

Report on an unannounced inspection of

HMP Nottingham

by HM Chief Inspector of Prisons

6–17 January 2020

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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hmiprison.enquiries@hmiprison.gsi.gov.uk

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

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

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Glossary of terms

We try to make our reports as clear as possible, and this short glossary should help to explain some of the specialist terms you may find. If need an explanation of any other terms, please see the longer glossary in our 'Guide for writing inspection reports', available on our website at: <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

Care Quality Commission

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>.

Certified normal accommodation and operational capacity

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.

Challenge, support and intervention plans

Challenge, support and intervention plans (CSIPs) are used by all adult prisons to manage those prisoners who are violent or pose a heightened risk of being violent. These prisoners are managed and supported on a plan with individualised targets and regular reviews. Some prisons also use the CSIP framework to support victims of violence.

Offender management in custody (OMiC)

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.

Protected characteristics

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

Protection of adults at risk

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).

Psychoactive substances

Psychoactive substances are either naturally occurring, semi-synthetic or fully synthetic compounds. When taken they affect thought processes or individuals' emotional state. In prisons, these substances are commonly referred to as 'spice'. For more information see <https://www.gov.uk/guidance/psychoactive-substances-in-prisons#what-are-psychoactive-substances>.

Urgent notification

The urgent notification protocol with the Ministry of Justice states that if, during the inspection of prisons, young offender institutions (YOIs) and secure training centres (STCs), HM Chief Inspector of Prisons (HMCIP) identifies significant concerns regarding the treatment and conditions of those

detained, HMCIP will write to the Secretary of State within seven calendar days of the end of the inspection, providing notification of and reasons for those concerns. The Secretary of State must then publish an action plan within 28 days. The protocol and the HMP Nottingham urgent notification letter can be found here: <https://www.justiceinspectorates.gov.uk/hmiprisons/about-hmi-prisons/urgent-notifications/>

Introduction

HMP Nottingham is a local prison that at the time of this inspection held a little under 800 prisoners, the number having been reduced from around 1,000. The inspection history of Nottingham in recent years is such that an explanation of what has happened is important in order to understand the background to this most recent inspection and the overall context in which we came to our judgements.

The prison was last inspected in early January 2018, which was the third full inspection since 2014. In contrast to our usual practice of arriving unannounced, that inspection and the previous one in 2016 were both announced well in advance. Notice of an impending inspection is intended to give an opportunity to a prison to focus on improvement or on completing earlier recommendations. We therefore found it extraordinary that, over the course of those three inspections, the prison had consistently failed to achieve standards that were sufficient in any of our four tests of a healthy prison. Most concerning of all was that, at all three inspections, we judged outcomes in safety to be poor, our lowest assessment, and that, at the 2018 inspection, we found that only two of 13 recommendations made in 2016 in the area of safety had been fully achieved. We could recall only one other occasion when we had judged safety in a prison to be poor following three consecutive inspections.

This persistent and fundamental lack of safety, together with an overall lack of improvement following previous poor inspections, led me in January 2018 to write to the Secretary of State for Justice and for the first time invoke the urgent notification (UN) protocol (see Glossary of terms), which was new at that time. In 2018 the Inspectorate also introduced a new procedure, called an independent review of progress (IRP), which was piloted at Nottingham in November 2018. An IRP is not a full inspection looking at outcomes experienced by prisoners across the full breadth of our usual inspection framework. Instead, it is intended to review progress made against key recommendations where there have been serious concerns following a full inspection. The IRP at Nottingham was disappointing and we found that the response to many of our recommendations had been far too slow. Although the Secretary of State's action plan had been issued promptly following the UN, we found that little was done before July 2018 – a full six months. The concept of 'urgency' seemed not to have been grasped by either the prison or Her Majesty's Prison and Probation Service (HMPPS). As a result, by the time of the IRP, various initiatives had yet to result in any discernible improvements in outcomes for prisoners, and a new Governor who had taken up post during the second half of 2018 had as yet been unable to effect any notable improvement.

Given the disappointing and indeed troubling history of poor inspections followed by inadequate responses, it was gratifying to find during this latest inspection that there had at long last been some real change at Nottingham. There had been improvements in three of our tests of a healthy prison, and we came away with some confidence that the improvements could be sustained and built upon if the leadership and energy that was now evident could be maintained into the future.

In terms of safety, although there was much data that was troubling and levels of violence were still far too high, we felt able to raise our judgement from poor to not sufficiently good. Too many prisoners still felt unsafe, there was still far too much violence and not enough was yet being done to counter it effectively. However, security had now improved and was beginning to have a positive impact. In particular, a body scanner was now being used to very good effect, leading to regular finds of secreted contraband that would not otherwise have been detected. For the future it is important that the full potential of this technology, both in detecting and deterring the ingress of illicit items, should be fully exploited. There was some evidence that the availability of illicit drugs was beginning to decline, the response to intelligence was appropriate and it was good to see that there was coordination between security and substance misuse services.

It was concerning that the number of self-harm incidents had increased substantially and that there had been four self-inflicted deaths since the last inspection. Prisons and Probation Ombudsman (PPO) recommendations following self-inflicted deaths had not always been addressed adequately. Despite the fact that analysis of data had improved, it had not yet led to a clear strategy. The quality of assessment, care in custody and teamwork (ACCT) documentation for prisoners at risk of suicide or self-harm had improved, and prisoners were positive about the support they received.

It would have been quite possible for our judgement for safety to have remained at poor. However, although the raw figures had not improved, I take the view that there are occasions when new processes by their very existence can amount to positive outcomes, for instance when, as at Nottingham, they offer reassurance to prisoners, introduce safeguards and ensure improved governance. These improvements had yet to be translated into encouraging data, but we took the view that they were sufficiently important to warrant an improvement in our judgement about the overall safety of the prison.

At this inspection we found that healthcare had improved and was now good, and work in equality and diversity was in the early stages of improving. We also found that relationships between staff and prisoners had improved since the previous inspection, despite the continuing problems with lack of basic kit, clothing and bedding. We were also very concerned about delays in answering cell call bells in a prison where high levels of self-harm were of such concern. It was notable that applications and complaints were now much better handled, helped by the introduction of new electronic kiosks on the wings.

There had been significant improvements in rehabilitation and release planning, but there still remained much to do. We were particularly concerned about the shortage of probation officers in the offender management unit (OMU), and about the number of prisoners being released homeless. At around 40%, the figure was far too high and speaks of a need for more joint working with the local authority.

I hope this inspection can at long last mark a watershed in the troubled history of Nottingham. For many years it had a well-deserved reputation for being an unsafe prison. There is still a huge amount to do, but it would be wrong not to recognise the impressive progress that has been made since the poor findings of the IRP in November 2018. When a previously poorly performing prison improves, I have seen how it is possible for a new and optimistic culture, offering real care for prisoners and a better chance for them to rehabilitate, can take hold. I hope that can be achieved at Nottingham, as it could underpin future progress. All too often we have seen improvements in prisons prove to be fragile. The greatest risks have come from complacency or lack of consistency in leadership. I hope that neither will be the case at Nottingham, and that the highly creditable progress at this complex and challenging prison can be sustained into the future.

Peter Clarke CVO OBE QPM
 HM Chief Inspector of Prisons
 March 2020

Fact page

Task of the establishment

HMP Nottingham is a resettlement and local prison serving the courts of Nottinghamshire and Derbyshire.

Certified normal accommodation and operational capacity

Prisoners held at the time of inspection: 798

Baseline certified normal capacity: 718

In-use certified normal capacity: 718

Operational capacity: 1060

Notable features from this inspection

Following our last full inspection in 2018, Nottingham became the first prison to be subject to HM Inspectorate of Prisons' urgent notification process.

Nearly half the population was unsentenced, more than at other local prisons and at our last inspection.

12% of the population was under the age of 21.

60% of prisoners in our survey reported having mental health problems.

20% of prison officers were in their first year of service.

Prison status and key providers

Public

Physical health, mental health and substance misuse treatment provider: Nottinghamshire Healthcare NHS Foundation Trust

Prison education framework provider: PeoplePlus

Community rehabilitation company (CRC): Derbyshire, Leicestershire, Nottinghamshire and Rutland CRC

Escort contractor: GEOAmey

Prison group

North Midland Group

Brief history

HMP Nottingham opened in 1890, but the original Victorian buildings were demolished in 2008. The new prison opened in February 2010.

Short description of residential units

A wing – integrated drug treatment service (IDTS)

B wing – mainstream location

C wing – mainstream location

D wing – mainstream location and incentivised substance-free living unit

E wing – mainstream location

F wing – first night centre and induction unit

G wing – vulnerable prisoner unit

Name of governor and date in post

Phil Novis (July 2018)

Independent Monitoring Board chair

Janet White

Date of last inspection

January 2018

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.

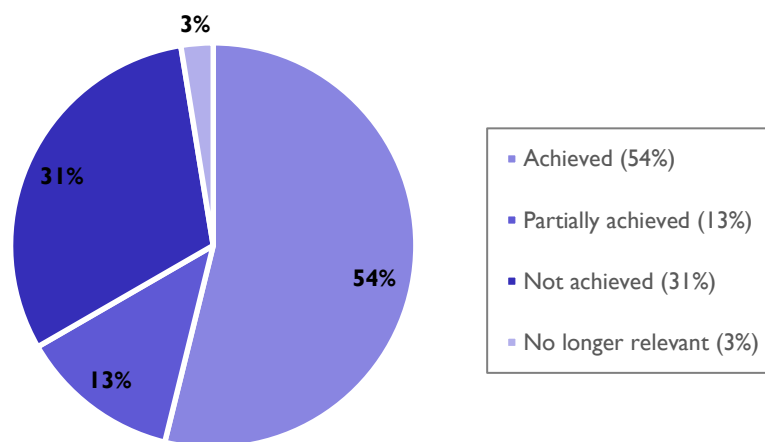
This report

- 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)* (available on our website at <https://www.justiceinspectorates.gov.uk/hmiprisoners/our-expectations/prison-expectations/>). 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. (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 Nottingham in 2018 and made 39 recommendations overall. The prison fully accepted 22 of the recommendations and partially (or subject to resources) accepted 13. It rejected four of the recommendations.
- S2 At this follow up inspection we found that the prison had achieved 21 of those recommendations, partially achieved five recommendations and not achieved 12 recommendations. One recommendation was no longer relevant.

Figure 1: HMP Nottingham progress on recommendations from last inspection (n=39)



- S3 Since our last inspection of HMP Nottingham outcomes for prisoners improved in three healthy prison areas: safety improved from poor to not sufficiently good, and respect and rehabilitation and release planning improved from not sufficiently good to reasonably good. Outcomes for prisoners remained the same in one healthy prison area, with purposeful activity remaining not sufficiently good.

Figure 2: HMP Nottingham healthy prison outcomes 2018 and 2020



Safety

- S4** Early days support was reasonably good. The proportion of prisoners saying they felt unsafe was similar to our last inspection and other local prisons. Prison Service data showed that violence levels were still among the highest compared with all other local prisons and a small number of incidents were serious. The range of interventions to address violence was limited. The number of adjudications had decreased, but the use of force against prisoners had increased dramatically. Staff-prisoner relationships in the segregation unit were good, but there was too little focus on reintegration. Security arrangements were now very good and steps had been taken to stem the flow of drugs into the prison. The number of self-harm incidents had increased substantially. Prisons and Probation Ombudsman (PPO) recommendations following self-inflicted deaths were not always addressed. **Outcomes for prisoners were not sufficiently good against this healthy prison test.**
- S5** At the last inspection in January 2018 we found that outcomes for prisoners in Nottingham were poor against this healthy prison test. We made seven recommendations in the area of safety. At this inspection we found that four of the recommendations had been achieved, one had been partially achieved and two had not been achieved.
- S6** Reception remained busy, but processes were respectful and efficient, interviews were held in private and included an appropriate focus on safety. Peer workers and Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) were no longer routinely available in reception, which meant there was no immediate peer support to the most vulnerable.
- S7** Additional observations during a prisoner's first night had been introduced since our last inspection to promote safety. The cleanliness of cells on the first night wing had improved, but some cells lacked very basic items, such as bedsheets or curtains. New prisoners on the first night wing spent too long locked in their cells. In our survey, the majority of prisoners said they had completed the induction programme. The induction session we observed was very rushed and in our survey, only 40% said it covered everything they needed to know.
- S8** In our survey, 32% of prisoners reported feeling unsafe at the time of the inspection, which was similar to the last time we inspected and similar to other local prisons. Prisoners we spoke to expressed a range of reasons for their perceptions of safety, which were not always linked to actual violence. We were told that the recording of violent incidents prior to November 2018 was unreliable, making it impossible for us to make valid comparisons since the previous inspection. Data collection had become more reliable from November 2018. Since then and across the following 12 months, Prison Service data showed that violence levels remained among some of the highest of all local prisons. It showed that the rate of assaults on staff had declined, but that the number of violent incidents between prisoners had increased. Most acts of violence were relatively minor, although a small number of incidents were very serious.
- S9** The safer custody team now had more resources. The analysis of data was much better and all reported violent incidents were now investigated, which were substantial improvements since the previous inspection. The safety intervention meeting continued to ensure prisoners with complex issues received good support. Challenge, support and intervention plans (CSIPs) (see Glossary of terms) had been relaunched, but some weaknesses in their use persisted. There was a limited number of interventions aiming to changing poor behaviour and those that existed were not used often enough. To be effective, the purpose of the Byron unit, a violence reduction initiative, needed to be clear and well understood by all.

Some promising reward and recognition initiatives were being developed, but prisoners felt little motivation to progress under the incentives and earned privileges (IEP) scheme.

- S10 The number of adjudications had fallen substantially and was now similar to the level in other local prisons. Adjudications were used more appropriately than at the previous full inspection. However, more could have been done to address inefficiencies in the process, such as the high rate of adjournments.
- S11 The number of use of force incidents had increased since the previous inspection and was relatively high. However, 27% of incidents involved low-level force and few prisoners told us of incidents in which they felt force was excessive. Governance of the use of force was improving. More use of force reports were now completed but the standard remained poor in some cases.
- S12 The number of prisoners segregated had increased since the previous inspection but was relatively low. Staff-prisoner relationships in the segregation unit were good. The unit was bright and clean and prisoners had access to their basic entitlements. However, reintegration planning and access to the wider prison regime were poor.
- S13 Security measures to reduce the supply of drugs had improved significantly and were very effective. For example, the body scanner had captured a large number of illicit items. There was a comprehensive drug strategy and good collaboration between security and drug misuse services. Current evidence suggested that the availability of psychoactive substances (see Glossary of terms) within the prison had declined. The management of security had improved and was now very good and managers played an active role in trying to reduce violence and antisocial behaviour. Intelligence was well managed and the number of searches completed had increased substantially since our previous inspection.
- S14 Recorded levels of self-harm had increased substantially. Analysis of data had improved and was now good, but it had not yet led to a strategy or action plan specific to the needs of prisoners at HMP Nottingham. There had been four self-inflicted deaths since our previous inspection and not all PPO recommendations had been implemented, which was a significant concern. The quality of assessment, care in custody and teamwork (ACCT) documentation for prisoners at risk of suicide or self-harm had improved overall, but some key weaknesses still needed to be addressed. Those we spoke to who were being cared for under the ACCT process were positive about the support they received. There was an adequate number of Listeners and we were told that access to them in recent months had improved.
- S15 A safeguarding adults policy was in place and a manager attended the local safeguarding adults board. The prison's weekly safeguarding meeting was effective and provided meaningful care plans for prisoners at risk of abuse or neglect.

Respect

- S16** Relationships between staff and prisoners were more positive than at the previous inspection. Living conditions had improved, but too many cells lacked some basic equipment and the longstanding problem with the lack of clothes and bedding persisted. Delays in answering cell call bells caused significant concern. The food and shop provision were reasonable. Consultation with prisoners had improved. Wing kiosks provided a much better applications system and the number of complaints had decreased. There was little legal rights support despite prisoners' needs. Equality and diversity work had been strengthened and faith provision remained good. Health services were good and the well-being centre was an

excellent much-valued, initiative. **Outcomes for prisoners were reasonably good against this healthy prison test.**

- S17 At the last inspection in January 2018 we found that outcomes for prisoners in Nottingham were not sufficiently good against this healthy prison test. We made 19 recommendations in the area of respect. At this inspection we found that 12 of the recommendations had been achieved, one had been partially achieved and six had not been achieved.
- S18 Staff were more confident when engaging with prisoners, and generally interacted effectively. Many officers we spoke to felt colleagues and managers supported them. Staff supervision of prisoners had improved significantly, but some poor behaviour still went unchallenged. Many prisoners spoke positively about staff on their wing. However, some still criticised the indifferent attitudes shown by a number of staff. All prisoners had a keyworker, but more needed to be done to improve the standard of engagement.
- S19 Outside areas were clean, but some communal areas were grubby. Conditions on the wings had improved and were reasonably good in half of the prison but A, B and C wings were not in good condition. The level of cleanliness was inconsistent across wings. Much of the furniture remained basic and minimal and there were no lockable cabinets and only makeshift curtains in many cells. Some cells lacked screening around the toilet and none had toilet seats. The problem with the lack of clothing and bedding continued, had become worse over the previous two years and many prisoners complained about it. Despite some efforts to monitor the promptness of responses to cell call bells, too many remained unanswered for too long, which was a concern given the high level of self-harm within the population.
- S20 We found the food acceptable. However, some prisoners were not happy with the standard of the food or portion sizes. Lunch and evening meals continued to be served far too early. In our survey, prisoners were generally positive about the range of goods provided by the prison shop. However, prisoners waited too long to receive their first order, which could lead to them getting into debt.
- S21 Consultations were held every two months and there were also well-attended monthly wing meetings. However, action arising as a result of consultation was too often carried over for several months without clear progress being demonstrated. The applications process had been improved by the introduction of electronic kiosks on the wings. The number of complaints had decreased since the previous inspection and was now in line with similar prisons. The complaints we examined were dealt with promptly and replies were appropriate. A third of complaints had been upheld, which the prison could have publicised better to promote confidence in the system. There was no specialist support for prisoners who needed legal assistance.
- S22 Improvements in the governance and management oversight of equality and diversity were not evident until autumn 2019. There was now a strategy and action plan and the equality action team was beginning to function effectively. Local data highlighted areas of potential discrimination and work was being carried out to investigate them. Discrimination incident reporting forms were now freely available on wings and the sample of replies we examined showed prompt, helpful responses, which reflected a good understanding of the prisoner's perspective. Focus groups had been established, providing prisoners from each of the protected groups with the opportunity to express their views. One-day conferences for each of the protected characteristics were also held. This was an effective way of seeking advice and guidance from a range of people including external stakeholders.
- S23 In our surveys, there were few negative perceptions across the protected characteristics. However, a large proportion of prisoners described themselves as having a disability or a

mental health problem and their perceptions of safety were much more negative than those of prisoners without a mental health problem or disability, which was a concern. There were fully or partially adapted cells on most wings for disabled prisoners and the support they received was adequate.

- S24 The number of foreign national prisoners had increased since our previous inspection. While they received administrative support from offender management unit (OMU) staff and immigration officials, no one was responsible for promoting their interests or offering them independent advice. Good use was being made of interpretation services and staff were confident about dealing with prisoners who had difficulties communicating in English.
- S25 LGBT prisoners we spoke to were reasonably content with the way they were treated. The number of prisoners under the age of 21 had doubled since the previous inspection. There were a number of initiatives to meet their needs, but the work was not properly coordinated. Regular, well-organised support was provided for the prison's small group of veterans.
- S26 Prisoners had good access to religious services. The facilities for worship were suitable and prisoners' spiritual needs were met adequately. Chaplains provided pastoral support and led a number of initiatives, including groupwork sessions for prisoners with addiction problems and bereavement counselling.
- S27 Health services were good and strong leadership was supported by a skilled, flexible and conscientious staff group. Governance structures were robust and joint working between prison managers and health commissioners was effective. Health promotion arrangements were well established and support for older prisoners remained good. There was a suitable range of primary care services with satisfactory waiting times and the management of patients with long-term conditions was very good. Social care arrangements were well established and the care provided was good. The integrated mental health team provided a responsive service. The well-being centre was excellent, providing a positive, therapeutic environment.
- S28 The identification and monitoring of patients experiencing opiate and alcohol withdrawal remained sound, but there were still no designated stabilisation cells in the first night centre. Clinical and psychosocial support for prisoners with drug and alcohol problems had improved and prisoners valued it. Pharmacy services and the management of medicines were generally good; however, there had been no onsite pharmacist for about six months. Dental services and the promotion of oral health were good, and waiting times were reasonable.

Purposeful activity

- S29 Time out of cell was reasonable, but too many prisoners were locked in their cells during the core working day. The gym and library provision was good. Ofsted judged that education, skills and work provision required improvement. There were sufficient places for the population and allocations were fair. However, the curriculum for short-stay prisoners did not meet their needs in full and the range of activities for prisoners on G wing was too limited. Attendance remained too low, although prisoners' punctuality was reasonable. Behaviour was mostly positive. Too many prisoners did not complete their qualifications or make sufficient progress during their time at HMP Nottingham. **Outcomes for prisoners were not sufficiently good against this healthy prison test.**
- S30 At the last inspection in January 2018 we found that outcomes for prisoners in Nottingham were not sufficiently good against this healthy prison test. We made eight recommendations

in the area of purposeful activity. At this inspection we found that three of the recommendations had been achieved, two had been partially achieved, two had not been achieved and one was no longer relevant.

- S31 Time out of cell was similar to other local prisons and our checks showed most prisoners spent up to six hours out of their cells on a week day. Regime times were adhered to consistently. However, during our checks, we found 31% of prisoners locked in their cells during the core working day, which was still too many. Prisoners on the first night wing had less time out of their cells and when we checked during the core working day most were locked up. More prisoners than at comparable prisons said they had association more than five times a week. There was a reasonably good range of recreational equipment on most wings.
- S32 The library provided a good service, which included outreach on wings. Physical education facilities were good and more prisoners were now using the gym. There were good developing links to community groups, but no accredited courses in the gym.
- S33 Prison leaders had identified the strengths and weaknesses of education, skills and work activities through a wide-ranging review of the provision. However, PeoplePlus' quality improvement processes were not yet having the required impact on improving the standard of teaching. Prison managers were too slow to implement the identified improvements in prison work. Prisoners' views and local and regional employment needs were used effectively to inform the curriculum. However, the curriculum did not meet in full the requirements of prisoners who stayed at the prison for only a matter of weeks.
- S34 There were sufficient activity places for the prison population. However, education, skills and work activities, including progression, was limited for vulnerable prisoners. Allocations to education, skills and work activities were fair, equitable and timely. Interventions carried out by prison and education leaders had had a positive impact on improving attendance, but it remained too low and was still significantly below the prison's target. Pay rates did not discourage prisoners from attending education. Prisoners used the virtual campus (internet access for prisoners to community education, training and employment opportunities) effectively to complete initial assessments and to develop job-related skills.
- S35 Teachers did not consistently use the results of assessments, completed at the start of courses, to plan lessons to meet prisoners' specific requirements. Prisoners were not challenged sufficiently to develop the knowledge and skills they needed to enhance their abilities or to progress to the next step. Teachers did not always provide prisoners with the feedback they needed to help them improve their work. Some of the strategies used were not effective in helping prisoners to make better progress. Too often teachers did not check whether prisoners had understood what they had been taught before moving on to the next topic.
- S36 Prisoners developed their vocational knowledge and skills successfully in the majority of vocational training sessions. Peer mentors supported prisoners effectively. Mentors were well-trained, and they assisted teachers in classrooms and workshops effectively. Additional learning support was good and specific to each prisoner's needs.
- S37 Across education and vocational training, prisoners developed their confidence and self-esteem. They took pride in their work. In education and vocational training, prisoners developed good personal, employability and social skills. However, this was not the case across all prison work. In education, vocational training and prison work, prisoners felt safe and supported and understood how to raise any concerns. Behaviour was mostly positive but inappropriate language was not always challenged sufficiently in education and

workshops; the large majority of prisoners in prison work demonstrated a poor work ethic. Prisoners did not always use appropriate personal protective equipment when in vocational training and prison work. While prisoners arrived on time to their activities, attendance remained poor.

- S38 Most prisoners who completed their courses achieved their qualifications. However, too many prisoners did not complete their courses or gain qualifications. Most prisoners who left their courses due to release or transfer had not developed their knowledge, skills or understanding in the subjects they studied.
- S39 Prisoners' work in education, vocational training and prison work was at least to the expected standard. Data provided by the prison showed that there were no notable achievement gaps between different groups of prisoners, including those from a different ethnicity or who had a learning difficulty and/or disability. Leaders and managers did not have sufficient oversight of the knowledge and skills development that prisoners made over their length of stay. Prisoners did not have sufficient opportunities to accredit their skills in prison work. Only one workshop – bicycle maintenance – offered prisoners a qualification that would help them in the next stage of their training or employment.

Rehabilitation and release planning

- S40 Support to help prisoners maintain contact with their children and families remained reasonably good. A few offender assessment system (OASys) reports were delayed and the quality of the reports was variable. Casework was limited in some instances and did not always adequately focus on progression or motivation. Most public protection procedures were applied robustly except for telephone monitoring. Categorisation reviews were up to date and home detention curfew (HDC) processes were applied appropriately. Risk management planning for high-risk prisoners being released was good but in some cases lacked prison oversight. Resettlement help provided to the large number of remand and short-term prisoners was proactive, but the number released homeless had increased and remained a concern. **Outcomes for prisoners were reasonably good against this healthy prison test.**
- S41 At the last inspection in January 2018 we found that outcomes for prisoners in Nottingham were not sufficiently good against this healthy prison test. We made five recommendations in the area of resettlement. At this inspection we found that two of the recommendations had been achieved, one had been partially achieved and two had not been achieved.
- S42 Support to help prisoners maintain contact with their children and families remained reasonably good. The visitors' centre continued to provide a supportive and helpful service to family members and friends. Visitors we spoke to reported long delays before they could get through on the telephone booking line. The visits hall was reasonably well equipped and had a relaxed atmosphere, although prisoners still had to wear identification bibs. Family days took place every month and all prisoners were able to apply regardless of their IEP level. Support had been developed for prisoners who were socially isolated (those not making phone calls, for example), but no specialist support or interventions were available to help prisoners improve or re-establish relationships with family members. In-cell telephones were now well established and prisoners valued them.
- S43 One fifth of the population was assessed as high or very high risk of harm to others. Nearly half the population was unsentenced, which was high and more than at the previous inspection. Strategic work to reduce reoffending was reasonably good. However, the needs

analysis was not yet comprehensive. There were too few probation officers in the OMU, which undermined the support provided to prisoners. Contact between prisoners and offender managers in the OMU needed improvement as it was too reactive and did not always focus on prisoners' progression or motivation. A few initial OASys reports were overdue and the quality was variable. HDC processes were effective.

- S44 Prisoners posing a risk to others were identified appropriately and had their cases reviewed; however, there was a substantial backlog of telephone calls waiting to be listened to, which undermined the effectiveness of public protection contact restrictions. Of those prisoners being released in the following three months, 29% were assessed as presenting a high risk of harm to others. Risk management planning by individual OMU staff ahead of release was good, but not all high risk of harm cases were overseen by the inter-departmental risk management team and there was a lack of systematic oversight. Categorisation reviews were up to date.
- S45 There were few opportunities for prisoners to complete offence-focused work, and programmes that existed were under-used. There was no specific support or help for prisoners who had experienced abuse or other personal trauma.
- S46 The demand for resettlement help was high. The assessment of prisoners' resettlement needs was timely and in all cases we looked at, prisoners had a good quality plan. The CRC ran a pre-release course but take-up was very poor.
- S47 Despite significant efforts by the community rehabilitation company (CRC), 39% of those released in the previous six months were homeless. Support to help prisoners manage their finances was reasonably good.
- S48 Practical release arrangements were good – the CRC met all prisoners in reception on release to confirm their appointments. The Next Steps Lounge located just outside the prison provided those being released with a safe place to go to. There they could get food, clothing and toiletries, alongside advice and emotional support.

Key concerns and recommendations

- S49 Key concern: Prisoners' perceptions of safety were still too negative. The proportion of prisoners feeling unsafe at the time of our survey was similar to the previous inspection, and only 48% said they had not been victimised by other prisoners. Prisoners with mental health problems and disabilities had far more negative views about safety.

Recommendation: Negative perceptions of safety should be explored and addressed, and there should be a focus on reducing all forms of victimisation.

- S50 Key concern: Levels of violence remained too high and the number of assaults between prisoners had increased. A small number of violent incidents were very serious.

Recommendation: The number of violent incidents, including serious incidents, should be reduced through the implementation of a well-coordinated and effective strategy and action plan. Outcomes should be monitored to ensure their effectiveness.

- S51 Key concern: Levels of self-harm were extremely high. Managers had identified some of the underlying triggers (events that might cause a prisoner to self-harm), and good analysis took place, but the strategy and action plan were not specific to HMP Nottingham and had not been effective in reducing self-harm.

Recommendation: The level of self-harm should be reduced through the implementation of a prison-wide strategy and action plan that are specific to HMP Nottingham. The impact of the strategy and action plan should be monitored over time to measure their effectiveness.

- S52 Key concern: Prisoners' access to prison clothing, including underwear and bed linen, remained very poor. For example, some prisoners had been wearing the same clothes for a week or more.

Recommendation: All prisoners must have regular access to an adequate amount of clean prison clothing and bedding.

- S53 Key concern: Despite the high levels of self-harm within the prison, too many cell calls bells went unanswered for more than five minutes and, in some cases, much longer.

Recommendation: Cell call bells must be answered within five minutes.

- S54 Key concern: Quality improvement action had not had time to have an impact on improving the provision sufficiently. For example, the implementation of improvements needed in prison work was too slow, educational and vocational training courses were not sufficiently appropriate for short-stay prisoners, and education, skills and work activities, including progression, were limited for vulnerable prisoners. In addition, attendance remained too low.

Recommendation: The impact of quality improvement action on raising standards across the provision should be reviewed to ensure that prisoners receive a high-quality, wide range of education, skills and work activities.

- S55 Key concern: Too many prisoners did not complete their qualifications. Most prisoners who left their courses early due to release or transfer did not demonstrate sufficient progress. Managers did not have sufficient oversight of prisoners' outcomes or achievements over their length of stay. Prisoners did not have sufficient opportunity to accredit their skills in prison work.

Recommendation: Managers, teachers and instructors should ensure that prisoners achieve skills and qualifications across all education, skills and work activities, including in English and mathematics. Prisoners should have a structured programme of learning and/or skills development for their anticipated length of stay to help them move successfully on to the next stage of their education, training or employment on release or transfer.

- S56 Key concern: A lack of trained probation offender managers in the OMU had a negative impact on contact levels with prisoners and their ability to carry out one-to-one work.

Recommendation: All prisoners should receive structured and meaningful contact from their offender manager in the OMU including an appropriate level of one-to-one work where relevant.

- S57 Key concern: There was a backlog of telephone calls made by prisoners that were subject to contact restrictions but that had not been monitored, which undermined public protection work.

Recommendation: Public protection should be improved through the timely monitoring of all calls made by prisoners subject to telephone monitoring.

S58 Key concern: Data provided by the CRC showed that of all prisoners released over the previous six months, 39% were homeless, which undermined effective resettlement. Monitoring of prisoners' accommodation status after release was not undertaken so the longer-term outcomes for prisoners were not known.

Recommendation: Steps should be taken to reduce the number of prisoners released homeless and the situation should be monitored over time to evaluate the effectiveness of the CRC's work.

Section 1. Safety

Prisoners, particularly the most vulnerable, are held safely.

Early days in custody

Expected outcomes:

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

- I.1** Most prisoners had relatively short journeys to the prison. Escort vans were reasonably clean and prisoners were allowed to get off the van promptly on arrival at the prison. Escort staff we saw, provided appropriate information about the prisoners to officers in reception.
- I.2** The reception area was busy with an average of 94 arrivals per week. It had been refurbished since the previous inspection, and now had very good shower facilities, but waiting rooms remained sparse and unwelcoming. Vulnerable prisoners were appropriately designated a separate waiting room and were managed sensitively. Staff were efficient and ensured the process through reception was swift but remained focused on safety.
- I.3** All new arrivals were strip-searched, but those we spoke to were satisfied this was carried out respectfully. A body scanner had been installed since we last inspected. It was used on almost all prisoners and had proved very effective in controlling the supply of illicit items into the prison. (See paragraphs I.35 and I.37.)
- I.4** All new prisoners received comprehensive assessments of their risks and needs, which included a focus on their risk of suicide and self-harm, a health care screening and an interview with a safety custody officer. In addition, all interviews now took place in private.
- I.5** There were no peer workers or Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) in reception, and prisoners we spoke to felt they would have provided them with a more supportive environment, enabling them to discuss any immediate concerns. However, peer workers were available once prisoners arrived in the first night centre. They welcomed new arrivals, answered any questions and tried to reduce any anxieties.
- I.6** The first night centre had moved from D wing to F wing, which was a better environment. However, vulnerable prisoners were also located on F wing rather than going straight to the vulnerable prisoner unit on G wing. Those we spoke to were less positive about their experience on F wing and said other prisoners sometimes abused and victimised them. The managers we spoke to recognised this and were considering alternative first night arrangements for vulnerable prisoners. Three additional welfare checks during prisoners' first night on F wing had been introduced.
- I.7** The cleanliness of the cells on F wing was reasonable, but some lacked very basic items, such as bedsheets or curtains. Most prisoners we spoke to were generally positive about their cells but a few complained it was too cold. They spoke positively of the staff and peer workers located on F wing but felt they did not have sufficient information about the regime or the rules. The information booklet provided to new prisoners on arrival focused mainly on reception processes and too little on the regime, rules and induction.

- I.8** Induction started the morning after arrival, lasted three days and included a session with gym and education staff. An initial group session took place in a dedicated groupwork room on F wing. The induction session we observed included input from a range of staff including those from the offender management unit and health care department. Peer workers were involved in delivering the session, but they had not been formally trained for the role and received little feedback about their input. The session we observed was rushed and too limited, failing to provide some basic information and prisoners could not ask questions.
- I.9** In our survey, while most prisoners said they had completed induction (85%), only 40% said it covered everything they needed to know. Vulnerable prisoners who would live on G wing did not take part in the peer-led induction session and arrangements for them were unclear. Some told us they had not received an induction at all.
- I.10** Prisoners on F wing were not meaningfully occupied, had a limited regime and spent too long locked in their cells. The prison could have taken this opportunity to offer a more supportive and comprehensive induction, particularly for those who were new to prison.

Managing behaviour

Expected outcomes:

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

Encouraging positive behaviour

- I.11** Many prisoners and staff told us that the prison felt safer than it did two years ago. However, in our survey, the proportion of prisoners saying they felt unsafe at the time of the inspection (32%) was similar to other local prisons and similar to the previous inspection. The perceptions of prisoners with a mental health problem or a disability were more negative, replicating our finding at the 2018 inspection (see paragraph 2.26). Many prisoners we spoke to expressed a range of reasons for their negative perceptions of safety, which were not always linked to actual violence. For instance, prisoners told us that some staff were still inexperienced, staff supervision of the wings was not always proactive, and low-level rule-breaking often went unchallenged (see paragraph 2.1). Only 48% of prisoners in our survey said they had not experienced some form of victimisation from other prisoners. (See key concern and recommendation S49.) Perceptions of victimisation by staff were similar, with 47% saying they had not been victimised; significantly more prisoners (46%) than in similar prisons (33%) said they had experienced verbal abuse from staff.
- I.12** We were told that the prison had only been reliably recording the number of violent incidents since November 2018, which made it impossible for us to make valid comparisons with the previous inspection. Since November 2018, the prison's data showed that the levels of violence were still far too high and Prison Service data showed that the number of assaults between prisoners over the previous six months was above the average and was seventh highest among local prisons. The data showed a slight reduction in the number of staff assaults. The proportion of serious assaults between prisoners was lower than we often see, but some included the use of weapons and there had also been a homicide in 2018, which undoubtedly affected prisoners' perceptions of safety. (See key concern and recommendation S50.)

- I.13** Since we last inspected, more resources had been allocated to the safer custody team and the staff were now rarely redeployed to other tasks. However, the prisoner safer custody role had not been in place for some years.
- I.14** We found that wing staff had failed to report some violent incidents to the safer custody team, but we were now confident that those reported to the team were all investigated, which was a substantial improvement since we last inspected.
- I.15** The monthly safer custody committee meeting was multidisciplinary and well attended; it analysed information and data effectively. We saw data that had identified young people being responsible for more fights than other prisoners and evidence of how the prison responded to the finding. The prison also had a weekly safety interventions meeting, which discussed and monitored prisoners with more complex needs to provide them with good support aimed at reducing violence. During the inspection, five prisoners were isolating themselves in their cells because of their fear of violence or victimisation, and those we spoke to said they appreciated the support they received from the safer custody team.
- I.16** A strategy and action plan to manage violence were in place and although not well coordinated yet, some initial work to reduce violence had been carried out. For example, challenge, support and intervention plans (CSIPs) (see Glossary of terms) to manage poor or violent behaviour had recently been relaunched but were not yet fully effective. Too many staff were unfamiliar with the approach and plans to address violent behaviour were not broad enough to have the desired impact or not used often enough. The safer custody team had organised training events for staff and managers to support the relaunch of CSIPs, but this work needed to continue. The Byron unit had been established since the previous inspection. It was a promising initiative aiming to manage prisoners who were involved in repeated violence or disruptive behaviour. However, staff we spoke to did not understand its purpose and its role was unclear.
- I.17** A new incentives and earned privileges (IEP) scheme had been established in June 2019. It had a more systematic approach to ensuring that reviews were carried out when they were due. Managers now carried out a quality assurance process for the IEP scheme. Nevertheless, apart from those on G wing, most prisoners felt it provided them with little motivation to work towards enhanced status, because there were very few privileges. It was positive that prisoners on the basic level received a review at flexible intervals; some returned to the standard level after as little as one day if they changed their behaviour. A recent change had also enabled those on short sentences to progress more quickly through the levels.
- I.18** A new approach was being introduced that would recognise and reward positive behaviour. As part of it, regular reward and recognition initiatives had been organised for up to 20 prisoners who had achieved successes, to which their families were invited.

Recommendations

- I.19** **The prison should ensure that all incidents, including allegations of bullying or victimisation, are reported to the safer custody team to ensure they are investigated so that perpetrators can be managed appropriately and victims supported.**
- I.20** **Peer representatives should be actively involved in the safer custody department and appropriately trained to support prisoners.**

Adjudications

- I.21** There had been 1362 adjudications in the six months prior to the inspection. The number had decreased since the previous inspection and was now in line with similar prisons. Staff worked hard to reduce the number of minor issues subject to adjudication, when they would have better been dealt with under the IEP scheme and we saw less evidence of these matters being dealt with through adjudication during the inspection.
- I.22** However, more could have been done to address other inefficiencies in the process. During the inspection, there was a backlog of 145 adjourned adjudications. The most recent available data showed that about 43% of hearings were adjourned and there was scope to reduce the number substantially.
- I.23** Quality assurance of the adjudication process took place and feedback to adjudicators was effective. The process was reviewed by the segregation monitoring and review group, which met quarterly, but adjudicating governors did not attend consistently and more proactive action was needed to tackle the remaining inefficiencies.

Use of force

- I.24** According to the prison's own data, the number of incidents involving force had increased since the previous inspection and was high. However, much use of force was low level and about 27% of incidents involved guiding holds only. There was a sharp fall in the number of incidents in which batons were drawn – from 33 in the six months before the previous inspection to 10 in the same period before this inspection. Few prisoners told us of incidents in which they felt force was excessive.
- I.25** The prison had only introduced a use of force reduction strategy in December 2019. The accompanying action plan needed to be developed to include more specific, measurable action, in particular, to improve staff's skills and confidence in this area. The governance of use of force was improving, but some weaknesses remained. Use of force meetings were now held consistently every month. Data analysis was improving but could have been developed further. The prison had introduced a useful weekly meeting, which focused on reviewing incidents involving the use of force.
- I.26** Use of force paperwork was now being completed more consistently compared to the previous inspection. However, more improvements were needed – while 95% of prison officer reports had been completed in 2019, only 78% of supervisors' reports and only 74% of health check reports had been completed. As at the previous inspection, some of these reports were poor.
- I.27** In the incidents we reviewed, there was evidence of staff being too quick to initiate force and of insufficient attempts to de-escalate situations. Much more video footage of planned use of force was now reviewed, which was an improvement, and footage we saw showed an appropriate use of force. However, nurses were not always present from the outset and we were not confident they always saw prisoners after a spontaneous use of force event. There was evidence of lessons learned being identified at the meetings, but less evidence of them being implemented in practice.
- I.28** Special accommodation had only been used once in the previous six months. However, a prisoner had been held in the special cell, in anti-ligature clothing and without bedding for 17 hours. While the initial use was well justified, there was no evidence of reviews to ensure that the continued use was justified, which was poor.

Recommendation

- I.29 Managers should ensure that force is only used as a last resort and that staff are confident about applying de-escalation techniques.**

Segregation

- I.30** The number of prisoners segregated in the previous six months had increased to 206 compared to 159 during the six months leading up to the previous inspection, but this was lower when compared to other local prisons. Prisoners were mostly held in the segregation unit to promote the good order or discipline of the prison. Segregation was appropriately authorised and reviews were mostly multidisciplinary and held on time.
- I.31** Interventions to help prisoners deal with the issues that had caused their segregation and reintegration planning to ensure prisoners were moved back to the normal location needed to improve. Some of the longer-stay prisoners had individual care plans, but none could access any elements of the mainstream regime. For example, they could not participate in offending behaviour work, attend education or go to the gym. However, most prisoners in the segregation unit had individual sessions with mental health in-reach workers and prison psychologists.
- I.32** Relationships between staff and prisoners in the unit were good. We saw officers interacting positively with prisoners on a day-to-day basis, and they did not overreact or adopt a heavy-handed approach to demanding behaviour. All prisoners we spoke to said that staff treated them well during their time in segregation.
- I.33** Communal areas were bright, clean and had recently been painted. Prisoners now had daily access to the shower, which had also been refurbished. Cells varied – most were clean and free of graffiti, but some toilets still had ingrained stains on them.

Recommendation

- I.34 Reintegration planning for longer-term segregated prisoners should include providing them with access to the same regime and purposeful activity that is available to prisoners on the main wings.**

Security

Expected outcomes:

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

- I.35** The management of security had improved and was now very good; managers played an active role in trying to reduce violence and antisocial behaviour. Arrangements were generally proportionate and did not unnecessarily restrict prisoners' access to the regime. Prisoners' movements to and from activities were well supervised and controlled. Given the problem with illicit drugs, prisoners were strip-searched in reception, which was a proportionate response but one that needed to be kept under review.

- I.36** The security committee met every month and set sound objectives, based on the intelligence received, and attendance was good. The prison also had two other dedicated meetings, which supported the prison's objective of reducing violence and drugs. The local tactical assessment meeting was multidisciplinary and focused on good analysis of intelligence and a further meeting allocated actions arising from the analysis of intelligence to staff and ensured that most of them were implemented.
- I.37** The security department recognised its key threat was drugs entering the prison and its drug supply reduction work was now proactive. The prison had a comprehensive drug supply reduction strategy and security staff worked closely with drug services to implement it. Intelligence was well managed and the number of searches completed had increased significantly since our previous inspection. A dedicated search team and eight dog handlers were now in place. The prison was also making good use of a wide range of modern technology, including a body scanner and an itemiser (a piece of equipment that checks incoming mail for illicit items). In particular, the body scanner had been used effectively in reception to detect illicit items entering the establishment. Closed visits were used appropriately and reviewed regularly. There had been 12 prisoners on closed visits in the previous six months and two were on closed visits when we inspected, both for offences relating to visits.
- I.38** The security department received on average 1100 information reports (IRs) each month and 7124 had been submitted in the previous six months, which was much higher than at the previous inspection. An increase in staffing meant the security department was resourced well enough to manage the flow of intelligence and as a result there were no outstanding IRs. Intelligence was mostly acted on promptly and effectively. In the previous six months, the security department had requested 354 searches to be conducted, 271 of which were carried out, leading to 86 finds. There had been 33 suspicion tests completed in the previous six months, compared with four in the months leading up our previous inspection, which was a substantial improvement.
- I.39** Despite efforts, drugs were still too easily available. In our survey, 52% of prisoners said it was easy to get illicit drugs in the prison and 18% said they had developed a drug problem while at the prison, both of which were similar to findings at our last inspection and at comparator prisons. However, evidence suggested that the use of psychoactive substances (PSs) (see Glossary of terms) had declined with only 33 PS-related incidents recorded in the previous quarter, compared with 227 over the same period prior to the previous inspection. The average mandatory drug testing (MDT) rate over the previous six months, including tests for certain PSs, was 7.7% against a target of 17.7%, which was low. However, until very recently the prison had not been testing for all types of PS, so this figure could not be taken as an accurate reflection. The MDT suite had been relocated and it was clean and suitable.

Good practice

- I.40** *The local tactical assessment and subsequent action meeting ensured that intelligence was effectively managed and appropriate action was allocated and implemented.*

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.41** Levels of self-harm had increased significantly since our last inspection and were extremely high. During the previous six months there had been 510 incidents involving 180 prisoners. We were told a small number of prisoners accounted for many of these incidents. The prison's own data analysis showed the main triggers (events that might cause a prisoner to self-harm) were regime issues, including applications and phone credit difficulties. (See key concern and recommendation S51.)
- I.42** There had been four self-inflicted deaths since the previous inspection and a further two deaths from natural causes. The prison had introduced a deaths in custody action plan, which included recommendations from the Prisons and Probation Ombudsman (PPO), but not all of them had been addressed, some of which were repeated recommendations. One example we remained particularly concerned about was the continuing delay in staff responding to cell bells, given the high level of self-harm at the prison. (See paragraph 2.7 and key concerns and recommendations S51 and S53.)
- I.43** The prison had a suicide and self-harm policy, but it was not specific to HMP Nottingham. While the safer custody meeting now provided good data analysis each month, it was not used to identify or develop an effective prison-wide strategy or action plan to reduce the level of self-harm or address its causes. (See key concern and recommendation S51.)
- I.44** Quality assurance checks for assessment, care in custody and teamwork (ACCT) documents for prisoners at risk of suicide or self-harm were now more embedded and had identified weaknesses, some of which had been addressed, for example, through further staff training. The overall standard of ACCT documentation had improved. However, much action identified in care plans was too generalised and did not address the triggers or concerns of the individual prisoner. In some cases, we could not see evidence to show that all action had been implemented. ACCT reviews were now meaningful and held on time; they were now held in Robin suite, a designated room near the health care department. Reviews were multidisciplinary and included mental health and other staff as appropriate.
- I.45** The care offered to prisoners on ACCT case management was appropriate and there was evidence of recorded observations being completed on time and involving positive interactions. In our survey, only 30% of prisoners who had been subject to the ACCT process felt cared for by staff, but the prisoners we spoke to were positive about the support they received.
- I.46** The safer custody hotline, enabling staff and the family and friends of prisoners to report any welfare concerns, was managed effectively. Prisoners also had access to the Samaritans by telephone as well as Listeners within the prison. During the inspection, there were nine Listeners, which was appropriate for the size of the current population. Some prisoners and Listeners said there had been delays before they could see a Listener but felt this had improved following a staff safety day to raise awareness of the service.

Protection of adults at risk (see Glossary of terms)

- I.47** There was a safeguarding policy in place that clearly defined a vulnerable adult and outlined how to make a referral to the safeguarding lead manager, but it lacked basic information about different types of abuse that would also require a safeguarding referral. The strategy

lacked clarity on what steps needed to be taken to involve the local authority and the process was not yet embedded within the prison. Some staff we spoke to were unaware of the strategy and the processes involved if they had concerns about a prisoner being abused.

- I.48** A manager attended the local safeguarding adults board. Weekly safeguarding meetings that took place were very good; they showed staff had an in-depth knowledge of the prisoners and were care-focused. New referrals were dealt with promptly. We saw evidence of a prisoner who had arrived only the day before the weekly meeting who had been referred to the safeguarding team. The meeting was well attended by staff from across the prison, action and care plans were appropriate, and prisoner referrals remained open until all concerns had been addressed.

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 Many staff were now more confident when relating to prisoners and interacted effectively. This especially applied to a large group of officers in their second year of service, many of whom were developing well in the role. However, 20% of prison officers were in their first year. Many newer members of staff felt colleagues and managers supported them well. Residential staff were usually deployed to their designated wing, which helped them to get to know individual prisoners better. Prisoners, similarly, were reasonably confident that most staff would pay attention to them and try to help with any issues. However, a number of prisoners criticised some staff's lack of interest and failure to interact with them.
- 2.2 Staff's supervision of prisoners had improved significantly. We saw effective, close supervision at key points, such as during mealtimes, association periods and movements to and from work. An increase in the number of managers on wings and the visibility and impact of senior managers, had contributed to the improvements. However, some low-level poor behaviour still often went unchallenged, such as vaping in communal areas or wearing clothes that did not meet standards when collecting meals.
- 2.3 All staff had received training as keyworkers and were carrying out keywork sessions with reasonable regularity, but keyworkers needed to improve the way they interacted with prisoners and make the session more meaningful. In our survey, 81% of prisoners said that they had a personal officer or keyworker compared with 65% in similar prisons and 51% at the previous inspection. On G wing the figure was 93%.

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 Outside areas were clean and tidy, but some communal areas were grubby. The residential environment had improved and was reasonably good in half the prison, partly through the work of effective prisoner 'handyman' and painting teams. However, A, B and C wings were not in good condition, and there was graffiti in many cells and on the outside of some cell doors on A and B wings. Cleanliness was inconsistent across the wings; A wing was the least clean. Much of the furniture remained basic and minimal and there were no lockable cabinets and only makeshift curtains in too many cells. Toilets were screened in the refurbished

wings, but many screening curtains were missing on A and B wings, and toilets did not have lids or seats. Most prisoners now had kettles.

- 2.5** There were fewer broken observations panels in cell doors than at the previous inspection, because repairs were now carried out promptly, but on some wings, these panels were still obstructed, preventing staff from looking into the cell, which was a concern given the high levels of self-harm.
- 2.6** The problem that prisoners felt most acutely was the lack of clean clothing and sheets and many prisoners complained about it. Although considerable attention had been paid to this issue, it remained the case that very many prisoners normally had to make one t-shirt and one pair of boxer shorts and socks last a week. In our survey, only 21% said that they normally had enough clean clothes for the week, compared with 55% in comparable prisons, and 49% at the previous inspection. Only 24% reported that they had clean sheets every week, compared with 64% in similar prisons and 66% at the previous inspection. All prisoners could now shower regularly and in our survey, 87% of prisoners said they could shower every day, in line with other similar prisons. (See key concern and recommendation S52.)
- 2.7** Too many cell call bells still went unanswered for more than five minutes, and often far longer. The prison had begun to monitor the responses and feed back information about delays to the staff responsible, but the figures and our observations showed that there was still no significant improvement. For example, on one weekday in November 2019 on A and B wings, 102 call bells had gone unanswered for more than five minutes. This was not acceptable in a prison where levels of self-harm were high, and where investigations carried out by the Prisons and Probation Ombudsman (PPO) had identified delayed responses to call bells as an issue in its recommendations. (See paragraph 1.42 and key concerns and recommendations S51 and S53.)

Residential services

- 2.8** We found that the food served was reasonable and prisoners received two hot meals on week days during the winter. Many prisoners complained about small portion sizes and said that some of the menu options were monotonous and unappetizing. The food tasted by inspectors was reasonable but we were told that limits on the budget affected the quality of some of the meals provided. Meals continued to be served too early – lunch was served from 11.15am and the evening meal well before 5pm.
- 2.9** Special occasions, such as religious or secular festivals, were well catered for and the kitchen provided food for other events, such as the prisoner reward and recognition celebrations (see paragraph 1.18). The kitchen was large, clean and very well maintained. Wing serveries were well controlled.
- 2.10** The introduction of electronic kiosks meant that prisoners could now exercise greater control over when they ordered shop items. In our survey, 61% of prisoners thought the shop sold what they needed, and there was no longer a disparity between the perceptions of black and minority ethnic and Muslim prisoners and those of their white and non-Muslim counterparts.
- 2.11** Prisoners arriving with no means were offered a grocery pack and e-cigarettes on admission, which they had pay for later at a rate of 20p a day. However, they could wait up to seven days to receive their first full order, which still meant they were at risk of incurring debts.

Prisoner consultation, applications and redress

- 2.12** Consultation meetings were now held every two months, attendance by managers and prisoners was good and all wings except G wing were represented at each meeting. Action from previous meetings was always tracked, although too often it was carried over for several months without clear progress being demonstrated. Monthly wing consultation meetings were also held and minuted, although more action needed to be tracked.
- 2.13** Our survey showed that prisoners were much more content with the timeliness of replies to applications – 44% said applications were usually dealt with within seven days, compared with 17% at the previous inspection. This was due to the introduction of electronic kiosks on all wings. Prisoners appreciated them and they made the application process more transparent and auditable.
- 2.14** There had been 2207 complaints in the previous six months. The number had reduced significantly since the previous inspection. In our survey, only 26% of prisoners said that complaints were usually dealt with fairly and 21% within seven days. Despite prisoners' lack of confidence in the process, complaints we examined were dealt with promptly and replies were appropriate. A third of complaints considered were upheld, which could have been better publicised to promote confidence in the process. More serious complaints that the governor dealt with were handled well and records showed that less than 5% of responses were late.
- 2.15** The complaints clerk rejected complaints considered to be inappropriate, for example, because they were abusive, not signed, or if the matter should have been raised through the applications process. In the previous six months, the prison had rejected 46% of complaints. Quality assurance of this process was weak and we found some complaints that should not have been rejected.
- 2.16** In contrast, quality assurance of complaint responses was good. Trend analysis was also good and there was evidence of concerns being identified and acted on. There was an insufficient stock of complaint forms on some wings.
- 2.17** There was no specialist support for prisoners who needed legal assistance. Prisoners requiring this type of support had to take the initiative themselves. The provision for legal visits was good and Access to Justice laptops, which provide eligible prisoners with laptop facilities to progress legal proceedings, were available. The prison had helped eligible prisoners to register to vote in the 2019 general election.
- 2.18** In our survey, significantly more prisoners than at similar prisons said their legal mail had been opened when they were not present (64% compared with 52%). Due to the problem with drugs, the prison was testing all mail, which involved slightly opening a corner of the letter and this may have contributed to the more negative perception.

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 (see Glossary of Terms) 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

- 2.19** Since the previous inspection, progress on the management and governance of equality and diversity had mostly been limited and intermittent. Sustained improvements were not evident until autumn 2019.
- 2.20** An equality strategy had been produced in July 2019. This broad-based document covered all relevant areas, although insufficient attention was paid to identifying the needs of foreign national prisoners and prisoners under the age of 21. Since September 2019, up-to-date, relevant information on equality and diversity was being gathered locally, highlighting some areas of potential discrimination. The emerging data indicated that, in certain areas of the prison, white prisoners tended to get the best paid jobs, Muslim prisoners were under-represented on the enhanced level of the incentives and earned privileges (IEP) scheme and disabled prisoners were not attending classes. An initial action plan had been produced to address these apparent disparities and, although few of the action points had yet been implemented, the managing chaplain and the prison-based equality adviser were investigating these anomalies. These developments meant the equality action team (EAT), whose role it was to implement the strategy by monitoring the action plan, was beginning to function more effectively. The EAT met every two months and was chaired by the deputy governor. It was reasonably well attended and included input from prisoner representatives, although there was no independent representation from the community.
- 2.21** Discrimination incident reporting forms were now freely available on wings. The sample we examined showed responses were prompt, helpful and thorough, and they reflected a good understanding of the prisoner's perspective, even when discrimination had not been found. In almost half the replies we checked, responses also offered useful advice to members of staff.
- 2.22** Focus groups had now been established, providing prisoners from each of the protected groups with the opportunity to express their views. A programme of these meetings had been shared and sessions based on each of the protected characteristics took place on alternate weeks. This area of work was well organised and led by the equality adviser, who had adopted a lead role in most of the new developments. Alongside the focus groups, one-day conferences, or 'summits', for each of the protected characteristics had also been introduced. These events were due to be held once a year and were designed to provide a platform for prisoners, family members and prison staff, along with community-based specialists and academics, where they could share ideas and information, creating a supportive network that the focus groups could build on. The initial round of summits was due to be held by April 2020, invitations were advertised through social media and so far, uptake appeared to have been good.

Protected characteristics

- 2.23** Black and minority ethnic prisoners now made up about 27% of the population, which was an increase from 21% at the previous inspection. In our survey, these prisoners' responses were all in line with those of white prisoners and included similar views about the range of products available in the shop. Black and minority ethnic prisoners were now able to participate in regular focus groups and we received very positive feedback from some of them about the stimulating programme of cultural and social events that had been run in October 2019 to celebrate Black History Month.
- 2.24** Our survey showed that 8% of prisoners were from a Gypsy, Roma, Traveller background, although the prison had only identified 1%, indicating a similar level of under-identification compared with the previous inspection. Prisoners from this background could participate in events run by members of an Irish charity, who visited the prison under the auspices of the chaplaincy.
- 2.25** The proportion of prisoners from a foreign national background had increased from 11% at the previous inspection to 14%. During the inspection, nine detainees were being held under immigration powers, compared with three at the previous inspection. While offender management unit staff and immigration officials, who visited the prison twice a week, provided foreign national prisoners with administrative support to help them with their documentation, no one was responsible for promoting their welfare and they did not have access to independent legal support. Good use was being made of translation and interpretation for prisoners who had difficulty communicating in English. Translated material in a wide range of languages was available in hard copies on induction and when we asked to talk to a non-English speaking prisoner, staff were able to arrange interpretation promptly and efficiently through a telephone service.
- 2.26** In our survey, 49% of prisoners described themselves as having a disability and 60% said they had a mental health problem. Seventy-nine percent of prisoners with a disability and 76% of prisoners who said they had a mental health problem said they had felt unsafe at some time while at the prison. Both these findings were almost twice as high as the responses from prisoners who said they did not have either of these difficulties (46% and 44% respectively). In addition, 40% of prisoners with mental health problems (compared with 18% of those who did not have mental health problems) and 44% of prisoners with a disability (compared with 19% of prisoners who did not have a disability) said they felt unsafe at the time of our survey. (See key concern and recommendation S49.)
- 2.27** There were fully or partially adapted cells on most wings for disabled prisoners and day-to-day support for these prisoners was adequate. Staff we spoke to were familiar with prisoners who were subject to a personal emergency evacuation plan (PEEP) and wing folders containing up-to-date lists of prisoners subject to a PEEP were easily accessible. However, the PEEP assessments were often incomplete and did not always provide sufficient information. Staff were unsure about the availability and use of evacuation chairs. Services for prisoners with mental health problems had become much more responsive and the day-care provision, available through the well-being unit for prisoners with more serious mental health difficulties, was extremely good. (See paragraph 2.63.)
- 2.28** During the inspection, four transgender prisoners were being held in the prison. They each had care plans, access to suitable clothing and cosmetics and, when we spoke to them, they indicated that, overall, they were reasonably content with the way they were treated. We also spoke to a group of LGBT prisoners and their views were similar. Both these groups of prisoners could meet among themselves regularly and they said they had members of staff they trusted, whom they could approach for help if necessary.

- 2.29** The population was young and the proportion of prisoners under the age of 21 had doubled since the previous inspection and now represented almost 12% of the population. A number of initiatives met their needs, including a maturity assessment, a Prince's Trust initiative for young prisoners who had been in care, as well as individual casework undertaken by probation staff. However, these activities were not well coordinated. Older prisoners were reasonably well supported and had their own support group and specialist gym provision.
- 2.30** Regular, well-organised support was provided every two months for the prison's small group of veterans. During the sessions, they received guidance, advice and mentoring support from two veterans' charities.

Recommendations

- 2.31 Prisoners from a foreign national background should have their welfare rights promoted and have access to independent legal advice.**
- 2.32 Evacuation plans for individual prisoners should be completed thoroughly and should be of a good standard.**
- 2.33 All staff in direct contact with prisoners should understand how to use evacuation chairs.**

Faith and religion

- 2.34** Prisoners all had good access to religious services. The facilities were suitable and prisoners' spiritual needs were adequately met. Chaplains were well integrated within the prison. The managing chaplain was a member of the senior management team and members of the chaplaincy were experienced, knowledgeable and worked well together.
- 2.35** One of the chaplains was always on duty and a member of the team provided pastoral support on the wings every day. Chaplains led a number of initiatives, including weekly groupwork sessions for prisoners with addiction problems and professional bereavement counselling.

Health, well-being and social care

Expected outcomes:

Patients are cared for by services that assess and meet their health, social care and substance misuse 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.

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

Strategy, clinical governance and partnerships

- 2.37** Joint working between the provider Nottinghamshire Healthcare NHS Foundation Trust, commissioners and the prison was good and representation and attendance at the local

delivery board and health governance meetings were appropriate. A health and social care needs assessment completed in January 2018 informed service delivery and health and social care services were available 24 hours a day.

- 2.38** Health services were good overall. Leadership of the services remained strong and we observed a skilled, flexible and conscientious staff group delivering a good standard of care. Staff support mechanisms were embedded and included annual appraisals and regular managerial and clinical supervision. The standard of professional development was excellent and mandatory training was well managed.
- 2.39** Lessons learned from incidents, audits, complaints and patient surveys informed service developments and were shared with staff. This included sharing lessons from serious incidents taking place in other prisons' health services, which was positive. Considerable progress had been made on implementing PPO health recommendations from death in custody reports, which had led to better initial health screenings, a seven-day mental health service and regular mental health attendance at assessment, care in custody and teamwork (ACCT) reviews for prisoners at risk of suicide or self-harm.
- 2.40** Working relationships between primary care staff, the integrated mental health team and the substance misuse team were very good. An effective daily handover, attended by representatives from all teams, and weekly complex case meetings ensured excellent communication, and clinical concerns were identified, promoting good standards of care. Clinical records were good and care plans included personal goals. Prisoners received copies of their care plans and further information if they requested it.
- 2.41** Health staff were easily recognisable and staffing levels and the skills mix throughout the 24-hour period met patients' needs. We observed professional, caring and compassionate interactions between health staff and patients.
- 2.42** Health care staff, including a paramedic, received life support training and responded to medical emergencies throughout the 24-hour period. They had access to suitable and well-checked emergency equipment.
- 2.43** In August 2019, following a review of progress and acknowledging patient feedback, the health care complaints system had reverted to a paper process rather than continuing with the electronic kiosk system, which had been ineffective. Most of the complaint responses we sampled were good, although a few were curt, but this had been addressed via complaint response training. The trust audited the process internally and externally.
- 2.44** The health care facilities and medicine administration rooms were clean, and suitable infection prevention and control arrangements were in place. Health equipment was regularly checked and calibrated.
- 2.45** Using the holding rooms in the health care waiting room had improved safety for both patients and staff. At the previous inspection, vulnerable prisoners were sometimes reluctant to attend the health care department owing to verbal abuse from other prisoners, but they were now seen on the wing or escorted to the department for particular sessions, such as the dentist.

Good practice

- 2.46** *The high level of professional development and commitment to ensuring the health care department had a skilled workforce meant prisoners received a high standard of care.*

Promoting health and well-being

- 2.47** There was a clear, strategic approach to health promotion and an abundance of health promotion information across the prison. Initiatives reflected national programmes but were tailored for the population. Support for prisoners over the age of 50 was proactive and all prisoners were seen systematically and provided with bespoke information through a hand-delivered newsletter.
- 2.48** Access to sexual health services and support for those with blood-borne viruses were good. Barrier protection was readily available and visiting specialists attended the prison regularly. The uptake of other immunisations and vaccinations was low, but the team was promoting them in an effort to increase it. Nicotine replacement therapy was available but only for those who met certain criteria. Policies on outbreaks of infectious illnesses were in place and staff understood them.

Primary care and inpatient services

- 2.49** Initial and follow-up health screenings were comprehensive, timely and undertaken by appropriately trained staff. This ensured prisoners had prompt access to specialist follow-up services.
- 2.50** A dedicated and well-led primary health care team delivered a good range of services. Prisoners could request an appointment via the electronic kiosk system. The rate of non-attendance at health appointments was high and the prison and health care team were actively reviewing the overall process for ensuring prisoners got to the health care department. However, the waiting times for most services were reasonable and the staff used missed appointments to see other patients and follow up on the reasons for non-attendance.
- 2.51** A well-established nurse-led triage system meant waiting times for routine GP appointments were low and urgent appointments were arranged on the same day. Highly trained, experienced and competent nurses delivered a full range of clinics on a weekly basis to help support prisoners' needs. Staff were flexible in their approach and routinely delivered community-based services on the wing. Out-of-hours' GP provision was in place and the service was currently under review to enhance the provision.
- 2.52** The management of prisoners with long-term conditions and complex health needs was robust and excellent care was provided. Patients had comprehensive personalised care plans, which reflected current national clinical guidance, met existing care needs and helped maintain continuity of care.
- 2.53** External hospital appointments were well managed. There was a record of each cancellation. Cancellations occurred for a variety of reasons, including the patient declining to attend, being released or transferred and hospital cancellations. Staff rescheduled appointments as soon as possible. Health care staff contributed to the individual risk assessments of their patients, helping ensure security measures were proportionate when they attended external appointments.
- 2.54** On release, prisoners on medication were given a seven-day supply or arrangements were made for them to obtain medication in the community. A discharge summary detailing care was sent to their GP, but the patient did not receive a copy. This was rectified during the inspection. There were good links with palliative and end of life services when needed.

Good practice

- 2.55** *The overall management, strategy and delivery of care for prisoners with long-term conditions and/or complex health needs was commendable – prisoners received personalised and detailed care plans to ensure good clinical outcomes.*

Social care

- 2.56** There were strong well-established links with Nottingham City Council, supported by a memorandum of understanding. Prisoners with social care needs were promptly identified and a dedicated social worker ensured timely assessments took place.
- 2.57** There were three prisoners with social care needs. Agreed comprehensive and personalised care plans were adhered to and a well-trained, dedicated and compassionate health care team consistently met all their needs. Staff ensured that dignity and respect was maintained.
- 2.58** A range of specialist equipment was provided to help promote prisoners' independence and enabling safe care and treatment to take place. There was no formal social care peer prisoner support system to assist with non-intimate care.
- 2.59** Information leaflets were being developed to inform prisoners about how they could use the in-cell telephones and refer themselves via a Nottingham City Council freephone number.
- 2.60** Staff helped ensure packages of care were continued on transfer within the prison estate and on release in the community.

Mental health care

- 2.61** The integrated mental health team provided a responsive service and was now available seven days a week. A stepped care model was in place and a good range of treatment was provided for patients with mild to moderate mental health needs to more complex needs. A new model of work, led by a dynamic mental health team manager, had been introduced. The team had a few vacancies, but staff were being recruited. The team comprised staff from a variety of disciplines, including several mental health nurses, a non-medical prescriber, learning disability nurse, well-being practitioner, psychiatrist, counsellor and an art therapist volunteer.
- 2.62** There was an effective daily allocation meeting and approximately 215 referrals were received every month, mostly following reception screenings, but some prisoners were referred by staff or referred themselves. The team had been allocated space in the first night centre, improving its access to prisoners. A focus on reducing the previously excessive waiting times for a routine mental health assessment from 30 days, six months ago to about five days during the inspection was positive, and the duty worker swiftly saw prisoners whose cases were urgent. A mental health team member was allocated to attend ACCT reviews and recent changes in the way these meetings were organised had increased their attendance, which was positive. Physical health checks included regular blood tests for patients on mental health medication.
- 2.63** The well-being centre was a bright and therapeutic environment and its use was gradually increasing – a good range of groups and interventions was available. It was an excellent initiative offering patients with mental health or neuro-developmental disorders a calm and safe place and prisoners attending the groups valued it.

- 2.64** Mental health staff contributed to the suicide and self-harm training provided to new officers and provided mental health awareness sessions. Additional sessions were scheduled for existing officers.
- 2.65** Mental health staff liaised with community mental health teams when planning for the release of patients with severe and enduring mental health problems. In the previous six months, three patients had been transferred under the Mental Health Act within the 14-day guidelines. Two patients were awaiting a transfer out of the area and one had been waiting for over 20 weeks, which was too long. This was due to external factors and a lack of available mental health beds.

Recommendation

- 2.66 Prisoners needing a secure hospital bed should be moved promptly.** (Repeated recommendation 2.89)

Good practice

- 2.67** *The well-being centre was a much-valued initiative, providing a therapeutic environment and excellent care for prisoners with mental health and neuro-developmental needs.*

Substance misuse treatment

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

- 2.68** Clinical and psychosocial support for prisoners with drug and alcohol problems had improved. An integrated clinical and psychosocial team provided good support to prisoners with drug and alcohol problems. Input into the drug strategy meetings was appropriate and there was a focus on promoting prisoners' well-being. Referrals as a result of incidents involving the misuse of substances, which had declined by about 40% since the previous inspection, were reported at the meeting.
- 2.69** The focus of the team's work was on keeping prisoners safe, both on arrival and post-release. An impressive array of psychosocial support, including individual and group work, had now been established, including accredited programmes. Self-help, such as Alcoholics Anonymous sessions, were facilitated by the chaplaincy, and a small number of peer mentors supported prisoners and provided advice on wings. Information about services was provided on induction, referral processes were clear, and patients valued the support offered. Caseloads were well-managed, there were few staff vacancies and the team undertook effective client-orientated training. One hundred and seventy-six prisoners were receiving psychosocial support and 98 took part in opiate substitution therapy (OST).
- 2.70** First night and early days' support was good – prisoners' needs were identified promptly and access to specialist medical interventions, including prescribing, was swift. However, there were still no designated stabilisation cells for prisoners detoxing from alcohol or drugs. This meant that, although night observations took place, they were undertaken through standard drop-down hatches, which presented some risks.
- 2.71** Clinical support was good and flexible treatment options were evident. Reviews with patients occurred appropriately and now involved all key professionals. The administration of

OST was safe and effective, but we were advised that officer supervision could be inconsistent, and too often officers had to be prompted to provide it.

- 2.72** An area adjacent to A wing provided a dedicated therapy space for prisoners, but prisoners frequently arrived late, which meant some sessions had to be re-booked. The incentivised, drug-free environment on D wing had a largely calm and supportive atmosphere, which prisoners we spoke to appreciated.
- 2.73** The team offered prisoners due to be released good support and took proactive measures to ensure they had access to community support and ongoing treatment. This included treating every court appearance as a potential release from custody. All prisoners, not just those with opiate-related problems, were offered training and support to use naloxone (a drug to manage a substance misuse overdose), which was positive.

Recommendations

- 2.74 Prisoners requiring stabilisation support for drugs and/or alcohol should be in dedicated stabilisation cells that allow unrestricted observation overnight.**
(Repeated recommendation 2.98)
- 2.75 Officers' supervision of medicine queues should be consistent.**
- 2.76 Officer escorts should ensure patients attend appointments on time.**

Medicines optimisation and pharmacy services

- 2.77** All medicines were obtained from an offsite pharmacy on a named patient basis except for some medicines that were available for use in an emergency. Deliveries were received every day and urgent items could be obtained locally. Medicines brought in by prisoners were used if assessed to be suitable.
- 2.78** The prison did not employ a pharmacist, but there were plans to recruit one. Pharmacy technicians were well supported by the community pharmacist. An area pharmacist had been appointed to oversee prisons managed by the trust.
- 2.79** The pharmacy was available from 7.30am-6pm, seven days a week. Staff ensured that every prisoner had their prescriptions confirmed with a community GP. Prescribing was sound and reflected national guidance, and there was a good focus on prisoners' individual needs.
- 2.80** Only 37.3% of medication was supplied in possession, and work was underway to try to increase the proportion. Risk assessments were in place for all prisoners. Their individual needs were assessed, and medicines were supplied appropriately, for example, blister packs or large print labels, depending on patients' needs.
- 2.81** Prisoners could access medicines to treat minor illnesses, either from the shop list or under a discretionary medicines policy. Prisoners could ask to see a member of the pharmacy team. Patient group directions, which allow nurses to administer specified medicines without a prescription, were in use and in line with regulations.
- 2.82** Medication was administered four times a day across five medication administration points (MAPs). Although there was currently no MAP in the segregation unit, work was due to start on constructing one.

- 2.83** Nurses or pharmacy technicians administered medication and recorded information electronically. Any prisoner missing more than two days' medicine, or two doses, was highlighted at handover meetings with health care staff. The reasons for non-administration were followed up.
- 2.84** Medicines were stored securely, and storage conditions were monitored using an electronic system. Any temperature fluctuations were identified and appropriately addressed. Emergency medicines were available and checked regularly.
- 2.85** There were no in-cell facilities for prisoners to store their medicines securely, which meant there was a potential risk of diversion that needed to be addressed (see paragraph 2.4). Officers' observations of medicine queues had improved, but there were still some inconsistencies in the availability of officers to oversee medication administration, which created opportunities for diversion. (See recommendation 2.75.)
- 2.86** The drugs and therapeutics committee met regularly and errors, 'near misses' (where an incident could have harmed a patient) and audits were reviewed.

Recommendation

- 2.87** **A pharmacist should be at the prison regularly to provide prescribing oversight, medicines use reviews and pharmacy-led clinics to help prisoners understand the reason for and effects of their medicines.** (Repeated recommendation 2.109)

Dental services and oral health

- 2.88** The prison ran a good, flexible dental service that met the needs of prisoners. An appropriate range of NHS dental treatments were offered that were appropriate for the length of time prisoners spent at the prison. Advice on good oral hygiene was routinely offered and disease prevention was promoted.
- 2.89** Waiting times were reasonable – patients waited between five and six weeks to see a dentist. A dental nurse provided a weekly triage service. Follow-up appointments were arranged promptly. Embargoed slots ensured urgent referrals could be seen swiftly. Additional clinics were provided if waiting times increased. Out-of-hours' provision was available when required.
- 2.90** There were separate decontamination facilities, which complied with best practice, and dental equipment was maintained and serviced regularly.

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 Our checks showed that most prisoners could spend up to six hours out of their cells on a week day and regime times were adhered to consistently. However, we found 31% of prisoners locked in their cells during the core working day, which was still too many. In the first night centre, prisoners had less time out of cell and most prisoners were locked up when we checked.
- 3.2 In our survey, 61% of prisoners compared with 44% at similar prisons said they had association more than five times a week, but 72% said that they usually spent less than two hours out of their cells on a Saturday or Sunday, compared with 44% in similar prisons. Since the published regime for weekends provided more than two hours for most prisoners, this needed to be investigated.
- 3.3 There was a reasonably good range of activity equipment, including for table tennis, table football and pool, on the wings, and orders had been placed to supplement it. Inter-wing competitions, including football and dominoes, had been successfully launched. The exercise yards remained bare, although we were told that planters were ready to be installed when the weather improved.
- 3.4 Some creative activities had been organised, such as Unlocked Drama and an imaginative carnival to mark Black History Month, involving prisoners and staff.
- 3.5 The library provided a good service, although it was a small facility, which limited the number of books that could be held. There was a reasonable range of books, including foreign language texts, and 'quick reads' for prisoners with lower levels of reading ability. The prison had increased its stock to support vocational learning, although it was still limited and there was still only one computer available.
- 3.6 Prisoners had reasonable access to the library. The library also ran an outreach service, with librarians visiting each wing twice every other Saturday to encourage prisoners to read and take requests for books. Librarians distributed newsletters, puzzles, quizzes and colouring-in sheets, which supported prisoners' well-being, and promoted library services. There were two library orderlies, but during the inspection, there were no arrangements in place to help them gain qualifications, such as in customer service.
- 3.7 The library delivered Storybook Dads (which helps prisoners to record a story for their children to listen to at home). Seven hundred and forty books had been recorded in the previous year. The library also promoted reading through schemes such as Reading Ahead (an initiative inviting individuals to select six books and record their reading in a diary). The library ran a longstanding reading group that was well attended by prisoners on the vulnerable prisoner wing and had started a reading group for other prisoners. It hosted

occasional visiting authors and motivational speakers. The library was also about to relaunch a reading mentorship scheme Turning Pages to help prisoners learn to read.

- 3.8** Physical education (PE) provision was reasonable. Facilities were good. There were two main sites and an all-weather pitch, which was in regular use. The PE department had a treatment room and officers were trained in sports massage and to administer ultra-sound therapy. Staff were generally appropriately qualified, but prisoners could not, at the time of the inspection, gain accredited qualifications.
- 3.9** The gym was well resourced – it had a wide range of aerobic machines, weights and free exercise areas. There was also a large sports hall and an outside five-a-side football pitch, where prisoners could play group games.
- 3.10** More prisoners were now using the gym, but attendance could have been improved further. In our survey, 38% of prisoners said they typically went to the gym twice a week or more compared with 20% at the previous inspection. There were far fewer closures than at the previous inspection. Staff appropriately prevented prisoners from going to the gym instead of their scheduled work or education activities.
- 3.11** Sessions were timetabled for each wing. There was an appropriate range of sessions, including a Road to Recovery class for prisoners supported by the substance misuse service and classes catering for older prisoners and promoting healthy living and weight loss. There were good developing links with community sports groups, such as Notts County Football Club.

Good practice

- 3.12** *The Saturday outreach service encouraged prisoners to read and use their spare time constructively. It also raised awareness of the library services available and supported prisoners' well-being.*

Education, skills and work activities (Ofsted)

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.

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

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. This inspection framework is available at <https://www.gov.uk/government/publications/education-inspection-framework>.

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

Overall effectiveness:

Requires improvement

Achievements of prisoners engaged in education, skills and work

Requires improvement

Quality of education, skills and work provision, including the quality of teaching, training, learning and assessment:

Requires improvement

Personal development and behaviour:

Requires improvement

Leadership and management of education, skills and work:

Requires improvement

Management of education, skills and work

- 3.14** Managers had accurately identified most of the strengths and weaknesses of the education, skills and work provision by undertaking a wide-ranging review. Quality improvement arrangements were appropriate and demonstrated clear, joint working between prison and PeoplePlus managers. However, action taken to date was not yet improving the quality of the provision. PeoplePlus' performance monitoring processes were not yet helping teachers to improve their teaching. (See key concern and recommendation S54.)
- 3.15** Prison managers used prisoners' views and information about local and regional employment needs effectively to inform the curriculum. For example, they had undertaken a detailed needs analysis using prisoner surveys and local labour market intelligence to identify gaps in the provision. As a result, new programmes in subjects, such as motor vehicle skills, barbering and logistics were planned for April 2020.

- 3.16** Managers did not have high enough expectations of prisoners. Educational and vocational training courses were not sufficiently appropriate for short-stay prisoners. The curriculum for vulnerable prisoners, including progression opportunities, was limited. Prison work for vulnerable prisoners consisted of one packaging workshop. The work was not challenging enough and was monotonous.
- 3.17** Allocations to education, skills and work activities were fair and timely and there were sufficient activity places for the prison population. Not all places were allocated for security reasons. Almost half the prison population were remand prisoners and, while a minority signed up for purposeful activities, many chose not to attend. Pay rates were now equitable and did not discourage prisoners from attending education.
- 3.18** Most prisoners regularly used the virtual campus (internet access for prisoners to community education, training and employment opportunities). They used it effectively for end of topic tests, internet and information and communications technology (ICT) skills practice, basic email and job- and work-related searches, as well as for their initial English and mathematics assessments.
- 3.19** Prison managers recognised that they had been too slow to implement the identified improvements needed in prison work. They undertook regular monitoring visits to prison workshops to judge prisoners' skills development and the standard of the work they produced. However, the outcome of these visits had not led to prisoners developing skills that would benefit them on transfer or release. (See key concern and recommendation S54.)
- 3.20** Attendance remained too low. While recent interventions from prison and education managers had been effective, attendance was still significantly below the prison's target.

Recommendation

- 3.21** **Attendance rates across all education, skills and work activities should be improved rapidly to ensure that prisoners develop the skills they need for their next steps.**

Quality of provision

- 3.22** Teachers did not use prisoners' individual starting points effectively to plan lessons that met their specific requirements. Most prisoners worked on the same activities and at the same pace, despite their wide-ranging experiences and abilities. For example, in English for speakers of other languages (ESOL), prisoners who made slow progress were not provided with sufficient support to help them catch up, while those who were capable of more challenging tasks caused low-level disruption because they got bored.
- 3.23** Additional learning support was effective and specific to each prisoner's needs. Prisoners received and used appropriate learning aids, such as coloured overlays, dictionaries and stress-relieving devices that helped them to learn and concentrate. Peer mentors supported prisoners successfully. They were well-trained and assisted teachers in classrooms and workshops effectively. However, a few peer mentors provided too much support. Consequently, prisoners were unable to identify solutions to their own problems.
- 3.24** Teachers did not always provide effective written feedback to help prisoners improve their work. Strategies used did not help prisoners to make expected or better than expected progress routinely. For example, comments under the 'What went well?' and 'Even better if' approaches were insufficiently detailed. While many comments were positive and

encouraging, targets to help prisoners understand how they could improve their work were unclear. They often referred to behavioural targets rather than to the subjects they studied. Teachers' oral feedback was clearer and better understood by prisoners.

- 3.25** Too often teachers did not check whether prisoners understood what they had been taught before moving on to the next topic. For example, where teachers used questioning to assess prisoners' understanding, they asked open questions, which the same few prisoners answered. They did not ensure that all prisoners had understood the concepts or that they extended prisoners' knowledge, skills and understanding further.
- 3.26** Instructors did not routinely set production targets in prison work. Prisoners were not given individual targets, nor was their work rate monitored sufficiently to ensure that commercial standards were met. They did not monitor their own performance to ensure that they developed appropriate skills that they could use when they were released.
- 3.27** However, prisoners developed their vocational knowledge and skills successfully in most training sessions. For example, in art, they worked skilfully on different types of expressive artwork, including pop art and impressionism. In construction, prisoners quickly developed new skills in bricklaying to industry standards.
- 3.28** Resources to support learning were good. Vocational training areas had suitable accommodation and equipment that met relevant standards. Classrooms provided a positive learning environment, which prisoners appreciated. They featured displays of former prisoners' work and posters, which motivated those attending to achieve higher standards of work.

Recommendation

- 3.29** **Managers should ensure that teaching, training, learning and assessment are of a high standard and that activities are tailored to prisoners' individual requirements and include challenging development targets to inspire prisoners to achieve their full potential.**

Personal development and behaviour

- 3.30** In education and vocational training, prisoners developed good personal, employability and life skills. For example, prisoners on hospitality courses successfully demonstrated their newly acquired knowledge about sourcing ingredients and cooking basic meals, and they developed effective budgeting and time management skills.
- 3.31** Across education and vocational training, prisoners developed their confidence and self-esteem. They learned to work in teams and reflect on what they had achieved. This helped them to become more optimistic and to focus on future study and employment.
- 3.32** Prisoners felt safe and supported across education, skills and work activities. They understood how to raise any concerns and had good access to the electronic kiosk system where they could report any issues or log a complaint.
- 3.33** Behaviour across education, skills and work was mostly positive. Prisoners showed respect for each other, staff and visitors, and demonstrated high levels of tolerance across the diverse prison population. Most prisoners in education and vocational training took pride in their work. However, teachers and instructors did not challenge derogatory or inappropriate language sufficiently across the provision.

- 3.34** Too many instructors did not set high enough expectations, where standards were concerned. For example, they did not ensure that prisoners consistently used appropriate personal protective equipment during vocational training and prison work. Too many prisoners in prison work demonstrated a poor work ethic. A few prisoners in textile workshops were asleep, while others did not participate in meaningful work activities. Instructors did not routinely challenge prisoners who were vaping in workshops.
- 3.35** Prisoners' personal, social and employability skills were not sufficiently developed in prison work. A new skills tracker had been introduced to record prisoners' development, such as in timekeeping, their work ethic, performance and outcomes. However, it was too soon to see whether prisoners were developing appropriate employability skills.
- 3.36** Prisoners did not receive professional, impartial careers information advice and guidance to assist or support them into further learning or employment. The delay in providing this service was beyond the control of prison managers. During the inspection, managers established new arrangements to provide this service. They had recruited three appropriately qualified advisers.
- 3.37** Attendance, particularly at prison work, was poor. While prisoners arrived on time to their activities, about a third of all allocated prisoners did not attend purposeful activity. In education and vocational training, low attendance affected prisoners' learning experiences.

Outcomes and achievements

- 3.38** Most prisoners who completed their courses passed their qualifications. However, significantly fewer prisoners than the number of those enrolled on qualifications did so, particularly in core subjects such as English, mathematics, ESOL and ICT, as well as construction and painting and decorating.
- 3.39** Most prisoners who left their courses early due to release or transfer did not demonstrate sufficient progress in the subjects they studied while at the prison. Targets in individual learning plans across a range of courses, including English and mathematics, were not specific enough to help prisoners focus on gaps in their knowledge. Consequently, they did not make incremental progress towards developing the skills they needed. (See key concern and recommendation S55.)
- 3.40** There were no notable achievement gaps between different groups of prisoners, such as ethnic groups or those with a learning difficulty and/or disability. Where gaps were identified, the numbers were extremely low.
- 3.41** Prisoners' work across education, skills and work was at least of the expected standard. However, managers did not have sufficient oversight of the outcomes and achievements of prisoners over their length of stay. Data provided by PeoplePlus did not represent the actual outcomes for prisoners in education and vocational training. Managers included induction and very short, non-accredited rehabilitation and resettlement courses in their outcomes data, for example, for those on alcohol awareness, budgeting, and understanding emotions sessions. Almost all prisoners completed and achieved these courses. This meant achievement rates were raised artificially, which prison leaders failed to challenge. Managers could not provide achievement data for qualifications delivered by prison staff, such as in the bicycle workshop. (See key concern and recommendation S55.)
- 3.42** Prisoners did not have sufficient opportunities to accredit their skills in prison work. Only one workshop – bicycle maintenance – offered prisoners a qualification that would help them in any future training or employment.

Recommendation

- 3.43** Managers should use the data they collect more effectively to monitor prisoners' progress, no matter how small, and to challenge poor performance.

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 Staff working at the visitors' centre continued to provide a supportive and helpful service for family members and friends. Visitors we spoke to were generally content with the way they were treated at the prison, although they did complain about the length of time it took to book visits using the telephone line. We identified this problem previously and it had also been raised in the most recent visitor survey. Visitors had also complained about visiting sessions starting late at the weekend. Staff informed us that additional checks had been introduced to ensure that prisoners were escorted to these sessions more promptly and the problem now seemed to have been resolved.
- 4.2 The visits hall had a relaxed atmosphere and was reasonably well equipped. The furniture had been upgraded since the previous inspection and there was a crèche and a canteen that served hot food. A homework club, run by library staff, enabling prisoners to receive help to assist their children with their schoolwork, had been running for six months.
- 4.3 Prisoners could wear their own clothes during visits, but they also still had to wear an identification bib. A more discrete method of maintaining security was required.
- 4.4 Family days, including a successful sports day, took place at least once a month and all prisoners could apply for them regardless of their incentives and earned privileges scheme level.
- 4.5 In a small number of the most complicated cases, managers could liaise with family members. However, there were still no programmes or specialist interventions, to help prisoners who might need to improve or re-establish relationships with their family members.
- 4.6 At the previous inspection, telephones had just been installed in all cells, which prisoners valued. Initial teething problems had been sorted out and their use was now well established, and the phones were often the main way in which prisoners kept in touch with members of their family. It was encouraging to find that prisoners who did not make phone calls and who might have been isolated were identified and given the opportunity to attend activities where they could socialise.

Recommendations

- 4.7** The telephone line for booking visits should be answered promptly.
- 4.8** Specialist provision should be available for all prisoners who need help improving or re-establishing relationships with members of their family.

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** As a local and resettlement prison, Nottingham held a complex population. During our inspection, a fifth of the population was assessed as presenting a high or very high risk of harm to others. Few prisoners remained at the prison for long with the majority staying for three months or less. The prison also held prisoners convicted of sexual offences and those serving indeterminate sentences waiting to be transferred to other prisons.
- 4.10** Strategic work to reduce reoffending was reasonably good overall. Partnership working between the reducing reoffending team, offender management unit (OMU) and the Derbyshire, Leicestershire, Nottinghamshire and Rutland Community Rehabilitation Company (CRC) was strong and well embedded, from managers through to practitioners.
- 4.11** A population needs analysis was in place that included data from the offender assessment system (OASys) but not from areas such as education and health, which would have captured in full the complex needs of prisoners held at Nottingham prison. The analysis was used to underpin the prison's reducing reoffending strategy, which appropriately reflected some of the challenges specific to HMP Nottingham, and formed the basis of the reducing reoffending action plan. The plan was considered at a monthly reducing reoffending meeting, which was reasonably well attended, however, the plan was not comprehensive enough to address all the gaps in the provision (see paragraphs 4.26 and 4.28).
- 4.12** Under the new offender management in custody (OMIC) model (see Glossary of terms), the offender management team was meant to have probation-trained prison offender managers (POMs) who would deal with longer term high-risk cases, as well as those serving, or potentially due to serve, an indeterminate sentence. During the inspection, only 2.5 probation-trained POMs out of the 6.5 required were in post. In line with the OMIC model, this resulted in prison POMs who had not received probation training undertaking case support for some high-risk cases because of a lack of probation resources. (See key concern and recommendation S56.)
- 4.13** Contact levels with prisoners varied but needed improvement. Contact was recorded on P-Nomis (a database used in prisons for the management of offenders). Since the introduction of the electronic kiosk, enabling prisoners to send emails directly to POMs, weekly drop-in OMU surgeries had ceased. Planned contact drove sentence progression, although this happened too infrequently and casework did not always sufficiently focus on progression or motivation. However, there was evidence in some of the cases we examined of good one-to-one work that was supportive, challenging and motivational, focusing well on desistance and the causes behind offending behaviour. (See key concern and recommendation S56.)
- 4.14** In addition to the lack of probation-trained POMs, not all prison POMs were trained to carry out assessments of prisoners' risks and needs through the OASys, although plans were in

place for training to be carried out. This meant only 6.5 out of 16 profiled staff were trained and available to complete the assessments.

- 4.15** As a local prison, prisoners arriving at Nottingham should be moved to a training prison within 10 days to have an initial assessment of their needs and risks. Not all prisoners could be moved within this 10-day timescale and we found a small number of initial OASys reports that were overdue.
- 4.16** The vast majority of eligible prisoners with an existing assessment had had it reviewed in the previous 12 months. The standard of OASys reports varied. Prison POMs' reports required the most improvement, which was being addressed through further training and quality assurance of assessments undertaken by the senior probation officer. Overall sentence plans we reviewed were sufficient.
- 4.17** Home detention curfew (HDC) processes were sound and had improved since the previous inspection. Of the all prisoners considered for release on HDC in the previous six months, 77% had been approved. Despite the prison's best efforts, the lack of Bail Accommodation and Support Service accommodation in the community prevented some prisoners from being released on HDC on time.
- 4.18** During the inspection, 63 prisoners were serving indeterminate sentences. There was little support for them. A new lifer prisoner forum had started, but only one meeting had been held and the work needed to be developed further.

Public protection

- 4.19** Overall, public protection procedures were managed adequately. During the inspection, 40 prisoners had been identified as posing a risk to children and nearly a fifth of the population (143) had been assessed as requiring monitoring due to concerns about their risks to children or under harassment procedures. This figure was high partly because there were not enough staff to monitor phone calls to gather evidence, which would normally have led to some prisoners having the monitoring requirement removed. This had caused significant delays – in some cases it took up to 28 days after a call had been made, before it was monitored, which undermined public protection. (See key concern and recommendation S57.)
- 4.20** The public protection team was based in the OMU and a dedicated group of three prison POMs identified all public protection cases. Cases subject to monitoring were reviewed regularly and any concerns escalated appropriately. Staff monitoring mail and phones as well as those in the visits area were aware of public protection cases and any restrictions in place.
- 4.21** On average, the prison released about 39 prisoners each month; of those prisoners being released in the following three months, 29% were assessed as presenting a high risk of harm to others. The inter-departmental risk management team (IRMT) meeting, the appropriate multidisciplinary forum, met monthly and was well attended. Cases discussed were reviewed at the following meeting to ensure action had been implemented, which was good.
- 4.22** In the sample of cases we looked at, risk management planning for release by individual offender managers was good. We saw evidence of good risk management plans in OASys reports and evidence of information exchange between the prison and the National Probation Service on issues pertinent to risks, which would help in the development of these plans. However, management oversight of the standard of release plans for high-risk cases was not always adequate.

Recommendation

- 4.23 Systematic management oversight should be provided in all high-risk cases due for release.**

Categorisation and transfers

- 4.24** Initial categorisation decisions and reviews were up to date. However, prisoners did not attend the categorisation boards, nor were they consistently invited to make written representations. Although re-categorisation decisions we saw were appropriate, they were not routinely communicated to prisoners face to face, which was not sufficient.
- 4.25** Transfers to open conditions were reasonably well managed. Despite attempts by the prison to move prisoners on to training prisons, for some groups, such as those convicted of a sexual offence who were not willing to engage in offending behaviour work, it could be more challenging to arrange a transfer because of the lack of places nationally. The longest wait was for more than two years, which was far too long.

Interventions

Expected outcomes:

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

- 4.26** As expected in a local prison, no accredited programmes were delivered. However, there were too few other structured interventions to tackle prisoners' offending behaviour or offending-related needs and those that were in place were not well used. The CRC ran a course promoting positive decision-making called Foundations of Rehabilitation, but only 14 prisoners had participated in the previous six months. A motivational course Changing Direction was also available, but only 21 prisoners had taken part.
- 4.27** Staff had been trained to deliver a new course to look at violence in custody called Timewise, although nobody had undertaken it at the time of the inspection. The CRC had plans to deliver anger management group work but it had not yet started.
- 4.28** There was no specific, systematic support or help for prisoners who had experienced abuse or other personal trauma. The CRC did collect some self-reported data on domestic violence, sexual violence and sex work, but there was no provision within the prison to support prisoners who had experienced these issues.
- 4.29** The CRC had three members of staff who were part of a housing and welfare team, which supported prisoners in securing housing on release. The team met prisoners during their induction to assist those who were reported to have no fixed address on release at the earliest opportunity, which was positive. The team had also undertaken some innovative work to try and interact with homeless people in the community to try and understand their needs better. Despite this, 39% of those released over the previous six months had no fixed address, an increase since our previous inspection from a quarter. Thirty-three percent of prisoners had been released to what had been considered sustainable accommodation, but no follow-up was carried out to assess how sustainable it had actually been. (See key concern and recommendation S58.)
- 4.30** Support to help prisoners manage their finances was reasonably good. The CRC had been running a money management course, although only 56 prisoners in the previous year had participated and it had now been merged into the prison's pre-release course (see paragraph

4.34). The CRC delivered one-to-one casework on debt and court fines and a Department for Work and Pensions worker was on site five days a week. Prisoners could open bank accounts; 140 had been opened in 2019. The CRC also sought arrangements with several local banks to agree on appropriate identification for prisoners who did not meet the criteria for opening a bank account due to their sentence length. This meant they would be able to use the identification to open a bank account on their release. In the previous two months, prisoners could have telephone numbers for their bank added to their list of approved contacts for 24 hours so they could make an enquiry or manage any issues they had.

Recommendation

- 4.31 An up-to-date analysis of the offending behaviour needs of the population should inform the provision of an appropriate range of non-accredited programmes and other interventions to help prisoners address their attitudes, thinking and behaviour.**

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.

- 4.32** The demand for resettlement help was high. On average, 155 prisoners were released each month, the majority (82%) to the local area.
- 4.33** An integrated through-the-gate service was provided by the CRC. Case workers met prisoners within five days of their arrival to assess their resettlement needs and then again 12 weeks before their release to ensure plans were in place. In the cases we looked at, CRC staff had completed assessments for all prisoners and made appropriate referrals to address their identified needs. Plans were personalised and were good.
- 4.34** The CRC ran a fortnightly pre-release course, but only 91 prisoners had participated in it during 2019. CRC staff met all prisoners in reception on the day of their release to check they were aware of all their resettlement appointments to address any last-minute concerns or changes, but this was no substitute for attendance at a structured, meaningful pre-release course.
- 4.35** Practical post-release support was good and better than we usually see. Continuing support for more complex or vulnerable prisoners was available through CRC community support workers and a new 'prison navigator' scheme provided by the council, which involved staff seconded from the CRC attending appointments with prisoners on their release.
- 4.36** This work continued to be supported through the impressive Next Steps Lounge, where prisoners could access immediate practical and emotional support on release. They could get a hot drink and something to eat after being discharged and ask any final questions they had about how to get to their appointments, charge mobile phones or obtain advice. The lounge provided toiletries, food parcels and clothing. Citizens Advice staff also attended every Friday so prisoners could start universal credit applications to speed up the process.

Good practice

- 4.37** *The Next Steps Lounge provided prisoners with excellent immediate practical and emotional support on their release.*

Section 5. Summary of key concerns 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 in the left-hand column refer to the paragraph location in the main report.

Key concerns and recommendations

- 5.1** Key concern (S49): Prisoners' perceptions of safety were still too negative. The proportion of prisoners feeling unsafe at the time of our survey was similar to the previous inspection, and only 48% said they had not been victimised by other prisoners. Prisoners with mental health problems and disabilities had far more negative views about safety. (Directed to: the governor.)

Recommendation: Negative perceptions of safety should be explored and addressed, and there should be a focus on reducing all forms of victimisation.

- 5.2** Key concern (S50): Levels of violence remained too high and the number of assaults between prisoners had increased. A small number of violent incidents were very serious. (Directed to: the governor.)

Recommendation: The number of violent incidents, including serious incidents, should be reduced through the implementation of a well-coordinated and effective strategy and action plan. Outcomes should be monitored to ensure their effectiveness.

- 5.3** Key concern (S51): Levels of self-harm were extremely high. Managers had identified some of the underlying triggers (events that might cause a prisoner to self-harm), and good analysis took place, but the strategy and action plan were not specific to HMP Nottingham and had not been effective in reducing self-harm. (Directed to: the governor.)

Recommendation: The level of self-harm should be reduced through the implementation of a prison-wide strategy and action plan that are specific to HMP Nottingham. The impact of the strategy and action plan should be monitored over time to measure their effectiveness.

- 5.4** Key concern (S52): Prisoners' access to prison clothing, including underwear and bed linen, remained very poor. For example, some prisoners had been wearing the same clothes for a week or more. (Directed to: the governor.)

Recommendation: All prisoners must have regular access to an adequate amount of clean prison clothing and bedding.

- 5.5** Key concern (S53): Despite the high levels of self-harm within the prison, too many cell calls bells went unanswered for more than five minutes and, in some cases, much longer. (Directed to: the governor.)

Recommendation: Cell call bells must be answered within five minutes.

- 5.6** Key concern (S54): Quality improvement action had not had time to have an impact on improving the provision sufficiently. For example, the implementation of improvements needed in prison work was too slow, educational and vocational training courses were not sufficiently appropriate for short-stay prisoners, and education, skills and work activities, including progression, were limited for vulnerable prisoners. In addition, attendance remained too low. (Directed to: the governor.)

Recommendation: The impact of quality improvement action on raising standards across the provision should be reviewed to ensure that prisoners receive a high-quality, wide range of education, skills and work activities.

- 5.7** Key concern (S55): Too many prisoners did not complete their qualifications. Most prisoners who left their courses early due to release or transfer did not demonstrate sufficient progress. Managers did not have sufficient oversight of prisoners' outcomes or achievements over their length of stay. Prisoners did not have sufficient opportunity to accredit their skills in prison work. (Directed to: the governor.)

Recommendation: Managers, teachers and instructors should ensure that prisoners achieve skills and qualifications across all education, skills and work activities, including in English and mathematics. Prisoners should have a structured programme of learning and/or skills development for their anticipated length of stay to help them move successfully on to the next stage of their education, training or employment on release or transfer.

- 5.8** Key concern (S56): A lack of trained probation offender managers in the OMU had a negative impact on contact levels with prisoners and their ability to carry out one-to-one work. (Directed to: the governor.)

Recommendation: All prisoners should receive structured and meaningful contact from their offender manager in the OMU including an appropriate level of one-to-one work where relevant.

- 5.9** Key concern (S57): There was a backlog of telephone calls made by prisoners that were subject to contact restrictions but that had not been monitored, which undermined public protection work. (Directed to: the governor.)

Recommendation: Public protection should be improved through the timely monitoring of all calls made by prisoners subject to telephone monitoring.

- 5.10** Key concern (S58): Data provided by the CRC showed that of all prisoners released over the previous six months, 39% were homeless, which undermined effective resettlement. Monitoring of prisoners' accommodation status after release was not undertaken so the longer-term outcomes for prisoners were not known. (Directed to: HM Prison and Probation Service.)

Recommendation: Steps should be taken to reduce the number of prisoners released homeless and the situation should be monitored over time to evaluate the effectiveness of the CRC's work.

General recommendations

- 5.11** Recommendation (I.19): The prison should ensure that all incidents, including allegations of bullying or victimisation, are reported to the safer custody team to ensure they are

investigated so that perpetrators can be managed appropriately and victims supported. (Directed to: the governor.)

- 5.12** Recommendation (1.20): Peer representatives should be actively involved in the safer custody department and appropriately trained to support prisoners. (Directed to: the governor.)
- 5.13** Recommendation (1.29): Managers should ensure that force is only used as a last resort and that staff are confident about applying de-escalation techniques. (Directed to: the governor.)
- 5.14** Recommendation (1.34): Reintegration planning for longer-term segregated prisoners should include providing them with access to the same regime and purposeful activity that is available to prisoners on the main wings. (Directed to: the governor.)
- 5.15** Recommendation (2.31): Prisoners from a foreign national background should have their welfare rights promoted and have access to independent legal advice. (Directed to: the governor.)
- 5.16** Recommendation (2.32): Evacuation plans for individual prisoners should be completed thoroughly and should be of a good standard. (Directed to: the governor.)
- 5.17** Recommendation (2.33): All staff in direct contact with prisoners should understand how to use evacuation chairs. (Directed to: the governor.)
- 5.18** Recommendation (2.66): Prisoners needing a secure hospital bed should be moved promptly. (Repeated recommendation 2.89) (Directed to: the governor.)
- 5.19** Recommendation (2.74): Prisoners requiring stabilisation support for drugs and/or alcohol should be in dedicated stabilisation cells that allow unrestricted observation overnight. (Repeated recommendation 2.98) (Directed to: the governor.)
- 5.20** Recommendation (2.75): Officers' supervision of medicine queues should be consistent. (Directed to: the governor.)
- 5.21** Recommendation (2.76): Officer escorts should ensure patients attend appointments on time. (Directed to: the governor.)
- 5.22** Recommendation (2.87): A pharmacist should be at the prison regularly to provide prescribing oversight, medicines use reviews and pharmacy-led clinics to help prisoners understand the reason for and effects of their medicines. (Repeated recommendation 2.109) (Directed to: the governor.)
- 5.23** Recommendation (3.21): Attendance rates across all education, skills and work activities should be improved rapidly to ensure that prisoners develop the skills they need for their next steps. (Directed to: the governor.)
- 5.24** Recommendation (3.29): Managers should ensure that teaching, training, learning and assessment are of a high standard and that activities are tailored to prisoners' individual requirements and include challenging development targets to inspire prisoners to achieve their full potential. (Directed to: the governor.)
- 5.25** Recommendation (3.43): Managers should use the data they collect more effectively to monitor prisoners' progress, no matter how small, and to challenge poor performance. (Directed to: the governor.)

- 5.26** Recommendation (4.7): The telephone line for booking visits should be answered promptly. (Directed to: the governor.)
- 5.27** Recommendation (4.9): Specialist provision should be available for all prisoners who need help improving or re-establishing relationships with members of their family. (Directed to: the governor.)
- 5.28** Recommendation (4.23): Systematic management oversight should be provided in all high-risk cases due for release. (Directed to: the governor.)
- 5.29** Recommendation (4.31): An up-to-date analysis of the offending behaviour needs of the population should inform the provision of an appropriate range of non-accredited programmes and other interventions to help prisoners address their attitudes, thinking and behaviour. (Directed to: the governor.)

Examples of good practice

- 5.30** Good practice example (1.40): The local tactical assessment and subsequent action meeting ensured that intelligence was effectively managed and appropriate action was allocated and implemented.
- 5.31** Good practice example (2.46): The high level of professional development and commitment to ensuring the health care department had a skilled workforce meant prisoners received a high standard of care.
- 5.32** Good practice example (2.55): The overall management, strategy and delivery of care for prisoners with long-term conditions and/or complex health needs was commendable – prisoners received personalised and detailed care plans to ensure good clinical outcomes.
- 5.33** Good practice example (2.67): The well-being centre was a much-valued initiative, providing a therapeutic environment and excellent care for prisoners with mental health and neuro-developmental needs.
- 5.34** Good practice example (3.12): The Saturday outreach service encouraged prisoners to read and use their spare time constructively. It also raised awareness of the library services available and supported prisoners' well-being.
- 5.35** Good practice example (4.37): The Next Steps Lounge provided prisoners with excellent immediate practical and emotional support on their release.

Section 6. Appendices

Appendix I: Inspection team

Peter Clarke	Chief inspector
Sandra Fieldhouse	Team leader
Hayley Edwards	Inspector
David Foot	Inspector
Deri Hughes Roberts	Inspector
Martin Kettle	Inspector
Ian Macfadyen	Inspector
Darren Wilkinson	Inspector
Caroline Wright	Inspector
Becky Duffield	Researcher
Rahul Jalil	Researcher
Amilcar Johnson	Researcher
Chloe Moore	Researcher
Maureen Jamieson	Lead health and social care inspector
Steve Eley	Health and social care inspector
Ann Melrose	Pharmacist
Gary Turney	Care Quality Commission inspector
Dave Barber	Ofsted inspector
Darryl Jones	Ofsted inspector
Suzanna Wainwright	Ofsted inspector
Paddy Doyle	Offender management inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2018, The prison needed to do more to ensure prisoners had support during their early days, including an initial needs and risk assessment in private on the day of arrival. The experience of vulnerable men on D wing (the first night centre) was poor. The prison was still not safe. Levels of violence remained very high and not enough had been done to address the causes. Work had been undertaken to reduce the backlog of adjudications. Use of force was high and its management was poor. Efforts were being made to reintegrate segregated prisoners into the mainstream prison. Some responses to security intelligence were delayed or there was no response at all. While it was positive that efforts were made to prioritise the most important intelligence received for action, where reports had not been analysed there was no evidence that any required action had been taken or concerns addressed. The positive drug testing rate was high and in our survey over half of prisoners said it was easy to get drugs. There had been eight self-inflicted deaths in the previous two years, and significant external criticisms of the care provided to some of these prisoners. Work was ongoing to address these concerns but it was not yet embedded. Outcomes for prisoners were poor against this healthy prison test.

Main recommendations

The prison should ensure the response to violence and disorder is evidence-based, coordinated and effective, addressing both the causes and effects of the problems. There should be measurable reductions in violent incidents and measurable improvements in prisoner perceptions of safety. (S45)

Partially achieved

Managers should ensure that force is used proportionately. They should also promote the routine use of de-escalation techniques and reduce the frequency with which force is needed or used at the prison. (S46)

Not achieved

Managers should take a strategic approach to reducing the supply of, and demand for, drugs at the prison, including ensuring testing arrangements are effective and timely. (S47)

Achieved

The prison should ensure that prisoners at risk of self-harm are identified promptly and that a care plan is developed and adhered to. Prisoners at risk should be supported and feel cared for. Staff working practices should support prisoner safety. (S48)

Achieved

Recommendations

The reception should be welcoming, prisoners should have something to do while they are waiting and they should be managed through induction promptly and efficiently. (1.11)

Not achieved

Intelligence reports should be processed quickly and all required actions should be completely promptly to ensure the process is effective. (1.40)

Achieved

The MDT suite should be relocated to an appropriate waiting, searching and testing environment. (1.41)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2018, Staff-prisoner interactions were generally friendly, but many officers were inexperienced and lacked the confidence or skills to challenge poor behaviour effectively. A concerted effort had been made to ensure communal areas were clean and decent, and progress needed to be maintained. Many cells remained poor and slow responses to cell bells posed a risk. Prisoners were frustrated about many everyday issues, and communication with them needed to improve. Their frustrations were likely to have explained the large number of complaints. Support for men with protected characteristics was underdeveloped. Faith provision was strong. Health care was reasonably good overall and plans to develop it further were encouraging. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

HM Prison and Probation Service and the governor should ensure new and inexperienced staff and managers receive the mentoring and support they require to discharge their duties effectively. (S49)

Achieved

Consultation with prisoners should be structured, routine and meaningful and the applications process responsive. (S50)

Achieved

Recommendations

Cells should be adequately equipped and suitably furnished. (2.10)

Not achieved

Prisoners should be able to shower every day. (2.11)

Achieved

Lunch should not be served before noon and the evening meal not before 5pm. (2.16)

Not achieved

DIRFs should be freely available on all wings and submissions should be answered promptly by an appropriate manager. (2.29)

Achieved

The prison should better understand the specific concerns and issues for prisoners with protected characteristics and ensure efforts are being made to meet their needs. (2.41)

Achieved

Where possible foreign national detainees should be moved to an immigration detention centre once their criminal sentence has been served. (2.42)

Not achieved

Information about the prison should be translated into common languages. (2.43)

Achieved

Staff, including those working at night, should be aware of the PEEP system and which prisoners on their wings need assistance in the event of an evacuation. (2.44)

Achieved

Responses to prisoners' health care complaints should show evidence of investigations having taken place and be signed by respondents. (2.57)

Achieved

Newly arrived prisoners who smoke should have easy access to nicotine replacement treatment and psychosocial support that meets their individual needs. (2.61)

Achieved

Men should see a nurse promptly on arrival and receive a scheduled follow-up health assessment within the first seven days after their arrival to ensure risks and concerns can be identified. (2.73)

Achieved

The prison and health care department should have a memorandum of understanding with the local authority. The prison should have a formal social care referral protocol and prisoners who support others should be appropriately risk assessed and trained. (2.78)

Achieved

Prisoners needing a secure hospital bed should be moved promptly. (2.89)

Not achieved (recommendation repeated, 2.66)

Prisoners with drug and/or alcohol problems should have timely access to a full range of psychosocial support interventions and regular face-to-face reviews with a prescriber. (2.97)

Achieved

Prisoners requiring stabilisation support for drugs and/or alcohol should be in dedicated stabilisation cells that allow unrestricted observation overnight. (2.98)

Not achieved (recommendation repeated, 2.74)

Prison officers should properly supervise medicine administration to ensure confidentiality and prevent bullying and diversion. (2.108)

Partially achieved

A pharmacist should be at the prison regularly to provide prescribing oversight, medicines use reviews and pharmacy-led clinics to help men understand the reason for and effects of their medicines. (2.109)

Not achieved (recommendation repeated, 2.87)

Purposeful activity

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

At the last inspection, in 2018, time out of cell was insufficient, but the daily routine was at least now predictable. Some innovative provision was available through the library. There were good physical education facilities, but access to them was limited. Ofsted rated education, skills and work activities as requiring improvement overall. Progress had stalled after the last inspection, but there were signs of more recent improvements. A reasonable and developing range of provision was offered, and most men could at least participate in part-time activities. Nevertheless, allocations to activities and attendance needed to improve. The National Careers Service (NCS) provision was insufficient. Behaviour we observed in activities was generally good. Men achieved well if they stayed on courses. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

Allocations to activities, attendance and punctuality should be improved. (S51)

Partially achieved

Recommendations

Men separated for their own protection on D wing should have time out of cell and access to activities comparable with the mainstream population. (3.9)

No longer relevant

Gymnasium staff should identify the reasons for poor attendance at PE sessions and take corrective action to improve attendance. (3.10)

Achieved

Managers should utilise the needs analysis and other available data to improve the education, skills and work provision. (3.23)

Partially achieved

Instructors should recognise and accurately record the skills that prisoners develop in prison work. (3.31)

Not achieved

Prisoners should be provided with appropriate learning support to help them make good progress and succeed in their learning. (3.32)

Achieved

Prisoners should receive support to improve their English and maths skills in their workplaces. (3.37)

Achieved

Managers should collect accurate data about the employment and training destinations of all prisoners on release. (3.42)

Not achieved

Rehabilitation and release planning

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

At the last inspection, in 2018, children and families work was reasonable. Offender management work for high risk cases was reasonable but inadequate for low and medium risk men. The prison had made the decision not to complete offender assessment system (OASys) reports for lower risk men, even when they were required. This represented a significant omission of core offender management work. Problems with home detention curfew (HDC) processes were being addressed. Public protection arrangements were robust. Preparation for release and 'through-the-gate' work was generally good, but many men still left without sustainable accommodation. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

Low and medium risk prisoners should be subject to effective offender management, and have an OASys report and sentence plan completed before they are moved to a training prison. (S52)

Partially achieved

Recommendations

There should be a strategy for managing prisoners staying at the prison for longer periods. It should include resources for appropriate interventions and timely transfer arrangements. (4.24)

Not achieved

All prisoners eligible for HDC should be assessed and those approved should be released on their earliest eligibility date. (4.25)

Achieved

There should be more systematic support and information for prisoners who have been recalled. (4.26)

Achieved

There should be adequate interview space for OMU and CRC staff to carry out confidential interviews. (4.35)

Not achieved

Appendix III: Prison population profile

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

Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced Inc ISPP	44	254	36.3
Recall	4	128	16.5
Convicted unsentenced	20	108	16
Remand	23	197	27.6
Civil prisoners	0	1	0.1
Detainees	2	10	1.5
Unknown	1	6	0.9
Total	94	704	100

Sentence	18–20 yr olds	21 and over	%
Unsentenced	47	332	47.5
Less than six months	1	47	6
six months to less than 12 months	3	22	3.1
12 months to less than 2 years	8	43	6.4
2 years to less than 4 years	26	68	11.7
4 years to less than 10 years	8	91	12.4
10 years and over (not life)	1	38	4.9
ISPP (indeterminate sentence for public protection)	0	39	57.9
Life	0	24	3
Total	94	704	100

Age	Number of prisoners	%
Please state minimum age here:	18	
Under 21 years	94	11.8
21 years to 29 years	238	29.8
30 years to 39 years	250	31.3
40 years to 49 years	138	17.3
50 years to 59 years	53	6.6
60 years to 69 years	18	2.3
70 plus years	7	0.9
Please state maximum age here:	83	
Total	798	100

Nationality	18–20 yr olds	21 and over	%
British	71	609	85.2
Foreign nationals	22	93	14.4
Not Stated	1	2	0.4
Total	93	702	100

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced	46	328	0
Uncategorised sentenced	0	0	0
Category A	0	0	0
Category B	0	81	10.2
Category C	2	277	35
Category D	0	10	1.3
YOI Closed	46	1	5.9
Unclassified	0	7	0.9
Other	0	0	0
Total	94	704	798

Ethnicity	18–20 yr olds	21 and over	%
White			
British	33	476	63.8
Irish	0	8	1
Gypsy/Irish Traveller	2	8	1.3
Other white	12	47	7.4
Mixed			
White and black Caribbean	10	30	5
White and black African	2	1	0.4
White and Asian	1	1	0.3
Other mixed	2	3	0.6
Asian or Asian British			
Indian	4	10	1.8
Pakistani	3	23	3.6
Bangladeshi	1	1	0.3
Chinese	0	4	0.5
Other Asian	4	16	2.5
Black or black British			
Caribbean	12	41	6.6
African	4	16	2.5
Other black	2	10	1.5
Other ethnic group			
Arab	0	3	0.4
Other ethnic group	1	4	0.6
Not stated	1	2	0.4
Total	0	659	100

Religion	18–20 yr olds	21 and over	%
Baptist	0	0	0
Church of England	4	125	16.2
Roman Catholic	11	21	16.5
Other Christian denominations	28	139	20.9
Muslim	21	97	14.8
Sikh	0	6	0.8
Hindu	0	1	0.1
Buddhist	0	17	2.1
Jewish	0	5	0.6
Other	2	7	1.1
No religion	21	181	26.1
Total	94	704	100

Other demographics	18–20 yr olds	21 and over	%
Veteran (ex-armed services)	0	3	0.4
Total	0	3	0.4

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	7	0.9	93	11.7
1 month to 3 months	21	2.6	106	13.3
3 months to six months	14	1.8	78	9.8
six months to 1 year	5	0.6	59	7.4
1 year to 2 years	0	0	27	3.4
2 years to 4 years	0	0	9	1.1
4 years or more	0	0	0	0
Total	47	5.9	372	46.6

Sentenced prisoners only

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

Unsentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	13	3.4	92	24.3
1 month to 3 months	20	5.3	114	30.1
3 months to six months	10	2.6	64	16.9
six months to 1 year	4	1.1	55	14.5
1 year to 2 years	0	0	6	1.6
2 years to 4 years	0	0	1	0.3
4 years or more	0	0	0	0
Total	47	5.9	332	41.6

Appendix IV: Prisoner survey methodology and results

Prisoner survey methodology

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

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

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

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

Sampling

On the day of the survey a stratified random sample is drawn by HMI Prisons researchers from a P-NOMIS prisoner population printout ordered by cell location. Using a power calculation, HMI Prisons researchers calculate the minimum sample size required to ensure that the survey findings can be generalised to the entire population of the establishment (95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments)).

Distributing and collecting questionnaires

HMI Prisons researchers distribute and collect the questionnaires in person. So that prisoners can give their informed consent to participate, the purpose of the survey is explained and assurances are given about confidentiality and anonymity. (For further information about the ethical principles which underpin our survey methodology, please see *Ethical principles for research activities* which can be downloaded from HMI Prisons' website <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>.) 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 6 January 2020, the prisoner population at HMP Nottingham was 788. Using the sampling method described above, questionnaires were distributed to 214 prisoners. We received a total of 165 completed questionnaires, a response rate of 77%. This included one questionnaire completed via face-to-face interviews. Twenty prisoners declined to participate in the survey and 29 questionnaires were either not returned at all, or returned blank.

Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for HMP Nottingham. For the comparator analyses, each question was reformulated into a binary 'yes/no' format and affirmative responses compared, using the Chi-square test (or Fisher's exact test if there are fewer than five responses in a group). 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 Nottingham 2020 compared with those from other HMI Prisons surveys

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

- Survey responses from HMP Nottingham in 2020 compared with survey responses from other local prisons inspected since September 2017.
- Survey responses from HMP Nottingham in 2020 compared with survey responses from HMP Nottingham in 2017.

Comparisons between different residential locations within HMP Nottingham 2020

- Responses of prisoners in the integrated drug treatment system unit (IDTS; A wing) compared with those from the rest of the establishment.
- Responses of prisoners in the vulnerable prisoner unit compared with those from the rest of the establishment.

Comparisons between sub-populations of prisoners within HMP Nottingham 2020

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

- Responses of prisoners from black or minority ethnic groups compared with those of white prisoners.
- Foreign national prisoners' responses compared with those of UK/British national prisoners.
- Muslim prisoners' responses compared with those of non-Muslim prisoners.
- Disabled prisoners' responses compared with those who do not have a disability.
- Responses of prisoners with mental health problems compared with those who do not have mental health problems.
- Responses of prisoners aged 50 and over compared with those under 50.
- Responses of prisoners aged 25 and under compared with those over 25.

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group. A minimum of 10 responses which must also represent at least 10% of the total response.

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

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

What wing or houseblock are you currently living on?

A wing.....	34 (21%)
B wing	22 (13%)
C wing.....	19 (12%)
D wing.....	31 (19%)
E wing.....	19 (12%)
F wing.....	9 (6%)
G wing.....	30 (18%)
Segregation unit.....	1 (1%)

1.2 How old are you?

Under 21	15 (9%)
21 - 25.....	35 (21%)
26 - 29.....	19 (12%)
30 - 39.....	50 (31%)
40 - 49.....	24 (15%)
50 - 59.....	11 (7%)
60 - 69.....	7 (4%)
70 or over.....	2 (1%)

1.3 What is your ethnic group?

White - English/ Welsh/ Scottish/ Northern Irish/ British	100 (62%)
White - Irish.....	3 (2%)
White - Gypsy or Irish Traveller.....	6 (4%)
White - any other White background	9 (6%)
Mixed - White and Black Caribbean	12 (7%)
Mixed - White and Black African	0 (0%)
Mixed - White and Asian	2 (1%)
Mixed - any other Mixed ethnic background	2 (1%)
Asian/ Asian British - Indian.....	0 (0%)
Asian/ Asian British - Pakistani.....	7 (4%)
Asian/ Asian British - Bangladeshi.....	4 (2%)
Asian/ Asian British - Chinese.....	1 (1%)
Asian - any other Asian Background	2 (1%)
Black/ Black British - Caribbean	4 (2%)
Black/ Black British - African	4 (2%)
Black - any other Black/ African/ Caribbean background.....	4 (2%)
Arab.....	0 (0%)
Any other ethnic group.....	1 (1%)

1.4 How long have you been in this prison?

Less than 6 months.....	97 (61%)
6 months or more	63 (39%)

1.5 Are you currently serving a sentence?

Yes.....	53 (33%)
Yes - on recall.....	32 (20%)
No - on remand or awaiting sentence.....	70 (44%)
No - immigration detainee.....	4 (3%)

1.6 How long is your sentence?

Less than 6 months.....	14 (9%)
6 months to less than 1 year.....	8 (5%)
1 year to less than 4 years.....	23 (14%)
4 years to less than 10 years.....	19 (12%)
10 years or more.....	12 (8%)
IPP (indeterminate sentence for public protection).....	7 (4%)
Life.....	2 (1%)
Not currently serving a sentence.....	74 (47%)

Arrival and reception**2.1 Were you given up-to-date information about this prison before you came here?**

Yes.....	15 (9%)
No.....	134 (83%)
Don't remember.....	12 (7%)

2.2 When you arrived at this prison, how long did you spend in reception?

Less than 2 hours.....	50 (31%)
2 hours or more.....	97 (60%)
Don't remember.....	14 (9%)

2.3 When you were searched in reception, was this done in a respectful way?

Yes.....	129 (80%)
No.....	26 (16%)
Don't remember.....	7 (4%)

2.4 Overall, how were you treated in reception?

Very well.....	32 (20%)
Quite well.....	88 (55%)
Quite badly.....	26 (16%)
Very badly.....	6 (4%)
Don't remember.....	9 (6%)

2.5 When you first arrived here, did you have any of the following problems?

Problems getting phone numbers.....	84 (52%)
Contacting family.....	88 (54%)
Arranging care for children or other dependants.....	6 (4%)
Contacting employers.....	16 (10%)
Money worries.....	52 (32%)
Housing worries.....	43 (26%)
Feeling depressed.....	94 (58%)
Feeling suicidal.....	43 (26%)
Other mental health problems.....	63 (39%)
Physical health problems.....	42 (26%)
Drug or alcohol problems (e.g. withdrawal).....	39 (24%)
Problems getting medication.....	50 (31%)
Needing protection from other prisoners.....	23 (14%)
Lost or delayed property.....	30 (18%)
Other problems.....	26 (16%)
Did not have any problems.....	18 (11%)

2.6 Did staff help you to deal with these problems when you first arrived?

Yes.....	32 (20%)
No.....	110 (69%)
Did not have any problems when I first arrived.....	18 (11%)

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.....	106 (67%)
Toiletries / other basic items	91 (58%)
A shower.....	49 (31%)
A free phone call.....	96 (61%)
Something to eat.....	125 (79%)
The chance to see someone from health care	98 (62%)
The chance to talk to a Listener or Samaritans.....	35 (22%)
Support from another prisoner (e.g. Insider or buddy)	35 (22%)
Wasn't offered any of these things.....	11 (7%)

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

Very clean	9 (6%)
Quite clean	48 (30%)
Quite dirty	47 (29%)
Very dirty.....	55 (34%)
Don't remember	3 (2%)

3.3 Did you feel safe on your first night here?

Yes	94 (58%)
No.....	57 (35%)
Don't remember	11 (7%)

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

	Yes	No	Don't remember
Access to the prison shop / canteen?	59 (37%)	90 (57%)	9 (6%)
Free PIN phone credit?	77 (48%)	77 (48%)	6 (4%)
Numbers put on your PIN phone?	47 (31%)	101 (66%)	6 (4%)

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

Yes.....	53 (34%)
No.....	81 (51%)
Have not had an induction.....	24 (15%)

On the wing

4.1 Are you in a cell on your own?

Yes.....	69 (42%)
No, I'm in a shared cell or dormitory.....	94 (58%)

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

Yes.....	42 (26%)
No.....	107 (66%)
Don't know.....	13 (8%)
Don't have a cell call bell.....	0 (0%)

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

	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	33 (21%)	122 (78%)	1 (1%)
Can you shower every day?	137 (87%)	19 (12%)	2 (1%)
Do you have clean sheets every week?	38 (24%)	116 (74%)	2 (1%)
Do you get cell cleaning materials every week?	63 (40%)	88 (56%)	5 (3%)
Is it normally quiet enough for you to relax or sleep at night?	54 (34%)	101 (64%)	3 (2%)
Can you get your stored property if you need it?	27 (18%)	92 (60%)	34 (22%)

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

Very clean	18 (11%)
Quite clean	68 (43%)
Quite dirty	40 (25%)
Very dirty	34 (21%)

Food and canteen

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

Very good	8 (5%)
Quite good	37 (23%)
Quite bad	69 (43%)
Very bad	46 (29%)

5.2 Do you get enough to eat at mealtimes?

Always	9 (6%)
Most of the time	39 (24%)
Some of the time	66 (41%)
Never	47 (29%)

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

Yes	97 (61%)
No	55 (35%)
Don't know	6 (4%)

Relationships with staff

6.1 Do most staff here treat you with respect?

Yes	104 (66%)
No	54 (34%)

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

Yes	121 (77%)
No	37 (23%)

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

Yes	59 (37%)
No	102 (63%)

6.4	How helpful is your personal or named officer?	
	Very helpful.....	27 (17%)
	Quite helpful.....	33 (21%)
	Not very helpful	25 (16%)
	Not at all helpful.....	23 (14%)
	Don't know.....	20 (13%)
	Don't have a personal / named officer	31 (19%)
6.5	How often do you see prison governors, directors or senior managers talking to prisoners?	
	Regularly.....	11 (7%)
	Sometimes	37 (24%)
	Hardly ever.....	92 (59%)
	Don't know.....	17 (11%)
6.6	Do you feel that you are treated as an individual in this prison?	
	Yes.....	61 (39%)
	No.....	95 (61%)
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	
	Yes, and things sometimes change.....	27 (17%)
	Yes, but things don't change.....	49 (31%)
	No.....	54 (34%)
	Don't know.....	28 (18%)

Faith

7.1	What is your religion?	
	No religion.....	43 (28%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations).....	83 (53%)
	Buddhist.....	3 (2%)
	Hindu.....	0 (0%)
	Jewish	1 (1%)
	Muslim.....	19 (12%)
	Sikh	0 (0%)
	Other	7 (4%)
7.2	Are your religious beliefs respected here?	
	Yes.....	65 (41%)
	No.....	27 (17%)
	Don't know.....	22 (14%)
	Not applicable (no religion).....	43 (27%)
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	
	Yes.....	74 (47%)
	No.....	14 (9%)
	Don't know.....	27 (17%)
	Not applicable (no religion).....	43 (27%)
7.4	Are you able to attend religious services, if you want to?	
	Yes.....	92 (58%)
	No.....	11 (7%)
	Don't know.....	12 (8%)
	Not applicable (no religion).....	43 (27%)

Contact with family and friends

- 8.1 Have staff here encouraged you to keep in touch with your family / friends?**
 Yes 37 (24%)
 No 120 (76%)
- 8.2 Have you had any problems with sending or receiving mail (letters or parcels)?**
 Yes 98 (61%)
 No 63 (39%)
- 8.3 Are you able to use a phone every day (if you have credit)?**
 Yes 147 (92%)
 No 12 (8%)
- 8.4 How easy or difficult is it for your family and friends to get here?**
 Very easy 26 (16%)
 Quite easy 53 (33%)
 Quite difficult 32 (20%)
 Very difficult 30 (19%)
 Don't know 20 (12%)
- 8.5 How often do you have visits from family or friends?**
 More than once a week 5 (3%)
 About once a week 33 (21%)
 Less than once a week 49 (32%)
 Not applicable (don't get visits) 67 (44%)
- 8.6 Do visits usually start and finish on time?**
 Yes 31 (36%)
 No 55 (64%)
- 8.7 Are your visitors usually treated respectfully by staff?**
 Yes 53 (63%)
 No 31 (37%)

Time out of cell

- 9.1 Do you know what the unlock and lock-up times are supposed to be here (or roll check times if you are in an open prison)?**
 Yes, and these times are usually kept to 67 (44%)
 Yes, but these times are not usually kept to 62 (40%)
 No 25 (16%)
- 9.2 How long do you usually spend out of your cell on a typical weekday (including time spent at education, work etc.)?**
 Less than 2 hours 61 (39%)
 2 to 6 hours 62 (40%)
 6 to 10 hours 17 (11%)
 10 hours or more 4 (3%)
 Don't know 12 (8%)

9.3	How long do you usually spend out of your cell on a typical Saturday or Sunday?	
	Less than 2 hours	112 (72%)
	2 to 6 hours.....	23 (15%)
	6 to 10 hours	8 (5%)
	10 hours or more	3 (2%)
	Don't know.....	10 (6%)
9.4	How many days in a typical week do you have time to do domestics (shower, clean cell, use the wing phones etc.)?	
	None	10 (6%)
	1 or 2	31 (20%)
	3 to 5.....	32 (20%)
	More than 5.....	66 (42%)
	Don't know.....	19 (12%)
9.5	How many days in a typical week do you get association, if you want it?	
	None	9 (6%)
	1 or 2	12 (8%)
	3 to 5.....	25 (16%)
	More than 5.....	96 (61%)
	Don't know.....	16 (10%)
9.6	How many days in a typical week could you go outside for exercise, if you wanted to?	
	None	7 (4%)
	1 or 2	20 (13%)
	3 to 5.....	38 (24%)
	More than 5.....	72 (45%)
	Don't know.....	22 (14%)
9.7	Typically, how often do you go to the gym?	
	Twice a week or more	60 (38%)
	About once a week	30 (19%)
	Less than once a week.....	16 (10%)
	Never	53 (33%)
9.8	Typically, how often do you go to the library?	
	Twice a week or more	12 (8%)
	About once a week	56 (36%)
	Less than once a week.....	30 (19%)
	Never	58 (37%)
9.9	Does the library have a wide enough range of materials to meet your needs?	
	Yes.....	39 (26%)
	No.....	51 (34%)
	Don't use the library	58 (39%)

Applications, complaints and legal rights

10.1	Is it easy for you to make an application?	
	Yes.....	94 (59%)
	No.....	47 (30%)
	Don't know.....	18 (11%)

10.2 If you have made any applications here, please answer the questions below:

	Yes	No	Not made any applications
Are applications usually dealt with fairly?	51 (36%)	73 (51%)	18 (13%)
Are applications usually dealt with within 7 days?	54 (38%)	69 (49%)	18 (13%)

10.3 Is it easy for you to make a complaint?

Yes.....	75 (47%)
No.....	56 (35%)
Don't know.....	27 (17%)

10.4 If you have made any complaints here, please answer the questions below:

	Yes	No	Not made any complaints
Are complaints usually dealt with fairly?	24 (16%)	69 (47%)	54 (37%)
Are complaints usually dealt with within 7 days?	18 (13%)	67 (48%)	54 (39%)

10.5 Have you ever been prevented from making a complaint here when you wanted to?

Yes.....	48 (32%)
No.....	72 (47%)
Not wanted to make a complaint	32 (21%)

10.6 In this prison, is it easy or difficult for you to...

	Easy	Difficult	Don't know	Don't need this
Communicate with your solicitor or legal representative?	67 (43%)	49 (32%)	25 (16%)	14 (9%)
Attend legal visits?	78 (53%)	31 (21%)	27 (18%)	11 (7%)
Get bail information?	22 (15%)	50 (35%)	43 (30%)	29 (20%)

10.7 Have staff here ever opened letters from your solicitor or legal representative when you were not present?

Yes.....	89 (58%)
No.....	50 (33%)
Not had any legal letters	14 (9%)

Health care**11.1 How easy or difficult is it to see the following people?**

	Very easy	Quite easy	Quite difficult	Very difficult	Don't know
Doctor	7 (5%)	30 (20%)	50 (33%)	50 (33%)	14 (9%)
Nurse	14 (9%)	48 (32%)	42 (28%)	33 (22%)	14 (9%)
Dentist	6 (4%)	17 (11%)	38 (25%)	66 (44%)	23 (15%)
Mental health workers	9 (6%)	29 (19%)	40 (27%)	43 (29%)	29 (19%)

11.2 What do you think of the quality of the health service from the following people?

	Very good	Quite good	Quite bad	Very bad	Don't know
Doctor	22 (14%)	47 (31%)	32 (21%)	24 (16%)	27 (18%)
Nurse	25 (17%)	53 (35%)	31 (21%)	23 (15%)	19 (13%)
Dentist	12 (8%)	28 (19%)	35 (24%)	26 (18%)	47 (32%)
Mental health workers	18 (12%)	31 (21%)	26 (17%)	33 (22%)	41 (28%)

11.3 Do you have any mental health problems?

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

11.4 Have you been helped with your mental health problems in this prison?

Yes	40 (26%)
No.....	51 (33%)
Don't have any mental health problems.....	62 (41%)

11.5 What do you think of the overall quality of the health services here?

Very good	12 (8%)
Quite good	49 (32%)
Quite bad	43 (28%)
Very bad	37 (24%)
Don't know.....	12 (8%)

Other support needs**12.1 Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?**

Yes	77 (49%)
No.....	79 (51%)

12.2 If you have a disability, are you getting the support you need?

Yes	24 (16%)
No.....	49 (32%)
Don't have a disability	79 (52%)

12.3 Have you been on an ACCT in this prison?

Yes	42 (29%)
No.....	105 (71%)

12.4 If you have been on an ACCT in this prison, did you feel cared for by staff?

Yes	12 (8%)
No.....	28 (19%)
Have not been on an ACCT in this prison.....	105 (72%)

12.5 How easy or difficult is it for you to speak to a Listener, if you need to?

Very easy	15 (10%)
Quite easy	42 (27%)
Quite difficult	21 (14%)
Very difficult	21 (14%)
Don't know.....	51 (33%)
No Listeners at this prison	4 (3%)

Alcohol and drugs

13.1	Did you have an alcohol problem when you came into this prison?	
	Yes	36 (23%)
	No.....	120 (77%)
13.2	Have you been helped with your alcohol problem in this prison?	
	Yes	15 (10%)
	No.....	21 (13%)
	Did not / do not have an alcohol problem	120 (77%)
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	52 (34%)
	No.....	103 (66%)
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	28 (18%)
	No.....	125 (82%)
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	20 (13%)
	No.....	135 (87%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	20 (14%)
	No.....	35 (24%)
	Did not / do not have a drug problem.....	88 (62%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy.....	57 (37%)
	Quite easy.....	22 (14%)
	Quite difficult	7 (5%)
	Very difficult	10 (7%)
	Don't know.....	57 (37%)
13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy.....	15 (10%)
	Quite easy.....	17 (11%)
	Quite difficult	15 (10%)
	Very difficult	25 (16%)
	Don't know.....	83 (54%)

Safety

14.1	Have you ever felt unsafe here?	
	Yes	101 (63%)
	No.....	59 (37%)
14.2	Do you feel unsafe now?	
	Yes	49 (32%)
	No.....	106 (68%)

- I4.3 Have you experienced any of the following types of bullying / victimisation from other prisoners here? (Please tick all that apply.)**
- | | |
|---|----------|
| Verbal abuse..... | 57 (38%) |
| Threats or intimidation..... | 58 (39%) |
| Physical assault..... | 32 (21%) |
| Sexual assault | 4 (3%) |
| Theft of canteen or property..... | 45 (30%) |
| Other bullying / victimisation | 34 (23%) |
| Not experienced any of these from prisoners here..... | 72 (48%) |
- I4.4 If you were being bullied / victimised by other prisoners here, would you report it?**
- | | |
|-----------|----------|
| Yes | 58 (40%) |
| No..... | 88 (60%) |
- I4.5 Have you experienced any of the following types of bullying / victimisation from staff here? (Please tick all that apply.)**
- | | |
|---|----------|
| Verbal abuse..... | 66 (46%) |
| Threats or intimidation..... | 47 (33%) |
| Physical assault..... | 25 (17%) |
| Sexual assault | 5 (3%) |
| Theft of canteen or property..... | 19 (13%) |
| Other bullying / victimisation | 33 (23%) |
| Not experienced any of these from staff here..... | 68 (47%) |
- I4.6 If you were being bullied / victimised by staff here, would you report it?**
- | | |
|-----------|----------|
| Yes | 71 (49%) |
| No..... | 74 (51%) |

Behaviour management

- I5.1 Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?**
- | | |
|--|----------|
| Yes | 51 (34%) |
| No..... | 72 (47%) |
| Don't know what the incentives / rewards are | 29 (19%) |
- I5.2 Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?**
- | | |
|-------------------------------|----------|
| Yes | 39 (25%) |
| No..... | 77 (50%) |
| Don't know..... | 15 (10%) |
| Don't know what this is | 24 (15%) |
- I5.3 Have you been physically restrained by staff in this prison in the last 6 months?**
- | | |
|-----------|-----------|
| Yes | 28 (18%) |
| No..... | 128 (82%) |
- I5.4 If you have been restrained by staff in this prison in the last 6 months, did anyone come and talk to you about it afterwards?**
- | | |
|--|-----------|
| Yes | 5 (3%) |
| No..... | 19 (12%) |
| Don't remember | 3 (2%) |
| Not been restrained here in last 6 months..... | 129 (83%) |

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

Yes..... 16 (10%)
 No..... 137 (90%)

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?	8 (57%)	6 (43%)
Could you shower every day?	6 (40%)	9 (60%)
Could you go outside for exercise every day?	7 (47%)	8 (53%)
Could you use the phone every day (if you had credit)?	4 (27%)	11 (73%)

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	73 (50%)	34 (23%)	36 (25%)	3 (2%)
Vocational or skills training	40 (29%)	37 (27%)	52 (38%)	7 (5%)
Prison job	54 (37%)	67 (46%)	23 (16%)	3 (2%)
Voluntary work outside of the prison	4 (3%)	28 (20%)	57 (40%)	52 (37%)
Paid work outside of the prison	2 (1%)	28 (20%)	55 (39%)	55 (39%)

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

	Yes, will help	No, won't help	Not done this
Education	52 (38%)	36 (26%)	49 (36%)
Vocational or skills training	39 (30%)	25 (19%)	67 (51%)
Prison job	36 (26%)	59 (43%)	41 (30%)
Voluntary work outside of the prison	13 (10%)	17 (13%)	96 (76%)
Paid work outside of the prison	16 (13%)	14 (11%)	97 (76%)

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

Yes..... 58 (39%)
 No..... 70 (48%)
 Not applicable (e.g. if you are retired, sick or on remand) 19 (13%)

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

Yes..... 19 (13%)
 No..... 127 (87%)

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

Yes..... 16 (84%)
 No..... 1 (5%)
 Don't know what my objectives or targets are..... 2 (11%)

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

Yes..... 11 (58%)
 No..... 6 (32%)
 Don't know what my objectives or targets are..... 2 (11%)

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	7 (41%)	2 (12%)	8 (47%)
Other programmes	5 (31%)	3 (19%)	8 (50%)
One to one work	8 (47%)	2 (12%)	7 (41%)
Being on a specialist unit	3 (19%)	1 (6%)	12 (75%)
ROTL - day or overnight release	1 (6%)	2 (13%)	13 (81%)

Preparation for release

18.1 Do you expect to be released in the next 3 months?

Yes	47 (31%)
No.....	58 (38%)
Don't know.....	46 (30%)

18.2 How close is this prison to your home area or intended release address?

Very near.....	15 (33%)
Quite near.....	11 (24%)
Quite far.....	9 (20%)
Very far.....	10 (22%)

18.3 Is anybody helping you to prepare for your release (e.g. a home probation officer, responsible officer, case worker)?

Yes.....	19 (40%)
No.....	28 (60%)

18.4 Are you getting help to sort out the following things for when you are released?

	Yes, I'm getting help with this	No, but I need help with this	No, and I don't need help with this
Finding accommodation	7 (15%)	25 (54%)	14 (30%)
Getting employment	3 (7%)	27 (60%)	15 (33%)
Setting up education or training	5 (12%)	21 (50%)	16 (38%)
Arranging benefits	6 (13%)	25 (56%)	14 (31%)
Sorting out finances	4 (9%)	26 (59%)	14 (32%)
Support for drug or alcohol problems	7 (16%)	21 (48%)	16 (36%)
Health / mental health support	6 (14%)	22 (51%)	15 (35%)
Social care support	3 (7%)	23 (55%)	16 (38%)
Getting back in touch with family or friends	5 (11%)	21 (48%)	18 (41%)

More about you

19.1 Do you have children under the age of 18?

Yes.....	74 (49%)
No.....	76 (51%)

19.2 Are you a UK / British citizen?

Yes.....	132 (87%)
No.....	19 (13%)

19.3 Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?

Yes.....	12 (8%)
No.....	139 (92%)

19.4	Have you ever been in the armed services (e.g. army, navy, air force)?	
	Yes.....	9 (6%)
	No.....	141 (94%)
19.5	What is your gender?	
	Male.....	149 (98%)
	Female.....	2 (1%)
	Non-binary.....	1 (1%)
	Other	0 (0%)
19.6	How would you describe your sexual orientation?	
	Straight / heterosexual.....	145 (97%)
	Gay / lesbian / homosexual.....	1 (1%)
	Bisexual.....	2 (1%)
	Other	2 (1%)
19.7	Do you identify as transgender or transsexual?	
	Yes.....	5 (3%)
	No.....	146 (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.....	61 (43%)
	Made no difference	60 (42%)

HMP Nottingham 2020

Comparison of survey responses from different residential locations

In this table responses from the Integrated Drug Treatment System unit (IDTS; A 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
	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

Integrated Drug Treatment System unit (A Wing)	Rest of the establishment
34	130

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	9%	9%
	Are you 25 years of age or younger?	24%	32%
	Are you 50 years of age or older?	6%	14%
	Are you 70 years of age or older?	0%	2%
1.3	Are you from a black and minority ethnic group?	18%	28%
1.4	Have you been in this prison for less than 6 months?	71%	58%
1.5	Are you currently serving a sentence?	55%	53%
	Are you on recall?	27%	18%
1.6	Is your sentence less than 12 months?	15%	14%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	6%	4%
7.1	Are you Muslim?	3%	15%
11.3	Do you have any mental health problems?	72%	57%
12.1	Do you consider yourself to have a disability?	63%	46%
19.1	Do you have any children under the age of 18?	63%	46%
19.2	Are you a foreign national?	0%	16%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	7%	8%
19.4	Have you ever been in the armed services?	0%	8%
19.5	Is your gender female or non-binary?	0%	3%
19.6	Are you homosexual, bisexual or other sexual orientation?	0%	4%
19.7	Do you identify as transgender or transsexual?	3%	3%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	0%	12%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	18%	35%
2.3	When you were searched in reception, was this done in a respectful way?	74%	81%
2.4	Overall, were you treated very / quite well in reception?	56%	80%

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Number of completed questionnaires returned

Integrated Drug Treatment System unit (A Wing)	Rest of the establishment
34	130

2.5	When you first arrived, did you have any problems?	91%	88%
2.5	Did you have problems with:		
	- Getting phone numbers?	53%	52%
	- Contacting family?	50%	56%
	- Arranging care for children or other dependents?	0%	5%
	- Contacting employers?	3%	12%
	- Money worries?	32%	32%
	- Housing worries?	27%	27%
	- Feeling depressed?	65%	56%
	- Feeling suicidal?	21%	28%
	- Other mental health problems?	44%	38%
	- Physical health problems?	41%	22%
	- Drugs or alcohol (e.g. withdrawal)?	32%	22%
	- Getting medication?	50%	26%
	- Needing protection from other prisoners?	12%	15%
	- Lost or delayed property?	9%	21%
	For those who had any problems when they first arrived:		
2.6	Did staff help you to deal with these problems?	20%	23%
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	69%	67%
	- Toiletries / other basic items?	66%	56%
	- A shower?	28%	32%
	- A free phone call?	41%	66%
	- Something to eat?	78%	80%
	- The chance to see someone from health care?	63%	62%
	- The chance to talk to a Listener or Samaritans?	25%	22%
	- Support from another prisoner (e.g. Insider or buddy)?	16%	24%
	- None of these?	13%	6%
3.2	On your first night in this prison, was your cell very / quite clean?	27%	38%
3.3	Did you feel safe on your first night here?	65%	57%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	33%	39%
	- Free PIN phone credit?	55%	47%
	- Numbers put on your PIN phone?	22%	32%
3.5	Have you had an induction at this prison?	82%	86%
	For those who have had an induction:		
3.5	Did your induction cover everything you needed to know about this prison?	41%	40%

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Number of completed questionnaires returned

Integrated Drug Treatment System unit (A Wing)	Rest of the establishment
34	130

ON THE WING			
4.1	Are you in a cell on your own?	44%	41%
4.2	Is your cell call bell normally answered within 5 minutes?	18%	28%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	19%	22%
	- Can you shower every day?	75%	90%
	- Do you have clean sheets every week?	22%	25%
	- Do you get cell cleaning materials every week?	23%	45%
	- Is it normally quiet enough for you to relax or sleep at night?	36%	33%
	- Can you get your stored property if you need it?	10%	20%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	27%	61%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	33%	27%
5.2	Do you get enough to eat at meal-times always / most of the time?	15%	34%
5.3	Does the shop / canteen sell the things that you need?	78%	58%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	66%	66%
6.2	Are there any staff here you could turn to if you had a problem?	67%	79%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	39%	36%
6.4	Do you have a personal officer?	73%	82%
For those who have a personal officer:			
6.4	Is your personal or named officer very / quite helpful?	29%	52%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	6%	7%
6.6	Do you feel that you are treated as an individual in this prison?	32%	41%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	39%	50%
	If so, do things sometimes change?	42%	35%
FAITH			
7.1	Do you have a religion?	65%	74%
For those who have a religion:			
7.2	Are your religious beliefs respected here?	52%	58%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	62%	65%
7.4	Are you able to attend religious services, if you want to?	76%	81%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	23%	24%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	59%	61%
8.3	Are you able to use a phone every day (if you have credit)?	94%	92%
8.4	Is it very / quite easy for your family and friends to get here?	34%	52%
8.5	Do you get visits from family/friends once a week or more?	13%	28%
For those who get visits:			
8.6	Do visits usually start and finish on time?	67%	31%
8.7	Are your visitors usually treated respectfully by staff?	67%	63%

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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

Integrated Drug Treatment System unit (A Wing)	Rest of the establishment
34	130

TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	94%	81%
For those who know what the unlock and lock-up times are supposed to be:			
9.1	Are these times usually kept to?	37%	56%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	68%	32%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	0%	3%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	87%	68%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	0%	2%
9.4	Do you have time to do domestics more than 5 days in a typical week?	38%	42%
9.5	Do you get association more than 5 days in a typical week, if you want it?	63%	60%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	38%	47%
9.7	Do you typically go to the gym twice a week or more?	28%	40%
9.8	Do you typically go to the library once a week or more?	23%	49%
For those who use the library:			
9.9	Does the library have a wide enough range of materials to meet your needs?	31%	46%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	56%	60%
For those who have made an application:			
10.2	Are applications usually dealt with fairly?	50%	39%
	Are applications usually dealt with within 7 days?	48%	43%
10.3	Is it easy for you to make a complaint?	44%	48%
For those who have made a complaint:			
10.4	Are complaints usually dealt with fairly?	26%	26%
	Are complaints usually dealt with within 7 days?	21%	22%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	52%	36%

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

Integrated Drug Treatment System unit (A Wing)	Rest of the establishment
34	130

For those who need it, is it easy to:			
10.6	Communicate with your solicitor or legal representative?	41%	49%
	Attend legal visits?	50%	59%
	Get bail information?	17%	20%
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?	76%	61%
HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	13%	27%
	- Nurse?	33%	43%
	- Dentist?	3%	18%
	- Mental health workers?	23%	25%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	37%	47%
	- Nurse?	52%	51%
	- Dentist?	10%	31%
	- Mental health workers?	23%	36%
11.3	Do you have any mental health problems?	72%	57%
For those who have mental health problems:			
11.4	Have you been helped with your mental health problems in this prison?	48%	43%
11.5	Do you think the overall quality of the health services here is very / quite good?	35%	41%
OTHER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	63%	46%
For those who have a disability:			
12.2	Are you getting the support you need?	26%	35%
12.3	Have you been on an ACCT in this prison?	32%	28%
For those who have been on an ACCT:			
12.4	Did you feel cared for by staff?	38%	28%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	41%	36%
ALCOHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	24%	23%
For those who had / have an alcohol problem:			
13.2	Have you been helped with your alcohol problem in this prison?	71%	35%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	59%	28%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	28%	16%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	17%	12%
For those who had / have a drug problem:			
13.6	Have you been helped with your drug problem in this prison?	39%	35%
13.7	Is it very / quite easy to get illicit drugs in this prison?	70%	47%
13.8	Is it very / quite easy to get alcohol in this prison?	24%	19%

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Number of completed questionnaires returned

Integrated Drug Treatment System unit (A Wing)	Rest of the establishment
34	130

SAFETY			
14.1	Have you ever felt unsafe here?	63%	63%
14.2	Do you feel unsafe now?	41%	30%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	48%	35%
	- Threats or intimidation?	41%	38%
	- Physical assault?	24%	21%
	- Sexual assault?	3%	3%
	- Theft of canteen or property?	31%	30%
	- Other bullying / victimisation?	21%	23%
	- Not experienced any of these from prisoners here	45%	49%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	45%	39%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	57%	44%
	- Threats or intimidation?	50%	29%
	- Physical assault?	36%	13%
	- Sexual assault?	4%	4%
	- Theft of canteen or property?	14%	13%
	- Other bullying / victimisation?	29%	22%
	- Not experienced any of these from staff here	32%	50%
14.6	If you were being bullied / victimised by staff here, would you report it?	48%	49%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	10%	39%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	13%	28%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	23%	16%
For those who have been restrained in the last 6 months:			
15.4	Did anyone come and talk to you about it afterwards?	0%	25%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	17%	8%
For those who have spent one or more nights in the segregation unit in the last 6 months:			
15.6	Were you treated well by segregation staff?	60%	50%
	Could you shower every day?	50%	30%
	Could you go outside for exercise every day?	75%	30%
	Could you use the phone every day (if you had credit)?	50%	10%

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Number of completed questionnaires returned

Integrated Drug Treatment System unit (A Wing)	Rest of the establishment
34	130

EDUCATION, SKILLS AND WORK			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	37%	53%
	- Vocational or skills training?	24%	30%
	- Prison job?	28%	39%
	- Voluntary work outside of the prison?	4%	3%
	- Paid work outside of the prison?	0%	2%
16.2	In this prison, have you done the following activities:		
	- Education?	48%	68%
	- Vocational or skills training?	48%	49%
	- Prison job?	70%	69%
	- Voluntary work outside of the prison?	29%	23%
	- Paid work outside of the prison?	25%	24%
For those who have done the following activities, do you think they will help you on release:			
	- Education?	46%	61%
	- Vocational or skills training?	42%	65%
	- Prison job?	42%	37%
	- Voluntary work outside of the prison?	29%	48%
	- Paid work outside of the prison?	33%	58%
16.3	Do staff encourage you to attend education, training or work?	35%	47%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	11%	14%
For those who have a custody plan:			
17.2	Do you understand what you need to do to achieve your objectives or targets?	67%	88%
17.3	Are staff helping you to achieve your objectives or targets?	67%	56%
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	67%	50%
	- Other programmes?	33%	54%
	- One to one work?	67%	57%
	- Been on a specialist unit?	0%	31%
	- ROTL - day or overnight release?	0%	23%
For those who have done the following, did they help you to achieve your objectives or targets:			
	- Offending behaviour programmes?	100%	71%
	- Other programmes?	100%	57%
	- One to one work?	100%	75%
	- Being on a specialist unit?		75%
	- ROTL - day or overnight release?		33%

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Number of completed questionnaires returned

Integrated Drug Treatment System unit (A Wing)	Rest of the establishment
34	130

PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	44%	28%
For those who expect to be released in the next 3 months:			
18.2	Is this prison very / quite near to your home area or intended release address?	58%	56%
18.3	Is anybody helping you to prepare for your release?	33%	41%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	83%	64%
	- Getting employment?	75%	63%
	- Setting up education or training?	73%	57%
	- Arranging benefits?	75%	66%
	- Sorting out finances?	64%	69%
	- Support for drug or alcohol problems?	83%	55%
	- Health / mental Health support?	82%	58%
	- Social care support?	70%	58%
	- Getting back in touch with family or friends?	73%	53%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	10%	24%
	- Getting employment?	11%	5%
	- Setting up education or training?	25%	12%
	- Arranging benefits?	11%	19%
	- Sorting out finances?	14%	9%
	- Support for drug or alcohol problems?	10%	29%
	- Health / mental Health support?	11%	22%
	- Social care support?	14%	6%
	- Getting back in touch with family or friends?	13%	18%
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?	37%	45%

HMP Nottingham 2020

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
43	118	19	137

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	42%	27%	47%	29%
	Are you 50 years of age or older?	5%	16%	0%	14%
1.3	Are you from a black and minority ethnic group?			89%	18%
7.1	Are you Muslim?	40%	2%	58%	60%
11.3	Do you have any mental health problems?	44%	66%		
12.1	Do you consider yourself to have a disability?	30%	58%	32%	52%
19.2	Are you a foreign national?	18%	10%	29%	10%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	11%	7%	9%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	68%	83%	68%	82%
2.4	Overall, were you treated very / quite well in reception?	68%	76%	68%	75%
2.5	When you first arrived, did you have any problems?	88%	89%	83%	89%
For those who had any problems when they first arrived:					
2.6	Did staff help you to deal with these problems?	13%	26%	25%	24%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	55%	59%	53%	60%
3.5	Have you had an induction at this prison?	90%	82%	89%	84%
For those who have had an induction:					
3.5	Did your induction cover everything you needed to know about this prison?	32%	42%	50%	39%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	29%	25%	47%	22%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	33%	17%	37%	18%
	- Can you shower every day?	83%	89%	84%	87%
	- Do you have clean sheets every week?	32%	21%	37%	22%
	- Do you get cell cleaning materials every week?	40%	41%	42%	41%
	- Is it normally quiet enough for you to relax or sleep at night?	41%	31%	42%	33%
	- Can you get your stored property if you need it?	17%	18%	32%	16%

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Black and minority ethnic	White	Muslim	Non-Muslim
43	118	19	137

Number of completed questionnaires returned

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	28%	32%	42%	30%
5.3	Does the shop / canteen sell the things that you need?	51%	66%	59%	62%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	56%	69%	58%	67%
6.2	Are there any staff here you could turn to if you had a problem?	76%	76%	78%	77%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	28%	40%	37%	36%
6.6	Do you feel that you are treated as an individual in this prison?	29%	41%	17%	42%
FAITH					
For those who have a religion:					
7.2	Are your religious beliefs respected here?	58%	57%	63%	58%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	64%	66%	79%	63%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	21%	23%	22%	25%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	61%	61%	53%	63%
8.3	Are you able to use a phone every day (if you have credit)?	91%	93%	90%	93%
For those who get visits:					
8.7	Are your visitors usually treated respectfully by staff?	62%	64%	75%	63%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	45%	36%	39%	39%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	2%	3%	0%	3%
For those who use the library:					
9.9	Does the library have a wide enough range of materials to meet your needs?	37%	47%	38%	46%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	63%	58%	79%	57%
For those who have made an application:					
10.2	Are applications usually dealt with fairly?	32%	46%	47%	41%
10.3	Is it easy for you to make a complaint?	37%	51%	42%	49%
For those who have made a complaint:					
10.4	Are complaints usually dealt with fairly?	15%	32%	30%	26%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	44%	37%	43%	39%

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
43	118	19	137

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	26%	25%
	- Nurse?	49%	40%
	- Dentist?	17%	15%
	- Mental health workers?	19%	29%
For those who have mental health problems:			
11.4	Have you been helped with your mental health problems in this prison?	21%	51%
11.5	Do you think the overall quality of the health services here is very / quite good?	33%	43%
OTHER SUPPORT NEEDS			
For those who have a disability:			
12.2	Are you getting the support you need?	27%	34%
SAFETY			
14.1	Have you ever felt unsafe here?	58%	66%
14.2	Do you feel unsafe now?	30%	32%
14.3	Not experienced bullying / victimisation by other prisoners	49%	49%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	39%	41%
14.5	Not experienced bullying / victimisation by members of staff	40%	51%
14.6	If you were being bullied / victimised by staff here, would you report it?	50%	50%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	30%	34%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	21%	28%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	24%	16%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	14%	9%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	49%	43%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	18%	12%
For those who have a custody plan:			
17.3	Are staff helping you to achieve your objectives or targets?	43%	67%
PREPARATION FOR RELEASE			
For those who expect to be released in the next 3 months:			
18.3	Is anybody helping you to prepare for your release?	46%	37%
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?	46%	43%

44%	23%
61%	39%
17%	16%
26%	26%
27%	47%
42%	40%
40%	34%
53%	65%
21%	32%
53%	47%
40%	41%
44%	48%
57%	50%
41%	33%
33%	24%
17%	17%
6%	11%
57%	46%
29%	11%
60%	57%
75%	39%
38%	43%

HMP Nottingham 2020

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

- responses of foreign national prisoners are compared with those of UK / British national 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

Foreign national	UK / British national
19	132

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 25 years of age?	47%	28%
	Are you 50 years of age or older?	5%	15%
1.3	Are you from a black and minority ethnic group?	39%	24%
7.1	Are you Muslim?	24%	8%
11.3	Do you have any mental health problems?	17%	64%
12.1	Do you consider yourself to have a disability?	11%	54%
19.2	Are you a foreign national?		
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	6%	8%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	88%	79%
2.4	Overall, were you treated very / quite well in reception?	71%	76%
2.5	When you first arrived, did you have any problems?	84%	90%
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	27%	22%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	50%	63%
3.5	Have you had an induction at this prison?	83%	84%
<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	60%	35%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	56%	22%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	35%	18%
	- Can you shower every day?	94%	85%
	- Do you have clean sheets every week?	31%	25%
	- Do you get cell cleaning materials every week?	53%	38%
	- Is it normally quiet enough for you to relax or sleep at night?	47%	34%
	- Can you get your stored property if you need it?	13%	17%

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Number of completed questionnaires returned

Foreign national	UK / British national
19	132

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	33%	29%
5.3	Does the shop / canteen sell the things that you need?	77%	61%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	67%	65%
6.2	Are there any staff here you could turn to if you had a problem?	78%	77%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	44%	35%
6.6	Do you feel that you are treated as an individual in this prison?	41%	39%
FAITH			
For those who have a religion:			
7.2	Are your religious beliefs respected here?	82%	53%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	65%	66%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	22%	23%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	50%	66%
8.3	Are you able to use a phone every day (if you have credit)?	94%	92%
For those who get visits:			
8.7	Are your visitors usually treated respectfully by staff?	86%	59%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	28%	41%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	0%	3%
For those who use the library:			
9.9	Does the library have a wide enough range of materials to meet your needs?	21%	46%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	56%	60%
For those who have made an application:			
10.2	Are applications usually dealt with fairly?	33%	41%
10.3	Is it easy for you to make a complaint?	33%	51%
For those who have made a complaint:			
10.4	Are complaints usually dealt with fairly?	0%	28%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	22%	41%

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Number of completed questionnaires returned

Foreign national	UK / British national
19	132

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	25%	25%
	- Nurse?	29%	44%
	- Dentist?	0%	17%
	- Mental health workers?	6%	29%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	0%	47%
11.5	Do you think the overall quality of the health services here is very / quite good?	39%	40%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	0%	34%
SAFETY			
14.1	Have you ever felt unsafe here?	44%	64%
14.2	Do you feel unsafe now?	17%	34%
14.3	Not experienced bullying / victimisation by other prisoners	56%	47%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	69%	37%
14.5	Not experienced bullying / victimisation by members of staff	82%	43%
14.6	If you were being bullied / victimised by staff here, would you report it?	69%	47%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	24%	34%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	11%	26%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	6%	21%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	0%	12%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	39%	46%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	13%	13%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	100%	56%
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?	33%	43%
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?	71%	40%

HMP Nottingham 2020

Comparison of survey responses from different residential locations

In this table responses from Vulnerable prisoner unit (G wing) are compared with those from the rest of the establishment.

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Number of completed questionnaires returned

Vulnerable Prisoner Unit (G wing)	Rest of the establishment
30	134

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	3%	10%
	Are you 25 years of age or younger?	23%	32%
	Are you 50 years of age or older?	37%	7%
	Are you 70 years of age or older?	7%	0%
1.3	Are you from a black and minority ethnic group?	17%	29%
1.4	Have you been in this prison for less than 6 months?	52%	63%
1.5	Are you currently serving a sentence?	63%	51%
	Are you on recall?	17%	21%
1.6	Is your sentence less than 12 months?	7%	16%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	3%	5%
7.1	Are you Muslim?	13%	12%
11.3	Do you have any mental health problems?	70%	58%
12.1	Do you consider yourself to have a disability?	69%	45%
19.1	Do you have any children under the age of 18?	31%	54%
19.2	Are you a foreign national?	7%	14%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	7%	8%
19.4	Have you ever been in the armed services?	4%	7%
19.5	Is your gender female non-binary?	4%	2%
19.6	Are you homosexual, bisexual or other sexual orientation?	8%	2%
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?	3%	11%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	30%	32%
2.3	When you were searched in reception, was this done in a respectful way?	83%	79%
2.4	Overall, were you treated very / quite well in reception?	80%	74%

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Vulnerable Prisoner Unit (G wing)	Rest of the establishment
30	134

Number of completed questionnaires returned

2.5	When you first arrived, did you have any problems?	90%	89%
2.5	Did you have problems with:		
	- Getting phone numbers?	55%	51%
	- Contacting family?	55%	54%
	- Arranging care for children or other dependents?	0%	5%
	- Contacting employers?	17%	8%
	- Money worries?	38%	31%
	- Housing worries?	31%	26%
	- Feeling depressed?	76%	53%
	- Feeling suicidal?	45%	23%
	- Other mental health problems?	35%	40%
	- Physical health problems?	35%	24%
	- Drugs or alcohol (e.g. withdrawal)?	14%	26%
	- Getting medication?	31%	31%
	- Needing protection from other prisoners?	21%	13%
	- Lost or delayed property?	21%	18%
	For those who had any problems when they first arrived:		
2.6	Did staff help you to deal with these problems?	44%	18%
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	59%	70%
	- Toiletries / other basic items?	45%	61%
	- A shower?	17%	34%
	- A free phone call?	72%	58%
	- Something to eat?	79%	80%
	- The chance to see someone from health care?	66%	62%
	- The chance to talk to a Listener or Samaritans?	24%	22%
	- Support from another prisoner (e.g. Insider or buddy)?	31%	20%
	- None of these?	3%	8%
3.2	On your first night in this prison, was your cell very / quite clean?	41%	34%
3.3	Did you feel safe on your first night here?	47%	61%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	40%	37%
	- Free PIN phone credit?	52%	48%
	- Numbers put on your PIN phone?	33%	29%
3.5	Have you had an induction at this prison?	71%	88%
	For those who have had an induction:		
3.5	Did your induction cover everything you needed to know about this prison?	40%	40%

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Number of completed questionnaires returned

Vulnerable Prisoner Unit (G wing)	Rest of the establishment
30	134

ON THE WING			
4.1	Are you in a cell on your own?	47%	41%
4.2	Is your cell call bell normally answered within 5 minutes?	40%	23%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	10%	24%
	- Can you shower every day?	90%	86%
	- Do you have clean sheets every week?	7%	29%
	- Do you get cell cleaning materials every week?	48%	39%
	- Is it normally quiet enough for you to relax or sleep at night?	20%	37%
	- Can you get your stored property if you need it?	21%	17%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	87%	47%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	45%	25%
5.2	Do you get enough to eat at meal-times always / most of the time?	53%	25%
5.3	Does the shop / canteen sell the things that you need?	66%	61%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	59%	68%
6.2	Are there any staff here you could turn to if you had a problem?	93%	73%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	53%	33%
6.4	Do you have a personal officer?	93%	78%
For those who have a personal officer:			
6.4	Is your personal or named officer very / quite helpful?	56%	45%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	4%	8%
6.6	Do you feel that you are treated as an individual in this prison?	52%	37%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	47%	48%
	If so, do things sometimes change?	36%	36%
FAITH			
7.1	Do you have a religion?	73%	72%
For those who have a religion:			
7.2	Are your religious beliefs respected here?	55%	57%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	75%	62%
7.4	Are you able to attend religious services, if you want to?	75%	81%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	39%	20%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	59%	61%
8.3	Are you able to use a phone every day (if you have credit)?	83%	95%
8.4	Is it very / quite easy for your family and friends to get here?	40%	51%
8.5	Do you get visits from family/friends once a week or more?	17%	27%
For those who get visits:			
8.6	Do visits usually start and finish on time?	39%	36%
8.7	Are your visitors usually treated respectfully by staff?	69%	62%

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Vulnerable Prisoner Unit (G wing)	Rest of the establishment
30	134

TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	79%	85%
For those who know what the unlock and lock-up times are supposed to be:			
9.1	Are these times usually kept to?	46%	53%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	24%	42%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	2%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	59%	75%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	3%	2%
9.4	Do you have time to do domestics more than 5 days in a typical week?	52%	39%
9.5	Do you get association more than 5 days in a typical week, if you want it?	77%	57%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	55%	43%
9.7	Do you typically go to the gym twice a week or more?	28%	40%
9.8	Do you typically go to the library once a week or more?	50%	43%
For those who use the library:			
9.9	Does the library have a wide enough range of materials to meet your needs?	64%	40%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	59%	59%
For those who have made an application:			
10.2	Are applications usually dealt with fairly?	33%	43%
	Are applications usually dealt with within 7 days?	41%	45%
10.3	Is it easy for you to make a complaint?	57%	45%
For those who have made a complaint:			
10.4	Are complaints usually dealt with fairly?	27%	26%
	Are complaints usually dealt with within 7 days?	27%	20%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	40%	39%

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Vulnerable Prisoner Unit (G wing)	Rest of the establishment
30	134

For those who need it, is it easy to:			
10.6	Communicate with your solicitor or legal representative?	58%	45%
	Attend legal visits?	65%	56%
	Get bail information?	24%	18%
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?	40%	69%
HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	25%	24%
	- Nurse?	50%	39%
	- Dentist?	33%	11%
	- Mental health workers?	39%	22%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	55%	43%
	- Nurse?	62%	49%
	- Dentist?	31%	25%
	- Mental health workers?	39%	32%
11.3	Do you have any mental health problems?	70%	58%
For those who have mental health problems:			
11.4	Have you been helped with your mental health problems in this prison?	47%	43%
11.5	Do you think the overall quality of the health services here is very / quite good?	46%	38%
OTHER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	69%	45%
For those who have a disability:			
12.2	Are you getting the support you need?	50%	27%
12.3	Have you been on an ACCT in this prison?	42%	26%
For those who have been on an ACCT:			
12.4	Did you feel cared for by staff?	27%	31%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	41%	36%
ALCOHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	21%	24%
For those who had / have an alcohol problem:			
13.2	Have you been helped with your alcohol problem in this prison?	17%	47%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	24%	36%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	7%	21%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	7%	14%
For those who had / have a drug problem:			
13.6	Have you been helped with your drug problem in this prison?	43%	35%
13.7	Is it very / quite easy to get illicit drugs in this prison?	38%	55%
13.8	Is it very / quite easy to get alcohol in this prison?	14%	22%

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Vulnerable Prisoner Unit (G wing)	Rest of the establishment
30	134

SAFETY			
14.1	Have you ever felt unsafe here?	79%	59%
14.2	Do you feel unsafe now?	29%	33%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	45%	36%
	- Threats or intimidation?	52%	35%
	- Physical assault?	24%	21%
	- Sexual assault?	3%	3%
	- Theft of canteen or property?	31%	30%
	- Other bullying / victimisation?	31%	21%
	- Not experienced any of these from prisoners here	35%	52%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	56%	36%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	50%	45%
	- Threats or intimidation?	42%	31%
	- Physical assault?	12%	19%
	- Sexual assault?	0%	4%
	- Theft of canteen or property?	8%	15%
	- Other bullying / victimisation?	31%	21%
	- Not experienced any of these from staff here	46%	47%
14.6	If you were being bullied / victimised by staff here, would you report it?	56%	47%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	55%	29%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	41%	22%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	7%	20%
For those who have been restrained in the last 6 months:			
15.4	Did anyone come and talk to you about it afterwards?	0%	21%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	10%	10%
For those who have spent one or more nights in the segregation unit in the last 6 months:			
15.6	Were you treated well by segregation staff?	100%	46%
	Could you shower every day?	33%	36%
	Could you go outside for exercise every day?	33%	46%
	Could you use the phone every day (if you had credit)?	33%	18%

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Vulnerable Prisoner Unit (G wing)	Rest of the establishment
30	134

EDUCATION, SKILLS AND WORK			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	37%	53%
	- Vocational or skills training?	23%	30%
	- Prison job?	50%	33%
	- Voluntary work outside of the prison?	4%	3%
	- Paid work outside of the prison?	4%	1%
16.2	In this prison, have you done the following activities:		
	- Education?	54%	66%
	- Vocational or skills training?	31%	53%
	- Prison job?	82%	67%
	- Voluntary work outside of the prison?	20%	25%
	- Paid work outside of the prison?	20%	25%
For those who have done the following activities, do you think they will help you on release:			
	- Education?	36%	63%
	- Vocational or skills training?	63%	60%
	- Prison job?	32%	40%
	- Voluntary work outside of the prison?	40%	44%
	- Paid work outside of the prison?	60%	52%
16.3	Do staff encourage you to attend education, training or work?	50%	44%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	11%	14%
For those who have a custody plan:			
17.2	Do you understand what you need to do to achieve your objectives or targets?	100%	81%
17.3	Are staff helping you to achieve your objectives or targets?	100%	50%
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	100%	43%
	- Other programmes?	100%	43%
	- One to one work?	100%	50%
	- Been on a specialist unit?	100%	8%
	- ROTL - day or overnight release?	67%	8%
For those who have done the following, did they help you to achieve your objectives or targets:			
	- Offending behaviour programmes?	67%	83%
	- Other programmes?	50%	67%
	- One to one work?	67%	86%
	- Being on a specialist unit?	67%	100%
	- ROTL - day or overnight release?	50%	0%

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Vulnerable Prisoner Unit (G wing)	Rest of the establishment
30	134

PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	19%	33%
For those who expect to be released in the next 3 months:			
18.2	Is this prison very / quite near to your home area or intended release address?	60%	56%
18.3	Is anybody helping you to prepare for your release?	40%	39%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	80%	68%
	- Getting employment?	60%	67%
	- Setting up education or training?	50%	62%
	- Arranging benefits?	60%	69%
	- Sorting out finances?	60%	68%
	- Support for drug or alcohol problems?	25%	67%
	- Health / mental Health support?	60%	65%
	- Social care support?	80%	58%
	- Getting back in touch with family or friends?	40%	61%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	25%	19%
	- Getting employment?	33%	4%
	- Setting up education or training?	50%	13%
	- Arranging benefits?	33%	15%
	- Sorting out finances?	33%	8%
	- Support for drug or alcohol problems?	100%	19%
	- Health / mental Health support?	33%	17%
	- Social care support?	25%	5%
	- Getting back in touch with family or friends?	100%	9%
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?	54%	41%

HMP Nottingham 2020

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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Number of completed questionnaires returned

Mental health problems	No mental health problems	Have a disability	Do not have a disability
91	62	77	79

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	28%	33%	24%	35%
	Are you 50 years of age or older?	9%	16%	18%	6%
1.3	Are you from a black and minority ethnic group?	21%	40%	17%	40%
7.1	Are you Muslim?	13%	14%	8%	17%
11.3	Do you have any mental health problems?			88%	33%
12.1	Do you consider yourself to have a disability?	72%	15%		
19.2	Are you a foreign national?	4%	25%	3%	21%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	11%	5%	10%	5%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	81%	82%	80%	81%
2.4	Overall, were you treated very / quite well in reception?	77%	75%	74%	78%
2.5	When you first arrived, did you have any problems?	90%	89%	92%	86%
For those who had any problems when they first arrived:					
2.6	Did staff help you to deal with these problems?	23%	24%	23%	24%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	54%	68%	50%	68%
3.5	Have you had an induction at this prison?	84%	87%	78%	90%
For those who have had an induction:					
3.5	Did your induction cover everything you needed to know about this prison?	38%	41%	36%	42%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	20%	37%	24%	28%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	14%	30%	12%	27%
	- Can you shower every day?	84%	88%	85%	88%
	- Do you have clean sheets every week?	21%	32%	16%	33%
	- Do you get cell cleaning materials every week?	33%	52%	39%	41%
	- Is it normally quiet enough for you to relax or sleep at night?	26%	49%	24%	46%
	- Can you get your stored property if you need it?	17%	18%	14%	20%

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	Mental health problems	No mental health problems	Have a disability	Do not have a disability
Number of completed questionnaires returned	91	62	77	79

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	28%	32%	32%	27%
5.3	Does the shop / canteen sell the things that you need?	66%	62%	66%	60%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	63%	69%	68%	63%
6.2	Are there any staff here you could turn to if you had a problem?	72%	85%	74%	81%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	36%	38%	34%	39%
6.6	Do you feel that you are treated as an individual in this prison?	33%	48%	33%	43%
FAITH					
For those who have a religion:					
7.2	Are your religious beliefs respected here?	52%	65%	50%	64%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	65%	65%	60%	69%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	26%	19%	19%	28%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	67%	57%	63%	63%
8.3	Are you able to use a phone every day (if you have credit)?	92%	94%	89%	96%
For those who get visits:					
8.7	Are your visitors usually treated respectfully by staff?	65%	57%	61%	63%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	46%	28%	45%	31%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	2%	4%	1%
For those who use the library:					
9.9	Does the library have a wide enough range of materials to meet your needs?	47%	37%	46%	40%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	58%	62%	50%	69%
For those who have made an application:					
10.2	Are applications usually dealt with fairly?	39%	43%	39%	42%
10.3	Is it easy for you to make a complaint?	47%	46%	45%	50%
For those who have made a complaint:					
10.4	Are complaints usually dealt with fairly?	27%	22%	25%	28%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	48%	32%	43%	39%

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Number of completed questionnaires returned

Mental health problems	No mental health problems	Have a disability	Do not have a disability
91	62	77	79

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	20%	32%
	- Nurse?	38%	45%
	- Dentist?	14%	17%
	- Mental health workers?	24%	26%
For those who have mental health problems:			
11.4	Have you been helped with your mental health problems in this prison?	43%	
11.5	Do you think the overall quality of the health services here is very / quite good?	39%	42%
OTHER SUPPORT NEEDS			
For those who have a disability:			
12.2	Are you getting the support you need?	28%	56%
SAFETY			
14.1	Have you ever felt unsafe here?	76%	44%
14.2	Do you feel unsafe now?	40%	18%
14.3	Not experienced bullying / victimisation by other prisoners	37%	64%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	41%	41%
14.5	Not experienced bullying / victimisation by members of staff	38%	60%
14.6	If you were being bullied / victimised by staff here, would you report it?	41%	61%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	28%	44%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	26%	26%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	24%	11%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	14%	7%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	45%	48%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	14%	12%
For those who have a custody plan:			
17.3	Are staff helping you to achieve your objectives or targets?	50%	71%
PREPARATION FOR RELEASE			
For those who expect to be released in the next 3 months:			
18.3	Is anybody helping you to prepare for your release?	43%	37%
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?	42%	45%

25%	25%
38%	43%
20%	12%
25%	27%
43%	48%
39%	41%
33%	
79%	46%
44%	19%
39%	57%
39%	42%
38%	55%
43%	54%
31%	34%
25%	26%
21%	15%
13%	8%
42%	48%
9%	16%
57%	64%
57%	26%
37%	48%

HMP Nottingham 2020
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 Nottingham 2020 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 (29 prisons). Please note that this does not include all local prisons.
- Summary statistics from HMP Nottingham in 2017. Please note that we do not have comparable data for the new questions introduced in September 2017.

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n=number of valid responses to question (HMP Nottingham 2020)

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION						
1.2	Are you under 21 years of age?	<i>n=163</i>	9%	6%	9%	6%
	Are you 25 years of age or younger?	<i>n=163</i>	31%	22%	31%	22%
	Are you 50 years of age or older?	<i>n=163</i>	12%	13%	12%	13%
	Are you 70 years of age or older?	<i>n=163</i>	1%	1%	1%	1%
1.3	Are you from a black and minority ethnic group?	<i>n=161</i>	27%	27%	27%	21%
1.4	Have you been in this prison for less than 6 months?	<i>n=160</i>	61%	61%	61%	71%
1.5	Are you currently serving a sentence?	<i>n=159</i>	54%	69%	54%	79%
	Are you on recall?	<i>n=159</i>	20%	15%	20%	15%
1.6	Is your sentence less than 12 months?	<i>n=159</i>	14%	21%	14%	34%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n=159</i>	4%	3%	4%	5%
7.1	Are you Muslim?	<i>n=156</i>	12%	14%	12%	10%
11.3	Do you have any mental health problems?	<i>n=153</i>	60%	53%	60%	52%
12.1	Do you consider yourself to have a disability?	<i>n=156</i>	49%	41%	49%	42%
19.1	Do you have any children under the age of 18?	<i>n=150</i>	49%	52%	49%	50%
19.2	Are you a foreign national?	<i>n=151</i>	13%	10%	13%	9%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n=151</i>	8%	7%	8%	6%
19.4	Have you ever been in the armed services?	<i>n=150</i>	6%	7%	6%	11%
19.5	Is your gender female or non-binary?	<i>n=152</i>	2%	1%	2%	2%
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n=150</i>	3%	4%	3%	4%
19.7	Do you identify as transgender or transsexual?	<i>n=151</i>	3%	2%	3%	4%
ARRIVAL AND RECEPTION						
2.1	Were you given up-to-date information about this prison before you came here?	<i>n=161</i>	9%	17%	9%	8%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n=161</i>	31%	36%	31%	21%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n=162</i>	80%	78%	80%	73%
2.4	Overall, were you treated very / quite well in reception?	<i>n=161</i>	75%	77%	75%	70%

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2.5	When you first arrived, did you have any problems?	n=163	89%	87%	89%	94%
2.5	Did you have problems with:					
	- Getting phone numbers?	n=163	52%	45%	52%	52%
	- Contacting family?	n=163	54%	46%	54%	49%
	- Arranging care for children or other dependents?	n=163	4%	4%	4%	8%
	- Contacting employers?	n=163	10%	6%	10%	8%
	- Money worries?	n=163	32%	29%	32%	25%
	- Housing worries?	n=163	26%	24%	26%	31%
	- Feeling depressed?	n=163	58%	48%	58%	50%
	- Feeling suicidal?	n=163	26%	18%	26%	25%
	- Other mental health problems?	n=163	39%	30%	39%	29%
	- Physical health problems?	n=163	26%	20%	26%	20%
	- Drugs or alcohol (e.g. withdrawal)?	n=163	24%	25%	24%	28%
	- Getting medication?	n=163	31%	30%	31%	32%
	- Needing protection from other prisoners?	n=163	14%	11%	14%	14%
	- Lost or delayed property?	n=163	18%	21%	18%	21%
	For those who had any problems when they first arrived:					
2.6	Did staff help you to deal with these problems?	n=142	23%	32%	23%	26%
FIRST NIGHT AND INDUCTION						
3.1	Before you were locked up on your first night, were you offered:					
	- Tobacco or nicotine replacement?	n=158	67%	71%	67%	73%
	- Toiletries / other basic items?	n=158	58%	53%	58%	57%
	- A shower?	n=158	31%	26%	31%	45%
	- A free phone call?	n=158	61%	49%	61%	59%
	- Something to eat?	n=158	79%	76%	79%	73%
	- The chance to see someone from health care?	n=158	62%	62%	62%	65%
	- The chance to talk to a Listener or Samaritans?	n=158	22%	25%	22%	20%
	- Support from another prisoner (e.g. Insider or buddy)?	n=158	22%	22%	22%	20%
	- None of these?	n=158	7%	6%	7%	5%
3.2	On your first night in this prison, was your cell very / quite clean?	n=162	35%	31%	35%	16%
3.3	Did you feel safe on your first night here?	n=162	58%	63%	58%	56%
3.4	In your first few days here, did you get:					
	- Access to the prison shop / canteen?	n=158	37%	32%	37%	31%
	- Free PIN phone credit?	n=160	48%	56%	48%	47%
	- Numbers put on your PIN phone?	n=154	31%	36%	31%	27%
3.5	Have you had an induction at this prison?	n=158	85%	82%	85%	81%
	For those who have had an induction:					
3.5	Did your induction cover everything you needed to know about this prison?	n=134	40%	49%	40%	46%

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ON THE WING					
4.1	Are you in a cell on your own? <i>n=163</i>	42%	35%	42%	33%
4.2	Is your cell call bell normally answered within 5 minutes? <i>n=162</i>	26%	22%	26%	14%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week? <i>n=156</i>	21%	55%	21%	49%
	- Can you shower every day? <i>n=158</i>	87%	81%	87%	76%
	- Do you have clean sheets every week? <i>n=156</i>	24%	64%	24%	66%
	- Do you get cell cleaning materials every week? <i>n=156</i>	40%	51%	40%	45%
	- Is it normally quiet enough for you to relax or sleep at night? <i>n=158</i>	34%	54%	34%	48%
	- Can you get your stored property if you need it? <i>n=153</i>	18%	23%	18%	15%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean? <i>n=160</i>	54%	56%	54%	44%
FOOD AND CANTEEN					
5.1	Is the quality of the food in this prison very / quite good? <i>n=160</i>	28%	35%	28%	30%
5.2	Do you get enough to eat at meal-times always / most of the time? <i>n=161</i>	30%	30%	30%	18%
5.3	Does the shop / canteen sell the things that you need? <i>n=158</i>	61%	60%	61%	55%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect? <i>n=158</i>	66%	69%	66%	63%
6.2	Are there any staff here you could turn to if you had a problem? <i>n=158</i>	77%	70%	77%	68%
6.3	In the last week, has any member of staff talked to you about how you are getting on? <i>n=161</i>	37%	33%	37%	26%
6.4	Do you have a personal officer? <i>n=159</i>	81%	65%	81%	51%
For those who have a personal officer:					
6.4	Is your personal or named officer very / quite helpful? <i>n=128</i>	47%	52%	47%	29%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners? <i>n=157</i>	7%	7%	7%	5%
6.6	Do you feel that you are treated as an individual in this prison? <i>n=156</i>	39%	40%	39%	32%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues? <i>n=158</i>	48%	41%	48%	38%
	If so, do things sometimes change? <i>n=76</i>	36%	34%	36%	29%
FAITH					
7.1	Do you have a religion? <i>n=156</i>	72%	68%	72%	65%
For those who have a religion:					
7.2	Are your religious beliefs respected here? <i>n=114</i>	57%	68%	57%	63%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to? <i>n=115</i>	64%	64%	64%	63%
7.4	Are you able to attend religious services, if you want to? <i>n=115</i>	80%	83%	80%	86%

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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=157	24%	27%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	n=161	61%	54%
8.3	Are you able to use a phone every day (if you have credit)?	n=159	93%	84%
8.4	Is it very / quite easy for your family and friends to get here?	n=161	49%	44%
8.5	Do you get visits from family/friends once a week or more?	n=154	25%	24%
For those who get visits:				
8.6	Do visits usually start and finish on time?	n=86	36%	45%
8.7	Are your visitors usually treated respectfully by staff?	n=84	63%	72%
TIME OUT OF CELL				
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=154	84%	84%
For those who know what the unlock and lock-up times are supposed to be:				
9.1	Are these times usually kept to?	n=129	52%	51%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	n=156	39%	33%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	n=156	3%	4%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=156	72%	44%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=156	2%	1%
9.4	Do you have time to do domestics more than 5 days in a typical week?	n=158	42%	43%
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=158	61%	44%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=159	45%	46%
9.7	Do you typically go to the gym twice a week or more?	n=159	38%	39%
9.8	Do you typically go to the library once a week or more?	n=156	44%	41%
For those who use the library:				
9.9	Does the library have a wide enough range of materials to meet your needs?	n=90	43%	55%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS				
10.1	Is it easy for you to make an application?	n=159	59%	67%
For those who have made an application:				
10.2	Are applications usually dealt with fairly?	n=124	41%	48%
	Are applications usually dealt with within 7 days?	n=123	44%	36%
10.3	Is it easy for you to make a complaint?	n=158	48%	56%
For those who have made a complaint:				
10.4	Are complaints usually dealt with fairly?	n=93	26%	28%
	Are complaints usually dealt with within 7 days?	n=85	21%	24%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=120	40%	30%

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For those who need it, is it easy to:						
10.6	Communicate with your solicitor or legal representative?	n=141	48%	42%	48%	39%
	Attend legal visits?	n=136	57%	59%	57%	54%
	Get bail information?	n=115	19%	18%	19%	13%
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=139	64%	52%	64%	57%
HEALTH CARE						
11.1	Is it very / quite easy to see:					
	- Doctor?	n=151	25%	25%	25%	16%
	- Nurse?	n=151	41%	47%	41%	33%
	- Dentist?	n=150	15%	12%	15%	12%
	- Mental health workers?	n=150	25%	20%	25%	26%
11.2	Do you think the quality of the health service is very / quite good from:					
	- Doctor?	n=152	45%	40%	45%	39%
	- Nurse?	n=151	52%	51%	52%	46%
	- Dentist?	n=148	27%	27%	27%	23%
	- Mental health workers?	n=149	33%	26%	33%	29%
11.3	Do you have any mental health problems?	n=153	60%	53%	60%	52%
For those who have mental health problems:						
11.4	Have you been helped with your mental health problems in this prison?	n=91	44%	35%	44%	34%
11.5	Do you think the overall quality of the health services here is very / quite good?	n=153	40%	35%	40%	37%
OTHER SUPPORT NEEDS						
12.1	Do you consider yourself to have a disability?	n=156	49%	41%	49%	42%
For those who have a disability:						
12.2	Are you getting the support you need?	n=73	33%	27%	33%	22%
12.3	Have you been on an ACCT in this prison?	n=147	29%	24%	29%	30%
For those who have been on an ACCT:						
12.4	Did you feel cared for by staff?	n=40	30%	48%	30%	38%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=154	37%	45%	37%	28%
ALCOHOL AND DRUGS						
13.1	Did you have an alcohol problem when you came into this prison?	n=156	23%	24%	23%	24%
For those who had / have an alcohol problem:						
13.2	Have you been helped with your alcohol problem in this prison?	n=36	42%	55%	42%	61%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=155	34%	37%	34%	34%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=153	18%	16%	18%	15%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=155	13%	12%	13%	12%
For those who had / have a drug problem:						
13.6	Have you been helped with your drug problem in this prison?	n=55	36%	50%	36%	46%
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=153	52%	50%	52%	57%
13.8	Is it very / quite easy to get alcohol in this prison?	n=155	21%	26%	21%	27%

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SAFETY					
14.1	Have you ever felt unsafe here?	n=160	63%	58%	63% 67%
14.2	Do you feel unsafe now?	n=155	32%	28%	32% 35%
14.3	Have you experienced any of the following from other prisoners here:				
	- Verbal abuse?	n=150	38%	37%	38% 39%
	- Threats or intimidation?	n=150	39%	34%	39% 42%
	- Physical assault?	n=150	21%	20%	21% 28%
	- Sexual assault?	n=150	3%	3%	3% 2%
	- Theft of canteen or property?	n=150	30%	31%	30% 34%
	- Other bullying / victimisation?	n=150	23%	20%	23% 23%
	- Not experienced any of these from prisoners here	n=150	48%	48%	48% 46%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	n=146	40%	35%	40% 28%
14.5	Have you experienced any of the following from staff here:				
	- Verbal abuse?	n=144	46%	33%	46% 35%
	- Threats or intimidation?	n=144	33%	25%	33% 23%
	- Physical assault?	n=144	17%	13%	17% 12%
	- Sexual assault?	n=144	4%	2%	4% 3%
	- Theft of canteen or property?	n=144	13%	11%	13% 10%
	- Other bullying / victimisation?	n=144	23%	18%	23% 14%
	- Not experienced any of these from staff here	n=144	47%	55%	47% 57%
14.6	If you were being bullied / victimised by staff here, would you report it?	n=145	49%	47%	49% 42%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	n=152	34%	39%	34% 33%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	n=155	25%	35%	25% 28%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	n=156	18%	14%	18% 17%
For those who have been restrained in the last 6 months:					
15.4	Did anyone come and talk to you about it afterwards?	n=27	19%	20%	19% 14%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	n=153	11%	10%	11% 6%
For those who have spent one or more nights in the segregation unit in the last 6 months:					
15.6	Were you treated well by segregation staff?	n=14	57%	56%	57% 40%
	Could you shower every day?	n=15	40%	53%	40% 60%
	Could you go outside for exercise every day?	n=15	47%	64%	47% 50%
	Could you use the phone every day (if you had credit)?	n=15	27%	53%	27% 44%

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EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	n=146	50%	53%	
	- Vocational or skills training?	n=136	29%	28%	
	- Prison job?	n=147	37%	36%	
	- Voluntary work outside of the prison?	n=141	3%	4%	
	- Paid work outside of the prison?	n=140	1%	4%	
16.2	In this prison, have you done the following activities:				
	- Education?	n=137	64%	72%	
	- Vocational or skills training?	n=131	49%	57%	
	- Prison job?	n=136	70%	73%	
	- Voluntary work outside of the prison?	n=126	24%	34%	
	- Paid work outside of the prison?	n=127	24%	34%	
For those who have done the following activities, do you think they will help you on release:					
	- Education?	n=88	59%	59%	
	- Vocational or skills training?	n=64	61%	59%	
	- Prison job?	n=95	38%	44%	
	- Voluntary work outside of the prison?	n=30	43%	51%	
	- Paid work outside of the prison?	n=30	53%	56%	
16.3	Do staff encourage you to attend education, training or work?		n=128	45%	46%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?		n=146	13%	27%
For those who have a custody plan:					
17.2	Do you understand what you need to do to achieve your objectives or targets?		n=19	84%	79%
17.3	Are staff helping you to achieve your objectives or targets?		n=19	58%	49%
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	n=17	53%	46%	
	- Other programmes?	n=16	50%	45%	
	- One to one work?	n=17	59%	41%	
	- Been on a specialist unit?	n=16	25%	22%	
	- ROTL - day or overnight release?	n=16	19%	17%	
For those who have done the following, did they help you to achieve your objectives or targets:					
	- Offending behaviour programmes?	n=9	78%	72%	
	- Other programmes?	n=8	63%	69%	
	- One to one work?	n=10	80%	68%	
	- Being on a specialist unit?	n=4	75%	49%	
	- ROTL - day or overnight release?	n=3	33%	49%	

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Number of completed questionnaires returned

HMP Nottingham 2020	All other local prisons surveyed since September 2017
165	4,980

HMP Nottingham 2020	HMP Nottingham 2017
165	177

n=number of valid responses to question (HMP Nottingham 2020)

PREPARATION FOR RELEASE					
18.1	Do you expect to be released in the next 3 months?	n=151	31%	32%	31% 41%
For those who expect to be released in the next 3 months:					
18.2	Is this prison very / quite near to your home area or intended release address?	n=45	58%	55%	58% 70%
18.3	Is anybody helping you to prepare for your release?	n=47	40%	50%	40% 20%
18.4	Do you need help to sort out the following for when you are released:				
	- Finding accommodation?	n=46	70%	67%	70% 69%
	- Getting employment?	n=45	67%	64%	67% 56%
	- Setting up education or training?	n=42	62%	51%	62% 44%
	- Arranging benefits?	n=45	69%	71%	69% 67%
	- Sorting out finances?	n=44	68%	60%	68% 55%
	- Support for drug or alcohol problems?	n=44	64%	51%	64% 53%
	- Health / mental Health support?	n=43	65%	59%	65% 63%
	- Social care support?	n=42	62%	43%	62% 50%
	- Getting back in touch with family or friends?	n=44	59%	43%	59% 49%
18.4	Are you getting help to sort out the following for when you are released, if you need it:				
	- Finding accommodation?	n=32	22%	31%	22% 33%
	- Getting employment?	n=30	10%	20%	10% 24%
	- Setting up education or training?	n=26	19%	16%	19% 22%
	- Arranging benefits?	n=31	19%	27%	19% 27%
	- Sorting out finances?	n=30	13%	17%	13% 20%
	- Support for drug or alcohol problems?	n=28	25%	43%	25% 40%
	- Health / mental Health support?	n=28	21%	24%	21% 22%
	- Social care support?	n=26	12%	17%	12% 16%
	- Getting back in touch with family or friends?	n=26	19%	26%	19% 19%
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=142	43%	48%	43% 40%

HMP Nottingham 2020

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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Number of completed questionnaires returned

	25 and under	Over 25		50 and over	Under 50
	50	113		20	143

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	30%			11%
	Are you 70 years of age or older?		2%	10%	
1.3	Are you from a black and minority ethnic group?	37%	23%	10%	30%
7.1	Are you Muslim?	19%	9%	0%	14%
11.3	Do you have any mental health problems?	56%	61%	44%	62%
12.1	Do you consider yourself to have a disability?	40%	53%	74%	46%
19.2	Are you a foreign national?	20%	10%	5%	14%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	9%	7%	5%	8%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	73%	82%	90%	78%
2.4	Overall, were you treated very / quite well in reception?	67%	78%	95%	71%
2.5	When you first arrived, did you have any problems?	90%	88%	75%	91%
For those who had any problems when they first arrived:					
2.6	Did staff help you to deal with these problems?	11%	28%	50%	20%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	51%	62%	55%	59%
3.5	Have you had an induction at this prison?	88%	84%	68%	88%
For those who have had an induction:					
3.5	Did your induction cover everything you needed to know about this prison?	44%	38%	39%	40%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	12%	32%	60%	21%
4.3					
	- Do you normally have enough clean, suitable clothes for the week?	17%	23%	37%	19%
	- Can you shower every day?	89%	86%	95%	85%
	- Do you have clean sheets every week?	28%	23%	17%	26%
	- Do you get cell cleaning materials every week?	45%	39%	63%	38%
	- Is it normally quiet enough for you to relax or sleep at night?	40%	32%	25%	36%
	- Can you get your stored property if you need it?	20%	17%	21%	17%

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	50	113		20	143

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	19%	34%
5.3	Does the shop / canteen sell the things that you need?	62%	62%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	52%	73%
6.2	Are there any staff here you could turn to if you had a problem?	69%	81%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	29%	40%
6.6	Do you feel that you are treated as an individual in this prison?	28%	43%
FAITH			
For those who have a religion:			
7.2	Are your religious beliefs respected here?	74%	51%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	69%	64%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	26%	23%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	63%	60%
8.3	Are you able to use a phone every day (if you have credit)?	94%	93%
For those who get visits:			
8.7	Are your visitors usually treated respectfully by staff?	63%	64%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	38%	40%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	2%	3%
For those who use the library:			
9.9	Does the library have a wide enough range of materials to meet your needs?	36%	47%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	52%	63%
For those who have made an application:			
10.2	Are applications usually dealt with fairly?	47%	39%
10.3	Is it easy for you to make a complaint?	48%	48%
For those who have made a complaint:			
10.4	Are complaints usually dealt with fairly?	21%	29%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	36%	41%

75%	23%
65%	61%
95%	62%
95%	75%
58%	34%
65%	35%
69%	57%
71%	65%
30%	23%
30%	65%
85%	94%
83%	62%
35%	40%
0%	3%
60%	41%
55%	60%
50%	41%
58%	46%
60%	24%
0%	44%

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	50	113

	50 and over	Under 50
	20	143

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	24%	25%
	- Nurse?	35%	44%
	- Dentist?	18%	14%
	- Mental health workers?	27%	25%
For those who have mental health problems:			
11.4	Have you been helped with your mental health problems in this prison?	36%	46%
11.5	Do you think the overall quality of the health services here is very / quite good?	35%	42%
OTHER SUPPORT NEEDS			
For those who have a disability:			
12.2	Are you getting the support you need?	6%	41%
SAFETY			
14.1	Have you ever felt unsafe here?	66%	61%
14.2	Do you feel unsafe now?	26%	33%
14.3	Not experienced bullying / victimisation by other prisoners	43%	51%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	33%	43%
14.5	Not experienced bullying / victimisation by members of staff	45%	49%
14.6	If you were being bullied / victimised by staff here, would you report it?	51%	49%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	33%	34%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	17%	29%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	22%	17%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	9%	10%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	48%	44%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	23%	10%
For those who have a custody plan:			
17.3	Are staff helping you to achieve your objectives or targets?	44%	70%
PREPARATION FOR RELEASE			
For those who expect to be released in the next 3 months:			
18.3	Is anybody helping you to prepare for your release?	50%	40%
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?	44%	43%

32%	24%
58%	39%
15%	16%
44%	23%
44%	43%
65%	36%
43%	31%
60%	63%
30%	31%
56%	48%
61%	37%
77%	44%
68%	46%
45%	32%
30%	25%
0%	21%
5%	11%
44%	45%
10%	14%
100%	53%
20%	45%
53%	42%