoners developed their self-confidence and critical employment skills such as communication and teamwork well. Most prisoners produced work of a high standard. Prisoners were rightly proud of their work and enjoyed learning new skills.
- 3.31** Attendance in industries and most work areas was high. In education, attendance had improved but the number of prisoners who did not attend with no good reason was still too

high. Punctuality was not consistently good because movement was not managed well enough to ensure that all prisoners reached their workplace or classroom on time.

- 3.32** Managers promoted healthy living well through a good range of personal development programmes such as smoking cessation and mental health awareness. In the healthy lifestyles programmes, prisoners developed a good understanding of healthy eating and improved their fitness through practical sessions in the gym.
- 3.33** Prisoners' induction to education was too basic. Although prisoners were directed to an appropriate education or work activity based on an assessment of their English and mathematics skills, there was not enough focus on career aims and aspirations. Too many prisoners did not receive detailed information on the full range of pathways and activities available.

## Recommendations

- 3.34** **Leaders and managers should ensure an even higher rate of attendance and punctuality at education classes to maximise prisoners' learning.**
- 3.35** **Managers should provide prisoners with a comprehensive induction to help them make informed decisions about their career aims and interests.**

## Outcomes and achievements

- 3.36** Achievement rates for qualifications were high. Almost all prisoners who completed their education classes achieved their qualifications. Most prisoners on vocational programmes achieved their qualification, including a good proportion at levels 2 and 3. Managers had successfully reduced the number of prisoners who did not complete their qualification before leaving the prison through careful consideration of length of sentence when assigning prisoners to courses.
- 3.37** A reasonable proportion of prisoners who stayed long enough progressed to and achieved higher-level qualifications in mathematics. However, very few prisoners progressed to higher-level qualifications in English. Prisoners in the kitchens and cleaners did not get formal recognition of the skills they learned.

## Recommendation

- 3.38** **Managers should provide prisoners with formal recognition of the skills they develop.**



## 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 The high-quality service reported at the last inspection had declined, but there had been vigorous efforts in 2019 to improve the service again, and a wide range of appropriate interventions had started or were in advanced stages of planning. Storybook Dads, homework club, parenting courses, father and baby sessions, creative writing and letter writing activities were all scheduled.<sup>21</sup> Forward Thinking, a goal-setting course on family relationships, was being delivered, and families came in to check that the goals were realistic and for presentation of awards. Restorative justice forums looked at how families were affected.
- 4.2 Two 'triage clinics' were held each week, bringing 10 invited prisoners together each time to talk about family issues. From these, suitable prisoners were allocated to one of the three family workers, who saw them individually and drew up a care plan.
- 4.3 Family days were held four times a year. Introduction of family days on Saturdays had led to much greater take-up and very successful outcomes, with 64 children at the recent event. Family days for lifers, those with sexual offences and other vulnerable prisoners were planned for the coming year.
- 4.4 The family workers attended complex case and ACCT review meetings where appropriate, and ACCT reviews had been held in the visits complex with family present.<sup>22</sup> The team worked closely with the security and safer custody teams on safeguarding issues and attended the interdepartmental risk management meeting as needed.
- 4.5 The visits hall was large and plain but adequately furnished with free-standing furniture. The chairs had recently been refurbished. The play area was limited, with some toys and books for small children, and a few books for older children. There were advanced plans to expand and improve this area. Activity fun packs and other games were made available by the family workers, who spent time with families in the visits hall and visitors' centre. Adequate refreshments were served.

<sup>21</sup> Storybook Dads is an independent, registered charity that helps prisoners to record a story for their children to listen to at home.

<sup>22</sup> ACCT is the assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

- 4.6** The visitors' centre outside the main gate was large and welcoming, with a play area and plenty of information displayed, including visual material for visitors with reading difficulties or limited understanding of English. A dedicated staff group showed respect and courtesy to visitors and the search team at the gate carried out their role sensitively.
- 4.7** A dedicated group of visits staff knew regular visitors well and were approachable. The search staff showed a very caring but professional approach. Regular consultation forums were held with visitors to discuss improving the visits process.
- 4.8** In our survey, 94% of prisoners said that they could have access to a phone every day. Prisoners made few complaints about telephone and mail services. In-cell telephones had been installed across the prison, although a number of these were already missing, and payphones on the wings were sometimes broken (see paragraph 2.5).

## 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** Consistent, effective management over a number of years had achieved strong performance across the area of rehabilitation and release planning. The teams delivering work in this area were all well led and coordinated by a single senior manager. There was a comprehensive resettlement strategy, which informed an ongoing action plan and was kept relevant by an annual needs analysis. There were systemic challenges in the number of different IT platforms for recording information on individual prisoners, but staff liaised sufficiently well across departments to mitigate this problem.
- 4.10** Most OAsys assessments were of a good standard. The team of uniformed offender supervisors were experienced and were not frequently deployed to other duties; the running backlog of assessments noted at the previous inspection had been eliminated. The quality of assessment could have been improved further if offender supervisors had been able to make full use of the expertise of probation staff who were not consulted on many issues. The probation team was too small to exercise sufficient support and oversight, especially of higher risk cases, or to contribute to specialist risk assessment in the significant number of domestic violence cases. A well-developed understanding and analysis of risk issues were not sufficiently evident in some assessments by offender supervisors, each of whom managed some high-risk offenders because of the geographical division of caseloads.
- 4.11** Sentence plans were appropriately formulated in many cases, and offender supervisors frequently identified targets achievable within the establishment, to motivate prisoners to engage early with the rehabilitative process. Offender supervisors knew the prisoners on their caseloads and maintained at least monthly contact with each.
- 4.12** The prison had further developed an approach focused on locality. Since 90% of prisoners lived within 18 miles of the prison, it had been possible to make strong links with each of the 10 metropolitan boroughs of Greater Manchester, to which the great majority of prisoners were released. Each offender supervisor was the point of contact for one borough area and had developed good links. It was unusual and very encouraging to see so many offender managers from the community attending sentence planning boards and other meetings during the inspection week, facilitated by these strong relationships.



- 4.13** In addition to the resettlement work carried out by the well-established Shelter team to prepare for release, the new integrated through-the-gate (ITTG) team was starting work at the time of the inspection, and these teams were already working well. The ITTG work showed promise in bridging the gap between prison and communities. Both these teams followed the 10-borough system, enabling close collaboration with both the offender management unit (OMU) and community groups and agencies.
- 4.14** Home detention curfew (HDC) processes were well administered, but many prisoners missed their eligibility date for release, generally because of the challenges of identifying suitable housing through local authorities and other agencies. In a sample, half of those eligible were delayed because it had not been possible to confirm an address in time.<sup>23</sup>

## Public protection

- 4.15** The experienced public protection team carried out effectively the tasks of screening for and taking measures to reduce risk to the public. Prison staff took a constructive part in multi-agency public protection arrangements (MAPPA), attending relevant meetings in the community and submitting reports of sufficient quality.
- 4.16** The interdepartmental risk management team met monthly and was active in positive management of the highest-risk individuals. OMU staff formed the core of the meeting. The chaplaincy, education and security teams were generally represented, but not the safer custody, substance misuse, health care and resettlement teams. Referrals to this meeting came from too narrow a band of staff, predominantly OMU staff, rather than from those who worked closely with prisoners in other areas such as residence. This did not provide assurance that all appropriate prisoners were referred.

## Recommendation

- 4.17** **Probation staff should be systematically involved in quality assurance, training and countersigning of individual prisoner assessments, to ensure that risk issues are understood and properly identified by all involved in offender management.**

## Good practice

- 4.18** *The rehabilitation and resettlement services in the prison were aligned with the 10 metropolitan boroughs of Greater Manchester, through single points of contact in the OMU and resettlement teams. The teams developed strong local contacts in their borough and improved post-release outcomes in a context where the great majority of releases were to the Greater Manchester area.*

## Categorisation and transfers

- 4.19** Initial categorisation and subsequent reviews of security category were carried out on time and with sufficient quality of assessment. Nevertheless, too many category B and category C prisoners remained at Forest Bank for too long after sentence, and after they had exhausted the potential of such a local prison to help them reduce the risk of re-offending. This

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<sup>23</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, is being introduced gradually, from 2019.

especially applied to those convicted of sexual offences. It was particularly difficult to move such prisoners, especially when category B, to a training prison. This was illustrated by the fact that, in our survey, only 29% of those on the vulnerable prisoner wings said that they understood what they needed to do to achieve their objectives or targets, compared with 83% of respondents from the remainder of the prison. The issue was largely beyond the control of Forest Bank, but the prison itself needed to take measures to address the problem. For example, the range of trained staff was not adequate to carry out the 'prisoner needs assessment' of suitability for offending behaviour programmes, and this could be done with the right resources.

- 4.20** Probation staff gave support to prisoners serving indeterminate sentences. Lifer forums had been held recently and a lifer day was planned for later in the summer (see paragraph 4.3). Support for this group of 37 lifers and 27 indeterminate sentences for public protection (IPP) prisoners had been revived recently and needed to become well established.

## Interventions

### Expected outcomes:

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

- 4.21** A team of 19 staff, sizeable for a local prison, delivered a wide range of initiatives to reduce the risk of re-offending, with 600 interventions of many kinds completed in 2018. Ninety prisoners each year undertook the thinking skills programme. Twenty were allocated to the Resolve programme targeted at those convicted of violent offences, which had been introduced since the previous inspection. No offending behaviour work was available for those convicted of sexual offences, although a new programme for some of these offenders had been piloted in Forest Bank, and the outcome was awaited. Lack of access to psychology staff was a problem for the establishment. A domestic violence programme, 'Inner Strength', had been run in recent years.
- 4.22** A significant established strength of the prison was the number of rehabilitative programmes delivered in partnership with community organisations. For example, the Street Soccer Academy linked a custodial programme to regional training centres, while the Khulisa programme 'Silence the Violence' had also run. Sports links were developing well, including Sale Sharks, Bury FC and Bolton Wanderers FC.
- 4.23** Restorative practice was being embedded in partnership with Remedi, the regional restorative justice agency. This included a course which had been run regularly called 'restorative justice conferencing and mediation'. The 'restoring hope, repairing harm' three-day course was also offered, and some training had been given to adjudicators to take a restorative approach. Mediation had been used after assaults, and there had been some restorative justice conferencing with victims. 'Restorative circles' were held monthly, which brought prisoners and staff together to discuss prison issues.
- 4.24** The high quality of accommodation work noted in the last report had been interrupted by the change to contracted provision. The work of the Shelter team had increased in effectiveness, however, and staff saw all prisoners after arrival and before release, focusing strongly on accommodation issues. The proportion of those released to definite, settled and suitable accommodation was about 55 to 60% in most months. The shortage of accommodation available through the Nacro Bail Accommodation and Support Services (BASS) was a major problem.
- 4.25** Advice and support on finance, benefits and debt were provided by Shelter staff, working in close partnership with Jobcentre Plus, whose one part-time worker was too stretched.

Despite being under pressure, the service was performing adequately. Bank accounts, ID and preparing the ground for Universal Credit applications were the most common needs. The ITTG team would be able to offer help in this area when it was fully established. The education department delivered courses on money management to 40 prisoners each month.

## 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.**

- 4.26** Support for those being released was improving as departments in the prison increasingly worked together. The direct liaison with local areas was of great assistance in this (see paragraph 4.12). All prisoners were seen soon after arrival and urgent issues were followed up. Shelter reliably conducted a pre-release appointment with every person 10 to 12 weeks before release, setting up a practical resettlement plan.

Offender supervisors, Shelter (contracted by the community rehabilitation company (CRC)) and the new ITTG team, who were employed by the CRC under new national arrangements, worked together to achieve positive outcomes in spite of the major problems with accommodation. A dedicated resettlement chaplain had established good links with a wide range of community groups, including faith groups, to enhance community provision for accommodation, mentoring, employment and other post-release support. In addition, this work was supported by good liaison with post-release mentoring provided by groups such as 'On The Out', a movement set up by and for people who have experienced life in prison.



## Section 5. Summary of recommendations and good practice

The following is a listing of repeated and new key concerns and recommendations, general 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.

<b>Key concerns and recommendations</b>		<b>Directed to:</b>
S38	<p>Key concern: The amount of self-harm had increased significantly and was now exceptionally high. While data collated were useful and pertinent, there was no evidence of the information being used to inform a strategy aimed at reducing self-harm figures.</p> <p><b>Recommendation: Self-harm should be reduced. Managers should devise a strategy and action plan to achieve that aim.</b></p>	The Governor
S39	<p>Key concern: Levels of violence had doubled since the last inspection, and much more was serious. The incentives scheme focused too much on punitive measures rather than incentivising pro-social behaviour. There was a lack of effective interventions to address lower level bullying and violence. The adjudication system was undermined by the high number of charges that were not concluded, which meant that some serious incidents went unpunished.</p> <p><b>Recommendation: Violence in the prison should be reduced. Strategies to achieve this requirement should include measures that incentive good behaviour whilst ensuring those who offend are held properly to account.</b></p>	The Governor
S40	<p>Key concern: In our survey, 53% of vulnerable prisoners said they felt unsafe at the time of inspection and half indicated they had been bullied or victimised. The risk assessment process to determine the appropriate allocation of prisoners to C2, the vulnerable prisoner unit, was poor. Assessments were often incomplete or lacking depth, and consequently failed to identify potential risks.</p> <p><b>Recommendation: Vulnerable prisoners should be kept safe and protected from victimisation. Those seeking protection should be subject to effective risk assessment and risk management.</b></p>	The Governor
S41	<p>Key concern: Staff and prisoner relationships were respectful but passive, lacking sufficient meaningful engagement. The keyworker scheme was not yet fully implemented and generally staff did not know prisoners well enough to offer them the care and practical support that impact lives positively. Staff were also too reticent in some circumstances in exercising proper authority and control.</p> <p><b>Recommendation: Strategies should be put in place that provide staff with meaningful support and give them the</b></p>	The Governor

	<b>confidence to exercise effective and impartial authority and control when supervising prisoners.</b>	
S42	<p>Key concern: Despite the relatively modern buildings and in-house maintenance contract, many cells had deficiencies, which were exacerbated by the fact that nearly 60% of prisoners shared cells designed for one. Too many cells lacked equipment such as televisions, telephones, aerials, curtains and mirrors. Some had very thin mattresses and a few had broken window panes. None had any facilities for securing personal possessions and medication. Many of these cells were cramped with poor ventilation, insufficient privacy when using the toilet and too little storage space.</p> <p><b>Recommendation: Cells should provide a decent environment which is in a good state of repair and fit for purpose.</b></p>	The Governor
S43	<p>Key concern: The inpatient unit appeared unchanged since 2016 and was a poor environment in which to encourage recovery from illness. The lack of clinical leadership, lack of awareness of admission criteria, meagre time out of cell for some patients, and lack of therapeutic activities led to an impoverished social and therapeutic environment. This did not assist, encourage or support the well-being of those recovering from illness.</p> <p><b>Recommendation: Consistent clinical leadership should ensure that the admission criteria, environment and regime for inpatients provide therapeutic value and encourage recovery.</b></p>	The Governor
S44	<p>Key concern: We found 50% of prisoners locked up during the core day, many of whom were part-time workers. Some prisoners who were retired or had disabilities were locked up for most of the day. Unemployed prisoners on the basic level of the incentives scheme were unlocked for less than an hour a day. Attendance at the gym and the library was low.</p> <p><b>Recommendation: Time out of cell for prisoners who do not work full time should be increased to enable them to take part in other purposeful activity such as gym, library or supervised association.</b></p>	The Governor
S45	<p>Key concern: Too many sentenced prisoners, especially those convicted of sexual offences, were held at Forest Bank for periods in excess of a year with little opportunity to make progress in their sentences or address their risks or offending behaviour. A lack of spaces in training prisons limited movement, but the prison did not take measures to ameliorate this.</p> <p><b>Recommendation: Sentenced prisoners should be given progressive moves to another establishment or provided with appropriate interventions and opportunities for progression at Forest Bank.</b></p>	HMPPS

<b>General recommendations</b>		<b>Directed to:</b>
1.11	<b>Prisoners should not be unnecessarily delayed in reception before moving to the first night centre.</b>	The Governor
1.12	<b>Induction information should be available in a variety of languages.</b> (Repeated recommendation 1.17)	The Governor
1.13	<b>First night cells should be clean, fit for purpose and should contain basic amenities.</b>	The Governor
1.30	<b>Adjudications should be concluded swiftly to ensure that the system acts as a deterrent to violence and drug misuse.</b>	The Governor
1.36	<b>Records of the use of force and planned interventions should be scrutinised, including viewing CCTV and body-worn video camera footage, to ensure that the force used is necessary, justified and proportionate.</b>	The Governor
1.44	<b>The care and reintegration planning for prisoners segregated on an ACCT, or those with complex needs, should include clear evidence of measures to reintegrate them to the main population as soon as practically possible.</b>	The Governor
2.13	<b>Meals should be served at the correct temperature.</b>	The Governor
2.21	<b>Answers to complaints should fully address all the issues raised.</b>	The Governor
2.40	<b>The personal emergency evacuation plan system should be applied consistently and provide assurance that the safety of all identified prisoners is assured in an emergency.</b> (Repeated recommendation 2.28)	The Governor
2.72	<b>Appointment slips for health appointments should be distributed in a way that preserves the patient's confidential medical status.</b>	The Governor
2.73	<b>All prisoners should be released or transferred with their required medication, and this process should be recorded accurately and regularly monitored.</b>	The Governor
2.87	<b>Patients requiring mental health inpatient care should be transferred within the national guidance timeframe.</b>	The Governor
3.19	<b>Managers should ensure that all allocations to work and training are fair and that all eligible prisoners have an opportunity to apply for all jobs.</b>	The Governor
3.20	<b>Managers should provide enough activity places to enable most prisoners to be occupied for the full working day. These should include more demanding and interesting work.</b>	The Governor
3.21	<b>Managers should provide prisoners with relevant careers guidance, particularly during induction, so that they can develop realistic and challenging plans for their future.</b>	The Governor

3.28	<b>Managers should ensure that all teachers and trainers support prisoners to improve their written English skills.</b>	The Governor
3.34	<b>Leaders and managers should ensure an even higher rate of attendance and punctuality at education classes to maximise prisoners' learning.</b>	The Governor
3.35	<b>Managers should provide prisoners with a comprehensive induction to help them make informed decisions about their career aims and interests.</b>	The Governor
3.38	<b>Managers should provide prisoners with formal recognition of the skills they develop.</b>	The Governor
4.17	<b>Probation staff should be systematically involved in quality assurance, training and countersigning of individual prisoner assessments, to ensure that risk issues are understood and properly identified by all involved in offender management.</b>	The Governor
<b>Examples of good practice</b>		
2.14	Prisoners had access to the prison shop twice a week and within 24 hours of arrival, which reduced the potential for debt.	
2.29	The prison held innovative one-to-one surgeries to provide support for prisoners with protected characteristics.	
2.74	The novel introduction of a nurse-led clinic in the gym enabled patients who preferred to attend the gym to access health care. Long-term condition monitoring was improved by arranging health checks in the gym.	
2.95	Integrated substance misuse services (ISMS) workers were aligned with identified community services which created a 'virtual' through-the-gate team ensuring seamless, collaborative release planning and aftercare.	
4.18	The rehabilitation and resettlement services in the prison were aligned with the 10 metropolitan boroughs of Greater Manchester, through single points of contact in the OMU and resettlement teams. The teams developed strong local contacts in their borough and improved post-release outcomes in a context where the great majority of releases were to the Greater Manchester area.	



## Section 6. Appendices

### Appendix I: Inspection team

Martin Lomas	Deputy Chief Inspector
Deborah Butler	Team leader
Alice Oddy	Inspector
Ian Dickens	Inspector
Jeanette Hall	Inspector
Nadia Syed	Inspector
Martin Kettle	Inspector
Sharlene Andrew	Researcher
Amilcar Johnson	Researcher
Catherine Shaw	Researcher
Holly Tuson	Researcher
Paul Tarbuck	Lead health and social care inspector
Shaun Thomson	Health and social care inspector
Tim Byrom	Care Quality Commission inspector
Phil Romain	Lead Ofsted inspector
Elaine Price	Ofsted inspector
Alison Cameron-Brandwood	Ofsted inspector
Martyn Griffiths	HMI Probation 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 2016, reception, first night and induction arrangements were reasonably good, with a suitable focus on risk and support. Levels of assaults were similar to those at other local prisons, but the number of violent incidents overall had increased and more prisoners felt unsafe. Arrangements to identify and address violence were good, although not enough was done to identify and support prisoners on normal location who felt unsafe. The case management of prisoners at risk of self-harm did not always reflect the care given, and care for more marginalised prisoners was weak. Security was proactive and mostly proportionate. Drugs, particularly new psychoactive substances, were easily available but good supply reduction initiatives were in place. The regime for prisoners on the basic level of the incentives and earned privileges scheme was too punitive. Adjudications were well managed, but the use and governance of minor reports were inadequate. Levels of use of force had increased but governance was generally good. The conditions on the segregation unit were reasonable for most but inadequate for complex and long-stay prisoners. With the exception of first night clinical support, substance misuse services were good. Outcomes for prisoners were reasonably good against this healthy prison test.*

#### **Main recommendations**

Prisoners who are at risk of suicide or self-harm and are segregated, on the basic regime or self-isolating should have access to regular and meaningful contact with staff and prisoners and to activity, in order to reduce their risk of harm. Assessment, care in custody and teamwork (ACCT) documents should clearly reflect the care planning and quality of interaction provided. (S55)

#### **Not achieved**

The regime on the basic wing should be improved and, on the basis of risk assessments, should allow more time unlocked and contact with staff to enable prisoners to demonstrate improved behaviour. Behaviour change programmes should be delivered consistently and reviews should discuss and reflect prisoners' progress. (S56)

#### **Not achieved**

#### **Recommendations**

Prisoners should be transported to the prison from court promptly once their case has been heard. (1.60)

#### **Achieved**

Prisoner escort records should be comprehensive and address all areas of risk. (1.70)

**Not achieved**

Delays for prisoners in reception should be reduced and all newly arrived prisoners should be able to shower and settle in to the first night wing irrespective of their time of arrival. (1.16)

**Not achieved**

Induction information should be provided in a variety of languages and formats. (1.17)

**Not achieved** (recommendation repeated, 1.12)

An effective process for challenging and reducing repeated violent behaviour and for supporting victims of such behaviour should be implemented and managed robustly. (1.25)

**Not achieved**

Risk to young adult prisoners from adult sex offenders should be assessed to reduce their risk of exploitation from adults. (1.26)

**Not achieved**

Prisoners who require protection should not remain on main location without adequate access to the regime and outdoor exercise. (1.27)

**Achieved**

Staff entries in assessment, care in custody and teamwork (ACCT) documents should be improved. (1.33)

**Not achieved**

There should be an adult safeguarding policy which addresses the duty of staff and the local authority to identify, refer and implement care for prisoners requiring safeguarding from abuse and exploitation in the prison and on release. (1.36)

**Achieved**

Prisoners should only be strip-searched on the basis of intelligence or specific (1.45).

**Not achieved**

Closed visits should only be applied where there is evidence of illicit activity relating to visits. (1.46)

**Achieved**

Less serious offences committed by young adults should be dealt with by the IEP system (1.53)

**Achieved**

Individualised care and reintegration planning should be developed and implemented for longer-stay prisoners and those with complex needs. (1.63)

**Not achieved**

First night treatment for opiate-dependent prisoners should be provided consistently. (1.69)

**Achieved**

Clinical reviews should take place in a respectful environment. (1.70)

**Achieved**

## Respect

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

*At the last inspection in 2016, residential areas and cells were clean and bright. Prisoners had good access to basic essentials, showers and telephones. Staff–prisoner relationships were respectful. There were good identification and consultation arrangements for prisoners with protected characteristics, and outcomes were good for most, but the needs of some prisoners with disabilities were not met. Faith services were good. Complaints were well managed. Health provision was mostly reasonable but some areas, including primary mental health and inpatient facilities, required considerable improvement. The food provided was reasonably good and prison shop arrangements were efficient. Outcomes for prisoners were reasonably good against this healthy prison test.*

### Main recommendation

Primary mental health services should be improved, to ensure that they meet prisoner need. Conditions on the inpatient unit for those with mental health issues should be improved, to ensure that their basic daily needs are met and that they have access to adequate time unlocked and therapeutic activities. (S57)

**Partially achieved**

### Recommendations

Cells designed to hold one prisoner should not be used to hold two. (2.60)

**Not achieved**

Emergency cell call speakers should not be blocked or muffled and calls should be answered within five minutes. (2.70)

**Partially achieved**

Communal showers should be refurbished and include privacy screening. (2.80)

**Partially achieved**

The quality and frequency of staff (including personal officer) interaction with prisoners should be improved and include assessment of prisoners' well-being, and this should be reflected in meaningful case note entries. (2.12)

**Not achieved**

There should be clear guidance to staff on their responsibilities in relation to the care and support of prisoners with protected characteristics. (2.15)

**Achieved**

Equality data relating to access to the regime and services, and to the treatment of prisoners with protected characteristics, should be monitored and presented for review at the diversity and inclusion action team meeting. (2.16)

**Not achieved**

Care and support plans should be multidisciplinary and ensure that appropriate levels of care and support are provided consistently. (2.27)

**No longer relevant**

The personal emergency evacuation plan system should be applied consistently and provide assurance that the safety of all identified prisoners is assured in an emergency. (2.28)

**Not achieved** (recommendation repeated, 2.40)

Health services staff should have regular, recorded access to individual management and clinical supervision, and access to safeguarding training. (2.52)

**Partially achieved**

There should be an appropriate waiting room in the health centre for vulnerable prisoners (2.53)

**Achieved**

The emergency resuscitation equipment should be in good order, with an effective monitoring system. (2.54)

**Achieved**

Prisoners should be able to complain about health services through a well publicised, confidential system and all responses to these complaints should be respectful and fully address the issues raised. (2.55)

**Achieved**

All new arrivals should receive a comprehensive secondary assessment within 72 hours. (2.64)

**Achieved**

Prisoners should be able to access all primary care services within a reasonable timescale and have 24-hour access to a GP for advice and face-to-face assessment. (2.65)

**Achieved**

All medicines, with the exception of controlled drugs should be supplied from individually labelled patient packs. (2.72)

**Achieved**

In-possession risk assessments, which consider the risks of the drug as well as the patient, should be routinely and consistently completed in line with the policy and recorded accurately on SystemOne. (2.73)

**Achieved**

The accessibility of all medicines, including controlled drugs and pharmacy stock, should be reviewed and the use of pharmacy stock should be better audited. (2.74)

**Achieved**

Lockable cupboards should be provided in cells for patients prescribed inpossession medication. (2.75)

**Achieved**

Prisoners' medications should be dispensed at the prescribed time. (2.76)

**Not achieved**

Custody staff should have mental health awareness training, so that they can take appropriate action when a prisoner has mental health problems. (2.85)

**Partially achieved**

Patients requiring mental health inpatient care should be transferred within two weeks. (2.86)

**Not achieved**

## Purposeful activity

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

*At the last inspection in 2016, for most prisoners the amount of time out of cell was good. The leadership and management of learning and skills and work activities were good. The number of activity places had increased and was sufficient for the population, but the range and level of vocational courses were too limited. Allocation to activity was good but too many prisoners failed to attend or attended late. Too much teaching and learning required improvement. Learning resources were excellent. Opportunities to record or recognise skills were missed but those who took qualifications achieved well. Library and PE provision was good. Outcomes for prisoners were reasonably good against this healthy prison test.*

### Recommendations

Regular quality checks on key learning and skills processes should be carried out, to provide consistency in recording progress and identify further improvements. (3.11)

**Achieved**

Vulnerable prisoners should have equitable access to regime activities. (3.12)

**Achieved**

A wider range of vocational courses and progression opportunities should be provided for all prisoners. (3.19)

**Achieved**

The achievement and demonstration of key employability skills in workshops should be recorded and recognised. (3.20)

**Achieved**

Teaching and learning should be improved, to ensure that more teaching is of sufficiently good quality. Teachers should use individual target setting more effectively, to measure and record the progress of learners and provide more written feedback on assessed work so that that learners know what they need to do to improve. (3.25)

**Achieved**

Peer mentors should be properly trained and accredited for their work. (3.26)

**Achieved**

Attendance and punctuality should be improved. (3.31)

**Achieved**

The analysis of data should be developed, to allow accurate information to be provided about the overall success rates of all courses. (3.35)

**Achieved**

The published regime should run to time (3.40)

**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 2016, good offender management arrangements were partly undermined by an offender assessment system (OASys) backlog. Offender supervisors were capable and had regular and meaningful contact with prisoners, and the quality of OASys assessments was good overall. Home detention curfew processes were sound. Public protection arrangements were mostly good. Categorisation and transfer arrangements were good, although some sex offenders stayed too long at the prison without enough opportunity to address their behaviour. The demand for resettlement services was high and pathway provision was good, with work with families being particularly impressive. Outcomes for prisoners were good against this healthy prison test.*

### Recommendations

Family visits should be extended to all prisoners. (4.54)

**Achieved**

The resettlement strategy should set out how the offender management unit should be at the centre of resettlement work, and improve information exchange, particularly with the community rehabilitation company. (4.5)

**Achieved**

All eligible prisoners should have an up-to-date offender assessment system (OASys) assessment and sentence plan, with objectives focusing on outcomes related to their risk and likelihood of offending. (4.12)

**Achieved**

The multi-agency public protection arrangements (MAPPA) management level should be confirmed at least six months before release, to promote good information sharing and develop release plans.

(4.19)

**Achieved**

Convicted sex offenders should be transferred within a short timescale to more appropriate prisons, so that they can progress. (4.24)

**Not achieved**

Pre-release planning should be improved so that all prisoners, regardless of their sentence, are given an effective assessment of need before their release and these needs are met. (4.31)

**Partially achieved**

The virtual campus should be used to improve the range and levels of prisoners' learning and to give them access to resettlement courses and information. (4.4)

**Achieved**

A comprehensive strategy for addressing the offending behaviour needs of sex offenders should be developed. (4.58)

**Achieved**



## Appendix III: 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	41	724	53.1
Recall	8	225	16.2
Convicted unsentenced	27	136	11.3
Remand	26	211	16.5
Civil prisoners	0	2	0.1
Detainees	3	32	2.4
<b>Total</b>	<b>105</b>	<b>1,330</b>	<b>99.7</b>

Sentence	18–20 yr olds	21 and over	%
Unsentenced	58	371	29.8
Less than six months	10	132	9.9
six months to less than 12 months	5	78	5.8
12 months to less than 2 years	3	101	7.2
2 years to less than 4 years	14	190	14.2
4 years to less than 10 years	11	272	19.7
10 years and over (not life)	2	127	9
ISPP (indeterminate sentence for public protection)	0	40	2.8
Life	2	24	4.6
<b>Total</b>	<b>105</b>	<b>1,335</b>	<b>100</b>

Age	Number of prisoners	%
Please state minimum age here: 18	-	-
Under 21 years	105	7.3
21 years to 29 years	474	32.9
30 years to 39 years	486	33.8
40 years to 49 years	249	17.3
50 years to 59 years	93	6.5
60 years to 69 years	24	1.7
70 plus years	6	0.6
Please state maximum age here: 79		
<b>Total</b>	<b>1,440</b>	<b>100</b>

Nationality	18–20 yr olds	21 and over	%
British	93	1226	91.6
Foreign nationals	12	108	8.3
<b>Total</b>	<b>105</b>	<b>1,335</b>	<b>99.9</b>

<b>Security category</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
Uncategorised unsentenced	53	347	27.8
Uncategorised sentenced	5	24	2
Category A	0	0	0
Category B	0	139	9.7
Category C	1	816	56.7
Category D	0	8	0.6
Other	46	1	3.3
<b>Total</b>	<b>105</b>	<b>1,335</b>	<b>100</b>

<b>Ethnicity</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
<b>White</b>			
British	65	1,025	75.7
Irish	1	11	0.8
Gypsy/Irish Traveller	0	5	0.3
Other white	2	40	2.9
<b>Mixed</b>			
White and black Caribbean	3	41	3.1
White and black African	0	1	0.1
White and Asian	0	4	0.3
Other mixed	2	15	1.2
<b>Asian or Asian British</b>			
Indian	2	8	0.7
Pakistani	6	55	4.2
Bangladeshi	3	10	0.9
Chinese	0	2	0.1
Other Asian	2	36	2.6
<b>Black or black British</b>			
Caribbean	5	26	2.2
African	4	23	1.9
Other black	6	20	1.8
<b>Other ethnic group</b>			
Arab	1	1	0.1
Other ethnic group	3	8	0.8
Not stated	0	4	0.3
<b>Total</b>	<b>105</b>	<b>1,335</b>	<b>100</b>

<b>Religion</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
Baptist	0	1	0.1
Church of England	15	294	21.5
Roman Catholic	7	282	20.1
Other Christian denominations	9	76	5.9
Muslim	20	157	12.3
Sikh	0	4	0.3
Hindu	0	2	0.1
Buddhist	1	13	1.0
Jewish	0	8	0.6
Other	1	10	0.8
No religion	52	488	37.5
<b>Total</b>	<b>105</b>	<b>1,335</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)			
<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	15	1	172	11.9
1 month to 3 months	14	1	197	13.7
3 months to six months	8	0.6	209	14.5
six months to 1 year	7	0.5	229	15.9
1 year to 2 years	3	0.2	128	8.9
2 years to 4 years	0	0	29	2
4 years or more	0	0	0	0
<b>Total</b>	<b>47</b>	<b>3.3</b>	<b>964</b>	<b>66.9</b>

### Sentenced prisoners only

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

### Unsentenced prisoners only

<b>Length of stay</b>	<b>18–20 yr olds</b>		<b>21 and over</b>	
	<b>Number</b>	<b>%</b>	<b>Number</b>	<b>%</b>
Less than 1 month	22	1.5	114	7.9
1 month to 3 months	18	1.3	118	8.2
3 months to six months	10	0.7	90	6.3
six months to 1 year	7	0.5	46	3.2
1 year to 2 years	1	0.1	3	0.2
2 years to 4 years	0	0	0	0
4 years or more	0	0	0	0
<b>Total</b>	<b>58</b>	<b>4</b>	<b>371</b>	<b>25.8</b>

<b>Main offence</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
Violence against the person	2	21	1.6
Sexual offences	0	2	0.14
Burglary	0	55	3.86
Robbery	8	103	7.8
Theft and handling	0	1	0.07
Fraud and forgery	0	0	0
Drugs offences	3	24	1.89
Other offences	19	290	21.72
Civil offences	0	0	0
Offence not recorded /holding warrant	27	800	58.15
<b>Total</b>	<b>59</b>	<b>1,363</b>	<b>100</b>

# Appendix IV: Prisoner survey methodology and results

## Prisoner survey methodology

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

HMIP researchers have developed a self-completion questionnaire to support HMIP 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>24</sup>.

The questionnaire is available in 14 languages and can also be administered via a telephone interpreting 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 HMIP researchers from a P-Nomis prisoner population printout ordered by cell location. Using a power calculation, HMIP researchers calculate the minimum sample size required to ensure that the survey findings are representative of the entire population of the establishment.<sup>25</sup>

### Distributing and collecting questionnaires

HMIP researchers distribute and collect the questionnaires in person. So that prisoners can give their informed consent<sup>26</sup> to participate, the purpose of the survey is explained and assurances are given about confidentiality and anonymity. 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 13 May 2019 the prisoner population at HMP Forest Bank was 1,463. Using the sampling method described above, questionnaires were distributed to 226 prisoners. We received a total of 161 completed questionnaires, a response rate of 71%. This included three questionnaires completed via face-to-face interview. Twenty-nine prisoners declined to participate in the survey and 36 questionnaires were either not returned at all or returned blank.

<sup>24</sup> Qualitative analysis of these written comments is undertaken by HMIP researchers and used by inspectors.

<sup>25</sup> 95% confidence interval with a 7% margin of error. The formula assumes a 75% response rate (65% in open establishments).

<sup>26</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 HMIP's website <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

## Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for HMP Forest Bank. For the comparator analyses, each question was reformulated into a binary 'yes/no' format and affirmative responses compared.<sup>27</sup> Missing responses have been excluded from all analyses and for some questions, responses from a sub-group of the sample are reported (as indicated in the data).

### Full survey results

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

### Responses from HMP Forest Bank 2019 compared with those from other HMIP surveys<sup>28</sup>

- Survey responses from HMP Forest Bank in 2019 compared with survey responses from other local prisons inspected since September 2017.
- Survey responses from HMP Forest Bank in 2019 compared with survey responses from HMP Forest Bank in 2016.

### Comparisons between different residential locations within HMP Forest Bank 2019

- responses of prisoners on vulnerable prisoner wings (C2 and D wing) compared with those from the rest of the establishment.

### Comparisons between self-reported sub-populations of prisoners within HMP Forest Bank 2019<sup>29</sup>

- responses of prisoners from black or minority ethnic groups compared with those of white prisoners.
- responses of Muslim prisoners compared with those of non-Muslim prisoners.
- responses of prisoners who reported that they had a disability compared to those who did not.
- responses of prisoners who reported that they had mental health problems compared with those who did not.
- 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>30</sup>

In the comparator analyses, statistically significant<sup>31</sup> differences are indicated by shading. 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 are no valid comparative data for that question.

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

<sup>27</sup> Using the Chi-square test (or Fisher's exact test if there are fewer than five responses in a group).

<sup>28</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>29</sup> These analyses are carried out on summary data from selected survey questions only.

<sup>30</sup> A minimum of 10 responses which must also represent at least 10% of the total response.

<sup>31</sup> A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. In order to appropriately adjust p-values in light of multiple testing,  $p < 0.01$  is considered statistically significant for all comparisons undertaken. This means there is only a 1% likelihood that the difference is due to chance.

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

## Survey summary

### Background information

<b>I.1</b>	<b>What wing or houseblock are you currently living on?</b>	
	A Wing.....	15 (9%)
	B Wing.....	19 (12%)
	C1 Wing.....	10 (6%)
	C2 Wing.....	8 (5%)
	D Wing.....	29 (18%)
	E Wing.....	17 (11%)
	F Wing.....	16 (10%)
	G Wing.....	18 (11%)
	H Wing.....	25 (16%)
	Segregation unit.....	3 (2%)
	Health care unit.....	1 (1%)
<b>I.2</b>	<b>How old are you?</b>	
	Under 21 .....	8 (5%)
	21 - 25.....	22 (14%)
	26 - 29.....	21 (13%)
	30 - 39.....	49 (30%)
	40 - 49.....	42 (26%)
	50 - 59.....	14 (9%)
	60 - 69.....	2 (1%)
	70 or over.....	3 (2%)
<b>I.3</b>	<b>What is your ethnic group?</b>	
	White - English/ Welsh/ Scottish/ Northern Irish/ British.....	123 (77%)
	White - Irish.....	1 (1%)
	White - Gypsy or Irish Traveller.....	5 (3%)
	White - any other White background.....	6 (4%)
	Mixed - White and Black Caribbean.....	1 (1%)
	Mixed - White and Black African.....	2 (1%)
	Mixed - White and Asian.....	0 (0%)
	Mixed - any other Mixed ethnic background.....	1 (1%)
	Asian/ Asian British - Indian.....	2 (1%)
	Asian/ Asian British - Pakistani.....	9 (6%)
	Asian/ Asian British - Bangladeshi.....	0 (0%)
	Asian/ Asian British - Chinese.....	0 (0%)
	Asian - any other Asian Background.....	1 (1%)
	Black/ Black British - Caribbean.....	5 (3%)
	Black/ Black British - African.....	0 (0%)
	Black - any other Black/ African/ Caribbean background.....	1 (1%)
	Arab.....	1 (1%)
	Any other ethnic group.....	1 (1%)
<b>I.4</b>	<b>How long have you been in this prison?</b>	
	Less than 6 months.....	70 (45%)
	6 months or more.....	86 (55%)



<b>1.5</b>	<b>Are you currently serving a sentence?</b>	
	Yes .....	89 (57%)
	Yes - on recall .....	28 (18%)
	No - on remand or awaiting sentence .....	39 (25%)
	No - immigration detainee.....	0 (0%)
<b>1.6</b>	<b>How long is your sentence?</b>	
	Less than 6 months.....	21 (13%)
	6 months to less than 1 year .....	5 (3%)
	1 year to less than 4 years .....	35 (22%)
	4 years to less than 10 years .....	36 (23%)
	10 years or more .....	14 (9%)
	IPP (indeterminate sentence for public protection) .....	4 (3%)
	Life .....	2 (1%)
	Not currently serving a sentence.....	39 (25%)

## Arrival and reception

<b>2.1</b>	<b>Were you given up-to-date information about this prison before you came here?</b>	
	Yes .....	23 (15%)
	No.....	115 (75%)
	Don't remember .....	16 (10%)
<b>2.2</b>	<b>When you arrived at this prison, how long did you spend in reception?</b>	
	Less than 2 hours .....	47 (30%)
	2 hours or more.....	103 (65%)
	Don't remember .....	8 (5%)
<b>2.3</b>	<b>When you were searched in reception, was this done in a respectful way?</b>	
	Yes .....	112 (72%)
	No.....	35 (22%)
	Don't remember .....	9 (6%)
<b>2.4</b>	<b>Overall, how were you treated in reception?</b>	
	Very well .....	26 (17%)
	Quite well .....	87 (56%)
	Quite badly .....	30 (19%)
	Very badly .....	6 (4%)
	Don't remember .....	7 (4%)
<b>2.5</b>	<b>When you first arrived here, did you have any of the following problems?</b>	
	Problems getting phone numbers .....	63 (41%)
	Contacting family.....	63 (41%)
	Arranging care for children or other dependants.....	8 (5%)
	Contacting employers.....	9 (6%)
	Money worries.....	45 (29%)
	Housing worries .....	36 (23%)
	Feeling depressed.....	76 (49%)
	Feeling suicidal .....	31 (20%)
	Other mental health problems .....	51 (33%)
	Physical health problems .....	36 (23%)
	Drug or alcohol problems (e.g. withdrawal) .....	41 (26%)
	Problems getting medication .....	42 (27%)
	Needing protection from other prisoners.....	17 (11%)
	Lost or delayed property .....	39 (25%)
	Other problems.....	15 (10%)
	Did not have any problems.....	22 (14%)

<b>2.6</b>	<b>Did staff help you to deal with these problems when you first arrived?</b>	
	Yes .....	33 (22%)
	No .....	95 (63%)
	Did not have any problems when I first arrived .....	22 (15%)

### First night and induction

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

Tobacco or nicotine replacement .....	118 (74%)
Toiletries / other basic items .....	60 (38%)
A shower .....	30 (19%)
A free phone call .....	80 (50%)
Something to eat .....	111 (70%)
The chance to see someone from health care .....	87 (55%)
The chance to talk to a Listener or Samaritans .....	34 (21%)
Support from another prisoner (e.g. Insider or buddy) .....	17 (11%)
Wasn't offered any of these things .....	12 (8%)

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

Very clean .....	8 (5%)
Quite clean .....	50 (31%)
Quite dirty .....	41 (26%)
Very dirty .....	56 (35%)
Don't remember .....	5 (3%)

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

Yes .....	104 (66%)
No .....	49 (31%)
Don't remember .....	5 (3%)

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

	Yes	No	Don't remember
Access to the prison shop / canteen?	76 (50%)	71 (47%)	5 (3%)
Free PIN phone credit?	89 (59%)	51 (34%)	12 (8%)
Numbers put on your PIN phone?	66 (43%)	79 (52%)	7 (5%)

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

Yes .....	72 (47%)
No .....	63 (41%)
Have not had an induction .....	17 (11%)

### On the wing

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

Yes .....	67 (42%)
No, I'm in a shared cell or dormitory .....	93 (58%)

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

Yes .....	37 (23%)
No .....	116 (73%)
Don't know .....	6 (4%)
Don't have a cell call bell .....	1 (1%)

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

	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	96 (62%)	56 (36%)	3 (2%)
Can you shower every day?	150 (96%)	6 (4%)	0 (0%)
Do you have clean sheets every week?	133 (86%)	18 (12%)	3 (2%)
Do you get cell cleaning materials every week?	106 (68%)	44 (28%)	5 (3%)
Is it normally quiet enough for you to relax or sleep at night?	106 (68%)	47 (30%)	2 (1%)
Can you get your stored property if you need it?	39 (25%)	72 (47%)	42 (27%)

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

Very clean .....	26 (16%)
Quite clean .....	90 (57%)
Quite dirty .....	33 (21%)
Very dirty .....	9 (6%)

**Food and canteen**

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

Very good .....	7 (4%)
Quite good .....	63 (40%)
Quite bad .....	53 (34%)
Very bad .....	33 (21%)

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

Always .....	10 (6%)
Most of the time .....	36 (23%)
Some of the time .....	55 (35%)
Never .....	58 (36%)

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

Yes .....	72 (46%)
No .....	76 (49%)
Don't know .....	7 (5%)

**Relationships with staff**

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

Yes .....	112 (72%)
No .....	43 (28%)

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

Yes .....	104 (67%)
No .....	51 (33%)

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

Yes .....	45 (29%)
No .....	110 (71%)

<b>6.4</b>	<b>How helpful is your personal or named officer?</b>	
	Very helpful.....	16 (10%)
	Quite helpful.....	25 (16%)
	Not very helpful .....	7 (5%)
	Not at all helpful.....	11 (7%)
	Don't know.....	21 (14%)
	Don't have a personal / named officer .....	73 (48%)
<b>6.5</b>	<b>How often do you see prison governors, directors or senior managers talking to prisoners?</b>	
	Regularly.....	15 (10%)
	Sometimes.....	27 (18%)
	Hardly ever.....	94 (62%)
	Don't know.....	16 (11%)
<b>6.6</b>	<b>Do you feel that you are treated as an individual in this prison?</b>	
	Yes.....	68 (45%)
	No.....	83 (55%)
<b>6.7</b>	<b>Are prisoners here consulted about things like food, canteen, health care or wing issues?</b>	
	Yes, and things sometimes change.....	27 (18%)
	Yes, but things don't change.....	45 (30%)
	No.....	56 (37%)
	Don't know.....	24 (16%)

## Faith

<b>7.1</b>	<b>What is your religion?</b>	
	No religion.....	56 (36%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations) .....	75 (48%)
	Buddhist.....	2 (1%)
	Hindu.....	0 (0%)
	Jewish .....	1 (1%)
	Muslim.....	16 (10%)
	Sikh .....	1 (1%)
	Other .....	4 (3%)
<b>7.2</b>	<b>Are your religious beliefs respected here?</b>	
	Yes.....	64 (43%)
	No.....	14 (9%)
	Don't know.....	16 (11%)
	Not applicable (no religion).....	56 (37%)
<b>7.3</b>	<b>Are you able to speak to a Chaplain of your faith in private, if you want to?</b>	
	Yes.....	70 (47%)
	No.....	10 (7%)
	Don't know.....	14 (9%)
	Not applicable (no religion).....	56 (37%)
<b>7.4</b>	<b>Are you able to attend religious services, if you want to?</b>	
	Yes.....	86 (57%)
	No.....	5 (3%)
	Don't know.....	5 (3%)
	Not applicable (no religion).....	56 (37%)

**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 .....	40 (26%)
	No .....	114 (74%)
<b>8.2</b>	<b>Have you had any problems with sending or receiving mail (letters or parcels)?</b>	
	Yes .....	67 (45%)
	No .....	82 (55%)
<b>8.3</b>	<b>Are you able to use a phone every day (if you have credit)?</b>	
	Yes .....	146 (94%)
	No .....	9 (6%)
<b>8.4</b>	<b>How easy or difficult is it for your family and friends to get here?</b>	
	Very easy .....	22 (15%)
	Quite easy .....	51 (34%)
	Quite difficult .....	35 (23%)
	Very difficult .....	27 (18%)
	Don't know .....	16 (11%)
<b>8.5</b>	<b>How often do you have visits from family or friends?</b>	
	More than once a week .....	8 (5%)
	About once a week .....	39 (25%)
	Less than once a week .....	57 (37%)
	Not applicable (don't get visits) .....	49 (32%)
<b>8.6</b>	<b>Do visits usually start and finish on time?</b>	
	Yes .....	45 (45%)
	No .....	55 (55%)
<b>8.7</b>	<b>Are your visitors usually treated respectfully by staff?</b>	
	Yes .....	65 (66%)
	No .....	34 (34%)

**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 .....	56 (37%)
	Yes, but these times are not usually kept to .....	83 (54%)
	No .....	14 (9%)
<b>9.2</b>	<b>How long do you usually spend out of your cell on a typical weekday (including time spent at education, work etc.)?</b>	
	Less than 2 hours .....	33 (22%)
	2 to 6 hours .....	68 (45%)
	6 to 10 hours .....	35 (23%)
	10 hours or more .....	5 (3%)
	Don't know .....	10 (7%)
<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 .....	20 (13%)
	2 to 6 hours .....	104 (68%)
	6 to 10 hours .....	25 (16%)
	10 hours or more .....	1 (1%)
	Don't know .....	3 (2%)

<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 .....	4	(3%)
	1 or 2 .....	21	(14%)
	3 to 5.....	22	(14%)
	More than 5.....	101	(66%)
	Don't know.....	5	(3%)
<b>9.5</b>	<b>How many days in a typical week do you get association, if you want it?</b>		
	None .....	6	(4%)
	1 or 2 .....	3	(2%)
	3 to 5.....	17	(11%)
	More than 5.....	118	(77%)
	Don't know.....	10	(6%)
<b>9.6</b>	<b>How many days in a typical week could you go outside for exercise, if you wanted to?</b>		
	None .....	11	(7%)
	1 or 2 .....	14	(9%)
	3 to 5.....	12	(8%)
	More than 5.....	108	(72%)
	Don't know.....	6	(4%)
<b>9.7</b>	<b>Typically, how often do you go to the gym?</b>		
	Twice a week or more .....	64	(43%)
	About once a week.....	22	(15%)
	Less than once a week.....	7	(5%)
	Never .....	57	(38%)
<b>9.8</b>	<b>Typically, how often do you go to the library?</b>		
	Twice a week or more .....	7	(5%)
	About once a week.....	45	(31%)
	Less than once a week.....	24	(16%)
	Never .....	70	(48%)
<b>9.9</b>	<b>Does the library have a wide enough range of materials to meet your needs?</b>		
	Yes .....	15	(11%)
	No.....	57	(40%)
	Don't use the library .....	70	(49%)

### Applications, complaints and legal rights

<b>10.1</b>	<b>Is it easy for you to make an application?</b>			
	Yes.....	95	(63%)	
	No.....	37	(25%)	
	Don't know.....	19	(13%)	
<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?	56 (43%)	51 (40%)	22 (17%)
	Are applications usually dealt with within 7 days?	65 (51%)	41 (32%)	22 (17%)

<b>I0.3</b>	<b>Is it easy for you to make a complaint?</b>				
	Yes.....				89 (59%)
	No.....				34 (23%)
	Don't know.....				28 (19%)
<b>I0.4</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?	29 (21%)	51 (36%)	60 (43%)	
	Are complaints usually dealt with within 7 days?	40 (29%)	39 (28%)	60 (43%)	
<b>I0.5</b>	<b>Have you ever been prevented from making a complaint here when you wanted to?</b>				
	Yes.....				35 (24%)
	No.....				69 (47%)
	Not wanted to make a complaint.....				43 (29%)
<b>I0.6</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?	73 (49%)	39 (26%)	22 (15%)	15 (10%)
	Attend legal visits?	74 (52%)	32 (23%)	21 (15%)	15 (11%)
	Get bail information?	28 (20%)	43 (31%)	39 (28%)	29 (21%)
<b>I0.7</b>	<b>Have staff here ever opened letters from your solicitor or legal representative when you were not present?</b>				
	Yes.....				72 (48%)
	No.....				61 (41%)
	Not had any legal letters.....				16 (11%)

## Health care

<b>I1.1</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	10 (7%)	27 (18%)	43 (29%)	55 (37%)	14 (9%)
	Nurse	18 (12%)	50 (34%)	43 (29%)	27 (18%)	11 (7%)
	Dentist	5 (3%)	13 (9%)	37 (25%)	71 (48%)	22 (15%)
	Mental health workers	9 (6%)	19 (13%)	32 (21%)	50 (34%)	39 (26%)
<b>I1.2</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	15 (10%)	39 (27%)	37 (25%)	25 (17%)	31 (21%)
	Nurse	27 (18%)	54 (37%)	27 (18%)	19 (13%)	20 (14%)
	Dentist	10 (7%)	22 (15%)	26 (18%)	36 (25%)	50 (35%)
	Mental health workers	17 (12%)	20 (14%)	24 (16%)	29 (20%)	57 (39%)
<b>I1.3</b>	<b>Do you have any mental health problems?</b>					
	Yes.....					92 (63%)
	No.....					54 (37%)

<b>11.4</b>	<b>Have you been helped with your mental health problems in this prison?</b>	
	Yes .....	30 (20%)
	No.....	63 (43%)
	Don't have any mental health problems .....	54 (37%)
<b>11.5</b>	<b>What do you think of the overall quality of the health services here?</b>	
	Very good .....	11 (7%)
	Quite good .....	34 (23%)
	Quite bad .....	46 (31%)
	Very bad .....	37 (25%)
	Don't know.....	21 (14%)

### 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 .....	75 (50%)
	No.....	75 (50%)
<b>12.2</b>	<b>If you have a disability, are you getting the support you need?</b>	
	Yes .....	17 (12%)
	No.....	53 (37%)
	Don't have a disability .....	75 (52%)
<b>12.3</b>	<b>Have you been on an ACCT in this prison?</b>	
	Yes .....	31 (21%)
	No.....	114 (79%)
<b>12.4</b>	<b>If you have been on an ACCT in this prison, did you feel cared for by staff?</b>	
	Yes .....	8 (6%)
	No.....	20 (14%)
	Have not been on an ACCT in this prison .....	114 (80%)
<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 .....	36 (24%)
	Quite easy .....	39 (27%)
	Quite difficult .....	13 (9%)
	Very difficult .....	10 (7%)
	Don't know.....	48 (33%)
	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 .....	38 (25%)
	No.....	112 (75%)
<b>13.2</b>	<b>Have you been helped with your alcohol problem in this prison?</b>	
	Yes .....	15 (10%)
	No.....	22 (15%)
	Did not / do not have an alcohol problem .....	112 (75%)
<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 .....	73 (49%)
	No.....	77 (51%)



<b>13.4</b>	<b>Have you developed a problem with illicit drugs since you have been in this prison?</b>	
	Yes .....	39 (26%)
	No .....	110 (74%)
<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 .....	23 (16%)
	No .....	125 (84%)
<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 .....	32 (23%)
	No .....	40 (28%)
	Did not / do not have a drug problem.....	69 (49%)
<b>13.7</b>	<b>Is it easy or difficult to get illicit drugs in this prison?</b>	
	Very easy .....	54 (36%)
	Quite easy .....	36 (24%)
	Quite difficult .....	6 (4%)
	Very difficult .....	5 (3%)
	Don't know.....	47 (32%)
<b>13.8</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	Very easy .....	13 (9%)
	Quite easy .....	26 (18%)
	Quite difficult .....	16 (11%)
	Very difficult .....	24 (16%)
	Don't know.....	67 (46%)

## Safety

<b>14.1</b>	<b>Have you ever felt unsafe here?</b>	
	Yes .....	88 (57%)
	No .....	66 (43%)
<b>14.2</b>	<b>Do you feel unsafe now?</b>	
	Yes .....	45 (31%)
	No .....	102 (69%)
<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.)</b>	
	Verbal abuse .....	66 (45%)
	Threats or intimidation.....	65 (44%)
	Physical assault.....	40 (27%)
	Sexual assault.....	4 (3%)
	Theft of canteen or property.....	64 (44%)
	Other bullying / victimisation .....	45 (31%)
	Not experienced any of these from prisoners here.....	60 (41%)
<b>14.4</b>	<b>If you were being bullied / victimised by other prisoners here, would you report it?</b>	
	Yes .....	37 (26%)
	No .....	106 (74%)

**14.5 Have you experienced any of the following types of bullying / victimisation from staff here?***(Please tick all that apply to you)*

Verbal abuse .....	46 (32%)
Threats or intimidation.....	37 (26%)
Physical assault.....	18 (12%)
Sexual assault.....	2 (1%)
Theft of canteen or property.....	13 (9%)
Other bullying / victimisation .....	28 (19%)
Not experienced any of these from staff here.....	77 (53%)

**14.6 If you were being bullied / victimised by staff here, would you report it?**

Yes .....	58 (41%)
No.....	84 (59%)

**Behaviour management****15.1 Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?**

Yes .....	48 (33%)
No.....	57 (39%)
Don't know what the incentives / rewards are .....	42 (29%)

**15.2 Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?**

Yes .....	42 (29%)
No.....	58 (40%)
Don't know.....	13 (9%)
Don't know what this is .....	32 (22%)

**15.3 Have you been physically restrained by staff in this prison in the last 6 months?**

Yes .....	19 (13%)
No.....	130 (87%)

**15.4 If you have been restrained by staff in this prison in the last 6 months, did anyone come and talk to you about it afterwards?**

Yes .....	3 (2%)
No.....	17 (11%)
Don't remember .....	0 (0%)
Not been restrained here in last 6 months .....	129 (87%)

**15.5 Have you spent one or more nights in the segregation unit in this prison in the last 6 months?**

Yes .....	19 (13%)
No.....	128 (87%)

**15.6 If you have spent one or more nights in the segregation unit in this prison in the last 6 months please answer the questions below:**

	Yes	No
Were you treated well by segregation staff?	11 (61%)	7 (39%)
Could you shower every day?	12 (67%)	6 (33%)
Could you go outside for exercise every day?	16 (94%)	1 (6%)
Could you use the phone every day (if you had credit)?	13 (76%)	4 (24%)

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

	Easy	Difficult	Don't know	Not available here
Education	72 (51%)	40 (28%)	27 (19%)	2 (1%)
Vocational or skills training	33 (24%)	50 (37%)	45 (33%)	8 (6%)
Prison job	67 (47%)	54 (38%)	22 (15%)	1 (1%)
Voluntary work outside of the prison	2 (1%)	35 (26%)	48 (35%)	51 (38%)
Paid work outside of the prison	3 (2%)	39 (28%)	45 (32%)	53 (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	48 (34%)	46 (33%)	46 (33%)
Vocational or skills training	31 (24%)	36 (28%)	62 (48%)
Prison job	39 (29%)	63 (47%)	32 (24%)
Voluntary work outside of the prison	19 (15%)	26 (21%)	80 (64%)
Paid work outside of the prison	20 (16%)	24 (19%)	82 (65%)

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

Yes .....	61 (42%)
No.....	74 (51%)
Not applicable (e.g. if you are retired, sick or on remand) .....	11 (8%)

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

Yes .....	49 (35%)
No.....	91 (65%)

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

Yes .....	35 (74%)
No.....	5 (11%)
Don't know what my objectives or targets are.....	7 (15%)

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

Yes .....	21 (47%)
No.....	17 (38%)
Don't know what my objectives or targets are.....	7 (16%)

**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	13 (30%)	10 (23%)	20 (47%)
Other programmes	17 (40%)	8 (19%)	18 (42%)
One to one work	18 (41%)	5 (11%)	21 (48%)
Being on a specialist unit	5 (12%)	6 (15%)	30 (73%)
ROTL - day or overnight release	1 (2%)	5 (12%)	36 (86%)

**Preparation for release**

<b>18.1</b>	<b>Do you expect to be released in the next 3 months?</b>			
	Yes .....			45 (31%)
	No .....			75 (52%)
	Don't know .....			23 (16%)
<b>18.2</b>	<b>How close is this prison to your home area or intended release address?</b>			
	Very near .....			4 (9%)
	Quite near .....			28 (64%)
	Quite far .....			11 (25%)
	Very far .....			1 (2%)
<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 .....			28 (64%)
	No .....			16 (36%)
<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	10 (24%)	20 (48%)	12 (29%)
	Getting employment	4 (10%)	24 (59%)	13 (32%)
	Setting up education or training	3 (8%)	12 (32%)	23 (61%)
	Arranging benefits	8 (19%)	23 (53%)	12 (28%)
	Sorting out finances	2 (5%)	18 (46%)	19 (49%)
	Support for drug or alcohol problems	9 (22%)	10 (24%)	22 (54%)
	Health / mental health support	8 (19%)	18 (43%)	16 (38%)
	Social care support	5 (13%)	15 (38%)	19 (49%)
	Getting back in touch with family or friends	6 (15%)	7 (17%)	28 (68%)

**More about you**

<b>19.1</b>	<b>Do you have children under the age of 18?</b>		
	Yes .....		87 (59%)
	No .....		61 (41%)
<b>19.2</b>	<b>Are you a UK / British citizen?</b>		
	Yes .....		136 (93%)
	No .....		11 (7%)
<b>19.3</b>	<b>Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?</b>		
	Yes .....		9 (6%)
	No .....		138 (94%)
<b>19.4</b>	<b>Have you ever been in the armed services (e.g. army, navy, air force)?</b>		
	Yes .....		7 (5%)
	No .....		139 (95%)
<b>19.5</b>	<b>What is your gender?</b>		
	Male .....		146 (99%)
	Female .....		1 (1%)
	Non-binary .....		0 (0%)
	Other .....		0 (0%)

**19.6 How would you describe your sexual orientation?**

Straight / heterosexual.....	136 (96%)
Gay / lesbian / homosexual.....	2 (1%)
Bisexual.....	3 (2%)
Other.....	0 (0%)

**19.7 Do you identify as transgender or transsexual?**

Yes.....	4 (3%)
No.....	136 (97%)

**Final questions about this prison****20.1 Do you think your experiences in this prison have made you more or less likely to offend in the future?**

More likely to offend.....	21 (15%)
Less likely to offend.....	67 (47%)
Made no difference.....	56 (39%)

## HMP Forest Bank 2019

### Survey responses compared with those from other HMIP surveys of local prisons and with those from the previous survey

In this table summary statistics from HMP Forest Bank 2019 are compared with the following HMIP survey data:

- Summary statistics from surveys of local prisons conducted since the introduction of the new questionnaire in September 2017 (20 prisons). Please note that this does not include all local prisons.
- Summary statistics from HMP Forest Bank in 2016. 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**

HMP Forest Bank 2019	All other local prisons surveyed since September 2017	HMP Forest Bank 2019	HMP Forest Bank 2016
161	3,503	161	182

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

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION						
1.2	Are you under 21 years of age?	<i>n=161</i>	5%	5%	5%	9%
	Are you 25 years of age or younger?	<i>n=161</i>	19%	22%	19%	
	Are you 50 years of age or older?	<i>n=161</i>	12%	13%	12%	10%
	Are you 70 years of age or older?	<i>n=161</i>	2%	2%	2%	2%
1.3	Are you from a minority ethnic group?	<i>n=159</i>	15%	27%	15%	15%
1.4	Have you been in this prison for less than 6 months?	<i>n=156</i>	45%	60%	45%	
1.5	Are you currently serving a sentence?	<i>n=156</i>	75%	70%	75%	72%
	Are you on recall?	<i>n=156</i>	18%	13%	18%	13%
1.6	Is your sentence less than 12 months?	<i>n=156</i>	17%	20%	17%	23%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n=156</i>	3%	3%	3%	1%
7.1	Are you Muslim?	<i>n=155</i>	10%	14%	10%	8%
11.3	Do you have any mental health problems?	<i>n=146</i>	63%	50%	63%	
12.1	Do you consider yourself to have a disability?	<i>n=150</i>	50%	40%	50%	28%
19.1	Do you have any children under the age of 18?	<i>n=148</i>	59%	53%	59%	55%
19.2	Are you a foreign national?	<i>n=147</i>	8%	10%	8%	11%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n=147</i>	6%	6%	6%	4%
19.4	Have you ever been in the armed services?	<i>n=146</i>	5%	7%	5%	4%
19.5	Is your gender female or non-binary?	<i>n=147</i>	1%	1%	1%	
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n=141</i>	4%	4%	4%	4%
19.7	Do you identify as transgender or transsexual?	<i>n=140</i>	3%	2%	3%	
ARRIVAL AND RECEPTION						
2.1	Were you given up-to-date information about this prison before you came here?	<i>n=154</i>	15%	17%	15%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n=158</i>	30%	35%	30%	38%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n=156</i>	72%	77%	72%	75%
2.4	Overall, were you treated very / quite well in reception?	<i>n=156</i>	72%	75%	72%	

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Number of completed questionnaires returned

HMP Forest Bank 2019	All other local prisons surveyed since September 2017	HMP Forest Bank 2019	HMP Forest Bank 2016
161	3,503	161	182

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

2.5	When you first arrived, did you have any problems?	n=155	86%	88%	86%	70%
2.5	Did you have problems with:					
	- Getting phone numbers?	n=155	41%	46%	41%	25%
	- Contacting family?	n=155	41%	48%	41%	29%
	- Arranging care for children or other dependents?	n=155	5%	4%	5%	
	- Contacting employers?	n=155	6%	7%	6%	6%
	- Money worries?	n=155	29%	29%	29%	26%
	- Housing worries?	n=155	23%	24%	23%	23%
	- Feeling depressed?	n=155	49%	48%	49%	
	- Feeling suicidal?	n=155	20%	18%	20%	
	- Other mental health problems?	n=155	33%	29%	33%	
	- Physical health problems?	n=155	23%	20%	23%	15%
	- Drugs or alcohol (e.g. withdrawal)?	n=155	27%	24%	27%	
	- Getting medication?	n=155	27%	31%	27%	
	- Needing protection from other prisoners?	n=155	11%	11%	11%	10%
	- Lost or delayed property?	n=155	25%	21%	25%	10%
	<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	n=128	26%	30%	26%	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?	n=159	74%	71%	74%	82%
	- Toiletries / other basic items?	n=159	38%	53%	38%	54%
	- A shower?	n=159	19%	27%	19%	24%
	- A free phone call?	n=159	50%	48%	50%	67%
	- Something to eat?	n=159	69%	76%	69%	67%
	- The chance to see someone from health care?	n=159	54%	61%	54%	66%
	- The chance to talk to a Listener or Samaritans?	n=159	21%	25%	21%	33%
	- Support from another prisoner (e.g. Insider or buddy)?	n=159	11%	21%	11%	
	- None of these?	n=159	8%	5%	8%	
3.2	On your first night in this prison, was your cell very / quite clean?	n=160	36%	28%	36%	
3.3	Did you feel safe on your first night here?	n=158	66%	60%	66%	68%
3.4	In your first few days here, did you get:					
	- Access to the prison shop / canteen?	n=152	50%	31%	50%	35%
	- Free PIN phone credit?	n=152	59%	53%	59%	
	- Numbers put on your PIN phone?	n=152	43%	33%	43%	
3.5	Have you had an induction at this prison?	n=152	89%	82%	89%	88%
	<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	n=135	53%	48%	53%	

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	HMP Forest Bank 2019	All other local prisons surveyed since September 2017	HMP Forest Bank 2019	HMP Forest Bank 2016
<b>Number of completed questionnaires returned</b>	<b>161</b>	<b>3,503</b>	<b>161</b>	<b>182</b>

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

<b>ON THE WING</b>						
4.1	Are you in a cell on your own?	n=160	42%	33%	42%	
4.2	Is your cell call bell normally answered within 5 minutes?	n=160	23%	20%	23%	33%
4.3	On the wing or houseblock you currently live on:					
	- Do you normally have enough clean, suitable clothes for the week?	n=155	62%	54%	62%	63%
	- Can you shower every day?	n=156	96%	77%	96%	93%
	- Do you have clean sheets every week?	n=154	86%	60%	86%	89%
	- Do you get cell cleaning materials every week?	n=155	68%	49%	68%	84%
	- Is it normally quiet enough for you to relax or sleep at night?	n=155	68%	53%	68%	65%
4.4	- Can you get your stored property if you need it?	n=153	26%	22%	26%	23%
	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	n=158	73%	54%	73%	
<b>FOOD AND CANTEEN</b>						
5.1	Is the quality of the food in this prison very / quite good?	n=156	45%	33%	45%	
5.2	Do you get enough to eat at meal-times always / most of the time?	n=159	29%	29%	29%	
5.3	Does the shop / canteen sell the things that you need?	n=155	47%	59%	47%	40%
<b>RELATIONSHIPS WITH STAFF</b>						
6.1	Do most staff here treat you with respect?	n=155	72%	67%	72%	73%
6.2	Are there any staff here you could turn to if you had a problem?	n=155	67%	69%	67%	62%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	n=155	29%	30%	29%	26%
6.4	Do you have a personal officer?	n=153	52%	58%	52%	
<i>For those who have a personal officer:</i>						
6.4	Is your personal or named officer very / quite helpful?	n=80	51%	48%	51%	
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	n=152	10%	6%	10%	
6.6	Do you feel that you are treated as an individual in this prison?	n=151	45%	38%	45%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	n=152	47%	39%	47%	
	If so, do things sometimes change?	n=72	38%	33%	38%	
<b>FAITH</b>						
7.1	Do you have a religion?	n=155	64%	69%	64%	65%
<i>For those who have a religion:</i>						
7.2	Are your religious beliefs respected here?	n=94	68%	67%	68%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	n=94	75%	64%	75%	
7.4	Are you able to attend religious services, if you want to?	n=96	90%	84%	90%	



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CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	n=154	26%	24%	26%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	n=149	45%	56%	45%
8.3	Are you able to use a phone every day (if you have credit)?	n=155	94%	81%	94%
8.4	Is it very / quite easy for your family and friends to get here?	n=151	48%	45%	48%
8.5	Do you get visits from family/friends once a week or more?	n=153	31%	23%	31%
<i>For those who get visits:</i>					
8.6	Do visits usually start and finish on time?	n=100	45%	42%	45%
8.7	Are your visitors usually treated respectfully by staff?	n=99	66%	71%	66%
TIME OUT OF CELL					
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=153	91%	82%	91%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>					
9.1	Are these times usually kept to?	n=139	40%	48%	40%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	n=151	22%	36%	22%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	n=151	3%	4%	3%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=153	13%	49%	13%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=153	1%	1%	1%
9.4	Do you have time to do domestics more than 5 days in a typical week?	n=153	66%	41%	66%
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=154	77%	41%	77%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=151	72%	45%	72%
9.7	Do you typically go to the gym twice a week or more?	n=150	43%	38%	43%
9.8	Do you typically go to the library once a week or more?	n=146	36%	38%	36%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	n=72	21%	56%	21%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	n=151	63%	66%	63%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	n=107	52%	47%	52%
	Are applications usually dealt with within 7 days?	n=106	61%	33%	61%
10.3	Is it easy for you to make a complaint?	n=151	59%	54%	59%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	n=80	36%	27%	36%
	Are complaints usually dealt with within 7 days?	n=79	51%	21%	51%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=104	34%	30%	34%

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For those who need it, is it easy to:						
10.6	Communicate with your solicitor or legal representative?	n=134	55%	40%	55%	
	Attend legal visits?	n=127	58%	59%	58%	
	Get bail information?	n=110	26%	16%	26%	
For those who have had legal letters:						
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=133	54%	51%	54%	37%
<b>HEALTH CARE</b>						
11.1	Is it very / quite easy to see:					
	- Doctor?	n=149	25%	23%	25%	
	- Nurse?	n=149	46%	45%	46%	
	- Dentist?	n=148	12%	11%	12%	
	- Mental health workers?	n=149	19%	19%	19%	
11.2	Do you think the quality of the health service is very / quite good from:					
	- Doctor?	n=147	37%	39%	37%	
	- Nurse?	n=147	55%	50%	55%	
	- Dentist?	n=144	22%	24%	22%	
	- Mental health workers?	n=147	25%	24%	25%	
11.3	Do you have any mental health problems?	n=146	63%	50%	63%	
For those who have mental health problems:						
11.4	Have you been helped with your mental health problems in this prison?	n=93	32%	34%	32%	
11.5	Do you think the overall quality of the health services here is very / quite good?	n=149	30%	33%	30%	
<b>OTHER SUPPORT NEEDS</b>						
12.1	Do you consider yourself to have a disability?	n=150	50%	40%	50%	28%
For those who have a disability:						
12.2	Are you getting the support you need?	n=70	24%	27%	24%	
12.3	Have you been on an ACCT in this prison?	n=145	21%	23%	21%	
For those who have been on an ACCT:						
12.4	Did you feel cared for by staff?	n=28	29%	49%	29%	
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=147	51%	45%	51%	
<b>ALCOHOL AND DRUGS</b>						
13.1	Did you have an alcohol problem when you came into this prison?	n=150	25%	23%	25%	24%
For those who had / have an alcohol problem:						
13.2	Have you been helped with your alcohol problem in this prison?	n=37	41%	57%	41%	51%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=150	49%	34%	49%	38%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=149	26%	16%	26%	17%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=148	16%	12%	16%	
For those who had / have a drug problem:						
13.6	Have you been helped with your drug problem in this prison?	n=72	44%	48%	44%	42%
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=148	61%	50%	61%	
13.8	Is it very / quite easy to get alcohol in this prison?	n=146	27%	26%	27%	

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SAFETY						
14.1	Have you ever felt unsafe here?	<i>n</i> =154	57%	61%	57%	50%
14.2	Do you feel unsafe now?	<i>n</i> =147	31%	28%	31%	23%
14.3	Have you experienced any of the following from other prisoners here:					
	- Verbal abuse?	<i>n</i> =147	45%	38%	45%	
	- Threats or intimidation?	<i>n</i> =147	44%	35%	44%	
	- Physical assault?	<i>n</i> =147	27%	21%	27%	
	- Sexual assault?	<i>n</i> =147	3%	3%	3%	
	- Theft of canteen or property?	<i>n</i> =147	44%	32%	44%	
	- Other bullying / victimisation?	<i>n</i> =147	31%	20%	31%	
	- Not experienced any of these from prisoners here	<i>n</i> =147	41%	47%	41%	
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<i>n</i> =143	26%	35%	26%	
14.5	Have you experienced any of the following from staff here:					
	- Verbal abuse?	<i>n</i> =145	32%	33%	32%	
	- Threats or intimidation?	<i>n</i> =145	26%	26%	26%	
	- Physical assault?	<i>n</i> =145	12%	13%	12%	
	- Sexual assault?	<i>n</i> =145	1%	2%	1%	
	- Theft of canteen or property?	<i>n</i> =145	9%	11%	9%	
	- Other bullying / victimisation?	<i>n</i> =145	19%	18%	19%	
	- Not experienced any of these from staff here	<i>n</i> =145	53%	55%	53%	
14.6	If you were being bullied / victimised by staff here, would you report it?	<i>n</i> =142	41%	46%	41%	
BEHAVIOUR MANAGEMENT						
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<i>n</i> =147	33%	38%	33%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<i>n</i> =145	29%	35%	29%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<i>n</i> =149	13%	15%	13%	9%
<i>For those who have been restrained in the last 6 months:</i>						
15.4	Did anyone come and talk to you about it afterwards?	<i>n</i> =20	15%	19%	15%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	<i>n</i> =147	13%	10%	13%	
<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>						
15.6	Were you treated well by segregation staff?	<i>n</i> =18	61%	52%	61%	
	Could you shower every day?	<i>n</i> =18	67%	47%	67%	
	Could you go outside for exercise every day?	<i>n</i> =17	94%	57%	94%	
	Could you use the phone every day (if you had credit)?	<i>n</i> =17	77%	45%	77%	

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EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	n=141	51%	53%	51%
	- Vocational or skills training?	n=136	24%	27%	24%
	- Prison job?	n=144	47%	33%	47%
	- Voluntary work outside of the prison?	n=136	2%	4%	2%
	- Paid work outside of the prison?	n=140	2%	4%	2%
16.2	In this prison, have you done the following activities:				
	- Education?	n=140	67%	72%	67%
	- Vocational or skills training?	n=129	52%	55%	52%
	- Prison job?	n=134	76%	71%	76%
	- Voluntary work outside of the prison?	n=125	36%	32%	36%
	- Paid work outside of the prison?	n=126	35%	33%	35%
<i>For those who have done the following activities, do you think they will help you on release:</i>					
	- Education?	n=94	51%	58%	51%
	- Vocational or skills training?	n=67	46%	57%	46%
	- Prison job?	n=102	38%	42%	38%
	- Voluntary work outside of the prison?	n=45	42%	50%	42%
	- Paid work outside of the prison?	n=44	46%	56%	46%
16.3	Do staff encourage you to attend education, training or work?			n=135	45%
<b>PLANNING AND PROGRESSION</b>					
17.1	Do you have a custody plan?			n=140	35%
<i>For those who have a custody plan:</i>					
17.2	Do you understand what you need to do to achieve your objectives or targets?			n=47	75%
17.3	Are staff helping you to achieve your objectives or targets?			n=45	47%
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	n=43	54%	44%	54%
	- Other programmes?	n=43	58%	43%	58%
	- One to one work?	n=44	52%	38%	52%
	- Been on a specialist unit?	n=41	27%	21%	27%
	- ROTL - day or overnight release?	n=42	14%	18%	14%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>					
	- Offending behaviour programmes?	n=23	57%	70%	57%
	- Other programmes?	n=25	68%	65%	68%
	- One to one work?	n=23	78%	65%	78%
	- Being on a specialist unit?	n=11	46%	47%	46%
	- ROTL - day or overnight release?	n=6	17%	49%	17%

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PREPARATION FOR RELEASE					
18.1	Do you expect to be released in the next 3 months?	n=143	32%	31%	32%
<i>For those who expect to be released in the next 3 months:</i>					
18.2	Is this prison very / quite near to your home area or intended release address?	n=44	73%	57%	73%
18.3	Is anybody helping you to prepare for your release?	n=44	64%	44%	64%
18.4	Do you need help to sort out the following for when you are released:				
	- Finding accommodation?	n=42	71%	66%	71%
	- Getting employment?	n=41	68%	63%	68%
	- Setting up education or training?	n=38	40%	50%	40%
	- Arranging benefits?	n=43	72%	69%	72%
	- Sorting out finances?	n=39	51%	59%	51%
	- Support for drug or alcohol problems?	n=41	46%	51%	46%
	- Health / mental Health support?	n=42	62%	58%	62%
	- Social care support?	n=39	51%	43%	51%
18.4	Are you getting help to sort out the following for when you are released, if you need it:				
	- Finding accommodation?	n=30	33%	30%	33%
	- Getting employment?	n=28	14%	19%	14%
	- Setting up education or training?	n=15	20%	16%	20%
	- Arranging benefits?	n=31	26%	22%	26%
	- Sorting out finances?	n=20	10%	16%	10%
	- Support for drug or alcohol problems?	n=19	47%	41%	47%
	- Health / mental Health support?	n=26	31%	23%	31%
	- Social care support?	n=20	25%	16%	25%
- Getting back in touch with family or friends?	n=13	46%	27%	46%	
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	n=144	47%	48%	47%

## HMP Forest Bank 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
24	135	16	139

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	25%	17%	19%	18%
	Are you 50 years of age or older?	13%	12%	13%	12%
1.3	Are you from a minority ethnic group?			75%	72%
7.1	Are you Muslim?	55%	3%		
11.3	Do you have any mental health problems?	52%	65%	53%	65%
12.1	Do you consider yourself to have a disability?	25%	54%	27%	53%
19.2	Are you a foreign national?	11%	6%	20%	6%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	6%	6%	7%	6%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	64%	73%	81%	70%
2.4	Overall, were you treated very / quite well in reception?	70%	73%	69%	72%
2.5	When you first arrived, did you have any problems?	67%	90%	75%	87%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	25%	26%	42%	23%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	64%	66%	69%	65%
3.5	Have you had an induction at this prison?	96%	88%	86%	89%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	57%	53%	75%	51%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	29%	22%	44%	21%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	65%	62%	69%	62%
	- Can you shower every day?	100%	95%	100%	96%
	- Do you have clean sheets every week?	87%	86%	88%	87%
	- Do you get cell cleaning materials every week?	65%	69%	56%	70%
	- Is it normally quiet enough for you to relax or sleep at night?	83%	66%	88%	66%
	- Can you get your stored property if you need it?	30%	24%	50%	22%

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Number of completed questionnaires returned

Black and minority ethnic	White
24	135

Muslim	Non-Muslim
16	139

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	35%	28%
5.3	Does the shop / canteen sell the things that you need?	48%	46%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	82%	70%
6.2	Are there any staff here you could turn to if you had a problem?	76%	66%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	36%	28%
6.6	Do you feel that you are treated as an individual in this prison?	57%	43%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	87%	64%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	86%	73%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	23%	27%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	40%	45%
8.3	Are you able to use a phone every day (if you have credit)?	96%	94%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	53%	68%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	48%	18%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	0%	4%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	29%	20%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	52%	64%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	33%	56%
10.3	Is it easy for you to make a complaint?	29%	64%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	13%	39%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	70%	30%

44%	27%
69%	44%
73%	72%
73%	67%
40%	29%
67%	44%
94%	63%
86%	73%
13%	28%
31%	47%
100%	94%
60%	66%
38%	20%
0%	4%
43%	19%
57%	64%
55%	53%
38%	62%
0%	39%
71%	31%

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Number of completed questionnaires returned

	Black and minority ethnic	White	Muslim	Non-Muslim
	24	135	16	139

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	33%	24%	27%	25%
	- Nurse?	50%	45%	67%	43%
	- Dentist?	10%	13%	13%	12%
	- Mental health workers?	15%	20%	7%	21%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	27%	33%	43%	31%
11.5	Do you think the overall quality of the health services here is very / quite good?	40%	29%	47%	28%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	40%	23%	25%	24%
SAFETY					
14.1	Have you ever felt unsafe here?	46%	60%	50%	58%
14.2	Do you feel unsafe now?	25%	32%	20%	32%
14.3	Not experienced bullying / victimisation by other prisoners	53%	39%	43%	40%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	38%	24%	36%	25%
14.5	Not experienced bullying / victimisation by members of staff	63%	51%	60%	52%
14.6	If you were being bullied / victimised by staff here, would you report it?	47%	40%	50%	41%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	35%	32%	47%	32%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	40%	27%	40%	28%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	10%	13%	7%	14%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	15%	13%	13%	13%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	43%	46%	42%	46%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	28%	36%	27%	36%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	50%	46%	67%	45%
PREPARATION FOR RELEASE					
<i>For those who expect to be released in the next 3 months:</i>					
18.3	Is anybody helping you to prepare for your release?	43%	68%	43%	68%
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?	55%	46%	60%	45%



## HMP Forest Bank 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.

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

Mental health problems	No mental health problems	Have a disability	Do not have a disability
92	54	75	75

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	17%	17%	19%	16%
	Are you 50 years of age or older?	9%	17%	19%	5%
1.3	Are you from a minority ethnic group?	12%	19%	3%	0%
7.1	Are you Muslim?	9%	14%	5%	15%
11.3	Do you have any mental health problems?			81%	47%
12.1	Do you consider yourself to have a disability?	63%	26%		
19.2	Are you a foreign national?	6%	8%	4%	8%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	6%	6%	6%	6%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	70%	74%	71%	73%
2.4	Overall, were you treated very / quite well in reception?	69%	76%	76%	68%
2.5	When you first arrived, did you have any problems?	88%	82%	92%	82%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	18%	28%	24%	24%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	60%	76%	62%	68%
3.5	Have you had an induction at this prison?	92%	83%	89%	88%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	47%	58%	51%	51%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	20%	32%	24%	23%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	57%	72%	52%	71%
	- Can you shower every day?	98%	94%	93%	99%
	- Do you have clean sheets every week?	88%	85%	86%	88%
	- Do you get cell cleaning materials every week?	71%	71%	69%	73%
	- Is it normally quiet enough for you to relax or sleep at night?	66%	71%	66%	70%
	- Can you get your stored property if you need it?	21%	28%	24%	25%

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

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

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

Number of completed questionnaires returned

	Mental health problems	No mental health problems	Have a disability	Do not have a disability
	92	54	75	75

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	21%	44%	29%	29%
5.3	Does the shop / canteen sell the things that you need?	46%	48%	45%	47%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	67%	78%	75%	69%
6.2	Are there any staff here you could turn to if you had a problem?	65%	69%	68%	66%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	32%	26%	28%	32%
6.6	Do you feel that you are treated as an individual in this prison?	43%	55%	43%	50%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	66%	76%	59%	76%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	82%	71%	76%	78%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	26%	28%	22%	31%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	47%	40%	44%	47%
8.3	Are you able to use a phone every day (if you have credit)?	96%	93%	91%	96%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	60%	72%	71%	62%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	22%	23%	28%	15%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	4%	1%	6%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	15%	35%	24%	19%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	62%	65%	61%	65%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	49%	56%	53%	52%
10.3	Is it easy for you to make a complaint?	65%	53%	66%	53%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	34%	40%	44%	27%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	38%	26%	36%	32%

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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
	92	54	75	75

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	30%	15%	25%	25%
	- Nurse?	52%	36%	48%	44%
	- Dentist?	14%	8%	17%	8%
	- Mental health workers?	25%	6%	22%	16%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	34%		26%	43%
11.5	Do you think the overall quality of the health services here is very / quite good?	30%	30%	27%	33%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	26%	21%	24%	
SAFETY					
14.1	Have you ever felt unsafe here?	65%	39%	68%	47%
14.2	Do you feel unsafe now?	41%	15%	44%	18%
14.3	Not experienced bullying / victimisation by other prisoners	31%	58%	32%	49%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	25%	26%	22%	29%
14.5	Not experienced bullying / victimisation by members of staff	47%	64%	39%	66%
14.6	If you were being bullied / victimised by staff here, would you report it?	40%	43%	37%	44%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	34%	32%	28%	37%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	24%	37%	25%	32%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	14%	11%	16%	9%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	15%	11%	14%	12%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	43%	49%	43%	47%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	41%	26%	36%	34%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	47%	46%	39%	55%
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?	71%	47%	71%	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?	43%	52%	43%	49%

## HMP Forest Bank 2019

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

In this table the following analyses are presented:

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

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

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

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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
<b>30</b>	<b>131</b>
50 and over	Under 50
<b>19</b>	<b>142</b>

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	27%			6%
	Are you 70 years of age or older?		2%		16%
1.3	Are you from a minority ethnic group?	21%	14%	16%	15%
7.1	Are you Muslim?	11%	10%	11%	10%
11.3	Do you have any mental health problems?	64%	63%	47%	65%
12.1	Do you consider yourself to have a disability?	54%	49%	78%	46%
19.2	Are you a foreign national?	13%	7%	0%	9%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	4%	7%	6%	6%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	59%	75%	72%	72%
2.4	Overall, were you treated very / quite well in reception?	72%	72%	83%	71%
2.5	When you first arrived, did you have any problems?	87%	86%	100%	84%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	21%	27%	47%	23%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	63%	66%	53%	68%
3.5	Have you had an induction at this prison?	97%	87%	83%	90%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	66%	50%	60%	53%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	10%	26%	32%	22%
4.3					
	- Do you normally have enough clean, suitable clothes for the week?	57%	63%	82%	59%
	- Can you shower every day?	100%	95%	83%	98%
	- Do you have clean sheets every week?	79%	88%	88%	86%
	- Do you get cell cleaning materials every week?	61%	70%	67%	69%
	- Is it normally quiet enough for you to relax or sleep at night?	48%	73%	78%	67%
	- Can you get your stored property if you need it?	36%	23%	22%	26%

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

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

Number of completed questionnaires returned

25 and under	Over 25
30	131

50 and over	Under 50
19	142

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	24%	30%
5.3	Does the shop / canteen sell the things that you need?	61%	43%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	63%	74%
6.2	Are there any staff here you could turn to if you had a problem?	57%	69%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	29%	29%
6.6	Do you feel that you are treated as an individual in this prison?	44%	45%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	62%	69%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	77%	74%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	29%	25%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	43%	46%
8.3	Are you able to use a phone every day (if you have credit)?	96%	94%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	65%	66%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	23%	22%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	0%	4%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	43%	19%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	68%	62%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	30%	58%
10.3	Is it easy for you to make a complaint?	48%	61%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	8%	41%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	50%	31%

44%	27%
33%	48%
78%	72%
78%	66%
28%	29%
50%	44%
54%	70%
73%	75%
22%	27%
31%	47%
88%	95%
70%	65%
29%	21%
0%	4%
25%	21%
41%	66%
60%	52%
53%	60%
63%	33%
17%	36%

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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	50 and over	Under 50
	30	131	19	142

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	37%	22%	27%	25%
	- Nurse?	48%	45%	44%	46%
	- Dentist?	19%	11%	20%	11%
	- Mental health workers?	30%	16%	0%	21%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	18%	36%	25%	33%
11.5	Do you think the overall quality of the health services here is very / quite good?	35%	29%	39%	29%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	29%	23%	23%	25%
SAFETY					
14.1	Have you ever felt unsafe here?	70%	54%	61%	57%
14.2	Do you feel unsafe now?	40%	29%	22%	32%
14.3	Not experienced bullying / victimisation by other prisoners	44%	40%	29%	42%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	4%	30%	31%	25%
14.5	Not experienced bullying / victimisation by members of staff	50%	54%	53%	53%
14.6	If you were being bullied / victimised by staff here, would you report it?	38%	42%	50%	40%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	40%	31%	25%	34%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	25%	30%	29%	29%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	20%	11%	17%	12%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	29%	10%	6%	14%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	26%	49%	62%	43%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	21%	38%	25%	36%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	20%	50%	50%	46%
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?	60%	65%	67%	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?	25%	51%	56%	45%

## HMP Forest Bank 2019

### Comparison of survey responses from different residential locations

In this table responses from vulnerable prisoner wings (C2 and D wing) are compared with those from the rest of the establishment.

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

	Green shading shows results that are significantly more positive than the comparator
	Blue shading shows results that are significantly more negative than the comparator
	Orange shading shows significant differences in demographics and background information
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\* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

Vulnerable prisoner wings (C2 and D wing)	Rest of the establishment
37	120

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	3%	6%
	Are you 25 years of age or younger?	22%	17%
	Are you 50 years of age or older?	16%	10%
	Are you 70 years of age or older?	3%	1%
1.3	Are you from a minority ethnic group?	6%	17%
1.4	Have you been in this prison for less than 6 months?	33%	49%
1.5	Are you currently serving a sentence?	76%	75%
	Are you on recall?	16%	19%
1.6	Is your sentence less than 12 months?	11%	19%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	3%	3%
7.1	Are you Muslim?	5%	11%
11.3	Do you have any mental health problems?	79%	58%
12.1	Do you consider yourself to have a disability?	64%	46%
19.1	Do you have any children under the age of 18?	53%	62%
19.2	Are you a foreign national?	11%	7%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	3%	7%
19.4	Have you ever been in the armed services?	0%	7%
19.5	Is your gender female or non-binary?	0%	1%
19.6	Are you homosexual, bisexual or other sexual orientation?	12%	1%
19.7	Do you identify as transgender or transsexual?	0%	4%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	14%	15%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	30%	29%
2.3	When you were searched in reception, was this done in a respectful way?	64%	75%
2.4	Overall, were you treated very / quite well in reception?	61%	77%

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

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

Number of completed questionnaires returned

	Vulnerable prisoner wings (C2 and D wing)	Rest of the establishment
Number of completed questionnaires returned	37	120

2.5	When you first arrived, did you have any problems?	95%	83%
2.5	Did you have problems with:		
	- Getting phone numbers?	38%	41%
	- Contacting family?	57%	34%
	- Arranging care for children or other dependents?	3%	6%
	- Contacting employers?	5%	6%
	- Money worries?	27%	30%
	- Housing worries?	19%	25%
	- Feeling depressed?	65%	45%
	- Feeling suicidal?	30%	18%
	- Other mental health problems?	43%	31%
	- Physical health problems?	16%	25%
	- Drugs or alcohol (e.g. withdrawal)?	19%	30%
	- Getting medication?	24%	28%
	- Needing protection from other prisoners?	27%	6%
	- Lost or delayed property?	24%	25%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	23%	26%
<b>FIRST NIGHT AND INDUCTION</b>			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	54%	81%
	- Toiletries / other basic items?	35%	40%
	- A shower?	11%	22%
	- A free phone call?	19%	62%
	- Something to eat?	68%	70%
	- The chance to see someone from health care?	49%	55%
	- The chance to talk to a Listener or Samaritans?	22%	22%
	- Support from another prisoner (e.g. Insider or buddy)?	11%	11%
	- None of these?	27%	3%
3.2	On your first night in this prison, was your cell very / quite clean?	41%	35%
3.3	Did you feel safe on your first night here?	38%	75%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	47%	51%
	- Free PIN phone credit?	51%	60%
	- Numbers put on your PIN phone?	31%	48%
3.5	Have you had an induction at this prison?	77%	93%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	44%	55%



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

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

Number of completed questionnaires returned

Vulnerable prisoner wings (C2 and D wing)	37	Rest of the establishment	120
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ON THE WING			
4.1	Are you in a cell on your own?	30%	44%
4.2	Is your cell call bell normally answered within 5 minutes?	31%	20%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	61%	62%
	- Can you shower every day?	97%	97%
	- Do you have clean sheets every week?	97%	83%
	- Do you get cell cleaning materials every week?	71%	67%
	- Is it normally quiet enough for you to relax or sleep at night?	47%	76%
	- Can you get your stored property if you need it?	24%	25%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	65%	76%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	49%	43%
5.2	Do you get enough to eat at meal-times always / most of the time?	32%	27%
5.3	Does the shop / canteen sell the things that you need?	54%	43%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	76%	71%
6.2	Are there any staff here you could turn to if you had a problem?	68%	67%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	32%	27%
6.4	Do you have a personal officer?	49%	54%
	<i>For those who have a personal officer:</i>		
6.4	Is your personal or named officer very / quite helpful?	44%	52%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	3%	11%
6.6	Do you feel that you are treated as an individual in this prison?	30%	50%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	47%	48%
	If so, do things sometimes change?	35%	39%
FAITH			
7.1	Do you have a religion?	70%	61%
	<i>For those who have a religion:</i>		
7.2	Are your religious beliefs respected here?	65%	68%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	80%	71%
7.4	Are you able to attend religious services, if you want to?	96%	90%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	22%	27%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	43%	46%
8.3	Are you able to use a phone every day (if you have credit)?	92%	96%
8.4	Is it very / quite easy for your family and friends to get here?	54%	45%
8.5	Do you get visits from family/friends once a week or more?	32%	28%
	<i>For those who get visits:</i>		
8.6	Do visits usually start and finish on time?	26%	52%
8.7	Are your visitors usually treated respectfully by staff?	61%	68%

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	37	120

TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	92%	91%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
9.1	Are these times usually kept to?	27%	45%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	17%	23%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	0%	5%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	19%	11%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	0%	1%
9.4	Do you have time to do domestics more than 5 days in a typical week?	65%	67%
9.5	Do you get association more than 5 days in a typical week, if you want it?	73%	79%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	67%	73%
9.7	Do you typically go to the gym twice a week or more?	51%	41%
9.8	Do you typically go to the library once a week or more?	33%	37%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	14%	25%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	61%	63%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	68%	48%
	Are applications usually dealt with within 7 days?	62%	62%
10.3	Is it easy for you to make a complaint?	75%	55%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	41%	35%
	Are complaints usually dealt with within 7 days?	54%	50%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	25%	36%

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<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	68%	51%
	Attend legal visits?	50%	62%
	Get bail information?	17%	27%
<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?	50%	55%
<b>HEALTH CARE</b>			
11.1	Is it very / quite easy to see:		
	- Doctor?	25%	24%
	- Nurse?	42%	45%
	- Dentist?	14%	12%
	- Mental health workers?	19%	19%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	53%	31%
	- Nurse?	69%	50%
	- Dentist?	28%	21%
	- Mental health workers?	36%	22%
11.3	Do you have any mental health problems?	79%	58%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	32%	33%
11.5	Do you think the overall quality of the health services here is very / quite good?	33%	28%
<b>OTHER SUPPORT NEEDS</b>			
12.1	Do you consider yourself to have a disability?	64%	46%
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	14%	29%
12.3	Have you been on an ACCT in this prison?	40%	15%
<i>For those who have been on an ACCT:</i>			
12.4	Did you feel cared for by staff?	15%	43%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	58%	50%
<b>ALCOHOL AND DRUGS</b>			
13.1	Did you have an alcohol problem when you came into this prison?	28%	26%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	20%	48%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	33%	55%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	19%	28%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	14%	17%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	0%	53%
13.7	Is it very / quite easy to get illicit drugs in this prison?	83%	54%
13.8	Is it very / quite easy to get alcohol in this prison?	19%	28%

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SAFETY			
14.1	Have you ever felt unsafe here?	81%	50%
14.2	Do you feel unsafe now?	53%	23%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	72%	36%
	- Threats or intimidation?	64%	38%
	- Physical assault?	42%	22%
	- Sexual assault?	6%	2%
	- Theft of canteen or property?	69%	36%
	- Other bullying / victimisation?	50%	25%
	- Not experienced any of these from prisoners here	17%	50%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	27%	26%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	40%	29%
	- Threats or intimidation?	31%	23%
	- Physical assault?	9%	13%
	- Sexual assault?	3%	1%
	- Theft of canteen or property?	11%	8%
	- Other bullying / victimisation?	23%	19%
	- Not experienced any of these from staff here	34%	59%
14.6	If you were being bullied / victimised by staff here, would you report it?	35%	42%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	31%	34%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	12%	36%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	6%	15%
	<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%	18%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	14%	11%
	<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?	60%	64%
	Could you shower every day?	40%	82%
	Could you go outside for exercise every day?	100%	100%
	Could you use the phone every day (if you had credit)?	80%	80%

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EDUCATION, SKILLS AND WORK			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	34%	58%
	- Vocational or skills training?	16%	28%
	- Prison job?	61%	44%
	- Voluntary work outside of the prison?	0%	2%
	- Paid work outside of the prison?	0%	3%
16.2	In this prison, have you done the following activities:		
	- Education?	53%	72%
	- Vocational or skills training?	38%	56%
	- Prison job?	74%	77%
	- Voluntary work outside of the prison?	31%	37%
	- Paid work outside of the prison?	28%	36%
<i>For those who have done the following activities, do you think they will help you on release:</i>			
	- Education?	61%	50%
	- Vocational or skills training?	42%	47%
	- Prison job?	40%	39%
	- Voluntary work outside of the prison?	40%	46%
	- Paid work outside of the prison?	44%	46%
16.3	Do staff encourage you to attend education, training or work?	46%	46%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	20%	41%
<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?	29%	83%
17.3	Are staff helping you to achieve your objectives or targets?	17%	51%
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	29%	58%
	- Other programmes?	43%	61%
	- One to one work?	29%	57%
	- Been on a specialist unit?	14%	29%
	- ROTL - day or overnight release?	14%	14%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>			
	- Offending behaviour programmes?	50%	57%
	- Other programmes?	67%	68%
	- One to one work?	50%	81%
	- Being on a specialist unit?	0%	50%
	- ROTL - day or overnight release?	0%	20%

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PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	17%	36%
<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?	50%	76%
18.3	Is anybody helping you to prepare for your release?	67%	65%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	67%	74%
	- Getting employment?	83%	68%
	- Setting up education or training?	50%	39%
	- Arranging benefits?	83%	72%
	- Sorting out finances?	50%	53%
	- Support for drug or alcohol problems?	17%	53%
	- Health / mental Health support?	67%	63%
	- Social care support?	40%	55%
	- Getting back in touch with family or friends?	17%	35%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	0%	39%
	- Getting employment?	0%	17%
	- Setting up education or training?	0%	25%
	- Arranging benefits?	0%	31%
	- Sorting out finances?	0%	12%
	- Support for drug or alcohol problems?	0%	50%
	- Health / mental Health support?	0%	36%
	- Social care support?	0%	28%
	- Getting back in touch with family or friends?	0%	50%
FINAL QUESTION ABOUT THIS PRISON			
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	43%	49%