

Report on a full unannounced inspection  
of

# **HMP Lincoln**

20–24 August 2012

by HM Chief Inspector of Prisons

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# Introduction

HMP Lincoln is a Victorian, city-centre, local prison. This inspection identified some serious concerns about the prison which had deteriorated sharply since our last inspection in 2010. These needed to be vigorously addressed as a matter of urgency.

The prison faced some challenges that were outside its direct control. At the time of the inspection there was considerable speculation about its future role and this may have caused uncertainty and poor morale among staff. It was overcrowded – with about 50% more prisoners than it was certified to hold. The environment was poor and although work was under way to replace those areas that caused us most concern – reception and the segregation unit – this had not yet been completed. Like other prisons, financial constraints and staffing changes caused difficulty. Managers in the prison complained of a lack of support from the centre.

However, that does not excuse our very poor inspection findings.

The prison was not safe. The violence reduction coordinator was committed but had other duties and did not have the time or support to carry out her role effectively. In our survey, 24% of prisoners told us they felt unsafe at the time of the inspection compared with 17% in comparable prisons and 14% the last time we inspected Lincoln. This was even higher on the vulnerable prisoner wing. A third of prisoners told us they had been victimised by other prisoners. The number of reported fights and assaults was high and there were evident opportunities for bullying. There was little attempt to investigate either individual incidents or patterns of violence. Prisoners who were too frightened to leave their wings to go to work but who refused to name the perpetrator were punished by being sent to the segregation unit. The vulnerable prisoner wing was mainly for sex offenders but others who were frightened on the main wings also sought sanctuary there. They applied for admission under rule 45 but there was no clear process for deciding whether this should be granted, and prisoners told us they had been denied admission without explanation.

Care for prisoners at risk of suicide and self-harm was very mixed. Too many prisoners at risk of suicide were held in the segregation unit with no record of the exceptional circumstances required to justify this. There was very little for these men to do that provided positive distraction. The constant observation cell in the segregation unit was particularly grim – dark, poorly ventilated and situated opposite the dirty protest cell. Use of the segregation unit as a whole was very high and it was welcome that its very poor environment would shortly be replaced.

The number of prisoners testing positive in random drug tests were well within the target figure. However, prisoners themselves told us it was easy to get drugs and alcohol in the prison. Suspicion testing was not carried out comprehensively or quickly. There was clear evidence of prisoners developing a drug addiction in the prison. One in five prisoners required opiate substitution treatment. Too few were on a reducing dosage and we were concerned that a number had been given considerable increases.

External and communal areas of the prison were dirty and some areas did not appear to have been cleaned for some time. Individual cells were generally clean but were overcrowded with unscreened toilets. Prisoners told us it was difficult to get enough clean clothes. The number of complaints was almost double that of comparable prisons.

Work on diversity was poor. Insufficient data were collected and we found no evidence that data had been analysed. The data provided evidence of unequal treatment of black and minority ethnic prisoners, including a disproportionate number segregated. Not surprisingly, in our survey black and minority ethnic prisoners were significantly more negative than the prison population as a whole. These prisoners told us that some staff used inappropriate language in their dealings with them. There was little support for prisoners with other protected characteristics. The prison could not identify the number of prisoners with disabilities that it held and not all prisoners who needed a personal evacuation plan had one. The chaplaincy team did good work in difficult circumstances but there was unsatisfactory provision for Catholic prisoners.

The lack of support for foreign national prisoners was a matter of great concern. General support such as the provision of interpreting or translated material was poor. Support from the UK Border Agency was sporadic. We found two foreign national prisoners who had been held for lengthy periods beyond the end of their sentence, one for a shocking nine years beyond the end of his sentence. These two men had each been awarded and served long sentences by the courts and then been kept in administrative detention for many years beyond the end of their sentence. These are both men who have committed serious offences who in normal circumstances would be returned to their own country after they had served their sentence. However, it seems that for reasons neither man can control, such a return is extremely difficult if not impossible. It cannot be right that they continue to be detained for so long without the authority of a court.

A saving grace for the prison was good staff-prisoner relationships – without this, the other problems may have had much more serious consequences. More prisoners than at comparator prisons said staff treated them with respect and more said they had a member of staff they could turn to with a problem. We saw generally good relations and examples where individual staff reacted with care and compassion to prisoner concerns.

At the time of the inspection the prison was frequently disrupted by failure of the roll check – the process by which all prisoners are accounted for at regular times during the day. Numbers were miscounted and all movement ceased until the numbers tallied. This meant that prisoners were often returned to their cells from work or education, could not attend health care or other appointments, and in some cases remained locked in their cells for the entire session. We were repeatedly told by prisoners, staff and managers that this failure was deliberate and occurred because of a dispute between management and staff about new regime and roll-check procedures. We were unable to verify if this was true – but the fact that so many people believed it to be so revealed much about the atmosphere in the prison.

We found up to half the prisoners locked in their cells during the working part of the day. There were not enough activity places and too many prisoners were under-occupied in desultory and ineffective wing domestic duties. There were good quality work, training and education places available in a new academy – but when visited during the working part of the day, it was almost empty and staff were unable to explain why this was so. There were good links with one employer and a few prisoners had opportunities to gain valuable experience outside the prison on temporary release. Prisoners who were engaged in activities were able to gain useful qualifications.

Offender management was weak and there were poor links between the offender management unit and other parts of the prison. However, this was offset by very good support for prisoners' practical resettlement needs – by far and away the best part of the prison. This was provided by the Lincolnshire Action Trust (LAT), whose staff in distinctive uniforms were instantly visible and accessible throughout the prison. There is no doubt that without their work, many more

prisoners would have been released without any accommodation, work or education. Work with children and families was particularly good and there was a range of activities to help men maintain constructive relationships with their families.

This is a very concerning report. HMP Lincoln has some strengths it can build on: good relationships between staff and prisoners, some good new facilities either established or shortly to become available, and resettlement services that were better than we often see elsewhere. However, this was undermined by a serious lack of professionalism in many areas that compromised safety and the smooth running of the prison. Some of this required further investigation and action by the Prison Service nationally. The inspectorate will announce a date for its return to HMP Lincoln shortly so that the prison has a clear focus on the improvement it needs to put in place urgently.

**Nick Hardwick**  
HM Chief Inspector of Prisons

**October 2012**





# Fact page

## Task of the establishment

Category B local prison for male prisoners

## Prison status

Public sector

## Region

East Midlands

## Number held

632

## Certified normal accommodation

408

## Operational capacity

729

## Date of last full inspection

3-7 December 2007

## Brief history

HMP Lincoln opened in 1872 and parts of the prison are grade II listed buildings. Three of the four main residential units are of the original Victorian design. E wing was opened in 1992.

## Short description of residential units

A wing - refurbished in 2007, A wing has the first night centre and is the induction wing but also accommodates prisoners after their induction

B wing - the smallest wing, all cells are double

C wing - holds 198 prisoners in a mix of single and double accommodation

D wing - segregation unit

E wing - designated for vulnerable prisoners, predominantly sex offenders.

## Name of governor

Ian Thomas

## Escort contractor

GeoAmey

## Health service commissioner and provider

Commissioner: NHS Lincolnshire

Provider: Lincolnshire Partnership Foundation Trust

## Learning and skills providers

Milton Keynes College

## Independent Monitoring Board chair

David Makepeace



# Healthy prison summary

## Introduction

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HP1 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, immigration detention facilities and police custody.

HP2 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.

HP3 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 criteria 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

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

HP4 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the National Offender Management Service.

**- outcomes for prisoners are good against this healthy prison test.**

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

**- outcomes for prisoners are reasonably good against this healthy prison test.**

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 against this healthy prison test.**

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 against this healthy prison test.**

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.

## Safety

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HP5 Prisoners spent too long in reception and the environment was poor. First night arrangements were inconsistent and accommodation was dirty and ill prepared. Induction was reasonably good. Too many prisoners, particularly vulnerable prisoners, felt unsafe and there were high levels of violence. Prisoners at risk of suicide and self-harm did not always receive adequate care. There was little done to improve safety by identifying and addressing patterns or trends in violent and self-harm incidents. Security was reasonably well managed but closed visits were overused. Too few prisoners suspected of taking drugs were tested. The incentives and earned privileges scheme was reasonably good. The use of force was low but insufficiently monitored and analysed. The use of segregation was high and the unit had a poor environment and regime, but stays were short. The integrated drug treatment system was hampered by staff shortages and an unsuitable environment. Outcomes for prisoners were poor against this healthy prison test.

HP6 Prisoners were treated well by escort staff but spent too long on vehicles waiting to get into the prison. Once through the gate, disembarkation from vans was quick

HP7 In our survey,<sup>1</sup> prisoners were positive about being treated respectfully in reception and we saw some good interaction with staff. The majority of prisoners spent too long in reception and we saw some stay there in dirty cells, with limited refreshments and little constructive activity, for up to five hours. The experience was worse for vulnerable prisoners. We were not assured that new arrivals always had a private, first night 'keep safe' interview in reception as required, and on the first night centre the interview concentrated on signing compacts rather than checking on their welfare. The lack of a Listener in reception was a big gap for a local prison where some prisoners could be in prison for the first time. First night cells on A wing were dirty and

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<sup>1</sup> **Inspection methodology:** There are five key sources of evidence for inspection: 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, applying both qualitative and quantitative methodologies. All findings and judgements are triangulated, which increases the validity of the data gathered. Survey results show the collective response (in percentages) from prisoners in the establishment being inspected compared with the collective response (in percentages) from respondents in all establishments of that type (the comparator figure). Where references to comparisons between these two sets of figures are made in the report, these relate to statistically significant differences only. Statistical significance is a way of estimating the likelihood that a difference between two samples indicates a real difference between the populations from which the samples are taken, rather than being due to chance. If a result is very unlikely to have arisen by chance, we say it is 'statistically significant'. The significance level is set at 0.05, which means that there is only a 5% chance that the difference in results is due to chance.

(Adapted from Towel et al (eds), *Dictionary of Forensic Psychology*.)

poorly prepared but better on E wing for vulnerable prisoners. Handover arrangements to night staff were sound. In our survey, prisoners were positive about induction and the two-day programme was reasonably comprehensive. The experience for vulnerable prisoners was less positive.

- HP8 At the time of the survey, nearly a quarter of prisoners said that they did not feel safe, which was significantly worse than the comparator and at our last inspection. Levels of victimisation by prisoners were high. The number of reported fights and assaults among prisoners was also high, but the quality of investigations into alleged or suspected incidents was poor and there was evidence of under-reporting. Many prisoners said that staff did not always take complaints about their safety seriously. The safer custody meeting was not effective. There was no proper analysis of the pattern of violence in the prison to improve safety. Links with other areas of the prison, particularly the security department, were underdeveloped. The violence reduction coordinator had insufficient time to oversee processes, offer guidance and training to residential staff or carry out quality checks of all associated documentation.
- HP9 Approximately one quarter of the population were vulnerable prisoners. Living conditions on their discrete unit were reasonable and the regime was generally comparable with the rest of the prison. Half of vulnerable prisoners said that they felt unsafe at the time of the survey. More than half said that they had been victimised by other prisoners and nearly half said that they had been victimised by staff.
- HP10 Levels of self-harm were similar to comparable prisons. Analysis of data to provide information about patterns and trends of self-harming behaviour was underdeveloped. Attendance at safer custody meetings was inconsistent. Generally care planning was reasonable but we saw examples of poor planning for prisoners in crisis. Too many prisoners were held in the segregation unit on open self-harm monitoring documents. There were insufficient Listeners (prisoners trained to support those at risk of self-harm) to meet the needs of prisoners on the main wings, and access to the Samaritans direct line at night was too limited for most prisoners. The location of the constant observation cell in segregation was inappropriate for prisoners in crisis. Conditions in the constant watch cell on E wing were poor, particularly for prisoners from the main wings who spent nearly all day locked up with nothing meaningful to do.
- HP11 Security arrangements were, with a few anomalies, broadly proportionate and reasonably well managed. Closed visits were used too frequently and were often unrelated to activity in visits. Some strip searching on reception, entry to the segregation unit and after visits was unnecessary.
- HP12 Over a third of prisoners in our survey said it was easy to get illegal drugs. We found that too few prisoners suspected of taking drugs were tested and there were gaps where no testing took place. The mandatory drug testing positive rate was comparatively low and drug finds were not high. Few prisoners reported problems with diverted medication.
- HP13 Incentives and earned privileges (IEP) processes were reasonably good. Warnings were proportionate, there was enough differential between the levels and most prisoners felt they were treated fairly on the scheme. Prisoners waited too long on standard level before they could advance to enhanced.

- HP14 Comprehensive data were collated on all areas of discipline, including adjudications, use of force and segregation, but were not used effectively to analyse trends and patterns or to identify and take action where necessary. The number of adjudications was much higher than at comparator prisons, and some could have been dealt with less formally. Records of hearings were variable and some did not show sufficient exploration before a finding of guilt.
- HP15 Incidents where force was used were lower than in comparable prisons and many were low level. The quality of documentation was mixed but some efforts to de-escalate were recorded. Planned interventions were not always recorded and were not reviewed. Those we looked at were of a variable quality. The special cell was used reasonably infrequently but some supporting documentation was poor and we were not assured all uses were necessary.
- HP16 Throughput of the segregation unit was high but few prisoners sought sanctuary for their own protection and lengths of stay were quite short. The environment was poor with a lack of natural light, dirty cells, a grim special cell and a dirty exercise yard. Apart from daily access to showers, telephones and exercise and some engagement with education, the regime was limited and there were no formal care or reintegration plans. Relationships between unit staff and prisoners were mostly good but this was not reflected in staff entries in history sheets or electronic case notes.
- HP17 The clinical integrated drug treatment system (IDTS) was poorly resourced and lacked a stabilisation unit and observation hatches on the first night landing. Prisoners could access first night treatment and were generally positive about the support they received, but complained about the late administration of methadone and Subutex and the lack of privacy. The clinical team was understaffed and very stretched and unable to conduct regular clinical reviews. Over 100 prisoners currently received opiate substitutes with only 17 on a reduction regime. We were concerned about several examples where dosage had been increased significantly. There was good joint working between clinical and substance misuse (CARAT) services. The CARAT service included prisoners with primary alcohol problems and provided good quality interventions. There was no alcohol strategy, although a quarter of prisoners said they had alcohol problems on arrival and a fifth said it was easy to get alcohol in the prison. There was no structured drug/alcohol programme.

## Respect

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- HP18 Outside and communal areas were dirty and littered. Cells were generally clean but poorly ventilated. Access to daily showers was good. Clothing supplies and laundry arrangements were inadequate. Applications and complaints were generally fair and timely but the number of complaints was very high. Staff-prisoner relationships were reasonable and most prisoners said staff treated them with respect. The standard of food was good. Equality and diversity work was poorly managed and underdeveloped. Black and minority ethnic and foreign national prisoners said they were treated less favourably than white and British prisoners across many areas. Clinical support for prisoners with disabilities was good but care planning on the wings was poor. Facilities for older prisoners were very limited. Health provision was reasonably good but prisoners waited too long to access key services, including the doctor and dentist. Mental health services were satisfactory. Outcomes for prisoners were not sufficiently good against this healthy prison test.

- HP19 Communal areas were dirty and outside areas, especially beneath cell windows, were badly littered. Cells were generally clean but poorly ventilated, with insufficient toilet screening. Access to a daily shower was good, but the cleanliness and state of repair of some showers was poor. Weekly clothing exchange did not always provide adequate new clothes, and many prisoners kept a set of clothes and washed them in their cells. Prisoners were generally satisfied with the applications process and many said staff dealt with issues appropriately and informally.
- HP20 Most prisoners, and significantly more than the comparator, said staff treated them with respect. We observed generally positive and convivial interactions. Most prisoners knew who their personal officer was and most said they were helpful. However, officer entries in prisoners' case history notes were limited.
- HP21 Equality and diversity work lacked management attention and was underdeveloped. There was no effective meeting structure or action plan to address equality issues. SMART (systematic monitoring and analysing of race equality treatment) data were collated but not effectively monitored or addressed when out of range. Other than race, no other protected characteristics (minority groups) were monitored to ensure equality of treatment or access. The number of discrimination incident reporting forms (DIRFs) submitted was higher than comparator prisons, but investigations were thorough, timely and backed with good quality assurance systems. Most prisoners from minority groups said that staff treated them with respect but we were given many examples of staff making inappropriate comments.
- HP22 In our survey, black and minority ethnic prisoners responded less favourably than white prisoners across a range of indicators, including safety and victimisation. Support groups were too infrequent to be effective. Foreign national respondents were also less positive than British prisoners across most survey areas. Support for foreign national prisoners was poor, and many said they felt frustrated and isolated. There was little translated material available and interpreting services were rarely used. Many foreign national prisoners were detained beyond their sentence expiry date – one for as long as nine years. Support from the UK Border Agency was limited and there was no independent immigration advisory service.
- HP23 The prison was not sighted on the number of prisoners with disabilities it held. Disabled prisoners we spoke to felt supported by the health care department, which met their clinical needs, but there were no support or care plans on the wings. The one adapted cell was not fully functional, which caused problems for its occupant. Not all prisoners who required a personal emergency and evacuation plan (PEEP) had one. There was little specific provision for older prisoners, and many retired prisoners were locked in their cells during the day. Support for gay, bisexual and transsexual prisoners was good and prisoners we spoke to felt supported.
- HP24 In our survey, fewer respondents than in comparator prisons felt that their religious beliefs were respected. All faiths were provided for, but Catholic prisoners did not get a regular weekend mass. Links with local faith groups and resettlement opportunities were underdeveloped.
- HP25 Prisoners were positive about the timeliness and fairness of complaints. The quality of responses varied but mostly addressed the issues raised. The numbers were extremely high and twice as high as comparable prisons, and there was no real analysis of the reasons for this or evidence of action to reduce complaints.

- HP26 Collaboration between the prison and the commissioner and provider of health services had been affected by the lack of prison representation at partnership board meetings in the last six months. Prisoners were generally positive about the overall quality of health care and we observed helpful and respectful relations with staff. There was good daily access to nursing staff but prisoners waited too long to see the GP, optician, physiotherapist and for urgent dental treatment. Medication administration on the wings lacked confidentiality and was poorly supervised by discipline staff. There was poor prescribing practice. Some prisoners were on higher than recommended doses of strong analgesics. Mental health services were reasonable but staff vacancies and lack of space had affected the service, and there had been no recent needs assessment.
- HP27 The range and standard of food was good and reasonably popular with prisoners.

## Purposeful activity

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- HP28 Time unlocked was inadequate for most prisoners and particularly poor for those unemployed. Far too many prisoners were locked up during the core day. Regime slippage was frequent and roll check difficulties disrupted the regime. There were insufficient activity places but even these were significantly underused. The range of education provision was generally adequate. There were insufficient vocational training opportunities for more able prisoners. Achievements were generally good. Prisoner access to the library was poor, and to PE was only reasonable for employed prisoners, but health promotion was good. Outcomes for prisoners were poor against this healthy prison test.
- HP29 The core day indicated that a fully employed prisoner could achieve about 10 hours out of cell on Monday to Thursday and about seven hours on Fridays and at weekends. Our observations indicated that, in reality, the average time out of cell was probably nearer to about six hours a day, and could be as little as three hours for the many prisoners who did not work. We found slippage in the regime, and prisoners were rarely unlocked on time. Far too many prisoners, on average 38%, were locked up during the core day but this increased to almost 50% when the roll check was incorrect.
- HP30 The provision of education, training and work activities was not informed by a recent prisoner needs analysis or local employment information. The process for allocating prisoners to activities was poor, did not take account of sentence plans, and waiting lists were not prioritised. Delays in the movement to activities and problems with roll checks routinely disrupted and shortened the working day. There were insufficient purposeful activity places to meet the needs of the population, and not all available activity places were fully used. Attendance at activities was not given enough priority and learners were frequently taken away to do other activities. Too many men were allocated wing work and were not fully occupied, and production work areas did not fully occupy prisoners throughout the day.
- HP31 The learners who did attend education and training were highly motivated, developed skills and produced good standards of work in the vocational workshops. There was a wide range of entry level vocational qualifications but uptake was low. There were not enough higher level qualifications for more able learners. There was a sufficient range of education courses with some opportunities for progression, but they did not meet



needs of the high number of prisoners with literacy or numeracy needs. Teaching and learning in education and use of information learning technology were good. We observed respect between prisoners and staff, and good involvement of learners in classes and workshops.

- HP32 For prisoners who took qualifications, overall outcomes were generally good in education. Pass rates were mainly high in vocational training. There was some accreditation of work skills.
- HP33 Prisoner access to the library was limited to just one visit a week. The library held a large range of books that supported prisoner learning.
- HP34 Health promotion in the gymnasium was good and it had effective links with health care. Access was reasonable for some prisoners but unreasonably limited for those who were unemployed through no fault of their own. The facilities were adequate but lacked any outdoor space. Changing and shower facilities were in a poor state of repair. There was a suitable range of PE vocational courses and success rates were high.

## Resettlement

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- HP35 Strategic management of resettlement was weak and not informed by an effective needs analysis. The needs of the many remand and short-term prisoners were addressed but the minority of sentenced prisoners who stayed too long did not have their needs met. Not all high risk prisoners had a sentence plan. Prisoner-offender supervisor contact was unplanned and reactive. Most prisoners on home detention curfew were released late. Public protection and categorisation processes were sound. Provision for indeterminate-sentenced prisoners was limited. Resettlement pathway work was better than we often see in similar prisons. Children and family work was especially good, but there was a lack of offending behaviour courses to meet need and little opportunity for prisoners to progress. Outcomes for prisoners were reasonably good against this healthy prison test.
- HP36 The strategic management of resettlement was weak. The reducing reoffending strategy had no action plan and was not supported a comprehensive needs analysis. There was no 'whole-prison' approach to reducing reoffending, and poor systems hindered communication and information exchange.
- HP37 Some prisoners, including a few who were high risk, did not have a current offender assessment system (OASys) assessment or sentence plan. For those with a plan there were too few opportunities to achieve their targets at Lincoln. Assessments were suitably focused on risk, but contacts between offender supervisors and prisoners were too often reactive and not focused on offending behaviour. Remand prisoners and those serving less than 12 months had their needs assessed but no formal custody plan. Almost all the prisoners whose cases we inspected had been released on home detention curfew after their earliest eligibility date.
- HP38 Public protection screening and assessment processes were applied thoroughly, with appropriate restrictions, and the risk management meeting provided good oversight of these cases.

- HP39 Categorisation processes were clear and decision making defensible. Sexual offenders in denial of their offence were difficult to allocate and remained in Lincoln for too long.
- HP40 Provision for indeterminate-sentenced prisoners was limited, with no specific forum or family days. Too many prisoners serving indeterminate sentences for public protection (IPPs) were over tariff and found it hard to demonstrate a reduction in risk during their stay at Lincoln. Parole processes were robust and completed on time
- HP41 Reintegration planning was effective. In our survey, significantly more prisoners than in similar prisons knew who to contact to get help across the range of resettlement areas. Lincoln Action Trust (LAT) undertook resettlement needs assessments on arrival, which were supported by referrals and wing surgeries, but there were no routine pre-release interviews.
- HP42 Resettlement officers provided a range of help and support for accommodation needs. In the previous year, the majority of new arrivals who were homeless had been helped to secure accommodation on release.
- HP43 The prison had good links with employers to provide prisoners with work experience and apprenticeships/employment opportunities. Prisoners could access advice and support to resolve debts and other financial problems but could not open bank accounts before their release.
- HP44 Prisoners with mental health problems were linked with community mental health teams, with appropriate advance planning for those with complex problems. There were good throughcare links with community teams to support prisoners with ongoing drug problems, and designated workers regularly visited the prison.
- HP45 Provision for children and families of prisoners was good, with some creative approaches to helping prisoners maintain and develop relationships with their children, including parenting courses and support from a qualified child support worker. High quality family days were offered but too few prisoners could access them. Domestic visits were too restricted, particularly for those on remand, and sessions tended to start late. The visits hall was bright and welcoming but the waiting areas for prisoners and visitors were very poor.
- HP46 The number of offending behaviour programmes was negligible and there had been no analysis or strategy to manage the needs of the current population. As a result, prisoners found it difficult to progress.

## Main concerns and recommendations

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- HP47 Concern: Too many prisoners, especially vulnerable prisoners, felt unsafe. Levels of violence were high and not all incidents of violence and intimidation were addressed or reported. There had been no effective consultation with prisoners and no proper analysis of violence to identify trends and improve safety.

**Recommendation: All incidents of violence should be addressed and reported. Prisoners should be consulted on their perceptions of safety, and all data relating to violence should be collated and analysed to identify trends and take action to improve safety.**

HP48 Concern: Too many prisoners were held in segregation on open ACCT self-harm monitoring documents, including those in crisis in a constant observation cell. The use of the constant observation cells in E wing for mainstream prisoners was inappropriate as they spent much of the day locked up.

**Recommendation: Segregation should only be used exceptionally and as a last resort for prisoners in crisis and at risk of suicide and self-harm. The constant observation cell in segregation should not be used, and the constant observation cells in E wing should not be used for mainstream prisoners.**

HP49 Concern: Equality and diversity provision lacked management attention and was underdeveloped. In our survey, black and minority ethnic and foreign national prisoners reported significantly less favourably than white and British prisoners across a wide range of areas. There was evidence of unequal treatment of black and minority ethnic prisoners that was not addressed, and the needs of some prisoners with protected characteristics were not identified or met.

**Recommendation: Governance and management oversight of diversity should be prioritised to ensure that the needs of all prisoners with protected characteristics are identified, assessed and met, and any negative perceptions of particular groups are understood.**

HP50 Concern: Some foreign national prisoners had been held for a very long time after their sentence expired, including one for nine years.

**Recommendation: The prison should work with the United Kingdom Border Agency to ensure that decisions on the future of foreign national prisoners are expedited.**

HP51 Concern: Far too many prisoners, at times as many as 50%, were locked up for most of the day and were unable to attend work, education or vocational training opportunities. Although there were insufficient activity places, even these were significantly underused, and attendance at activities was not given enough priority and frequently disrupted.

**Recommendation: The number of work, education and vocational training places should be increased, and attendance at activity should be monitored and non-attendance robustly challenged and disruptions urgently resolved.**

HP52 Concern: There were no regular offending behaviour programmes to meet the needs of the population, and too many prisoners were unable to progress or were released without significant challenge to their behaviour.

**Recommendation: The offending behaviour needs of the population should be analysed and suitable offending behaviour courses introduced.**



# Section 1: Safety

## Courts, escorts and transfers

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### Expected outcomes:

Prisoners transferring to and from the prison are treated safely, decently and efficiently.

- 1.1 Most prisoners felt safe during escorts and said they were treated well. Many arriving vehicles waited outside the prison for too long but once inside, prisoners were disembarked quickly.
- 1.2 In our survey, more respondents than the comparators said they felt safe during transit and were treated well by escort staff. Most prisoners had short journeys and those who travelled further were offered refreshments and toilet breaks. The escort vans we inspected were clean.
- 1.3 There were some excessive delays in escort vehicles gaining access into the prison, but once inside, disembarkation was quick.

### Housekeeping point

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- 1.4 Arriving escort vehicles should be brought into the establishment quickly.

## Early days in custody

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### Expected outcomes:

Prisoners are treated with respect and feel safe on their arrival into prison and for the first few days in custody. Prisoners' individual needs are identified and addressed, and they feel supported on their first night. During a prisoner's induction he/she is made aware of the prison routines, how to access available services and how to cope with imprisonment.

- 1.5 New arrivals spent too long in reception, which was poorly laid out and grubby. There were no prisoner peer supporters to meet new arrivals, but staff relationships with prisoners were reasonable. First night interviews were inconsistent and first night cells on A wing were poorly prepared. Induction was reasonably good for most but required some improvement for vulnerable prisoners.
- 1.6 The reception was grubby and poorly laid out but a new unit was being built. The five holding rooms were dirty and covered in graffiti. Other than a television in some rooms, there was nothing to occupy new arrivals during the often unnecessarily long periods they spent there – up to five hours during the inspection and longer for vulnerable prisoners.
- 1.7 All new arrivals, including those transferred in from other prisons, were strip searched in the absence of supporting intelligence, which was unnecessary (see recommendation 1.56).
- 1.8 Our survey results, observations and conversations with prisoners and staff did not assure us that new arrivals were always offered refreshment, a shower, free telephone call, access to a

Listener (prisoner trained to support those at risk of self-harm) or a private interview with staff to check on their welfare either in reception or on the first night centre.

- 1.9 There were no prisoner Insiders (peer supporters) or Listeners based in reception, which was poor practice in a local prison receiving men new to custody. In our survey more prisoners than the comparator said they had been treated respectfully by staff. We saw some friendly engagement between staff and prisoners but also saw new arrivals spending long periods in holding cells with no interaction or supervision from staff.
- 1.10 Reception staff were supposed to carry out a private 'keep safe' interview with new arrivals before they were located to their first night accommodation, where first night centre staff should also have interviewed them, but we were not confident that these happened consistently. Some interviews were used only to get prisoners to sign behavioural compacts and were not always properly focused on support. We were concerned that some needs were not properly identified and addressed. Records for both processes were poor.
- 1.11 First night cells on A1 were dirty and poorly prepared, but those for vulnerable prisoners on E wing were better. Many new arrivals were not given a free telephone call to contact their family, which caused some anxiety for prisoners we spoke to. Prisoners who arrived from other prisons often had delays in accessing their telephone accounts. Some prisoners arrived on the wing after lock up and did not have the opportunity to shower. Handover arrangements to night staff about new arrivals were sound.
- 1.12 The two-day induction programme started the first working day after prisoners arrived. The induction classroom on A wing was reasonably well equipped but had graffiti on walls. Insiders delivered a comprehensive generic induction module about the prison, with some staff oversight, which prisoners said they found helpful and informative. On E wing, a member of staff delivered this module in a less structured and more rushed way to individual prisoners in a small room, and vulnerable prisoners were less positive about their induction. Staff from other departments, including the chaplaincy, health care, education, substance misuse team and resettlement, consistently made presentations about their services in inductions on both A and E wings.

## Recommendations

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- 1.13 Trained prisoner peer supporters should be available in reception.
- 1.14 Staff should have a meaningful private interview with all new arrivals before they are locked up on their first night to identify and address any needs or concerns.
- 1.15 New arrivals should be able to make a free telephone call.

## Housekeeping points

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- 1.16 Reception holding rooms should be clean, well maintained and contain information and reading material for prisoners.
- 1.17 First night cells should be clean and properly prepared and equipped for new arrivals.
- 1.18 Vulnerable prisoners should receive the same induction as mainstream prisoners.

# Bullying and violence reduction

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## Expected outcomes:

Everyone feels safe from bullying and victimisation (which includes verbal and racial abuse, theft, threats of violence and assault). Prisoners at risk/subject to victimisation are protected through active and fair systems known to staff, prisoners and visitors, and which inform all aspects of the regime.

- 1.19 The violence reduction policy was not based on a proper analysis of the pattern of violence in the prison or informed by meaningful consultation with prisoners. The safer custody meeting did not effectively monitor the implementation of the policy, and the safer custody manager did not have enough time to carry out all duties. Opportunities for bullying were evident and the number of reported fights and assaults among prisoners was high, but the quality of investigations into incidents was poor and there was evidence of under-reporting. Nearly a quarter of prisoners said that they did not feel safe. Living conditions on the vulnerable prisoner unit were reasonable and the regime was generally comparable to the rest of the prison, but most prisoners said that they felt unsafe there. More than half of vulnerable prisoners said that they had been victimised by other prisoners and nearly half said that they had been victimised by staff.
- 1.20 A violence reduction policy document had been published following a review in 2011 but it was not based on a current analysis of the patterns of violence in the prison, and had not been formed by meaningful consultation with prisoners through annual safety and routine exit surveys. There had been no prisoner survey since the last inspection, and the monthly prisoner forums were not used to inform violence reduction strategies (see main recommendation HP47).
- 1.21 The interventions described in the policy document focused on sanctions and punishment, with little to deal with persistent bullying or its effect on other prisoners. There was a formal two-stage system to monitor and change behaviour, which relied chiefly on incentives and earned privileges (IEP) sanctions or segregation in more extreme cases. There was no formal intervention to address bullying behaviour
- 1.22 A designated safer custody manager had been appointed but the time allocated to her was insufficient to allow oversight of processes, offer guidance and training to residential staff or quality check all associated documentation. She was also responsible for the day-to-day management of the suicide prevention strategy and the vulnerable prisoner unit on E wing.
- 1.23 A safer prison committee met monthly to monitor overall progress of both the violence reduction and suicide prevention strategies. Attendance at meetings was inconsistent and minutes showed that there were usually focused discussions on self-harm and suicide prevention, but other forms of violence were not properly explored. The monitoring of the implementation of the violence reduction policy was not effective, and links with other areas of the prison, particularly the security department and residential wings, were poor. A database of violent incidents based on a range of information had been developed, but details were limited and there was no analysis of the data to indicate wider trends and patterns of violence (see main recommendation HP47).
- 1.24 Prisoners felt significantly less safe than in similar prisons. In our survey, 24% of respondents said that they felt unsafe at the time of the inspection, against the comparator at 17% and

findings of 14% at the last inspection. Concerns about safety were even higher among vulnerable prisoners (see below). Levels of victimisation were high and almost one third of prisoners, significantly more than in similar prisons, said they had been victimised by other prisoners. Opportunities for bullying were evident and the number of reported fights and assaults among prisoners was high. There had been over 80 fights and assaults in the previous six months. Most were minor and did not result in serious injuries, but some were serious.

- 1.25 The quality of investigations into alleged violence was often poor and, in many cases, cursory and did not fully address the important issues. Many prisoners told us that staff did not always take complaints about their safety seriously. Many allegations or suspicions of bullying, particularly those reported directly to staff by prisoners, were not investigated at all if the prisoner was unable to name an alleged perpetrator (see main recommendation HP47).
- 1.26 The vulnerable prisoner unit on E wing was predominately for prisoners with sex-related offences, but there were a significant number of others who sought sanctuary on E wing as they felt at risk on the mainstream wings. The prison estimated a mix of about 60% sex offenders and 40% others. They had all requested to be accommodated there under prison rule 45 but, as at the last inspection, there were no clear protocols for admission. We were told that the manager allocating a prisoner to the wing considered their vulnerability and risk, but there was no formalised procedure. We spoke to prisoners on A and B wings who said that they had been denied admission to E wing without explanation, and that staff did not take their concerns seriously.
- 1.27 Living conditions on the vulnerable prisoner wing were generally acceptable. A full activities regime had been published and vulnerable prisoners had access to most facilities, such as work, education, religious services and the gym. Relationships between officers and vulnerable prisoners were mixed. Although we saw some friendly exchanges, some officers appeared distant, staff entries in prisoner records did not give assurance that they had a good knowledge of their circumstances or levels of associated risk, and they were not particularly focused on the vulnerability of their prisoners. Prisoners complained that there was tension between sex offenders and other prisoners on E wing. In our survey, 63% of vulnerable prisoners said that they had felt unsafe at some time at Lincoln, and half said that they felt unsafe at the time of the inspection. Just over half said that they had been victimised by other prisoners, and 45% said that they had been victimised by staff. We found little evidence that the prison was aware of these perceptions.

## Recommendations

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- 1.28 **A formal intervention should be introduced to deal with prisoners who persistently bully others.**
- 1.29 **There should be a protocol and criteria for admission to the vulnerable prisoner unit, and the reasons for prisoners applying to go on the unit should be fully investigated and recorded.**



# Self-harm and suicide prevention

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## Expected outcomes:

The prison provides a safe and secure environment which reduces the risk of self-harm and suicide. Prisoners are identified at an early stage and given the necessary support. All staff are aware of and alert to vulnerability issues, are appropriately trained and have access to proper equipment and support.

- 1.30 Attendance at safer custody meetings was inconsistent, and analysis of data for information about patterns and trends of self-harming was underdeveloped. Case management was generally inconsistent and the quality of entries in monitoring documents was mixed. While some care planning for prisoners in crisis was reasonable, it was poor in others. Too many prisoners were held in the segregation unit on self-harm monitoring. There were insufficient Listeners to meet the needs of prisoners on the main wings, and poor access to the Samaritans direct line. Conditions in the observation cells on E wing were poor, particularly for prisoners from the main wings who spent nearly all day locked up with nothing meaningful to do.
- 1.31 The policy document on suicide and self-harm prevention was reasonable with a particular focus on the needs of a local prison. Staff and prisoners were aware of its content. Its procedures and protocols were managed directly by the safer custody manager, who ensured that procedures to manage prisoners at risk from self-harm were properly implemented, and was also a central point for advice and guidance for staff. Staff we spoke to were aware of the role and knew where to go to if they needed advice.
- 1.32 The monthly safer custody meeting monitored and managed the suicide prevention strategy overall. There was reasonable focus on relevant issues concerning individual cases and general suicide prevention issues, but attendance was inconsistent and representatives from important areas, such as the residential wings, often did not attend. There was little use of information to identify trends and patterns of self-harming behaviour by location, type, age, timing and peripheral circumstances of incidents.
- 1.33 There had been 75 incidents of self-harm in the first six months of 2012. This number was a slight reduction compared with the same period in 2011 and comparable with other local prisons. There were 10 open assessment, care in custody and teamwork (ACCT) self-harm monitoring documents at the time of inspection, which was typical.
- 1.34 Case management of prisoners subject to ACCT procedures was inconsistent and the quality of entries in ACCT documents was mixed. Some entries from officers showed reasonable standards of day-to-day care and that they knew about the personal circumstances of individual prisoners, but there were also entries that were mainly observational and gave little indication of supportive relationships. Care planning for prisoners in crisis was good in some cases but we saw examples of poor planning in others. Too many prisoners on open ACCT documents were held in the segregation unit with no justification of the exceptional circumstances to warrant this, and the prison was unfocused on this concern (see main recommendation HP48).
- 1.35 There was a significant shortage of trained Listeners (prisoners trained to support those at risk of self-harm). There were three Listeners on the vulnerable prisoner unit and prisoner access to them was good, but only one Listener to meet the needs of prisoners on the main wings.

There was a Samaritans direct line telephone on most wings, but poor signals affected access in many areas.

- 1.36 There were five constant observation cells – three on the vulnerable prisoner unit on E wing, one in the segregation unit and one on A wing. Conditions in the cells on E wing were poor, particularly for prisoners from the main wings who spent nearly all day locked up with nothing meaningful to do. The constant observation cell in the segregation unit was particularly grim. Although reasonably clean, it was dark and poorly ventilated, and its location opposite the dirty protest cell was inappropriate and not conducive to proper care for prisoners in crisis. It had been used at least 30 times in the previous six months for periods of up to about 14 days. During the inspection we observed the location of a prisoner in crisis in the gated constant observation cell and were concerned by the lack of managerial oversight and poor risk assessment, which affected the care he was offered (see main recommendation HP48). We were not assured that there had been a full assessment of immediate risk or that there had been action plans to ensure adequate levels of care. The gated cell on A wing was not in use at the time of inspection.

## Recommendations

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- 1.37 Case management arrangements for prisoners on assessment, care in custody and teamwork (ACCT) monitoring should be improved and should be evidenced by good quality interactive and supportive entries in monitoring documents and support plans.
- 1.38 Information on self-harming behaviour should be used to identify trends and patterns of behaviour by location, type, age, timing and peripheral circumstances of individual incidents, and this analysis should be updated regularly.
- 1.39 There should be a sufficient number of trained Listeners.
- 1.40 All prisoners should have good access to the Samaritans telephone.

## Safeguarding (protection of adults at risk)

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### Expected outcomes:

The prison promotes the welfare of prisoners, particularly adults at risk, and protects them from all kinds of harm and neglect.<sup>2</sup>

- 1.41 The prison had no structure to inform a specific policy to deal with prisoners in need of community care services by reason of mental or other disability, age or illness.

- 1.42 There were vulnerability screening procedures for new arrivals, and general safety assessments in their first few days were reasonable and included cell sharing risk assessments, some identification of disability and health care interviews. Health care professionals carried out further assessments the following day.

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<sup>2</sup> We define an adult at risk as a vulnerable person aged 18 years or over, 'who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'. 'No secrets' definition (Department of Health 2000).

- 1.43 Protocols that set out actions for staff to take in the light of information indicating that an adult at risk might have been abused or injured while in custody were not clear. Staff we spoke to said they were not aware of formal protocols, but appeared focused on relevant issues and generally aware of their personal responsibility to protect prisoners at risk. Awareness training for staff had not been planned.
- 1.44 There were no formal links between the prison and community safeguarding board to review current practices and to identify the threshold where formal adult protection protocols would be brought in. Up-to-date local advice about safeguarding adults was not accessible, and staff were not aware of how to make referrals.

## Recommendation

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

## Security

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### Expected outcomes:

Security and good order are maintained through an attention to physical and procedural matters, including effective security intelligence as well as positive staff-prisoner relationships. Prisoners are safe from exposure to substance misuse while in prison.

- 1.46 Most security measures were proportionate. Poor implementation of systems for accounting for prisoners had a severe impact on their access to the regime. Dynamic security was well managed and mostly responsive. The number of positive drug tests was reasonably low but there were gaps in drug testing arrangements. Prisoners were strip searched too often with no supporting intelligence. Closed visits were applied too frequently and sometimes for inappropriate reasons.
- 1.47 Security arrangements were broadly proportionate. Prisoner access to the regime was severely restricted by the inability of staff to reconcile the roll and account for prisoners (see also paragraph 3.3 and recommendation 3.5). Throughout the inspection staff and prisoners told us that some of this was a deliberate staff response to changes in procedures in early 2012.
- 1.48 Dynamic security was well managed and mostly responsive. Over 2,500 security information reports (SIRs) were submitted between February and July 2012 and processed efficiently, and targeted searches were completed on time.
- 1.49 In the previous six months, the random mandatory drug testing (MDT) positive rate had averaged 7.9% against a target of 9.5%, but in our survey, more respondents than the comparator said it was easy to get illegal drugs in the prison. Due to lack of staffing, only 82 of the 122 requested suspicion tests had been conducted in the previous six months, and there were gaps of up to nine days when there had had been no testing.
- 1.50 Drug test results and finds pointed to Subutex (buprenorphine), cannabis and opiates as the main drugs coming into the prison. There was evidence that prisoners developed an addiction

while in the prison, as 35 prisoners from within the existing population had received opiate substitute treatment within the last 12 months. There was also evidence of some diverted medication and hooch (homemade alcohol). In our survey, fewer respondents than the comparator said they had developed a problem with diverted medication, but more said it was easy to get alcohol in the prison.

- 1.51 With the notable exceptions of health care and drug strategy staff, the security committee was reasonably well attended and supported by a comprehensive intelligence report. Appropriate security objectives were set and monitored.
- 1.52 Although most security arrangements were proportionate, it was unnecessary that all prisoners were strip searched on reception and entry to the segregation unit and 10% at the end of visits, regardless of any intelligence to support this.
- 1.53 Closed visits usage was high and they had been applied 47 times in the previous six months, often for reasons not related directly to visits. Most prisoners remained on closed visits for a minimum of three months, even when there was no further intelligence to support this. It was inappropriate that most prisoners were required to produce a negative drug test before they were removed from closed visits.

## Recommendations

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- 1.54 The suspicion drug testing programme should be sufficiently resourced so that all prisoners suspected of taking drugs are tested within required timescales and without gaps in provision.
- 1.55 Closed visits should only be applied when there is evidence of illicit activity relating to visits, and prisoners should not be required to provide a negative drug test before closed visits are lifted.

## Housekeeping point

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- 1.56 Prisoners should only be strip searched on the basis of intelligence or specific suspicion.

## Incentives and earned privileges

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### Expected outcomes:

Prisoners understand the purpose of the incentives and earned privileges (IEP) scheme and how to progress through it. The IEP scheme provides prisoners with incentives and rewards for effort and behaviour. The scheme is applied fairly, transparently and consistently.

- 1.57 The incentives and earned privileges (IEP) scheme was generally applied fairly, although prisoners waited too long to gain enhanced status. There were sufficient differentials between the levels. The basic regime was decent but reviews were mechanistic.
- 1.58 The IEP policy had recently been reviewed and was understood by staff and prisoners. Standard-level prisoners had to wait up to three months to gain enhanced status, which was too long.

- 1.59 Prisoners who arrived from another establishment on the enhanced level were allowed to stay on that level, and there was sufficient differential between levels to encourage positive behaviour. Demotion usually only followed a pattern of negative behaviour, and the required number of warnings and the warnings we reviewed were appropriate.
- 1.60 Prisoners on basic level had a decent regime, which included attendance at work and a daily 30-minute domestic period. There were weekly reviews of those on basic; many prisoners on basic told us they never attended the review boards. Review board documentation was limited and targets were perfunctory.

## Housekeeping point

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- 1.61 Reviews of prisoners on the basic level should be meaningful, include participation by the prisoner and set targets in line with their pattern of behaviour.

## Discipline

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### Expected outcomes:

Disciplinary procedures are applied fairly and for good reason. Prisoners understand why they are being disciplined and can appeal against any sanctions imposed on them.

- 1.62 Comprehensive data were collated on all areas of discipline but were not used effectively to analyse trends or take necessary action. There was very high use of formal disciplinary procedures. Records of hearings were variable and quality assurance required improvement. Incidents where force was used were below the comparator but managerial oversight was insufficient. Use of segregation was high but most stays were short. The environment in the segregation unit was poor and the regime limited.

## Disciplinary procedures

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- 1.63 Between February and July 2012 there had been almost 1,200 adjudications, which was very high. Some cases could have been dealt with less formally. Adjudications records were variable and not all demonstrated sufficient enquiry before a finding of guilt. Punishments were broadly fair. Quality assurance procedures were not adequately robust.
- 1.64 Adjudication standardisation meetings were infrequent. Despite the collation of comprehensive data on all areas of discipline, the data were not used effectively to analyse trends and patterns or to identify and take action where necessary.

## Recommendations

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- 1.65 All disciplinary charges should be fully investigated with clear reasons given for the decisions reached, and the quality assurance of adjudication records should be improved.
- 1.66 Information collated for all areas of discipline, including disciplinary procedures, use of force and segregation, should be analysed and used more effectively.

## The use of force

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- 1.67 Recorded use of force was lower than in comparator prisons. Many incidents were low level and appeared to be de-escalated appropriately. Only around 20% of incidents resulted in full use of force and relocation to the segregation unit. Use of handcuffs was not routine.
- 1.68 Documentation following use of force was, with a few exceptions, generally completed well but quality checking was insufficient. Planned interventions were not always effectively recorded and were never reviewed. Those we looked at were of a variable quality. A control and restraint committee met bimonthly but was not properly focused on trends or patterns or quality assurance of incidents (see recommendation 1.66).
- 1.69 Special accommodation had been used nine times in 2011 and three times to the end of July 2012, which was relatively infrequent. The quality of authorising documentation was variable and we were not assured that all uses were justified, necessary or a last resort.

## Recommendation

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- 1.70 **Managerial oversight of all aspects of use of force should be improved.**

## Segregation

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- 1.71 Use of segregation was very high. In the previous six months, there had been over 220 cases of segregation, but few were for prisoners seeking sanctuary and stays in the unit were relatively short. Some prisoners who refused to go to work because they had been threatened, refused to name the perpetrator and were held in the segregation unit with no attempt to investigate or address the prisoner's fears. Comprehensive data on segregation were collated but were not used meaningfully (see recommendation 1.66).
- 1.72 Building work on a new segregation unit was well advanced and it would replace the poor environment in the current unit. The communal corridor lacked natural light and was old and worn. Cells also lacked natural light, were covered in graffiti, poorly furnished and contained dirty scaled toilets. The only shower in the unit was grubby and worn. The special accommodation cell was grim. The exercise yard was dirty and littered.
- 1.73 Strip searching of new arrivals to the unit was routine (see recommendation 1.56). Segregated prisoners had daily access to showers, exercise and telephone calls. Other than a small library and some engagement from education staff, the unit regime was otherwise very limited and prisoners complained of having nothing to do. Most prisoners returned to locations in Lincoln following a period of segregation, but there were no formal reintegration or care plans for unit residents.
- 1.74 Duty managers visited the segregation unit daily, but an apparent lack of consistent managerial oversight affected risk assessment and care for some residents (see paragraph 1.36). Reviews were multidisciplinary and prompt, but target setting was basic and did not challenge the reasons why prisoners were segregated.
- 1.75 Relationships between staff and prisoners in the segregation unit were mostly reasonable but this was not reflected in staff entries in prisoners' daily history sheets or electronic case notes.

## Recommendation

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- 1.76 The regime for prisoners in the segregation unit should be improved.

## Housekeeping points

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- 1.77 Segregation review documentation and care/reintegration plans should be completed and include meaningful targets.
- 1.78 Segregation unit staff entries in daily history sheets and case notes should indicate constructive engagement with prisoners.

## Substance misuse

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### Expected outcomes:

Prisoners with drug and/or alcohol problems are identified at reception and receive effective treatment and support throughout their stay in custody.

- 1.79 Clinical substance misuse services were poorly resourced. Treatment reviews were not regular, we were concerned about some prescribing practices, and there was no stabilisation unit. Prisoners could easily access psychosocial support but this did not include a structured drug/alcohol programme or peer support. The drug strategy policy was out of date and there was no alcohol strategy.
- 1.80 Following screening and substance misuse assessments on reception, prisoners dependent on drugs and/or alcohol received appropriate first night treatment. Despite being set up and funded as an integrated drug treatment system (IDTS), the prison did not have a stabilisation unit, and there were no observation hatches on the first night landing. In the absence of inpatient beds, there were no facilities to monitor closely prisoners with complex problems, such as severe alcohol withdrawal.
- 1.81 An average of 20% of new arrivals required opiate substitute treatment. At August 2012, 117 prisoners were prescribed methadone or Subutex, mainly on a maintenance basis, with only 17 reducing their dosage. We were concerned to see several examples of considerable increases in dosage – for example, a prisoner who arrived on 20ml of methadone now received 90ml, and another had had his dosage doubled from 50 to 100ml. Prisoners who had been using drugs illicitly on the wings were given as much as 60ml of methadone. The clinical team was overstretched and unable to conduct regular multidisciplinary treatment reviews. Staff shortages limited joint working, although there was good communication and information sharing with primary and mental health nurses, as well as substance misuse/CARAT (counselling, assessment, referral, advice and throughcare) workers.
- 1.82 IDTS treatment rooms were shared with primary health services and, except on E wing, controlled drug administration did not start until mid-morning. There was a lack of privacy with prisoners queuing in the corridor and inconsistent officer supervision. Prisoners who worked complained that they did not receive methadone or Subutex until 11.30am or 12 noon.
- 1.83 Prisoners could easily access psychosocial support from a well-resourced substance misuse/CARAT service whose remit included problem alcohol users. In our survey, 80% of

respondents said they had received help with their drug problem, which was significantly higher than the comparator of 63%. Similar numbers of prisoners (62%) as in comparator prisons said they had received help with their alcohol problems. The team held an active caseload of 182 clients and we saw evidence of good quality recovery plans and one-to-one work. The full range of IDTS modules was on offer with two groups a week, but the establishment had suspended a structured drug and alcohol programme earlier in 2012, there was no peer support scheme and no designated recovery unit. Apart from Alcoholics Anonymous meetings, no other self-help groups were available.

- 1.84 The prison's drug strategy committee met bimonthly. There had been a detailed needs analysis in 2011 but it did not inform the drug strategy policy, which was out of date and not appropriate. Although in our survey 24% of respondents said they had alcohol problems on arrival and 21% said it was easy to get alcohol in the establishment, there was no alcohol strategy.

## Recommendations

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- 1.85 There should be appropriate facilities to observe and monitor prisoners during stabilisation/detoxification. In the absence of a designated unit, observation hatches should be fitted on the first night landing.
- 1.86 Prescribing regimes for opiate-dependent prisoners should adhere to national guidance, and there should be regular multidisciplinary treatment reviews.
- 1.87 Controlled medication should be administered in a safe and suitable environment, and wing officers should be consistently available to supervise prisoners.
- 1.88 Support services should be extended and include a structured drug/alcohol programme, peer support and the development of a recovery unit.

## Housekeeping point

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- 1.89 The drug strategy document should be updated, cover alcohol services, and include detailed development targets and performance measures.



# Section 2: Respect

## Residential units

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### Expected outcomes:

Prisoners live in a safe, clean and decent environment within which they are encouraged to take personal responsibility for themselves and their possessions. Prisoners are aware of the rules and routines of the prison which encourage responsible behaviour.

- 2.1 Communal and outside areas were dirty and association equipment was old. Cells were generally clean but were poorly ventilated, and no toilets had adequate screening. Access to showers was good but some were in a poor state of repair, dirty and gave no privacy. The weekly kit exchange did not always carry enough stock. Applications were dealt with well.
- 2.2 Communal areas were dirty and the floors on all wings were grubby. Outside areas were very littered, especially around cell windows. Association equipment was old and needed repair, and many prisoners complained to us about its condition.
- 2.3 With the exception of first night cells (see paragraph 1.11), most cells were generally clean, although they were poorly ventilated and none had adequate toilet screening. Most cells were adequately furnished and graffiti-free, and the offensive display policy was generally adhered to. Cells designed to hold one prisoner were used inappropriately to hold two. The wings were relaxed and quiet at night.
- 2.4 Prisoners had good access to a daily shower. Not all communal showers had full privacy screening and some were dirty and, especially on E wing, in a poor state of repair. Prisoners complained that the water pressure on the highest landing meant that showers there were often cold and slow running.
- 2.5 Prisoners on enhanced status and remand could wear their own clothes. Prisoners told us that there were not always adequate stocks of prison clothing for exchange each week, and once they got a good set, they kept them and washed them in their cell. There was a weekly bedding exchange programme, and the bedding that we saw was in good condition.
- 2.6 The application system worked well. In our survey, three-quarters of respondents said that applications were dealt with fairly and two-thirds that they were dealt with quickly. There was a tracking system to ensure that responses were prompt.
- 2.7 There were sufficient telephones on each residential wing and prisoner access to them was satisfactory. Many telephones had no privacy hoods and prisoners told us that it was difficult to have a conversation during noisy association periods. Incoming and outgoing mail was dealt with well.
- 2.8 Access to stored property was good and there was no backlog of applications.

## Recommendations

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- 2.9 The standards of cleanliness in communal and outside areas should be improved and maintained.
- 2.10 Cells designed to hold one prisoner should not be used to hold two.
- 2.11 Toilets in all cells should be adequately screened.
- 2.12 Communal showers should provide privacy and be kept clean and in a good state of repair.
- 2.13 There should be adequate clothing available each week for all prisoners.

## Housekeeping point

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- 2.14 Telephones should be fitted with privacy hoods.

## Staff-prisoner relationships

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### Expected outcomes:

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

- 2.15 Most prisoners felt that staff treated them well, and staff spent time among them. Some staff made inappropriate comments. The personal officer scheme worked adequately. Consultation arrangements were satisfactory.
- 2.16 In our survey, 84% of respondents, against the comparator of 71%, said that most staff treated them with respect, and 82%, against 72%, said that there was a member of staff they could turn to for help. Although foreign national prisoners were less positive than British respondents, responses were generally similar to other local prisons.
- 2.17 We observed generally convivial staff-prisoner interactions and staff were often out and about on landings talking to prisoners. In our survey, 26% of respondents, against the comparator of 18%, said that staff mostly spoke to them during association.
- 2.18 In conversation, staff rarely used prisoners' preferred names, although this was more frequent in documentation. We were told that some staff made inappropriate comments to prisoners from minority groups, although those concerned told us that they did not take offence (see also paragraph 2.28 and recommendation 2.30).
- 2.19 In our survey, 60% of respondents said that they had a personal officer and most said that their personal officer was helpful. Most personal officers knew the prisoners they were responsible for and had a good knowledge of their circumstances, but staff entries in the prisoners' case history notes that we reviewed did not reflect quality interactions.
- 2.20 Prisoners were consulted monthly through a constructive meeting. Minutes of the meetings did not always assure us that there had been action on previous issues raised.

## Housekeeping point

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- 2.21 Minutes of the prisoner consultation meeting should address all issues raised in the previous meeting.

## Equality and diversity

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### Expected outcomes:

The prison demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no prisoner is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The distinct needs of each protected characteristic are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.

- 2.22 Governance of equality and diversity work was weak and lacked focus. Meetings and monitoring were ineffective. We were given many examples of staff using inappropriate language. There were many formal complaints of discrimination and they were investigated thoroughly. In our survey, minority groups had poor perceptions, and the provision and support for most minority groups were underdeveloped. Some foreign national prisoners had been held detained for many years beyond the end of their sentence.

## Strategic management

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- 2.23 The prison had made little recent progress in equality and diversity. The area had insufficient attention from senior management and was underdeveloped. Only one equality meeting had been held in the previous 18 months. The policy document had been reviewed but was awaiting senior management agreement. Staff and prisoners we spoke to were unaware of any equality policy (see main recommendation HP49).
- 2.24 The head of equality, who undertook other management roles, was supported by a full-time equality manager. Responsibility for work on each protected characteristic was given to individual officers as an addition to their prison officer duties, and they were not usually allocated time for this role. There were four prisoner diversity representatives but they were unclear about their role.
- 2.25 An equality action plan had been formulated but it was very limited and related to the needs of the Disability Discrimination Act rather than meaningful action overall.
- 2.26 Systematic monitoring and analysis of race equality treatment (SMART) data were collated for key managers, but we found no evidence that they were analysed. The data gave evidence of unequal treatment of black and minority prisoners, including the disproportionate number in segregation for reasons of good order of discipline over several months, but this had not been addressed. Race was the only protected characteristic subject to any form of monitoring.
- 2.27 Prisoners had submitted 63 discrimination incident reporting form (DIRFs) in the previous six months, which was higher than comparable prisons. We found that investigations were thorough and completed promptly. There were effective quality assurance systems in place.

- 2.28 In our survey, 82% of black and minority ethnic respondents, 69% of foreign nationals, 96% of those who considered themselves to have a disability and 86% of those over 50 said that staff treated them with respect. Despite these responses, many prisoners from minority groups told us that some staff made inappropriate comments, often said in jest, and that staff generally lacked cultural awareness.

## Recommendations

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- 2.29 Equality of prisoner treatment and access to the regime should be monitored for all protected characteristics and appropriate action taken to rectify any inequalities.
- 2.30 All staff should be given cultural awareness training.

## Housekeeping point

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- 2.31 The role of prisoner diversity representatives should be clarified and those in this role should be trained.

## Protected characteristics

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- 2.32 Black and minority ethnic prisoners made up around a fifth of the population. In our survey they were significantly more negative than white prisoners across a range of indicators, including feelings of safety and victimisation. Although those we spoke with were more positive about their treatment, some referred to a lack of cultural awareness from some staff (see recommendation above). Two focus groups had been held but they were too infrequent to be meaningful.
- 2.33 Our survey showed that 5% of the population were from a Gypsy, Romany or Traveller background. The prison was unaware of the numbers of such prisoners and there were no support groups for them.
- 2.34 The prison held, on average, 70 foreign national prisoners. In our survey, they were significantly more negative than British prisoners across a range of indicators, and those we spoke to said they felt frustrated and isolated by the prison's lack of focus on their concerns. The foreign national policy was three years out of date. There was little translated material available in the prison and use of professional interpreting was sporadic. There was no foreign national prisoner committee, and the coordinator shared this role with other prison officer duties and had little time to devote to it. Two foreign national prisoner support groups had been held in the previous two weeks – one for vulnerable prisoners and one for mainstream prisoners – but none previously. Attendance had been poor but it was too early to assess how effective these groups would be.
- 2.35 Support from the United Kingdom Border Agency (UKBA) was intermittent and its lack of action in a number of cases was a cause of great concern. We found one prisoner who had been detained for nine years after his sentence had ended and was still awaiting a decision on his future. Many others were held for lengthy periods beyond their sentence expiry date. There was no independent immigration advisory service available for foreign national prisoners to seek guidance (see main recommendation HP50).

- 2.36 In our survey, 17% of respondents considered themselves to have a disability. The prison could not accurately identify the number of prisoners with disabilities it held, and the database had not been updated for 10 weeks. Prisoners we spoke to were complimentary of the health care support for their clinical needs. However, there were no multidisciplinary support plans on the residential wings to identify any additional support disabled prisoners might need, and not all prisoners who required a personal emergency and evacuation plan (PEEP) had one. There was only one adapted cell but its shower did not function, which caused problems for the occupant.
- 2.37 There were 63 prisoners over the age of 50. Provision for this group was limited. A specific room was available for them on the vulnerable prisoner wing during association and a support group had been held. Many retired prisoners were locked in their cells during the working day.
- 2.38 In our survey, 4% of respondents identified themselves as gay or bisexual, although the prison did not keep up-to-date accurate records. A well-established support meeting took place every two months, and was a well-attended and positive meeting. There was one transsexual prisoner in the prison who felt safe and fully supported by the prison.

## Faith and religious activity

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### Expected outcomes:

**All prisoners are able to practise their religion fully and in safety. The chaplaincy plays a full part in prison life and contributes to prisoners' overall care, support and resettlement.**

2.39 The chaplaincy was small but well integrated into the establishment. Some prisoners said that their religious beliefs were not respected. Provision for Catholic prisoners was poor. Faith facilities were adequate.

2.40 The chaplaincy team was well integrated into all aspects of the prison. Most faiths were adequately covered by sessional chaplains. However, there was no consistent provision for Catholic worship. There was no weekend mass at all for prisoners on the main wings, and vulnerable prisoners only had one weekend mass a month. In our survey, significantly fewer prisoners than the comparator felt that their religious beliefs were respected.

2.41 The chapel was large and suitable for purpose. It was used for Muslim Friday prayers with curtains covering Christian artefacts. A small multi-faith room was used for other faiths, although it could only accommodate about eight prisoners comfortably.

## Recommendation

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2.42 A weekly mass should be provided for all Catholic prisoners.

## Complaints

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### Expected outcomes:

Effective complaints procedures are in place for prisoners, which are easy to access, easy to use and provide timely responses. Prisoners feel safe from repercussions when using these procedures and are aware of an appeal procedure.

2.43 The number of complaints was very high but the prison had not addressed this. Prisoners were positive about the complaints procedures, and responses were mostly of a reasonable standard.

2.44 Over 1,300 complaints had been submitted in the previous six months, which was very high and almost double that for comparator prisons. There was no evidence that the prison had analysed any trends or patterns to identify concerns or take action as necessary.

2.45 In our survey, respondents were positive about the fairness of the complaints procedure and timeliness of responses. The responses we sampled were variable but were mostly prompt, polite, addressed to the complainant personally and answered the issues raised. Quality assurance measures were well embedded and improving responses.

2.46 Complaint forms were freely available and completed forms could be posted in locked boxes, but prisoners told us that the boxes were opened by a uniformed member of staff, which undermined their confidence in the system.

### Recommendation

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2.47 The prison should analyse the data on complaints to identify and take action as necessary.

### Housekeeping point

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2.48 A non-uniformed member of staff should empty the complaints boxes.

## Legal rights

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### Expected outcomes:

Prisoners are fully aware of and understand their sentence or remand, both on arrival and release. Prisoners are supported by the prison staff to freely exercise their legal rights.

2.49 Prisoners had reasonable access to information about legal services. Legal visits were limited but this did not impede communication.

2.50 There were two trained legal services officers, one of whom was usually based in the first night centre. Information about how to access legal services and contact the legal services officers was usually presented to new arrivals by prisoner Insiders or support workers from the Lincoln Action Trust during induction (see also paragraph 4.27).

- 2.51 Access to legal visits was limited to three sessions a week, and there were only four private rooms where legal representatives could see their clients. Despite this, legal visitors we spoke to seemed satisfied with the arrangements, and said that it was easy enough to book a visit and that there was adequate privacy
- 2.52 The library held a good range of legal texts but prisoners could only visit the library once a week (see also paragraph 3.40).

## Health services

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### Expected outcomes:

**Prisoners are cared for by a health service that assesses and meets their health needs while in prison and which promotes continuity of health and social care on release. The standard of health service provided is equivalent to that which prisoners could expect to receive elsewhere in the community.**

- 2.53 Collaboration between the prison and the commissioner and provider of health services had been affected by the lack of prison representation at partnership board meetings in the last six months. Prisoners were generally positive about the overall quality of health care and we observed helpful and respectful relations with staff. There was good daily access to nursing staff but prisoners waited too long to see the GP, optician, physiotherapist and for urgent dental treatment. Prisoners were often late or missed appointments due to roll checks, and some clinics started late resulting in long waits. Medication administration from wing treatment rooms lacked confidentiality and was poorly supervised by discipline staff. Some prisoners were on higher than recommended doses of strong analgesics. Mental health services were reasonable but staff vacancies and lack of space had affected the service, and there had been no recent needs assessment.

## Governance arrangements

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- 2.54 Health care was commissioned by NHS Lincolnshire and had been provided by Lincolnshire Partnership Foundation Trust since April 2011. There was a quarterly joint prison partnership board between Lincoln and North Sea Camp, chaired by the director of public health, with senior representation from the commissioner, provider and the local commissioning lead for offender health, but there had been no representation from the prison in the previous six months.
- 2.55 There had been no health needs assessment since 2010 even though the population profile had changed in that period.
- 2.56 The health care centre was undergoing delayed refurbishment, which had disrupted services. Some communal areas were grubby from the building work. An infection control audit in July 2012 had identified action required, including addressing inadequate cleaning of some clinical areas.
- 2.57 There were several staffing vacancies, most of which were being actively recruited, and there was no apparent effect on services. Nurses had access to training in line with service need, including minor illness/injury and medicines management.

- 2.58 There was good care for older prisoners led by a designated nurse and men spoke positively about this service.
- 2.59 Chronic disease management was developing with suitably trained designated lead nurses. Two nurses had been identified to undertake pain management training to support the care of patients with chronic and intractable pain.
- 2.60 Sexual health services were provided by a lead nurse and in conjunction with visiting genitourinary medicine services.
- 2.61 There was good use of assistant practitioners and health care assistants for smoking cessation clinics but limited evidence of other health promotion.
- 2.62 Prisoner complaints about health care were responded to promptly and appropriately. They were dealt with informally, using the patient advice and liaison service (PALS) or as a formal written complaint.
- 2.63 A monthly joint clinical governance meeting with HMP North Sea Camp reviewed clinical incidents, serious untoward incidents and complaints, and there was evidence that appropriate action was taken. A quarterly planning meeting dealt with key operational and contract issues.
- 2.64 The transition between health care providers in 2011 had resulted in some policies still waiting for formal review or adoption.
- 2.65 Resuscitation equipment was sited in the health care centre and on A, C and E wing treatment rooms, and was well managed with up-to-date comprehensive checklists. All primary care staff had current intermediate life support training.

## Recommendations

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- 2.66 A senior manager should represent the prison at the prison partnership board.
- 2.67 There should be a health needs assessment to ensure that services meet prisoner health needs.

## Housekeeping point

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- 2.68 All clinical areas should be kept clean.

## Delivery of care (physical health)

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- 2.69 In our survey, respondents were more positive about the overall quality of health care than at comparator prisons (44% against 39%).
- 2.70 A nurse saw all new arrivals for a reception screen. The screenings we observed involved satisfactory nurse engagement with prisoners and appropriate history taking, clinical assessment and invitations to have immunisations. However, the nurse left the reception health room door open throughout the interview, which compromised patient confidentiality; she told us this was for personal safety reasons, and there was no panic button in the room. All prisoners were given a follow-up appointment for a secondary assessment.



- 2.71 Nurses attended the wing treatment rooms for medication administration at least twice a day and prisoners could seek advice or information at these times. We found that prisoners waited up to three weeks to see the GP, which was too long. There was no satisfactory triage to ensure that patients were prioritised appropriately. There were also regular shortages of escorts to get prisoners to appointments and delays in getting them to health care on time. Some waited too long in the department, as scheduled clinics did not start on time.
- 2.72 Prisoners had to wait up to 10 weeks to see the optician and too long for the podiatrist. There was also a long waiting time for physiotherapy.

## Recommendation

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- 2.73 Prisoners should be taken to their health care appointments on time, and reasons for late or non-attendance should be investigated and addressed.

## Housekeeping points

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- 2.74 Health care interviews for new arrivals should take place in privacy.
- 2.75 A panic button should be installed in the reception health care room.

## Pharmacy

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- 2.76 The pharmacy service was provided by the health care provider with supplies from a local pharmacy. The pharmacist from the local pharmacy visited weekly and checked a sample of prescriptions, controlled drugs and medication dispensed by the pharmacy staff. Medicine use reviews were irregular.
- 2.77 Patients had no regular direct contact with the pharmacy technician. We understood that pharmacy clinics to provide medication advice had been offered previously but take up had been low. Staffing capacity meant there were infrequent stock checks for wing treatment rooms.
- 2.78 Medication was administered in the morning and evening from the wing treatment room gates directly on to narrow landings, resulting in lack of patient confidentiality. There was poor supervision by discipline staff. Nurses dealt with medication and queries at the same time, often single-handed, dealing with at least 30 prisoners during the treatment time.
- 2.79 Prisoners who required doses outside of administration times were given their medication in single daily dose bags. There was some inconsistency about the number and total doses of some medication, such as the antiepileptic gabapentin, given as daily in possession, and we observed three doses prepared for a once-daily collection. There was no batch number or expiry date on the bags.
- 2.80 Some prisoners were on high doses of strong analgesics. Our conversations with prisoners and review of clinical records indicted that some prescribing was not robustly evidence-based, and some was out of line with national guidelines on pain management and safe prescribing in prisons. In addition, some prisoners on substitution medication had their methadone or Subutex doses increased since arrival, or had lacked professional encouragement to reduce their dose in line with national guidelines (see also paragraph 1.81 and recommendation 1.86).

- 2.81 We noted several patients who had medication administered from packs that they had brought to the prison. Patients' own medications were reused but not notified to the pharmacy, which prevented a suitability and dose check. Some of these medication supplies were not marked on the prescription chart, resulting in excess stock ordered.
- 2.82 Patients ordered and collected their own in-possession medication. Pharmacy staff checked repeat prescription requests and the prescriber was informed of concerns, such as overdue requests. Patients requiring help with medicine compliance were supplied with a monitored dosage system.
- 2.83 In-possession medication was supplied from the pharmacy in a sealed bag with the name and number of the patient and the name of the medication, but the nurse did not check the contents before supplying it to the patient. The in-possession policy had been reviewed but the risk assessment template did not include the identity of the medication that was being assessed.
- 2.84 There were no up-to-date standard operating procedures at the time of the visit.
- 2.85 Prisoners could buy a pack of 16 paracetamols from the prison shop, and health care staff could provide a box to new arrivals, if required. There was a reasonable range of patient group directions, including simple analgesia, but none covering immunisations.
- 2.86 Stock management was good in the pharmacy and on B wing; we did not see the arrangements on the other wings. The drugs fridge temperatures in the pharmacy and on B wing were checked and recorded appropriately. There were some loose foil packs out of their boxes and some boxes had the batch number and expiry date removed.
- 2.87 The pharmacy controlled drug register was not compliant with current regulations.
- 2.88 The Medicines Management Committee met monthly with representation from the pharmacy technician, the health care provider and the prescribers.

## Recommendations

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- 2.89 Prisoners should have access to pharmacy clinics and medication advice.
- 2.90 Arrangements for medication administration should ensure that prisoners are given their medication in confidence and safely.
- 2.91 Prescribing for pain management should adhere to best professional practice and national guidelines for safe prescribing in prisons.
- 2.92 The in-possession risk assessment should include risk ranking of individual medications.

## Housekeeping points

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- 2.93 There should be better advertisement and explanation for prisoners on how to access pharmacy advice.

- 2.94 The use of patients' own medication should be formally recorded on prescription charts to ensure suitability and dose checks, and avoid excess stock.
- 2.95 Nurses should check that the pharmacy in-possession bags contain the correct medication.
- 2.96 There should be up-to-date standard operating procedures and confirmation that staff have read them.
- 2.97 Patient group directions should be expanded to include immunisations.
- 2.98 All medication, both in boxes and single dose bags, should be correctly labelled with batch number and expiry details and retained in the supply boxes.
- 2.99 The controlled drug register in the pharmacy should comply with regulations.

## Dentistry

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- 2.100 The dental contract provided for four dental sessions a week and two additional dental nurse triage sessions.
- 2.101 All prisoners were first seen by the dental triage nurse within two weeks and prioritised according to clinical need, but then waited a further six weeks for a routine appointment with the dentist. We were told that prisoners with urgent dental problems were seen quickly, but one who was in pain and required a root extraction had waited for four weeks for treatment.
- 2.102 The prisoners seen by the dental triage nurse were almost always given appointments with the dentist, which reduced the impact of triage. There were a high number of 'lost' appointments due to non attendance; we noted 50% non-attendance on one day during our visit.
- 2.103 The dentist and triage nurse recorded directly on to SystemOne and paper records for dental charting. Electronic records were factual and complete. Paper records were stored in a locked metal cabinet.
- 2.104 The surgery was clean and tidy. All instruments were single use, and there was digital X-ray. The amalgam separator was under the sink. Servicing and maintenance was up to date.

## Recommendations

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- 2.105 Prisoners with urgent dentistry need, such as pain or infection, should be seen within a reasonable timescale.
- 2.106 There reasons for non-attendance at dental appointments should be explored.

## Housekeeping point

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- 2.107 Dental triage should be audited to ensure it is used appropriately.

## Delivery of care (mental health)

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- 2.108 Prisoners had reasonable access to mental health services, but staff vacancies and lack of consultation space had affected waiting times and service response. An integrated mental health team with registered mental health nurses and psychotherapy and psychology practitioners provided an improving access to psychological therapy (IAPT) and cognitive analytical therapy (CAT) service between Monday and Saturday morning. Out of hours, the local mental health crisis team was contactable for emergencies. A clinical psychiatrist provided two sessions a week. Mental health staff were linked into prison processes, such as ACCT reviews.
- 2.109 Referrals to services could be made by anyone, including the prisoner. They were seen within five days for a routine first assessment and then diverted to the appropriate service. Routine referrals with insufficient information were followed up by a letter to the prisoner asking for further details and whether they wanted a mental health appointment.
- 2.110 The wait to start IAPT therapy was five days and up to two weeks for CAT. Prisoners with urgent problems could be seen within four hours during the working week, and within an hour for a crisis situation.
- 2.111 Clinical recording was done on both SystmOne and the Maricis system for care programme approach (CPA) documentation. The two systems were not linked, which meant dual recording, and other health professionals could not see what was recorded on Maricis. There was a monthly retrospective trawl of all patient information on both systems to ensure dual recording.
- 2.112 Clinical supervision and training for mental health staff was appropriate and well managed. Mental health training was provided for prison staff each month but the number taking part had been low.

## Recommendations

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- 2.113 Mental health service staff vacancies should be filled as soon as possible.
- 2.114 There should be adequate consultation spaces to ensure prompt mental health treatment.
- 2.115 All key clinical and risk information on mental health service patients should be accessible to all health professionals.
- 2.116 All prison staff should be trained in mental health awareness.

## Catering

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### Expected outcomes:

Prisoners are offered varied meals to meet their individual requirements and food is prepared and served according to religious, cultural and prevailing food safety and hygiene regulations.

2.117 The range and standard of food was reasonably good. Cultural needs were generally catered for, and fresh vegetables, fruit and salads were available every day.

2.118 Prisoners selected their lunch and dinner from a four-week rolling menu that offered a reasonable variety, including healthy options. Menus included portions of fruit and vegetables each day. The quality of the food we tasted was reasonable and at the correct temperature. The menus we saw generally provided for different diets, including vegetarian, vegan, and halal. Fresh bread was baked daily. In our survey, significantly more respondents than in comparator prisons said that the food was good.

2.119 The prison kitchen appeared old and worn but it was reasonably clean. All staff and prisoners employed in the preparation and serving of food had received basic hygiene and food handling training. Halal food was stored and served separately from other foods. Wing serveries were clean and well maintained, but separate utensils to serve halal meals were not used.

2.120 There was a regular meeting with servery workers, a food survey twice a year and prisoner representatives met the catering manager at formal consultation meetings. There were food comments books on all residential units, which were readily accessible to prisoners.

## Housekeeping point

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2.121 Separate utensils should be used to serve halal food.

## Purchases

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### Expected outcomes:

**Prisoners can purchase a suitable range of goods at reasonable prices to meet their diverse needs, and can do so safely.**

2.122 Shop arrangements were satisfactory for most prisoners, but the range of items for minority groups was insufficient.

2.123 The prison shop arrangements were reasonably effective for most prisoners. New arrivals were offered a smoker's pack, but there was no pack for non-smokers. New arrivals could complete a shop order sheet and receive their goods within 72 hours.

2.124 In our survey, only 14% of black and minority ethnic respondents and 22% of foreign nationals said the shop sold a wide enough range of goods to meet their needs. Religious items were available but there was a lack of culturally diverse products. Prisoners were consulted about the shop at the prisoner consultative meeting, and changes were made to the shop list where possible, but there was no specific consultation with prisoners from minority groups.

2.125 There were a few catalogues from which prisoners could shop, and they could order newspapers and magazines weekly.

## Recommendations

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- 2.126 New arrivals should be offered the choice of a smoker's or non-smoker's reception pack.
- 2.127 Prisoners from minority groups should be consulted about items in the prison shop that meet their needs.

## Section 3: Purposeful activity

### Time out of cell

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#### Expected outcomes:

All prisoners are actively encouraged to engage in activities available during unlock, and the prison offers a timetable of regular and varied activities.<sup>3</sup>

- 3.1 There was daily slippage in the regime, usually due to difficulties in reconciling the prison roll, and prisoners were rarely unlocked on time. Time out of cell was much less than the published core day of nine hours, and for unemployed prisoners it was unacceptably poor. At a roll check during the core day we found too many prisoners locked in their cells.
- 3.2 The prison's published core day indicated that a fully employed prisoner could achieve about nine hours out of their cell on Monday to Thursday and about seven hours on Fridays and at weekends. Our own observations showed that slippage in unlock and cancellation of activities meant that fully employed prisoners got about six hours unlocked and as little as two hours if not allocated an activity. There were a few exceptions, such as wing cleaners and orderlies, some of whom could remain unlocked for most of the core day. Evening association was offered every day and rarely cancelled, although prisoners were sometimes unlocked late.
- 3.3 The regime was plagued with daily disruptions that led to prisoners being unlocked late or not being unlocked for full or part sessions. There were daily problems with reconciling the prison roll that meant that prisoners were routinely returned to residential units from education and workshops because the number of prisoners had not been counted correctly. Prisoners awaiting other activities, such as hospital appointments and the gym, remained locked up and could not be moved from their wing to their activity until the roll was deemed correct. During some parts of the day, this meant that prisoners could not be unlocked at all.
- 3.4 We conducted four separate roll checks in the middle of the core day and found that between 38% and 49% of prisoners were usually locked in their cells.

### Recommendation

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- 3.5 Roll check arrangements should be improved, and prisoners should be unlocked and attend activities as published.

### Learning and skills and work activities

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#### 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 learning and skills and work provision is of a good standard and is effective in meeting the needs of all prisoners.

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<sup>3</sup> Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities to take showers or make telephone calls.

3.6	<p>The leadership and management of learning and skills were inadequate. There were insufficient activity places for the population, and the available places were underused. Allocations to activities were poorly managed, and attendance and punctuality were poor. Work places provided purposeful activities, although sometimes there was insufficient production work to occupy prisoners fully. The prison had effective partnerships that benefited learners with training as well as opportunities on release. Education and vocational training courses were well planned and managed, and teaching and learning were good. The range of courses was satisfactory, but they were mainly at a low level and not challenging enough for more able learners. Vulnerable prisoners had fair and equal access to education, training and work. The library had an adequate range of books, but prisoner access was limited.</p>						
3.7	<p>Ofsted made the following assessments about the learning and skills and work provision:</p> <table border="0"> <tr> <td data-bbox="335 649 1053 687">Achievements of prisoners engaged in learning and skills and work:</td> <td data-bbox="1197 649 1350 687">Good</td> </tr> <tr> <td data-bbox="335 687 845 725">Quality of learning and skills and work provision:</td> <td data-bbox="1197 687 1350 725">Satisfactory</td> </tr> <tr> <td data-bbox="335 725 989 763">Leadership and management of learning and skills and work:</td> <td data-bbox="1197 725 1350 763">Inadequate</td> </tr> </table>	Achievements of prisoners engaged in learning and skills and work:	Good	Quality of learning and skills and work provision:	Satisfactory	Leadership and management of learning and skills and work:	Inadequate
Achievements of prisoners engaged in learning and skills and work:	Good						
Quality of learning and skills and work provision:	Satisfactory						
Leadership and management of learning and skills and work:	Inadequate						

## Management of learning and skills and work

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- 3.8 Leadership and management of learning and skills and work activities across the prison were inadequate. The education, training and work provision had not been informed by a recent prisoner needs analysis or local employment information.
- 3.9 The allocation of prisoners to activity places was ineffective and did not take sufficient account of their sentence plans. Too many prisoners were locked up waiting for activity places, and too many were allocated wing work and were not fully occupied. Production work areas did not fully occupy prisoners throughout the day. The movement of prisoners to activities was ineffective, resulting in poor attendance and erratic punctuality (see main recommendation HP51).
- 3.10 Attendance was poor and often below 70%. Some learners were transferred to work before they finished their education course and others were taken out of education for other regime activities, losing valuable learning time (see main recommendation HP51). Education staff were not always informed where learners were or why they had not attended
- 3.11 Prisoners in the work areas had adequate opportunities to combine work with part-time education classes. Activity allocation did not always take into account the outcomes of learners' initial assessment and standards of literacy, numeracy and language ability.
- 3.12 The prison had good partnership working with employers that benefited learners. A large construction employer, the Gelder Group, provided construction training courses in the prison and helped learners who wanted to work in the industry gain work experience and employment. There were also very effective partnerships with Lincolnshire Action Trust to help prisoners with resettlement requirements (see paragraphs 4.33-4.36).

## Recommendations

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- 3.13 The provision of activities should be based on an up-to-date analysis of prisoner needs and local employment information.



- 3.14 Allocation of prisoners to activities should be effective and take account of their sentence plans, and waiting lists should be prioritised to address prisoners' needs.**

## **Provision of activities**

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- 3.15** There were 460 activity places, which were insufficient for the 650 prisoners. Despite this, many purposeful activity places were not fully used and the large, new learning Academy was almost empty. Some adversely had long waiting lists. The waiting lists were not prioritised to meet prisoners' sentence planning needs.
- 3.16** An average of around 63 education places were available each weekday morning and afternoon, except Friday afternoons. There were 139 learners who attended education part time, and 23 received individual support at work or on their wings.
- 3.17** The range of programmes was satisfactory and included courses in literacy, numeracy and functional skills from entry level to level 2, English for speakers of other languages (ESOL) at entry level, and IT and business management at levels 1 to 3. Personal and social development courses included basic food preparation and cookery, creative skills, life skills, budgeting and money management, citizenship, diversity in society and peer mentoring. However, most courses were at level 1 and did not meet the needs of more able learners. The virtual campus had been installed but was not yet in use.
- 3.18** A Reading Together programme, run by Lincolnshire County Council family learning, developed prisoners' communication skills very well to help them support their child's learning and development. Staff also provided Storybook Dads, with around 30 prisoners recording stories for their children in the previous six months. Nine learners participated in the Toe-by-Toe reading scheme supported by eight qualified peer mentors. Six learners were on distance learning courses at levels 2 and 3.
- 3.19** There were 30 full-time-equivalent vocational training places in three construction craft workshops, in addition to 323 full-time-equivalent production work places. Workflow in the production workshops did not ensure that all prisoners were fully occupied and did not reflect commercial deadlines, particularly in the charity workshop handling book sorting. Work and production workshops offered a wide range of entry level qualifications and a few at level 1, but only 14% of prisoners took relevant accredited qualifications while working, which was low. Too many prisoners were allocated to wing cleaning work and were underemployed.
- 3.20** Good partnership working had supported the recent establishment of a small animal farm and polytunnel facility, with plans for relevant accredited training and opportunities for prisoner release on temporary licence (ROTL). At the time of the inspection only one prisoner was working on the farm but offenders participating in the probation service community payback scheme worked alongside him in the running of the farm. Sorting of recyclables outside the prison was undertaken by prisoners on ROTL, including some transported from HMP North Sea Camp

## **Recommendations**

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- 3.21 Higher-level qualifications should be introduced in the vocational and production workshops to enable prisoners to progress.**
- 3.22 The prison should improve the uptake of accredited training for prisoners in work.**

## Quality of provision

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- 3.23 The quality of teaching and learning was mostly good. Lessons were planned well and included a wide range of activities that motivated and interested learners. The development and implementation of learners' functional skills was good. Information learning technology was well used and planned into sessions to add interest and variety to learning. Teachers were adept and responsive to the needs of individual learners and managed mixed ability groups well. However, not all teachers planned extension activities to meet the needs of the most able learners. Learner behaviour was very good. Teachers were well qualified and had regular update training.
- 3.24 Individual learning plans were well used in education lessons and learners understood their targets. However, few teachers set learners personal targets linked to their long-term goals and aspirations or aspects of personal development.
- 3.25 Induction into education was weak. The induction room was not conducive to learning and had no IT resources to help present information. Prisoners were disengaged. They were not given a copy of the courses and activities available to help them choose from the opportunities. The majority were screened for literacy and numeracy needs when prior assessments were not available, and there were further diagnostic assessments where a need was identified.
- 3.26 The quality of individual coaching for learners was good in the vocational workshops and satisfactory in the work areas. Overall planning of learning was weak and reviews of learner progress were not effective enough. Tutors did not routinely set challenging targets to promote achievement.
- 3.27 Workshop accommodation was suitable, but the building craft and joinery workshops had inadequate extraction facilities and arrangements to reduce the impact of the noise of woodcutting machines were ineffective.

## Recommendations

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- 3.28 There should be extension activities to meet the needs of more able learners.
- 3.29 The planning of learning and progress reviews for vocational training courses should be improved.
- 3.30 The prison should improve the extraction facilities in the building craft and joinery workshops and reduce the impact of workshop woodcutting machinery noise.

## Education and vocational achievements

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- 3.31 Education outcomes for prisoners were good with 89% of participants in education achieving their qualifications. Prisoners could gain units or accreditation or whole qualifications depending on their length of stay. Outcomes on ESOL entry levels 1 and 2 and adult literacy entry level 3 were poor with below 50% of course participants gaining their qualifications.
- 3.32 Skill development was good and helped improve learner confidence. Learners made good progress in lessons and some learners progressed well to higher level courses. Learners received good individual support with their education on the wings from education staff.

- 3.33 Full qualification pass rates for industrial cleaning, laundry and building craft courses were high. Pass rates on other programme were generally good, with satisfactory rates for painting and decorating and joinery.
- 3.34 Learners in vocational workshops showed good skills development and high standards of finished work. They were very motivated and engaged.
- 3.35 Learners' employability skills, including the use of initiative and team working, were developed appropriately in vocational training and production workshops. Learners developed a suitable standard of literacy and numeracy skills.
- 3.36 Learners received adequate care and support to promote achievement. However, non-English speakers training in the workshops did not always receive adequate help to develop their language skills.

## Recommendations

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- 3.37 **Outcomes on courses in English for speakers of other languages (ESOL) should be improved.**
- 3.38 **All learners should receive adequate help to develop their language skills.**

## Library

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- 3.39 The library was provided by Lincolnshire County Council. There were two library facilities each accessed by separate wings. They were small but adequately stocked.
- 3.40 All wings had two 45-minute allocated library sessions, but prisoner access was very limited. The library was only available for vulnerable prisoners on Friday afternoon and mainstream prisoners on Saturday. Although one library was near the education department, it was not used to support learning during class time or vocational courses. Staff shortages and absence had severely limited the delivery of the service and the promotion of literacy to prisoners, and there had been no library events for some months. Prisoners in the segregation unit were supplied with a small range of books.
- 3.41 The library stock included fiction and non-fiction, textbooks to support vocational training, graphic novels, quick reads to support emergent readers, and foreign language books. Although books were available in 37 languages, there had been no account of prisoners' nationalities to ensure the stock met needs. There had been no surveys of prisoners to assess if library services met needs. Up-to-date copies of Prison Service Orders and legal texts were available by request, but only in one of the libraries and prisoners who only had access to the other library did not know what legal texts were available. The library did not stock any magazines or daily newspapers.

## Recommendations

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- 3.42 **Library opening should be extended to weekdays.**
- 3.43 **The library should carry out an annual needs analysis and survey to ensure that the service is suitable for the population.**

## Housekeeping points

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- 3.44 The library should organise events to promote literacy to prisoners and encourage non-users to access the facilities.
- 3.45 Both libraries should provide a list of the available legal reference books and Prison Service Orders.

## Physical education and healthy living

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### Expected outcomes:

All prisoners understand the importance of healthy living, and are encouraged and enabled to participate in physical education in safe and decent surroundings.

- 3.46 PE provision was adequate and prisoners could go to recreational PE at least twice a week, although those unemployed could only have one session a week.
- 3.47 PE facilities were adequate, although the size of the accommodation limited the range and variety of activities. The main hall offered indoor sports, including basketball, football, soft tennis, badminton, hockey, cricket and circuit training. There was also a free weights area and a cardiovascular suite with a satisfactory range of equipment. No outdoor facilities were available. Staffing levels were appropriate.
- 3.48 The induction process was clear and included prisoner self-declaration and ongoing health care assessment to identify individuals with specific needs. Trained prisoners acted as 'health champions' to promote the importance of personal fitness and healthy living. Gym staff worked well with health care staff, and there were specialist sessions to address the mental health, drug rehabilitation and weight loss needs of prisoners.
- 3.49 Prisoner access to the gym was generally satisfactory with a minimum of two sessions a week. However, unemployed prisoners had only one scheduled session a week. Around 47% of the population used the gym regularly, which was high compared with similar prisons.
- 3.50 The prison offered a suitable range of accredited courses. Achievement rates were very high.
- 3.51 PE shower facilities were satisfactory, but the floor area leaked. Changing room floor tiles had been removed and not replaced. Not all prisoners had routine access to clean gym kit.

## Recommendations

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- 3.52 All prisoners should have access to at least two PE sessions a week.
- 3.53 The PE shower and changing room floor should be repaired.

## Housekeeping point

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- 3.54 All prisoners should receive clean gym kit routinely.

# Section 4: Resettlement

## Strategic management of resettlement

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### Expected outcomes:

Planning for a prisoner's release or transfer starts on their arrival to the prison. Resettlement underpins the work of the whole prison, supported by strategic partnerships in the community and informed by assessment of prisoner risk and need. Good planning ensures a seamless transition into the community.

- 4.1 Strategic management was weak and the reducing reoffending strategy lacked an action plan and was not supported by a comprehensive needs analysis. Governance had only just been reinstated through committee meetings. There was no 'whole prison' approach to reducing reoffending, and poor systems hindered communication and information exchange. There was positive resettlement provision across most of the pathways apart from offending behaviour work, which had no analysis of need or strategy. Use of temporary release placements was not well managed.
- 4.2 Reducing reoffending work was not based on a comprehensive need analysis, despite the complexity of the population in Lincoln. There had been little identification of the specific needs of indeterminate sentence prisoners and those denying their offending behaviour. In our survey, only 31% of respondents, against the comparator of 63% and the response of 54% at out last inspection, said they could achieve their sentence plan targets at Lincoln.
- 4.3 Strategic management of resettlement had been hindered through management changes and committee meetings had only recently been reinstated after a gap of several months. The reducing reoffending strategy was limited and out of date. There was no action plan setting out current priorities or specifying timescales, which made monitoring of progress difficult.
- 4.4 Provision for offending behaviour work had reduced recently with the ending of substance misuse and victim awareness programmes (see paragraph 4.52). There had been no analysis of the need for programmes, and there was no clear strategy to support delivery of programmes or prioritisation of prisoners to transfer to other establishments to complete such programmes.
- 4.5 Some placements for work in the community available to prisoners through release on temporary licence (ROTL) had been developed but only two prisoners currently benefited from them. ROTL applications were low and assessments were made in isolation from the offender supervisor.
- 4.6 Resettlement across the seven pathways was supported by an excellent range of provision though the Lincolnshire Action Trust, but resettlement work was not well monitored and there was little evaluation of outcomes to support service provision. The links between public protection, offender management and resettlement work had improved, although poor formal systems hindered communication and information exchange.

## Recommendation

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- 4.7 There should be a current reducing reoffending strategy and action plan, including the provision of offending behaviour work and release on temporary licence, based on a comprehensive needs analysis of the population.

## Offender management and planning

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### Expected outcomes:

All prisoners have a sentence plan based on an individual assessment of risk and need, which is regularly reviewed and implemented throughout and after their time in custody. Prisoners, together with all relevant staff, are involved in drawing up and reviewing plans.

4.8 Offender management was not fully developed and not all high risk prisoners had the relevant assessment or sentence plan. Remand and short-term prisoners had their needs assessed during induction but had no formal custody plan, and pre-release interviewing had ended. Formal communication and links with other departments were sometimes insufficient, and offender supervisor contact with prisoners was too often reactive. OASys assessments were suitably focused on risk and offender supervisors were knowledgeable about risk of harm. Too many prisoners were released late for home detention curfew. Public protection and categorisation processes were sound but transfer was very difficult for some prisoners. There was limited provision for indeterminate sentence prisoners and many had been returned due to failure elsewhere, with little available to challenge their offending behaviour.

- 4.9 The offender management model was not yet fully developed. Offender management had a low profile across the establishment and was not always seen as the central point for information exchange, with some important information not communicated to the offender supervisor. In one case we inspected, the offender supervisor had not been told that the prisoner had developed a drug addiction since his arrival at the prison.
- 4.10 In our survey significantly fewer prisoners than the comparator said they had a sentence plan. At the time of the inspection, 40 prisoners, including a few at high risk of harm, did not have a current OASys (offender assessment system) assessment or sentence plan. Remand prisoners and those serving less than 12 months had their needs assessed during induction but did not receive a formal custody plan, and pre-release resettlement planning had ended.
- 4.11 In our survey, significantly more prisoners than the comparator said they had an offender supervisor but we found that contact was often reactive and lacked a focus on offending behaviour. Despite the best efforts of the offender supervisors, only a few prisoners were seen within two weeks of arrival. Offender supervisors reported difficulties in finding private interview rooms. Caseloads were manageable but staff in the offender management unit (OMU) described their access to resources as poor or insufficient. There had been management oversight of only half the high and very high risk of harm cases we inspected. OMU staff did not make entries on to prisoners' electronic casenotes (P-Nomis) but used handwritten contact records instead, which meant that no one else could access their information.
- 4.12 The OASys assessments we examined were suitably focused on risk, and offender supervisors were knowledgeable about risk of harm. Of the 20 cases that we assessed of prisoners in scope for offender management (those serving 12 months or more and classified as posing a high or very high risk of serious harm to the public, prolific and other priority

offenders, and those serving indeterminate sentences for public protection), all had a full analysis of the risk of serious harm to others but in seven cases this was of an insufficient quality. Two-thirds of the risk management plans forwarded to the prison were insufficient. Some did not consider how risks would be managed in prison, including some for prisoners who set fires.

- 4.13 In almost all the cases we inspected, prisoners who were eligible for home detention curfew (HDC) were released late. The problem was compounded by prisoners arriving at Lincoln from other establishments with no HDC paperwork started. The assessment reports we reviewed were adequately detailed and decisions made were defensible. Prisoners were involved in the board meeting to ensure they fully understood the outcome.

## Recommendations

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- 4.14 There should be formal systems for staff throughout the prison to exchange information about risk of harm and likelihood of reoffending with offender supervisors.
- 4.15 All prisoners serving over 12 months should have an OASys (offender assessment system) assessment and plan, and those serving under 12 months and remand prisoners should have a formal custody and release plan.
- 4.16 Prisoners should be released for home detention curfew at their earliest eligibility date.

## Housekeeping point

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- 4.17 Contact with offender supervisors should be meaningful and regular.

## Public protection

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- 4.18 There were 262 public protection cases at the time of the inspection, with about a quarter on full monitoring. Public protection assessments were undertaken by probation staff and appropriate restrictions applied. The interdepartmental risk assessment and management panel met regularly with good membership and attendance, and provided appropriate oversight of the cases with regular reviews. Prisoners were told in person about the restrictions applied and how to appeal. Written contributions to multi-agency public protection arrangements (MAPPA) meetings in the community were made in the 20 cases we inspected. Offender supervisors did not use the violent and sexual offenders register (VISOR) to support risk management and information exchange.

## Categorisation

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- 4.19 Categorisation reviews were up to date and undertaken at the appropriate time. Most prisoners were category C but the prison held 26 category D prisoners, 10 of whom had been returned from open conditions and a further 11 had been category D for only one month. Transfer of the latter group was not delayed.
- 4.20 Categorisation processes were clear and decision making defensible but did not include the offender supervisor. There was an appropriate focus on transferring prisoners to other establishments, but this was very difficult for some. For example, category B sexual offenders, particularly those in denial of their offence, were very difficult to transfer and remained in

Lincoln for too long, sometimes for the duration of their sentence with almost no access to offending behaviour work and very few psychological interventions.

## Recommendation

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- 4.21 The transfer of category B sexual offenders should not be delayed.

## Housekeeping point

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- 4.22 Offender supervisors should be involved in the categorisation of prisoners for transfer.

## Indeterminate sentence prisoners

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- 4.23 At the time of the inspection there were 35 indeterminate-sentenced prisoners. All but seven had been returned from other establishments, and too many serving indeterminate sentences for public protection (IPPs) were significantly over their minimum tariff. Due to the lack of offending behaviour work, some indeterminate-sentenced prisoners found it hard to demonstrate a reduction in risk during their time at Lincoln.
- 4.24 Lifer liaison officers provided consistency and a good point of contact. However, at the time of the inspection there was little specific provision for indeterminate-sentenced prisoners, with no forum or family days and little access to psychological services. Parole processes were completed on time. Indeterminate-sentenced prisoners were transferred appropriately following sentence, and this had improved considerably recently.

## Recommendation

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- 4.25 Provision for indeterminate sentenced prisoners should be improved and include forums and family days.

## Reintegration planning

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### Expected outcomes:

Prisoners' resettlement needs are met prior to release. An effective multi-agency response is used to meet the specific needs of each individual prisoner in order to maximise the likelihood of successful reintegration into the community.

- 4.26 Provision across the resettlement pathways was good and better than we often see elsewhere. More prisoners than in similar establishments knew who to contact for help with resettlement. New arrivals had their resettlement needs assessed, and were supported by referrals and wing surgeries, but there was no pre-release planning. Resettlement officers provided a range of help and support for accommodation needs, and most new arrivals who were homeless had been helped to secure accommodation on release. The prison had good links with employers to provide work experience and apprenticeships/employment opportunities. Community partnership working ensured that prisoners with substance misuse problems could continue with treatment on release. Prisoners had access to advice and support on resolving debts but could not open bank accounts before release. There was excellent provision to help prisoners



maintain family ties, but too few could attend the high quality family days. Domestic visits were too restricted, particularly for those on remand. The visits hall waiting areas were very poor. Offending behaviour provision was negligible and poorly planned, with no analysis of need.

- 4.27 In our survey, significantly more respondents than the comparators knew who to contact in the prison across the range of resettlement needs. Resettlement services provided by Lincolnshire Action Trust (LAT) on most of the pathways were promoted at induction, through surgeries on the wings and by highly visible LAT staff. There was a coordinator and five LAT resettlement staff as well as other specialist staff, such as the children's support officer.
- 4.28 All prisoners received an initial needs assessment by LAT but this was not automatically shared with the OMU for those serving over 12 months. Referrals were made as necessary and followed up by specialist resettlement staff through LAT. However, pre-release planning had ended. Although there was some communication between LAT and offender supervisors, this required formalising to ensure all relevant information was exchanged.

## Recommendation

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- 4.29 All sentenced prisoners should have a comprehensive pre-release plan covering all resettlement needs.

## Housekeeping point

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- 4.30 Information exchange between Lincolnshire Action Trust and the offender management unit should be improved.

## Accommodation

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- 4.31 LAT resettlement officers provided support for a range of accommodation needs, such as maintaining or closing down tenancies. A worker for BASS (bail accommodation and support services to people living in the community on bail or HDC) supported those on remand to obtain bail accommodation. An approved good tenants course was also available. Accommodation targets were consistently achieved. However, the rate of released prisoners without accommodation remained at 10%. In the previous year, LAT had supported a large number of prisoners into accommodation who would have otherwise been released homeless. However, this important outcome measure was not routinely monitored.

## Recommendation

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- 4.32 The number of homeless prisoners helped to find accommodation on release should be monitored.

## Education, training and employment

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- 4.33 LAT assessed new arrivals' education, training and employment needs and worked with them to address these. For example, they asked the prisoner's employer to keep his employment open for his release. LAT reassessed prisoners 60 days before their release date and provided good pre-release courses, plus information, advice and guidance to meet individual needs.

- 4.34 LAT provided good help for prisoners who wanted to continue their learning with further education or training when released. Of the 561 prisoners released in the previous six months, 31% went into employment and 15% went into further education or training, according to data from LAT.
- 4.35 The good partnership working between LAT, the prison and probation to prepare prisoners for release included links with employers for work experience, apprenticeship opportunities and employment. Recent opportunities for prisoners wanting to work in the construction industry included the offer of work experience from one company and had led to apprenticeships for some prisoners.
- 4.36 Although LAT worked closely with the probation service, there was no information about what happened to prisoners following their release, and thus assess the effectiveness of prison interventions.

## Recommendation

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- 4.37 **Prisoners' outcomes and destinations on release should be tracked to assess the effectiveness of prison interventions.**

## Health care

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- 4.38 There were plans to implement a health care discharge/transfer protocol but this had not yet started. Health staff saw prisoners before their transfer or release. Prisoners with severe and enduring mental health problems were linked with their local community mental health team (CMHT) before discharge.

## Drugs and alcohol

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- 4.39 There were appropriate arrangements to ensure treatment continuity for prisoners on release, and there were good links with local drug intervention programme (DIP) teams. Designated community link workers attended the prison regularly to plan post-release support, and their remit included problem alcohol and cannabis users. Community agencies were well represented at drug strategy meetings.

## Finance, benefit and debt

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- 4.40 Debt advice was good and a debt adviser was available two days a week to provide advice and support on resolving debt issues. Remand prisoners were helped to maintain benefits, but there was little independent benefits advice. Prisoners were not yet able to open bank accounts before their release, but their access to Credit Union accounts was planned. The NOMS-led financial capability course had ended and not yet been replaced. Some budgeting advice was available through the good tenants' course.

## Recommendation

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- 4.41 **Prisoners should be able to open bank accounts before their release and access a financial capability course.**

## Children, families and contact with the outside world

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- 4.42 Support under this pathway was well developed and included a children's support worker. A good range of courses included Reading Together, Storybook Dads (see also paragraph 3.18) and Being Dad. The children's support worker provided a range of support, including arranging final contact visits between fathers and children prior to adoption and liaising with children's services.
- 4.43 The visits policy restricted most prisoners, including those on remand, to three visits a month with only those on enhanced eligible for four. The visits telephone booking line had closed and prisoners had to book visits through an application. Although the visitors we spoke to preferred this system, there were sometimes delays in getting a preferred session due to high demand, particularly on weekends.
- 4.44 The visitors' reception/waiting areas were small and cramped. Visitors were positive about staff and said their experience of visiting the prison was generally good but that sessions often started late, which we observed.
- 4.45 The visits holding areas for prisoners, particularly vulnerable prisoners, were poor with little ventilation, compounded by the fact that prisoners were placed there far too early. For example, one prisoner we spoke to faced a two-hour wait for his video link to court. The toilet facilities in the main holding area were exceptionally dirty and required immediate improvements.
- 4.46 The main visits hall was clean, bright and well equipped with a snack bar and supervised crèche area. Prisoners no longer had to wear high visibility vests, could hold their children and were allowed appropriate contact with their visitors. However, visitors indicated on by the drug detection dog were turned away without being offered a closed visit. We found evidence that closed visits were used for security reasons unrelated to visits (see paragraph 1.53 and recommendation 1.55).
- 4.47 Accumulated visits were available, as was a volunteer prison visitors' scheme through the chaplaincy. There were regular high quality family days but the number of prisoners who benefited from them was limited because eligible prisoners needed to have completed the Reading Together or Being Dad course.

## Recommendations

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- 4.48 Prisoners, particularly those on remand, should have more visits each month.
- 4.49 The visits waiting and reception areas should be improved as a matter of urgency, and visit sessions should start on time.

## Housekeeping point

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- 4.50 More prisoners should be able to attend family days.

## Attitudes, thinking and behaviour

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- 4.51 Provision to address offending behaviour was inadequate and poorly planned. In our survey, only 14% of respondents, against the comparator of 22%, said it was easy to go on an offending behaviour programme, and significantly fewer said they had been involved in one while at Lincoln.
- 4.52 Offending behaviour work aimed at victim awareness and substance use had ended with no plans to replace it. The thinking skills programme was managed by the local probation trust but had only been delivered twice in the last year, with 17 completions. Future provision was unplanned and uncertain. Most of the 41 prisoners on the waiting list had already left Lincoln or did not have enough time left to do it. There were no thinking skills programmes for sexual offenders or vulnerable prisoners. The lack of offending behaviour work also meant delays for some prisoners transferring to a lower categorisation prison (see paragraph 4.20).
- 4.53 The majority of sexual offenders were in denial of their offending but there was no strategy and almost no provision to address this. Only five prisoners had completed a motivational programme in the last year and future provision was unclear and not planned. Others convicted of a sexual offence were waiting transfer to complete a sex offender treatment programme (SOTP) but some were running out of time to complete it before their release (see recommendation 4.21).

# Section 5: Recommendations, housekeeping points and good practice

The following is a listing of 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.

## Main recommendations

To the governor

- 
- 5.1 All incidents of violence should be addressed and reported. Prisoners should be consulted on their perceptions of safety, and all data relating to violence should be collated and analysed to identify trends and take action to improve safety. (HP47)
  - 5.2 Segregation should only be used exceptionally and as a last resort for prisoners in crisis and at risk of suicide and self-harm. The constant observation cell in segregation should not be used, and the constant observation cells in E wing should not be used for mainstream prisoners. (HP48)
  - 5.3 Governance and management oversight of diversity should be prioritised to ensure that the needs of all prisoners with protected characteristics are identified, assessed and met, and any negative perceptions of particular groups are understood. (HP49)
  - 5.4 The prison should work with the United Kingdom Border Agency to ensure that decisions on the future of foreign national prisoners are expedited. (HP50)
  - 5.5 The number of work, education and vocational training places should be increased, and attendance at activity should be monitored and non-attendance robustly challenged and disruptions urgently resolved. (HP51)
  - 5.6 The offending behaviour needs of the population should be analysed and suitable offending behaviour courses introduced. (HP52)

## Recommendation

To NOMS

- 
- 5.7 The transfer of category B sexual offenders should not be delayed. (4.21)

## Recommendations

To the governor

### Early days in custody

- 
- 5.8 Trained prisoner peer supporters should be available in reception. (1.13)
  - 5.9 Staff should have a meaningful private interview with all new arrivals before they are locked up on their first night to identify and address any needs or concerns. (1.14)
  - 5.10 New arrivals should be able to make a free telephone call. (1.15)

## **Bullying and violence reduction**

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- 5.11 A formal intervention should be introduced to deal with prisoners who persistently bully others. (1.28)
- 5.12 There should be a protocol and criteria for admission to the vulnerable prisoner unit, and the reasons for prisoners applying to go on the unit should be fully investigated and recorded. (1.29)

## **Self-harm and suicide prevention**

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- 5.13 Case management arrangements for prisoners on assessment, care in custody and teamwork (ACCT) monitoring should be improved and should be evidenced by good quality interactive and supportive entries in monitoring documents and support plans. (1.37)
- 5.14 Information on self-harming behaviour should be used to identify trends and patterns of behaviour by location, type, age, timing and peripheral circumstances of individual incidents, and this analysis should be updated regularly. (1.38)
- 5.15 There should be a sufficient number of trained Listeners. (1.39)
- 5.16 All prisoners should have good access to the Samaritans telephone. (1.40)

## **Safeguarding (protection of adults at risk)**

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- 5.17 The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (1.45)

## **Security**

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- 5.18 The suspicion drug testing programme should be sufficiently resourced so that all prisoners suspected of taking drugs are tested within required timescales and without gaps in provision. (1.54)
- 5.19 Closed visits should only be applied when there is evidence of illicit activity relating to visits, and prisoners should not be required to provide a negative drug test before closed visits are lifted. (1.55)

## **Discipline**

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- 5.20 All disciplinary charges should be fully investigated with clear reasons given for the decisions reached, and the quality assurance of adjudication records should be improved. (1.65)
- 5.21 Information collated for all areas of discipline, including disciplinary procedures, use of force and segregation, should be analysed and used more effectively. (1.66)
- 5.22 Managerial oversight of all aspects of use of force should be improved. (1.70)
- 5.23 The regime for prisoners in the segregation unit should be improved. (1.76)

## **Substance misuse**

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- 5.24 There should be appropriate facilities to observe and monitor prisoners during stabilisation/detoxification. In the absence of a designated unit, observation hatches should be fitted on the first night landing. (1.85)
- 5.25 Prescribing regimes for opiate-dependent prisoners should adhere to national guidance, and there should be regular multidisciplinary treatment reviews. (1.86)
- 5.26 Controlled medication should be administered in a safe and suitable environment, and wing officers should be consistently available to supervise prisoners. (1.87)
- 5.27 Support services should be extended and include a structured drug/alcohol programme, peer support and the development of a recovery unit. (1.88)

## **Residential units**

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- 5.28 The standards of cleanliness in communal and outside areas should be improved and maintained. (2.9)
- 5.29 Cells designed to hold one prisoner should not be used to hold two. (2.10)
- 5.30 Toilets in all cells should be adequately screened. (2.11)
- 5.31 Communal showers should provide privacy and be kept clean and in a good state of repair. (2.12)
- 5.32 There should be adequate clothing available each week for all prisoners. (2.13)

## **Equality and diversity**

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- 5.33 Equality of prisoner treatment and access to the regime should be monitored for all protected characteristics and appropriate action taken to rectify any inequalities. (2.29)
- 5.34 All staff should be given cultural awareness training. (2.30)

## **Faith and religious activity**

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- 5.35 A weekly mass should be provided for all Catholic prisoners. (2.42)

## **Complaints**

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- 5.36 The prison should analyse the data on complaints to identify and take action as necessary. (2.47)

## **Health services**

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- 5.37 A senior manager should represent the prison at the prison partnership board. (2.66)

- 5.38 There should be a health needs assessment to ensure that services meet prisoner health needs. (2.67)
- 5.39 Prisoners should be taken to their health care appointments on time, and reasons for late or non-attendance should be investigated and addressed. (2.73)
- 5.40 Prisoners should have access to pharmacy clinics and medication advice. (2.89)
- 5.41 Arrangements for medication administration should ensure that prisoners are given their medication in confidence and safely. (2.90)
- 5.42 Prescribing for pain management should adhere to best professional practice and national guidelines for safe prescribing in prisons. (2.91)
- 5.43 The in-possession risk assessment should include risk ranking of individual medications. (2.92)
- 5.44 Prisoners with urgent dentistry need, such as pain or infection, should be seen within a reasonable timescale. (2.105)
- 5.45 There reasons for non-attendance at dental appointments should be explored. (2.106)
- 5.46 Mental health service staff vacancies should be filled as soon as possible. (2.113)
- 5.47 There should be adequate consultation spaces to ensure prompt mental health treatment. (2.114)
- 5.48 All key clinical and risk information on mental health service patients should be accessible to all health professionals. (2.115)
- 5.49 All prison staff should be trained in mental health awareness. (2.116)

### **Purchases**

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- 5.50 New arrivals should be offered the choice of a smoker's or non-smoker's reception pack. (2.126)
- 5.51 Prisoners from minority groups should be consulted about items in the prison shop that meet their needs. (2.127)

### **Time out of cell**

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- 5.52 Roll check arrangements should be improved, and prisoners should be unlocked and attend activities as published. (3.5)

### **Learning and skills and work activities**

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- 5.53 The provision of activities should be based on an up-to-date analysis of prisoner needs and local employment information. (3.13)
- 5.54 Allocation of prisoners to activities should be effective and take account of their sentence plans, and waiting lists should be prioritised to address prisoners' needs. (3.14)



- 5.55 Higher-level qualifications should be introduced in the vocational and production workshops to enable prisoners to progress. (3.21)
- 5.56 The prison should improve the uptake of accredited training for prisoners in work. (3.22)
- 5.57 There should be extension activities to meet the needs of more able learners. (3.28)
- 5.58 The planning of learning and progress reviews for vocational training courses should be improved. (3.29)
- 5.59 The prison should improve the extraction facilities in the building craft and joinery workshops and reduce the impact of workshop woodcutting machinery noise. (3.30)
- 5.60 Outcomes on courses in English for speakers of other languages (ESOL) should be improved. (3.37)
- 5.61 All learners should receive adequate help to develop their language skills. (3.38)
- 5.62 Library opening should be extended to weekdays. (3.42)
- 5.63 The library should carry out an annual needs analysis and survey to ensure that the service is suitable for the population. (3.43)

### **Physical education and healthy living**

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- 5.64 All prisoners should have access to at least two PE sessions a week. (3.52)
- 5.65 The PE shower and changing room floor should be repaired. (3.53)

### **Strategic management of resettlement**

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- 5.66 There should be a current reducing reoffending strategy and action plan, including the provision of offending behaviour work and release on temporary licence, based on a comprehensive needs analysis of the population. (4.7)

### **Offender management and planning**

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- 5.67 There should be formal systems for staff throughout the prison to exchange information about risk of harm and likelihood of reoffending with offender supervisors. (4.14)
- 5.68 All prisoners serving over 12 months should have an OASys (offender assessment system) assessment and plan, and those serving under 12 months and remand prisoners should have a formal custody and release plan. (4.15)
- 5.69 Prisoners should be released for home detention curfew at their earliest eligibility date. (4.16)
- 5.70 Provision for indeterminate sentenced prisoners should be improved and include forums and family days. (4.25)

## **Reintegration planning**

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- 5.71 All sentenced prisoners should have a comprehensive pre-release plan covering all resettlement needs. (4.29)
- 5.72 The number of homeless prisoners helped to find accommodation on release should be monitored. (4.32)
- 5.73 Prisoners' outcomes and destinations on release should be tracked to assess the effectiveness of prison interventions. (4.37)
- 5.74 Prisoners should be able to open bank accounts before their release and access a financial capability course. (4.41)
- 5.75 Prisoners, particularly those on remand, should have more visits each month. (4.48)
- 5.76 The visits waiting and reception areas should be improved as a matter of urgency, and visit sessions should start on time. (4.49)

## **Housekeeping points**

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### **Courts, escorts and transfers**

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- 5.77 Arriving escort vehicles should be brought into the establishment quickly. (1.4)

### **Early days in custody**

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- 5.78 Reception holding rooms should be clean, well maintained and contain information and reading material for prisoners. (1.16)
- 5.79 First night cells should be clean and properly prepared and equipped for new arrivals. (1.17)
- 5.80 Vulnerable prisoners should receive the same induction as mainstream prisoners. (1.18)

### **Security**

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- 5.81 Prisoners should only be strip searched on the basis of intelligence or specific suspicion. (1.56)

### **Incentives and earned privileges**

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- 5.82 Reviews of prisoners on the basic level should be meaningful, include participation by the prisoner and set targets in line with their pattern of behaviour. (1.61)

### **Discipline**

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- 5.83 Segregation review documentation and care/reintegration plans should be completed and include meaningful targets. (1.77)

- 5.84 Segregation unit staff entries in daily history sheets and case notes should indicate constructive engagement with prisoners. (1.78)

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### **Substance misuse**

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- 5.85 The drug strategy document should be updated, cover alcohol services, and include detailed development targets and performance measures. (1.89)

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### **Residential units**

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- 5.86 Telephones should be fitted with privacy hoods. (2.14)

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### **Staff-prisoner relationships**

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- 5.87 Minutes of the prisoner consultation meeting should address all issues raised in the previous meeting. (2.21)

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### **Equality and diversity**

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- 5.88 The role of prisoner diversity representatives should be clarified and those in this role should be trained. (2.31)

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### **Complaints**

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- 5.89 A non-uniformed member of staff should empty the complaints boxes. (2.48)

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### **Health services**

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- 5.90 All clinical areas should be kept clean. (2.68)
- 5.91 Health care interviews for new arrivals should take place in privacy. (2.74)
- 5.92 A panic button should be installed in the reception health care room. (2.75)
- 5.93 There should be better advertisement and explanation for prisoners on how to access pharmacy advice. (2.93)
- 5.94 The use of patients' own medication should be formally recorded on prescription charts to ensure suitability and dose checks, and avoid excess stock. (2.94)
- 5.95 Nurses should check that the pharmacy in-possession bags contain the correct medication. (2.95)
- 5.96 There should be up-to-date standard operating procedures and confirmation that staff have read them. (2.96)
- 5.97 Patient group directions should be expanded to include immunisations. (2.97)

- 5.98 All medication, both in boxes and single dose bags, should be correctly labelled with batch number and expiry details and retained in the supply boxes. (2.98)
- 5.99 The controlled drug register in the pharmacy should comply with regulations. (2.99)
- 5.100 Dental triage should be audited to ensure it is used appropriately. (2.107)

### **Catering**

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- 5.101 Separate utensils should be used to serve halal food. (2.121)

### **Learning and skills and work activities**

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- 5.102 The library should organise events to promote literacy to prisoners and encourage non-users to access the facilities. (3.44)
- 5.103 Both libraries should provide a list of the available legal reference books and Prison Service Orders. (3.45)

### **Physical education and healthy living**

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- 5.104 All prisoners should receive clean gym kit routinely. (3.54)

### **Offender management and planning**

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- 5.105 Contact with offender supervisors should be meaningful and regular. (4.17)
- 5.106 Offender supervisors should be involved in the categorisation of prisoners for transfer. (4.22)

### **Reintegration planning**

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- 5.107 Information exchange between Lincolnshire Action Trust and the offender management unit should be improved. (4.30)
- 5.108 More prisoners should be able to attend family days. (4.50)

## Appendix I: Inspection team

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Nick Hardwick	Chief Inspector
Alison Perry	Team leader
Sandra Fieldhouse	Inspector
Kevin Parkinson	Inspector
Kellie Reeve	Inspector
Gordon Riach	Inspector
Olayinka Macauley	Research officer
Alice Reid	Research officer
Jessica Broughton	Research trainee

### **Specialist inspectors**

Sigrid Engelen	Substance misuse inspector
Nicola Rabjohns	Health services inspector
Helen Jackson	Pharmacist
John Grimmer	Ofsted team leader
Nigel Bragg	Ofsted inspector
Sheila Willis	Ofsted inspector
Helen Davies	Offender management inspector
Yvonne McGuckain	Offender management inspector
Joy Neary	Offender management inspector

## Appendix II: Prison population profile

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

Status	18-20 yr olds	21 and over	%
Sentenced	5	422	65.69
Recall	1	83	12.92
Convicted unsentenced	4	56	9.23
Remand	4	2	0.92
Civil prisoners	0	1	0.15
Detainees	0	72	11.07
<b>Total</b>	<b>14</b>	<b>636</b>	<b>100</b>

Sentence	18-20 yr olds	21 and over	%
Unsentenced	9	128	20.12
Less than 6 months	0	49	7.5
6 months to less than 12 months	0	46	7
12 months to less than 2 years	3	88	14
2 years to less than 4 years	0	122	19.18
4 years to less than 10 years	2	121	19.02
10 years and over (not life)	0	47	7.23
ISPP	0	20	3.14
Life	0	15	2.3
<b>Total</b>	<b>14</b>	<b>511</b>	<b>100</b>

Age	Number of prisoners	%
Under 21 years: <i>minimum age=18</i>	14	2.15
21 years to 29 years	265	40.76
30 years to 39 years	191	29.38
40 years to 49 years	117	18
50 years to 59 years	40	6.15
60 years to 69 years	16	2.46
70 plus years: <i>maximum age=80</i>	7	1.1
<b>Total</b>	<b>636</b>	<b>100</b>

Nationality	18-20 yr olds	21 and over	%
British	14	559	88.15
Foreign nationals	0	73	11.2
<b>Total</b>	<b>14</b>	<b>636</b>	<b>100</b>

Security category	18-20 yr olds	21 and over	%
Uncategorised unsentenced	8	81	13.69
Category B	0	50	7.7
Category C	0	392	60.3
Category D	0	26	4
Other	6	87	14.3
<b>Total</b>	<b>14</b>	<b>636</b>	<b>100</b>

Ethnicity	18-20 yr olds	21 and over	%
<i>White</i>			
British	12	474	74.8
Irish	0	6	0.9
Other white	0	38	5.8
	12	518	81.5
<i>Mixed</i>			
White and black Caribbean	0	19	2.9
White and Asian	0	1	0.2
Other mixed	0	3	0.5
	0	23	3.5
<i>Asian or Asian British</i>			
Indian	0	9	1.4
Pakistani	0	7	1.1
Other Asian	0	11	1.7
	0	29	4.5
<i>Black or black British</i>			
African	0	10	1.5
Other black	0	6	
Black British	2	27	4.5
	2	43	6.9
<i>Chinese or other ethnic group</i>			
Other ethnic group	0	7	1.1
<i>Not stated</i>		14	2.2
<b>Total</b>	<b>14</b>	<b>636</b>	<b>100</b>

Religion	18-20 yr olds	21 and over	%
Baptist		2	0.3
Church of England	2	138	21.5
Roman Catholic	1	82	12.8
Other Christian denominations	2	62	9.8
Muslim	0	46	7.1
Sikh	0	2	0.3
Buddhist	0	20	3.1
Jewish	0	1	0.2
Other	0	11	1.7
No religion	7	271	42.8
<b>Total</b>	<b>14</b>	<b>636</b>	<b>100</b>

#### Sentenced prisoners only

Length of stay	18-20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	1	0.15	117	18
1 month to 3 months	3	0.46	177	27.2
3 months to 6 months	0	0	100	15.38
6 months to 1 year	0	0	72	11
1 year to 2 years	1	0.15	35	5.38
2 years to 4 years	0	0	7	1
<b>Total</b>	<b>5</b>	<b>0.76</b>	<b>508</b>	<b>78</b>

Unsentenced prisoners only

Length of stay	18-20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	5	0.76	32	4.92
1 month to 3 months	3	0.46	33	5.07
3 months to 6 months	1	0.15	32	4.92
6 months to 1 year	0	0	23	3.53
1 year to 2 years	0	0	6	0.92
2 years to 4 years	0	0	2	0.3
<b>Total</b>	<b>9</b>	<b>1.53</b>	<b>128</b>	<b>19.69</b>

Main offence	18-20 yr olds	21 and over	%
Violence against the person	6	138	22.1
Sexual offences	2	113	18
Burglary	2	104	16.19
Robbery	0	65	10
Theft and handling	2	51	8.33
Fraud and forgery	0	2	0.31
Drugs offences	0	70	11
Other offences	2	83	12.42
Civil offences	0	1	0.15
Offence not recorded/holding warrant	0	9	1.41
<b>Total</b>	<b>14</b>	<b>636</b>	<b>100</b>



# Appendix III: Summary of prisoner questionnaires and interviews

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## Prisoner survey methodology

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A voluntary, confidential and anonymous survey of a representative proportion of the prisoner population was carried out for this inspection. The results of this survey formed part of the evidence base for the inspection.

### Choosing the sample size

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The baseline for the sample size was calculated using a robust statistical formula provided by a government department statistician. Essentially, the formula indicates the sample size that is required and the extent to which the findings from a sample of that size reflect the experiences of the whole population.

At the time of the survey on 13-14 August 2012, the prisoner population at HMP Lincoln was 643. The sample size was 183. Overall, this represented 29% of the prisoner population.

### Selecting the sample

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Respondents were randomly selected from a P-Nomis prisoner population printout using a stratified systematic sampling method. This basically means every second person is selected from a P-Nomis list, which is printed in location order, if 50% of the population is to be sampled.

Completion of the questionnaire was voluntary. Refusals were noted and no attempts were made to replace them. Seven respondents refused to complete a questionnaire.

Interviews were carried out with any respondents with literacy difficulties. No respondents required an interview.

## Methodology

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Every attempt was made to distribute the questionnaires to each respondent on an individual basis. This gave researchers an opportunity to explain the independence of the Inspectorate and the purpose of the questionnaire, as well as to answer questions.

All completed questionnaires were confidential – only members of the Inspectorate saw them. In order to ensure confidentiality, respondents were asked to do one of the following:

- have their questionnaire ready to hand back to a member of the research team at a specified time;
- to seal the questionnaire in the envelope provided and hand it to a member of staff, if they were agreeable; or
- to seal the questionnaire in the envelope provided and leave it in their room for collection.

Respondents were not asked to put their names on their questionnaire.

## Response rates

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In total, 147 respondents completed and returned their questionnaires. This represented 23% of the prison population. The response rate was 80%. In addition to the seven respondents who refused to complete a questionnaire, 18 questionnaires were not returned and 11 were returned blank.

## Comparisons

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The following details the results from the survey. Data from each establishment has been weighted, in order to mimic a consistent percentage sampled in each establishment.

Some questions have been filtered according to the response to a previous question. Filtered questions are clearly indented and preceded by an explanation as to which respondents are included in the filtered questions. Otherwise, percentages provided refer to the entire sample. All missing responses are excluded from the analysis.

The following analyses have been conducted:

- The current survey responses in 2012 against comparator figures for all prisoners surveyed in local prisons. This comparator is based on all responses from prisoner surveys carried out in 34 local prisons since April 2007.
- The current survey responses in 2012 against the responses of prisoners surveyed at HMP Lincoln in 2007.
- A comparison within the 2012 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2012 survey between those who are British nationals and foreign nationals.
- A comparison within the 2012 survey between the responses of prisoners who consider themselves to have a disability and those who do not.
- A comparison within the 2012 survey between those who are aged 50 and over and those under 50.
- A comparison within the 2012 survey between the vulnerable prisoner wing (E wing) and the rest of the establishment.

In all the above documents, statistical significance is used to indicate whether there is a real difference between the figures, i.e. the difference is not due to chance alone. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading and where there is no significant difference, there is no shading. Orange shading has been used to show a significant difference in prisoners' background details.

It should be noted that, in order for statistical comparisons to be made between the most recent survey data and those of the previous survey, both sets of data have been coded in the same way. This may result in changes to percentages from previously published surveys. However, all percentages are true of the populations they were taken from, and the statistical significance is correct.

## Summary

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In addition, a summary of the survey results is attached. This shows a breakdown of responses for each question as well as examples of comments made by prisoners. Percentages have been rounded and therefore may not add up to 100%.

No questions have been filtered within the summary so all percentages refer to responses from the entire sample. The percentages to certain responses within the summary, for example 'Not sentenced' options across questions, may differ slightly. This is due to different response rates across questions, meaning that the percentages have been calculated out of different totals (all missing data are excluded). The actual numbers will match up as the data are cleaned to be consistent.

Percentages shown in the summary may differ by 1% or 2% from those shown in the comparison data as the comparator data have been weighted for comparison purposes.

# Survey summary

## Section 1: About you

<b>Q1.2</b>	<b>How old are you?</b>		
	<i>Under 21</i> .....	3	(2%)
	<i>21 - 29</i> .....	62	(43%)
	<i>30 - 39</i> .....	36	(25%)
	<i>40 - 49</i> .....	23	(16%)
	<i>50 - 59</i> .....	12	(8%)
	<i>60 - 69</i> .....	5	(3%)
	<i>70 and over</i> .....	4	(3%)
<b>Q1.3</b>	<b>Are you sentenced?</b>		
	<i>Yes</i> .....	95	(66%)
	<i>Yes - on recall</i> .....	25	(17%)
	<i>No - awaiting trial</i> .....	12	(8%)
	<i>No - awaiting sentence</i> .....	11	(8%)
	<i>No - awaiting deportation</i> .....	1	(1%)
<b>Q1.4</b>	<b>How long is your sentence?</b>		
	<b>Not sentenced</b> .....	24	(17%)
	<i>Less than 6 months</i> .....	14	(10%)
	<i>6 months to less than 1 year</i> .....	15	(11%)
	<i>1 year to less than 2 years</i> .....	15	(11%)
	<i>2 years to less than 4 years</i> .....	28	(20%)
	<i>4 years to less than 10 years</i> .....	27	(19%)
	<i>10 years or more</i> .....	12	(8%)
	<i>IPP (indeterminate sentence for public protection)</i> .....	2	(1%)
	<i>Life</i> .....	5	(4%)
<b>Q1.5</b>	<b>Are you a foreign national (i.e. do not have UK citizenship)?</b>		
	<i>Yes</i> .....	19	(13%)
	<i>No</i> .....	124	(87%)
<b>Q1.6</b>	<b>Do you understand spoken English?</b>		
	<i>Yes</i> .....	143	(99%)
	<i>No</i> .....	2	(1%)
<b>Q1.7</b>	<b>Do you understand written English?</b>		
	<i>Yes</i> .....	141	(97%)
	<i>No</i> .....	4	(3%)
<b>Q1.8</b>	<b>What is your ethnic origin?</b>		
	<i>White - British</i> .....	109	
	<i>(English/Welsh/</i> .....	(76%)	
	<i>Scottish/Northern Irish)</i> .....		
	<i>White - Irish</i> .....	4	(3%)
	<i>White - other</i> .....	8	(6%)
	<i>Asian or Asian British -</i> .....	0	
	<i>Chinese</i> .....		(0%)
	<i>Asian or Asian British -</i> .....	4	
	<i>other</i> .....		(3%)
	<i>Mixed race - white and</i> .....	2	
	<i>black Caribbean</i> .....		(1%)

<i>Black or black British - Caribbean</i> .....	4 (3%)	<i>Mixed race - white and black African</i> .....	2 (1%)
<i>Black or black British - African</i> .....	2 (1%)	<i>Mixed race - white and Asian</i> .....	2 (1%)
<i>Black or black British - other</i> ..	0 (0%)	<i>Mixed race - other</i> .....	1 (1%)
<i>Asian or Asian British - Indian</i> .....	2 (1%)	<i>Arab</i> .....	0 (0%)
<i>Asian or Asian British - Pakistani</i> .....	1 (1%)	<i>Other ethnic group</i> .....	3 (2%)
<i>Asian or Asian British - Bangladeshi</i> .....	0 (0%)		

**Q1.9 Do you consider yourself to be Gypsy/Romany/Traveller?**  
 Yes..... 7 (5%)  
 No ..... 129 (95%)

**Q1.10 What is your religion?**  
*None*..... 48 (34%)      *Hindu*..... 1 (1%)  
*Church of England* ..... 45 (32%)      *Jewish*..... 0 (0%)  
*Catholic*..... 16 (11%)      *Muslim*..... 12 (9%)  
*Protestant*..... 2 (1%)      *Sikh*..... 0 (0%)  
*Other Christian denomination* 13 (9%)      *Other* ..... 1 (1%)  
*Buddhist*..... 3 (2%)

**Q1.11 How would you describe your sexual orientation?**  
*Heterosexual/straight*..... 136 (96%)  
*Homosexual/gay*..... 2 (1%)  
*Bisexual* ..... 4 (3%)

**Q1.12 Do you consider yourself to have a disability (i.e. do you need help with any long term physical, mental or learning needs)?**  
 Yes..... 25 (17%)  
 No ..... 120 (83%)

**Q1.13 Are you a veteran (ex-armed services)?**  
 Yes..... 11 (8%)  
 No ..... 130 (92%)

**Q1.14 Is this your first time in prison?**  
 Yes..... 42 (29%)  
 No ..... 102 (71%)

**Q1.15 Do you have children under the age of 18?**  
 Yes..... 82 (57%)  
 No ..... 62 (43%)

**Section 2: Courts, transfers and escorts**

**Q2.1 On your most recent journey here, how long did you spend in the van?**  
*Less than 2 hours*..... 97 (66%)

	2 hours or longer .....	41 (28%)
	Don't remember .....	8 (5%)
<b>Q2.2</b>	<b>On your most recent journey here, were you offered anything to eat or drink?</b>	
	<i>My journey was less than two hours</i> .....	97 (66%)
	Yes.....	27 (18%)
	No .....	20 (14%)
	Don't remember .....	2 (1%)
<b>Q2.3</b>	<b>On your most recent journey here, were you offered a toilet break?</b>	
	<i>My journey was less than two hours</i> .....	97 (67%)
	Yes.....	5 (3%)
	No .....	40 (28%)
	Don't remember .....	2 (1%)
<b>Q2.4</b>	<b>On your most recent journey here, was the van clean?</b>	
	Yes.....	103 (73%)
	No .....	32 (23%)
	Don't remember .....	7 (5%)
<b>Q2.5</b>	<b>On your most recent journey here, did you feel safe?</b>	
	Yes.....	118 (82%)
	No .....	25 (17%)
	Don't remember .....	1 (1%)
<b>Q2.6</b>	<b>On your most recent journey here, how were you treated by the escort staff?</b>	
	Very well .....	55 (38%)
	Well.....	62 (42%)
	Neither.....	25 (17%)
	Badly .....	4 (3%)
	Very badly .....	0 (0%)
	Don't remember .....	0 (0%)
<b>Q2.7</b>	<b>Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)</b>	
	Yes, someone told me.....	96 (66%)
	Yes, I received written information .....	17 (12%)
	No, I was not told anything .....	32 (22%)
	Don't remember .....	3 (2%)
<b>Q2.8</b>	<b>When you first arrived here did your property arrive at the same time as you?</b>	
	Yes.....	118 (83%)
	No .....	22 (15%)
	Don't remember .....	3 (2%)
<b>Section 3: Reception, first night and induction</b>		
<b>Q3.1</b>	<b>How long were you in reception?</b>	
	Less than 2 hours.....	52 (37%)
	2 hours or longer .....	82 (58%)
	Don't remember .....	7 (5%)

<b>Q3.2</b>	<b>When you were searched, was this carried out in a respectful way?</b>	
	Yes.....	122 (87%)
	No .....	16 (11%)
	Don't remember.....	2 (1%)
<b>Q3.3</b>	<b>Overall, how were you treated in reception?</b>	
	Very well.....	34 (24%)
	Well.....	65 (46%)
	Neither.....	23 (16%)
	Badly .....	15 (11%)
	Very badly.....	2 (1%)
	Don't remember.....	2 (1%)
<b>Q3.4</b>	<b>Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)</b>	
	Loss of property..... 14 (10%)	Physical health ..... 21 (15%)
	Housing problems ..... 24 (17%)	Mental health..... 20 (14%)
	Contacting employers..... 5 (4%)	Needing protection from other prisoners... 10 (7%)
	Contacting family..... 53 (38%)	Getting phone numbers..... 37 (27%)
	Child care..... 2 (1%)	Other..... 12 (9%)
	Money worries..... 23 (17%)	<b>Did not have any problems..... 25 (18%)</b>
	Feeling depressed or suicidal ..... 19 (14%)	
<b>Q3.5</b>	<b>Did you receive any help/support from staff in dealing with these problems when you first arrived here?</b>	
	Yes.....	52 (39%)
	No .....	57 (43%)
	<b>Did not have any problems.....</b>	<b>25 (19%)</b>
<b>Q3.6</b>	<b>When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)</b>	
	Tobacco.....	115 (82%)
	A shower.....	22 (16%)
	A free telephone call.....	11 (8%)
	Something to eat.....	83 (59%)
	PIN phone credit.....	34 (24%)
	Toiletries/basic items.....	69 (49%)
	<b>Did not receive anything.....</b>	<b>10 (7%)</b>
<b>Q3.7</b>	<b>When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)</b>	
	Chaplain.....	69 (51%)
	Someone from health services.....	103 (77%)
	A Listener/Samaritans.....	45 (34%)
	Prison shop/canteen.....	54 (40%)
	<b>Did not have access to any of these.....</b>	<b>16 (12%)</b>

<b>Q3.8</b>	<b>When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)</b>	
	<i>What was going to happen to you</i> .....	55 (40%)
	<i>What support was available for people feeling depressed or suicidal</i> .....	58 (42%)
	<i>How to make routine requests (applications)</i> .....	59 (42%)
	<i>Your entitlement to visits</i> .....	52 (37%)
	<i>Health services</i> .....	79 (57%)
	<i>Chaplaincy</i> .....	61 (44%)
	<b>Not offered any information</b> .....	45 (32%)
<b>Q3.9</b>	<b>Did you feel safe on your first night here?</b>	
	<i>Yes</i> .....	103 (74%)
	<i>No</i> .....	31 (22%)
	<i>Don't remember</i> .....	6 (4%)
<b>Q3.10</b>	<b>How soon after you arrived here did you go on an induction course?</b>	
	<b>Have not been on an induction course</b> .....	12 (8%)
	<i>Within the first week</i> .....	124 (86%)
	<i>More than a week</i> .....	6 (4%)
	<i>Don't remember</i> .....	2 (1%)
<b>Q3.11</b>	<b>Did the induction course cover everything you needed to know about the prison?</b>	
	<b>Have not been on an induction course</b> .....	12 (8%)
	<i>Yes</i> .....	76 (53%)
	<i>No</i> .....	47 (33%)
	<i>Don't remember</i> .....	8 (6%)
<b>Q3.12</b>	<b>How soon after you arrived here did you receive an education ('skills for life') assessment?</b>	
	<b>Did not receive an assessment</b> .....	33 (24%)
	<i>Within the first week</i> .....	51 (36%)
	<i>More than a week</i> .....	43 (31%)
	<i>Don't remember</i> .....	13 (9%)

#### Section 4: Legal rights and respectful custody

<b>Q4.1</b>	<b>How easy is it to:</b>						
		<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>	<i>N/A</i>
	<i>Communicate with your solicitor or legal representative?</i>	15 (11%)	46 (34%)	26 (19%)	22 (16%)	7 (5%)	20 (15%)
	<i>Attend legal visits?</i>	15 (13%)	52 (43%)	18 (15%)	6 (5%)	4 (3%)	25 (21%)
	<i>Get bail information?</i>	5 (4%)	11 (10%)	23 (20%)	10 (9%)	12 (10%)	54 (47%)
<b>Q4.2</b>	<b>Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?</b>						
	<b>Not had any letters</b> .....						21 (15%)
	<i>Yes</i> .....						56 (40%)
	<i>No</i> .....						62 (45%)



<b>Q4.3</b>	<b>Can you get legal books in the library?</b>			
	Yes.....	61	(45%)	
	No .....	6	(4%)	
	Don't know.....	70	(51%)	
<b>Q4.4</b>	<b>Please answer the following questions about the wing/unit you are currently living on:</b>			
		Yes	No	Don't know
	<i>Do you normally have enough clean, suitable clothes for the week?</i>	80 (56%)	61 (43%)	1 (1%)
	<i>Are you normally able to have a shower every day?</i>	135 (95%)	7 (5%)	0 (0%)
	<i>Do you normally receive clean sheets every week?</i>	118 (85%)	18 (13%)	3 (2%)
	<i>Do you normally get cell cleaning materials every week?</i>	95 (67%)	45 (32%)	2 (1%)
	<i>Is your cell call bell normally answered within five minutes?</i>	56 (40%)	70 (50%)	15 (11%)
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	88 (65%)	46 (34%)	2 (1%)
	<i>If you need to, can you normally get your stored property?</i>	43 (31%)	55 (39%)	42 (30%)
<b>Q4.5</b>	<b>What is the food like here?</b>			
	Very good .....	10	(7%)	
	Good.....	51	(35%)	
	Neither.....	37	(26%)	
	Bad .....	36	(25%)	
	Very bad.....	11	(8%)	
<b>Q4.6</b>	<b>Does the shop/canteen sell a wide enough range of goods to meet your needs?</b>			
	<b>Have not bought anything yet/don't know .....</b>	6	(4%)	
	Yes.....	61	(42%)	
	No .....	77	(53%)	
<b>Q4.7</b>	<b>Can you speak to a Listener at any time if you want to?</b>			
	Yes.....	91	(63%)	
	No .....	10	(7%)	
	Don't know.....	43	(30%)	
<b>Q4.8</b>	<b>Are your religious beliefs respected?</b>			
	Yes.....	66	(47%)	
	No .....	18	(13%)	
	Don't know/N/A .....	55	(40%)	
<b>Q4.9</b>	<b>Are you able to speak to a chaplain of your faith in private if you want to?</b>			
	Yes.....	82	(57%)	
	No .....	10	(7%)	
	Don't know/N/A .....	52	(36%)	

<b>Q4.10</b>	<b>How easy or difficult is it for you to attend religious services?</b>	
	<i>I don't want to attend</i> .....	38 (27%)
	<i>Very easy</i> .....	25 (18%)
	<i>Easy</i> .....	37 (26%)
	<i>Neither</i> .....	6 (4%)
	<i>Difficult</i> .....	3 (2%)
	<i>Very difficult</i> .....	7 (5%)
	<i>Don't know</i> .....	24 (17%)

**Section 5: Applications and complaints**

<b>Q5.1</b>	<b>Is it easy to make an application?</b>	
	<i>Yes</i> .....	121 (86%)
	<i>No</i> .....	17 (12%)
	<i>Don't know</i> .....	2 (1%)

<b>Q5.2</b>	<b>Please answer the following questions about applications:</b>			
	<i>(If you have not made an application please tick the 'not made one' option.)</i>			
		<b>Not made one</b>	<b>Yes</b>	<b>No</b>
	Are applications dealt with fairly?	14 (10%)	92 (68%)	30 (22%)
	Are applications dealt with quickly (within seven days)?	14 (12%)	69 (59%)	34 (29%)

<b>Q5.3</b>	<b>Is it easy to make a complaint?</b>	
	<i>Yes</i> .....	83 (64%)
	<i>No</i> .....	10 (8%)
	<i>Don't know</i> .....	37 (28%)

<b>Q5.4</b>	<b>Please answer the following questions about complaints:</b>			
	<i>(If you have not made a complaint please tick the 'not made one' option.)</i>			
		<b>Not made one</b>	<b>Yes</b>	<b>No</b>
	Are complaints dealt with fairly?	72 (53%)	33 (24%)	32 (23%)
	Are complaints dealt with quickly (within seven days)?	72 (55%)	40 (31%)	19 (15%)

<b>Q5.5</b>	<b>Have you ever been prevented from making a complaint when you wanted to?</b>	
	<i>Yes</i> .....	13 (10%)
	<i>No</i> .....	111 (90%)

<b>Q5.6</b>	<b>How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?</b>	
	<i>Don't know who they are</i> .....	56 (40%)
	<i>Very easy</i> .....	10 (7%)
	<i>Easy</i> .....	31 (22%)
	<i>Neither</i> .....	27 (19%)
	<i>Difficult</i> .....	8 (6%)
	<i>Very difficult</i> .....	8 (6%)

## Section 6: Incentive and earned privileges scheme

- Q6.1** Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels.)
- |  |          |
|--|----------|
| <i>Don't know what the IEP scheme is</i> ..... | 15 (11%) |
| Yes .....                                      | 79 (56%) |
| No .....                                       | 26 (18%) |
| <i>Don't know</i> .....                        | 22 (15%) |
- Q6.2** Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels.)
- |  |          |
|--|----------|
| <i>Don't know what the IEP scheme is</i> ..... | 15 (11%) |
| Yes.....                                       | 63 (47%) |
| No .....                                       | 37 (27%) |
| <i>Don't know</i> .....                        | 20 (15%) |
- Q6.3** In the last six months have any members of staff physically restrained you (C&R)?
- |          |           |
|----------|-----------|
| Yes..... | 10 (7%)   |
| No ..... | 129 (93%) |
- Q6.4** If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?
- |  |           |
|--|-----------|
| <i>I have not been to segregation in the last 6 months</i> ..... | 111 (79%) |
| Very well .....  | 6 (4%)    |
| Well.....  | 7 (5%)    |
| Neither.....   | 13 (9%)   |
| Badly .....  | 2 (1%)    |
| Very badly.....  | 1 (1%)    |

## Section 7: Relationships with staff

- Q7.1** Do most staff treat you with respect?
- |          |           |
|----------|-----------|
| Yes..... | 120 (84%) |
| No ..... | 23 (16%)  |
- Q7.2** Is there a member of staff you can turn to for help if you have a problem?
- |          |           |
|----------|-----------|
| Yes..... | 115 (82%) |
| No ..... | 25 (18%)  |
- Q7.3** Has a member of staff checked on you personally in the last week to see how you are getting on?
- |          |          |
|----------|----------|
| Yes..... | 54 (38%) |
| No ..... | 88 (62%) |
- Q7.4** How often do staff normally speak to you during association?
- |                                       |          |
|---------------------------------------|----------|
| <i>Do not go on association</i> ..... | 4 (3%)   |
| Never.....                            | 22 (15%) |
| Rarely.....                           | 39 (27%) |
| Some of the time .....                | 41 (28%) |
| Most of the time .....                | 29 (20%) |
| All of the time .....                 | 9 (6%)   |

<b>Q7.5</b>	<b>When did you first meet your personal (named) officer?</b>	
	<i>I have not met him/her</i> .....	57 (40%)
	<i>In the first week</i> .....	33 (23%)
	<i>More than a week</i> .....	41 (28%)
	<i>Don't remember</i> .....	13 (9%)
<b>Q7.6</b>	<b>How helpful is your personal (named) officer?</b>	
	<i>Do not have a personal officer/I have not met him/her</i> ...	57 (41%)
	<i>Very helpful</i> .....	22 (16%)
	<i>Helpful</i> .....	29 (21%)
	<i>Neither</i> .....	22 (16%)
	<i>Not very helpful</i> .....	5 (4%)
	<i>Not at all helpful</i> .....	4 (3%)

## Section 8: Safety

<b>Q8.1</b>	<b>Have you ever felt unsafe here?</b>	
	Yes.....	52 (39%)
	No .....	82 (61%)
<b>Q8.2</b>	<b>Do you feel unsafe now?</b>	
	Yes.....	31 (24%)
	No .....	98 (76%)
<b>Q8.3</b>	<b>In which areas have you felt unsafe? (Please tick all that apply to you.)</b>	
	<i>Never felt unsafe</i> .....	82 (63%)
	<i>Everywhere</i> .....	9 (7%)
	<i>Segregation unit</i> .....	1 (1%)
	<i>Association areas</i> .....	10 (8%)
	<i>Reception area</i> .....	4 (3%)
	<i>At the gym</i> .....	3 (2%)
	<i>In an exercise yard</i> .....	6 (5%)
	<i>At work</i> .....	3 (2%)
	<i>During movement</i> .....	15 (12%)
	<i>At education</i> .....	0 (0%)
	<i>At mealtimes</i> .....	3 (2%)
	<i>At health services</i> ...	6 (5%)
	<i>Visits area</i> .....	12 (9%)
	<i>In wing showers</i> .....	10 (8%)
	<i>In gym showers</i> .....	4 (3%)
	<i>In</i> .....	2 (2%)
	<i>corridors/stairwells</i> ...	
	<i>On your</i> .....	6 (5%)
	<i>landing/wing</i> .....	
	<i>In your cell</i> .....	9 (7%)
	<i>At religious services</i>	1 (1%)
<b>Q8.4</b>	<b>Have you been victimised by other prisoners here?</b>	
	Yes .....	43 (30%)
	No .....	98 (70%)
<b>Q8.5</b>	<b>If yes, what did the incident(s) involve/what was it about? (Please tick all that apply to you.)</b>	
	<i>Insulting remarks (about you or your family or friends)</i> .....	20 (14%)
	<i>Physical abuse (being hit, kicked or assaulted)</i> .....	11 (8%)
	<i>Sexual abuse</i> .....	3 (2%)
	<i>Feeling threatened or intimidated</i> .....	19 (14%)
	<i>Having your canteen/property taken</i> .....	6 (4%)
	<i>Medication</i> .....	4 (3%)
	<i>Debt</i> .....	3 (2%)
	<i>Drugs</i> .....	3 (2%)
	<i>Your race or ethnic origin</i> .....	5 (4%)
	<i>Your religion/religious beliefs</i> .....	3 (2%)

Your nationality.....	5 (4%)
You are from a different part of the country than others .....	8 (6%)
You are from a traveller community .....	0 (0%)
Your sexual orientation .....	5 (4%)
Your age .....	4 (3%)
You have a disability.....	7 (5%)
You were new here.....	9 (6%)
Your offence/crime.....	14 (10%)
Gang related issues.....	8 (6%)

**Q8.6 Have you been victimised by staff here?**

Yes .....	37 (26%)
No .....	104 (74%)

**Q8.7 If yes, what did the incident(s) involve/what was it about? (Please tick all that apply to you.)**

Insulting remarks (about you or your family or friends).....	9 (6%)
Physical abuse (being hit, kicked or assaulted).....	5 (4%)
Sexual abuse .....	2 (1%)
Feeling threatened or intimidated .....	12 (9%)
Medication .....	1 (1%)
Debt.....	2 (1%)
Drugs.....	2 (1%)
Your race or ethnic origin.....	4 (3%)
Your religion/religious beliefs.....	6 (4%)
Your nationality.....	4 (3%)
You are from a different part of the country than others .....	1 (1%)
You are from a traveller community .....	1 (1%)
Your sexual orientation.....	1 (1%)
Your age .....	3 (2%)
You have a disability.....	1 (1%)
You were new here.....	5 (4%)
Your offence/crime.....	9 (6%)
Gang related issues.....	4 (3%)

**Q8.8 If you have been victimised by prisoners or staff, did you report it?**

<b>Not been victimised</b> .....	88 (68%)
Yes.....	17 (13%)
No .....	25 (19%)

**Section 9: Health services**

**Q9.1 How easy or difficult is it to see the following people?**

	<b>Don't know</b>	Very easy	Easy	Neither	Difficult	Very difficult
The doctor	14 (10%)	9 (7%)	27 (20%)	17 (13%)	47 (35%)	22 (16%)
The nurse	11 (9%)	21 (17%)	58 (46%)	16 (13%)	18 (14%)	3 (2%)
The dentist	26 (20%)	1 (1%)	16 (12%)	7 (5%)	39 (30%)	42 (32%)

**Q9.2 What do you think of the quality of the health service from the following people?**

	<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
The doctor	24 (18%)	18 (13%)	39 (29%)	24 (18%)	24 (18%)	7 (5%)
The nurse	12 (9%)	27 (21%)	60 (46%)	18 (14%)	11 (8%)	2 (2%)
The dentist	54 (41%)	11 (8%)	23 (18%)	22 (17%)	10 (8%)	11 (8%)

**Q9.3 What do you think of the overall quality of the health services here?**

<i>Not been</i> .....	6 (5%)
<i>Very good</i> .....	10 (8%)
<i>Good</i> .....	46 (35%)
<i>Neither</i> .....	41 (31%)
<i>Bad</i> .....	23 (17%)
<i>Very bad</i> .....	7 (5%)

**Q9.4 Are you currently taking medication?**

Yes.....	65 (48%)
No .....	70 (52%)

**Q9.5 If you are taking medication, are you allowed to keep some/all of it in your own cell?**

<i>Not taking medication</i> .....	70 (51%)
<i>Yes, all my meds</i> .....	28 (20%)
<i>Yes, some of my meds</i> .....	16 (12%)
No .....	23 (17%)

**Q9.6 Do you have any emotional or mental health problems?**

Yes.....	43 (31%)
No .....	94 (69%)

**Q9.7 Are you being helped/supported by anyone in this prison (e.g. a psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff)?**

<i>Do not have any emotional or mental health problems</i> ..	94 (71%)
Yes.....	21 (16%)
No .....	18 (14%)

## Section 10: Drugs and alcohol

**Q10.1 Did you have a problem with drugs when you came into this prison?**

Yes.....	37 (27%)
No .....	98 (73%)

**Q10.2 Did you have a problem with alcohol when you came into this prison?**

Yes.....	33 (24%)
No .....	102 (76%)

**Q10.3 Is it easy or difficult to get illegal drugs in this prison?**

<i>Very easy</i> .....	17 (13%)
<i>Easy</i> .....	29 (21%)

<i>Neither</i> .....	12 (9%)
<i>Difficult</i> .....	4 (3%)
<i>Very difficult</i> .....	3 (2%)
<i>Don't know</i> .....	70 (52%)

**Q10.4 Is it easy or difficult to get alcohol in this prison?**

<i>Very easy</i> .....	10 (8%)
<i>Easy</i> .....	18 (14%)
<i>Neither</i> .....	15 (11%)
<i>Difficult</i> .....	10 (8%)
<i>Very difficult</i> .....	5 (4%)
<i>Don't know</i> .....	75 (56%)

**Q10.5 Have you developed a problem with illegal drugs since you have been in this prison?**

<i>Yes</i> .....	6 (4%)
<i>No</i> .....	130 (96%)

**Q10.6 Have you developed a problem with diverted medication since you have been in this prison?**

<i>Yes</i> .....	6 (5%)
<i>No</i> .....	126 (95%)

**Q10.7 Have you received any support or help (e.g. substance misuse teams) for your drug problem while in this prison?**

<i>Did not/do not have a drug problem</i> .....	91 (72%)
<i>Yes</i> .....	29 (23%)
<i>No</i> .....	7 (6%)

**Q10.8 Have you received any support or help (e.g. substance misuse teams) for your alcohol problem while in this prison?**

<i>Did not/do not have an alcohol problem</i> .....	102 (78%)
<i>Yes</i> .....	18 (14%)
<i>No</i> .....	11 (8%)

**Q10.9 Was the support or help you received while in this prison helpful?**

<i>Did not have a problem/did not receive help</i> .....	89 (69%)
<i>Yes</i> .....	36 (28%)
<i>No</i> .....	4 (3%)

**Section 11: Activities**

**Q11.1 How easy or difficult is it to get into the following activities, in this prison?**

	<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
Prison job	20 (15%)	23 (17%)	42 (31%)	30 (22%)	20 (15%)	2 (1%)
Vocational or skills training	40 (31%)	8 (6%)	34 (26%)	24 (19%)	16 (12%)	7 (5%)
Education (including basic skills)	32 (25%)	19 (15%)	39 (30%)	21 (16%)	17 (13%)	1 (1%)

Offending behaviour programmes	53 (42%)	3 (2%)	14 (11%)	18 (14%)	16 (13%)	22 (17%)
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**Q11.2 Are you currently involved in the following? (Please tick all that apply to you.)**

<b>Not involved in any of these</b> .....	37 (28%)
Prison job.....	80 (61%)
Vocational or skills training.....	11 (8%)
Education (including basic skills).....	28 (21%)
Offending behaviour programmes.....	5 (4%)

**Q11.3 If you have been involved in any of the following, while in this prison, do you think they will help you on release?**

	<b>Not been involved</b>	Yes	No	Don't know
Prison job	27 (23%)	41 (34%)	38 (32%)	13 (11%)
Vocational or skills training	46 (46%)	33 (33%)	11 (11%)	11 (11%)
Education (including basic skills)	44 (42%)	41 (39%)	13 (13%)	6 (6%)
Offending behaviour programmes	55 (56%)	20 (20%)	13 (13%)	10 (10%)

**Q11.4 How often do you usually go to the library?**

<b>Don't want to go</b> .....	16 (12%)
Never.....	23 (17%)
Less than once a week.....	17 (13%)
About once a week.....	78 (58%)
More than once a week.....	1 (1%)

**Q11.5 Does the library have a wide enough range of materials to meet your needs?**

<b>Don't use it</b> .....	29 (23%)
Yes.....	68 (53%)
No.....	31 (24%)

**Q11.6 How many times do you usually go to the gym each week?**

<b>Don't want to go</b> .....	36 (27%)
0.....	30 (23%)
1 to 2.....	25 (19%)
3 to 5.....	33 (25%)
More than 5.....	9 (7%)

**Q11.7 How many times do you usually go outside for exercise each week?**

<b>Don't want to go</b> .....	21 (16%)
0.....	21 (16%)
1 to 2.....	41 (31%)
3 to 5.....	33 (25%)
More than 5.....	18 (13%)

**Q11.8 How many times do you usually have association each week?**

<b>Don't want to go</b> .....	5 (4%)
-------------------------------	--------



0 .....	3 (2%)
1 to 2 .....	3 (2%)
3 to 5 .....	14 (10%)
More than 5 .....	110 (81%)

**Q11.9 How many hours do you usually spend out of your cell on a weekday? (Please include hours at education, at work etc.)**

Less than 2 hours.....	22 (17%)
2 to less than 4 hours .....	19 (15%)
4 to less than 6 hours .....	25 (19%)
6 to less than 8 hours .....	31 (24%)
8 to less than 10 hours .....	12 (9%)
10 hours or more .....	18 (14%)
Don't know.....	4 (3%)

### Section 12: Contact with family and friends

**Q12.1 Have staff supported you and helped you to maintain contact with your family/friends while in this prison?**

Yes.....	43 (34%)
No .....	84 (66%)

**Q12.2 Have you had any problems with sending or receiving mail (letters or parcels)?**

Yes.....	63 (47%)
No .....	72 (53%)

**Q12.3 Have you had any problems getting access to the telephones?**

Yes.....	37 (28%)
No .....	97 (72%)

**Q12.4 How easy or difficult is it for your family and friends to get here?**

<b><i>I don't get visits</i></b> .....	23 (17%)
Very easy.....	14 (10%)
Easy.....	27 (20%)
Neither.....	14 (10%)
Difficult .....	25 (19%)
Very difficult.....	30 (22%)
Don't know.....	1 (1%)

### Section 13: Preparation for release

**Q13.1 Do you have a named offender manager (home probation officer) in the probation service?**

<b><i>Not sentenced</i></b> .....	24 (18%)
Yes.....	70 (53%)
No .....	39 (29%)

**Q13.2 What type of contact have you had with your offender manager since being in prison? (Please tick all that apply to you.)**

<b><i>Not sentenced/ NA</i></b> .....	63 (47%)
No contact .....	29 (22%)
Letter .....	21 (16%)
Phone.....	13 (10%)

	Visit.....	21 (16%)
<b>Q13.3</b>	<b>Do you have a named offender supervisor in this prison?</b>	
	Yes.....	42 (33%)
	No .....	86 (67%)
<b>Q13.4</b>	<b>Do you have a sentence plan?</b>	
	<b>Not sentenced</b> .....	24 (18%)
	Yes.....	34 (26%)
	No .....	72 (55%)
<b>Q13.5</b>	<b>How involved were you in the development of your sentence plan?</b>	
	<b>Do not have a sentence plan/not sentenced</b> .....	96 (74%)
	Very involved.....	7 (5%)
	Involved.....	8 (6%)
	Neither.....	10 (8%)
	Not very involved.....	3 (2%)
	Not at all involved.....	5 (4%)
<b>Q13.6</b>	<b>Who is working with you to achieve your sentence plan targets? (Please tick all that apply to you.)</b>	
	<b>Do not have a sentence plan/not sentenced</b> .....	96 (75%)
	Nobody.....	13 (10%)
	Offender supervisor .....	11 (9%)
	Offender manager .....	12 (9%)
	Named/personal officer .....	4 (3%)
	Staff from other departments.....	8 (6%)
<b>Q13.7</b>	<b>Can you achieve any of your sentence plan targets in this prison?</b>	
	<b>Do not have a sentence plan/not sentenced</b> .....	96 (75%)
	Yes.....	10 (8%)
	No .....	11 (9%)
	Don't know.....	11 (9%)
<b>Q13.8</b>	<b>Are there plans for you to achieve any of your sentence plan targets in another prison?</b>	
	<b>Do not have a sentence plan/not sentenced</b> .....	96 (74%)
	Yes.....	10 (8%)
	No .....	14 (11%)
	Don't know.....	10 (8%)
<b>Q13.9</b>	<b>Are there plans for you to achieve any of your sentence plan targets in the community?</b>	
	<b>Do not have a sentence plan/not sentenced</b> .....	96 (74%)
	Yes.....	13 (10%)
	No .....	5 (4%)
	Don't know.....	16 (12%)
<b>Q13.10</b>	<b>Do you have a needs based custody plan?</b>	
	Yes .....	8 (6%)
	No .....	61 (48%)
	Don't know.....	57 (45%)

**Q13.11 Do you feel that any member of staff has helped you to prepare for your release?**  
 Yes..... 15 (12%)  
 No ..... 110 (88%)

**Q13.12 Do you know of anyone in this prison who can help you with the following on release? (Please tick all that apply to you.)**

	<i>Do not need help</i>	Yes	No
Employment	32 (27%)	31 (26%)	54 (46%)
Accommodation	30 (25%)	49 (41%)	40 (34%)
Benefits	24 (20%)	57 (48%)	39 (33%)
Finances	27 (24%)	33 (29%)	52 (46%)
Education	30 (28%)	39 (36%)	40 (37%)
Drugs and alcohol	34 (30%)	47 (42%)	31 (28%)

**Q13.13 Have you done anything, or has anything happened to you here, that you think will make you less likely to offend in the future?**  
*Not sentenced*..... 24 (18%)  
 Yes..... 43 (33%)  
 No ..... 63 (48%)

## Main comparator and comparator to last time



### Prisoner survey responses HMP Lincoln 2012

Prisoner survey responses (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

#### Key to tables

		HMP Lincoln 2012	Local prisons comparator	HMP Lincoln 2012	HMP Lincoln 2007
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>Number of completed questionnaires returned</b>		<b>147</b>	<b>5447</b>	<b>147</b>	<b>114</b>
<b>SECTION 1: General information</b>					
1.2	Are you under 21 years of age?	2%	6%	2%	5%
1.3	Are you sentenced?	83%	68%	83%	72%
1.3	Are you on recall?	17%	10%	17%	26%
1.4	Is your sentence less than 12 months?	21%	20%	21%	18%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	1%	3%	1%	3%
1.5	Are you a foreign national?	13%	12%	13%	8%
1.6	Do you understand spoken English?	99%	99%	99%	
1.7	Do you understand written English?	97%	98%	97%	
1.8	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	16%	25%	16%	12%
1.9	Do you consider yourself to be Gypsy/Romany/Traveller?	5%	5%	5%	
1.1	Are you Muslim?	8%	11%	8%	4%
1.11	Are you homosexual/gay or bisexual?	4%	3%	4%	1%
1.12	Do you consider yourself to have a disability?	17%	20%	17%	17%
1.13	Are you a veteran (ex-armed services)?	8%	6%	8%	
1.14	Is this your first time in prison?	29%	29%	29%	27%
1.15	Do you have any children under the age of 18?	57%	54%	57%	63%
<b>SECTION 2: Transfers and escorts</b>					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	28%	19%	28%	32%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	55%	42%	55%	
2.3	Were you offered a toilet break?	11%	8%	11%	
2.4	Was the van clean?	73%	67%	73%	
2.5	Did you feel safe?	82%	77%	82%	
2.6	Were you treated well/very well by the escort staff?	80%	66%	80%	74%
2.7	Before you arrived here were you told that you were coming here?	66%	70%	66%	
2.7	Before you arrived here did you receive any written information about coming here?	12%	6%	12%	
2.8	When you first arrived here did your property arrive at the same time as you?	83%	81%	83%	86%

## Main comparator and comparator to last time

### Key to tables

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<b>SECTION 3: Reception, first night and induction</b>					
3.1	Were you in reception for less than 2 hours?	37%	51%	37%	
3.2	When you were searched in reception, was this carried out in a respectful way?	87%	74%	87%	69%
3.3	Were you treated well/very well in reception?	70%	58%	70%	63%
	When you first arrived:				
3.4	Did you have any problems?	82%	74%	82%	77%
3.4	Did you have any problems with loss of property?	10%	14%	10%	11%
3.4	Did you have any housing problems?	17%	24%	17%	26%
3.4	Did you have any problems contacting employers?	4%	7%	4%	5%
3.4	Did you have any problems contacting family?	39%	33%	39%	41%
3.4	Did you have any problems ensuring dependants were being looked after?	2%	7%	2%	11%
3.4	Did you have any money worries?	17%	22%	17%	34%
3.4	Did you have any problems with feeling depressed or suicidal?	14%	22%	14%	23%
3.4	Did you have any physical health problems?	15%	16%	15%	
3.4	Did you have any mental health problems?	14%	17%	14%	
3.4	Did you have any problems with needing protection from other prisoners?	7%	9%	7%	12%
3.4	Did you have problems accessing phone numbers?	27%	30%	27%	
	For those with problems:				
3.5	Did you receive any help/support from staff in dealing with these problems?	48%	41%	48%	
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	82%	87%	82%	80%
3.6	A shower?	16%	33%	16%	31%
3.6	A free telephone call?	8%	58%	8%	32%
3.6	Something to eat?	59%	79%	59%	81%
3.6	PIN phone credit?	24%	59%	24%	
3.6	Toiletries/basic items?	49%	59%	49%	

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### Key to tables

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	Percentages which are not highlighted show there is no significant difference				
<b>SECTION 3: Reception, first night and induction continued</b>					
	When you first arrived here did you have access to the following people:				
3.7	The chaplain or a religious leader?	52%	50%	52%	
3.7	Someone from health services?	77%	76%	77%	
3.7	A Listener/Samaritans?	34%	39%	34%	
3.7	Prison shop/canteen?	40%	14%	40%	63%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	40%	48%	40%	40%
3.8	Support was available for people feeling depressed or suicidal?	42%	48%	42%	42%
3.8	How to make routine requests?	42%	40%	42%	30%
3.8	Your entitlement to visits?	37%	45%	37%	42%
3.8	Health services?	57%	52%	57%	
3.8	The chaplaincy?	44%	48%	44%	
3.9	Did you feel safe on your first night here?	74%	73%	74%	86%
3.10	Have you been on an induction course?	92%	77%	92%	79%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	58%	58%	58%	61%
3.12	Did you receive an education (skills for life) assessment?	77%	74%	77%	
<b>SECTION 4: Legal rights and respectful custody</b>					
	In terms of your legal rights, is it easy/very easy to:				
4.1	Communicate with your solicitor or legal representative?	45%	41%	45%	50%
4.1	Attend legal visits?	56%	58%	56%	70%
4.1	Get bail information?	14%	23%	14%	32%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	40%	40%	40%	38%
4.3	Can you get legal books in the library?	45%	38%	45%	
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	56%	53%	56%	78%
4.4	Are you normally able to have a shower every day?	95%	80%	95%	91%
4.4	Do you normally receive clean sheets every week?	85%	82%	85%	89%
4.4	Do you normally get cell cleaning materials every week?	67%	63%	67%	52%
4.4	Is your cell call bell normally answered within five minutes?	40%	38%	40%	30%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	65%	64%	65%	59%
4.4	Can you normally get your stored property if you need to?	31%	27%	31%	32%
4.5	Is the food in this prison good/very good?	42%	24%	42%	25%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	42%	45%	42%	62%
4.7	Are you able to speak to a Listener at any time if you want to?	63%	58%	63%	66%
4.8	Are your religious beliefs are respected?	47%	54%	47%	55%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	57%	55%	57%	56%
4.10	Is it easy/very easy to attend religious services?	44%	46%	44%	

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<b>SECTION 5: Applications and complaints</b>					
5.1	Is it easy to make an application?	86%	82%	86%	
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	75%	57%	75%	72%
5.2	Do you feel applications are dealt with quickly (within seven days)?	67%	47%	67%	70%
5.3	Is it easy to make a complaint?	64%	59%	64%	
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	51%	30%	51%	43%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	68%	34%	68%	39%
5.5	Have you ever been prevented from making a complaint when you wanted to?	11%	16%	11%	
5.6	Is it easy/very easy to see the Independent Monitoring Board?	29%	22%	29%	30%
<b>SECTION 6: Incentive and earned privileges scheme</b>					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	56%	49%	56%	56%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	47%	44%	47%	
6.3	In the last six months have any members of staff physically restrained you (C&R)?	7%	7%	7%	9%
6.4	In the last six months, if you have spent a night in the segregation/care and separation unit, were you treated very well/well by staff?	45%	39%	45%	
<b>SECTION 7: Relationships with staff</b>					
7.1	Do most staff, in this prison, treat you with respect?	84%	71%	84%	75%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	82%	72%	82%	71%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	38%	35%	38%	
7.4	Do staff normally speak to you most of the time/all of the time during association?	26%	18%	26%	25%
7.5	Do you have a personal officer?	60%	46%	60%	65%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	62%	64%	62%	75%

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<b>SECTION 8: Safety</b>			
8.1	Have you ever felt unsafe here?	39%	41%
8.2	Do you feel unsafe now?	24%	17%
8.4	Have you been victimised by other prisoners here?	31%	21%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	14%	10%
8.5	Hit, kicked or assaulted you?	8%	7%
8.5	Sexually abused you?	2%	1%
8.5	Threatened or intimidated you?	14%	14%
8.5	Taken your canteen/property?	4%	5%
8.5	Victimised you because of medication?	3%	4%
8.5	Victimised you because of debt?	2%	3%
8.5	Victimised you because of drugs?	2%	4%
8.5	Victimised you because of your race or ethnic origin?	4%	3%
8.5	Victimised you because of your religion/religious beliefs?	2%	2%
8.5	Victimised you because of your nationality?	4%	2%
8.5	Victimised you because you were from a different part of the country?	6%	4%
8.5	Victimised you because you are from a traveller community?	0%	1%
8.5	Victimised you because of your sexual orientation?	4%	1%
8.5	Victimised you because of your age?	3%	2%
8.5	Victimised you because you have a disability?	5%	3%
8.5	Victimised you because you were new here?	6%	6%
8.5	Victimised you because of your offence/crime?	10%	5%
8.5	Victimised you because of gang related issues?	6%	4%

HMP Lincoln 2012	HMP Lincoln 2007
39%	40%
24%	14%
31%	26%
14%	14%
8%	8%
2%	1%
14%	
4%	8%
3%	
2%	
2%	3%
4%	4%
2%	3%
4%	
6%	6%
0%	
4%	0%
3%	
5%	3%
6%	4%
10%	
6%	



## Main comparator and comparator to last time

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	Percentages which are not highlighted show there is no significant difference				
<b>SECTION 8: Safety continued</b>					
8.6	Have you been victimised by staff here?	26%	25%	26%	36%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	6%	11%	6%	18%
8.7	Hit, kicked or assaulted you?	4%	5%	4%	10%
8.7	Sexually abused you?	2%	1%	2%	1%
8.7	Threatened or intimidated you?	8%	14%	8%	
8.7	Victimised you because of medication?	1%	6%	1%	
8.7	Victimised you because of debt?	2%	1%	2%	
8.7	Victimised you because of drugs?	2%	5%	2%	9%
8.7	Victimised you because of your race or ethnic origin?	3%	5%	3%	3%
8.7	Victimised you because of your religion/religious beliefs?	4%	3%	4%	1%
8.7	Victimised you because of your nationality?	3%	2%	3%	
8.7	Victimised you because you were from a different part of the country?	1%	3%	1%	4%
8.7	Victimised you because you are from a traveller community?	1%	3%	1%	
8.7	Victimised you because of your sexual orientation?	1%	1%	1%	0%
8.7	Victimised you because of your age?	2%	2%	2%	
8.7	Victimised you because you have a disability?	1%	2%	1%	1%
8.7	Victimised you because you were new here?	4%	6%	4%	9%
8.7	Victimised you because of your offence/crime?	6%	5%	6%	
8.7	Victimised you because of gang related issues?	3%	2%	3%	
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	40%	34%	40%	29%

## Main comparator and comparator to last time

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<b>SECTION 9: Health services</b>					
9.1	Is it easy/very easy to see the doctor?	26%	27%	26%	
9.1	Is it easy/very easy to see the nurse?	62%	52%	62%	
9.1	Is it easy/very easy to see the dentist?	13%	10%	13%	
	For those who have been to the following services, do you think the quality of the health service from the following is good/very good:				
9.2	The doctor?	51%	44%	51%	44%
9.2	The nurse?	74%	57%	74%	68%
9.2	The dentist?	44%	31%	44%	29%
9.3	The overall quality of health services?	44%	39%	44%	50%
9.4	Are you currently taking medication?	48%	50%	48%	47%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	66%	71%	66%	
9.6	Do you have any emotional well being or mental health problems?	31%	34%	31%	
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	54%	43%	54%	
<b>SECTION 10: Drugs and alcohol</b>					
10.1	Did you have a problem with drugs when you came into this prison?	28%	36%	28%	23%
10.2	Did you have a problem with alcohol when you came into this prison?	24%	27%	24%	13%
10.3	Is it easy/very easy to get illegal drugs in this prison?	34%	28%	34%	40%
10.4	Is it easy/very easy to get alcohol in this prison?	21%	14%	21%	
10.5	Have you developed a problem with drugs since you have been in this prison?	4%	8%	4%	
10.6	Have you developed a problem with diverted medication since you have been in this prison?	5%	9%	5%	
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	80%	63%	80%	
10.8	Have you received any support or help with your alcohol problem while in this prison?	62%	59%	62%	
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	90%	78%	90%	

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<b>SECTION 11: Activities</b>				
Is it very easy/easy to get into the following activities:				
11.1 A prison job?	47%	30%	47%	
11.1 Vocational or skills training?	33%	27%	33%	
11.1 Education (including basic skills)?	45%	43%	45%	
11.1 Offending behaviour programmes?	14%	22%	14%	
Are you currently involved in any of the following activities:				
11.2 A prison job?	61%	44%	61%	
11.2 Vocational or skills training?	8%	10%	8%	
11.2 Education (including basic skills)?	21%	27%	21%	
11.2 Offending behaviour programmes?	4%	8%	4%	
11.3 Have you had a job while in this prison?	77%	69%	77%	61%
For those who have had a prison job while in this prison:				
11.3 Do you feel the job will help you on release?	45%	42%	45%	33%
11.3 Have you been involved in vocational or skills training while in this prison?	54%	53%	54%	48%
For those who have had vocational or skills training while in this prison:				
11.3 Do you feel the vocational or skills training will help you on release?	60%	50%	60%	29%
11.3 Have you been involved in education while in this prison?	58%	65%	58%	52%
For those who have been involved in education while in this prison:				
11.3 Do you feel the education will help you on release?	68%	58%	68%	56%
11.3 Have you been involved in offending behaviour programmes while in this prison?	44%	51%	44%	43%
For those who have been involved in offending behaviour programmes while in this prison:				
11.3 Do you feel the offending behaviour programme(s) will help you on release?	46%	48%	46%	42%
11.4 Do you go to the library at least once a week?	59%	36%	59%	59%
11.5 Does the library have a wide enough range of materials to meet your needs?	53%	36%	53%	
11.6 Do you go to the gym three or more times a week?	32%	31%	32%	17%
11.7 Do you go outside for exercise three or more times a week?	38%	38%	38%	53%
11.8 Do you go on association more than five times each week?	82%	49%	82%	71%
11.9 Do you spend ten or more hours out of your cell on a weekday?	14%	10%	14%	7%
<b>SECTION 12: Friends and family</b>				
12.1 Have staff supported you and helped you to maintain contact with family/friends while in this prison?	34%	35%	34%	
12.2 Have you had any problems with sending or receiving mail?	47%	46%	47%	42%
12.3 Have you had any problems getting access to the telephones?	28%	34%	28%	21%
12.4 Is it easy/ very easy for your friends and family to get here?	31%	30%	31%	

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<b>SECTION 13: Preparation for release</b>					
For those who are sentenced:					
13.1	Do you have a named offender manager (home probation officer) in the probation service?	64%	61%	64%	
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	42%	42%	42%	
13.2	Contact by letter?	30%	29%	30%	
13.2	Contact by phone?	19%	16%	19%	
13.2	Contact by visit?	30%	35%	30%	
13.3	Do you have a named offender supervisor in this prison?	33%	29%	33%	
For those who are sentenced:					
13.4	Do you have a sentence plan?	32%	41%	32%	34%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	46%	56%	46%	58%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	41%	45%	41%	
13.6	Offender supervisor?	34%	30%	34%	
13.6	Offender manager?	37%	29%	37%	
13.6	Named/ personal officer?	12%	18%	12%	
13.6	Staff from other departments?	25%	22%	25%	
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	31%	63%	31%	54%
13.8	Are there plans for you to achieve any of your targets in another prison?	30%	22%	30%	
13.9	Are there plans for you to achieve any of your targets in the community?	38%	30%	38%	
13.10	Do you have a needs based custody plan?	6%	6%	6%	
13.11	Do you feel that any member of staff has helped you to prepare for release?	12%	15%	12%	11%
For those that need help do you know of anyone in this prison who can help you on release with the following:					
13.12	Employment?	36%	31%	36%	
13.12	Accommodation?	55%	44%	55%	
13.12	Benefits?	59%	44%	59%	
13.12	Finances?	39%	26%	39%	
13.12	Education?	49%	32%	49%	
13.12	Drugs and alcohol?	60%	48%	60%	
For those who are sentenced:					
13.13	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	41%	46%	41%	45%

## Diversity analysis



### Key question responses (ethnicity and foreign national) HMP Lincoln 2012

**Prisoner survey responses** (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

#### Key to tables

Any percentage highlighted in green is significantly better		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British national prisoners
Any percentage highlighted in blue is significantly worse					
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Percentages which are not highlighted show there is no significant difference					
<b>Number of completed questionnaires returned</b>		<b>23</b>	<b>121</b>	<b>19</b>	<b>124</b>
1.3	Are you sentenced?	81%	84%	72%	84%
1.5	Are you a foreign national?	28%	9%		
1.6	Do you understand spoken English?	100%	98%	95%	99%
1.7	Do you understand written English?	96%	98%	88%	98%
1.8	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?			35%	12%
1.9	Do you consider yourself to be Gypsy/Romany/Traveller?	5%	5%	21%	3%
1.1	Are you Muslim?	46%	2%	5%	8%
1.12	Do you consider yourself to have a disability?	9%	19%	5%	19%
1.13	Are you a veteran (ex-armed services)?	5%	8%	0%	9%
1.14	Is this your first time in prison?	44%	27%	70%	24%
2.6	Were you treated well/very well by the escort staff?	54%	85%	78%	81%
2.7	Before you arrived here were you told that you were coming here?	57%	67%	53%	69%
3.2	When you were searched in reception, was this carried out in a respectful way?	66%	91%	75%	89%
3.3	Were you treated well/very well in reception?	54%	73%	67%	71%
3.4	Did you have any problems when you first arrived?	75%	83%	82%	82%
3.7	Did you have access to someone from health care when you first arrived here?	82%	77%	70%	77%
3.9	Did you feel safe on your first night here?	59%	76%	61%	77%
3.10	Have you been on an induction course?	96%	92%	89%	92%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	35%	47%	28%	46%

## Diversity analysis

### Key to tables

		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British national prisoners
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	68%	54%	70%	54%
4.4	Are you normally able to have a shower every day?	91%	96%	88%	96%
4.4	Is your cell call bell normally answered within five minutes?	54%	37%	35%	40%
4.5	Is the food in this prison good/very good?	37%	44%	27%	44%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	14%	48%	22%	45%
4.7	Are you able to speak to a Listener at any time if you want to?	43%	68%	50%	66%
4.8	Do you feel your religious beliefs are respected?	45%	48%	63%	45%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	57%	58%	61%	57%
5.1	Is it easy to make an application?	69%	91%	69%	90%
5.3	Is it easy to make a complaint?	63%	65%	40%	67%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	54%	57%	28%	60%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	45%	48%	23%	50%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	5%	8%	23%	5%
7.1	Do <b>most</b> staff in this prison treat you with respect?	82%	86%	69%	87%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	87%	82%	61%	85%
7.3	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	23%	28%	21%	27%
7.4	Do you have a personal officer?	77%	57%	58%	60%
8.1	Have you ever felt unsafe here?	54%	36%	56%	36%
8.2	Do you feel unsafe now?	38%	22%	33%	24%
8.3	Have you been victimised by other prisoners?	32%	31%	35%	29%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	9%	14%	5%	14%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	9%	3%	12%	3%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	4%	2%	5%	2%
8.5	Have you been victimised because of your nationality? (By prisoners)	9%	3%	18%	2%
8.5	Have you been victimised because you have a disability? (By prisoners)	9%	4%	5%	5%

## Diversity analysis

### Key to tables

		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British national prisoners
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.6	Have you been victimised by a member of staff?	43%	24%	39%	24%
8.7	Have you ever felt threatened or intimidated by staff here?	19%	7%	11%	8%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	10%	2%	5%	3%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	10%	3%	0%	5%
8.7	Have you been victimised because of your nationality? (By staff)	4%	3%	5%	3%
8.7	Have you been victimised because you have a disability? (By staff)	0%	1%	0%	1%
9.1	Is it easy/very easy to see the doctor?	34%	25%	33%	25%
9.1	Is it easy/ very easy to see the nurse?	59%	63%	50%	65%
9.4	Are you currently taking medication?	38%	51%	28%	53%
9.6	Do you feel you have any emotional well being/mental health issues?	25%	33%	30%	33%
10.3	Is it easy/very easy to get illegal drugs in this prison?	25%	35%	25%	37%
11.2	Are you currently working in the prison?	69%	60%	63%	61%
11.2	Are you currently undertaking vocational or skills training?	16%	7%	6%	9%
11.2	Are you currently in education (including basic skills)?	27%	21%	44%	18%
11.2	Are you currently taking part in an offending behaviour programme?	5%	4%	0%	5%
11.4	Do you go to the library at least once a week?	81%	56%	67%	57%
11.6	do you go to the gym three or more times a week?	48%	29%	33%	30%
11.7	Do you go outside for exercise three or more times a week?	35%	39%	40%	38%
11.8	On average, do you go on association more than five times each week?	81%	82%	74%	82%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	0%	16%	19%	14%
12.2	Have you had any problems sending or receiving mail?	53%	45%	47%	47%
12.3	Have you had any problems getting access to the telephones?	31%	27%	26%	28%

## Diversity analysis



### Key question responses (disability and age over 50) HMP Lincoln 2012

**Prisoner survey responses** (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

#### Key to tables

		Consider themselves to have a disability		Do not consider themselves to have a disability			
				Prisoners aged 50 and over	Prisoners under the age of 50		
	Any percentage highlighted in green is significantly better						
	Any percentage highlighted in blue is significantly worse						
	Any percentage highlighted in orange shows a significant difference in prisoners' background details						
	Percentages which are not highlighted show there is no significant difference						
<b>Number of completed questionnaires returned</b>		<b>25</b>	<b>120</b>	<b>21</b>	<b>124</b>		
1.3	Are you sentenced?	69%	87%	89%	83%		
1.5	Are you a foreign national?	4%	14%	10%	14%		
1.6	Do you understand spoken English?	100%	98%	100%	98%		
1.7	Do you understand written English?	96%	98%	100%	97%		
1.8	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	8%	18%	4%	18%		
1.9	Do you consider yourself to be Gypsy/Romany/Traveller?	9%	5%	0%	6%		
1.1	Are you Muslim?	0%	10%	0%	10%		
1.12	Do you consider yourself to have a disability?			43%	12%		
1.13	Are you a veteran (ex-armed services)?	21%	5%	25%	5%		
1.14	Is this your first time in prison?	32%	29%	48%	26%		
2.6	Were you treated well/very well by the escort staff?	92%	77%	96%	78%		
2.7	Before you arrived here were you told that you were coming here?	72%	64%	81%	65%		
3.2	When you were searched in reception, was this carried out in a respectful way?	91%	87%	81%	88%		
3.3	Were you treated well/very well in reception?	78%	68%	66%	71%		
3.4	Did you have any problems when you first arrived?	96%	79%	96%	79%		
3.7	Did you have access to someone from health care when you first arrived here?	79%	77%	70%	78%		
3.9	Did you feel safe on your first night here?	72%	74%	72%	74%		
3.10	Have you been on an induction course?	96%	91%	86%	93%		
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	46%	45%	30%	47%		



## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50		
	Any percentage highlighted in blue is significantly worse						
	Any percentage highlighted in orange shows a significant difference in prisoners' background details						
	Percentages which are not highlighted show there is no significant difference						
4.4	Are you normally offered enough clean, suitable clothes for the week?	76%	52%	62%	55%		
4.4	Are you normally able to have a shower every day?	96%	95%	96%	95%		
4.4	Is your cell call bell normally answered within five minutes?	40%	40%	50%	38%		
4.5	Is the food in this prison good/very good?	60%	39%	57%	39%		
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	48%	42%	62%	38%		
4.7	Are you able to speak to a Listener at any time if you want to?	72%	62%	72%	61%		
4.8	Do you feel your religious beliefs are respected?	64%	43%	72%	44%		
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	68%	56%	76%	53%		
5.1	Is it easy to make an application?	100%	85%	95%	85%		
5.3	Is it easy to make a complaint?	73%	62%	50%	66%		
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	63%	55%	62%	55%		
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	46%	47%	28%	50%		
6.3	In the last six months have any members of staff physically restrained you (C&R)?	4%	8%	0%	9%		
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	96%	82%	86%	84%		
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	88%	82%	81%	82%		
7.3	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	24%	27%	19%	28%		
7.4	Do you have a personal officer?	80%	56%	66%	60%		
8.1	Have you ever felt unsafe here?	48%	37%	39%	38%		
8.2	Do you feel unsafe now?	31%	23%	28%	22%		
8.3	Have you been victimised by other prisoners?	36%	29%	34%	29%		
8.5	Have you ever felt threatened or intimidated by other prisoners here?	12%	14%	14%	14%		
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	4%	4%	3%		
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	3%	4%	2%		
8.5	Have you been victimised because of your nationality? (By prisoners)	0%	4%	4%	3%		
8.5	Have you been victimised because of your age? (By prisoners)	0%	3%	10%	2%		
8.5	Have you been victimised because you have a disability? (By prisoners)	16%	3%	10%	3%		

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability				
	Any percentage highlighted in blue is significantly worse			Prisoners aged 50 and over	Prisoners under the age of 50		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details						
	Percentages which are not highlighted show there is no significant difference						
8.6	Have you been victimised by a member of staff?	24%	27%	38%	24%		
8.7	Have you ever felt threatened or intimidated by staff here?	8%	9%	10%	9%		
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	3%	4%	3%		
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	5%	10%	3%		
8.7	Have you been victimised because of your nationality? (By staff)	0%	3%	4%	3%		
8.7	Have you been victimised because of your age? (By staff)	0%	3%	10%	1%		
8.7	Have you been victimised because you have a disability? (By staff)	0%	1%	4%	0%		
9.1	Is it easy/very easy to see the doctor?	32%	25%	28%	26%		
9.1	Is it easy/ very easy to see the nurse?	81%	59%	75%	60%		
9.4	Are you currently taking medication?	76%	42%	69%	44%		
9.6	Do you feel you have any emotional wellbeing/mental health issues?	56%	26%	37%	30%		
10.3	Is it easy/very easy to get illegal drugs in this prison?	26%	36%	17%	37%		
11.2	Are you currently working in the prison?	71%	59%	67%	59%		
11.2	Are you currently undertaking vocational or skills training?	9%	8%	11%	8%		
11.2	Are you currently in education (including basic skills)?	33%	19%	22%	21%		
11.2	Are you currently taking part in an offending behaviour programme?	4%	4%	0%	5%		
11.4	Do you go to the library at least once a week?	72%	56%	72%	56%		
11.6	Do you go to the gym three or more times a week?	21%	34%	17%	35%		
11.7	Do you go outside for exercise three or more times a week?	25%	41%	33%	38%		
11.8	On average, do you go on association more than five times each week?	76%	83%	72%	83%		
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	33%	9%	23%	13%		
12.2	Have you had any problems sending or receiving mail?	28%	50%	28%	50%		
12.3	Have you had any problems getting access to the telephones?	16%	30%	17%	30%		

## Wing comparison



### Prisoner survey responses (vulnerable prisoner wing vs other wings) HMP Lincoln 2012

Prisoner survey responses (missing data have been excluded for each question)

#### Key to tables

Percentages highlighted in green show the best score across wings		E wing (vulnerable prisoner wing)	All other wings (excluding segregation)
Percentages highlighted in blue show the worst score across wings			
<b>Number of completed questionnaires returned</b>		<b>40</b>	<b>106</b>
<b>SECTION 1: General information</b>			
1.2	Are you under 21 years of age?	0%	3%
1.3	Are you sentenced?	90%	81%
1.3	Are you on recall?	23%	15%
1.4	Is your sentence less than 12 months?	10%	25%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	2%	1%
1.5	Are you a foreign national?	15%	13%
1.6	Do you understand spoken English?	98%	99%
1.7	Do you understand written English?	95%	98%
1.8	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	13%	16%
1.9	Do you consider yourself to be Gypsy/Romany/Traveller?	11%	3%
1.1	Are you Muslim?	8%	9%
1.11	Are you homosexual/gay or bisexual?	8%	3%
1.12	Do you consider yourself to have a disability?	31%	12%
1.13	Are you a veteran (ex-armed services)?	16%	5%
1.14	Is this your first time in prison?	55%	20%
1.15	Do you have any children under the age of 18?	57%	57%
<b>SECTION 2: Transfers and escorts</b>			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	45%	22%
2.5	Did you feel safe?	80%	82%
2.6	Were you treated well/very well by the escort staff?	85%	78%
2.7	Before you arrived here were you told that you were coming here?	67%	65%
2.8	When you first arrived here did your property arrive at the same time as you?	95%	78%

## Wing comparison

### Key to tables

Percentages highlighted in green show the best score across wings		E wing (vulnerable prisoner wing)	All other wings (excluding segregation)
Percentages highlighted in blue show the worst score across wings			
<b>SECTION 3: Reception, first night and induction</b>			
3.1	Were you in reception for less than 2 hours?	18%	44%
3.2	When you were searched in reception, was this carried out in a respectful way?	79%	91%
3.3	Were you treated well/very well in reception?	65%	72%
When you first arrived:			
3.4	Did you have any problems?	82%	83%
3.4	Did you have any problems with loss of property?	10%	10%
3.4	Did you have any housing problems?	18%	18%
3.4	Did you have any problems contacting employers?	0%	5%
3.4	Did you have any problems contacting family?	40%	38%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	2%
3.4	Did you have any money worries?	13%	19%
3.4	Did you have any problems with feeling depressed or suicidal?	18%	12%
3.4	Did you have any physical health problems?	20%	13%
3.4	Did you have any mental health problems?	20%	12%
3.4	Did you have any problems with needing protection from other prisoners?	18%	3%
3.4	Did you have problems accessing phone numbers?	33%	25%
When you first arrived here, were you offered any of the following:			
3.6	Tobacco?	62%	90%
3.6	A shower?	13%	17%
3.6	A free telephone call?	5%	9%
3.6	Something to eat?	53%	62%
3.6	PIN phone credit?	18%	27%
3.6	Toiletries/basic items?	55%	47%

## Wing comparison

### Key to tables

	Percentages highlighted in green show the best score across wings	E wing (vulnerable prisoner wing)	All other wings (excluding segregation)
	Percentages highlighted in blue show the worst score across wings		
<b>SECTION 3: Reception, first night and induction continued</b>			
When you first arrived here did you have access to the following people:			
3.7	The chaplain or a religious leader?	57%	49%
3.7	Someone from health services?	64%	82%
3.7	A Listener/Samaritans?	44%	30%
3.7	Prison shop/canteen?	41%	40%
When you first arrived here were you offered information about any of the following:			
3.8	What was going to happen to you?	27%	45%
3.8	Support was available for people feeling depressed or suicidal?	35%	45%
3.8	How to make routine requests?	35%	46%
3.8	Your entitlement to visits?	25%	43%
3.8	Health services?	40%	64%
3.8	The chaplaincy?	42%	45%
3.9	Did you feel safe on your first night here?	57%	80%
3.10	Have you been on an induction course?	85%	94%
3.12	Did you receive an education (skills for life) assessment?	90%	72%
<b>SECTION 4: Legal rights and respectful custody</b>			
In terms of your legal rights, is it easy/very easy to:			
4.1	Communicate with your solicitor or legal representative?	36%	49%
4.1	Attend legal visits?	52%	58%
4.1	Get bail information?	10%	16%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	36%	41%
4.3	Can you get legal books in the library?	40%	47%
For the wing/unit you are currently on:			
4.4	Are you normally offered enough clean, suitable clothes for the week?	77%	48%
4.4	Are you normally able to have a shower every day?	95%	95%
4.4	Do you normally receive clean sheets every week?	95%	82%
4.4	Do you normally get cell cleaning materials every week?	59%	71%
4.4	Is your cell call bell normally answered within five minutes?	29%	43%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	61%	66%
4.4	Can you normally get your stored property if you need to?	31%	30%
4.5	Is the food in this prison good/very good?	27%	47%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	46%	41%
4.7	Are you able to speak to a Listener at any time if you want to?	75%	59%
4.8	Are your religious beliefs respected?	74%	37%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	73%	51%
4.10	Is it easy/very easy to attend religious services?	45%	43%

## Wing comparison

### Key to tables

Percentages highlighted in green show the best score across wings		E wing (vulnerable prisoner wing)	All other wings (excluding segregation)
Percentages highlighted in blue show the worst score across wings			
<b>SECTION 5: Applications and complaints</b>			
5.1	Is it easy to make an application?	95%	83%
5.3	Is it easy to make a complaint?	76%	59%
5.5	Have you ever been prevented from making a complaint when you wanted to?	13%	10%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	36%	27%
<b>SECTION 6: Incentive and earned privileges scheme</b>			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	67%	52%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	43%	48%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	2%	9%
<b>SECTION 7: Relationships with staff</b>			
7.1	Do most staff, in this prison, treat you with respect?	82%	84%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	79%	83%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	35%	40%
7.4	Do staff normally speak to you most of the time/all of the time during association?	20%	29%
7.5	Do you have a personal officer?	73%	55%

## Wing comparison

### Key to tables

	Percentages highlighted in green show the best score across wings	E wing (vulnerable prisoner wing)	All other wings (excluding segregation)
	Percentages highlighted in blue show the worst score across wings		
<b>SECTION 8: Safety</b>			
8.1	Have you ever felt unsafe here?	63%	28%
8.2	Do you feel unsafe now?	50%	13%
8.4	Have you been victimised by other prisoners here?	51%	23%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	28%	9%
8.5	Hit, kicked or assaulted you?	10%	7%
8.5	Sexually abused you?	8%	0%
8.5	Threatened or intimidated you?	21%	11%
8.5	Taken your canteen/property?	8%	3%
8.5	Victimised you because of medication?	5%	2%
8.5	Victimised you because of debt?	2%	2%
8.5	Victimised you because of drugs?	2%	2%
8.5	Victimised you because of your race or ethnic origin?	8%	2%
8.5	Victimised you because of your religion/religious beliefs?	8%	0%
8.5	Victimised you because of your nationality?	10%	1%
8.5	Victimised you because you were from a different part of the country?	10%	4%
8.5	Victimised you because you are from a traveller community?	0%	0%
8.5	Victimised you because of your sexual orientation?	13%	0%
8.5	Victimised you because of your age?	8%	1%
8.5	Victimised you because you have a disability?	8%	4%
8.5	Victimised you because you were new here?	10%	5%
8.5	Victimised you because of your offence/crime?	31%	2%
8.5	Victimised you because of gang related issues?	8%	5%

## Wing comparison

### Key to tables

	Percentages highlighted in green show the best score across wings	E wing (vulnerable prisoner wing)	All other wings (excluding segregation)
	Percentages highlighted in blue show the worst score across wings		
<b>SECTION 8: Safety continued</b>			
8.6	Have you been victimised by staff here?	45%	19%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	10%	5%
8.7	Hit, kicked or assaulted you?	8%	2%
8.7	Sexually abused you?	2%	1%
8.7	Threatened or intimidated you?	13%	7%
8.7	Victimised you because of medication?	2%	0%
8.7	Victimised you because of debt?	2%	1%
8.7	Victimised you because of drugs?	2%	1%
8.7	Victimised you because of your race or ethnic origin?	2%	2%
8.7	Victimised you because of your religion/religious beliefs?	8%	2%
8.7	Victimised you because of your nationality?	2%	2%
8.7	Victimised you because you were from a different part of the country?	2%	0%
8.7	Victimised you because you are from a traveller community?	2%	0%
8.7	Victimised you because of your sexual orientation?	2%	0%
8.7	Victimised you because of your age?	5%	1%
8.7	Victimised you because you have a disability?	2%	0%
8.7	Victimised you because you were new here?	5%	2%
8.7	Victimised you because of your offence/crime?	21%	1%
8.7	Victimised you because of gang related issues?	5%	2%



## Wing comparison

### Key to tables

Percentages highlighted in green show the best score across wings		E wing (vulnerable prisoner wing)	All other wings (excluding segregation)
Percentages highlighted in blue show the worst score across wings			
<b>SECTION 9: Health services</b>			
9.1	Is it easy/very easy to see the doctor?	30%	26%
9.1	Is it easy/very easy to see the nurse?	73%	58%
9.1	Is it easy/very easy to see the dentist?	6%	16%
9.4	Are you currently taking medication?	71%	40%
9.6	Do you have any emotional well being or mental health problems?	43%	26%
<b>SECTION 10: Drugs and alcohol</b>			
10.1	Did you have a problem with drugs when you came into this prison?	16%	32%
10.2	Did you have a problem with alcohol when you came into this prison?	22%	25%
10.3	Is it easy/very easy to get illegal drugs in this prison?	22%	39%
10.4	Is it easy/very easy to get alcohol in this prison?	11%	25%
10.5	Have you developed a problem with drugs since you have been in this prison?	0%	6%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	6%	4%

## Wing comparison

### Key to tables

Percentages highlighted in green show the best score across wings		E wing (vulnerable prisoner wing)	All other wings (excluding segregation)
Percentages highlighted in blue show the worst score across wings			
<b>SECTION 11: Activities</b>			
Is it very easy/ easy to get into the following activities:			
11.1	A prison job?	49%	48%
11.1	Vocational or skills training?	26%	35%
11.1	Education (including basic skills)?	59%	40%
11.1	Offending behaviour programmes?	6%	16%
Are you currently involved in any of the following activities:			
11.2	A prison job?	78%	54%
11.2	Vocational or skills training?	11%	8%
11.2	Education (including basic skills)?	35%	16%
11.2	Offending behaviour programmes?	8%	2%
11.4	Do you go to the library at least once a week?	68%	56%
11.5	Does the library have a wide enough range of materials to meet your needs?	46%	57%
11.6	Do you go to the gym three or more times a week?	30%	33%
11.7	Do you go outside for exercise three or more times a week?	35%	39%
11.8	Do you go on association more than five times each week?	81%	83%
11.9	Do you spend ten or more hours out of your cell on a weekday?	25%	10%
<b>SECTION 12: Friends and family</b>			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	33%	34%
12.2	Have you had any problems with sending or receiving mail?	43%	48%
12.3	Have you had any problems getting access to the telephones?	16%	32%
12.4	Is it easy/ very easy for your friends and family to get here?	24%	33%

## Wing comparison

### Key to tables

	Percentages highlighted in green show the best score across wings	E wing (vulnerable prisoner wing)	All other wings (excluding segregation)
	Percentages highlighted in blue show the worst score across wings		
<b>SECTION 13: Preparation for release</b>			
13.3	Do you have a named offender supervisor in this prison?	50%	25%
13.10	Do you have a needs based custody plan?	3%	8%
13.11	Do you feel that any member of staff has helped you to prepare for release?	11%	13%