

Report on an unannounced inspection of

HMP/YOI Portland

by HM Chief Inspector of Prisons

29 July – 9 August 2019

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Glossary of terms

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

Introduction

HMP/YOI Portland is a category C closed facility holding up to 530 adult and young adult male prisoners. Originally built in 1848, the prison is in Dorset although those held generally came from a much wider catchment across southern England. The population profile as a whole was relatively young, with 25% aged under 21 and nearly 58% between 21 and 39. The vast majority of prisoners were serving more than 12 months, with nearly half serving between two and four years, and nearly a third serving longer than that.

When we last inspected Portland, in 2017, we expressed guarded optimism about the prison's future, despite finding some concerning outcomes. At the time, we found outcomes to be insufficiently good across three of our four tests of a healthy prison, and we rated safety as poor. At this inspection we found that outcomes had not improved in any of our tests and, of greatest concern, the prison remained poor in safety.

Prisoners arriving at Portland were received reasonably well into the institution but induction was often delayed or cancelled. The early experience of many prisoners consisted of extended periods locked in cell. Levels of violence had reduced following a recent increase in 2018 but remained high and comparable to the levels we saw during our last inspection. Work by staff to tackle violence, as well as to challenge poor behaviour by prisoners, was not good enough. The situation was not helped by a failure to develop any kind of incentivising culture that might motivate prisoners to engage and behave. Consistent with the level of violence in the prison, use of force had increased markedly. While we found no evidence that force had been misused, supervision and accountability were insufficient.

In contrast, the number of adjudications and the use of segregation had decreased since 2017. Indeed, the use of segregation was lower than at similar prisons and lengths of stay were comparatively brief for most. Living conditions on the unit were better, although the regime was very limited. Some security arrangements were too restrictive but the prison used intelligence well and had done some very good work to reduce an influx of illegal drugs. Data from mandatory drug tests suggested a positive rate of just over 5%.

Levels of self-harm had doubled since our last inspection and were now very high. Case management (ACCTs) of men in crisis was generally poor and many experienced protracted periods of lock-up and isolation. The prison had no safeguarding policy.

Our observations suggested a reasonable quality of personal interaction between staff and prisoners but the paucity of the regime limited the ability of staff to engage consistently. Staff were too slow to challenge poor behaviour. It was no surprise that in our survey just 59% of prisoners thought staff treated them with respect. Cleanliness and the quality of the environment were little improved since our last inspection, with some cells in a poor condition and many overcrowded. Showers were in a particularly poor condition, although access to basic items had recently improved. Consultation with prisoners was weak, as was the management of the applications and complaints processes. The promotion of equality and diversity was similarly weak but there was evidence that, with the encouragement of the Prison Group Director's office, improvements were beginning to be made. The prison provided reasonable health care but facilities were poor and prisoners had difficulty accessing the service.

The amount of time prisoners spent out of their cells was poor and reflected a limited and restricted regime prone to slippage and cancellations that ultimately undermined so much of the work of the establishment. A quarter of prisoners were not engaged in activity and could experience as little as one hour 15 minutes out of cell each day. During roll checks we found a shocking 44% of prisoners locked in cell during the working day. The curricula offered in education and vocational training opportunities were appropriate but there remained too few activity places. Those places that were available were underused, a situation compounded by continued poor punctuality and in some areas

poor attendance, although generally attendance had improved since the last inspection. Those that did attend seemed motivated and made the progress expected of them. Teaching, learning and assessment were well planned and there were some improvements in prisoners' achievements. Our colleagues in Ofsted assessed the overall effectiveness of provision as 'requires improvement'.

The relative remoteness of Portland meant that promoting good family ties remained a challenge. The involvement of Barnardo's in support of family days and through their encouragement of care leavers was, however, impressive. The prison had a good reducing reoffending strategy based on a useful needs analysis and since our last inspection the prison had reduced its backlog of offender assessments (OASys) by half. The quality of many assessments, however, was not good enough and contact between offenders and their supervisors was low and almost entirely reactive. Too few prisoners said they had a sentence plan, and offending behaviour opportunities and one-to-one interventions were too limited. Public protection work was, however, good and resettlement support for the approximately 40 prisoners released each month was reasonable despite most discharged prisoners returning to other parts of the country.

Overall, our findings at this inspection were troubling. Outcomes had not declined and there was some recent evidence that the impetus and initiative provided by the Prison Group Director was having some beneficial effect. This, however, was not enough. We had concerns about whether local managers had realistic, grounded plans to meet the challenges the prison faced. The prison's approach to safety was lacklustre, basic standards were not maintained and staff generally needed to have greater expectations of the prisoners they supervised. The prison also needed to re-focus on its primary function as a training and resettlement prison and ensure first that it did the basics right. It urgently needed to ensure that an active and purposeful regime was being delivered and that this met fully the needs of the men held.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

August 2019

Fact page

Task of the establishment

Male closed young offender institution and male category C adults

Certified normal accommodation and operational capacity¹

Prisoners held at the time of inspection: 492

Baseline certified normal capacity: 463

In-use certified normal capacity: 458

Operational capacity: 530

Notable features from this inspection

Nearly two-thirds of the prison's population were under 30 years old.

Only 11.5% of prisoners had been at Portland for a year or longer.

The level of prisoner self-harm had doubled since the previous inspection.

Sixteen per cent of the population were sharing cells designed to hold one person.

A quarter of prisoners were unemployed during the core day.

Half the prisoners released were from outside Portland's resettlement catchment area.

Only 4% of prisoners said it was easy for family and friends to get to Portland.

Prison status (public or private) and key providers

Public

Physical health provider: Care UK

Mental health provider: Care UK

Substance use treatment provider: EDP

Learning and skills provider: Weston College

Community rehabilitation company (CRC): Dorset, Devon and Cornwall CRC subcontracted to Catch 22

Escort contractor: GeoAmey

Prison group/Department

Avon and South Dorset

Brief history

HMP/YOI Portland is a category C prison located on Portland Bill, Dorset. It is a historic prison, originally built in 1848. It houses around 500 adult male and young adult male prisoners.

¹ Baseline CNA is the sum total of all certified accommodation in an establishment except cells in segregation units, health care cells or rooms that are not routinely used to accommodate long stay patients. In-use CNA is baseline CNA less those places not available for immediate use, such as damaged cells, cells affected by building works, and cells taken out of use due to staff shortages. Operational capacity is the total number of prisoners that an establishment can hold without serious risk to good order, security and the proper running of the planned regime.

Short description of residential units

Collingwood is the induction wing

Nelson and Grenville are young offenders' wings

Benbow, Raleigh and Drake are general population wings with some young offenders.

Beaufort is working towards being an enabled environment

Name of governor and date in post

Steve Hodson, April 2017

Independent Monitoring Board chair

Anna Knight

Date of last inspection

May 2017

About this inspection and report

A1 Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, secure training centres, immigration detention facilities, police and court custody and military detention.

A2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.

A3 All Inspectorate of Prisons reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this inspectorate's thematic review *Suicide is everyone's concern*, published in 1999. The tests are:

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

Respect Prisoners are treated with respect for their human dignity.

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

Rehabilitation and release planning Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release into the community.

A4 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. There are four possible judgements: In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by Her Majesty's Prison and Probation Service (HMPPS).

- **Outcomes for prisoners are good.**

There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.

- **Outcomes for prisoners are reasonably good.**

There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.

- **Outcomes for prisoners are not sufficiently good.**

There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.

- **Outcomes for prisoners are poor.**

There is evidence that the outcomes for prisoners are seriously affected by current

practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.

A5 Our assessments might result in one of the following:

- **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)*.² 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.

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.³

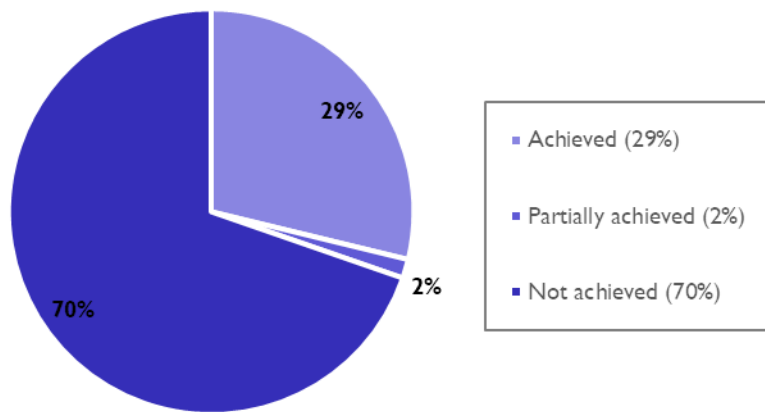
² <https://www.justiceinspectorates.gov.uk/hmiprison/our-expectations/prison-expectations/>

³ 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

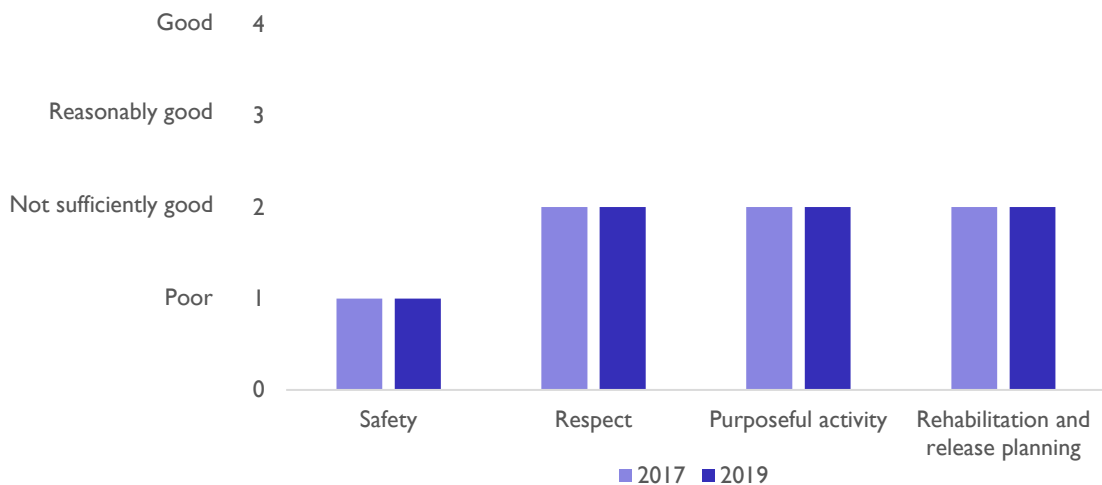
- S1 We last inspected HMP Portland in 2017 and made 66 recommendations overall. The prison fully accepted 55 of the recommendations and partially (or subject to resources) accepted 11. It did not reject any of the recommendations.
- S2 At this follow-up inspection we found that the prison had achieved 19 of those recommendations, partially achieved one recommendation and not achieved 46 recommendations.

Figure 1: HMP Portland progress on recommendations from last inspection (n=66)⁴



- S3 Since our last inspection of HMP Portland, outcomes for prisoners stayed the same in all four healthy prison areas, with safety remaining poor and respect, purposeful activity and rehabilitation and release planning remaining not sufficiently good.

Figure 2: HMP Portland healthy prison outcomes 2017 and 2019⁵



⁴ Please note that all percentages are rounded and may not add up to 100%.

⁵ Please note that the criteria assessed under each healthy prison area were amended in September 2017. Healthy prison outcomes reflect the expectations in place at the time of each inspection.

Safety

S4 *Prisoners' experience of reception and the first night centre was reasonably good but many waited too long to receive an induction. Behaviour management was weak; supervision was poor and prisoners were not motivated to behave well. Violence remained at a high level and plans designed to challenge perpetrators and support victims were poorly implemented. Governance of use of force required further improvement. Use of segregation was low but the regime remained poor. There had been an impressive reduction in the use of drugs. Self-harm had increased and was at a high level. Care for more complex prisoners had improved but care for most prisoners at risk of self-harm was inconsistent. **Outcomes for prisoners were poor against this healthy prison test.***

S5 *At the last inspection in May 2017, we found that outcomes for prisoners in Portland were poor against this healthy prison test. We made 18 recommendations in the area of safety.⁶ At this inspection we found that six of the recommendations had been achieved and 12 had not been achieved.*

S6 Initial care and risk screening were good but prisoners spent long periods locked in holding rooms. First night cells were clean and well prepared. Induction only started a week after arrival and was frequently curtailed. Prisoners spent far too long locked in their cells during their first few weeks. Access to peer workers was poor.

S7 Behaviour management was undermined by a lack of supervision and challenge by staff. Despite reductions from the very high levels in 2018, levels of violence remained similar to the last inspection and higher than comparable prisons. Some of this violence was very serious. There had not been enough analysis to understand the causes of violence. Delayed recording of violent incidents prevented swift investigation. The implementation of challenge support and intervention plans⁷ (CSIPs) designed to challenge and support perpetrators of bullying and violence was very poor. Case managers were unaware of their role and staff working directly with prisoners on CSIPs were unaware of plans or targets. Help for victims of violence was underdeveloped but support for those who were self-isolating was better than we usually see.

S8 There were too few incentives to encourage prisoners to engage. The incentives and earned privileges scheme was poorly implemented, patterns of poor behaviour went unchallenged, reviews did not always take place and all prisoners demoted to basic level were given the same 17 behaviour targets.

S9 The prison reported a significant reduction in adjudications which was surprising given that levels of violence were similar to our last inspection. Some adjudication records indicated a lack of enquiry. Data for adjudications and segregation were collated but not routinely reviewed and some data were inaccurate.

S10 The number of use of force incidents had increased by a third since our last inspection and remained higher than at similar prisons. The backlog of use of force reports had been significantly reduced, but too many were of poor quality. Longstanding concerns had persisted about a lack of body-worn video camera use, too few staff trained in control and restraint and a lack of an embedded robust governance structure. Not all recordings of planned incidents were available to view. However, the footage that we looked at

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

⁷ Challenge, support and intervention plans are used to challenge perpetrators and support victims of violence and anti-social behaviour.

demonstrated proportionate force, although some learning points had not been identified or addressed.

- S11 Baton use had decreased significantly since our last inspection and use of special accommodation remained low.
- S12 The number of prisoners segregated had reduced since our last inspection and was less than at similar prisons. Most lengths of stay were relatively brief, although two prisoners had been held for more than 42 days in the last six months. Living conditions had improved on the unit but too many cells remained out of use, some for lengthy periods. The regime remained limited and reintegration planning was underdeveloped.
- S13 Some security procedures remained disproportionate for the category of prison. Recent drug supply reduction initiatives had proved successful and the number of positive random mandatory drug tests was impressively low. Intelligence related actions were reasonably good and responses to intelligence reports had increased.
- S14 Levels of self-harm had doubled since the previous inspection and were very high. The quality of ACCT⁸ documents was generally poor, although there were isolated areas of better practice. Too many prisoners on open ACCTs were left locked up for long periods because of unemployment and regime curtailment. Complex case meetings had improved but the high number of prisoners considered at each meeting impacted on the quality of individual planning. There was no safeguarding policy.

Respect

S15 *Despite some reasonable interactions, too many staff had low expectations of prisoners and did not consistently challenge poor behaviour. Communal areas and Beaufort wing had improved since the previous inspection but elsewhere living conditions required improvement. Cells remained cramped and poorly equipped, with inadequately screened toilets. Access to showers was poor. The quality of food required improvement. Consultation was weak as was the complaints system. Equality and diversity work had been restarted three months before the inspection and, except for the chaplaincy provision, was limited. Reasonable health services were undermined by some poor facilities and the inability to get prisoners to appointments. Substance misuse services were good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S16 *At the last inspection in May 2017, we found that outcomes for prisoners in Portland were not sufficiently good against this healthy prison test. We made 23 recommendations in the area of respect. At this inspection we found that four of the recommendations had been achieved and 19 had not been achieved.*

- S17 In our survey, only 59% of prisoners said that most staff treated them with respect and fewer prisoners than comparable establishments said they had a member of staff they could turn to for help. While we observed reasonable interaction between staff and prisoners, more effective relationships were prevented by the poor regime. Staff supervision of prisoners when they were out of their cells required improvement and poor behaviour was not challenged.
- S18 With the exception of Beaufort and some communal areas, the quality and cleanliness of accommodation had not improved since our last inspection. Most cells had basic furniture

⁸ Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

but no lockable cabinets, no cells had curtains and toilets were not adequately screened. Showers were in an unacceptable condition and access was poor. Cells designed for one were still holding two prisoners and were cramped.

- S19 Provision of basic items such as clothing, bedding and towels had improved immediately before the inspection. Outside areas were reasonably tidy and the main exercise area was a pleasant place for prisoners to spend time in the open air.
- S20 A very recently formed prisoner council was poorly attended by managers, and prisoner representatives were rightly frustrated. Prisoners had little faith in the applications process and there was some evidence to support this view. Too many complaints were responded to late but most responses to general complaints were good. Complaints against staff, including some serious allegations, were not always thoroughly investigated or addressed.
- S21 The provision of cold evening meals remained unpopular with many prisoners and we supported this view. Servery areas were dirty and not adequately supervised by staff. There were limited opportunities for eating in association and the serving of meals at cell doors was disrespectful. The range of catalogues for prisoners to order items was too limited.
- S22 There were some very recent improvements to the strategic oversight of equality and diversity work following a dip in performance since the previous inspection. Managers were aware that further improvements were needed and, with support from their regional team, were developing plans to strengthen performance in this area. The diversity and race equality action team meeting was now being used as the forum to drive improvement. Attendance at the meetings was appropriate and included prisoner representatives. Attendees at the most recent meeting had been challenged to deliver the actions they were tasked with, reflecting the renewed importance given to the work. Few discrimination incident report forms (DIRFs) were submitted and most of the DIRFs that we reviewed did not have a substantive response or any evidence that issues raised had been properly investigated. Identification of protected characteristics on arrival was effective but after this there was little systematic support for the different groups.
- S23 The chaplaincy continued to deliver a good range of services, groups and classes to meet the faith needs of the population and offered individual support to all prisoners.
- S24 Partnership working had recently improved but a lack of strategic action had resulted in a health service that was not able to function effectively, largely because prison managers failed to facilitate consistent access to health care services. There was a skilled and dedicated health care team but staffing levels hindered the delivery of some services. Medication administration times were protracted because patients were not escorted to health care in a timely way. This affected the regime and led to the delay or cancellation of some clinics. Holding rooms in the health care centre remained unsuitable and the floors needed a deep clean, including the treatment room on Raleigh. There was an appropriate range of primary care services, but the high non-attendance rates wasted clinical resources. Social care arrangements were underdeveloped. Mental health services were impeded by chronic staff shortages and difficulty in getting prisoners to their appointments, which limited treatment options. Substance misuse clinical and psychosocial support was well integrated with a wide range of interventions and mutual aid peer support. Dental services were good but waiting lists were too long, partly because patients were not brought to appointments which had to be rebooked.

Purposeful activity

S25 *Time out of cell was poor, particularly for a training prison holding a young population. This was exacerbated by chronic slippage of the regime and frequent cancellations of education. Access to the library and gym required improvement. Leaders and managers had increased the range of vocational training and qualifications. Overall, there was not enough activity to occupy the population fully and a quarter of prisoners were unemployed. The allocation process was not effective. Attendance had improved but teaching and learning were undermined by poor punctuality. Outcomes on most courses were reasonable and had notably improved in English, although success rates in mathematics remained low. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S26 *At the last inspection in May 2017, we found that outcomes for prisoners in Portland were not sufficiently good against this healthy prison test. We made 12 recommendations in the area of purposeful activity. At this inspection we found that five of the recommendations had been achieved and seven had not been achieved.*

S27 Time unlocked for prisoners engaged in activities was about eight hours 15 minutes a day. For the 25% of prisoners not engaged in activities it could be as little as an hour and 15 minutes. The restricted regime affected time out of cell for many prisoners and some prisoners were locked up for long periods. This was exacerbated by chronic slippage of the regime. During our roll checks we found 44% of prisoners locked in their cells during the working day. The library and gym were reasonably good facilities, but access required improvement.

S28 Collaborative working between senior prison managers and the education provider ensured that the education and training curriculum delivered courses which met the needs of most prisoners. Managers continued to offer a broad range of vocational training and plans for additional courses, qualifications and plans for more contracts in the industrial workshops were well advanced. There were not enough activity places for the population and those that were available were often underused. For example, too many classes and workshops were closed because of operational difficulties, staff absences and insufficient contract work.

S29 Prisoners' punctuality at activities was poor and attendance was low in a significant minority of activities. However, leaders and managers had ensured that overall attendance at education and training had improved since the previous inspection. Prison quality improvement planning was better focused on the quality of provision and areas for improvement. However, quality assurance arrangements for improving teaching and learning across the prison were not fully developed. The activities allocation process was not working effectively and data to inform allocation were unreliable.

S30 Education staff provided effective outreach support for English and mathematics skills development. However, far too few prisoners were able to benefit. Prison managers continued to support a few prisoners following Open University and distance learning courses.

S31 Teaching, learning and assessment were well planned with effective use of interactive learning technology. Peer mentors provided good support to tutors, trainers and prisoners. Accommodation for training and workshops was clean and well laid out and classrooms contained stimulating wall displays. Appropriate attention was given to health and safety. Tutors and trainers did not always reinforce the importance of correct spelling, punctuation and grammar. Trainers did not always use initial assessment results to plan individual

learning. The use of individual learning plans to record and target improvement remained inconsistent and too many prisoners were unaware of their progress.

- S32 Most prisoners were well behaved and motivated, engaged well in activities and were respectful to each other and members of staff. However, the skills that prisoners developed were not always recognised, recorded or accredited.
- S33 There was no professional careers advice and guidance for prisoners. However, prison managers had recently signed a formal contract for professional careers advice and guidance.
- S34 Most prisoners made expected progress through their learning and, where available, achieved their qualification. There were no significant differences in achievement by different groups of prisoners. Prisoners' achievements in English had improved since the previous inspection but mathematics at levels 1 and 2 required improvement. Standards of work were generally satisfactory, but better in music, horticulture and mentoring.

Rehabilitation and release planning

S35 *Despite some improvements since the previous inspection, maintaining family contact was challenging for many prisoners. The strategic management of resettlement had improved recently and managers had successfully reduced the backlog of assessments of risk and need. However, prisoners' contact with offender supervisors was very poor. The lack of offending behaviour programmes or one-to-one work meant that many prisoners left Portland without undertaking any offending behaviour work. Home detention curfew was well managed, but prisoners waited too long for a progressive transfer. Public protection arrangements were good. Support provided by the community rehabilitation company was reasonable. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S36 *At the last inspection in May 2017, we found that outcomes for prisoners in Portland were not sufficiently good against this healthy prison test. We made 13 recommendations in the area of resettlement.⁹ At this inspection we found that four of the recommendations had been achieved, one had been partially achieved and eight had not been achieved.*

S37 Maintaining family contact remained challenging for prisoners. The vast majority of prisoners were held a long way from home and the journey for families to visit was difficult. This was compounded by poor access to telephones and visits regularly starting late. The visits hall had recently been refurbished and it was a better environment with a good range of toys for visiting children. The support provided by Barnardo's was impressive. Weekly family days throughout the school holidays were a good initiative. The support given by Barnardo's to care leavers, about 40 prisoners at the time of inspection, was good. Initiatives such as extra phone credit and recognition of birthdays were appreciated.

S38 The reducing reoffending strategy had recently been revised and was appropriate for the establishment. It was implemented through the quarterly strategy meeting which was well attended. Each resettlement pathway had a nominated lead and the recently introduced monthly pathways meeting provided oversight. The strategy was based on a good needs analysis which was regularly updated.

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

- S39 Since the last inspection, the prison had reduced its backlog of OASys assessments by half. However, the quality of many of those that we looked at required improvement, particularly in respect of risk assessment. Cross-deployment of the uniformed offender supervisors had been virtually eliminated, enabling appropriate focus to be given to offender supervision. However, levels of contact between offender supervisors and prisoners were very low and almost entirely reactive. Applications from prisoners for contact were ignored unless they gave the reason for wanting contact on the form. This was unacceptable. Fewer prisoners than in comparable prisons said that they had a sentence plan and fewer also said that they understood what it was they needed to achieve.
- S40 In the previous six months, 113 prisoners had been released on home detention curfew. Processes underpinning this were effective and proper risk assessments were evident.
- S41 Public protection screening was carried out by a single point of contact who was an offender supervisor with a reduced caseload. Monitoring measures were appropriately reviewed. Breaches were followed up and two convictions had been secured in recent months. The interdepartmental risk management team meeting had recently been re-invigorated. Attendance was good and actions were systematically followed up. At the time of the inspection, all MAPPAs (multi-agency public protection arrangements) prisoners within three months of release were added to the agenda, which was good.
- S42 At our last inspection the use of release on temporary licence (ROTL) had virtually ceased. It was positive to see that there had been 453 ROTL events in the past six months. Work to transfer prisoners out of Portland as they progressed was poor. Nine category D prisoners were awaiting a move to the open estate and many more were waiting for moves out for courses to address offending behaviour. We found a backlog of applications for transfer and the lack of a dedicated person to undertake this work was affecting prisoners' ability to progress.
- S43 Many prisoners were no longer able to benefit from accredited programmes to address their offending behaviour. Just a single programme was available which represented a serious decline from the position two years ago. Almost no one-to-one work was being done. CF03 (a European Social Fund initiative to promote employment) provided good support for prisoners needing help with employment. At the time of the inspection they were working with 65 prisoners.
- S44 About 40 prisoners were released each month. The community rehabilitation company implemented effective processes to identify these prisoners and provide a timely assessment of their needs. The team responsible for this work had a good range of skills but had only very recently filled a number of vacancies. Group interventions were not being delivered but one-to-one work was undertaken satisfactorily. About half the prisoners released each month were from outside the immediate catchment area and the resolution of resettlement needs, particularly accommodation, remained challenging. The prison had recognised these issues and had recently introduced a reintegration meeting which was an appropriate and encouraging response.

Key concerns and recommendations

- S45 **Key concern:** Levels of violence were high. The strategic management of violence was weak. Management scrutiny of violence reduction work, segregation and adjudications lacked rigour. A failure to ensure the collection and systematic analysis of reliable data meant that managers lacked the necessary information to assess the effectiveness of practice, identify opportunities for improvement or address weaknesses.

Recommendation: Key safety processes, including violence reduction, segregation and adjudication, should be scrutinised regularly and effectively and this should be underpinned by the interrogation of routinely collected, reliable and comprehensive data which inform effective actions, the success of which can be judged by less violence.

- S46 Key concern: Measures to encourage positive behaviour were not well implemented and did not help prisoners work towards changing habits and attitudes to assist in achieving rehabilitation. The incentives and earned privileges (IEP) scheme was not applied consistently, low-level poor behaviour frequently went unchallenged and prisoners felt that negative decisions were made arbitrarily. Decisions to reduce a prisoner to the basic level were often taken with no face-to-face discussion or explanation. Targets to improve were too often generic and reviews were undertaken without the prisoner. Conversely, incentives within and outside the IEP scheme were inadequate, there were few positive entries in case notes and there was little peer support to reduce violence.

Recommendation: Behaviour management schemes should be implemented consistently across the prison and should focus on incentivising and motivating prisoners.

- S47 Key concern: Use of force was high with inadequate scrutiny. Paperwork was not always comprehensively completed and not all video footage of planned incidents was available to view. Regular meetings had not been held and data and analysis were not yet being used sufficiently to highlight trends and take necessary action.

Recommendation: Use of force documentation should be completed promptly and thoroughly, all planned incidents should be recorded and reviewed, data should be analysed and incidents reviewed to monitor trends, identify good practice and learn lessons.

- S48 Key concern: The quality of ACCT documents was poor. There were gaps in key areas such as care maps and observations. The quality assurance process had failed to address these deficiencies. Prisoners on ACCTs were locked up for long periods on the main wings with little activity or support. This had the potential to be a driver for self-harm.

Recommendation: Managers should ensure prisoners at risk of self-harm are safe, supported by staff and receive a regime that engages them more fully.

- S49 Key concern: Responses to our survey were extremely negative about staff. Only 59% said that staff treated them with respect and 60% that they had someone they could turn to against respective comparators of 70% and 71%. There was no personal officer scheme and the key worker scheme was not fully embedded or effective. The time that prisoners spent locked up hindered the development of healthy relationships with staff. We observed much poor supervision of prisoners. Many staff remained in offices on wings instead of supervising prisoners in their care. Rules were not appropriately enforced by staff.

Recommendation: Staff should provide proactive support and supervision of prisoners at all times and enforce the rules consistently.

- S50 Key concern: Most of the living accommodation had not improved since our last inspection. Seventy-eight cells designed for one were holding two prisoners. No cells had curtains and toilet screening in some shared cells was very poor. Most showers were filthy and in a dreadful state of disrepair. Most wings had some working telephones, but not enough, and access to them was limited. There were no lockable cupboards in any cells and regular access to basic kit had only started just before our inspection.

Recommendation: All living accommodation should be clean, decent and fit for purpose.

- S51 Key concern: Equality and diversity work was weak despite some recent improvement. Support for prisoners from protected characteristic groups was underdeveloped, local policies needed review and prisoners had no reliable way to raise concerns either individually or as a group.

Recommendation: Regular consultation and monitoring should inform provision for protected groups and ensure that outcomes are fair.

- S52 Key concern: Prisoners had lost faith in the complaints and discrimination incident report form (DIRF) system. Far too many complaints were responded to late and many of the small number of DIRFs submitted in the previous six months were not responded to. Complaints made about staff were not taken seriously or investigated thoroughly. We found an example of a prisoner who had made a serious allegation against a member of staff more than four months previously which had not been investigated. Investigations were not thorough enough, and in one investigation the prisoner was not spoken to about the complaint.

Recommendation: All complaints, including those made against staff, should be taken seriously and investigated promptly and thoroughly.

- S53 Key concern: A lack of strategic action had resulted in a health service that was not able to function effectively largely because the prison failed to facilitate consistent access to health services. Medication administration sessions were protracted, often poorly managed by officers, and some patients arrived late because of regime restrictions, reducing the time to run clinics. This affected the take-up of secondary health screening, immunisations and vaccinations and NHS health checks. There was a high failure-to-attend rate for mental health and dental services and a wasted clinical resource.

Recommendation: Patients should have prompt access to health services, including sufficient officers to ensure safe and timely medication administration and prompt attendance at health clinics.

- S54 Key concern: The limited time that prisoners spent unlocked was a real concern and was seriously undermining daily life in the prison. During our roll checks we found 44% of prisoners locked in their cells. The published regime was not fully adhered to and we observed considerable slippage. The prison had implemented a lock-down rota for all wings and it was concerning that on one unit prisoners could spend nearly 60 hours locked in their cells with no basic entitlements such as showers and telephones. Time in the open air was available each day but it was not appropriate that prisoners had to decide between attending activities or getting exercise.

Recommendation: A decent regime should be implemented so that prisoners can spend at least 10 hours a day out of their cells, during which they can attend activities, spend time in the open air and access association.

- S55 Key concern: Leaders and managers had not focused sufficiently on increasing the number of activity places to accommodate the population. Prisoners' participation in education, skills and work was not sufficiently good and employment was an issue. Prisoners' punctuality was poor and the process of allocation to activities was weak. Leaders and managers had not focused sufficiently on improving the provision of skills and work areas across the prison.

Recommendation: Leaders and managers should ensure that there are sufficient purposeful activities for all prisoners, that prisoners are allocated quickly and

arrive on time, and that there is focus on improving the provision of skills and work throughout the prison.

- S56 Key concern: Prisoners' initial assessment results were not used sufficiently by tutors and trainers to develop individual learning plans. Peer mentors did not receive enough direction and support from prison managers to ensure that they were able to support prisoners effectively. Tutors did not always correct prisoners' errors in English and mathematics work.

Recommendation: Managers should ensure that teachers use prisoners' initial assessment results to identify clearly their starting points and that individual learning plans are used to identify learning objectives which improve prisoners' skills and preparation for employment and further promote the development of English and mathematics skills. Prison managers should ensure that peer mentors receive enough direction to enable them to give better support to prisoners.

- S57 Key concern: Not enough work in the industries workshops was accredited.

Recommendation: Managers should ensure that the development of all prisoners' skills is monitored, recorded and accredited where appropriate.

- S58 Key concern: Despite improvements in the availability of offender supervisors and in their training and supervision, the levels of contact with prisoners and the quality of OASys assessments, on which these contacts were based, were not good enough.

Recommendation: The prison should ensure that the quality of OASys assessments improves and that the plans produced are delivered through structured contact with prisoners.

- S59 Key concern: The range and number of accredited programmes to address offending behaviour had suffered a serious decline. There were very few lower-level interventions to help prisoners reduce their risks.

Recommendation: The prison should ensure that prisoners can benefit from a suite of interventions, including accredited programmes, to reduce the risks they present.

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 Prisoners we spoke to during their initial reception said that the escort contractor treated them well. Vehicles that we looked at were clean with no graffiti. Prisoners were admitted into reception quickly on arrival.
- I.2 The reception area was very clean and the staff team were friendly and approachable. However, the holding room was spartan and prisoners were expected to wait for long periods on hard benches with little to occupy them.
- I.3 The reception process was confidential and focused on care. Staff completed an initial risk assessment and health care staff carried out a detailed interview with each prisoner in a private room.
- I.4 There was no accessible telephone in reception for prisoners to contact their families, nor were there showers. Prisoners had to wait until they were on the first night centre to use these facilities. A meal was provided from the kitchen which could slow the reception process and was difficult to arrange outside usual mealtimes. The prison bought a microwave and freezer during the inspection to resolve this issue.
- I.5 No peer mentors were available to answer prisoners' initial questions about Portland. This fell to staff who saw each prisoner individually, again slowing the reception process.
- I.6 Prisoners were able to buy a reception pack of basic items for their first few days. In our survey, a significantly higher percentage of prisoners than in comparable prisons said they were offered nicotine replacement, toiletries and basic items.
- I.7 The first night centre (Collingwood) was clean and the cells contained fresh bedding, kettles and televisions. Prisoners were given access to the telephone and showers and staff provided any further first night information that was needed.
- I.8 Prisoners who arrived late were seen by reception and first night staff, but some prisoners had to wait until the next day to see a member of health care staff. There was no system of enhanced checks to support these prisoners during the night if a full health care assessment had not been completed.
- I.9 The comprehensive induction programme was delivered by the education provider. It took four days but prisoners had to wait at least a week to start the programme. Most prisoners did not complete a full induction because the programme did not take place regularly, leading to backlogs of men waiting for induction. About 20 prisoners were allocated to the induction programme, but the classroom could not accommodate this number. At the time of the inspection, seven prisoners were undertaking induction.

- I.10** Prisoners on the first night centre were only unlocked during the day for appointments such as health care or visits. Association was available four nights a week and during afternoons at the weekend and new receptions also had association on Friday evenings. Exercise and phone calls took place during these periods. At the time of the inspection, four prisoners who struggled to cope on the main wings were located on the first night centre. The care they received from staff was good but they were also locked up for extended periods with little to occupy them.

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** Behaviour management was undermined by a lack of supervision and challenge by staff. In our survey, 43% of prisoners said they had felt unsafe at some time and one in five felt unsafe at the time of the inspection. Levels of violence had been very high in 2018 and had reduced since then. They were now similar to the previous inspection and higher than comparable prisons. During the previous six months, there had been 118 assaults and 43 fights. Some of the violence had been very serious (see key concern S45).
- I.12** The strategic management of violence reduction was poor. A victimisation and violence reduction policy and safety strategy had recently been put in place, but it was not underpinned by thorough analysis of data to understand the causes of violence. Safer custody meetings were held each month to review and compare the number of adjudications following acts of violence and data from the violence diagnostic tool. However, no actions were generated to reduce violence. The area safety group had recently completed a detailed review of the causes of violence which had yet to lead to action to reduce violence.
- I.13** Challenge, support and intervention plans (CSIPs)¹⁰ had been introduced to manage perpetrators of bullying and violence. At the time of the inspection, six prisoners were subject to CSIP, but the implementation of the plans was very poor. Case managers were unaware of their role, staff working directly with prisoners on CSIPs were unaware of plans or targets and progress was not effectively monitored. Although the use of CSIPs was overseen by the weekly safety interventions meeting, cases were not always discussed. Support for victims of violence and bullying was underdeveloped. They were managed through individual enhanced victim support plans rather than CSIPs, and only seven prisoners had been involved in the last six months. Effective monitoring and implementation of plans had yet to be developed.
- I.14** The initial recording of incidents of violence was not reliable and the safety custody team carried out a cross-checking exercise to ensure that all incidents had been recorded. This could take up to two weeks which prevented investigations from being carried out swiftly. Fact-finding investigations under the CSIP process were often not sufficiently thorough. This impeded efforts to reduce violence. There was only one violence reduction peer representative who had been recruited two weeks before our inspection.

¹⁰ Challenge, support and intervention plans are used to challenge perpetrators and support victims of violence and anti-social behaviour.

- I.15** The strategy to manage the safety and care of prisoners who were self-isolating was better than we usually see. A daily regime was delivered for most of these prisoners, which included work, a shower and telephone call.
- I.16** Beaufort wing provided a better environment for prisoners who engages with the regime and was working towards becoming an enabling environment.¹¹ However, this was an isolated example and for most prisoners there was too little incentives across the prison to encourage prisoners to behave well or progress.
- I.17** In our survey, only 32% of prisoners said the incentives and earned privileges (IEP) scheme encouraged them to behave well and our findings confirmed that there were too few incentives to encourage prisoners to behave well or progress. The IEP scheme was poorly implemented, patterns of poor behaviour went unchallenged, reviews did not always take place and all prisoners demoted to basic level were given the same 17 behaviour targets. A new IEP policy was due to be implemented shortly after our inspection (see key concern S46).

Recommendation

- I.18 Managers should ensure that systems for challenging and changing poor behaviour and assisting vulnerable prisoners are implemented effectively.**

Adjudications

- I.19** During the previous six months, 1,027 adjudications had taken place, a significant decrease since the last inspection but still higher than comparable prisons. Some adjudication records that we looked at indicated a lack of enquiry and some could have been dealt with by less formal means such as IEP warnings.
- I.20** Appropriate data were collated but not analysed well enough to identify trends and themes and address weaknesses in the adjudication process. Some data were inaccurate. There had been no standardisation meeting for a considerable time and quality assurance had resumed only shortly before the inspection.
- I.21** The process for referring potential criminal offences to the police was poorly managed. The prison did not know how many cases had been referred and did not routinely pursue outstanding cases.

Use of force

- I.22** Force had been used 234 times in the last six months, an increase of a third since our last inspection and more than we see at similar prisons. The recorded use of batons had reduced significantly to only one case which was fewer than at similar prisons.
- I.23** Until recently, many use of force records had been incomplete. Recent management action had succeeded in significantly improving the completion rate. However, too many ‘injury to prisoner’ and debrief documents remained outstanding and the quality of paperwork varied, with too much lacking detail and failing to describe incidents adequately.

¹¹ Enabling Environments are accredited by the Royal College of Psychiatrists. They are places where there is a focus on creating a positive and effective social environment and where healthy relationships are seen as the key to success.

- I.24** There remained some significant gaps in the management and monitoring of use of force and only three use of force meetings had been held so far in 2019. Longstanding concerns persisted over the lack of use of body-worn video cameras, too few staff trained in control and restraint and the lack of an embedded robust governance structure.
- I.25** The introduction of a scrutiny panel to review footage and paperwork was a promising initiative intended to complement the monthly use of force committee meetings. It was too early to judge its effectiveness.
- I.26** Not all planned incidents were available for us to view. Approximately a third were available, most of which had been recorded on body-worn video cameras. Recordings did not always show what was happening and initial briefings and post-incident debriefs were absent in most cases. The footage we viewed demonstrated proportionate force, including attempts at de-escalation. However, some learning points had not been identified or addressed.
- I.27** The use of special accommodation remained low with only two incidents in the past six months. We found no justification for one of these cases.

Segregation

- I.28** During the previous six months, 70 prisoners had been segregated, significantly less than at the previous inspection and similar prisons. Most periods in segregation were relatively brief but in the last six months two prisoners had been held for more than 42 days, one at the time of our inspection. Despite individual risk assessments of each prisoner on arrival in the segregation unit, all prisoners were strip-searched.
- I.29** Data on use of segregation had not been recorded or analysed for some months and there had been no meetings of the support and monitoring review group until shortly before our inspection.
- I.30** Living conditions on the unit had improved since the last inspection. It was clean and benefited from natural light, but five of the 10 cells remained out of use, some for lengthy periods. A limited range of books were available but were rarely changed. Newspapers were routinely provided. Wind-up radios were offered only after the first 72 hours of segregation and if requested by the prisoner. Some prisoners spoke positively about staff. Some staff knew the prisoners well and we observed respectful interactions. However, relationships with the most challenging prisoners were limited, in part because of unlock requirements. Exercise yards were small but contained some exercise equipment.
- I.31** Records of segregation reviews indicated multidisciplinary attendance. At the time of our inspection, two prisoners were on open ACCTs¹² but daily defensible decision logs to review the need for continuing segregation had not always been completed. Reintegration planning was underdeveloped for prisoners who refused to leave the segregation unit and return to normal location.
- I.32** The regime remained too limited. Outdoor exercise for 30 minutes and a shower were offered each day, but telephones could be used only three times a week. There was no access to the library or gym and no opportunity for association. Health care staff and members of the chaplaincy visited each day.

¹² Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

Security

Expected outcomes:

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

- I.33 The local security strategy had not been reviewed for six years and security arrangements were too restrictive in some areas for a category C prison. A controlled unlock continued at lunchtime to serve meals and mandatory strip-searching still applied in many areas.
- I.34 The management of intelligence was good. During the previous six months, 3,202 intelligence reports had been submitted, more than at the previous inspection and in comparable prisons.
- I.35 This intelligence was discussed at monthly security meetings, which were well attended on a multi-agency basis and produced appropriate actions. The level of information was impressive and had led to a high level of analysis. A comprehensive picture had been developed of gangs in the prison and the management of these prisoners was good. A dedicated police intelligence officer was based on site.
- I.36 A supply reduction policy, meeting and action plan were in place. Reducing reoffending, health care and security departments worked collaboratively to deliver improvements. There had been a steady reduction in the rate of positive random drug tests over the previous six months, with an average of just 5.13% positive against a target of 26.2%. This was a significant reduction since our previous inspection.
- I.37 The prison was clearly putting resources into security work. There had been a 50% increase in the number of target searches over the previous three months and suspicion drug testing had also increased. However, this was still not adequate and about half the identified target searches still did not occur.
- I.38 The recent purchase of an ion detector to scan mail for illicit substances had had a significant impact on the levels of new psychoactive substances (NPS)¹³ in the prison. Prisoner movements had also been adjusted to reduce the opportunity to collect parcels thrown over the perimeter.
- I.39 At the time of inspection, three prisoners were on closed visits and five visitors were banned, all for appropriate visits-related activity. Each case was discussed at the monthly security meeting and reviews took place on time.

Recommendation

- I.40 **All security processes should be reviewed to ensure they are appropriate for Portland's role as a category C training prison.**

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

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 more than doubled since our last inspection. There had been 197 incidents of self-harm in the previous six months. This was much higher than in similar prisons and compared to 94 incidents at our last inspection.
- I.42** The quality of most ACCT documents was poor. Comments were cursory, observations were missing and some elements of risk assessments were incomplete. In one particularly poor example, we found a prisoner with complex mental health needs and a history of significant self-harm who had spent long hours on the wing, mostly locked up, with no care map in his ACCT and no actions to support him. ACCT documentation was much better on the segregation unit and first night centre (see key concern S48).
- I.43** The quality assurance process was confused and ineffective. We found three different reporting sheets, managers were unsure which to use and they were not signed every day. Only one form contained space for actions to be noted, but actions were rarely identified.
- I.44** All prisoners subject to ACCTs, self-isolation or the violence management process were reviewed at the safety intervention meetings. At the time of the inspection, 18 prisoners were on ACCTs, six on violence management and a further 20 self-isolating. Six of these had been identified as complex cases. The level of discussion and care for these prisoners was good, but there were too many cases for each meeting to address and reviews of other prisoners were cursory and lacking detail or action.
- I.45** The prison had recently commissioned a review from area office into the causes of self-harm and were beginning to understand and address these factors.
- I.46** At the time of the inspection, all 18 prisoners subject to ACCTs were on basic or standard levels of the IEP scheme. Only four were employed and one was listed for a future education course. In consequence, nearly all prisoners in crisis were locked up for long periods. Their regime was curtailed, they had little opportunity for family contact and support and had to rely on their families for money to buy other than basic items.
- I.47** At the time of the inspection, there were four Listeners¹⁴ in the prison. In our survey, only 24% of prisoners said a Listener was easy to speak to if needed against the comparator of 40%. Listeners had only been used on five occasions in the last six months.

Protection of adults at risk¹⁵

- I.48** There was no adult safeguarding policy, although a draft was due for publication. The governor and head of operations had recently formalised a memorandum of understanding

¹⁴ Prisoners trained and supported by the Samaritans.

¹⁵ 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

with the Dorset Safeguarding Adults Board, but this was not yet in operation. Staff did not know what to do if a prisoner reported abuse.

- I.49** The social care needs of vulnerable prisoners were discussed at the safety intervention meeting, but these needs were largely unmet. Self-isolating prisoners were also considered, but not in sufficient depth to generate meaningful actions.

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- is experiencing, or is at risk of, abuse or neglect; and
 - as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse and neglect (Care Act 2014).

Section 2. Respect

Prisoners are treated with respect for their human dignity.

Staff-prisoner relationships

Expected outcomes:

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

- 2.1 In our survey, only 59% of prisoners said that staff treated them with respect and 60% that they had someone they could turn to if they had a problem against respective comparators of 70% and 71% (see key concern S49).
- 2.2 There was no personal officer scheme, but some prisoners had been allocated a key worker. At the time of the inspection, too few sessions were taking place for the scheme to be fully effective.
- 2.3 Staff-prisoner relationships were reasonable, we observed some good interactions and most prisoners spoke to us positively about staff. We also observed some inappropriate behaviour towards a prisoner by a member of staff which we reported to prison management. Prisoners spent far too long locked in their cells which affected their relationships with staff (see paragraph 3.1).
- 2.4 Staff supervision of prisoners required improvement. Too many staff congregated in offices on the wings while prisoners were unlocked and we saw staff standing in groups in exercise yards while prisoners were there. Far too many prisoners were allowed to break low-level rules with no appropriate challenge from staff, for example prisoners were using vapes in the prison whenever they liked.

Daily life

Expected outcomes:

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

Living conditions

- 2.5 The quality and cleanliness of accommodation had not improved since our last inspection with the exception of Beaufort wing and some communal areas (photo 1). Some wings and cells had been painted but there was still ingrained dirt on floors and walls in far too many areas. In our survey, only 39% of prisoners against the comparator of 60% said they could access cell cleaning materials. The cupboards that were used for cell and wing cleaning equipment were filthy with a limited supply of decent materials. Most cells had basic furniture and some had privacy locks on the doors, but there were no lockable cabinets and no cells had curtains. Most wings had some working telephones, although access was limited and the booths offered very little privacy (see key concern S50).

- 2.6** Showers were a particular concern. Most wings did not have enough showers and not all of them were working. Showers that were in use were filthy with inadequate privacy and access to them was limited by the poor regime (photo 2). In our survey, 56% of prisoners said they could shower every day against the comparator of 90%.
- 2.7** In our survey, 54% of prisoners said they had access to enough clean, suitable clothes against the comparator of 70%. We were told by managers that provision of basic items such as clothing, bedding and towels had improved immediately before the inspection, but only 39% of prisoners said they could access clean sheets every week compared with 61% at the previous inspection.
- 2.8** Seventy-eight cells designed for one were still holding two prisoners and were far too cramped. Some shared cells afforded very little screening for toilets.
- 2.9** Outside areas were reasonably tidy and the main exercise area was a pleasant place for prisoners to spend time in the open air (photo 3).

Recommendation

- 2.10** **There should be sufficient telephones for prisoners on all wings and they should afford suitable privacy.**

Residential services

- 2.11** In our survey, comparatively fewer prisoners (28% v 44%) thought the quality of food was good and only 40% thought they received enough food.
- 2.12** The principal cause of discontent remained the fact that the only hot meal of the day was served at lunchtime. The practice of serving evening meals at cell doors was disrespectful. The evening meal was inadequate in quantity and some menu options were not appropriate for a cold meal.
- 2.13** The standard rolling four-week menu provided a reasonable choice of meals, although limited for vegan prisoners. Fresh fruit was available at each meal and special diets could be catered for on referral from health care.
- 2.14** However, recurring staff shortages had resulted in a temporary reduction in the number of meal options from five to three. By way of compensation, portion sizes had been increased and were currently plentiful for the lunchtime meal.
- 2.15** The kitchen was reasonably clean and prisoners could gain a level 2 qualification in food safety. However, some equipment needed repair including the halal freezer which had been broken for five to six weeks.
- 2.16** Prisoners serving food on the wings did not always wear appropriate clothing and some wing servery areas were dirty. Staff supervision at serveries was inadequate. Kitchen staff told us that food often went missing from trolleys and staff frequently returned to request additional meals. There were communal toasters and microwaves, but prisoners were unable to buy or cook their own food and could eat together only on Beaufort wing.

- 2.17** Arrangements for prisoners to purchase items from the prison shop were reasonably good. New arrivals were able to buy some items when they arrived, and a loan was made available for those without funds, reducing the potential for debt.
- 2.18** However, in our survey only 49% of respondents against the comparator of 62% said that the shop sold the things that they needed. Consultation about purchases did not take place often enough to effect many changes. Prisoners we spoke to were frustrated at being unable to buy food items to cook with, while the prison reported difficulties in getting the supplier, DHL, to make changes to the items on the canteen sheet.
- 2.19** Prisoners could order items from only two catalogues, fewer than we normally see. No administration charge was applied and delivery charges were kept to a minimum. Prisoners could experience delays in receiving their orders because of the regular redeployment of reception staff.

Recommendation

- 2.20 Prisoners' dissatisfaction with the food should be fully investigated and addressed.**

Prisoner consultation, applications and redress

- 2.21** The prison council had been set up recently after very limited consultation with prisoners. The council was not well promoted on the wings and most prisoners we spoke to did not know of it, nor did they ever see minutes of meetings. Prisoner representatives did not wear identifiable clothing. They were very negative about their role which they felt was ineffectual, with basic items requested remaining unresolved for months. The council was poorly attended by managers, and prisoner representatives were justifiably frustrated.
- 2.22** In our survey, nearly half the prisoners said applications were dealt with fairly but too many said they were not responded to within seven days. The procedure was cumbersome and too many applications received late responses. Most prisoners we spoke to had little faith in the process.
- 2.23** Too many complaints were responded to late, but this had been recognised and some recent improvements had been made. Most responses to general complaints were good but some were quite dismissive.
- 2.24** There had been 19 complaints against staff in the previous six months, including serious allegations. Most of these complaints were not thoroughly investigated or addressed and some were not investigated at all. Some prisoners waited months for responses. We asked to see records of an investigation that should have taken place in April 2019 to find a cursory investigation carried out on the day we requested it. This was unacceptable.
- 2.25** There were still no dedicated staff to provide legal support for prisoners and support from offender supervisors was limited. The library offered good access to legal materials, including foreign national law and most prison service orders.
- 2.26** The main visits hall continued to be used for legal visits, which did not afford sufficient confidentiality. There were no facilities for legal teams to view camera footage with prisoners.

Recommendation

- 2.27** The application system should ensure that prisoners receive a timely response to their requests.

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 characteristics¹⁶ 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

- 2.28** Equality and diversity work had declined since the previous inspection but there were signs of recent improvement to the strategic oversight of the work. The prison was receiving support from the prisons group director (PGD) team to develop plans to improve performance in this area. Managers were clear about the improvements that were needed and had started to put sensible foundations in place including the development of an action plan to provide direction, identify managers as protected characteristic leads and develop a region-wide approach to the collection and use of monitoring data (see key concern S51).
- 2.29** The equality policy was up to date and set out a framework for delivery of equality and diversity work. Other policies which described support for specific protected characteristic groups had not been reviewed for nearly two years and there was limited awareness of these policies. The monthly diversity and race equality team (DREAT) had not met for two months in the spring of 2019, but subsequent attendance, which included prisoner and community representation, had been appropriate. The meeting was being used to direct improvements to equality and diversity work and, at the most recent meeting, attendees had been challenged to progress agreed actions promptly rather than carry too many forward.
- 2.30** Initial focus groups to inform understanding of the needs of the different groups had been arranged more swiftly for some groups than others. When they had taken place, there was evidence of follow-up work and actions being added to the new equality action plan.
- 2.31** The centrally produced equality monitoring data were only available up to March 2019 and the prison was still developing its own monitoring with support from the PGD team. The most recent DREAT meeting had determined that monitoring of allocation to roles such as orderlies, peer mentors, the kitchen and release on temporary licence (ROTL) was needed at future meetings. The available data were reviewed at the DREAT to identify areas which needed more investigation.
- 2.32** Only 11 discrimination incident report forms (DIRFs) had been submitted in the previous six months, fewer than at the previous inspection. Oversight of DIRFs was weak. Only three of the 11 had been investigated and received substantive replies. Access to forums to raise issues had also been limited over this period and prisoners did not have sufficient reliable means of getting their concerns addressed (see key concern S52).

¹⁶ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

Protected characteristics

- 2.33** Identification of the protected characteristics of new arrivals was carried out using a questionnaire. Support for protected characteristic groups was generally underdeveloped.
- 2.34** Just over a quarter of the population were from a black and minority ethnic background. In our survey, most of their responses were similar to those of white prisoners. Black and minority ethnic prisoners generally voiced the same concerns to us as other prisoners, but some also felt they were treated differently by some staff. The PGD team had recently examined this area in more detail and determined that more work was needed to understand and address the negative perceptions of this group. There was no regular forum for black and minority ethnic prisoners and monitoring data on treatment and outcomes were limited.
- 2.35** The prison had identified eight prisoners who were Gypsy, Roma or Travellers. The chaplaincy and library organised meetings for the group. These included internal and community guests, for example the prison's Shannon Trust¹⁷ representatives had attended the meeting in July 2019 and four members of the group had signed up with them.
- 2.36** There were 39 foreign national prisoners at the time of the inspection. One who was detained solely on immigration grounds was transferred to an immigration removal centre shortly after completing their sentence. Home Office immigration surgeries had restarted after a gap of a few months. No independent immigration legal advice was available. Some use was made of telephone interpreting, but we were not confident it was being used often enough. The records of one prisoner showed it had been used to carry out his initial OASys interview but not during induction, even though it was noted that he did not always understand the proceedings.
- 2.37** In our survey, 29% of prisoners identified themselves as having a disability and just over a quarter said they were getting the help they needed. The prison was aware of 139 prisoners with disabilities which equated to 28% of the population. Many had mental health and learning and educational needs. Two prisoners had personal emergency evacuation plans. Residential units did not have copies of the plans and not all staff were aware of who these prisoners were or the help they needed. A small focus group organised by the disability protected characteristic lead had recently taken place and work in progress included an event for dyslexia awareness week.
- 2.38** Twenty-two prisoners were aged 50 or older at the time of the inspection. Other than a gym session for over 45s, there was no provision for them. A quarter of the population were young offenders aged 18 to 20, some of whom were in transition from the youth custody estate. Most lived on two residential units with higher staffing ratios. There was otherwise nothing to distinguish their care and management from that of other prisoners. Forty-five per cent of the population were younger than 25 and, in our survey, only 43% against the comparator of 75% said they were treated with respect by most staff. The prison was planning to introduce a maturity assessment tool, but there was no strategy for this group of younger prisoners, nor any policies aimed at the needs of this age group.
- 2.39** There were no trans prisoners at the time of the inspection, nor had there been recently. Very few prisoners shared with the prison that they were gay or bisexual. A prisoner focus group to discuss sexual orientation indicated an acceptance that prisoners would not feel safe to disclose. This perception needed to be investigated and addressed.

¹⁷ Provides peer-mentored reading plan resources and training to prisons.

Faith and religion

- 2.40** The chaplaincy included employed and sessional chaplains who continued to provide a good service to prisoners with support from community volunteers. The faith facilities were suitable for the population with a large space for group worship and smaller rooms for faith groups, classes or individual sessions. Power was now available in these rooms. One room was equipped as a small Christian chapel, but neutral décor made the other rooms accessible to all faiths.
- 2.41** A suitable range of faith-based groups, classes and group worship was scheduled through the week. However, at weekends group worship coincided with gym and association which required prisoners to make a choice.
- 2.42** The full-time managing chaplain was part of the senior management team. Chaplains took part in strategic meetings such as equality, security, safety and resettlement. They saw prisoners in the segregation unit each day. A chaplain visited prisoners managed on ACCTs¹⁸ and CSIPs¹⁹ each week and noted on the electronic case records if they were unable to attend the reviews of these prisoners. The Sycamore Tree (victim awareness) programme had been introduced. New receptions were seen promptly and prisoners approaching release were offered help in making links with local faith communities. Some community mentoring was available. The chaplaincy managed the volunteer prison visitors and penfriend schemes.

Health, well-being and social care

Expected outcomes:

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

- 2.43** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)²⁰ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. The CQC did not identify any breaches in the regulations.

Strategy, clinical governance and partnerships

- 2.44** Care UK Health and Rehabilitation Services Limited (Care UK) had been the main provider of health services since April 2017 and they subcontracted a range of services.
- 2.45** A range of governance meetings included partnership board meetings, a monthly local delivery board which had recently started and a task and finish group, chaired by HMPPS. Subcontractor meetings had been introduced and were a useful forum for reviewing the provision between the Dorset prisons.
- 2.46** Partnership working had improved recently with the allocation of a governor to liaise with health care to address longstanding issues. However, the health service was unable to

¹⁸ Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

¹⁹ Challenge, support and intervention plans are used to challenge perpetrators and support victims of violence and anti-social behaviour.

²⁰ 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>.

function effectively largely because the prison failed to facilitate consistent access to health care services (see key concern S53).

- 2.47** The health needs assessment had been revised in 2017 but did not reflect the current need.
- 2.48** Health staff were aware of the importance of reporting incidents. Trends were analysed and used to inform shared learning and changes to practice when the provider could influence this. However, data from the previous 12 months indicated that the delivery of health services had been adversely affected by a lack of officer support to enable access to services (see key concern S53). Medication administration sessions were protracted and clinics cancelled. Several inappropriate prison transfers had been made of prisoners with acute physical and mental health conditions which the health provider had to resolve. Despite escalation of these incidents to commissioners and the prison, this still prevailed at the time of the inspection.
- 2.49** We observed a skilled and dedicated workforce striving to deliver good care and interacting positively with patients. Staffing levels were stretched which hindered delivery of some services. This was mitigated by use of regular agency and bank staff, but the head of health care and clinical leads frequently covered any shortfalls.
- 2.50** Clinical supervision systems were embedded and staff felt supported. There was a high rate of compliance with mandatory training and professional development opportunities were available.
- 2.51** Health care staff handover meetings took place each day and a weekly multi-professional complex case meeting demonstrated effective working and the promotion of good standards of care.
- 2.52** The health centre was separated from the rest of the prison by a large fence, which was unwelcoming. Clinical rooms generally met infection control requirements, but the floors needed a deep clean including the treatment room on Raleigh unit. Some of the sharps boxes were not secured to the wall and we found some out-of-date items which were removed during the inspection.
- 2.53** Holding rooms in the health centre remained unsuitable. One had improved but the other was stark and still had wooden bench seats which were a safety risk (photo 4). Patients were locked up for too long in an overcrowded, cramped and poorly managed area. We observed prisoners vaping in the holding room which was not challenged by officers (see paragraph 2.4).
- 2.54** A health care clinical forum with wing representatives was a promising initiative with 'you said, we did' posters displayed. In March 2019 the issue had been raised of health care appointment slips not being received. Some prisoners mentioned this concern to us during the inspection and health staff were investigating this.
- 2.55** Primary care staff were available from 8am to 6pm every day. They responded to emergencies and had received intermediate life support training. Automated external defibrillators (AEDs) and resuscitation equipment were strategically sited across the prison. However, we found out-of-date AED pads in reception which were replaced and anomalies with the frequency of checks. A new system had recently been implemented to identify stock that needed replenishing, but more regular checks were needed.
- 2.56** There was an independent health complaints system. Formal written complaints were responded to in a timely manner and were polite. Prisoners were encouraged to raise concerns to be resolved verbally and these were logged. The governance of complaints was very good and trends were monitored at local governance meetings.

- 2.57** All health staff used one electronic clinical record (SystemOne). Records that we reviewed indicated that patients were involved in their care and consent was recorded for treatment and information sharing.

Promoting health and well-being

- 2.58** There was no whole-prison approach to health promotion, but a calendar of health promotion events had been developed and the recent World Hepatitis Day was well received, with 250 prisoners attending.
- 2.59** Health staff did not attend induction sessions for new arrivals and there was no local health information leaflet. Other health promotion literature was displayed but was not readily available in languages other than English. The application form for appointments included helpful pictorial signs. Telephone interpreting services were available when needed.
- 2.60** Community screening programmes were delivered and a range of sexual health services were provided in house and by community specialists. Barrier protection and harm minimisation advice were available and advertised.
- 2.61** Immunisations and vaccinations, NHS health checks and health checks for patients on mental health medication were offered but seldom delivered because regime restrictions prevented ready access (see key concern S53).
- 2.62** The gym delivered exercise sessions to promote health and well-being on referral from the GP. Smoking cessation support and nicotine replacement therapy were available but take-up was low.
- 2.63** A suspected communicable disease outbreak had been appropriately managed with good links with Public Health England.

Recommendation

- 2.64** **There should be a whole-prison strategy and approach to support health promotion and well-being activities.**

Primary care and inpatient services

- 2.65** Registered nurses or health care assistants conducted reception screening for newly transferred prisoners to identify immediate need. The service had recently introduced a 'point of care test', an optional diagnostic test for HIV, Hepatitis B and C. We observed staff explaining the implications of this clearly, but we had reservations about delivering a positive result at this provider stage rather than at a second health screening when the prisoner had settled in. The service had decided to do this at reception because of prisoners' limited access to secondary screening. Over the previous six months, attendance rates for secondary screening had been as low as 30%, increasing to 62% in June 2019. This was still too low and opportunities to identify, treat and promote health and well-being were limited (see key concern S53).
- 2.66** There was a suitable range of primary care services, most of which had reasonable waiting times, and additional sessions were delivered to help reduce the waiting lists for the optician and the dentist. Urgent 'on the day' GP appointments were facilitated, and routine GP

appointments were available promptly, which was good. Out-of-hours emergency GP cover was provided to the same level as in the community.

- 2.67** The NHS England Quality and Outcomes Framework supported the identification and monitoring of prisoners with long-term conditions. Some nurses had received additional training, but most patients were managed by the GP with regular reviews.
- 2.68** External hospital appointments were well managed, with few cancellations through lack of prison escort staff. Telemedicine had started to be used with positive patient feedback.
- 2.69** On release, patients received a GP discharge letter describing the care they had received and any continuing medication. Patients were encouraged to collect their medication before leaving but were not always brought to health care to collect it. Patients could choose to have their information via a phone app but take-up was low.

Social care

- 2.70** Prisoners with social care needs were identified and referred to the local authority by health staff. Information had recently been displayed to inform prisoners of the self-referral process. Links with the local authority had recently been established and a draft memorandum of understanding was being reviewed by the prison.
- 2.71** One patient was being assessed for a social care package at the time of the inspection. We observed mental health and primary care teams working well to support the prisoner's transfer and discharge arrangements.

Mental health care

- 2.72** The current mental health service did not meet the service specification and was not informed by an up-to-date needs assessment. However, work was in progress to develop the service and ensure that the provision reflected the service specification.
- 2.73** Care UK delivered an integrated mental health service, including emotional health and well-being, self-help guidance, psychology and individual interventions. An assistant psychologist had been recruited to deliver cognitive behavioural therapy. Locum psychiatry provision was in place but the service was not consistent.
- 2.74** Chronic staff shortages limited the range of treatment options. Efforts were made to attract new staff, but recruitment was a significant challenge. The mental health team operated five days a week with plans to embed a seven-day service. The team consisted of one clinical lead, two agency mental health nurses and a health care assistant, an administrator and a further agency nurse due to start shortly.
- 2.75** Access to mental health services was affected by prison regime restrictions, with high failure-to-attend rates reflecting many occasions when the prison had been unable to facilitate movement to appointments (see key concern S53). Patients were not seen on the wings for safety reasons and a lack of privacy.
- 2.76** A duty worker saw all new arrivals within 24 hours to inform them of services and identify mental health needs. There was an open referral system and triage assessments were timely. Patients presenting in crisis could be seen on the same day. New referrals and assessments were reviewed at a weekly multidisciplinary team meeting. Complex case meetings were organised by the prison with mental health staff in attendance to support patients in crisis.

The team had an active caseload of 75, 45 of whom had severe and enduring mental health conditions and were managed effectively under the care programme approach (mental health services for individuals diagnosed with a mental illness).

- 2.77** Personal care plans were developed and records indicated regular, qualitative contacts.
- 2.78** The team attended the majority of ACCT reviews and contributed to the multidisciplinary support offered to prisoners who self-harmed. Staff also supported the work of the segregation unit.
- 2.79** Two patients had been transferred under the Mental Health Act to secure mental health units in the past six months, one within the transfer guideline of 14 days and the other taking 16 days.
- 2.80** Data indicated that 70% of operational prison staff had completed mental health training, which was positive.

Recommendation

- 2.81** **Prisoners with mental health conditions should have prompt access to a comprehensive range of care-planned support that meets their identified needs, including groupwork and psychologically informed interventions.**

Substance use treatment²¹

- 2.82** The local substance misuse strategy had been updated to reflect the national strategy. The substance misuse service contributed to monthly strategy group meetings and received referrals of prisoners testing positive or suspected of NPS²² use, of which there had been a noticeable decline recently (from 73 in June to 40 in July 2019).
- 2.83** EDP Drug and Alcohol Services continued to provide psychosocial support, shortly to be available seven days a week. The team was well led and resourced and contributed to induction and contact on the first night centre each day, and assessments within one to three days.
- 2.84** At the time of the inspection, 160 prisoners were engaged with the service and prisoners clearly appreciated the support they received. Structured one-to-one sessions were supplemented by excellent workbooks, and the broad range of interventions included the 10-session SMART Inside Out programme, a family group, first steps to recovery, 'Reduce the Use' and mindfulness groups and one-day awareness workshops. Additional support was provided by externally facilitated Alcoholics Anonymous, Narcotics Anonymous and Cocaine Anonymous self-help groups and an active peer mentor scheme.
- 2.85** Psychosocial and clinical services were well integrated, although not co-located. The clinical substance misuse lead was a non-medical prescriber from Care UK based in health care, and the poorly supervised movement of prisoners near her office gave rise to concerns for her safety. She was only available two days a week to assess, treat and review an average of 59 patients, almost a 50% increase since our last inspection.

²¹ In the previous report substance use treatment was included within safety, while reintegration planning for drugs and alcohol came under rehabilitation and release planning (previously resettlement).

²² New psychoactive substances generally refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vapourised and inhaled in e-cigarettes and other devices.

- 2.86** Although methadone regimes were flexible and subject to regular joint review, it remained the only opiate substitute treatment on offer because the prison could not accommodate buprenorphine administration.
- 2.87** Services for patients experiencing mental health and substance-related conditions remained inadequate, and there was no protocol or pathway for this patient group.
- 2.88** Pre-release preparation and through care arrangements were good, and bridging prescriptions of methadone were issued to ensure that treatment continued in the community. Harm reduction advice included Naloxone training to treat opiate overdose.
- 2.89** Prisoners were offered support with family court matters and family visits through EDP Drug and Alcohol family service, which actively engaged with 75 clients and focused on rebuilding relationships and family links leading up to release.

Recommendations

- 2.90** **The full range of prescribing options should be available, and prescribing decisions should be made on clinical need.** (Repeated recommendation 1.58).
- 2.91** **There should be sufficient provision for prisoners with both mental health and substance-related conditions.** (Repeated recommendation 1.59)

Good practice

- 2.92** *Prisoners with drug and alcohol conditions and their families benefited from a designated family service which offered a range of support and focused on rebuilding healthy relationships.*

Medicines optimisation and pharmacy services

- 2.93** Medicines were supplied by Sigcare Pharmaceuticals for prescriptions, and by AAH and Alliance, independent pharmaceutical wholesalers, for stock items. Repeat prescriptions were fulfilled promptly, but medicines from new prescriptions arrived up to 48 hours after the order which was frustrating for prisoners and staff.
- 2.94** Most medicines were supplied as named patient medication and contained patient information leaflets. Medicines were delivered and stored securely with stock checks to ensure that safe temperature storage was effective. Some of the cupboard doors in the clinic room on Raleigh unit were not lockable and were unsuitable. We found named patient medication for prisoners who had left, a loose strip of an antidepressant medication and unnecessary stock in an unlocked cupboard which was removed when we identified it.
- 2.95** The pharmacy technician and nurses administered medication in the health centre and on Raleigh unit at 8am and 4pm. Delays in the regime and the late arrival of patients being escorted to health care resulted in lengthy medicine administration times. There was a risk that a patient's late arrival could compromise the therapeutic effectiveness of medicines. We observed poorly supervised medication queues in the health centre and on Raleigh. Patients were afforded little privacy, increasing the potential for bullying and diversion of medicines (see key concern S53).
- 2.96** Computerised methadone dispensing equipment was now in use and was administered competently.

- 2.97** About 60% of prisoners on prescribed medication had it in possession following appropriate risk assessment at reception which was reviewed if there was a change in circumstances. There were no facilities for secure storage of medicines in cells which compromised the security of prisoners with in-possession medication and ran the risk of bullying and diversion.
- 2.98** A pharmacist now attended the prison once a week to give professional oversight to the service and was available to see patients. This was not advertised.
- 2.99** A systematic approach was taken to the management of tradeable medicines. The pharmacist completed regular audits and liaised with prescribers and the health care team to review their use. Prescribing activity was monitored and discussed at regular medicine management meetings. A full range of standard operating procedures and policies were accessible to staff electronically. There was a prescribing formulary and drug alerts were managed well.
- 2.100** A good range of patient group directions (PGDs)²³ were available. Paracetamol had been taken off the canteen list for security purposes. Discussions were in progress to reinstate it on the list with governance to ensure that health care staff were aware of any purchase.

Dental services and oral health

- 2.101** Time for Teeth delivered a full range of NHS treatments, with three sessions a week. Additional sessions were scheduled to address the long waiting list and meet demand.
- 2.102** The average waiting time to see the dentist was five weeks at the time of the inspection. Some patients had waited between 11 and 16 weeks because their appointments had been frequently rebooked. This was too long. Prison movements restricted the number of patients attending and non-attendance rates were very high (see key concern S53). This was monitored and recorded by the dentist, who triaged applications to ensure that patients in pain or with more serious dental problems were prioritised. Prisoners could be seen for emergency appointments at the end of each clinic if urgent treatment was required.
- 2.103** Records were good and the dental suite was well equipped and complied with infection control standards. Clear governance processes covered all aspects of practice, including training, equipment maintenance and waste disposal.

²³ Allow nurses to administer specified medicines without a prescription, including medicines to treat minor ailments.

Section 3. Purposeful activity

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

Time out of cell

Expected outcomes:

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

- 3.1 Prisoners engaged in activities had about eight hours 15 minutes a day unlocked. It could be as little as one hour 15 minutes for the 25% of prisoners not engaged in activities, but that depended on the published lock-down rota. For example, we found that prisoners on Benbow wing were locked up for nearly 60 hours at a time with no access to a domestic period (see key concern S54).
- 3.2 The restricted regime affected time out of cell for many prisoners which was exacerbated by chronic slippage of the regime. We observed many late roll checks which resulted in late unlocks for prisoners attending activities. Managers reviewed the routine lock-up rota each week, which generally resulted in more wings being locked up through staff shortages.
- 3.3 During our roll checks we found 44% of prisoners locked in their cells during the working day, which was worse than at our last inspection.
- 3.4 Exercise periods were available every day but were too short at 30 minutes a session. It was not acceptable that prisoners had to decide whether they would exercise or attend activities. We were told by some prisoners that if they chose exercise rather than activities they could be liable to sanctions through the incentive and earned privileges scheme.
- 3.5 In our survey, 21% of prisoners against the comparator of 49% said they had access to the library each week. There had been recent successful attempts to improve access and this needed to be sustained. There was no evening or weekend access which was a weakness. The library and learning resource centre (LLRC) run by Weston College was a welcoming environment with a suitable range of books and other materials to meet the needs of the population. These included foreign language books, legal books, magazines, newspapers, wellbeing packs, CDs, DVDs and jigsaw puzzles. LLRC staff collected data on the number of prisoners going to the library but did not analyse the data to identify which prisoners were using the facilities.
- 3.6 Work to promote literacy included the Six Book Challenge (an initiative inviting individuals to select six books and record their reading in a diary) and a local scheme in which prisoners received a positive comment on their case notes if they wrote a review of a book or article they had read. Storybook Dads (in which prisoners record stories for their children) was also offered by LLRC staff. A group for Gypsy, Roma and Traveller prisoners had been started (see paragraph 2.35).
- 3.7 The two gyms and all-weather area offered reasonably good facilities, but maintenance work was needed to prevent leaks in both gym buildings. Changing and shower facilities were adequate although showers were unscreened. There was also external gym equipment in the exercise area which we saw prisoners using.

- 3.8** The PE programme offered accredited courses and recreational sessions to all residential units, including in the evening. Two of the five gym orderlies were completing a gym instructor course. There were sessions for specific groups such as over 45s and prisoners referred by health care for remedial activities, as well as weekly induction sessions for new arrivals.
- 3.9** In our survey, 19% of prisoners against the comparator of 53% said they were able to use the gym twice a week and prisoners told us that regime issues curtailed their attendance. The team of six PE instructors had had one vacancy for several months and some sessions were not delivered.
- 3.10** Data were not analysed to monitor use of the facilities or identify any gaps in access.

Recommendation

- 3.11** **The prison should ensure that all prisoners can, and are encouraged to, pursue constructive leisure activities through regular opportunities to attend the library and learning resource centre and gym.**

Education, skills and work activities (Ofsted)²⁴

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.²⁵

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

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

Management of education, skills and work

- 3.13** Managers had only achieved just under half the recommendations made at the previous inspection. In the past few months, senior prison managers had restructured the

²⁴ 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.

²⁵ In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

management of education, skills and work which had provided a stronger focus on improving the quality of the provision.

- 3.14** Activity places were provided for about 85% of the population, most of which were full time. However, during the previous six months an average of only two-thirds of prisoners had attended activities which was too low and lower than at the previous inspection. Approximately a quarter of prisoners were unemployed (see key concern S55).
- 3.15** Prisoners' attendance at education had improved since the previous inspection and was now generally good. However, attendance at vocational training and workshops was too low, and prisoners' punctuality was poor. Prison staff lacked a sense of urgency in getting prisoners to activities and did not always ensure that they arrived on time (see key concern S55). Prison managers had recently introduced comprehensive systems to monitor prisoners' attendance and highlight unauthorised absences, but it was too early to measure the impact.
- 3.16** The management of prisoners' allocation to activities was weak. Staff were unclear about the number of prisoners who attended induction and those who missed it. Managers did not adequately check the prison's capacity for purposeful work, allocation to activities and attendance. Prisoners often had to wait too long to be allocated to an activity (see key concern S55). Prisoners were encouraged to attend education and they were financially rewarded for working towards and achieving qualifications in English and mathematics.
- 3.17** Self-evaluation of learning, skills and work by prison managers was broadly effective and improvement plans focused on what was working well and what needed to improve. Education managers had implemented effective arrangements for improving the quality of teaching, learning and assessment in education. Prison managers had not focused enough on other areas of skills and work across the prison, but they were making slow progress in securing improvements.
- 3.18** Prisoners had access to limited careers information, advice and guidance. Prison senior managers had contracted the education provider to deliver to prisoners the appropriate careers information, advice and guidance at induction and through their time at Portland. Only a few prisoners had good access to the virtual campus²⁶ for Open University and distance learning resources. The vast majority of prisoners were unable to access the virtual campus to obtain information about employment or further education.
- 3.19** Prison managers had continued to work productively with the education provider and they offered a good range of vocational training and meaningful work, including high quality Ministry of Defence work in the industries workshops. Plans were well advanced to develop and increase vocational training courses and qualifications in cleaning, waste management and laundry.
- 3.20** The education curriculum broadly met the needs of most prisoners. Education staff were responsive and provided good individual and group support in work areas and on the residential units when classes were closed because of the absence of education staff and shortage of prison officers. However, not enough prisoners were supported to develop their English and mathematics skills away from formal classrooms. Tutors effectively supported a small number of prisoners following Open University and distance learning courses. Staff supported prisoners with reading difficulties well through 'Turning Pages'²⁷ and other reading programmes.
- 3.21** Managers delivered a broad range of vocational training which met the needs of most of the population. Prison and education staff delivered courses that included construction,

²⁶ Prisoner access to community education, training and employment opportunities via the internet.

²⁷ A reading programme created by the Shannon Trust written specifically for adults and delivered by peer mentors.

horticulture, carpentry, bricklaying and bicycle maintenance. A few prisoners released on temporary licence were working in the external prison shop and café and developing good employability skills. Education staff did not provide any pre-release courses and managers did not track the number of prisoners who progressed positively into further education, training or employment on release.

Recommendation

- 3.22 Prison managers should make sure that the contract for careers information, advice and guidance is implemented urgently to ensure that prisoners are better informed about their career choices.**

Quality of provision

- 3.23** Many tutors had improved their practice of setting prisoners individual targets. They set useful short- and long-term aims and tracked prisoners' progress towards their qualifications. However, tutors and trainers used the individual learning plans inconsistently across all education and training programmes and many prisoners were unclear what they needed to do to achieve their goals. This had not improved since the previous inspection.
- 3.24** In vocational training, trainers did not always use prisoners' initial assessment results to plan individual learning to meet prisoners' needs (see key concern S56). In education, tutors used prisoners' initial assessment results much more effectively to plan learning.
- 3.25** Trainers supported prisoners well to develop their mathematics skills in a minority of workshops and vocational training. For example, in the cycle repair shop, prisoners used wall displays to help them understand gear ratios, tyre pressures and wheel diameters and circumferences. Tutors and trainers did not reinforce the importance of prisoners developing their English skills and did not always correct spelling, punctuation and grammar errors in written work. As a result, prisoners continued to make simple errors, particularly in spelling.
- 3.26** Prisoners used opportunities to train and work as peer mentors to help other prisoners across the prison. However, prison managers did not guide and direct mentors appropriately to ensure that they supported prisoners effectively (see key concern S56).
- 3.27** In education sessions, tutors generally planned teaching and learning well. They used interactive learning technology extensively and effectively to explain and reinforce topics. Prisoners were stimulated and participated in developing their own learning. In a minority of learning sessions, especially mathematics, teaching was less effective and achievements at levels 1 and 2 were persistently low.
- 3.28** Tutors used questions well to engage, develop understanding and check prisoners' learning. Tutors knew their prisoners well and asked direct questions to ensure that they were fully engaged and to extend their learning. In a mathematics session which involved much individual work, the tutor regularly checked that prisoners had grasped the principles of data presentation during effective individual discussions. The majority of prisoners in education and vocational training benefited from frequent and helpful feedback on their work. This enabled them to make improvements and deepen their understanding.
- 3.29** Prisoners were motivated to learn and work well independently. They were highly focused on learning and enjoyed their learning. In cooking, prisoners created individual breakfast

menus and worked well independently, using different ingredients and cooking techniques to produce meals of a good standard.

- 3.30** Prison trainers in most vocational training areas provided good teaching and assessment. They planned practical activities well and helped prisoners to develop useful vocational skills. For example, in maintenance workshops prisoners developed a variety of building skills, including painting and decorating, plumbing, drainage and block paving. This improved their confidence to seek employment and to develop skills that were valued by employers. In industry workshops prisoners worked well in teams to meet production targets while maintaining a good standard of work. This inspired and challenged prisoners.

Personal development and behaviour

- 3.31** With the exception of education, too many prisoners did not attend their vocational training and industry workshops and punctuality was poor. Prisoners' movements to activities were not prompt, although sessions generally finished on time.
- 3.32** Prisoners benefited from additional qualifications such as construction skills certificate scheme awards, counter-balance and fork-lift truck operations and health and safety qualifications which enhanced their employment-related skills. However, prisoners did not develop their mathematics skills sufficiently well.
- 3.33** Prisoners worked effectively in the Ministry of Defence workshops to realistically challenging commercial deadlines and standards. Prisoners engaged in non-accredited work demonstrated useful practical and personal skills. However, these were not recognised, recorded or accredited and, as a result, did not improve their chances of employment (see key concern S57).
- 3.34** The vast majority of prisoners behaved well, were well motivated, respectful to each other and to prison and other staff and took pride in their work. Most prisoners showed a positive attitude to keeping safe.

Outcomes and achievements

- 3.35** Most prisoners remained on their programmes and completed their courses. They made good progress from their starting points in developing their skills and achieving qualifications. Achievements were high in the majority of education qualifications, including information and communications technology and English at entry level and level 1.
- 3.36** The standards of prisoners' written work reflected the qualifications they were undertaking. The standard of practical skills in vocational training was good. However, managers did not track or monitor the skills gained by prisoners attending non-accredited work, such as laundry and waste management.
- 3.37** There were no discernible variations in achievement by different groups of prisoners. Prisoners' achievements in English at level 2 had improved since the previous inspection and were now good. Achievement of mathematics qualifications at levels 1 and 2 remained too low. However, the few prisoners who received support with English and mathematics skills away from formal education courses achieved well. There were too few opportunities for prisoners to benefit from these learning sessions. Very few speakers of other languages needed support. Education tutors provided individual support to these prisoners when necessary.

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 In our survey, a very small proportion of prisoners, just 4%, said that Portland was very or quite near their home or intended release address. It was challenging for prisoners to maintain contact with family and friends through visits, particularly families who used public transport for whom it would typically take an hour to travel between the prison and the station at Weymouth.
- 4.2 Visits by family members could be booked online or by telephone or by booking a future visit while at the prison. The capacity of these visit sessions was adequate to meet the demand.
- 4.3 Additional family visit days had been arranged throughout the summer holidays and were a welcome initiative. The booking arrangements were protracted. Prisoners had to complete an application form which, if successful, afforded families about two weeks' notice of the visit.
- 4.4 Visit days were very well supported by staff from Barnardo's whom visitors greatly valued. The initiative of taking photographs of fathers with their children and families was welcomed by those attending. Families told us that the Barnardo's workers maintained communications by keeping in touch with them by email and phone.
- 4.5 The special family visit day which we observed started promptly and prisoners were able to enjoy the full allocated time with their families. However, prisoners told us that visits sessions often started late because staff were unable to get them to the visits hall on time.
- 4.6 The visits hall had recently benefited from new furniture and we observed visits taking place in a relaxed, welcoming atmosphere. Many activities and materials were provided, including a soft play area, toys, games, snooker, table football, face painting and drawing.
- 4.7 At the time of inspection, about 40 prisoners were designated care leavers. The additional support provided to this group by Barnardo's was very good. Initiatives such as providing a small monthly phone credit to care leavers and recognising birthdays and other anniversaries were imaginative and appropriate and appreciated by recipients.
- 4.8 In our survey, only 53% of prisoners said they could use the telephone every day if they had credit against the comparator of 89%. This was disappointing. Many of the phones in the residential blocks were out of order (see paragraph 2.5).

Recommendation

4.9 Prisoners should be able to access working telephones to maintain regular contact with family and friends.

Good practice

- 4.10** *The recognition by Barnardo's of care leavers' birthdays and other significant dates, together with additional phone credit each month, were good examples of responding to the specific needs of this group of prisoners.*

Reducing risk, rehabilitation and progression

Expected outcomes:

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

- 4.11** The reducing reoffending strategy had been revised in June 2019. The strategy continued to be informed by a good needs analysis which was revised and managed through a strategy meeting each quarter. This was well attended by all relevant departments. Each resettlement pathway had a nominated lead and progress was monitored at the recently introduced pathways meeting which would meet every two months.
- 4.12** Since the last inspection, the backlog of offender assessments (OASys) had reduced by about half. At the time of this inspection, 46 assessments were outstanding of which 36 were the responsibility of the prison. During the previous six months, almost half the prisoners admitted to Portland had come from HMP Bristol, many without assessments, and the offender management unit (OMU) faced a continuing challenge to keep on top of these figures.
- 4.13** The OMU continued to be staffed by eight prison officer offender supervisors and three probation staff. Four of the prison officers were non-operational and the other four were less often deployed outside the OMU and their ability to carry out effective offender supervision had improved. All offender supervisors benefited from supervision by the senior probation officer.
- 4.14** In this strong context, it was disappointing to find that levels of contact between prisoners and offender supervisors were low, inconsistent and reactive. Applications from prisoners for contact were only responded to if they gave the reason for wanting contact on the form and many were ignored. In too many cases we saw a flurry of reactive activity at key points followed by cases moving down the priority list and not being considered again until the next formal stage which included preparation of a Parole Board report, re-categorisation review or home detention curfew (HDC) application. Work relating to these stages was carried out adequately but there was little evidence of purposeful structured offender supervision to drive forward a sentence plan (see key concern S58).
- 4.15** This was reinforced in our survey in which 37% of prisoners against the comparator of 59% said that they had a custody plan and only 67% said they understood what they needed to do to achieve targets or objectives.
- 4.16** The reduction in the backlog of OASys assessments was creditable (see paragraph 4.12). However, the quality of the assessments that we looked at varied and we found a number of

cases where risk issues had not been identified. In one case, risk to children had been missed and low risk of harm had been recorded.

- 4.17** At the time of inspection, about 150 prisoners were classified as high or very high risk of harm cases. These were appropriately allocated within the OMU and all but a few were managed by probation staff. Some of these probation staff worked half time and caseloads were high. There were five indeterminate sentence prisoners at the time of the inspection who were managed by the same probation officer. This was appropriate.
- 4.18** There had been a significant increase in the number of prisoners released on HDC in the past six months compared to the previous inspection. Processes had improved and prisoners with uncomplicated applications could expect to be released at their eligibility date. Staff displayed commendable persistence in pursuing applications that had initially been rejected. Many prisoners who would have simply been deemed unsuccessful with an application at the time of the previous inspection were now more likely to achieve HDC, albeit after their eligibility date and in some cases after very protracted negotiations.
- 4.19** In the cases that we inspected, the HDC processes had been started in a timely way which enabled delays caused by community probation or national clearing processes for accommodation to be managed.
- 4.20** The use of release on temporary licence (ROTL) had been restarted since the previous inspection. Seven prisoners were undertaking daily work outside the prison, a reasonably consistent figure in recent months. The range of work was limited, but work opportunities at the Jailhouse Cafe and the farm shop were appropriate. Effective processes were in place in these seven cases to identify and manage risk and each was informed by an up-to-date OASys.²⁸ During the previous six months, there had been 453 individual ROTL events.

Recommendation

- 4.21 The number and range of release on temporary licence (ROTL) opportunities should be improved.**

Public protection

- 4.22** Since the last inspection, procedures for monitoring prisoners subject to public protection arrangements had changed and all new arrivals were now screened by a single offender manager. The manager was supported by an administrator who contributed to organising the interdepartmental risk management team meeting (IRMT). These processes were effective. The number of prisoners subject to monitoring had more than doubled since the last inspection and stood at about 40. Robust action was taken to investigate breaches and so far in 2019 there had been two successful prosecutions.
- 4.23** We observed an IRMT meeting which was productive and well run with good representation from across the prison and good accountability. An examination of minutes of previous meetings indicated that these meetings were still evolving. Only at the most recent meeting had all prisoners subject to multi-agency public protection arrangements (MAPPAs) been included on the agenda. All MAPPA prisoners within three months of release were now considered by the IRMT, which was good.

²⁸ Following a review of offender management in 2015, HMPPS began to introduce a new offender management model from 2017. The new model is being implemented in stages, starting with new prison officer key workers. The second phase, core offender management, and the introduction of prison offender managers (POM) is being introduced gradually, from 2019.

Categorisation and transfers

- 4.24** Re-categorisation reviews were timely in most cases and decisions to refuse re-categorisation appeared defensible. Prisoners who had been unsuccessful understood what they needed to achieve for a better outcome. However, in too many cases the delay between submission of an application by the offender supervisor and signing off by a senior officer was too long. In the cases that we examined, a 21-day gap was apparent in one case and the average delay at this stage of the process was 12 days. This was poor.
- 4.25** The processes for transferring prisoners out of Portland were ineffective. At the time of inspection, nine prisoners were still at Portland who had been re-categorised to category D with identified places in the open estate for them. The prison held significant numbers of category C prisoners who were unable to access offending behaviour programmes and required transfer to another prison to complete this work. About half those released from Portland were from outside the local area, many of whom should have been moved nearer home for local release.
- 4.26** No member of staff was dedicated to securing transfers out of Portland. This work was undertaken in the OMU by staff from other departments when their duties and rotas permitted. Moving prisoners around the estate had become very difficult and reliance on an inconsistent resource such as this was ineffective. We saw an increasing pile of transfer applications which was not attended to for a week.

Recommendations

- 4.27 All re-categorisation reviews should be completed on time.**
- 4.28 Prompt progressive moves should be arranged for prisoners who need them.**

Interventions

Expected outcomes:

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

- 4.29** There had been a serious decline in the provision of accredited offending behaviour programmes since our last inspection. Three programmes delivered each year to about 90 prisoners had reduced to a single programme, Thinking Skills, at the time of inspection. Despite the budget and the very clear need, the prison had faced extreme difficulties in recruiting and retaining facilitators to deliver accredited programmes and far too many prisoners were unable to address their offending behaviour. We found limited evidence of offender supervisors or others delivering lower-level interventions to address the needs of this group of prisoners (see key concern S59). There were plans to deliver Resolve²⁹ in the coming year.
- 4.30** Prisoners who were likely to be unemployed on release benefited from the services of CF03, a European Social Fund initiative to promote employment. About 40 prisoners had accessed interventions to assist employment and a further 65 were working individually with the two caseworkers.

²⁹ A moderate intensity offending behaviour programme that aims to reduce violence in medium risk adult male offenders. The programme includes group and individual sessions and is suitable for offenders with a history of reactive or instrumental violence.

Release planning

Expected outcomes:

The specific reintegration needs of individual prisoners are met through an individual multi-agency plan to maximise the likelihood of successful reintegration into the community.

- 4.31** Catch 22 remained the subcontractor engaged by the Dorset, Devon and Cornwall Community Rehabilitation Company (CRC) to deliver services at Portland. They had recently been significantly understaffed but at the time of inspection seven workers were in post or starting in the near future. There were robust procedures to identify prisoners at about 12 weeks before release and resettlement interviews and plans were recorded on OASys and P-Nomis (electronic case records) in a timely way. Catch 22 had had no capacity for some time to deliver group interventions and the caseworkers had been fully occupied with their one-to-one work with prisoners.
- 4.32** Over the previous six months, an average of 46 prisoners a month had been released, of whom a little over half had been released into their home resettlement area. Prisoners who were released into the immediate locality had access to mentoring services to support them in the immediate period after release.
- 4.33** By far the greatest need for prisoners being released was accommodation and on average 17% had been released with no accommodation each month for the last six months. Bank accounts at Santander had been opened for 80 prisoners in the same period, with a maximum of 20 a month, which was adequate.
- 4.34** A new reintegration meeting was held for the first time during the inspection. This was chaired by the CRC and attended by the head of reducing reoffending, the activities manager, drug services, offender supervisors, senior probation officer and CF03 staff. About 20 cases were reviewed and it was agreed that the objective would be to identify and agree priority actions for prisoners under discussion. It was planned to hold these meetings at the 14-week pre-release point to inform resettlement work for prisoners during the three months before release.

Recommendation

- 4.35 Prisoners resettlement needs and risks should be addressed in the time leading up to their release.**

Section 5. Summary of recommendations and good practice

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

Key concerns and recommendations		Directed to:
S45	<p>Key concern: Levels of violence were high. The strategic management of violence was weak. Management scrutiny of violence reduction work, segregation and adjudications lacked rigour. A failure to ensure the collection and systematic analysis of reliable data meant that managers lacked the necessary information to assess the effectiveness of practice, identify opportunities for improvement or address weaknesses.</p> <p>Recommendation: Key safety processes, including violence reduction, segregation and adjudication, should be scrutinised regularly and effectively and this should be underpinned by the interrogation of routinely collected, reliable and comprehensive data which inform effective actions, the success of which can be judged by less violence.</p>	The Governor
S46	<p>Key concern: Measures to encourage positive behaviour were not well implemented and did not help prisoners work towards changing habits and attitudes to assist in achieving rehabilitation. The incentives and earned privileges (IEP) scheme was not applied consistently, low-level poor behaviour frequently went unchallenged and prisoners felt that negative decisions were made arbitrarily. Decisions to reduce a prisoner to the basic level were often taken with no face-to-face discussion or explanation. Targets to improve were too often generic and reviews were undertaken without the prisoner. Conversely, incentives within and outside the IEP scheme were inadequate, there were few positive entries in case notes and there was little peer support to reduce violence.</p> <p>Recommendation: Behaviour management schemes should be implemented consistently across the prison and should focus on incentivising and motivating prisoners.</p>	The Governor
S47	<p>Key concern: Use of force was high with inadequate scrutiny. Paperwork was not always comprehensively completed and not all video footage of planned incidents was available to view. Regular meetings had not been held and data and analysis were not yet being used sufficiently to highlight trends and take necessary action.</p> <p>Recommendation: Use of force documentation should be completed promptly and thoroughly, all planned incidents should be recorded and reviewed, data should be analysed and incidents reviewed to monitor trends, identify good practice and learn lessons.</p>	The Governor

S48	<p>Key concern: The quality of ACCT documents was poor. There were gaps in key areas such as care maps and observations. The quality assurance process had failed to address these deficiencies. Prisoners on ACCTs were locked up for long periods on the main wings with little activity or support. This had the potential to be a driver for self-harm.</p> <p>Recommendation: The ACCT process and its quality assurance should ensure that prisoners in crisis are safe and supported by adequate staff support, quality care maps and a regime that engages them.</p>	The Governor
S49	<p>Key concern: Responses to our survey were extremely negative about staff. Only 59% said that staff treated them with respect and 60% that they had someone they could turn to against respective comparators of 70% and 71%. There was no personal officer scheme and the key worker scheme was not fully embedded or effective. The time that prisoners spent locked up hindered the development of healthy relationships with staff. We observed much poor supervision of prisoners. Many staff remained in offices on wings instead of supervising prisoners in their care. Rules were not appropriately enforced by staff.</p> <p>Recommendation: Staff should provide proactive support and supervision of prisoners at all times and enforce the rules consistently.</p>	The Governor
S50	<p>Key concern: Most of the living accommodation had not improved since our last inspection. Seventy-eight cells designed for one were holding two prisoners. No cells had curtains and toilet screening in some shared cells was very poor. Most showers were filthy and in a dreadful state of disrepair. Most wings had some working telephones, but not enough, and access to them was limited. There were no lockable cupboards in any cells and regular access to basic kit had only started just before our inspection.</p> <p>Recommendation: All living accommodation should be clean, decent and fit for purpose.</p>	The Governor
S51	<p>Key concern: Equality and diversity work was weak despite some recent improvement. Support for prisoners from protected characteristic groups was underdeveloped, local policies needed review and prisoners had no reliable way to raise concerns either individually or as a group.</p> <p>Recommendation: Regular consultation and monitoring should inform provision for protected groups and ensure that outcomes are fair.</p>	The Governor
S52	<p>Key concern: Prisoners had lost faith in the complaints and discrimination incident report form (DIRF) system. Far too many complaints were responded to late and many of the small number of DIRFs submitted in the previous six months were not responded to. Complaints made about staff were not taken seriously or investigated thoroughly. We found an example of a prisoner who had made a serious allegation against a member of staff more than four months previously which had not been</p>	The Governor

	<p>investigated. Investigations were not thorough enough, and in one investigation the prisoner was not spoken to about the complaint.</p> <p>Recommendation: All complaints, including those made against staff, should be taken seriously and investigated promptly and thoroughly.</p>	
S53	<p>Key concern: A lack of strategic action had resulted in a health service that was not able to function effectively largely because the prison failed to facilitate consistent access to health services. Medication administration sessions were protracted, often poorly managed by officers, and some patients arrived late because of regime restrictions, reducing the time to run clinics. This affected the take-up of secondary health screening, immunisations and vaccinations and NHS health checks. There was a high failure-to-attend rate for mental health and dental services and a wasted clinical resource.</p> <p>Recommendation: Patients should have prompt access to health services, including sufficient officers to ensure safe and timely medication administration and prompt attendance at health clinics.</p>	The Governor
S54	<p>Key concern: The limited time that prisoners spent unlocked was a real concern and was seriously undermining daily life in the prison. During our roll checks we found 44% of prisoners locked in their cells. The published regime was not fully adhered to and we observed considerable slippage. The prison had implemented a lock-down rota for all wings and it was concerning that on one unit prisoners could spend nearly 60 hours locked in their cells with no basic entitlements such as showers and telephones. Time in the open air was available each day but it was not appropriate that prisoners had to decide between attending activities or getting exercise.</p> <p>Recommendation: A decent regime should be implemented so that prisoners can spend at least 10 hours a day out of their cells, during which they can attend activities, spend time in the open air and access association.</p>	The Governor
S55	<p>Key concern: Leaders and managers had not focused sufficiently on increasing the number of activity places to accommodate the population. Prisoners' participation in education, skills and work was not sufficiently good and employment was an issue. Prisoners' punctuality was poor and the process of allocation to activities was weak. Leaders and managers had not focused sufficiently on improving the provision of skills and work areas across the prison.</p> <p>Recommendation: Leaders and managers should ensure that there are sufficient purposeful activities for all prisoners, that prisoners are allocated quickly and arrive on time, and that there is focus on improving the provision of skills and work throughout the prison.</p>	The Governor
S56	<p>Key concern: Prisoners' initial assessment results were not used sufficiently by tutors and trainers to develop individual learning plans.</p>	The Governor

	<p>Peer mentors did not receive enough direction and support from prison managers to ensure that they were able to support prisoners effectively. Tutors did not always correct prisoners' errors in English and mathematics work.</p> <p>Recommendation: Managers should ensure that teachers use prisoners' initial assessment results to identify clearly their starting points and that individual learning plans are used to identify learning objectives which improve prisoners' skills and preparation for employment and further promote the development of English and mathematics skills. Prison managers should ensure that peer mentors receive enough direction to enable them to give better support to prisoners.</p>	
S57	<p>Key concern: Not enough work in the industries workshops was accredited.</p> <p>Recommendation: Managers should ensure that the development of all prisoners' skills is monitored, recorded and accredited where appropriate.</p>	The Governor
S58	<p>Key concern: Despite improvements in the availability of offender supervisors and in their training and supervision, the levels of contact with prisoners and the quality of OASys assessments, on which these contacts were based, were not good enough.</p> <p>Recommendation: The prison should ensure that the quality of OASys assessments improves and that the plans produced are delivered through structured contact with prisoners.</p>	The Governor
S59	<p>Key concern: The range and number of accredited programmes to address offending behaviour had suffered a serious decline. There were very few lower-level interventions to help prisoners reduce their risks.</p> <p>Recommendation: The prison should ensure that prisoners can benefit from a suite of interventions, including accredited programmes, to reduce the risks they present.</p>	The Governor
General recommendations		Directed to:
1.17	Managers should ensure that systems for changing poor behaviour and assisting vulnerable prisoners are implemented effectively.	The Governor
1.39	All security processes should be reviewed to ensure they are appropriate for Portland's role as a category C training prison.	The Governor
2.10	There should be sufficient telephones for prisoners on all wings and they should afford suitable privacy.	The Governor
2.20	Prisoners' dissatisfaction with the food and the shop provision should be fully investigated and addressed.	The Governor
2.27	The application system should ensure that prisoners receive a timely response to their requests.	The Governor

2.64	There should be a whole-prison strategy and approach to support health promotion and well-being activities.	The Governor
2.81	Prisoners with mental health conditions should have prompt access to a comprehensive range of care-planned support that meets their identified needs, including groupwork and psychologically informed interventions.	The Governor
2.90	The full range of prescribing options should be available, and prescribing decisions should be made on clinical need.	The Governor
2.91	There should be sufficient provision for prisoners with both mental health and substance-related conditions.	The Governor
3.11	The prison should ensure that all prisoners can, and are encouraged to, pursue constructive leisure activities through regular opportunities to attend the library and learning resource centre and gym.	The Governor
3.22	Prison managers should make sure that the contract for careers information, advice and guidance is implemented urgently to ensure that prisoners are better informed about their career choices.	The Governor
4.9	Prisoners should be able to access working telephones to maintain regular contact with family and friends.	The Governor
4.21	The number and range of release on temporary licence (ROTL) opportunities should be improved.	The Governor
4.27	All re-categorisation reviews should be completed on time.	The Governor
4.28	Prompt progressive moves should be arranged for prisoners who need them.	The Governor
4.35	Joint working should be optimised so that resettlement needs and risks are addressed for prisoners in the time leading up to their release.	The Governor
Examples of good practice		
2.92	Prisoners with drug and alcohol conditions and their families benefited from a designated family service which offered a range of support and focused on rebuilding healthy relationships.	
4.10	The recognition by Barnardo's of care leavers' birthdays and other significant dates, together with additional phone credit each month, were good examples of responding to the specific needs of this group of prisoners.	

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy chief inspector
Angus Mulready-Jones	Team leader
Paddy Doyle	Inspector
David Foot	Inspector
Martyn Griffiths	Inspector
Angela Johnson	Inspector
Fran Russell	Inspector
Kam Sarai	Inspector
Darren Wilkinson	Inspector
Sharlene Andrew	Researcher
Amilcar Johnson	Researcher
Billie Powell	Researcher
Joe Simmonds	Researcher
Claudia Vince	Researcher
Maureen Jamieson	Lead health and social care inspector
Sigrid Engelen	Health and social care inspector
Liz Walsh	Health and social care inspector
Dayni Johnson	Care Quality Commission inspector
Bob Cowdrey	Ofsted inspector
Dave Baber	Ofsted inspector
Allan Shaw	Ofsted inspector
Nadia Mujtaba	Ministry of Justice observer

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection in 2017, reception staff were very welcoming, and procedures for new arrivals were appropriate. The first night unit was a decent environment where prisoners felt supported. Too many prisoners felt unsafe and levels of violence were very high. Self-harm was also high and often serious. The establishment's response to diminished safety was inadequate. The incentives and earned privileges (IEP) scheme was used inconsistently, and the adjudication system failed to deal with many serious charges. Despite the widespread availability of drugs, the prison lacked a meaningful supply reduction action plan. Use of force was high and its governance was unacceptably weak. The segregation environment and regime were poor. Substance misuse support had improved since the last inspection and was good. Outcomes for prisoners were poor against this healthy prison test.

Main recommendations

There should be a clear strategy to identify and understand the causes of bullying and violence. Investigations should be carried out promptly and actions identified to reduce the risks should be tangible and swift. There should be more positive interventions to help perpetrators change their behaviour. (S40)

Not achieved

The prison should develop a strategy to identify, protect and support victims of bullying and violence, and those at risk of self-harm. Oversight should be at a senior level to ensure that appropriate processes are in place and prompt action is taken to reduce risks to vulnerable prisoners. (S41)

Not achieved

All staff should be properly trained in control and restraint techniques, and required to use available body-worn video cameras. Staff should complete accurate and detailed use of force reports promptly. All planned incidents and baton use should be recorded and reviewed. Managers should address any concerns raised and share learning points with staff (S42)

Not achieved

Recommendations

Prisoners should have all their permitted property with them when they are transferred between prisons (1.3)

Not achieved

Prisoners should be taken off the escort vans promptly. (1.4)

Achieved

New arrivals should be taken to the first night centre at the earliest opportunity. Those who have to wait in reception for prolonged periods should be provided with useful information and appropriate distraction materials, such as a daily newspaper and a TV. (1.8)

Not achieved

The suicide and self-harm prevention meeting should be sufficiently frequent to enable appropriate analysis, oversight and action, and have links to other key areas, such as violence reduction, activities and security. (1.20)

Achieved

There should be sufficient quality assurance of assessment, care in custody and teamwork (ACCT) case management to ensure it provides adequate support for prisoners at risk of self-harm, and all relevant personnel should attend ACCT reviews. (1.21)

Not achieved

The governor should contact the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (1.23)

Achieved

Security arrangements, including those for prisoner movement and meal service, should be appropriate for a category C prison. (1.30)

Not achieved

The prison should develop, implement and monitor a drugs and alcohol supply reduction action plan, and ensure there are effective measures to tackle drug and alcohol availability. (1.31)

Achieved

The incentives and earned privileges scheme should be applied fairly, and improvement targets and support should be in place for each individual prisoner. (1.34)

Not achieved

The number of adjudications should be reduced to enable all charges to be heard, and adjudication records should be quality assured to ensure sufficient inquiry before a finding of guilt. (1.37)

Not achieved

Prisoners should never be located in cells without running water, sinks or other basic equipment. (1.49)

Achieved

The regime in the care and separation unit should provide more opportunities for prisoners to access amenities and activities. (1.50)

Not achieved

Segregation reviews should involve relevant staff and set appropriate targets. (1.51)

Achieved

The full range of prescribing options should be available, and prescribing decisions should be made on clinical need. (1.58)

Not achieved (Recommendation repeated, 2.90)

There should be sufficient provision for prisoners with both mental health and substance-related problems. (1.59)

Not achieved (Recommendation repeated, 2.91)

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection in 2017, living conditions for most prisoners were poor. Cramped cells lacked privacy and contained graffiti and offensive displays. Prisoner access to basic amenities and facilities was often restricted. We witnessed many positive interactions between staff and prisoners. Despite this, too many managers and staff had failed to notice and address poor conditions, behaviour and treatment. Prisoners lacked confidence in the application and complaints systems. Equality and diversity work was not given sufficient priority, and there was limited consultation with minority groups of prisoners. A well-integrated chaplaincy provided good support. Significant health staff shortages limited mental health support, but primary health services were reasonably good overall. The quality and quantity of food provided were not always sufficient. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Recommendations

Cells designed for one should not be used to accommodate two prisoners. Cells should be clean, well maintained and properly ventilated, and contain sufficient furniture. Graffiti and displays of offensive materials should be removed. Toilets should be clean and appropriately screened. (2.9)

Not achieved

Prisoners should be able to access clean showers daily. (2.10)

Not achieved

Clean bedding, towels and clothing (including coats) should be consistently available to prisoners. (2.11)

Achieved

Managers should set minimum standards of expected behaviour, and ensure that staff understand and enforce them. (2.15)

Not achieved

The personal officer system, or an equivalent, should be implemented to ensure that prisoners have someone they can approach who understands them and can provide support. (2.16)

Not achieved

The profile of diversity work in the prison should be raised, and the diversity and race equality action team (DREAT) meeting should drive multidisciplinary work to support all minority groups of prisoners. (2.21)

Not achieved

The prison should promptly address evidence of possible discrimination highlighted by equality monitoring data, and should regularly consult prisoners with protected characteristics to ensure that their needs are identified, assessed and met. (2.22)

Not achieved

Foreign national prisoners should have access to independent immigration advice. (2.30, repeated recommendation 2.27)

Not achieved

All staff should be aware of where to find personal emergency evacuation plans and be familiar with their contents for prisoners they are responsible for. (2.31)

Not achieved

All prisoner complaints should be dealt with promptly, and they should be subject to appropriate investigation to enable a full and helpful response. (2.38)

Not achieved

Legal visits should take place in privacy. (2.41, repeated recommendation 2.42)

Not achieved

There should be sufficient health staffing and skill mix to provide all required health services consistently. (2.52, repeated recommendation 2.51)

Not achieved

The health centre holding rooms should be remodelled and used to promote health and well-being. (2.53)

Not achieved

There should be a regular health service user forum to inform service delivery and development. (2.54)

Achieved

The local delivery board should take sustained action to reduce the prisoner failure to attend rate, and waiting times before and after health care appointments. (2.61)

Not achieved

A pharmacist should ensure that the medicines supply chain is secure, and provide assurance to the health partnership board. (2.68)

Achieved

There should be professional oversight of the pharmacy service and patients should have access to pharmacy-led clinics, including medicine use reviews. (2.69)

Not achieved

All prescribed medicines should be administered at the appropriate times to ensure effective patient care. (2.70)

Not achieved

Prisoners should have prompt access to a full range of care-planned support for mild to moderate mental health problems. (2.79)

Not achieved

Patients requiring a transfer under the Mental Health Act should be assessed promptly and be transferred within the current transfer guidelines. (2.80, repeated recommendation 2.85)

Achieved

The prison should investigate and address prisoners' views on the quality and quantity of food, and prisoners should be able to carry their meals back to their cells safely. (2.86)

Not achieved

All serveries should all be clean and well maintained. (2.87)

Not achieved

The prison should investigate and address prisoners' dissatisfaction with the shop provision, including the e-cigarettes on sale. (2.89)

Not achieved

Purposeful activity

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

At the last inspection in 2017, time out of cell was insufficient for a category C prison and was made worse by the frequent regime slippage and cumbersome unlock procedures. Good partnership working between the prison and the college provider had led to an increase in vocational and work places and there were now sufficient activity spaces for most prisoners, but the regime frequently hindered access, punctuality and attendance. The quality of provision was mostly good, and prisoners behaved well in activities when they got there. Achievements in training and education were good. Library facilities were good but access was poor. The PE department offered vocational qualifications, but some prisoners had limited access to recreational gym. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

Delivery of the regime should be effectively managed at a senior level to maximise prisoner time out of cell with a focus on better access to learning, skills and work. (S43)

Not achieved

Recommendations

Learning, skills and work quality improvement planning should be developed further to identify and target effectively all areas for improvement across the prison. (3.8)

Achieved

Recognised employment-related qualifications should be provided for all vocational training and industry work to equip prisoners to find employment on their release. (3.13)

Not achieved

The standard of teaching and learning in education and vocational training should be maintained and raised further to ensure that all prisoners continue to make good progress throughout their learning and achieve their learning aim. (3.17)

Achieved

Individual learning plans should include personalised and challenging targets to help prisoners make better progress. (3.18)

Not achieved

Prison managers should ensure that all prisoners arrive on time at their allocated activity to reinforce a work ethic. (3.23)

Not achieved

Prisoners' achievements in English functional skills at level 2 should be improved. (3.27)

Achieved

All prisoners should have the opportunity for and be encouraged to gain qualifications in the industry workshops. (3.28)

Not achieved

Prisoners should be offered a peer-led reading initiative. (3.31)

Achieved

The library should control its stock effectively to reduce the amount of loss. (3.32)

Achieved

All prisoners should be able to access the library as scheduled. (3.33)

Not achieved

PE staff should routinely collect and analyse data on use of the PE facilities to identify the prisoners using them and ensure equality of access. (3.38)

Not achieved

Resettlement

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

At the last inspection in 2017, the strategic management of resettlement had improved and appropriate structures were in place. However, there was a lack of effective management in the offender management unit (OMU). The significant backlog of OASys (offender assessment system) assessments affected many aspects of resettlement work. Offender supervisor contact and support for prisoners was hindered by frequent cross-deployment. There was an unacceptable backlog of home detention curfew (HDC) applications. Significant weaknesses in the management of public protection meant that we could not be sure if risk was managed safely. The community rehabilitation company (CRC)³⁰ provided a good resettlement service, although there was not enough joint working with the OMU. Resettlement pathways work was variable. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

Management of the offender management unit should be tightened and the quality assurance of cases, systems and processes should be robust. Managers should do more to understand the needs and risks of the population and provide better support for staff supervising prisoners. (S44)

Partially achieved

Recommendations

All prisoners arriving from other establishments should have an up-to-date OASys (offender assessment system) assessment, where relevant. (4.3)

Not achieved

All offender supervisors should have effective, regular and meaningful contact with their prisoners, focused on supporting them to meet sentence planning targets and reduce the risk of harm and reoffending. (4.11)

Not achieved

All offender supervisors should have effective supervision, training and support to ensure that they can meet the offender management needs of prisoners. (4.12)

Not achieved

Pre-release checks of prisoners should incorporate an accurate review of their risk. (4.13)

Achieved

³⁰ Since May 2015 rehabilitation services, both in custody and after release, have been organised through CRCs which are responsible for work with medium- and low-risk offenders. The national probation service has maintained responsibility for high- and very high-risk offenders.

Home detention curfew decisions should be timely, and HDC releases should be as close to the prisoner's eligibility date as possible. (4.14)

Achieved

Release on temporary licence should be used to support resettlement for relevant prisoners, subject to appropriate risk assessment. (4.15)

Achieved

The interdepartmental risk management team should discuss in detail all prisoners covered by multi-agency public protection arrangements (MAPPA) due for release to ensure that their release arrangements are as robust and safe as possible. (4.19)

Not achieved

All categorisation reviews should be timely. (4.22)

Achieved

All prisoners should be discharged into secure accommodation. (4.28)

Not achieved

The number of CfBT advisers should be increased to ensure that all prisoners receive careers support at induction and throughout their time at Portland. (4.32)

Not achieved

All prisoners and visitors should be able to take part in the full visits session. (4.40, repeated recommendation 4.50)

Not achieved

The prison should ensure that the offending behaviour needs of prisoners are addressed. (4.42, repeated recommendation 4.56)

Not achieved

Appendix III: Prison population profile

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

Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced	123	320	90
Recall	4	44	9.8
Convicted unsentenced	0	0	0
Remand	0	0	0
Civil prisoners	0	0	0
Detainees	0	1	0.2
Total			

Sentence	18–20 yr olds	21 and over	%
Unsentenced	0	1	0.2
Less than six months	0	1	0.2
six months to less than 12 months	4	14	3.7
12 months to less than 2 years	13	57	14.2
2 years to less than 4 years	64	177	49
4 years to less than 10 years	46	96	28.9
10 years and over (not life)	0	14	2.8
ISPP (indeterminate sentence for public protection)	0	5	0.8
Life			
Total			

Age	Number of prisoners	%
Please state minimum age here: 18		
Under 21 years	127	25.8
21 years to 29 years	184	37.4
30 years to 39 years	101	20.5
40 years to 49 years	58	11.8
50 years to 59 years	19	3.9
60 years to 69 years	3	0.6
70 plus years	0	0
Please state maximum age here: 63		
Total	492	

Nationality	18–20 yr olds	21 and over	%
British	112	341	92.1
Foreign nationals	15	24	7.9
Total	127	365	100

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced			
Uncategorised sentenced			
Category A			
Category B			
Category C			
Category D			

Other			
Total			

Ethnicity	18–20 yr olds	21 and over	%
White			
British	71	265	68.3
Irish	0	5	1
Gypsy/Irish Traveller	1	6	1.4
Other white	5	11	3.3
Mixed			
White and black Caribbean	7	15	4.5
White and black African	4	4	1.6
White and Asian	0	0	0
Other mixed	4	3	1.4
Asian or Asian British			
Indian	0	2	0.4
Pakistani	2	2	0.8
Bangladeshi	0	3	0.6
Chinese	0	1	0.2
Other Asian	2	1	0.6
Black or black British			
Caribbean	9	17	5.3
African	15	19	6.9
Other black	6	6	2.4
Other ethnic group			
Arab	1	0	0.2
Other ethnic group	0	4	0.8
Not stated	0	1	0.2
Total	127	365	100

Religion	18–20 yr olds	21 and over	%
Baptist	0	0	0
Church of England	9	49	11.8
Roman Catholic	9	58	13.6
Other Christian denominations	24	48	14.6
Muslim	34	56	18.3
Sikh	0	2	0.4
Hindu	0	0	0
Buddhist	0	13	2.6
Jewish	0	1	0.2
Other	0	5	1
No religion	51	133	37.4
Total	127	365	100

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

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	11	2.2	34	6.9
1 month to 3 months	40	8.1	89	18.1
3 months to six months	29	5.9	93	18.9
six months to 1 year	38	7.7	100	20.3
1 year to 2 years	7	1.4	38	7.7
2 years to 4 years	2	0.4	10	2.0
4 years or more	0	0	0	0
Total	127		364	

Sentenced prisoners only

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

Unsentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month				
1 month to 3 months				
3 months to six months				
six months to 1 year			1	
1 year to 2 years				
2 years to 4 years				
4 years or more				
Total				

Main offence	18–20 yr olds	21 and over	%
Violence against the person			
Sexual offences			
Burglary			
Robbery			
Theft and handling			
Fraud and forgery			
Drugs offences			
Other offences			
Civil offences			
Offence not recorded /holding warrant			
Total			

Appendix IV: Photographs



Communal area



Shower



Exercise area



Seating in health care waiting room

Appendix V: Prisoner survey methodology and results

Prisoner survey methodology

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

HMIP researchers have developed a self-completion questionnaire to support HMIP Expectations. The questionnaire consists of structured questions covering the prisoner ‘journey’ from reception to release together with demographic and background questions which enable us to compare responses from different sub-groups of the prisoner population. There are also three open questions at the end of the questionnaire which allow prisoners to express in their own words what they find most positive and negative about the prison³¹.

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

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

Sampling

On the day of the survey a stratified random sample is drawn by HMIP researchers from a P-Nomis prisoner population printout ordered by cell location. Using a power calculation, HMIP researchers calculate the minimum sample size required to ensure that the survey findings are representative of the entire population of the establishment.³²

Distributing and collecting questionnaires

HMIP researchers distribute and collect the questionnaires in person. So that prisoners can give their informed consent³³ to participate, the purpose of the survey is explained and assurances are given about confidentiality and anonymity. Prisoners are made aware that participation in the survey is voluntary; prisoners who decline to participate are not replaced within the sample. Those who agree to participate are provided with a sealable envelope for their completed questionnaire and told when we will be returning to collect it. We make arrangements to administer the questionnaire via a face-to-face interview for respondents who disclose literacy difficulties.

Survey response

At the time of the survey on 29 July 2019 the prisoner population at HMP/YOI Portland was 498. Using the sampling method described above, questionnaires were distributed to 186 prisoners. We received a total of 147 completed questionnaires, a response rate of 79%. This did not include any questionnaires completed via face-to-face interview. Seventeen prisoners declined to participate in the survey and 22 questionnaires were either not returned at all or returned blank.

³¹ Qualitative analysis of these written comments is undertaken by HMIP researchers and used by inspectors.

³² 95% confidence interval with a 7% margin of error. The formula assumes a 75% response rate (65% in open establishments).

³³ For further information about the ethical principles which underpin our survey methodology, please see ‘Ethical principles for research activities’ which can be downloaded from HMIP’s website <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for HMP/YOI Portland. For the comparator analyses, each question was reformulated into a binary ‘yes/no’ format and affirmative responses compared.³⁴ 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/YOI Portland 2019 compared with those from other HMIP surveys³⁵

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

Comparisons between different residential locations within HMP/YOI Portland 2019

- responses of prisoners on the enhanced and workers unit (Beaufort wing) compared with those from the rest of the establishment.

Comparisons between self-reported sub-populations of prisoners within HMP/YOI Portland 2019³⁶

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

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group.³⁷

In the comparator analyses, statistically significant³⁸ differences are indicated by shading. Results that are significantly more positive are indicated by green shading and results that are significantly more negative are indicated by blue shading. Orange shading has been used to show a statistically significant difference in demographic or other background details. If there is no shading, any difference between the two results is not statistically significant and may have occurred by chance. Grey shading indicates that there are no valid comparative data for that question.

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

³⁴ Using the Chi-square test (or Fisher’s exact test if there are fewer than five responses in a group).

³⁵ 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.

³⁶ These analyses are carried out on summary data from selected survey questions only.

³⁷ A minimum of 10 responses which must also represent at least 10% of the total response.

³⁸ 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.

Survey summary

Background information

I.1	What wing or houseblock are you currently living on?	
	Benbow.....	20 (14%)
	Collingwood.....	7 (5%)
	Drake.....	24 (16%)
	Grenville.....	19 (13%)
	Nelson.....	18 (12%)
	Raleigh.....	23 (16%)
	Beaufort.....	34 (23%)
	Segregation.....	2 (1%)
I.2	How old are you?	
	Under 21.....	42 (29%)
	21 - 25.....	33 (23%)
	26 - 29.....	12 (8%)
	30 - 39.....	32 (22%)
	40 - 49.....	22 (15%)
	50 - 59.....	5 (3%)
	60 - 69.....	0 (0%)
	70 or over.....	0 (0%)
I.3	What is your ethnic group?	
	White - English/ Welsh/ Scottish/ Northern Irish/ British.....	97 (66%)
	White - Irish.....	1 (1%)
	White - Gypsy or Irish Traveller.....	3 (2%)
	White - any other White background.....	4 (3%)
	Mixed - White and Black Caribbean.....	2 (1%)
	Mixed - White and Black African.....	7 (5%)
	Mixed - White and Asian.....	0 (0%)
	Mixed - any other Mixed ethnic background.....	1 (1%)
	Asian/ Asian British - Indian.....	0 (0%)
	Asian/ Asian British - Pakistani.....	1 (1%)
	Asian/ Asian British - Bangladeshi.....	0 (0%)
	Asian/ Asian British - Chinese.....	1 (1%)
	Asian - any other Asian Background.....	0 (0%)
	Black/ Black British - Caribbean.....	14 (10%)
	Black/ Black British - African.....	7 (5%)
	Black - any other Black/ African/ Caribbean background.....	3 (2%)
	Arab.....	2 (1%)
	Any other ethnic group.....	3 (2%)
I.4	How long have you been in this prison?	
	Less than 6 months.....	57 (40%)
	6 months or more.....	84 (60%)
I.5	Are you currently serving a sentence?	
	Yes.....	129 (90%)
	Yes - on recall.....	14 (10%)
	No - on remand or awaiting sentence.....	0 (0%)
	No - immigration detainee.....	0 (0%)
I.6	How long is your sentence?	
	Less than 6 months.....	1 (1%)

6 months to less than 1 year	13 (9%)
1 year to less than 4 years	99 (68%)
4 years to less than 10 years	29 (20%)
10 years or more	2 (1%)
IPP (indefinite sentence for public protection)	2 (1%)
Life	0 (0%)
Not currently serving a sentence.....	0 (0%)

Arrival and reception

2.1	Were you given up-to-date information about this prison before you came here?	
	Yes	16 (11%)
	No.....	117 (80%)
	Don't remember	13 (9%)
2.2	When you arrived at this prison, how long did you spend in reception?	
	Less than 2 hours	65 (45%)
	2 hours or more.....	69 (48%)
	Don't remember	11 (8%)
2.3	When you were searched in reception, was this done in a respectful way?	
	Yes	127 (87%)
	No.....	11 (8%)
	Don't remember	8 (5%)
2.4	Overall, how were you treated in reception?	
	Very well	34 (23%)
	Quite well	95 (65%)
	Quite badly	10 (7%)
	Very badly	5 (3%)
	Don't remember	2 (1%)
2.5	When you first arrived here, did you have any of the following problems?	
	Problems getting phone numbers	40 (28%)
	Contacting family.....	43 (30%)
	Arranging care for children or other dependants.....	3 (2%)
	Contacting employers	5 (3%)
	Money worries.....	33 (23%)
	Housing worries	25 (17%)
	Feeling depressed.....	52 (36%)
	Feeling suicidal	15 (10%)
	Other mental health problems	29 (20%)
	Physical health problems	17 (12%)
	Drug or alcohol problems (e.g. withdrawal)	23 (16%)
	Problems getting medication	28 (20%)
	Needing protection from other prisoners.....	11 (8%)
	Lost or delayed property	42 (29%)
	Other problems.....	16 (11%)
	Did not have any problems.....	39 (27%)
2.6	Did staff help you to deal with these problems when you first arrived?	
	Yes	32 (23%)
	No.....	69 (49%)
	Did not have any problems when I first arrived.....	39 (28%)

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.....	115 (79%)
Toiletries / other basic items	103 (71%)
A shower.....	63 (43%)
A free phone call.....	80 (55%)
Something to eat.....	122 (84%)
The chance to see someone from health care	93 (64%)
The chance to talk to a Listener or Samaritans.....	39 (27%)
Support from another prisoner (e.g. Insider or buddy)	35 (24%)
Wasn't offered any of these things	11 (8%)

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

Very clean	13 (9%)
Quite clean	62 (42%)
Quite dirty	42 (29%)
Very dirty.....	27 (18%)
Don't remember	3 (2%)

3.3 Did you feel safe on your first night here?

Yes.....	117 (81%)
No.....	20 (14%)
Don't remember	8 (6%)

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

	Yes	No	Don't remember
Access to the prison shop / canteen?	68 (48%)	68 (48%)	5 (4%)
Free PIN phone credit?	77 (55%)	57 (41%)	5 (4%)
Numbers put on your PIN phone?	57 (43%)	66 (50%)	9 (7%)

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

Yes.....	66 (46%)
No.....	64 (45%)
Have not had an induction.....	13 (9%)

On the wing

4.1 Are you in a cell on your own?

Yes.....	104 (72%)
No, I'm in a shared cell or dormitory.....	41 (28%)

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

Yes.....	43 (30%)
No.....	89 (62%)
Don't know.....	12 (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?	76 (54%)	65 (46%)	0 (0%)

Can you shower every day?	80 (56%)	62 (43%)	1 (1%)
Do you have clean sheets every week?	56 (39%)	83 (58%)	3 (2%)
Do you get cell cleaning materials every week?	54 (39%)	81 (58%)	5 (4%)
Is it normally quiet enough for you to relax or sleep at night?	84 (60%)	56 (40%)	1 (1%)
Can you get your stored property if you need it?	25 (17%)	74 (52%)	44 (31%)

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

Very clean	15 (11%)
Quite clean	62 (44%)
Quite dirty	45 (32%)
Very dirty	19 (13%)

Food and canteen

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

Very good	3 (2%)
Quite good	37 (26%)
Quite bad	61 (42%)
Very bad	44 (30%)

5.2 Do you get enough to eat at mealtimes?

Always	15 (10%)
Most of the time	44 (30%)
Some of the time	58 (40%)
Never	29 (20%)

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

Yes	68 (49%)
No	68 (49%)
Don't know	4 (3%)

Relationships with staff

6.1 Do most staff here treat you with respect?

Yes	83 (59%)
No	58 (41%)

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

Yes	86 (60%)
No	57 (40%)

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

Yes	42 (29%)
No	101 (71%)

6.4 How helpful is your personal or named officer?

Very helpful	14 (10%)
Quite helpful	24 (18%)
Not very helpful	19 (14%)
Not at all helpful	17 (12%)
Don't know	18 (13%)

Don't have a personal / named officer 45 (33%)

6.5 How often do you see prison governors, directors or senior managers talking to prisoners?

Regularly 9 (6%)
 Sometimes 26 (19%)
 Hardly ever 97 (69%)
 Don't know 8 (6%)

6.6 Do you feel that you are treated as an individual in this prison?

Yes 51 (36%)
 No 90 (64%)

6.7 Are prisoners here consulted about things like food, canteen, health care or wing issues?

Yes, and things sometimes change 30 (21%)
 Yes, but things don't change 59 (42%)
 No 40 (28%)
 Don't know 13 (9%)

Faith

7.1 What is your religion?

No religion 48 (35%)
 Christian (including Church of England, Catholic, Protestant and all other
 Christian denominations) 52 (37%)
 Buddhist 5 (4%)
 Hindu 0 (0%)
 Jewish 0 (0%)
 Muslim 28 (20%)
 Sikh 0 (0%)
 Other 6 (4%)

7.2 Are your religious beliefs respected here?

Yes 62 (45%)
 No 17 (12%)
 Don't know 12 (9%)
 Not applicable (no religion) 48 (35%)

7.3 Are you able to speak to a Chaplain of your faith in private, if you want to?

Yes 59 (42%)
 No 15 (11%)
 Don't know 18 (13%)
 Not applicable (no religion) 48 (34%)

7.4 Are you able to attend religious services, if you want to?

Yes 78 (56%)
 No 10 (7%)
 Don't know 3 (2%)
 Not applicable (no religion) 48 (35%)

Contact with family and friends

8.1 Have staff here encouraged you to keep in touch with your family / friends?

Yes 36 (26%)
 No 101 (74%)

8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	86 (63%)
	No.....	50 (37%)
8.3	Are you able to use a phone every day (if you have credit)?	
	Yes	75 (53%)
	No.....	66 (47%)
8.4	How easy or difficult is it for your family and friends to get here?	
	Very easy.....	3 (2%)
	Quite easy.....	15 (11%)
	Quite difficult	38 (27%)
	Very difficult	79 (57%)
	Don't know.....	4 (3%)
8.5	How often do you have visits from family or friends?	
	More than once a week.....	2 (1%)
	About once a week	12 (9%)
	Less than once a week.....	68 (49%)
	Not applicable (don't get visits).....	56 (41%)
8.6	Do visits usually start and finish on time?	
	Yes	34 (43%)
	No.....	46 (58%)
8.7	Are your visitors usually treated respectfully by staff?	
	Yes	64 (83%)
	No.....	13 (17%)

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.....	48 (34%)
	Yes, but these times are not usually kept to.....	76 (54%)
	No.....	17 (12%)
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	46 (33%)
	2 to 6 hours.....	61 (44%)
	6 to 10 hours	21 (15%)
	10 hours or more	4 (3%)
	Don't know.....	6 (4%)
9.3	How long do you usually spend out of your cell on a typical Saturday or Sunday?	
	Less than 2 hours	95 (68%)
	2 to 6 hours.....	40 (29%)
	6 to 10 hours	0 (0%)
	10 hours or more	1 (1%)
	Don't know.....	4 (3%)
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	24 (17%)
	1 or 2	16 (12%)
	3 to 5.....	43 (31%)

More than 5.....	45 (32%)
Don't know.....	11 (8%)

9.5 How many days in a typical week do you get association, if you want it?

None	6 (4%)
1 or 2	7 (5%)
3 to 5.....	60 (43%)
More than 5.....	67 (48%)
Don't know.....	1 (1%)

9.6 How many days in a typical week could you go outside for exercise, if you wanted to?

None	10 (7%)
1 or 2	21 (15%)
3 to 5.....	21 (15%)
More than 5.....	83 (60%)
Don't know.....	4 (3%)

9.7 Typically, how often do you go to the gym?

Twice a week or more	27 (19%)
About once a week	37 (27%)
Less than once a week.....	22 (16%)
Never	53 (38%)

9.8 Typically, how often do you go to the library?

Twice a week or more	2 (1%)
About once a week	27 (19%)
Less than once a week.....	42 (30%)
Never	70 (50%)

9.9 Does the library have a wide enough range of materials to meet your needs?

Yes	29 (21%)
No.....	39 (28%)
Don't use the library	70 (51%)

Applications, complaints and legal rights

10.1 Is it easy for you to make an application?

Yes	102 (72%)
No.....	33 (23%)
Don't know.....	7 (5%)

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?	60 (46%)	65 (50%)	6 (5%)
Are applications usually dealt with within 7 days?	16 (12%)	112 (84%)	6 (4%)

10.3 Is it easy for you to make a complaint?

Yes	88 (62%)
No.....	35 (24%)
Don't know.....	20 (14%)

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?	25 (19%)	62 (47%)	44 (34%)
Are complaints usually dealt with within 7 days?	16 (12%)	71 (54%)	44 (34%)

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

Yes	25 (19%)
No.....	80 (59%)
Not wanted to make a complaint.....	30 (22%)

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?	25 (18%)	56 (40%)	42 (30%)	18 (13%)
Attend legal visits?	45 (33%)	26 (19%)	45 (33%)	20 (15%)
Get bail information?	12 (9%)	33 (25%)	53 (40%)	35 (26%)

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

Yes	60 (43%)
No.....	56 (40%)
Not had any legal letters	24 (17%)

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	10 (7%)	34 (24%)	49 (35%)	36 (25%)	13 (9%)
Nurse	12 (9%)	52 (38%)	34 (25%)	28 (20%)	11 (8%)
Dentist	7 (5%)	13 (9%)	35 (25%)	72 (51%)	13 (9%)
Mental health workers	12 (9%)	26 (19%)	29 (21%)	38 (27%)	35 (25%)

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	18 (13%)	56 (40%)	24 (17%)	16 (11%)	27 (19%)
Nurse	22 (15%)	63 (44%)	27 (19%)	8 (6%)	22 (15%)
Dentist	15 (11%)	30 (22%)	28 (20%)	15 (11%)	51 (37%)
Mental health workers	17 (12%)	34 (24%)	20 (14%)	14 (10%)	55 (39%)

11.3 Do you have any mental health problems?

Yes	78 (55%)
No.....	65 (45%)

11.4	Have you been helped with your mental health problems in this prison?	
	Yes	29 (20%)
	No.....	49 (34%)
	Don't have any mental health problems.....	65 (45%)

11.5	What do you think of the overall quality of the health services here?	
	Very good	10 (7%)
	Quite good	56 (39%)
	Quite bad	39 (27%)
	Very bad.....	21 (15%)
	Don't know.....	17 (12%)

Other support needs

12.1	Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?	
	Yes	41 (29%)
	No.....	101 (71%)

12.2	If you have a disability, are you getting the support you need?	
	Yes	12 (9%)
	No.....	28 (20%)
	Don't have a disability	101 (72%)

12.3	Have you been on an ACCT in this prison?	
	Yes	29 (21%)
	No.....	110 (79%)

12.4	If you have been on an ACCT in this prison, did you feel cared for by staff?	
	Yes	11 (8%)
	No.....	17 (12%)
	Have not been on an ACCT in this prison.....	110 (80%)

12.5	How easy or difficult is it for you to speak to a Listener, if you need to?	
	Very easy.....	10 (7%)
	Quite easy.....	24 (17%)
	Quite difficult	7 (5%)
	Very difficult	9 (6%)
	Don't know.....	81 (58%)
	No Listeners at this prison	9 (6%)

Alcohol and drugs

13.1	Did you have an alcohol problem when you came into this prison?	
	Yes	29 (20%)
	No.....	113 (80%)

13.2	Have you been helped with your alcohol problem in this prison?	
	Yes	14 (10%)
	No.....	15 (11%)
	Did not / do not have an alcohol problem	113 (80%)

13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	50 (35%)
	No.....	92 (65%)

13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	25 (18%)
	No.....	117 (82%)
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	14 (10%)
	No.....	129 (90%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	27 (20%)
	No.....	26 (19%)
	Did not / do not have a drug problem.....	82 (61%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy.....	40 (29%)
	Quite easy.....	20 (14%)
	Quite difficult	12 (9%)
	Very difficult	4 (3%)
	Don't know.....	63 (45%)
13.8	Is it easy or difficult to get alcohol in this prison?	
	Very easy.....	21 (15%)
	Quite easy.....	19 (14%)
	Quite difficult	19 (14%)
	Very difficult	11 (8%)
	Don't know.....	69 (50%)
Safety		
14.1	Have you ever felt unsafe here?	
	Yes	59 (43%)
	No.....	78 (57%)
14.2	Do you feel unsafe now?	
	Yes	27 (20%)
	No.....	108 (80%)
14.3	Have you experienced any of the following types of bullying / victimisation from other prisoners here? (Please tick all that apply.)	
	Verbal abuse.....	37 (27%)
	Threats or intimidation.....	43 (32%)
	Physical assault.....	29 (21%)
	Sexual assault	4 (3%)
	Theft of canteen or property.....	42 (31%)
	Other bullying / victimisation.....	24 (18%)
	Not experienced any of these from prisoners here.....	73 (54%)
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	
	Yes	25 (19%)
	No.....	109 (81%)
14.5	Have you experienced any of the following types of bullying / victimisation from staff here? (Please tick all that apply.)	
	Verbal abuse.....	44 (34%)
	Threats or intimidation.....	36 (27%)

Physical assault.....	15 (11%)
Sexual assault	0 (0%)
Theft of canteen or property.....	15 (11%)
Other bullying / victimisation	28 (21%)
Not experienced any of these from staff here.....	71 (54%)

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

Yes	62 (45%)
No.....	75 (55%)

Behaviour management

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

Yes	43 (32%)
No.....	75 (55%)
Don't know what the incentives / rewards are	18 (13%)

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

Yes	47 (34%)
No.....	65 (47%)
Don't know.....	17 (12%)
Don't know what this is	9 (7%)

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

Yes	26 (18%)
No.....	116 (82%)

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

Yes.....	6 (4%)
No	19 (13%)
Don't remember	2 (1%)
Not been restrained here in last 6 months.....	115 (81%)

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

Yes	14 (10%)
No.....	124 (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?	10 (71%)	4 (29%)
Could you shower every day?	8 (57%)	6 (43%)
Could you go outside for exercise every day?	13 (93%)	1 (7%)
Could you use the phone every day (if you had credit)?	4 (29%)	10 (71%)

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	77 (56%)	34 (25%)	24 (18%)	2 (1%)
Vocational or skills training	47 (36%)	49 (38%)	31 (24%)	2 (2%)
Prison job	50 (37%)	68 (51%)	14 (10%)	2 (1%)

Voluntary work outside of the prison	9 (7%)	57 (43%)	58 (44%)	8 (6%)
Paid work outside of the prison	9 (7%)	55 (41%)	60 (45%)	9 (7%)

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	68 (49%)	47 (34%)	23 (17%)
Vocational or skills training	63 (46%)	35 (26%)	39 (28%)
Prison job	44 (33%)	67 (50%)	23 (17%)
Voluntary work outside of the prison	29 (22%)	31 (24%)	70 (54%)
Paid work outside of the prison	32 (24%)	31 (24%)	68 (52%)

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

Yes	84 (60%)
No.....	54 (39%)
Not applicable (e.g. if you are retired, sick or on remand)	2 (1%)

Planning and progression

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

Yes	52 (37%)
No.....	88 (63%)

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

Yes	35 (67%)
No.....	12 (23%)
Don't know what my objectives or targets are.....	5 (10%)

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

Yes	22 (43%)
No.....	24 (47%)
Don't know what my objectives or targets are.....	5 (10%)

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	10 (20%)	6 (12%)	34 (68%)
Other programmes	11 (22%)	5 (10%)	35 (69%)
One to one work	13 (25%)	6 (12%)	32 (63%)
Being on a specialist unit	3 (6%)	5 (10%)	42 (84%)
ROTL - day or overnight release	3 (6%)	5 (10%)	41 (84%)

Preparation for release

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

Yes	47 (34%)
No.....	83 (59%)
Don't know.....	10 (7%)

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

Very near.....	0 (0%)
Quite near.....	2 (4%)
Quite far.....	21 (45%)
Very far.....	24 (51%)

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

Yes 24 (52%)
 No..... 22 (48%)

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

	Yes, I'm getting help with this	No, but I need help with this	No, and I don't need help with this
Finding accommodation	10 (22%)	18 (39%)	18 (39%)
Getting employment	8 (18%)	19 (42%)	18 (40%)
Setting up education or training	7 (16%)	17 (38%)	21 (47%)
Arranging benefits	12 (27%)	21 (47%)	12 (27%)
Sorting out finances	8 (18%)	23 (52%)	13 (30%)
Support for drug or alcohol problems	5 (11%)	14 (30%)	27 (59%)
Health / mental health support	5 (12%)	16 (37%)	22 (51%)
Social care support	5 (11%)	16 (36%)	23 (52%)
Getting back in touch with family or friends	2 (5%)	10 (25%)	28 (70%)

More about you**19.1 Do you have children under the age of 18?**

Yes 64 (46%)
 No..... 76 (54%)

19.2 Are you a UK / British citizen?

Yes 127 (92%)
 No..... 11 (8%)

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

Yes 6 (4%)
 No..... 134 (96%)

19.4 Have you ever been in the armed services (e.g. army, navy, air force)?

Yes 3 (2%)
 No..... 137 (98%)

19.5 What is your gender?

Male 139 (99%)
 Female..... 0 (0%)
 Non-binary..... 1 (1%)
 Other 0 (0%)

19.6 How would you describe your sexual orientation?

Straight / heterosexual..... 138 (99%)
 Gay / lesbian / homosexual..... 0 (0%)
 Bisexual..... 1 (1%)
 Other 1 (1%)

19.7 Do you identify as transgender or transsexual?

Yes 1 (1%)
 No..... 134 (99%)

Final question 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.....	14 (10%)
Less likely to offend.....	69 (48%)
Made no difference	62 (43%)

HMP/YOI Portland 2019

Comparison of survey responses from different residential locations

In this table responses from the enhanced and workers unit (Beaufort) 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
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Number of completed questionnaires returned

The enhanced and workers unit (Beaufort)	rest of the establishment
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DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	27%	29%
	Are you 25 years of age or younger?	53%	50%
	Are you 50 years of age or older?	6%	3%
	Are you 70 years of age or older?	0%	0%
1.3	Are you from a minority ethnic group?	32%	26%
1.4	Have you been in this prison for less than 6 months?	27%	45%
1.5	Are you currently serving a sentence?	100%	100%
	Are you on recall?	6%	11%
1.6	Is your sentence less than 12 months?	6%	11%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	2%
7.1	Are you Muslim?	22%	19%
11.3	Do you have any mental health problems?	38%	60%
12.1	Do you consider yourself to have a disability?	21%	32%
19.1	Do you have any children under the age of 18?	41%	48%
19.2	Are you a foreign national?	12%	7%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	3%	4%
19.4	Have you ever been in the armed services?	6%	1%
19.5	Is your gender female non-binary?	3%	0%
19.6	Are you homosexual, bisexual or other sexual orientation?	6%	0%
19.7	Do you identify as transgender or transsexual?	3%	0%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	12%	11%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	46%	46%
2.3	When you were searched in reception, was this done in a respectful way?	85%	87%
2.4	Overall, were you treated very / quite well in reception?	94%	87%

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2.5	When you first arrived, did you have any problems?	79%	71%
2.5	Did you have problems with:		
	- Getting phone numbers?	30%	27%
	- Contacting family?	33%	29%
	- Arranging care for children or other dependents?	3%	2%
	- Contacting employers?	0%	5%
	- Money worries?	24%	22%
	- Housing worries?	18%	18%
	- Feeling depressed?	42%	34%
	- Feeling suicidal?	3%	12%
	- Other mental health problems?	9%	23%
	- Physical health problems?	9%	13%
	- Drugs or alcohol (e.g. withdrawal)?	12%	17%
	- Getting medication?	12%	21%
	- Needing protection from other prisoners?	3%	8%
	- Lost or delayed property?	30%	29%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	42%	29%
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	77%	79%
	- Toiletries / other basic items?	74%	70%
	- A shower?	41%	44%
	- A free phone call?	38%	60%
	- Something to eat?	77%	86%
	- The chance to see someone from health care?	59%	66%
	- The chance to talk to a Listener or Samaritans?	27%	26%
	- Support from another prisoner (e.g. Insider or buddy)?	21%	25%
	- None of these?	12%	6%
3.2	On your first night in this prison, was your cell very / quite clean?	53%	51%
3.3	Did you feel safe on your first night here?	79%	82%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	53%	47%
	- Free PIN phone credit?	42%	60%
	- Numbers put on your PIN phone?	34%	47%
3.5	Have you had an induction at this prison?	100%	88%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	52%	52%

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ON THE WING			
4.1	Are you in a cell on your own?	32%	84%
4.2	Is your cell call bell normally answered within 5 minutes?	36%	28%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	63%	52%
	- Can you shower every day?	100%	43%
	- Do you have clean sheets every week?	42%	39%
	- Do you get cell cleaning materials every week?	56%	34%
	- Is it normally quiet enough for you to relax or sleep at night?	73%	56%
	- Can you get your stored property if you need it?	15%	19%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	74%	50%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	15%	31%
5.2	Do you get enough to eat at meal-times always / most of the time?	32%	43%
5.3	Does the shop / canteen sell the things that you need?	34%	53%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	61%	59%
6.2	Are there any staff here you could turn to if you had a problem?	56%	61%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	29%	30%
6.4	Do you have a personal officer?	64%	68%
	<i>For those who have a personal officer:</i>		
6.4	Is your personal or named officer very / quite helpful?	57%	36%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	3%	8%
6.6	Do you feel that you are treated as an individual in this prison?	39%	36%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	77%	58%
	If so, do things sometimes change?	35%	33%
FAITH			
7.1	Do you have a religion?	72%	64%
	<i>For those who have a religion:</i>		
7.2	Are your religious beliefs respected here?	83%	62%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	64%	64%
7.4	Are you able to attend religious services, if you want to?	91%	83%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	25%	27%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	69%	62%
8.3	Are you able to use a phone every day (if you have credit)?	73%	48%
8.4	Is it very / quite easy for your family and friends to get here?	15%	12%
8.5	Do you get visits from family/friends once a week or more?	15%	8%
	<i>For those who get visits:</i>		
8.6	Do visits usually start and finish on time?	24%	50%
8.7	Are your visitors usually treated respectfully by staff?	91%	82%

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TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	88%	88%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
9.1	Are these times usually kept to?	45%	38%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	7%	41%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	10%	1%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	55%	71%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	0%	1%
9.4	Do you have time to do domestics more than 5 days in a typical week?	49%	28%
9.5	Do you get association more than 5 days in a typical week, if you want it?	66%	43%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	64%	58%
9.7	Do you typically go to the gym twice a week or more?	16%	20%
9.8	Do you typically go to the library once a week or more?	13%	23%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	38%	45%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	79%	69%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	48%	49%
	Are applications usually dealt with within 7 days?	27%	8%
10.3	Is it easy for you to make a complaint?	62%	61%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	15%	34%
	Are complaints usually dealt with within 7 days?	13%	19%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	12%	26%

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<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	23%	20%
	Attend legal visits?	35%	40%
	Get bail information?	8%	14%
<i>For those who have had legal letters:</i>			
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	56%	51%
HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	39%	29%
	- Nurse?	58%	43%
	- Dentist?	18%	13%
	- Mental health workers?	33%	26%
11.2	Do you think the quality of the health service is very / quite good from:		
	- Doctor?	56%	52%
	- Nurse?	59%	60%
	- Dentist?	30%	34%
	- Mental health workers?	38%	37%
11.3	Do you have any mental health problems?	38%	60%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	39%	38%
11.5	Do you think the overall quality of the health services here is very / quite good?	50%	46%
OTHER SUPPORT NEEDS			
12.1	Do you consider yourself to have a disability?	21%	32%
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	63%	22%
12.3	Have you been on an ACCT in this prison?	7%	25%
<i>For those who have been on an ACCT:</i>			
12.4	Did you feel cared for by staff?	33%	42%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	29%	23%
ALCOHOL AND DRUGS			
13.1	Did you have an alcohol problem when you came into this prison?	21%	20%
<i>For those who had / have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	43%	52%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	29%	37%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	9%	21%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	3%	11%
<i>For those who had / have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison?	50%	52%
13.7	Is it very / quite easy to get illicit drugs in this prison?	39%	44%
13.8	Is it very / quite easy to get alcohol in this prison?	29%	28%

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SAFETY			
14.1	Have you ever felt unsafe here?	46%	41%
14.2	Do you feel unsafe now?	16%	21%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	24%	28%
	- Threats or intimidation?	27%	33%
	- Physical assault?	15%	23%
	- Sexual assault?	3%	3%
	- Theft of canteen or property?	27%	32%
	- Other bullying / victimisation?	6%	21%
	- Not experienced any of these from prisoners here	55%	54%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	14%	20%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	26%	35%
	- Threats or intimidation?	26%	28%
	- Physical assault?	10%	10%
	- Sexual assault?	0%	0%
	- Theft of canteen or property?	10%	12%
	- Other bullying / victimisation?	13%	22%
	- Not experienced any of these from staff here	65%	52%
14.6	If you were being bullied / victimised by staff here, would you report it?	59%	41%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	50%	26%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	44%	31%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	3%	22%
	<i>For those who have been restrained in the last 6 months:</i>		
15.4	Did anyone come and talk to you about it afterwards?	0%	25%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	0%	12%
	<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>		
15.6	Were you treated well by segregation staff?		75%
	Could you shower every day?		50%
	Could you go outside for exercise every day?		92%
	Could you use the phone every day (if you had credit)?		25%

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

The enhanced and workers unit (Beaufort)	rest of the establishment
34	111

EDUCATION, SKILLS AND WORK		
16.1	In this prison, is it easy to get into the following activities:	
	- Education?	69% 52%
	- Vocational or skills training?	48% 34%
	- Prison job?	60% 31%
	- Voluntary work outside of the prison?	10% 6%
	- Paid work outside of the prison?	7% 7%
16.2	In this prison, have you done the following activities:	
	- Education?	88% 82%
	- Vocational or skills training?	76% 70%
	- Prison job?	94% 79%
	- Voluntary work outside of the prison?	42% 46%
	- Paid work outside of the prison?	48% 47%
<i>For those who have done the following activities, do you think they will help you on release:</i>		
	- Education?	72% 56%
	- Vocational or skills training?	68% 63%
	- Prison job?	42% 39%
	- Voluntary work outside of the prison?	46% 49%
	- Paid work outside of the prison?	47% 52%
16.3	Do staff encourage you to attend education, training or work?	65% 60%
PLANNING AND PROGRESSION		
17.1	Do you have a custody plan?	50% 33%
<i>For those who have a custody plan:</i>		
17.2	Do you understand what you need to do to achieve your objectives or targets?	53% 77%
17.3	Are staff helping you to achieve your objectives or targets?	53% 39%
17.4	In this prison, have you done:	
	- Offending behaviour programmes?	31% 32%
	- Other programmes?	31% 29%
	- One to one work?	38% 35%
	- Been on a specialist unit?	19% 12%
	- ROTL - day or overnight release?	25% 9%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>		
	- Offending behaviour programmes?	40% 73%
	- Other programmes?	60% 80%
	- One to one work?	50% 83%
	- Being on a specialist unit?	33% 50%
	- ROTL - day or overnight release?	50% 33%

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

The enhanced and workers unit (Beaufort)	rest of the establishment
34	111

Number of completed questionnaires returned

PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	24%	37%
<i>For those who expect to be released in the next 3 months:</i>			
18.2	Is this prison very / quite near to your home area or intended release address?	0%	5%
18.3	Is anybody helping you to prepare for your release?	63%	49%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	43%	63%
	- Getting employment?	43%	62%
	- Setting up education or training?	50%	56%
	- Arranging benefits?	88%	69%
	- Sorting out finances?	71%	69%
	- Support for drug or alcohol problems?	25%	43%
	- Health / mental Health support?	14%	54%
	- Social care support?	29%	50%
	- Getting back in touch with family or friends?	0%	36%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	67%	29%
	- Getting employment?	67%	22%
	- Setting up education or training?	75%	20%
	- Arranging benefits?	57%	28%
	- Sorting out finances?	40%	20%
	- Support for drug or alcohol problems?	100%	13%
	- Health / mental Health support?	100%	16%
	- Social care support?	50%	17%
	- Getting back in touch with family or friends?		17%
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?	59%	45%

HMP/YOI Portland 2019

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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

	Green shading shows results that are significantly more positive than the comparator
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* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
41	105	28	111

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	76%	42%	75%	44%
	Are you 50 years of age or older?	0%	5%	0%	5%
1.3	Are you from a minority ethnic group?			93%	12%
7.1	Are you Muslim?	67%	2%		
11.3	Do you have any mental health problems?	27%	66%	32%	59%
12.1	Do you consider yourself to have a disability?	17%	34%	25%	29%
19.2	Are you a foreign national?	18%	3%	22%	5%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	6%	0%	5%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	81%	89%	79%	90%
2.4	Overall, were you treated very / quite well in reception?	88%	89%	86%	88%
2.5	When you first arrived, did you have any problems?	70%	74%	74%	72%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	26%	34%	26%	33%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	88%	78%	78%	81%
3.5	Have you had an induction at this prison?	93%	90%	93%	91%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	57%	48%	52%	54%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	20%	33%	15%	35%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	65%	49%	59%	54%
	- Can you shower every day?	58%	55%	56%	56%
	- Do you have clean sheets every week?	33%	42%	37%	40%
	- Do you get cell cleaning materials every week?	32%	41%	36%	40%
	- Is it normally quiet enough for you to relax or sleep at night?	60%	59%	48%	63%
	- Can you get your stored property if you need it?	13%	20%	7%	21%

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

Number of completed questionnaires returned

Black and minority ethnic		White	Muslim	Non-Muslim
	41	105	28	111

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	54%	36%	46%	40%
5.3	Does the shop / canteen sell the things that you need?	33%	55%	37%	51%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	51%	62%	46%	64%
6.2	Are there any staff here you could turn to if you had a problem?	50%	64%	48%	66%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	23%	32%	21%	33%
6.6	Do you feel that you are treated as an individual in this prison?	42%	34%	56%	33%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	71%	65%	71%	68%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	62%	67%	61%	68%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	18%	30%	23%	28%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	65%	62%	56%	65%
8.3	Are you able to use a phone every day (if you have credit)?	51%	54%	50%	55%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	86%	82%	80%	83%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	28%	35%	33%	35%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	5%	2%	7%	2%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	25%	47%	30%	46%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	56%	79%	43%	81%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	41%	51%	36%	52%
10.3	Is it easy for you to make a complaint?	46%	68%	32%	70%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	13%	35%	13%	34%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	33%	20%	44%	18%

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Number of completed questionnaires returned

	Black and minority ethnic	White	Muslim	Non-Muslim
	41	105	28	111

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	12%	39%	14%	36%
	- Nurse?	25%	56%	26%	54%
	- Dentist?	5%	18%	0%	19%
	- Mental health workers?	15%	33%	11%	32%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	18%	40%	11%	43%
11.5	Do you think the overall quality of the health services here is very / quite good?	29%	54%	36%	51%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	0%	36%	0%	38%
SAFETY					
14.1	Have you ever felt unsafe here?	28%	49%	35%	46%
14.2	Do you feel unsafe now?	18%	20%	27%	19%
14.3	Not experienced bullying / victimisation by other prisoners	68%	48%	69%	50%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	22%	18%	17%	20%
14.5	Not experienced bullying / victimisation by members of staff	49%	56%	44%	58%
14.6	If you were being bullied / victimised by staff here, would you report it?	47%	45%	54%	43%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	26%	34%	28%	32%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	23%	39%	15%	40%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	17%	19%	21%	18%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	8%	11%	7%	11%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	60%	62%	46%	64%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	39%	37%	29%	39%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	31%	49%	50%	44%
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?	75%	49%	83%	49%
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%	49%	36%	53%

HMP/YOI Portland 2019

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

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

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

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

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

Number of completed questionnaires returned

Mental health problems	No mental health problems	Have a disability	Do not have a disability
78	65	41	101

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 25 years of age?	42%	63%	42%	55%
	Are you 50 years of age or older?	4%	3%	7%	2%
1.3	Are you from a minority ethnic group?	14%	47%	17%	34%
7.1	Are you Muslim?	12%	30%	18%	21%
11.3	Do you have any mental health problems?			85%	43%
12.1	Do you consider yourself to have a disability?	45%	9%		
19.2	Are you a foreign national?	6%	11%	3%	10%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	8%	0%	8%	3%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	86%	88%	83%	88%
2.4	Overall, were you treated very / quite well in reception?	83%	94%	85%	89%
2.5	When you first arrived, did you have any problems?	82%	62%	83%	68%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	33%	30%	13%	42%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	73%	89%	68%	85%
3.5	Have you had an induction at this prison?	87%	95%	88%	92%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	47%	56%	46%	53%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	33%	28%	29%	31%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	44%	67%	40%	60%
	- Can you shower every day?	49%	65%	43%	62%
	- Do you have clean sheets every week?	40%	39%	46%	36%
	- Do you get cell cleaning materials every week?	41%	37%	36%	40%
	- Is it normally quiet enough for you to relax or sleep at night?	49%	73%	42%	68%
	- Can you get your stored property if you need it?	18%	18%	20%	17%

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

Number of completed questionnaires returned

Mental health problems	No mental health problems	Have a disability	Do not have a disability
78	65	41	101

FOOD AND CANTEEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	39%	45%	32%	46%
5.3	Does the shop / canteen sell the things that you need?	53%	43%	40%	52%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	59%	59%	46%	65%
6.2	Are there any staff here you could turn to if you had a problem?	63%	59%	49%	67%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	33%	27%	24%	32%
6.6	Do you feel that you are treated as an individual in this prison?	33%	41%	29%	41%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	62%	75%	64%	69%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	63%	66%	58%	66%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	27%	25%	23%	27%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	62%	65%	66%	62%
8.3	Are you able to use a phone every day (if you have credit)?	49%	58%	40%	58%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	80%	87%	78%	86%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	43%	22%	39%	31%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	3%	2%	3%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	42%	43%	37%	45%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	76%	67%	65%	74%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	49%	47%	38%	53%
10.3	Is it easy for you to make a complaint?	62%	62%	59%	62%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	34%	21%	23%	31%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	27%	20%	38%	17%

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

Number of completed questionnaires returned

	Mental health problems	No mental health problems		
	78	65	Have a disability	Do not have a disability
			41	101

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	36%	25%	29%	31%
	- Nurse?	55%	37%	49%	45%
	- Dentist?	15%	14%	10%	15%
	- Mental health workers?	28%	27%	22%	29%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	37%		29%	44%
11.5	Do you think the overall quality of the health services here is very / quite good?	50%	42%	44%	48%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	27%	43%	28%	
SAFETY					
14.1	Have you ever felt unsafe here?	57%	26%	54%	39%
14.2	Do you feel unsafe now?	27%	11%	31%	16%
14.3	Not experienced bullying / victimisation by other prisoners	37%	75%	43%	58%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	18%	19%	15%	20%
14.5	Not experienced bullying / victimisation by members of staff	49%	62%	40%	61%
14.6	If you were being bullied / victimised by staff here, would you report it?	45%	46%	50%	44%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	31%	32%	28%	34%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	35%	33%	29%	35%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	25%	11%	29%	14%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	12%	8%	15%	8%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	61%	60%	46%	66%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	37%	37%	33%	39%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	48%	38%	46%	42%
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?	36%	67%	33%	60%
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%	55%	39%	52%

HMP/YOI Portland 2019

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:
 - responses of prisoners aged 25 and under are compared with those of prisoners over 25
 Please note that these analyses are based on summary data from selected survey questions only.

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

- Green shading shows results that are significantly more positive than the comparator
- Blue shading shows results that are significantly more negative than the comparator
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25 and under	Over 25
75	71

Number of completed questionnaires returned

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	56%	
	Are you 50 years of age or older?		7%
1.3	Are you from a minority ethnic group?	41%	14%
7.1	Are you Muslim?	30%	10%
11.3	Do you have any mental health problems?	44%	65%
12.1	Do you consider yourself to have a disability?	24%	35%
19.2	Are you a foreign national?	7%	9%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	8%	0%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	83%	91%
2.4	Overall, were you treated very / quite well in reception?	85%	91%
2.5	When you first arrived, did you have any problems?	69%	76%
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	27%	35%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	77%	86%
3.5	Have you had an induction at this prison?	94%	87%
<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	52%	49%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	21%	39%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	56%	52%
	- Can you shower every day?	61%	52%
	- Do you have clean sheets every week?	42%	38%
	- Do you get cell cleaning materials every week?	29%	48%
	- Is it normally quiet enough for you to relax or sleep at night?	62%	58%
	- Can you get your stored property if you need it?	15%	20%

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	25 and under	Over 25
Number of completed questionnaires returned	75	71

FOOD AND CANTEEN			
5.2	Do you get enough to eat at meal-times always / most of the time?	46%	35%
5.3	Does the shop / canteen sell the things that you need?	51%	45%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	43%	75%
6.2	Are there any staff here you could turn to if you had a problem?	51%	70%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	26%	33%
6.6	Do you feel that you are treated as an individual in this prison?	35%	38%
FAITH			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	67%	69%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	59%	69%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	34%	18%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	66%	62%
8.3	Are you able to use a phone every day (if you have credit)?	49%	57%
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	84%	81%
TIME OUT OF CELL			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	27%	41%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	6%	0%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	40%	45%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	64%	79%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	42%	54%
10.3	Is it easy for you to make a complaint?	51%	73%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	20%	38%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	26%	22%

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Number of completed questionnaires returned

25 and under	Over 25
75	71

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	22%	39%
	- Nurse?	36%	58%
	- Dentist?	10%	19%
	- Mental health workers?	18%	37%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	31%	42%
11.5	Do you think the overall quality of the health services here is very / quite good?	40%	52%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	31%	29%
SAFETY			
14.1	Have you ever felt unsafe here?	38%	47%
14.2	Do you feel unsafe now?	18%	22%
14.3	Not experienced bullying / victimisation by other prisoners	61%	48%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	19%	19%
14.5	Not experienced bullying / victimisation by members of staff	43%	65%
14.6	If you were being bullied / victimised by staff here, would you report it?	42%	48%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	27%	37%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	27%	42%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	26%	10%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	17%	3%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	59%	64%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	44%	28%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	34%	61%
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?	67%	38%
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%	49%

HMP/YOI Portland 2019

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

In this table summary statistics from HMP/YOI Portland 2019 are compared with the following HMIP survey data:

- Summary statistics from surveys of category C training prisons conducted since the introduction of the new questionnaire in September 2017 (24 prisons). Please note that this does not include all category C training prisons.

- Summary statistics from HMP/YOI Portland in 2017. Please note that we do not have comparable data for the new questions introduced in September 2017.

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147	3,991	147	167

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION						
1.2	Are you under 21 years of age?	<i>n</i> =146	29%	5%	29%	22%
	Are you 25 years of age or younger?	<i>n</i> =146	51%	25%	51%	
	Are you 50 years of age or older?	<i>n</i> =146	3%	13%	3%	2%
	Are you 70 years of age or older?	<i>n</i> =146	0%	2%	0%	0%
1.3	Are you from a minority ethnic group?	<i>n</i> =146	28%	30%	28%	24%
1.4	Have you been in this prison for less than 6 months?	<i>n</i> =141	40%	34%	40%	
1.5	Are you currently serving a sentence?	<i>n</i> =143	100%	100%	100%	100%
	Are you on recall?	<i>n</i> =143	10%	9%	10%	15%
1.6	Is your sentence less than 12 months?	<i>n</i> =146	10%	8%	10%	12%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n</i> =146	1%	4%	1%	1%
7.1	Are you Muslim?	<i>n</i> =139	20%	17%	20%	13%
11.3	Do you have any mental health problems?	<i>n</i> =143	55%	44%	55%	
12.1	Do you consider yourself to have a disability?	<i>n</i> =142	29%	34%	29%	26%
19.1	Do you have any children under the age of 18?	<i>n</i> =140	46%	50%	46%	41%
19.2	Are you a foreign national?	<i>n</i> =138	8%	9%	8%	9%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n</i> =140	4%	5%	4%	5%
19.4	Have you ever been in the armed services?	<i>n</i> =140	2%	6%	2%	4%
19.5	Is your gender female or non-binary?	<i>n</i> =140	1%	1%	1%	
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n</i> =140	1%	4%	1%	1%
19.7	Do you identify as transgender or transsexual?	<i>n</i> =135	1%	2%	1%	
ARRIVAL AND RECEPTION						
2.1	Were you given up-to-date information about this prison before you came here?	<i>n</i> =146	11%	16%	11%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n</i> =145	45%	48%	45%	67%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n</i> =146	87%	82%	87%	84%
2.4	Overall, were you treated very / quite well in reception?	<i>n</i> =146	88%	86%	88%	

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2.5	When you first arrived, did you have any problems?	<i>n</i> =143	73%	72%	73%	65%
2.5	Did you have problems with:					
	- Getting phone numbers?	<i>n</i> =143	28%	26%	28%	15%
	- Contacting family?	<i>n</i> =143	30%	26%	30%	14%
	- Arranging care for children or other dependents?	<i>n</i> =143	2%	2%	2%	
	- Contacting employers?	<i>n</i> =143	4%	2%	4%	3%
	- Money worries?	<i>n</i> =143	23%	17%	23%	14%
	- Housing worries?	<i>n</i> =143	18%	13%	18%	21%
	- Feeling depressed?	<i>n</i> =143	36%	29%	36%	
	- Feeling suicidal?	<i>n</i> =143	11%	8%	11%	
	- Other mental health problems?	<i>n</i> =143	20%	21%	20%	
	- Physical health problems?	<i>n</i> =143	12%	14%	12%	15%
	- Drugs or alcohol (e.g. withdrawal)?	<i>n</i> =143	16%	11%	16%	
	- Getting medication?	<i>n</i> =143	20%	20%	20%	
	- Needing protection from other prisoners?	<i>n</i> =143	8%	6%	8%	6%
	- Lost or delayed property?	<i>n</i> =143	29%	22%	29%	23%
	<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	<i>n</i> =101	32%	33%	32%	36%
FIRST NIGHT AND INDUCTION						
3.1	Before you were locked up on your first night, were you offered:					
	- Tobacco or nicotine replacement?	<i>n</i> =146	79%	64%	79%	51%
	- Toiletries / other basic items?	<i>n</i> =146	71%	52%	71%	59%
	- A shower?	<i>n</i> =146	43%	45%	43%	47%
	- A free phone call?	<i>n</i> =146	55%	44%	55%	49%
	- Something to eat?	<i>n</i> =146	84%	75%	84%	72%
	- The chance to see someone from health care?	<i>n</i> =146	64%	60%	64%	69%
	- The chance to talk to a Listener or Samaritans?	<i>n</i> =146	27%	28%	27%	24%
	- Support from another prisoner (e.g. Insider or buddy)?	<i>n</i> =146	24%	24%	24%	
	- None of these?	<i>n</i> =146	8%	7%	8%	
3.2	On your first night in this prison, was your cell very / quite clean?	<i>n</i> =147	51%	41%	51%	
3.3	Did you feel safe on your first night here?	<i>n</i> =145	81%	75%	81%	78%
3.4	In your first few days here, did you get:					
	- Access to the prison shop / canteen?	<i>n</i> =141	48%	43%	48%	35%
	- Free PIN phone credit?	<i>n</i> =139	55%	48%	55%	
	- Numbers put on your PIN phone?	<i>n</i> =132	43%	49%	43%	
3.5	Have you had an induction at this prison?	<i>n</i> =143	91%	95%	91%	77%
	<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	<i>n</i> =130	51%	58%	51%	

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ON THE WING						
4.1	Are you in a cell on your own?	<i>n=145</i>	72%	62%	72%	
4.2	Is your cell call bell normally answered within 5 minutes?	<i>n=144</i>	30%	31%	30%	25%
4.3	On the wing or houseblock you currently live on:					
	- Do you normally have enough clean, suitable clothes for the week?	<i>n=141</i>	54%	70%	54%	48%
	- Can you shower every day?	<i>n=143</i>	56%	90%	56%	66%
	- Do you have clean sheets every week?	<i>n=142</i>	39%	67%	39%	61%
	- Do you get cell cleaning materials every week?	<i>n=140</i>	39%	60%	39%	40%
	- Is it normally quiet enough for you to relax or sleep at night?	<i>n=141</i>	60%	68%	60%	58%
	- Can you get your stored property if you need it?	<i>n=143</i>	18%	27%	18%	14%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	<i>n=141</i>	55%	61%	55%	
FOOD AND CANTEEN						
5.1	Is the quality of the food in this prison very / quite good?	<i>n=145</i>	28%	44%	28%	
5.2	Do you get enough to eat at meal-times always / most of the time?	<i>n=146</i>	40%	37%	40%	
5.3	Does the shop / canteen sell the things that you need?	<i>n=140</i>	49%	62%	49%	40%
RELATIONSHIPS WITH STAFF						
6.1	Do most staff here treat you with respect?	<i>n=141</i>	59%	70%	59%	75%
6.2	Are there any staff here you could turn to if you had a problem?	<i>n=143</i>	60%	71%	60%	65%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<i>n=143</i>	29%	33%	29%	23%
6.4	Do you have a personal officer?	<i>n=137</i>	67%	85%	67%	
<i>For those who have a personal officer:</i>						
6.4	Is your personal or named officer very / quite helpful?	<i>n=92</i>	41%	49%	41%	
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	<i>n=140</i>	6%	10%	6%	
6.6	Do you feel that you are treated as an individual in this prison?	<i>n=141</i>	36%	44%	36%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	<i>n=142</i>	63%	53%	63%	
	If so, do things sometimes change?	<i>n=89</i>	34%	35%	34%	
FAITH						
7.1	Do you have a religion?	<i>n=139</i>	66%	68%	66%	57%
<i>For those who have a religion:</i>						
7.2	Are your religious beliefs respected here?	<i>n=91</i>	68%	71%	68%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	<i>n=92</i>	64%	69%	64%	
7.4	Are you able to attend religious services, if you want to?	<i>n=91</i>	86%	88%	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?	<i>n</i> =137	26%	30%	26%	
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	<i>n</i> =136	63%	56%	63%	47%
8.3	Are you able to use a phone every day (if you have credit)?	<i>n</i> =141	53%	89%	53%	
8.4	Is it very / quite easy for your family and friends to get here?	<i>n</i> =139	13%	37%	13%	
8.5	Do you get visits from family/friends once a week or more?	<i>n</i> =138	10%	17%	10%	
<i>For those who get visits:</i>						
8.6	Do visits usually start and finish on time?	<i>n</i> =80	43%	52%	43%	
8.7	Are your visitors usually treated respectfully by staff?	<i>n</i> =77	83%	75%	83%	
TIME OUT OF CELL						
9.1	Do you know what the unlock and lock-up times are supposed to be here?	<i>n</i> =141	88%	91%	88%	
<i>For those who know what the unlock and lock-up times are supposed to be:</i>						
9.1	Are these times usually kept to?	<i>n</i> =124	39%	58%	39%	
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	<i>n</i> =138	33%	15%	33%	22%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	<i>n</i> =138	3%	9%	3%	3%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	<i>n</i> =140	68%	20%	68%	
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	<i>n</i> =140	1%	3%	1%	
9.4	Do you have time to do domestics more than 5 days in a typical week?	<i>n</i> =139	32%	59%	32%	
9.5	Do you get association more than 5 days in a typical week, if you want it?	<i>n</i> =141	48%	67%	48%	
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	<i>n</i> =139	60%	67%	60%	
9.7	Do you typically go to the gym twice a week or more?	<i>n</i> =139	19%	53%	19%	
9.8	Do you typically go to the library once a week or more?	<i>n</i> =141	21%	49%	21%	21%
<i>For those who use the library:</i>						
9.9	Does the library have a wide enough range of materials to meet your needs?	<i>n</i> =68	43%	57%	43%	45%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS						
10.1	Is it easy for you to make an application?	<i>n</i> =142	72%	74%	72%	71%
<i>For those who have made an application:</i>						
10.2	Are applications usually dealt with fairly?	<i>n</i> =125	48%	51%	48%	51%
	Are applications usually dealt with within 7 days?	<i>n</i> =128	13%	38%	13%	27%
10.3	Is it easy for you to make a complaint?	<i>n</i> =143	62%	64%	62%	40%
<i>For those who have made a complaint:</i>						
10.4	Are complaints usually dealt with fairly?	<i>n</i> =87	29%	32%	29%	20%
	Are complaints usually dealt with within 7 days?	<i>n</i> =87	18%	27%	18%	12%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	<i>n</i> =105	24%	27%	24%	

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<i>For those who need it, is it easy to:</i>					
10.6	Communicate with your solicitor or legal representative?	<i>n</i> =123	20%	42%	20%
	Attend legal visits?	<i>n</i> =116	39%	49%	39%
	Get bail information?	<i>n</i> =98	12%	17%	12%
<i>For those who have had legal letters:</i>					
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	<i>n</i> =116	52%	58%	52%
HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	<i>n</i> =142	31%	33%	31%
	- Nurse?	<i>n</i> =137	47%	53%	47%
	- Dentist?	<i>n</i> =140	14%	17%	14%
	- Mental health workers?	<i>n</i> =140	27%	25%	27%
11.2	Do you think the quality of the health service is very / quite good from:				
	- Doctor?	<i>n</i> =141	53%	49%	53%
	- Nurse?	<i>n</i> =142	60%	58%	60%
	- Dentist?	<i>n</i> =139	32%	36%	32%
	- Mental health workers?	<i>n</i> =140	36%	30%	36%
11.3	Do you have any mental health problems?	<i>n</i> =143	55%	44%	55%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	<i>n</i> =78	37%	43%	37%
11.5	Do you think the overall quality of the health services here is very / quite good?	<i>n</i> =143	46%	45%	46%
OTHER SUPPORT NEEDS					
12.1	Do you consider yourself to have a disability?	<i>n</i> =142	29%	34%	29%
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	<i>n</i> =40	30%	33%	30%
12.3	Have you been on an ACCT in this prison?	<i>n</i> =139	21%	16%	21%
<i>For those who have been on an ACCT:</i>					
12.4	Did you feel cared for by staff?	<i>n</i> =28	39%	45%	39%
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	<i>n</i> =140	24%	40%	24%
ALCOHOL AND DRUGS					
13.1	Did you have an alcohol problem when you came into this prison?	<i>n</i> =142	20%	14%	20%
<i>For those who had / have an alcohol problem:</i>					
13.2	Have you been helped with your alcohol problem in this prison?	<i>n</i> =29	48%	53%	48%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	<i>n</i> =142	35%	27%	35%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	<i>n</i> =142	18%	17%	18%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	<i>n</i> =143	10%	10%	10%
<i>For those who had / have a drug problem:</i>					
13.6	Have you been helped with your drug problem in this prison?	<i>n</i> =53	51%	48%	51%
13.7	Is it very / quite easy to get illicit drugs in this prison?	<i>n</i> =139	43%	48%	43%
13.8	Is it very / quite easy to get alcohol in this prison?	<i>n</i> =139	29%	31%	29%

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SAFETY						
14.1	Have you ever felt unsafe here?	<i>n</i> =137	43%	46%	43%	50%
14.2	Do you feel unsafe now?	<i>n</i> =135	20%	22%	20%	24%
14.3	Have you experienced any of the following from other prisoners here:					
	- Verbal abuse?	<i>n</i> =135	27%	33%	27%	
	- Threats or intimidation?	<i>n</i> =135	32%	30%	32%	
	- Physical assault?	<i>n</i> =135	22%	17%	22%	
	- Sexual assault?	<i>n</i> =135	3%	3%	3%	
	- Theft of canteen or property?	<i>n</i> =135	31%	23%	31%	
	- Other bullying / victimisation?	<i>n</i> =135	18%	17%	18%	
	- Not experienced any of these from prisoners here	<i>n</i> =135	54%	55%	54%	
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	<i>n</i> =134	19%	34%	19%	
14.5	Have you experienced any of the following from staff here:					
	- Verbal abuse?	<i>n</i> =131	34%	30%	34%	
	- Threats or intimidation?	<i>n</i> =131	28%	23%	28%	
	- Physical assault?	<i>n</i> =131	12%	10%	12%	
	- Sexual assault?	<i>n</i> =131	0%	2%	0%	
	- Theft of canteen or property?	<i>n</i> =131	12%	9%	12%	
	- Other bullying / victimisation?	<i>n</i> =131	21%	17%	21%	
	- Not experienced any of these from staff here	<i>n</i> =131	54%	58%	54%	
14.6	If you were being bullied / victimised by staff here, would you report it?	<i>n</i> =137	45%	50%	45%	
BEHAVIOUR MANAGEMENT						
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	<i>n</i> =136	32%	41%	32%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	<i>n</i> =138	34%	39%	34%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	<i>n</i> =142	18%	12%	18%	22%
<i>For those who have been restrained in the last 6 months:</i>						
15.4	Did anyone come and talk to you about it afterwards?	<i>n</i> =27	22%	21%	22%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	<i>n</i> =138	10%	9%	10%	
<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>						
15.6	Were you treated well by segregation staff?	<i>n</i> =14	71%	59%	71%	
	Could you shower every day?	<i>n</i> =14	57%	77%	57%	
	Could you go outside for exercise every day?	<i>n</i> =14	93%	78%	93%	
	Could you use the phone every day (if you had credit)?	<i>n</i> =14	29%	67%	29%	

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EDUCATION, SKILLS AND WORK					
16.1	In this prison, is it easy to get into the following activities:				
	- Education?	n=137	56%	63%	56%
	- Vocational or skills training?	n=129	36%	42%	36%
	- Prison job?	n=134	37%	49%	37%
	- Voluntary work outside of the prison?	n=132	7%	5%	7%
	- Paid work outside of the prison?	n=133	7%	4%	7%
16.2	In this prison, have you done the following activities:				
	- Education?	n=138	83%	80%	83%
	- Vocational or skills training?	n=137	72%	69%	72%
	- Prison job?	n=134	83%	81%	83%
	- Voluntary work outside of the prison?	n=130	46%	32%	46%
	- Paid work outside of the prison?	n=131	48%	31%	48%
<i>For those who have done the following activities, do you think they will help you on release:</i>					
	- Education?	n=115	59%	61%	59%
	- Vocational or skills training?	n=98	64%	67%	64%
	- Prison job?	n=111	40%	41%	40%
	- Voluntary work outside of the prison?	n=60	48%	53%	48%
	- Paid work outside of the prison?	n=63	51%	57%	51%
16.3	Do staff encourage you to attend education, training or work?	n=138	61%	61%	61%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	n=140	37%	59%	37%
<i>For those who have a custody plan:</i>					
17.2	Do you understand what you need to do to achieve your objectives or targets?	n=52	67%	84%	67%
17.3	Are staff helping you to achieve your objectives or targets?	n=51	43%	47%	43%
17.4	In this prison, have you done:				
	- Offending behaviour programmes?	n=50	32%	49%	32%
	- Other programmes?	n=51	31%	43%	31%
	- One to one work?	n=51	37%	37%	37%
	- Been on a specialist unit?	n=50	16%	19%	16%
	- ROTL - day or overnight release?	n=49	16%	13%	16%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>					
	- Offending behaviour programmes?	n=16	63%	72%	63%
	- Other programmes?	n=16	69%	68%	69%
	- One to one work?	n=19	68%	68%	68%
	- Being on a specialist unit?	n=8	38%	47%	38%
	- ROTL - day or overnight release?	n=8	38%	39%	38%

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PREPARATION FOR RELEASE						
18.1	Do you expect to be released in the next 3 months?	<i>n=140</i>	34%	24%	34%	
<i>For those who expect to be released in the next 3 months:</i>						
18.2	Is this prison very / quite near to your home area or intended release address?	<i>n=47</i>	4%	43%	4%	
18.3	Is anybody helping you to prepare for your release?	<i>n=46</i>	52%	58%	52%	
18.4	Do you need help to sort out the following for when you are released:					
	- Finding accommodation?	<i>n=46</i>	61%	63%	61%	
	- Getting employment?	<i>n=45</i>	60%	62%	60%	
	- Setting up education or training?	<i>n=45</i>	53%	47%	53%	
	- Arranging benefits?	<i>n=45</i>	73%	68%	73%	
	- Sorting out finances?	<i>n=44</i>	71%	58%	71%	
	- Support for drug or alcohol problems?	<i>n=46</i>	41%	43%	41%	
	- Health / mental Health support?	<i>n=43</i>	49%	50%	49%	
	- Social care support?	<i>n=44</i>	48%	35%	48%	
	- Getting back in touch with family or friends?	<i>n=40</i>	30%	38%	30%	
18.4	Are you getting help to sort out the following for when you are released, if you need it:					
	- Finding accommodation?	<i>n=28</i>	36%	38%	36%	
	- Getting employment?	<i>n=27</i>	30%	24%	30%	
	- Setting up education or training?	<i>n=24</i>	29%	24%	29%	
	- Arranging benefits?	<i>n=33</i>	36%	29%	36%	
	- Sorting out finances?	<i>n=31</i>	26%	24%	26%	
	- Support for drug or alcohol problems?	<i>n=19</i>	26%	49%	26%	
	- Health / mental Health support?	<i>n=21</i>	24%	31%	24%	
	- Social care support?	<i>n=21</i>	24%	24%	24%	
	- Getting back in touch with family or friends?	<i>n=12</i>	17%	32%	17%	
FINAL QUESTION ABOUT THIS PRISON						
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	<i>n=145</i>	48%	51%	48%	