



**INDEPENDENT MONITORING BOARD
ANNUAL REPORT 1 APRIL 2019 – 31 MARCH 2020
HYDEBANK WOOD COLLEGE & ASH HOUSE WOMEN'S PRISON**

HYDEBANK WOOD COLLEGE & WOMEN'S PRISON ANNUAL REPORT

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MISSION STATEMENT

To enhance the quality of prison life, by working to ensure fairness and accountability in prison.

Statement of Purpose

Members of the Independent Monitoring Board (IMB) for Hydebank Wood College & Ash House Women's Prison (HBW) who have served more than 3 years were appointed by the Justice Minister under Section 10 of the Prison Act (NI) 1953. New members to the Board were appointed by the Permanent Secretary to the Department of Justice.

The Board is required to:

- Visit HBW regularly and report to Justice Minister on the conditions of imprisonment and the treatment of offenders;
- Consider requests and complaints made by prisoners to the Board;
- Report matters of concern to the Governor or, in serious cases, the Justice Minister; and
- Exercise certain powers that are given to the Prison and Young Offenders Rules (NI) 2005.

The Prison Rules further require the Board to satisfy itself as to:

- The treatment of prisoners including provision for their healthcare and other welfare while in prison;
- The facilities available to prisoners to allow them to make purposeful use of their time; and
- The cleanliness and adequacy of prison premises.

To enable the Board to carry out these duties effectively, its members have free access at any time to all prisoners and to all parts of the prison to which they are appointed. In exercising their rights under the Prison Rules, members shall take into consideration the matters referred to in Rule 124 (5) which state, in the exercise of any of its powers, the Board will not:

- undermine the security and good order of the prison;
- prejudice the efficient operation of the prison; or
- prevent the proper treatment of prisoners.

The Board shall also have reasonable access to any of the records of the prison, with the exception of medical records.

UK NATIONAL PREVENTIVE MECHANISM

The IMB is part of the United Kingdom National Preventive Mechanism (UK NPM) as required by the Optional Protocol to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT).

CHAIRPERSON'S INTRODUCTION

I am pleased to present the annual report of the Independent Monitoring Board for Hydebank Wood Secure College and Ash House Women's Prison (HBW) for the period 1 April 2019 - 31 March 2020. At least four key milestones mark the year under review.

On 1 April 2019, the Board welcomed four new members after bidding farewell to Brian Doherty who had given nine years' service as a volunteer with the IMB. All members were appointed through a Public Appointment process, in accordance with current standards for appointment to such offices. Throughout the year the diverse team of nine volunteers visited the prison on a rota basis to monitor conditions and address matters raised by prisoners. Your attention is drawn to Appendix 1, detailing the work and training undertaken to ensure appropriate fulfilment of our roles and responsibilities regarding the treatment of prisoners (including their health and welfare), facilities available for purposeful use of their time, cleanliness and adequacy of the premises.

In September 2019, the Board was delighted that the new Learning and Skills Centre opened on the HBW site. This capital investment by NIPS provides a modern environment for learning and socialising. It should contribute to prisoners' participation in education and training which will potentially increase their employability. The Board considers it essential that NIPS builds on this resource by developing the Service Level Agreement with Belfast Metropolitan College and strengthening the 'work-shop based' curriculum to ensure achievement of accredited qualifications, rehabilitation and future employment opportunities for the women and young men detained in Hydebank.

In November 2019, CJINI/ HMIP/ ETI and RQIA completed an unannounced inspection of both Ash House Women's Prison and Hydebank Wood Secure College. The findings within the Inspection Reports (published in June 2020) broadly concur with the experiences of Board members who liaised directly with prisoners throughout the year. In particular, the Board has noted a marked improvement in constructive relations between NIPS staff and prisoners, and significant improvements in the health care provided by the South Eastern Health and Social Care Trust. The Board is disappointed that the Inspection team did not recommend a new stand-alone women's prison, particularly as the co-location of young male offenders and women prisoners on a shared site is not fully in accordance with international standards. The Board remains of the view that a separate women's prison should proceed as a matter of urgency, alongside development of specialised accommodation for long-term women prisoners.

In March 2020, the Covid-19 pandemic resulted in Board members withdrawing from 'face to face' visits and the establishment of alternative methodologies to continue our monitoring function. As a Board, in conjunction with NIPS, we are keen to develop new methods of communicating with prisoners to ensure the continuity of meaningful independent monitoring of

conditions within the prison.

Despite many positive developments, as in previous years the Board is concerned that consistent levels of under-staffing within the prison result in redeployment of landing staff to cover other areas, leading to prisoners experiencing 'lock-downs' and rationed access to gym sessions, association and other activities. This issue must be addressed by NIPS. The Board remains convinced that there is an urgent need to establish a more effective strategy to reduce the supply of illicit drugs within the prison; to address the high proportion of 'withdrawn' or 'adjourned' adjudications; and to ensure clarity about both disciplinary and complaints processes. To reduce numbers returned to the general population for breaching rules, adequate preparation and support are required by women placed in Murray House and young men in the Working Out Unit. On-going issues with heating and access to hot water as the result of a deficient plumbing system must be addressed. In relation to healthcare provision, the Board remains concerned about the negative impact of reduced medication on committal and initial lack of continuity in mental health care experienced by some prisoners. New issues include a significant rise in the female population, with associated changes in accommodation – the 'Women's Prison' is no longer solely Ash House. The Board has recommended development of a specific area/ Unit providing a therapeutic environment for segregated women, and that efforts are made to minimise the length of time spent by young men in the CSU under Prison Rule 32.

I wish to record sincere gratitude to Ann, Clive, Deena and Yvonne who very willingly mentored and inducted our four new members - Claire, John, Michael and Pip - for three months. By the end of this reporting year the members had coalesced into a formidable volunteer team, each with their own areas of responsibility and resolute in commitment to the work of the IMB, giving freely of much time and expertise. Many thanks go to Deena who, for yet another year, has edited the Board's annual report and contributed immensely to the content herein.

I take this opportunity to thank the staff of HBW for their assistance and co-operation throughout the year. The Board has a formal monthly meeting with the Governor or Deputy Governor, and I wish to thank NIPS management team as well as the Lead Nurse for their courtesy, willingness to listen and address matters raised by Board members who aim to provide constructive feedback to ensure the proper and humane treatment of prisoners within an acceptable prison environment.

Finally, I note that the Board has the support of the IMB Secretariat and for this my colleagues and I are most grateful.

Hazel Patton

Hazel Patton
Chairperson, IMB Hydebank Wood Secure College and Women's Prison

OVERVIEW OF ESTABLISHMENT

Prison population

The population of **women** on the HBW site (see Appendix 2: Accommodation) on the third Tuesday of each month between 1.4.19 - 31.3.20 was:

April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
65	69	57	82	80	66	73	77	75	81	79	79
Number on remand											
26	33	26	39	36	27	31	33	35	42	34	36
40%	48%	46%	48%	45%	41%	42%	43%	47%	52%	43%	46%
Number sentenced											
39	36	31	43	44	39	42	44	40	39	45	42
60%	52%	54%	52%	55%	59%	58%	57%	53%	48%	57%	53%
Fine defaulter											
											1
											1%

The population of **young men** in Hydebank Wood Secure College on the third Tuesday of each month between 1.4.19 – 31.3.20 was:

April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
97	85	92	99	100	99	95	93	87	94	92	94
Number on remand											
48	38	45	47	59	53	56	55	45	49	52	46
49%	45%	49%	47%	59%	54%	59%	59%	52%	52%	57%	49%
Number sentenced											
49	47	47	51	41	46	39	37	42	45	39	48
51%	55%	51%	52%	41%	46%	41%	40%	48%	48%	42%	51%
Fine defaulter											
			1				1			1	
			1%				1%			1%	

The **transgender population** on the third Tuesday of each month between 1.4.19 – 31.3.20 was:

April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
										1	1
Number on remand											
										1	1

Based on these monthly snapshots (NIPS, email 19.5.20), the average daily female population throughout the year was 74. This is significantly higher than the average daily population of 57 in 2017-2018 and 65 in 2018-2019.¹ This increase in the female prison population is a concern. The average daily number of women on remand increased to 33 in 2019-2020 compared with 18 in 2015-2016 and 2016-2017, 19 in 2017-2018, and 26 in 2018-2019. The average daily population

¹ Average daily population figures for the years 2015-2016 to 2018-2019 are taken from *The Northern Ireland Prison Population 2018/19* (DoJ, 2019, p13).

of sentenced women also increased, from 35 to 40, during the same period.

The average daily population of young men in HBW during 2019-2020 was 94, a slight reduction compared with 98 in 2018-2019 and 95 in 2017-2018. While the average daily number of young men on remand has increased over the last five years - from 36 in 2015-2016 and 2016-2017, 37 in 2017-2018 to 51 in 2018-2019 and 49 in 2019-2020, the average daily population of sentenced young men has reduced from 66 in 2015-2016 to 44 in 2019-2020.

Staffing

As part of the **NIPS 'Future Leaders' Programme**, three Governors spent six months in HBW from July 2019 – January 2020 and another three arrived for six months in January 2020. While useful for them to experience the three prisons in Northern Ireland, the Board noted that the population of women and young men at HBW was very different from the prison populations in Maghaberry and Magilligan. Although there should be consistency in procedures such as adjudications and R32 reviews, approaches and responses in HBW need to take into account the vulnerabilities and capacities of the individuals involved and to recognise the impacts of age and gender.

In April 2019, the Board acknowledged a noticeable **change in culture** amongst NIPS staff, with more of an emphasis on education and work as well as prisoner well-being. The Governor considered that recruitment of new staff throughout the previous year and a revitalised management team had contributed to this improvement.

During 2018-2019, the number of **staff on sickness absence** on the third Tuesday of each month averaged 16, although there were variations each month (with 22 in June and 7 in September). In 2019-2020, the average number of staff on sickness absence remained 16.5, and monthly variations continued (with 23 absent in October and 10 in February). This year's figures were:

April 2019: 17 (11.8%); May: 14 (8%); June: 11 (6.5%); July: 15 (8.7%); August: 15 (8.7%); September: 21 (11.9%); October: 23 (13.1%); November: 17 (9.5%); December: 22 (12.1%); January 2020: 16 (8.8%); February: 10 (5.8%); March: 17 (9.3%).

Staff shortage may have a number of **impacts**:

- Regime curtailment. During IMB rota visits throughout the year, regime curtailment was noted on 18 occasions, for various reasons. Sometimes this was because staff were covering other areas (e.g. Video Link on 1.5.19; Visits on 22.5.19; escort to Hospital 23.12.19 and 3.3.20). Occasionally it was to facilitate staff training (e.g. in Beech, while staff were receiving training about SPAR Evolution on 18.6.19; in Ash while staff were on

drug testing training on 17.12.19), a staff meeting (students in Beech locked at 12 on 22.5.19), or a staff Union meeting (e.g. early lock in Cedar on 4.4.19). Lockdowns were raised as an issue by women in Ash (21.10.19), who also described being locked from 4.30pm until the following morning at weekends (9.4.19) or during the week (3.3.20). Six students in Cedar had placed complaints about lockdowns in the IMB box, which were subsequently transferred to the NIPS complaint box (7.1.20). Students on C2 whose classes were cancelled were locked as a result of insufficient staff to allow them to be out of their cells on the landing (22.5.19 and 16.7.19).

Inspectors affirmed that “staff shortages in recent months had led to lockdowns and regime curtailment”, noting that these were “usually short and affected all wings equally” (CJINI, 2020a, p44 and CJINI, 2020b, p43).

- The attending Governor commented to the Board that incidents in Cedar and Beech Houses over a weekend at the start of October had occurred mainly due to shortage of staff, with students reacting badly to this.

Staff shortages have a significant impact on prisoners as well as the capacity of staff who are present to fulfil required tasks. While it may be difficult to respond to short-term staff sickness or unexpected demands such as escorted hospital visits, it should be possible to anticipate the staffing required to cover staff training and ensure coverage of all areas (including Visits and Video Link).

SUMMARY OF RECOMMENDATIONS

1. ACCOMMODATION

- A stand-alone women's prison should proceed as a matter of urgency.
- A feasibility review is completed and published detailing plans for relocation of all students within current proposals to redevelop Ash and Beech Houses into a separate Female facility.
- NIPS initiates a feasibility study into the provision of a secure, self-catering unit for long term female prisoners within the HBW College site.
- Issues concerning the provision of hot water, the condition of showers, heating within cells and provision of toilet lids within Ash House should be reviewed as a matter of urgency and an action plan formulated to rectify identified deficiencies.
- The Board commends the management of HBW College for establishing the Fern Committal landing in a unit separate from Ash House and recommends its continuation even if there is a reduction in the overall female population.

2. ADJUDICATIONS

- NIPS analyses the reasons for 'withdrawn' adjudications, with a view to ensuring that the proportion withdrawn as a result of over three months elapsing since the date of the alleged offence is minimal.
- NIPS addresses the 'operational' reasons for adjudications being adjourned, and ensures that adjournment for legal consultation does not unnecessarily extend beyond the 10 day timescale.
- Reinforcing the CJINI (2020a and 2020b) recommendations, records of adjudications should be detailed enough to provide assurance that the outcomes are fair and proportionate.
- As previously, NIPS regularly ensures clarity with prisoners about disciplinary processes, their impact on PREPS, and appeals processes.
- Accessible information about the NIPS complaints process, and how they can submit a complaint to/ attend a meeting with the Prisoner Ombudsman's Office, should be readily available on each landing and regularly explained by landing officers.
- NIPS continues to work with the Speech and Language Therapist to: develop accessible information for prisoners, identify individual communication needs, implement effective strategies for ensuring that prisoners understand what has been said to them and expected responses.
- As previously, NIPS ensures that the Start 360 Advocacy Team receive information about forthcoming adjudications so that they have sufficient time to support prisoners where appropriate.

3. ALCOHOL AND SUBSTANCE ABUSE

- NIPS conducts an evaluation to assess the outcomes associated with the use of Passive Drug Dogs and whether this is an effective method for indicating the presence of drugs/ unauthorised articles.
- NIPS investigates the purchase of additional equipment, including body scanners, to detect drugs and unauthorised articles.

4. CATERING AND KITCHENS

- The catering budget is reviewed to ensure that prisoners receive adequate portion sizes.
- NIPS supervises meals to ensure that portion control is adequate.
- NIPS Catering Team works with the Dietician to develop menus based on a well-balanced diet and to promote healthy eating.

5. CHAPLAINCY

- No recommendations

6. EDUCATION AND TRAINING

- There is a continued focus on scheduling to ensure that classes provided by Belfast Metropolitan College tutors run or are covered. In addition, NIPS reviews its Service Level Agreement with Belfast Metropolitan College (BMC) to ensure that this includes provision of cover for long-term sickness absence.
- Ensure delivery of the City and Guilds Horticulture course.
- NIPS should conduct a review of the workshop-based curriculum and resources with a view to ensuring that this provision meets female and male prisoners' needs, leads to appropriate accreditation/ qualifications and supports progression into employment on release. Further, the vocational workshops should be refurbished, and over-reliance on individual NIPS instructors or external providers for workshop delivery should be addressed.

7. EQUALITY AND DIVERSITY

- Every effort is made to ensure the attendance of representatives from Healthcare and Learning & Skills at Equality and Diversity Committee meetings.
- As the E&D Committee develops further, responsibility for events planning and management is shared by the wider team.
- External scrutiny is encouraged by targeted invitations to attend the Committee being sent to the Human Rights and Equality Commissions and other relevant agencies.
- E&D awareness training (refresher) is provided to assist student representatives in the execution of their role on the E&D Committee.

8. HEALTHCARE

- In partnership with NIPS, the PDU, Learning and Skills, the information gathered during the 'social prescribing' initiative with women is used to inform the education, work, health and social activities offered to females at HBW.
- Healthcare in Prison explores with NIPS possibilities for flexible timetabling of health-related activities, including during lunch times, evenings and weekends.
- Healthcare in Prison continues working with NIPS staff and prisoners to promote trauma-informed practice and associated activities.
- All staff (Healthcare, NIPS, Education, PDU) and NIPS recruits are enabled to attend the introductory 'Universal Speech, Language and Communication Awareness Raising' session and future SLCN training appropriate to their roles.
- The range of health promotion activities developed for/with both women and young men throughout the year is continued and recognised as a significant contribution to the health and well-being of those involved.
- Continued attendance of the Lead Nurse at every IMB Board meeting, alongside quarterly meetings with the AD for Healthcare in Prison.
- Healthcare in Prison conducts an evaluation of the actions taken to reduce tensions arising from reduced medication (including direct communication by the Service User Engagement Officer with individuals who have submitted a complaint to Healthcare) to identify effective practice.
- Healthcare in Prison gathers feedback from prisoners about the impacts of reduced medication, to identify whether this includes receipt of 'adverses' or restriction of association under Prison Rule 35/4 or Rule 32.
- Mental health provision (medication and/or therapeutic support) received by prisoners in the community before their entrance into custody is continued, without the requirement of additional assessment or referral.

9. LIBRARY

- No recommendation

10. RECEPTION AND INDUCTION

- NIPS ensures parity of provision and standards in Female Reception, with adequate funding provided to ensure privacy for those being committed and suitable storage facilities.
- As previously, staff on Female Reception are given adequate time to complete the committal process and other basic tasks (such as delivery of post, transfer of money, exchange of clothes).

- Every effort is made to ensure that redeployment of staff to conduct committals or discharges in Female Reception has minimal impact on the regime for women/ students (i.e. lockdowns on landings).
- The process to be followed in relation to complaints concerning safeguarding should be further highlighted, with display of additional posters specifically about this issue throughout Ash and other Houses/ landings.

11. RESETTLEMENT

- As soon as circumstances allow, the Working Out Unit for young men is recommenced.
- Given its vital role in the transitioning phase and in resettlement, ensure that Murray House is fully utilized with adequate preparation and bespoke support for the women accommodated there.
- A Resettlement Needs Assessment is designed and utilized to support development of coordinated, structured pre-release planning with individuals.
- A system is established to monitor the number of individuals in substantive accommodation 12 weeks after release, the difficulties experienced by ex-prisoners and potential changes within HBW's regime to enhance resettlement.

12. SAFER CUSTODY

- Where operationally possible, every assistance should be given to facilitating attendance of relevant staff at Safer Custody meetings.
- Recognising the uniqueness of the population at Hydebank, and building on identified training needs, a bespoke syllabus focused on the needs of women prisoners and young men should be available for new NIPS staff posted to Hydebank and to aid individual continuing professional development for existing staff.
- The Restorative Justice approach is expanded, with a bigger pool of staff trained to facilitate this approach.

13. SEGREGATION – CARE AND SUPERVISION UNIT [CSU]

- NIPS, in partnership and with the support of relevant others, considers the establishment of a specific area/ Unit for those women who require segregation.
- Welcoming the weekly Oversight Committee, discussion and subsequent actions should focus on minimising the length of time prisoners are confined under R32 and the support required to enable their return to the normal regime.
- As previously, all staff deployed within the CSU are trained in trauma-informed practice.

14. SPORT AND RECREATION

- Every effort should be made to continue to encourage high profile, local sportspeople to visit Hydebank and cement links with the 'outside' community.

15. TUCK SHOP

- No recommendation

16. VISITS

- No recommendation

1. ACCOMMODATION (see Appendix 2)

Female

On 31 March 2020, the female population was 70, ranging in age from 18 to 63. 50 of these women prisoners were held in Ash House which is one of six stand-alone accommodation units within Hydebank Wood Secure College. 8 were held on Fern committal landing within Willow unit, with 4 on the Primrose landing within the Healthcare Centre and 8 kitchen workers sleeping on a landing in Elm while using the facilities in Willow (NIPS emails, 27 and 28.8.20).

Holding male and female prisoners on this site may not be in accordance with international standards concerning separation of the sexes in the custodial environment (CJINI, 2020a, p3).

The historic background resulting in this situation is summarized in the 2007-08 First Report of Session of the Northern Ireland Affairs Committee of the House of Commons (Section 3.64). The prison service took the decision to move women prisoners to Ash House within Hydebank Wood establishment in June 2004. Sixteen years have elapsed since that decision. The Board recognises that major improvements in female accommodation within Ash House have been achieved. Nevertheless, as in previous annual reports, the Board notes that, for many years, a strategic plan has been in place for the construction of a ***stand-alone prison for women in Northern Ireland***. The Board remains firmly of the view that this development should proceed as a matter of urgency.

In December 2018 a discussion document entitled *Prisons 2020* was published by NIPS, stating an alternative delivery model by 2020-22 based on creation of a discrete Female facility within the current Hydebank Wood site by redeveloping the existing Ash and Beech Houses and completely separating them from the Secure College for young men. Although this option is not our first preference, in view of the budgetary pressures facing the public sector and the impact of Covid-19, the Board welcomes the planned development of a separate Women's Facility focused on providing a family-centred, therapeutic environment. The Board is disappointed at the delays in progressing the Business Case for this project throughout 2019/20. It remained at Business Case 1 level during February 2020. Continued delay is detrimental to the provision of resources to address issues particular to women prisoners (for example healthcare and family matters) as well as gender-specific responses to issues of addiction, education and successful re-settlement (see: the *UN Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders* – the 'Bangkok Rules', UN General Assembly, 2010).

In 2018 Board members visited the Dóchas Centre in Dublin, a purpose-built, self-contained prison for women. Members were impressed to witness the free movement of prisoners

throughout the entire Dóchas estate. Unlike Dóchas, women prisoners located within the HBW College estate are escorted by prison officers when outside the confines of Ash House, except within the female gardens. Members are concerned that constant escorting prohibits women prisoners from developing personal responsibility for managing their time or self-management skills which may, in the long term, inhibit effective resettlement. The Board has observed on occasions that the requirement for male and female prisoners to share resources on one site at HBW (including health care, education, gymnasium and visits) limits use of these facilities for both parties and increases the occurrence of 'lock-downs'.

Recommendation re-stated: A stand-alone women's prison should proceed as a matter of urgency.

The Board highlights that the alternative ***accommodation for both male and female prisoners during any proposed construction period*** must be fit for purpose. The Board questions whether this is possible given the constraints of the accommodation afforded within Cedar, Elm and Willow Houses, especially if compliance with the social distancing requirements relating to Covid-19 continue.

Recommendation re-stated: A feasibility review is completed and published detailing plans for relocation of all students within current proposals to redevelop Ash and Beech Houses into a separate Female facility.

The Board notes that within the *Prisons 2020* document, emphasis was placed on the future development of the Women's Estate within HBW. The Board acknowledges that, whilst the construction of Murray House (female step-down facility) in 2015 was welcomed, it is situated close to the perimeter of the site resulting in limited security coverage, and there are strict criteria attached to its occupation. It is not appropriate for use by ***long term prisoners*** who are not in the final part of their sentence, and is often under-utilised. Over the year, the Board received appeals from long term prisoners housed on Ash 5 in respect of the crowded conditions on this landing and need for provision suitable for those who are 'enhanced' but have a long period of their sentence remaining.

Recommendation: NIPS initiates a feasibility study into the provision of a secure, self-catering unit for long term female prisoners within the HBW College site.

Board members are concerned at reports of recurring problems relating to ***plumbing*** matters in Ash House, including:

- No hot water in Ash House during weekend of 28-29 September 2019
- No heating or hot water in Ash House on 2/3 days during second week in February 2020

- Cells cold on 7 June, 16 August, 3 September, 17 December 2019 and 6 March 2020.

The Board understands that work was undertaken during 2019/20 to address the underlying plumbing issues on site. The Board was advised by senior staff that the age and nature of the infrastructure within the site contributes to these recurring problems, despite best efforts to resolve them.

In addition, the Board notes that the **communal ablutions within Ash House** were painted during the year 2019. The Board remains concerned that the shower trays and shower heads have not been replaced. In 2018, during the Board's visit to the Dóchas Centre for women prisoners in Dublin, it was observed that each cell had an individual shower installation and is disappointed that conditions in Northern Ireland appear to be of a lesser standard than those in Dublin. The Board notes that the ages of women confined in Ash House range from 18 to 63 years - a proportion of whom are coping with menstruation and all striving to maintain high levels of hygiene throughout this pandemic of Covid-19 whilst having to use communal shower facilities.

In some previous reports the Board has highlighted the **lack of lids for toilets located in individual cells** in Ash House. The Board was advised that prisoners could request supply of lids subject to an individual risk assessment. However, this problem has re-emerged as advice has been received that no stocks of lids are now available on site.

Recommendation: Issues concerning the provision of hot water, the condition of showers, heating within cells and provision of toilet lids within Ash House should be reviewed as a matter of urgency and an action plan formulated to rectify identified deficiencies.

During the reporting year, members received complaints relating to **overcrowding within Ash House**. In April, women on A5 complained that nine women was too many for the landing, especially when they were all trying to cook, and in July some cells were doubled up on A1, A3 and A4. From May, women who worked in the Kitchen were accommodated first on a landing in the Healthcare Centre and then on a landing in Elm. The female population increased to 82 by 16 July 2019 thus causing stress to prisoners and staff, especially on Ash 1. The Governor and Management team initiated a new women's committal landing known as Fern within Willow unit in July 2019. This extra accommodation of 20 rooms provides a dedicated landing separate from Ash House, where committals undergo the induction programme in a more pleasant and calm environment and can settle into prison life for a couple of weeks before moving to Ash House. This landing also provides a safe space for 'high profile' committals. In the past, committals were often insecure and nervous on Ash 1 as it also housed prisoners confined under Rule 32 and staff found it challenging to provide a full regime for all.

Recommendation: The Board commends the management of HBW College for

establishing the Fern Committal landing in a unit separate from Ash House and recommends its continuation even if there is a reduction in the overall female population.

Male

As of mid-March 2020 the male population was 95 - 48 sentenced, 46 on remand and 1 fine defaulter. According to statistics supplied by NIPS, and covering the full year of 2019, there was a fall in the male population up until May 2019 with an average daily population per month of 90. This was followed by a rise to 101 in July followed by a reduction to 90 again in November before finishing in December at 91. The latter half of the year averaged 95 and thereafter the daily population was between 78 and 106. Despite the ebbs and flows in actual daily numbers, overall there has been a slow but gradual decrease in the 18-21 male custodial population. According to the Department of Justice *Research and Statistical Bulletin* (DoJ, 2018) current numbers equate to just 3% of the overall custodial population.

Two residential blocks in Hydebank are in use for the male students: ***Beech and Cedar Houses*** (see Appendix 2). The way in and out of both Beech and Cedar is through a ground floor front foyer, with access to the wings via a set of stairs to the first and second floors. These foyers are mainly kept very clean, with student work parties often seen mopping and burnishing the floors when on rota visits. Additionally, the foyers in both houses have four small modern classrooms. From the start of this reporting period until September, these classrooms were being used daily due to continuing building work to upgrade the Learning and Skills Centre. Over this period in both houses, the classrooms facilitated employment events, ceramics, art and pottery, an IT suite and cookery. With the re-opening of Learning and Skills it was noted that these classrooms were often un-used. In last year's report the Board recommended that these classrooms be used more often for various events/ activities throughout the year. It is understood from the Male Governor that these ground floor classrooms will be re-purposed with both areas to include a de-escalation room, multi-purpose classroom spaces and facilities. They will also be used by various agencies and by the Student Forums. The Board welcomes this follow up action as it utilises a valuable and convenient resource.

The communal areas of Beech and Cedar are normally clean and tidy but at times serveries areas in the Association Rooms can still be messy with leftover food/dishes etc.

Over the last two years, first in Beech and more recently in Cedar, the Association Rooms have been extensively refurbished. In Beech, each area has been enlarged by removing the doors and windows alongside the serveries, giving a more open space. The communal areas are now much more bright and welcoming. Additionally, ordinary style domestic furniture is now in place (e.g.

colourful, free standing tables and chairs plus a number of two- person settees, a TV, X-Box, snooker table, and dart board in each Association Room). The walls have also been repainted a brighter colour. As B1 is the committal wing for young males this upgrade is particularly welcome. In July last year work was undertaken to upgrade Cedar Association Rooms to a similar degree. Again this included new floors and walls in each wing being painted a different colour. The class officers' desks on each landing were replaced by more modern counters. The Board is very supportive of these attempts to soften the atmosphere. During this period the landings across the male residential Houses accommodated slightly higher numbers but this was well-managed and did not lead to over-crowding.

The cells each now have a small wooden notice board on which students can put personal items (rather than the painted walls) and a compact is signed to that effect. Any graffiti is painted over by the student works party. The Board understands that consideration is being given to the appointment of one person on each landing to carry out local paint tasks to maintain the standard set.

In last year's Annual Report it was recommended that more practical use could be made of the small, enclosed outdoor area at the end of B2. The Board understands this has been cleared and students have use of it on a rotational basis. A review into the use of this space is currently on-going, with additional works required to ensure protection from inclement weather.

C5, the 'Enhanced' wing, was closed in early October 2019 due to a series of incidents. The 7 students there at the time were relocated across Beech and Cedar. It was back in operation by February 2020, with some welcome refurbishment involving the students work party.

A scheme which ended within this reporting period was the **'Headway' Landing** in Cedar 1. Initially a six month pilot intervention, funded by NIPS and delivered by Start 360 and NIPS staff, the aim of the project was to support young males who found it difficult to engage with mainstream interventions. The pilot ended in October 2019. The Board understands that NIPS planned to evaluate the programme before deciding whether to run a similar one. The merits of the peer mentoring involved were recognised by the Board. The Board understands that funding to proceed has been secured but the business case needs to go to procurement.

A **Residential Forum** occurred monthly across Beech and Cedar. The Board supports this format as it provides simple and effective interaction as a means to improve living accommodation. For example, as a result of student requests sandwich toasters, cereal boxes and bread bins have been made available on each landing.

Notwithstanding the recent and welcome refurbishment throughout the College, Board members still receive, usually verbal, complaints about the **temperature** in Houses and the CSU - heat in the summer months and lack of heating in the winter months. Verbal complaints of this nature have been a common feature for many years now. The Board understands that hot water provision can also be an issue. Although a new boiler has been installed, it has to operate using old pipes within the existing plumbing infrastructure - debris in these pipes required the system to be flushed and cleared to resolve the problem. However, this remained an issue throughout the Centre up to March 2020.

Since early 2018, there has been a **Working Out Unit** in Willow for a small number of young men (see Resettlement).

2. ADJUDICATIONS

Prisoners are given a 'warning' or 'adverse' for less serious issues, although these can affect their PREP regime. More serious issues, or an accumulation of adverses, lead to a charge being laid and subsequent adjudication.

Figures provided by NIPS (email, 20.4.20) show that there were **218 adjudications between 1.4.19 and 31.3.20 involving 83 individual women**. As in previous years, the most common 'offences against prison discipline' under Prison Rule 38 were related to drug use and poor behaviour (with number of adjudications concerning each 'offence' noted in brackets):

- Unauthorised article in her possession (44)
- Is disrespectful, uses threatening, abusive or insulting words or behaviour (28)
- Presence of drugs (24)
- Offends against good order and discipline (19)
- Disobeys an order (18)
- Fights or wrestles a prisoner or other person (15)
- Refuses to provide a sample (14)

According to the *Safety and Support Annual Report 2019* (NIPS, 2020a, p16), 60% of female adjudications in 2019 were non-discretionary. Of the 218 adjudications held with women between 1.4.19 and 31.3.20, 44 (20%) led to 'guilty' and 5 (2%) to 'not guilty' verdicts; 139 (64%) were withdrawn; 30 (14%) remained adjourned.

There were **771 adjudications involving 133 young men between 1.4.19 and 31.3.20** (NIPS email, 20.4.20). Similarly, the most common 'offences' for the young men were:

- Unauthorised article in his possession (241)
- Destroys or damages part of the prison or property (109)
- Is disrespectful, uses threatening, abusive or insulting words or behaviour (82)
- Fights or wrestles with another prisoner or person (68)
- Presence of drugs (59)
- Disobeys an order (47)
- Refuses to provide a sample (46)

The inspectorate noted that the number of adjudications was “higher than we would expect for this type of prison”, although similar to its previous inspection (CJINI, 2020b, p22). According to the *Safety and Support Annual Report 2019* (NIPS, 2020a, p16), 75% of adjudications concerning the young males were non-discretionary. Of the 771 adjudications between 1.4.19 and 31.3.20, 344 (45%) led to ‘guilty’ and 49 (6%) to ‘not guilty’ verdicts, with 284 (37%) withdrawn, 1 (0.1%) dismissed and 93 (12%) remaining adjourned.

Issues

The **overall proportion of ‘guilty’ adjudication verdicts was less than half** - just 20% for women, 45% for males - as the majority of adjudications were not completed. The *Safety and Support Annual Report 2019* (NIPS, 2020a, p35 and p69) noted that, of the adjudications that were completed during 2019, 86% resulted in a guilty verdict for women and 87% in a guilty verdict for young men. The *Safety and Support Report* also identified disparities between the females and males with regard to those with guilty adjudications (as well as in the areas of being on Basic/ Standard/ Enhanced regimes; being subject to regime demotion or promotion; drug testing, failure and refusal; being subject to intelligence-based searches; being found with an illicit substance; being placed on Rule 32 or Rule 35/4), with fewer females than would have been expected in each area (NIPS, 2020a, p86). It was suggested in the report that this may be because interaction between staff and the female population is more understanding of the issues with which women present. As there is only one residential location for females, with no option other than to manage issues in-House, mediation or restorative practice is employed to a greater degree than happens with males. The more diverse age range amongst the female population was also considered significant.

Almost two thirds (64%) of female adjudications and just over a third (37%) of male adjudications between 1.4.19 - 31.3.20 were ‘withdrawn’. There are a range of reasons for withdrawal of an adjudication. The prisoner may have been released. Following introduction of the Failed Drug Test Programme in September 2019, an individual who is referred to and engages with AD: EPT counselling to help address their drug use for a set period and

subsequently passes a drug test during that time will have their adjudication withdrawn. Withdrawal also occurs if over three months has elapsed since the date of the alleged offence. The latest inspection reports commented that withdrawal “left some rule-breaking unpunished, which potentially undermined the effectiveness of the adjudication system” (CJINI, 2020a, p27 and 2020b, p22).

Recommendation: NIPS analyses the reasons for ‘withdrawn’ adjudications, with a view to ensuring that the proportion withdrawn as a result of over three months elapsing since the date of the alleged offence is minimal.

14% of adjudications for women and 12% for young men were adjourned. For females this was primarily because the woman requested legal consultation (85/170: 50%) but also due to ‘operational reasons’ (75/170: 44%), the Failed Drug Test Programme (6/170: 4%), or because a police enquiry was being conducted (4/170: 2%). For young men, the majority were adjourned for ‘operational reasons’ (322/589: 55%). Other adjournments related to: legal consultation (237/589: 40%), the Failed Drug Test Programme (14/589: 2%), police enquiry (14/589: 2%), or staff unavailability (2/589: 0.3%). If an individual has been placed on Rule 32 or segregated under R35/4 and has outstanding adjudications which may lead to a further period of cellular confinement, the adjudication will be adjourned to enable the person a period of time back in the normal population. Occasionally, the Board witnessed young men disputing this decision, stating that they would prefer to “get it done” even if this meant concurrent periods in the CSU. The latest inspection reports (CJINI, 2020a p27 and 2020b, p22) noted: it “was particularly concerning that serious charges referred to the police, but not prosecuted, were not then completed by an adjudicator at the prison”.

NIPS now circulates a weekly report to all governors demonstrating the number of adjudications completed in the previous week, the number adjourned and reasons for adjournment. To reduce the number adjourned at the initial hearing because the prisoner wishes to consult their legal adviser, a new process was introduced - the person is asked whether they wish to consult with his/her legal adviser when the charge is served and, for those that do, the adjudication is adjourned for 10 days. The weekly report distinguishes between adjudications that can proceed and those adjourned for legal consultation, with efforts made to run as many adjudications as possible each day. For example, on 17 January 2020 there were 34 adjourned adjudications, of which only 9 could proceed (NIPS, 2020b).

Recommendation: NIPS addresses the ‘operational’ reasons for adjudications being adjourned, and ensures that adjournment for legal consultation does not unnecessarily extend beyond the 10 day timescale.

Adjudications generally take place in the late afternoon, to maximise prisoner attendance at activities and minimise disruption to their learning. However, IMB observation has been hampered by changed timing or cancellation of planned adjudications. Inspectors stated: “many records of hearings lacked detail, and did not provide assurance that charges were investigated thoroughly or that women/ prisoners were always given sufficient opportunity to explain what had happened” (CJINI, 2020a, p27 and CJINI 2020b, p23). While noting that “punishments were not excessive”, they commented: “in the absence of detailed records of discussions, some appeared lenient” in relation to women (CJINI, 2020a, p27), and that “cellular confinement was often used to tackle drug misuse” for the young men (CJINI, 2020b, p23).

Recommendation: Reinforcing the CJINI (2020a and 2020b) recommendations, records of adjudications should be detailed enough to provide assurance that the outcomes are fair and proportionate.

Responses to previous recommendations

Last year’s Annual Report recommended that ***NIPS should consider whether the charge of an offence against prison discipline is the most appropriate response*** to a prisoner’s behaviour or action. NIPS has assured the IMB that the dedicated Senior Officer for the CSU and Governor signing the ‘charge sheet’ [Form 1126] ensure that adjudication is appropriate and will refer the charge back to the reporting officer if they think the issue could be handled without a charge (NIPS, 2020b). Alternative responses may include mediation between parties (including between staff and student) or an ‘adverse’. The number of charges raised by reporting officers is reviewed each month. Where staff are considered too quick to resort to charges they will be spoken to, and where it is believed the charge could have been handled differently it may be withdrawn. In addition, the Governor responsible for the CSU reviews adjudications, providing feedback to the SO and other staff about the wording of charges, suitable language, and the most appropriate ‘offence’ categorisation (NIPS, email 20.4.20).

In response to the previous recommendation that ***NIPS staff provide detailed, factually accurate information in their statements regarding charges being laid***, NIPS has stated that staff are trained in submitting reports. When occasional deficiencies are identified, these are drawn to the attention of the reporting officer (NIPS, 2020b). According to NIPS (email 20.4.20), 10 adjudications were withdrawn during this year because of clerical error (e.g. incorrect time or number on paperwork, or incomplete information provided).

Reflecting an issue raised during rota visits by prisoners, one of the recommendations in the 2018-2019 HBW IMB Annual Report was that ***NIPS ensures clarity amongst both prisoners and staff about disciplinary processes, their impact on PREP regimes, and appeals***

processes. Governors have stated that the PREPS Policy was reviewed and re-issued to Ash House and male Houses on 30 March 2019, and is widely available in all areas (NIPS, 2020b). However, NIPS analysis of complaints during 2019 showed that 29 of the 320 complaints by males and 9 of the 238 complaints by females concerned 'adverse reports', suggesting that this remains an issue (particularly for the young men). Furthermore, 12 complaints by males, and 8 by females, related to 'regime level' (NIPS, 2020a, p52 and p84). During Residential Forums, women in Ash House considered incentives for Enhanced regimes/ deterrents for being on Basic (April 2019), those on Basic regime struggling with the periods of lock-up during association and how Basic Action Plans can be completed within two weeks (June 2019), plus how to appeal being downgraded to Basic regime (July 2019). In the Male Residential Forums, the young men agreed that the emphasis on incentives and support within the revised PREPS regime provided encouragement for everyone (April 2019). They discussed potential incentives to become Enhanced (August 2019). The process and expectations involved in moving to B3, progression from B3 to C5 and from C5 to Willow Working Out Unit, were considered (January 2020) as well as privileges for those on C5 (February 2020). Amongst both females and males, many of the issues raised with IMB members during rota visits concerned the area of 'Discipline', including PREPS regime level and receiving what they considered to be "unfair" adverse reports (see Appendix 3).

Recommendation: As previously, NIPS regularly ensures clarity with prisoners about disciplinary processes, their impact on PREPS, and appeals processes.

In last year's Annual Report, the IMB recommended that ***the process for registering a complaint should be clearly outlined during induction***. NIPS responded that both male and female committal landings clearly outline the complaint process to all new committals during the induction process. The information provided about complaints was forwarded to the Prison Ombudsman for consideration and was approved (NIPS, 2020b). While this is a positive development, accessible information about complaints processes needs to be available at all times (especially as prisoners receive a range of information during the committal process, some of which may not be relevant to them until later in their time in custody).

Recommendation: Accessible information about the NIPS complaints process, and how they can submit a complaint to/ attend a meeting with the Prisoner Ombudsman's Office, should be readily available on each landing and regularly explained by landing officers.

The Speech and Language Therapist has developed easy read *aide memoires* to supplement the notice of a report against prison discipline and the formal Information Sheet 21 provided to individuals before they attend an adjudication. These simplify the complex wording to help prisoners understand the process and their entitlements (e.g. to information, legal consultation,

ask questions, etc.).

Recommendation: NIPS continues to work with the Speech and Language Therapist to: develop accessible information for prisoners, identify individual communication needs, implement effective strategies for ensuring that prisoners understand what has been said to them and expected responses.

For the previous two years, the Board has recommended that ***NIPS ensures that the Start 360 Advocacy Team receive information about forthcoming adjudications so that they have sufficient time to support prisoners where appropriate.*** The Board has been informed that, where it is made known a prisoner would like assistance (either prior to or at an adjudication), the Adjudicating Governor will normally facilitate this request. If the prisoner asked for assistance from Start 360, the CSU would endeavour to hold the adjudication at a mutually agreeable time. No statistics have been kept by NIPS about adjudications where this has happened. Start 360 staff reported that no support was provided by the Advocacy Team at adjudications throughout the year, and the reason was unclear.

Recommendation: As previously, NIPS ensures that the Start 360 Advocacy Team receive information about forthcoming adjudications so that they have sufficient time to support prisoners where appropriate.

3. ALCOHOL AND SUBSTANCE ABUSE

The misuse of, and dependency on, substances - alcohol and both illicit and prescribed drugs - continues to be a major problem within Northern Ireland so it is not surprising that this is mirrored within the prison population. Hydebank, like all other custodial institutions, deals therefore both with the impact substances have had and the ongoing battle to keep them out of circulation. Unfortunately, despite such attempts, the presence of drugs within the prison has continued.

For half of the women and over three quarters of the young men in Hydebank, ***drug use*** is a significant issue. According to the *Safety and Support Annual Report 2019* (NIPS, 2020a, p15), 51% of females and 78% of males self-reported drug use on committal. Over half of all committals disclosed having used drugs just prior to coming into custody. It is somewhat inevitable that this habit or dependency will not cease immediately so the temptation to misuse medicines prescribed within the prison, or to obtain drugs by other means, is very high.

A senior manager reported that prescription of Tramadol has decreased in the community. Many ***prisoners*** however, are ***dependent on medication***. Young men may not be addicted to prescription drugs – they are more likely to be poly-drug users. However, because they are younger, there is more potential to change their drug use, especially through more physical use

of their bodies (raising the importance of the need for, and opportunities to, exercise or activities to burn off energy and create positives 'highs').

Opiate substitute therapy is potentially dangerous. If a prisoner wants to start this, Healthcare makes a referral to AD: EPT [Alcohol and Drugs: Empowering People through Therapy]. This Team of two workers (the third having been on long term sick leave for much of the reporting year) focuses largely on the psychosocial aspects underpinning an individual seeking help. These workers use the SMART [Self-Management & Recovery Training] model which, according to their Senior Manager, has seen an encouraging increase of engagement from the female population within the last year. If appropriate, the individual would then be referred to the Addictions Team.

The commencement of an **Addictions Medical Consultant** in January 2020 has been a very welcome addition, likely to both augment and enhance the need for more intensive clinical assessment and follow up intervention. There are plans to develop a specific Addictions Model with a focus on harm reduction.

Another initiative, introduced in September 2019, was the **Failed Drug Test Programme**. This essentially gave those facing adjudication for failing a drug test the opportunity to have the charge dismissed if they engaged over a 12 week period with AD: EPT and had no further positive tests. The Programme has been reported by the AD: EPT Manager as having generally worked well, if somewhat initially hampered by NIPS' staff movement within its management.

Such developments are encouraging and much needed in this area given the short and long term damage that substance misuse causes, including impacts on the prison regime and staff. It has also been pleasing to hear from both Start 360 [AD: EPT] and Healthcare that a **more seamless and collaborative service** is being developed. Tackling substance misuse is nonetheless a work in progress and recommendations made by the CJINI Inspectorate (CJINI, 2020b, p41) - access to an intensive programme of psychosocial support for those with substance misuse needs and development/ implementation of a local protocol for prescribing re substance misuse withdrawal - are fully supported by the Board.

The Board is pleased that two of our three **recommendations from last year** (i.e. continued funding for AD: EPT and development of a specialist clinical service for those with chronic substance dependency) have been achieved or are underway. These much needed services - both psychosocial and clinical - need to be supported and delivered in a coordinated and responsive manner.

The third recommendation regarding ***use of Passive Drug Dogs*** remains outstanding. Given the continued issues raised by prisoners during rota visits, discussed at R32 reviews and regularly aired at our Board meetings, and an apparent lack of evidential outcomes, the Board repeats this recommendation.

Recommendation: NIPS conducts an evaluation to assess the outcomes associated with the use of Passive Drug Dogs and whether this is an effective method for indicating the presence of drugs/ unauthorised articles.

As part of an overall strategy to address substance misuse and bullying, as recommended in the Inspectorate's report on the safety of prisoners held by NIPS (CJINI, 2019, p12), the Board suggests that additional equipment may be required.

Recommendation: NIPS investigates the purchase of additional equipment, including body scanners, to detect drugs and unauthorised articles.

4. CATERING AND KITCHENS

A prison population-wide ***survey*** was undertaken in April 2019 to better understand what prisoners and students liked on the menus, what they wanted to see more of, what they didn't like and their overall satisfaction with catering. There were 131 surveys issued with a 47% response rate. Principal findings included: 55% supplement their diet with purchases from the Tuck Shop; chicken dishes were the most popular (28%); the majority wanted more chips with dishes (80%); a higher proportion were happy with the quantity of fruit and vegetables (59%) than those not happy (41%); 46% reported that the quality of food had decreased. Of concern, 72% were not content with their weekly ration. The Board recognises the dedication of the catering Manager and his team to addressing the issues highlighted by the survey and understand that this is a challenge on a tight budget.

Recommendation: The catering budget is reviewed to ensure that prisoners receive adequate portion sizes.

The recent inspection noted that 'supervision of meals was inconsistent, which could compromise hygiene and portion control' (CJINI, 2020b, p32).

Recommendation: NIPS supervises meals to ensure that portion control is adequate.

A number of ***food-related concerns*** raised during rota visits related to small portion sizes. Not having enough food was an issue raised by six young men in Beech, with one commenting that food is sometimes cold when it reaches the landing. While one wanted more chips, another complained about there only being one piece of fruit per week. Amongst the women, one spoke to Board members three times about one pint of milk not being sufficient for 24 hours. Another

stated that she would like more fruit and vegetables on the menu. The Board is keen to encourage food education and healthy eating, possibly through involvement of the Dietician to develop menus based on a well-balanced diet.

Recommendation: NIPS Catering Team works with the Dietician to develop menus based on a well-balanced diet and to promote healthy eating.

There has been an ongoing issue concerning female prisoners being asked to push the **food trolleys** from the kitchen to Ash House. The trolleys are large, heavy, awkward to manoeuvre and have to be pushed up a slope. The women have highlighted the potential risk of injury. This was again raised with the attending Governor at the Board meeting in September 2019.

The Catering Team continues to deliver several **accredited courses** through Belfast Metropolitan College which will hopefully help students and prisoners find employment when they are discharged.

5. CHAPLAINCY

The **Chaplaincy in Hydebank Wood College** consists of 5 part-time Chaplains. Father Stephen McBrearty is Lead co-ordinating Chaplain supported by Rev David Jardine (Church of Ireland), Sister Oonah Hanrahan (Roman Catholic), Joan Parkinson (Methodist) and Rev. Heidi England (Presbyterian). The Chaplaincy team work together in bringing Faith and Pastoral Care to all residents in HBW. Father Stephen co-ordinates the needs of all residents ensuring that all Faiths are respected and cared for without prejudice.

Religious services for Catholics are held in the Chapel every Monday afternoon whilst the Christian combined service is delivered on a Sunday morning. All other Faith groups who reside in HBW are interviewed and when requested a representative of their Faith, if possible, is contacted for both Pastoral and Spiritual support and a religious service is held in one of the two Multi-purpose Faith Rooms.

The recent inspections noted that 'Faith provision was very good' (CJINI, 2020a, p36 and 2020b, p36-37). The Board appreciates the important role played by the Chaplaincy in supporting individuals and their families – both personally and during case reviews or through attendance at Committees.

6. EDUCATION AND TRAINING

Education at HBW continues to be provided by Belfast Metropolitan College [BMC]. The **Learning and Skills Centre** is a shared resource for females and males who use it at different

times. Unfortunately it was not fully operational until the end of September 2019, having been completely renovated. However, the Board commends the infrastructure investment which has led to construction of a modern, multi-purpose 'hub' for a range of educational and social activities. A new Head of Centre was appointed in the autumn and works closely with the Governor responsible for activities. He informed the Board that every student is given an educational assessment within 10 days of committal. Having established the students' interests and preferred employment on release, the students are advised about available training skills/ subjects and an educational path is set up for them.

In terms of **provision**, a partnership with Fresh Start includes specialists who work with individuals on a 1:1 basis, including those with dyslexia. During this monitoring period, BMC registered 704 registrations with 628 accreditations across all delivery areas and 39 students completed Essential Skills, Literacy or Numeracy. Some of the long-term students/ prisoners who have 'outgrown' what is on offer have been encouraged to enrol on Open University courses, although the significant progression from NVQ Level 2 to University courses requires considerable additional support. A 'Learning Together' programme has been established with Queen's University in which 3rd year Criminology students are taught in HBW and students in HBW join these classes. This has been beneficial to both sets of students.

An on-going issue has been **staff absence**. While on rota duty in April 2019 a number of students complained about class and workshop cancellations. In August members of the Board received reports about a 'reduced timetable' on Friday afternoons. The Inspection conducted in November 2019 found that, although there had been better targeting of provision to meet prisoners' needs, a few members of Education staff remained on long-term sickness absence which affected some provision (particularly Essential Skills). During Board members' visits to the Learning and Skills Centre in November it was apparent that some classes had been cancelled, leading to large numbers of students on the landings. On one date in January 2020 Board members on rota duty were concerned to find 27 students on the landings in Beech due to cancelled classes. Officers confirmed that this was a frequent occurrence. During a rota visit in February members found 20 students on landings in Cedar House due to insufficient staff being available for classes. A couple of weeks later, ICT, Art, and Cooking had been cancelled, two members of BMC staff were on long-term sick, one was on maternity leave and another was about to go off. When asked about this at Board meetings, the Governor confirmed that leave cover for absent staff had not been built into the BMC contract and class timetabling is a BMC responsibility. The Board asserted that the issue of there being no contingency plans for BMC staff sickness cover needs to be addressed, with provision to cover staff absence included within the contract for providing an education package to HBW.

Recommendation: There is a continued focus on scheduling to ensure that classes provided by BMC tutors run or are covered. In addition, NIPS reviews its Service Level Agreement with BMC to ensure that this includes provision of cover for long-term sickness absence.

A range of **workshops** have been provided by NIPS instructors throughout the year. Work in the gardens has continued at a high standard with the students producing Christmas wreaths and decorations as well as Easter baskets. The hanging baskets are very popular and a joy to behold. Students have enjoyed looking after the animals and helping with the delivery of new-born lambs. Unfortunately, a City & Guilds Horticulture course due to begin early 2020, delivered by BMC staff and one of the NIPS Officers who looks after the livestock and gardening, did not take place because of COVID-19.

Recommendation: Ensure delivery of the City and Guilds Horticulture course.

The Inspection stated that the curriculum for ‘workshop-based vocational training was an important area for improvement’ as there was no coherent plan to meet the needs of prisoners (CJINI, 2020a, p45-46 and 2020b, p46). Current provision was considered ‘mainly not suitable’ – ‘too few of the construction programmes led to accredited or appropriate qualifications’, ‘too little of it was sufficiently relevant to the women’, ‘facilities were of a poor quality and often closed’, and a significant proportion of workshops relied on individual NIPS instructors or external providers whose absence led to lack of workshop availability.

Recommendation: NIPS should conduct a review of the workshop-based curriculum and resources with a view to ensuring that this provision meets female and male prisoners’ needs, leads to appropriate accreditation/ qualifications and supports progression into employment on release. Further, the vocational workshops should be refurbished, and over-reliance on individual NIPS instructors or external providers for workshop delivery should be addressed.

7. EQUALITY AND DIVERSITY

HBW has an **Equality and Diversity Policy** which requires that all students are treated equally. This policy sets out the legal requirements under Section 75 of the *Northern Ireland Act* which requires public authorities to have due regard for the need to promote equality of opportunity between:

- persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation
- men and women generally
- persons with a disability and persons without

- persons with dependents and persons without.

The promotion of equality of opportunity entails more than the elimination of discrimination. It requires proactive action to promote equality of opportunity and address inequalities experienced by the groups listed. The Policy assists staff, students and the wider HBW team to comply with the law and follow guidance to establish a clear approach to promoting equality of opportunity, eliminating unlawful discrimination, fostering good relationships and making certain that the distinct needs of prisoners with particular protected characteristics and any other minority characteristics are recognised and addressed.

The two ***equality issues raised by prisoners during rota visits*** were expressed difficulty of a Lithuanian student in understanding and communicating with his solicitor, and two women raising concern about staff “overlooking” or “not responding” to ‘Gypsy’ comments made towards them by other women.

HBW has an established ***Equality and Diversity Committee*** (E&DC), co-ordinated by the Governor for Safety and Support and chaired by the Deputy Governor, which meets on a monthly basis. This meeting involves representatives from most departments in HBW. There are also two Student Equality representatives who attend on behalf of women and young men. These representatives are well known across HBW. They meet with the Safety and Support team monthly to raise issues on behalf of their peers so that responses can be prepared for the E&DC meeting. This Committee is attended by 2 members of the IMB from HBW, an Equality Officer from NIPS, a representative from Start360 and the Chaplain. However, representatives from Learning and Skills, and Healthcare, are infrequent attendees.

Recommendation: Every effort is made to ensure the attendance of representatives from Healthcare and Learning & Skills at Equality and Diversity Committee meetings.

The Board welcomes the continued development of the Equality and Diversity Committee and the timely actions taken in support of the recommendations identified in last year’s IMB Annual Report. The Board is also encouraged by the positive feedback contained in the CJINI Inspection reports (CJINI, 2020a and 2020b).

The following ***improvements*** have been achieved this year:

- A programme of events focused on the celebration of diversity has been further developed through senior staff, the participation of student representatives, the Chaplain and the support of multi external agencies. These have included: Cultural Diversity, Chinese New Year, International Day of Families, Disability Awareness, International Women’s Day, World Mental Health Day, International Men’s Day, and Pride.

The Board welcomes the success of these events. However, responsibility for organising

and managing events is generally allocated to one member of staff – often at short notice and on top of competing priorities.

Recommendation: As the E&D Committee develops further, responsibility for events planning and management is shared by the wider team.

- Efforts continue to be made to encourage attendance by, and input from, external practitioners. A representative from the Rainbow Group attended and presented at the monthly E&DC meeting. However, to date other agencies have been unable to attend due to time constraints.

Recommendation: External scrutiny is encouraged by targeted invitations to attend the Committee being sent to the Human Rights and Equality Commissions and other relevant agencies.

- Statistical reports are circulated to all attendees prior to the monthly meeting. This approach enables preparation and quicker responses to issues raised, allowing more time to discuss matters of a strategic nature in terms of student concerns.
- Student representative issues are given priority attention at the E&DC meeting. Consistency of attendance and participation has greatly improved over the year. At year end the female student rep stood down, a replacement was already identified and has been attending subsequent meetings.

Recommendation: E&D awareness training (refresher) is provided to assist student representatives in the execution of their role on the E&D Committee.

- Transsexual Policy. The Board notes that this policy is currently under review at NIPS level. The Governor is fully supportive of this policy and review, including any recommendations from community groups.

The Board commends other elements of **good practice** in terms of E&D witnessed throughout the year. This has included provision of effective support for students identified as Foreign Nationals. All Foreign National students have access to Skype and those not fluent in the English language have been issued with Google translation tablets. These tablets are also located in Reception areas to aid communication on committal. A translation tablet with WIFI has been made available for external escorts to hospital, etc. The Safer Custody team has also established a Foreign National Forum which meets on a monthly basis, creating a safe space for students to raise issues they feel need to be addressed. This Forum is supported by E&D representatives and the Chaplain. IMB has also attended.

A specific pre-committal mitigation plan was developed to support a student with profound hearing disabilities, including:

- Support through the committal process

- Creation of a personal emergency evacuation plan (PEEP)
- Placement with staff and students who had an interest in communicating through signing
- Creating formal contact through a fully trained signer (Librarian)
- Provision of an alert system to waken or attract attention without causing alarm
- Link into Virtual Visits
- Provision of a tablet device for day to day communication.

The Board particularly acknowledges the role of staff and students who, in their own time, proactively learned signing skills to support this student on a day to day basis.

8. HEALTHCARE

Healthcare in Prison

Representatives from the South Eastern Health and Social Care Trust [the Trust], responsible for delivery of Healthcare in Prison, attended the July 2019 Board meeting at HBW. Notes from that meeting, as well as the first of quarterly meetings with the Assistant Director in April 2020, contextualised recent developments [see Appendix 4].

Healthcare in Hydebank Wood

Treatment rooms in Ash and Beech Houses have been refurbished, and air conditioning units fitted. The introduction of biometrics in Treatment Rooms has occurred in parts of HBW, with the intention of rolling this out in every House, although it is not currently [May 2020] being used by Healthcare staff. Soft seating has been provided in the waiting areas within the main **Healthcare Centre**, new floors were laid, and rooms were painted during the autumn.

Healthcare staffing at HBW has been relatively settled after shortages of nurses in the summer, which led to a request for additional staff. The multi-disciplinary team at HBW includes: a Lead Nurse, a team of 8 Primary Healthcare Nurses and 3 Mental Health Nurses, 1.5 Occupational Therapists, a part-time Physiotherapist, a part-time Pharmacist, two Medicines Management Technicians, a part-time Dentist who is on call 9am-5pm, and a Speech and Language Therapist. The two Medicines Management Technicians completed intensive induction training and started work in the Healthcare Centre in November. Their role in administering medication (including 'supervised swallows', now called 'observed administrations') enables nurses to focus on a wider, proactive role aimed at improving the health and wellbeing of individuals in their care. Recognising the higher incidence of speech, language and communication needs among those

in custody compared with the general population,² the Speech, Language and Communication Therapist specific to HBW has been in post since June 2019.

Healthcare provision

Primary Healthcare at HBW is involved with students during the **committal** process, when individuals are also screened by a member of the Mental Health team who 'grades' concerns regarding required interventions. In the future, there is the potential to administer a Speech, Language and Communication Needs assessment while prisoners are on the committal landing (i.e. within their first 2 weeks in HBW). A pilot screening tool is being developed, initially to be administered by the Speech and Language Therapist but with the intention of building the capacity of other staff (Healthcare or NIPS) to conduct the screening and establish prisoners' communication needs.

A pilot '**social prescribing**' initiative aimed at reducing sleep medication was successfully implemented with a group of women in Ash House. A company called 'Elemental' provided the software platform to capture information from the women about what works for them, what they like to do, what they do during the week that helps their wellbeing, what else they could do to avoid use of/ as an alternative to medication. Healthcare staff used a questionnaire to go through these questions, leading to individual records. The women particularly valued work with the animals at HBW and the 'Voices of Release' Choir. Healthcare, Learning and Skills, and PDU staff all have access to this information, which could be used to inform timetabling and the activities offered to prisoners. Plans to commence the scheme with young men have been temporarily delayed by the Coronavirus pandemic. A challenge in HBW is development of activities that appeal to both women and young men.

Recommendation: In partnership with NIPS, the PDU, Learning and Skills, the information gathered during the 'social prescribing' initiative with women is used to inform the education, work, health and social activities offered to females at HBW.

The 'distraction packs' created for prisoners focus on mindfulness, positive thoughts, etc. 'Yoga for all' is being delivered to staff and prisoners. Healthcare in Prison is also considering how certain times could be used differently, with potential for a significant change in the lockdown regime. For example, mental health staff working with groups of prisoners during lunch time to cook and eat together, or engaging in activities during the evenings and at weekends. Healthcare staff have been involved in developing essential skills with prisoners (e.g. Occupational

² In 2017/18, a prevalence study among a sample population at Hydebank Wood found 75% of women and 100% of young men in the sample had speech, language and communication needs (Royal College of Speech and Language Therapists, 2019, p3).

Therapists through making soup; Speech and Language Therapist through story-telling).

Recommendation: Healthcare in Prison explores with NIPS possibilities for flexible timetabling of health-related activities, including during lunch times, evenings and weekends.

Poor **mental health** is a significant issue affecting many prisoners, particularly women. The HBW *Safety and Support Annual Report 2019* (NIPS, 2020a: p15) notes that, on committal, 51% of females and 28% of males disclosed mental health issues. In the inspection surveys 74% of women respondents and 48% of the young men said they felt depressed when they first arrived, 38% of women and 24% of young men felt suicidal (CJINI, 2020a, p83 and CJINI, 2020b, p77).

An initiative in which mental health staff had a pre-transfer visit with young men in the Juvenile Justice Centre to assess their needs enabled relevant plans to be in place when the students arrived at HBW.

According to a senior manager, some prisoners are receiving mental health support in HBW who would not meet the threshold for support from services in their community (e.g. those who would not be assessed as having a learning disability but may be dyspraxic or dyslexic; those not diagnosed with a specific mental health condition). Few individuals in HBW reach the threshold for seeing a Psychiatrist (i.e. severe mental health conditions). They may have mental health issues, but the GP or mental health team should be able to deal with these. Some of their behaviours are 'normal' reactions to living in a prison. Requests to see a Psychiatrist may be more about medication supply than mental health concerns.

Two sessions on **trauma-informed practice** have been delivered to staff and prisoners in HBW. Planned developments include pelvic health initiatives for women, and support to access the trauma service in their own Trust when they are ready to do that. Also being promoted is involvement in activities which contribute to building self-confidence and are 'therapeutic' (e.g. storytelling, 'Voice of Release' Choir).

Recommendation: Healthcare in Prison continues working with NIPS staff and prisoners to promote trauma-informed practice and associated activities.

A 3-tiered approach has been adopted in response to prisoners' **Speech, Language and Communication Needs** [SLCN]: *universal* - public health messaging about good communication strategies for all (prisoners and staff working with them), staff training, groups that anyone can attend; *targeted* - screening and intervention or advice for those identified as having SLCN; *specialist* - liaison with, or referral to, specialist colleagues for those with a specific diagnosis such as autism, brain injury, or stammer.

The Speech and Language Therapist has reviewed and adapted some information provided to prisoners, ensuring understanding for those with poor literacy and language skills. For example, she has developed easy-read versions of the prison exit survey, pelvic health information from the physiotherapist, the information sheet concerning adjudications, and the Tuck List. A key element of the Speech and Language Therapist role has been building the capacity of those most proximal to prisoners and involved in daily routines, encouraging them to “see behaviour, think communication” (i.e. when a prisoner behaves in challenging or unacceptable ways, to consider whether there has been a breakdown in communication or there is something they have not understood). Delivery of a 2-hour ‘Universal Speech Language and Communication Awareness Raising’ session for all staff (Healthcare, NIPS, Education, volunteers) has helped staff understand the role of the Speech and Language Therapist and suggested strategies that can be used to ensure prisoners understand what has been said to them, what this means, and expected responses or changes in behaviour. The 5 sessions delivered to date have involved most Healthcare staff and some staff from NIPS, PBNI, and Psychology. It is intended that these sessions will be offered on an on-going basis, with plans to develop a ‘Speech, Language and Communication’ training framework that will include more advanced, if necessary bespoke, training for staff depending on their role.

The Speech and Language Therapist has supported colleagues during mental health assessments, using a ‘talking mat’ where the individual uses pictures or words to explain things that are going well, things that are not going well, and things that are OK, before identifying areas they would like to work on. She has linked in with Barnardo’s Parenting project, focusing on interactions between parents and their children. She would like to work with small groups of women/ men to suggest how they can engage with children during visits by implementing good adult-child interaction strategies, or develop conversational skills during phone contact with their child by practicing asking open questions. There is potential for preventative work focused on positive parenting and good communication with children of different ages.

Targeted interventions have included small group sessions. Some involve specific groups (e.g. social skills with young men on C2). Others may be generic (e.g. ‘What’s in a picture?’ conversation groups where participants discuss what the picture shows, what they think happened before the picture was taken, what may happen next). Referrals to the Speech and Language Therapist are via the GP. While prisoners may initially question whether they require input from her as they do not consider that they have speech and language difficulties, they appreciate the support provided in relation to communication and understanding. Many seem articulate and confident, but they have often learned coping strategies and understand less than is perceived. Following an assessment, a ‘Communication Tips’ sheet is devised which can be shared with NIPS or Healthcare staff and taken to any appointments or meetings. For each

individual, this outlines: 'What I find hard' and 'What you can do to help me'. In addition to supporting the individual, this provides useful strategies for the professionals working with them.

Recommendation: All staff (Healthcare, NIPS, Education, PDU) and NIPS recruits are enabled to attend the introductory 'Universal Speech, Language and Communication Awareness Raising' session and future SLCN training appropriate to their roles.

A range of programmes throughout the year have focused on *health promotion*. Comic storylines about specific issues have been developed with small groups of young men at HBW. Titles include: *Biz in the Priz* and *Craving the Blues* (about drugs). A short animated video: *Dickey Luvs Doot*, encouraging a positive approach to sexual health by attending check-ups, is available on YouTube. The next planned topic is self-harm. The Public Health Agency [PHA] funded a programme of yoga throughout the year for staff and students, with an average of 8 people attending each week. During 'International Families Day' on 15 May 2019, health information was available to families and prisoners in the Visits Centre, alongside an interactive quiz and bingo. *Men's Health Week* (17-21 June 2019) included a 'food and mood' event, co-designed and facilitated by prisoners, when seven young men baked scones and gave them out around the College along with information about moods. A 'Sports Challenge' included lung age tests and information about men's health, with prizes for strength and endurance challenges. A 'Cancer Awareness' information afternoon took place in the Visits Centre, where information was provided about smoking cessation, care in the sun, and men's health. On 18 July a 'Ten x 9' storytelling event on the Headway Landing in Cedar House involved nine young men telling stories about 'Courage' to a small group of their peers. A 'Yes You Can' information event was arranged for 27 September, when a variety of organisations promoted opportunities for involvement in events, programmes and initiatives.

The Health Development Worker conducted a health survey and recruited participants for 'Take 5 Month' events during November when events focused on mental health and wellbeing using the 'Take 5' health message. Posters and leaflets were available throughout the month, with T-shirts promoting the Take 5 message being distributed to participants and offered as raffle prizes. The events included:

- 2 'Banter for Breakfast' events [message = Connect] – one for women (attended by 30) and one for males (attended by 64).
- Launch of a comic book addressing addiction issues, which had been co-produced by prisoners [message = Keep Learning] – this event was attended by prisoners and external visitors (65 people in total).
- A 'Colour Run' [message = Be Active] (attended by 102).

- A 'Ten x 9' storytelling event [message = Take Notice], where 7 prisoners and 3 staff told stories based on the theme 'Funny' (attended by 29).
- A 'Sponging for Charity' event [message = Give], where staff were put in stocks and sponges were thrown at them to raise money for the Samaritans (attended by 86).

Also in November, a 10-week creative arts/ drama programme of workshops was attended by 12 women each week. To mark Valentine's Day, two 'Banter for Breakfast' events took place on 13 and 14 February 2020. Based on the theme 'Love', this engaged 32 women and 62 young men. Health information, a newly published easy-read *Survivors Guide* and a *Positive Ageing* booklet were available at an event to mark 'International Women's Day' on 8 March 2020. Also including inspirational speakers, fun activities and performance of a song written by prisoners, this event was attended by 97 people. During 'No Smoking Month', on 11 March activities at HBW included provision of health information, carbon monoxide testing, and discussion about smoking cessation.

Recommendation: The range of health promotion activities developed for/with both women and young men throughout the year is continued and recognised as a significant contribution to the health and well-being of those involved.

Specific issues concerning Healthcare at HBW

A Healthcare representative attended 7 of the 11 monthly IMB Board meetings held during the year. Specific topics discussed during Board meetings included: reduced medication; the Healthcare complaints process; dispensing of medication; Healthcare contribution to menus; the proposed No Smoking policy; plans for responding to the Coronavirus pandemic; how prisoners secure an appointment with the Clinical Psychiatrist.

Recommendation: Continued attendance of the Lead Nurse at every IMB Board meeting, alongside quarterly meetings with the AD for Healthcare in Prison.

In relation to **reduced medication**, the IMB has previously noted that it can be distressing for prisoners to have their medication changed when they come into prison, especially if they are only in custody for a short time. Last year's report included the recommendation that prison authorities explore with colleagues in Health the impacts of implementing *Safer Prescribing in Prisons* guidance. Healthcare managers have emphasised that a 'prescriber' makes the decision about the ethics of prescribing. In making an assessment, the prescriber explores why the prisoner takes the medication (i.e. underlying reasons) and why they may not want to stop it being prescribed (e.g. because they are being bullied for their medication or are addicted to it). The Board was assured that individual needs are assessed by the duty GP and reviewed on a regular basis. Emphasis is placed on reducing addictive medication, while acknowledging that over-

subscribing is a significant issue in the community.

Recommendation: Healthcare in Prison conducts an evaluation of the actions taken to reduce tensions arising from reduced medication (including direct communication by the Service User Engagement Officer with individuals who have submitted a complaint to Healthcare) to identify effective practice.

Also previously recommended was a review to assess whether there is a correlation between reduction in medication and incidents leading to prisoners receiving an 'adverse' or being subject to restriction of association under Prison Rule 32. According to NIPS (2020b), in addition to confidentiality issues, this was not possible because Healthcare does not have a marker on the shared systems to indicate whether someone has had their medications reduced.

Recommendation: Healthcare in Prison gathers feedback from prisoners about the impacts of reduced medication, to identify whether this includes receipt of 'adverses' or restriction of association under Prison Rule 35/4 or Rule 32.

The *Healthcare in Prison complaints process at HBW* remains that prisoners complete a complaint form, receiving a receipt when this is given to a Healthcare representative. The complaint is logged for further action.

A *new process for dispensing medication* commenced in Ash House during August, with the intention that regulated timing and management of medication would reduce incidence of bullying. NIPS staff provided support during periods when medication was dispensed, and a new hatch in the Ash dispensing area increased confidentiality. During Residential Forum Meetings, the Governor emphasised the importance of women collecting their medication when their landing was called, rather than queuing up as they left the House for activities, and that those waiting would be expected to stand away from an area at the medical hatch marked by tape on the ground when Healthcare staff were issuing medication. In January 2020, improvements to Healthcare provision were reported by the Lead Nurse to have been beneficial, with dispensing areas in the Houses working well. A 'twilight' nursing shift now dispenses evening medication by 22.00hrs.

Complaints/ Healthcare issues

Healthcare issues were occasionally raised by prisoners during monthly Residential Forums. For example, in September representatives at the Ash Residential Forum talked about staff and nurses being noisy when medication was issued at night, which was raised with the Night Guard SO. In the January 2020 Male Residential Forum a student mentioned how long it took for certain medical appointments. The Senior Officer present explained that appointments were controlled by an external Trust and that there is a separate Healthcare complaints process.

According to a senior manager, **complaints to HBW Healthcare** during the year included 19 informal complaints, which were mostly medication related, and one formal complaint concerning treatment offered. Although solicitors' letters are not recorded by site, very few were reportedly received in relation to HBW.

The majority of **Healthcare queries or issues raised by individual prisoners with IMB members during their rota visits** were addressed through direct contact with Healthcare staff. Where prisoners remained dissatisfied, it was suggested that they submit a complaint to Healthcare, or to the external Patient and Client Council (see Appendix 5).

Some prisoners clearly consider that they have to wait longer than necessary to see a Doctor or Healthcare professional. The most recent inspection reports noted that, although some patients commented about long waiting times to access a GP or mental health nurse, "the SEHSCT's performance data indicated that waiting times were at least equivalent to those in the community" (CJINI, 2020a, p40 and CJINI, 2020b, p39). GP referrals are triaged by primary care nurses and prioritised to ensure those in urgent need are assessed quickly, and each GP clinic includes slots for urgent cases. No barriers to accessing appointments were identified by the inspectors.

As previously, significant issues for prisoners are not receiving their medication on time, medication being reduced, altered or ended. A particular concern for the Board is the length of time taken for a mental health assessment, especially for those who had been receiving mental health support in the community before they came into HBW. The Lead Nurse has confirmed that each person needs to see the GP, who will then refer them for mental health provision if appropriate, in line with community healthcare. The Board is keen to ensure that Healthcare in Prison is receiving up-to-date information about mental health support received in the community by individuals and continues this provision without the requirement of additional assessment or referral.

Recommendation: Mental health provision (medication and/or therapeutic support) received by prisoners in the community before their entrance into custody is continued, without the requirement of additional assessment or referral.

When relevant, and with the prisoner's permission, **concerns about the physical and/or mental health of individuals** were **raised with the Healthcare representative at Board meetings**. She either provided an overview of the current situation or agreed to follow up issues raised (see Appendix 5).

Inspection recommendations

Inspection of the health and social care services at HBW was mainly very positive (CJINI, 2020a, p38-42 and 2020b, p37-42). In terms of governance, services were "well led, staff morale was

good, and health care staff reported feeling valued and supported by senior managers”; bank and agency staff were used to ensure satisfactory levels of staffing; Healthcare staff were “well trained and supervised”, with new staff receiving a “comprehensive and structured induction programme”. Collaborative working between NIPS and Health staff “had improved at strategic and operational levels”, with weekly operational meetings to identify health care priorities. Of particular significance are the statements: “health care staff interactions with patients were professional and respectful. Nurses knew their patients and treated them with compassion and dignity”; “Patients were very positive about their relationship with health staff”; “Patients confirmed that their experience of [mental health] care was good”.

Specific Healthcare recommendations from the inspectorate included:

- The NIPS should work with the SEHSCT to agree and implement a robust policy and procedure for the safe management of medicines held in-possession by patients.
- The disposal of medicines at high risk of misuse or diversion should be recorded and audited.
- Discipline staff should routinely supervise medication administration to maintain patient confidentiality and reduce the potential for bullying and diversion.
- Arrangements for accessing mental health crisis response service out of hours should be specified and communicated to staff.
- Mental health care documentation should record the assessed need of the patient and meet professional standards.
- There should be a systematic approach to the identification of those women eligible for public health screening programmes whilst in prison, with effective oversight and assurance of delivery.
- Patients with substance misuse needs should have access to an intensive programme of psychosocial support.
- A local protocol for prescribing for substance misuse withdrawal should be agreed, implemented and assured.

As part of their role, the Board will note ongoing progress in implementation of these recommendations.

9. LIBRARY

With *refurbishment of the Learning and Skills Centre* ongoing, the Library remained in temporary accommodation until the end of August 2019. During this period, students were able to visit in half-hour slots twice a week and the Librarian visited the landings with a trolley.

In September a more expansive Library opened in the new Learning and Skills Centre with a much larger budget. The Library was open to everyone coming to Education. Each day there were slots when up to four people could go to the Library and spend as much time there as they wished. Most spent approximately half an hour. While there, they could also avail of coffee at the adjacent café.

Two Library Assistants were **appointed**, one male and one female, to support the Librarian. The CSU was visited by the Librarian once a week but students were also able to ask officers to phone ahead to request particular items, including books, CDs and DVDs in different languages.

From September to March, a series of **mixed events and activities** were organised to take place in the Library. These included a visit from members of the cast of the TV series *Derry Girls*; once-a-month visits by the author Stuart Neville; Holocaust Remembrance events; cultural visits by authors, storytellers, members of the Lyric Theatre; and creative writing classes.

There was a **reading aloud session** every Wednesday morning with students given photocopies of the stories being read to help them follow the plot. This was organised through the Reading Charities with whom the College has a 3-year contract, due to expire this year. Three members of staff have been trained to act as readers on the landings and active participation by students is encouraged.

10. RECEPTION AND INDUCTION

Female Reception

Female Reception consists of one large main room; four small, bare holding rooms (two of which are along a nearby corridor); a bathroom; a disabled toilet; a property store and laundry room. Those being committed generally spend less than two hours in Reception. They are given a 'rub-down' search, offered a hot drink and a shower. Their property is processed and placed in the store before they complete a committal interview during which information is recorded directly onto the PRISM system.

In November 2019 the Board noted during its monthly meeting that the **Female Reception** was **considerably more shabby and untidy than the Male Reception**. The inspectorate had also observed that the area "was clean but cluttered with prisoners' property, not just that belonging to new arrivals" (CJINI, 2020a, p19). This had not improved the following month, when toilet rolls and quilts were being stored in the bathroom and there were boxes on the floor around the main area.

The Board also raised with the Governor in November **a lack of privacy for women being interviewed in the main area during the committal process**. This was noted by the

inspectorate as an issue which could inhibit the sharing of confidential information (CJINI, 2020a, p20). The Governor confirmed that he had briefed staff and asked that a 'common sense approach' be adopted (e.g. asking contract workers to relocate if they were present when a committal arrived). Advising the Board that it was a challenge to gain funding for female locations given that a new women's prison is being planned, the Governor accepted that better facilities needed to be implemented and stated that a privacy booth within the main area was being considered via minor works. In April, NIPS (email, 17.4.20) reported that the main area had been cleared, although it could still look untidy on days when a high number of parcels were being processed, and the bathroom was no longer being used as a store.

Recommendation: NIPS ensures parity of provision and standards in Female Reception, with adequate funding provided to ensure privacy for those being committed and suitable storage facilities.

Based on complaints received by IMB members about delays in receiving clothing, having no money on their phone card, transfer of money to their accounts, and delays in receipt of post or post being received externally, in last year's Annual Report the Board recommended that **staff on Female Reception are given adequate time to complete the committal process and other basic tasks** (such as delivery of post, transfer of money, exchange of clothes). NIPS responded that staff would be deployed to cover Ash Reception when operationally possible (NIPS, 2020b), confirming that this was dependent on operational restraints and the number of staff on duty (NIPS, email, 17.4.20). During 2019, 17 out of 238 complaints by women concerned 'Property and Cash' (NIPS, 2020a, p84). This was the fourth most frequently raised category, implying that it remains an issue. At the November Residential Forum in Ash House women complained that Reception was always closed, so they did not receive their visits parcels on time, and that post was not being delivered in a timely fashion. Access to clothing was an issue raised five times by women with IMB members on rota visits.

Recommendation: As previously, staff on Female Reception are given adequate time to complete the committal process and other basic tasks (such as delivery of post, transfer of money, exchange of clothes).

Female Reception is not permanently staffed. The Board noted in February 2020 that Female Reception does not appear to have a pool of trained staff, as there is in Male Reception. During discussion about this issue, the Governor advised the Board that staff working in Reception should be able to conduct committals regardless of the gender of those being committed, although he accepted that there will be occasions when it would be more appropriate to have an officer who is the same sex as the prisoner. He noted that, because more females are committed in a year than males, sending staff to carry out the committal process has a disproportionate

impact on the team in Ash House. When a prisoner is being committed or discharged, staff will be deployed to carry out this process. NIPS (email, 17.4.20) affirmed that, during the day, there are more resources available and this is easier to facilitate without affecting the regime in Ash House. If a committal arrives during the association period, there will be a greater impact. To reduce the impact on landings, the Male Reception officer (if on post and not required in Male Reception) will move to Female Reception, or a Senior Officer will assist where possible. Rather than lockdown one House, temporary restrictions will be imposed in two Houses.

Recommendation: Every effort is made to ensure that redeployment of staff to conduct committals or discharges in Female Reception has minimal impact on the regime for women/ students (i.e. lockdowns on landings).

Female Induction

In February 2019, a ***new programme of induction modules*** was introduced for female prisoners. This extended over five days and was delivered by staff and supporting partner agencies throughout the reporting year 2019/20. Initially the programme was delivered within the Learning and Skills building, then within the Drop-In Centre in Ash House, and finally within the newly opened Fern landing.

The induction content is comprehensive. The first three days covers landing inductions (Modules 1-3, PREPS, CAB and Complaints), Food Hygiene, Mindfulness (Action Mental Health), Barnardo's support, AD: EPT (Start 360), Family Links, gym induction, manual handling and 'Working Well' (NIACRO). During the final two days the content extends to Diagnostic Assessment, Fire Safety, Action Mental Health, Library services, Educational opportunities, winding up with a tour of Hydebank and a visit to The Cabin. A Church Service (Roman Catholic) takes place on Monday afternoons and combined Services inclusive of other denominations take place on Sundays.

Whilst the content delivered over five days may be considered intense, women are also provided with hand-books for reference purposes throughout their time in prison.

Translation services, including tablets, are available for Foreign National prisoners. Staff adapt their ***approach*** depending on the needs of those participating. For example, responding to issues of limited eye-sight, reading ability and hearing. Some staff trained in Makaton are available if required.

Committals cannot begin activities (such as education or workshops) until completion of the induction process but spend most of their time 'out of cell' prior to commencement of induction.

The Board considers that the induction programme fulfils the following objectives:

- Delivery of a clear, comprehensive process of induction.
- Receipt of information on all aspects of prison life.
- Provision made for any limitations presented by Foreign National prisoners and those with disabilities.
- Delivery in a timely fashion at an appropriate level by trained staff and supporting partners.

The Board welcomes coverage of the Landing Module relating to '**Complaints**' at an early stage of the induction programme, strengthened by display of posters about the NIPS complaint procedure throughout the Centre. Given the amount of information received during the induction process, at a time when some women may be overwhelmed by being incarcerated (especially if it is their first time in custody), there should be regular opportunities to 'refresh' their understanding about procedures and readily available information about the support provided by external agencies.

Recommendation: The process to be followed in relation to complaints concerning safeguarding should be further highlighted, with display of additional posters specifically about this issue throughout Ash and other Houses/ landings.

Male Reception

The **Male Reception area** is located close to the main entrance of HBW. The area is clean, tidy and well laid out to support the committal process. It is also utilised for discharges, PSNI interviews, outside hospital appointments as well as laundry and property inquiries within the College. At times this can cause bottlenecks.

However, Reception staff conduct the **committal process** in a smooth and efficient manner with most students (79%) spending less than two hours in Reception. It can be a daunting experience for students arriving at HBW for the first time, but most students (70%) reported in the Inspection survey that they were searched respectfully and treated 'very well' (24%) or 'quite well' (56%) (CJINI, 2020b, p76-77).

Google translation tablets are located in the Reception area to aid communication during the committal of Foreign Nationals.

The Board once again commends Reception staff for the professional manner in which they reassure and process students.

Key activities in Male Reception include:

- Escort to Reception Handover to inform initial Risk Assessments
- Full search and shower
- Processing of property (witnessed by student)

- Initial interview covering all key risk information
- Issue of a committal pack from the Tuck Shop

The Inspection noted that initial interviews in Reception do not take place in a confidential area which may inhibit the sharing of information and recommended that interviews be conducted in a private area to encourage sharing of confidential information (CJINI, 2020b, p19).

Male Induction

A member of staff from the **committal landing** - Beech 1 - escorts new arrivals from Male Reception to their cell. On arrival new students receive bedding, toiletries and a pack containing a few basic items. They have access to the Tuck Shop on the next working day. On the committal landing new arrivals are offered a free telephone call and hot food/ drink. Staff on the landing complete a further interview within twenty four hours to confirm any safety issues, provide some information about life in HBW and issue an information handbook.

Healthcare is informed of all new committals prior to their arrival at HBW and have direct access to their medical records. A snap-shot assessment is carried out by Healthcare staff when the student arrives, followed up by a full medical within seventy two hours of committal.

Student Peer Support (**Buddies**) also meet with new arrivals within forty eight hours of committal.

Induction starts on the next working day and consists of a five day comprehensive course involving sessions by NIPS staff and partners from Learning and Skills, the Gym, the Library, the Chaplaincy, voluntary and community organisations working in HBW. These sessions include provision of information about prison rules, available education and workshop classes, pastoral care, visits, home leave, medical/ social care and support services. Google translation tablets continue to be issued to assist Foreign Nationals and others with language difficulties.

New arrivals are not able to register for education or work until they have completed the induction programme, but spend most of their time on the landing or in induction sessions becoming familiar with the regime and available support.

11. RESETTLEMENT

“The successful delivery of resettlement in our prisons should be one of the primary goals of our penal system and in order to achieve that aim, the preparation for a prisoner’s release should commence on the first day of their sentence” (CJINI, 2018, p5).

This was the introduction to last year’s Annual Report section on resettlement, considered both important and necessary to restate. Cognisant of the many obstacles and difficulties inherent in the rehabilitation and reintegration that makes for successful resettlement, it is nonetheless

crucial that all efforts, driven by research and evidence, are applied. It is also important to note that resettlement is *everyone's* business and that a **coordinated and collaborative approach** is necessary. It is therefore very encouraging to note that a recommendation from the above report - that Probation Officers and NIPS Sentence Coordinators should work more closely together in sentence management - is being realised. Much progress has been made, with joint training initiatives and monthly team meetings shaping and progressing a more collaborative approach to sentence management, led by the respective Probation Manager and Prison Governor.

This progress has been acknowledged in the recently published CJINI Inspection Reports (CJINI, 2020a and 2020b) which stated that, in respect of rehabilitation and release planning, outcomes for prisoners were good. Furthermore, Exit Surveys introduced in April 2019 indicate generally positive feedback, with 66% having engaged with the Personal Development Unit, 86% having followed their Personal Development Plan [PDP], 77% having attended classes via their PDP, and 91% having left Hydebank feeling positive regarding their future (NIPS, 2020a, p13).

The team of sentence managers is very ably supported by prison psychologists, staff from Start 360, an officer from Housing Rights, and the Chaplains - all based and working within the **Personal Development Unit** [PDU]. This Unit's mission is to ensure that prisoners are supported, challenged, and motivated to maximise their time in custody and prepare for their return to the community. It is crucial that all prisoners are clear about the identity, role and purpose of their Sentence Manager.

Such preparation is crucial, as are efforts put in place with the aim of **continuing and sustaining progress** made whilst incarcerated on release. For females, the Engage Programme, a partnership between Probation and Start 360, provides mentoring and support in the community. For young men who face difficulty returning to their community, the Aspire Programme is linked with NIACRO and funded by the Fresh Start Initiative.

As we know, resolve often breaks down as a result of homelessness, financial difficulties, addictions, and mental ill health. Concerns such as these are brought to the Board's attention regularly when members speak with individuals leading up to their release. All of this is accentuated for the high proportion of remand prisoners. Their time within Hydebank is not determined, is often short-lived, and they are not obliged to attend education or engage with programmes or therapy.

The introduction of **peer mentors trained in Housing Rights** has been a positive development given the often reported concern expressed by individuals about where they are to live following release, as has the commencement of 'survival bags' and recharging of a prisoner's mobile

phone at the time of release. An impressive range of voluntary and community organisations provide specialist services (e.g. NIACRO, Barnardo's, the Irish Football Association and Turnaround). The Turnaround project (an employment-based initiative which offers bursaries) supported five young men from the Working Out Unit in the past year, with two remaining with it post-release.

This year saw the introduction of a new programme - '**Beyond Violence**' - for women sentenced for violence-related offences. Designed, developed and delivered by female prison psychologists, this sought to look beyond the violence and deal with underlying trauma. Whilst it has not yet been formally reviewed, it has been considered successful and there are plans to deliver a second programme. One of the participants described it to a Board member as "good, but it's bringing up a lot of stuff", emphasising the importance of the provision of follow-up care and support.

Additionally, the introduction of a **Women's Safety Worker** has been encouraging. This post commenced in October, with a female prison officer working largely in the community alongside Probation and Women's Aid to educate and support both perpetrators and survivors.

The **Working Out Unit** in Willow enables young men close to release, who have been assessed as low risk of reoffending, to live and do paid work independently. It normally houses 2-3 students. They are provided with a Translink card for transport to work, doctor, dentist and solicitor etc. The Board is impressed with the facilities available in this Unit which include a kitchen with washing machine and tumble dryer, a games room, TV room and a dining room with two dining tables; encouraging ownership of this area. This year saw the successful release of 4 young men from the Unit. Three were returned to closed prison due to breach of rules. With the Covid 19 restrictions in place at the end of March this Unit was closed and its two occupants were placed in Murray House (empty at that time for working out females). However, this facility is also now not in use resulting in no working out opportunities. The Board would wish working out to be renewed when circumstances allow as it provides tangible preparation for resettlement within a College environment.

Recommendation: As soon as circumstances allow, the Working Out Unit for young men is recommenced.

Murray House has continued to provide 'working out' opportunities for females, albeit with occupancy lower than full capacity (i.e., 6). Like Willow, it depends on women attaining specific criteria and adhering to the rules. This year saw the successful release of 7 women from Murray House, with 3 who reached Murray House being returned to the general population for breach of rules.

Recommendation: Given its vital role in the transitioning phase and in resettlement, ensure that Murray House is fully utilised, with adequate preparation and bespoke support for the women accommodated there.

2019/20 has seen significant and very encouraging improvement in preparing prisoners for their release back into the community and in the follow-through to help reduce further offending. However, there remains room for continuing improvement and development. As pointed out in the recent inspection, it is important that a **Resettlement Needs Assessment** is designed and utilised as soon as is possible – especially given that just 33% of males reported that someone was helping them prepare for release (CJINI, 2020b, p55), compared with 68% of women (CJINI, 2020a, p54). Whilst it is accepted that the Prison’s responsibility effectively ceases when the prisoner leaves the establishment, a coordinated and structured action plan, devised in collaboration with the prisoner, is necessary. Based on assessment of needs and building on the purposeful activity carried out during their sentence, this should be developed in partnership with relevant support organisations.

Recommendation: A Resettlement Needs Assessment is designed and utilized to support development of coordinated, structured pre-release planning with individuals.

The Board’s concerns regarding all too frequent return to offending behaviour soon after release, often leading to a ‘revolving door’ back into HBW, were mirrored by the Inspectorate. The Board supports the recommended establishment of a system to monitor the number of individuals in substantive **accommodation** 12 weeks after release to determine longer term outcomes (CJINI, 2020a, p56 and 2020b, p55). If such data were collected, it could serve to inform any changes necessary within the existing regime at Hydebank to enhance resettlement.

Recommendation: A system is established to monitor the number of individuals in substantive accommodation 12 weeks after release, the difficulties experienced by ex-prisoners and potential changes within HBW’s regime to enhance resettlement.

12. SAFER CUSTODY

When a state deprives someone of their liberty, it takes on the **duty of care** to protect and promote his/ her physical and mental health and well-being. This duty of care is critical because those in prison have no alternative but to rely on the authorities to promote and protect their health. This is recognised internationally in the *UN Minimum Standard Rules for the Treatment of Prisoners* and also in Article 2 of the *European Convention on Human Rights* which imposes on states a positive duty to safeguard life. Where there is a threat to the life of someone in the custody of the state there is a heightened responsibility to provide protection irrespective of

whether this arises from a third party (for example bullying) or directly from the person themselves. Nationally, domestic legislation in the form of the *Corporate Manslaughter and Homicide Act 2007* acts as a permanent reminder to improve the way “custody providers” manage and care for individuals in their care.

Over the course of this reporting period there have been no deaths in custody at Hydebank. The Board is aware of occasions when the professional actions of both NIPS staff and partner agencies have undoubtedly contributed to the saving of lives of those engaged in a serious self-harm attempt or suicidal actions and wishes to acknowledge those actions.

In HBW’s unannounced inspection in early November 2019, the establishment received a “4” in the area of ‘safety’ (as well as in the areas of ‘respect’ and ‘rehabilitation’) and a “3” in ‘purposeful activity’. These findings acknowledge the hard work being undertaken by NIPS staff and partner agencies at Hydebank.

Many reports have highlighted the ***vulnerable nature of those in custody*** and there is compelling evidence that the social and psychological profile of those in prison is poorer than that of the general population (see CJINI, 2019, p16-18). Concerns remain that prison does not provide the therapeutic environment required for those with complex needs. With specific relevance to Hydebank, many of the young males have high levels of need and vulnerability while many of the women have serious social, health and emotional problems which are exacerbated by the relatively small population and confined nature of Ash House.

In November 2016, the Ministers of Justice and Health announced a joint review of vulnerable people in custody as a result of 5 deaths in prison custody in 12 months. After a three and a half year delay the RQIA commenced the planning stages of this review, originally scheduled to be undertaken in 2020. However this has been temporarily paused in response to the Covid-19 restrictions.

The Board is grateful to the Safety and Support Team for supplying the following statistical information on committals for the year up to December 2019. There were 336 male committals throughout 2019, with an average of 28 per month. This was reported as a 4% reduction from last year. Just over a quarter of male committals disclosed mental health issues and just over three quarters disclosed drugs use. There were 352 female committals throughout 2019, with an average of 29 per month. This was reported as an increase of 11% from last year. Of those, half disclosed mental health issues and half disclosed drugs use.

SPAR Evolution

The means by which the NIPS deal with those in distress throughout all three establishments is now called **SPAR Evolution** (Supporting the Person At Risk). This is the newest means of taking all practical and reasonable steps to ensure that prisoners who identify as being at risk of self-harm or suicide are effectively managed. It was introduced for women in September and for the young males in December 2018, with full implementation of the relevant IT across Hydebank in June 2019. This new 3-part process will be used throughout the NIPS estate. A concern raised about an individual results in one of three possible outcomes: “no apparent risk” - whatever has caused the initial concern has been or can be addressed and there is nothing to indicate self-harm or suicide; “no apparent risk with referrals” - nothing to indicate self-harm or suicidal intent but referral to another agency can provide necessary support; “at risk” - a risk has been flagged up and the person requires assistance from partner agencies, monitoring every 30 or 60 minutes, and development of a care plan.

The previous SPAR process had been subject to criticism for perceived over-use of observation cells and anti-ligature clothing and care planning aspects which tended to be protective rather than proactive in identifying the underlying issues leading to concern. This SPAR Evolution process revolves around the devising of a person-centred care plan that addresses and reduces risks while providing support to the individual. This should include details of: the environment; referral for interventions or additional assessments to the GP, mental health team or other agencies; support and interventions provided. Where possible, access to usual activities and education should be maintained and the person remains in their own cell unless the risk of self-harm is high. If placed in an observation cell, the person should be in their own clothes.

According to statistics supplied by Hydebank Safety and Support Team, there were 72 **SPARs** (those “at risk”) opened in the male population during 2019, a reported 69% reduction (decreasing from 234 in 2018). Among the females, 84 SPARs (those “at risk”) were opened in 2019, a reported 38% reduction (decreasing from 135 in 2018). This is a combined total for males and females of 156 SPARS compared to 369 in 2018. To put the situation into perspective, just over a third of the males and almost half of the females had an “at risk” care plan opened within 72 hours. 6% of both males and females had more than one “at risk” care plan and accounted for 57% of all SPAR “at risk” care plans. Over the course of 2019, for both males and females, there was a noticeable reduction in the use of observation rooms and associated special clothing.

Additional statistics covering the first three months of 2020 show the number “at risk” to be 48 in January, 37 in February and 30 in March (when the Covid 19 restrictions began). These numbers

include the total for males and females and amalgamate those raised by Reception and Residential staff.

It is important to remember that, although Hydebank has a low population compared to the other two prisons, a much higher proportion of both males and females are subject to safety and support supervision - the number of SPARs raised, the number of self-harm incidents recorded and the number of observation cell authorizations for the males and females have historically been high compared to the other two establishments (CJINI, 2019, p70).

The main reasons given for either opening a care plan (“at risk”) or raising a concern primarily centre around issues such as actual or potential self-harm; low mood; drug/alcohol issues; suicide attempt; unusual behaviour being exhibited; thoughts of suicide and thoughts of self-harm. There is no doubt that Board members on rota visits have noticed a tangible positive difference in atmosphere throughout the College. Whilst events can happen spontaneously, members agree that the College appears calmer than in previous years. A number of reasons have been advanced at various forums as to why these **positive developments** have occurred over the course of this reporting period:

- Full implementation of the SPAR Evolution process has led to the concentration of finite resources on those in most need of intervention while at the same time acknowledging concern about others and, if necessary, making referrals to partner agencies. The new approach now assesses everyone on committal.
- Fern Unit (formerly the “mothballed” Willow 1 wing for males) was opened over this reporting period in response to growing numbers of females being sent to Ash House. It houses female committals and those going through the induction process. This has arguably lessened tension within Ash, especially on Ash 1 which had housed new committals AND those segregated under Rule 32 procedures. As well as giving new committals a calmer environment in a different part of the site before being introduced to a landing in Ash House, this has also provided opportunities to prevent drugs/ unauthorized articles reaching the wider population. The Board is very supportive of this innovation and its continuance.
- As mentioned in last year’s Annual Report, females subject to a SPAR were monitored for longer. A question acknowledged by NIPS staff was whether male SPARs were being closed too soon, possibly without addressing underlying issues. A sense of bravado amongst this age group may have been a contributory factor in that the young males may have had difficulty in admitting their issues on an emotional level. However, over the

reporting period this gap has closed. Now care plans for males remain open for an average of 8 days (previously the average was 5 days) and females for 9 days.

- Over this reporting period, NIPS 'keeping safe recording and monitoring procedure' went from a paper-based, red A4 SPAR booklet to a more discreet tablet format. Lack of confidentiality and "stigma" issues associated with these booklets, which were visible to other students and regularly seen on class officer's desks by Board members on rota duty, could have inhibited individuals from seeking help.
- A more regular number of purposeful activities throughout the core day is evident, with more off-landing activities available compared to previously.
- A younger NIPS staff age profile now exists at Hydebank. Board members regularly hear first names being used between staff and prisoners, leading to improved rapport. Prisoners now appear more willing to ask for help and interaction has improved.
- There has been enhanced emphasis on a rehabilitative approach throughout NIPS, underpinning a clear "culture change".

Apart from the summer months of 2019 in Ash, there have been no overcrowding issues with doubling up rare, especially in the male estate.

With specific relevance to self-harm incidents, it was mentioned at a Safety and Support Steering Group meeting in October that there are **concerns** staff may not be recording all acts of self-harm on the NIPS recording system (PRISM). This has been highlighted to senior officers at operational meetings. In response to a serious complaint from a young man (to the IMB, NIPS and Healthcare) about the alleged unsympathetic and inappropriate reaction of a Night Guard, the Governor agreed to provide additional SPAR Evolution training for Night Guards.

The Board understands that an evaluation of the SPAR Evolution process is due to be undertaken by the Head of Prisoner Wellbeing. This will include possible IT amendments to the process, taking into account staff feedback. The first training sessions for Healthcare staff on SPAR Evolution commenced in late 2019 when four Healthcare staff were trained. Further training sessions are to be arranged. The Safety and Support Team has suggested that a residential senior officer should be at each training session so that there is a consensus of understanding between NIPS operational staff and nursing staff about the process.

Healthcare staff do not use PRISM so are unable to open a care plan on someone that they are concerned about - all concern forms are opened by a class officer, although an initial concern can be raised by anyone. It was mentioned at a Safety and Support meeting in November that

this means second- or third-hand information could be misconstrued when putting these concerns into the SPAR system.

The **Safety and Support Team** at Hydebank consists of a Governor, senior officer and two officers. The Board is very supportive of the positive impact the Team can have. For example, their expanded roles in male and female residential areas include: attending all “at risk” SPAR reviews; supporting and being a point of contact in relation to issues such as bullying or the needs of Foreign Nationals; co-working with other departments on referrals. The Team contributes to weekly operational safety meetings regarding Antisocial Behaviour [ASB] and other notable incidents that have occurred, providing a focus for the forthcoming week. The Board has witnessed how this entire Team has a genuine interest in, and knowledge about, those in their care often using innovative ideas and solutions to assist those deemed vulnerable. The Team relocated into the PDU [Personal Development Unit] last year, improving inter-agency links.

Safety and Support Meetings

A **monthly Steering Group** meeting covers the most recent monthly statistical safety and support information. For example, those deemed “at risk”, an analysis of trends or patterns and emerging issues, a substance misuse report, significant events, Samaritans contribution etc. Once again the Board has been impressed with the time and effort contributed to these meetings by the Safety and Support Governor, specifically with use of pictorial analysis demonstrating in an easy to view format any statistical “hotspots” or instances worthy of note. ‘Heat maps’ have highlighted when acts of self-harm were most prevalent over a six month period. Self-harm continues to be an issue predominately occurring from 7pm onwards among males and throughout the day among females with a higher incidence of self-harm on Tuesdays for women. For the males there was a higher incidence of self-harm on Mondays and Saturdays (most incidents occurring in Cedar). This information was forwarded onto residential staff, making them aware of these optimum periods. Unfortunately, owing to various operational constraints, this Steering Group can be relatively poorly attended, specifically by Healthcare (Primary Care and Mental Health), Probation and Psychology. It is particularly regrettable that these departments cannot attend, even if only for part of the meeting, as their knowledgeable insight and contributions would be beneficial.

In addition, **weekly Safety and Support meetings** occur every Thursday afternoon. These centre on specific individuals, both male and female, referred to safety and support due to them giving cause for concern at that time. On average 4-5 individuals are discussed per meeting, where a review takes place to clarify the current situation. Valuable interaction and information sharing takes place between the Safety and Support Team, mental health staff, primary

healthcare staff, residential staff, Start 360 and pastoral support. Latterly there has been insightful collaboration with the Speech and Language Therapist. Those referred to the meeting are discussed in depth and will continue to be reviewed until a consensus that this is no longer necessary. A local innovation is the “Top 10” combined category, which focuses on those who have featured in one or more areas (such as: high number of SPARs, reported self-harm, drug referrals/ test failures and high number of adjudications) to identify those who, although not currently a cause of concern, have been previously and ensure they do not go “off radar”. The Board appreciates the time and effort devoted to collating information for these meetings.

Recommendation: Where operationally possible, every assistance should be given to facilitating attendance of relevant staff at Safer Custody meetings.

Board members have attended **Serious Case Reviews** concerning individuals, noting impressive levels of input in these meetings and commitment to development of plans to address prisoners’ needs.

Staff training

The Board understands that all NIPS recruits receive **mental health** awareness training which covers a wide spectrum of disorders and a specific session on autism. Recruits are also given a session on ‘SafeTalk’ - an accredited course which helps staff identify people who are having thoughts of suicide and what resources they can use to help the individual get through their crisis. All this training is generic as the classes include recruits for all 3 prison establishments.

In the Hydebank Wood College specific improvement plan of 2018/19, the ‘learning and development’ section noted that there would be consultations with staff and partner agencies to identify training needs and opportunities for staff at Hydebank, particularly in relation to **working with women and young people** in custody. The Board understands that staff involved in individual personal development plans for females have received training about domestic violence and abuse. The Board is supportive of this being available to more staff. It is understood that Adolescent Criminal Behaviour and the availability of more female-specific training is to be reviewed for both recruits and established staff.

Recommendation: Recognising the uniqueness of the population at Hydebank, and building on identified training needs, a bespoke syllabus focused on the needs of women prisoners and young men should be available for new NIPS staff posted to Hydebank and to aid individual continuing professional development for existing staff.

Bullying/ Antisocial behaviour

Bullying behaviour can take many forms in Hydebank: verbal, non-verbal, physical, extortion or simply being subject to rumour-spreading. It may be overt or covert. Experience has shown that young males in the 18-21 age group are more prone to overt physical outbursts and threats (e.g. through a lack of inhibition, lack of empathy etc.). Females, largely but not entirely, employ more covert means of bullying (e.g. not interacting with or excluding from a group activity). A Security Information Report [SIR] is submitted following every reported bullying incident.

The proportions of recorded bullying and violence were higher amongst the women in Ash and the young males in Beech and Cedar than those concerning adult males in Maghaberry and Magilligan prisons (CJINI, 2019, p79). During rota visits, IMB members received verbal complaints about bullying or alleged threats by other prisoners and staff (see Appendix 3). Of particular concern were complaints from a young man about having been released after a long period in the CSU without evidence of concealed drugs/ unauthorized articles and two complaints about alleged excessive use of force by staff during C&R incidents (one from a young man in the CSU, the other by a woman).

Bullying awareness is part of the induction process, with the Safety and Support Team involved in this. Following the investigation of a bullying incident, one possible way to resolve the matter is to move either the victim or the perpetrator to another location within the prison. However, at Hydebank there is very limited scope for this.

Among the males, statistics show that there were 69 incidents of reported **antisocial behaviour** over the 2019 period involving 45 perpetrators and 43 victims. This was a 21% increase from last year and equates to around 13% of the male population being either a victim or a perpetrator. (It is important to remember that some incidents are reported but the perpetrator is not identified, plus some victims and perpetrators are involved in more than one incident.) For the females there were 77 incidents of reported antisocial behaviour over 2019 involving 46 perpetrators and 49 victims. This was a 24% increase from last year and suggests that around 12% of the female population was a victim or a perpetrator.

In order to provide a more consistent approach across NIPS to antisocial behaviour the *Challenging Antisocial Behaviour (CAB) Policy* was amended and rolled out throughout Hydebank in 2018. This new approach includes a Concern Form, whereby staff report if they believe something is going on without having to wait for someone to self-report an incident (for example staff noticing that someone has more or less tuck than they should or is wearing someone else's clothes). There was a rise in CABs in the first six months of 2019 with high

numbers of committals coming into Ash, although this rise subsequently reduced despite relatively high female numbers. This could have been because residents were gaining support from each other. It was mentioned in the Steering Group in July, when female numbers were in the 80's, that perhaps doubling up in certain circumstances could have a "therapeutic" affect. The Steering Group meeting in July also acknowledged that staff awareness about male CABs needed to be improved as Senior Officers were opening CABs with information provided by staff, but staff needed to know that they could open CABs themselves. A booklet explaining the process was developed for staff. Interestingly, it was highlighted at a Steering Group meeting in January 2020 that there were no gangs or patterns of behaviour - most cases were a one-off incident. Among the females, issues were mostly "low level" (e.g. washing machine usage).

Towards the end of this reporting period, workshops to consider development of an antisocial behaviour policy and IT solution across NIPS were due to take place. This included the particular needs of women and young males in Hydebank in respect of violence, antisocial behaviour and bullying. It also mentioned use of a restorative approach to address prisoner conflicts, particularly as in Hydebank there is limited scope to move individuals.

Following the Board's recommendation that a ***Restorative Justice approach*** be established at Hydebank as a means of resolving low level conflict, in 2019 two members of staff facilitated conferences in both the male and female estates. These staff have an initial meeting with the parties involved, allowing them to gather information and ascertain if both parties are willing to engage in restorative justice. Staff write a report based on the outcome and any recommendations, which is sent to the Safety and Support Team. This approach now includes a Hate Crime element. However, the Board understands that during this reporting period the number of staff trained in Restorative Justice had, for a period, reduced to one. The Covid 19 position means that staff have been deployed to meet operational need and Restorative Justice is currently suspended.

Recommendation: The Restorative Justice approach is expanded, with a bigger pool of staff trained to facilitate this approach.

Peer support schemes

There is much academic research suggesting that an effective method of reducing incidents of suicidal behaviour and self-harm at one extreme, alleviating low mood at the other, is the implementation of some sort of 'peer support' scheme (for example, a listening scheme; a buddy scheme; or an insider scheme). As individuals who are also in custody, those who participate in such schemes are often the first to recognise signs of distress in others. Listeners are prisoners who volunteer, fulfil certain criteria, and receive training from the Samaritans. Listeners should

be available on request to help other prisoners feeling distressed or contemplating suicide/ self-harm; providing peer support on a confidential one to one basis. Over this reporting period there was no Listener scheme operating in Hydebank. The Board has previously advocated the creation of such a scheme. However, in both male and female populations the available pool meeting criteria established by the Samaritans has been too small therefore it has not been viable. Suitable numbers can go up and down. For example, in last year's report it was mentioned there was one Insider and one Buddie, whereas in July 2019 there were six Buddies and two to three Insiders. Lack of maturity and short sentences also impact on numbers.

The current situation is that there are Insiders in Ash House who perform a valuable role in mentoring and peer-supporting other women. However, they do not perform the role of a Listener. Similarly, on the male side there was a Buddie scheme providing peer support to new committals. Although not Listeners, the Board understands that the Samaritans have agreed to pay extra attention to these schemes.

Hydebank-specific activities

A number of activities have occurred within Hydebank throughout this reporting period which are relevant to the sphere of safety and support. The Board welcomes these activities highlighting localised innovation:

- The Board distributed information posters next to wing-based complaints boxes to improve awareness of the IMB. This was specifically welcomed by the Ash Governor as an additional avenue to raise awareness about the IMB as a future point of contact if someone has an issue.
- Over the course of this reporting period there have been monthly Residential Forums covering Ash, Beech and Cedar, providing welcome opportunities for residents to contribute to discussions about the Hydebank environment, raise issues and make requests. Relatively small changes to their environment, suggested by them, can make a big difference to the mental wellbeing of those in custody.
- Activity Packs, first introduced last year, have been used during this reporting period as a distraction whenever someone was finding things difficult (especially during lockdown and Covid 19 restrictions). These packs include crayons, activity sheets, crosswords etc.
- "Tea and Talk" evening sessions were organised by Start 360 staff to bring Ash residents together with no pre-determined topic or agenda - simply providing an opportunity to generate discussion. This occurred one night a month, with plans for up to two a month. It is hoped these sessions will be rolled out to males as well.

- The 'Voice of Release' choir encourages males and females to participate in singing as a means to improve their mood and decrease stress levels. Practice night is Thursday.
- In February 2020 the females worked with a local singer-songwriter to write and perform a song on International Women's Day.
- Safety and Support staff initiated Boccia seated bowls as an activity, initially over the Christmas period and thereafter as required. This occurs in the Association Rooms. Also bingo and quizzes have been used to generate interaction and have reportedly been very popular.
- Electronic tablets enabled with Google Translate have been issued to non-English speakers. At its most basic level the tablet device allows the person to ask for help, direction or support so reducing potential isolation and enhancing their wellbeing. Wi-Fi has been incrementally extended throughout Hydebank.
- A wrist watch Bluetooth device has been acquired for use with deaf students - an officer activates the device which vibrates to alert the user that someone is trying to contact them.
- An Exit Survey was introduced in April 2019 in an attempt to obtain feedback from those being discharged - a simple but effective way of gaining prisoner views on specific areas to inform development. It was not compulsory to complete the survey but encouragement was given to do so. An easy to read version was created with assistance from Speech and Language staff. In the specific area of 'Safety' some positive responses were provided.

Samaritans

The Samaritans are one of the main partner agencies involved in the Hydebank monthly Safety and Support Steering Group. The two representatives who attend are very enthusiastic and have participated willingly in a number of innovations.

The Samaritans usually visit Hydebank on a Wednesday evening, 1730-1900, with 2-3 volunteers and can be a valuable resource in the sphere of safer custody. All requests for the Samaritans phone are recorded by staff. Apart from the normal means of contacting the Samaritans (i.e. using the PIN phone landing or the portable earpiece/ phone at night) a referral box was installed in each residential unit last year to allow those in custody as well as staff (with the person's consent) to make referrals. This is checked every week. In addition to weekly visits, the Samaritans also have "awareness nights" every 2-3 months. After one in June last year there were 6 follow up calls. These nights include distributing tea coasters, beer mats and arm bands with the Samaritans phone number and general discussions with both the males and females.

Anecdotally, it is reported that the females have become more “relaxed” with the Samaritans. Latterly they also visited those in the CSU.

Over the course of this reporting period, posters have been distributed throughout HBW to display ‘awareness night’ information. Pre-paid envelopes are now available for those who want to write to the Samaritans directly. It is planned to have small cards printed, which can be handed out on committal, detailing what the Samaritans do and how to get in touch with them. The Samaritans have provided officer awareness training to new recruits, typically of 45 minutes duration.

13. SEGREGATION – CARE AND SUPERVISION UNIT (CSU)

This year has seen significant change and improvement in the Care and Supervision Unit [CSU] which segregates young men who have transgressed prison rules or whose association is restricted to maintain good order and discipline or to ensure the safety of themselves/ others under Prison Rule 32. In July, a couple of months later than originally planned, a **newly refurbished CSU** opened on Elm 3. This was managed by the Safety & Support Team, which was involved in the planning and delivery of a new regime with an increased therapeutic focus. The Unit’s design has taken into consideration the various senses, with décor and furnishings chosen to minimise tension and assist de-escalation. This new Unit includes a calm room, a private phone booth, a bright and airy dining/ living room with gym equipment, a TV & X-Box. Rooms specifically for interviews/ one to one counselling/ programme work and for adjudications have been included. This is a huge improvement on the previous CSU. Most importantly, cells have been substantially upgraded and designed to create a more therapeutic, normalised atmosphere, all (with the exception of two special accommodation rooms) having plumbed-in cell toilets. The two special accommodation rooms have been provided to replace the traditional ‘dry cells’ – instead of a chamber pot, they have a portable toilet with a waste trap for recovery of drugs or concealed items. A large yard is available, with outdoor furniture and table tennis which helps reduce tension and aid relaxation. Additionally, acupuncture therapy is provided by staff from Start 360.

The Board is pleased that its recommendation from last year regarding the CSU has been completed and would like to congratulate management and staff for creating a much improved environment for young men who are segregated.

It remains disappointing that there is still **no specific area/ Unit for female prisoners** who are **assessed as requiring segregation**. Instead, female prisoners are segregated in their own cell or in a part of Ash 1 landing that can be separated by a gate. This has an impact on the other women on that landing who are locked while those segregated are ‘out of cell’. Whilst it may have been an untypical situation, it was concerning that in January 2020 seven women on R32 were

confined to their cells on A3 and A4, which affected the other women and placed additional stress on the staff on these landings. It would appear, until a bespoke and independent Women's Prison is in place, such unsatisfactory situations may continue. However, as with the introduction of Fern Unit for committals, some thought should be put into the creation of a more purposeful and therapeutic area for those women who require segregation.

Recommendation: NIPS, in partnership and with the support of relevant others, considers the establishment of a specific area/ Unit for those women who require segregation.

Segregation of a prisoner results either from an award of Cellular Confinement following adjudication or, more usually, the application of Prison Rule 32 [R32]. Within the male population, there were 131 **R32's** in this reporting year, involving 74 young men. This ranged from 43 individuals placed on R32 once, to 3 placed on R32 five times. The majority 58 (44%) were drug related, with 25 (19%) for concerning behaviour, 21 (16%) in response to violence, 19 (15%) in relation to concealed articles, and 8 (6%) for other reasons.

In terms of days completed, 56 (43%) young men were on R32 for up to 3 days, and 11 (8%) for 4 to 7 days – so just over half were on R32 for 7 days or less. Of some concern, 17 (13%) were on R32 for more than 3 weeks, including 4 (3%) who completed more than 42 days. A significant number returned to the general population before the end of an agreed extension following the initial 3 days on R32 – 56 (43%) returned 1-3 days before the end of their extension, 11 (8%) 4-7 days before the end of the extension. A quarter had between one and four weeks of the R32 extension remaining when they were returned to a landing: 22 (17%) had 8-14 days remaining, 8 (6%) had 15-21 days remaining and 5 (4%) had over 27 days remaining. This can be for a number of reasons, including: items being handed over, improved behaviour and engagement, and reduced risk.

Amongst the female population within Ash House, there were 42 R32s in this reporting year involving 36 women. The majority, 20 (48%) were drug related, 8 (19%) were for concerning behaviour, 6 (14%) for concealed articles, 5 (12%) for violence, and 3 (7%) for other reasons. For women, the length of time on R32 was generally shorter, with just 5 (7%) held between 22-28 days and 1 (2%) between 36-42 days. No female was held for more than 42 days. Again, a significant number were returned to the general population before the end of their extension – 16 (38%) 1-3 days early, and 6 (14%) with 4-7 days of the extension remaining. Almost one third had between 1 and 4 weeks of their R32 remaining.

According to NIPS (email 1.5.20), use of R32 has been a contributing factor in reduction of drugs entering Hydebank. This has subsequently led to a decrease in the number of behavioural incidents, use of C&R, self-harm, SPARs / Care Plans, use of observation cells, and emergency hospital admissions.

Following the welcome introduction of an **Oversight Committee** (which meets every Tuesday afternoon) to consider each R32 following an extension of the initial 72 hours, the Board noticed an increase in recommended extensions of 'up to 28 days'. This was mostly when a prisoner was suspected of concealing drugs on the basis that this recommendation would be considered by a HQ Governor and then the Oversight Committee would review the situation weekly. This was a concern as 28 days of isolation is a long period. As stated by the UK NPM (2017) Guidance *Isolation in detention*: 'isolation practices must only be used when absolutely necessary, for the shortest time possible, and be proportionate to the legitimate objective for which they are imposed'. Board paperwork has revealed that a significant number of such recommended extensions for males were reduced to 14 days by HQ Governors. These matters have been raised with the attending Governor at monthly Board meetings. The Board is committed to its role within the R32 process and attendance at Oversight Committee meetings, particularly in encouraging a purposeful and therapeutic regime within the CSU and development of a clear exit strategy for each student.

Recommendation: Welcoming the weekly Oversight Committee, discussion and subsequent actions should focus on minimising the length of time prisoners are confined under R32 and the support required to enable their return to the normal regime.

'**Special accommodation**' (formerly 'dry cell') was used during this year on a number of occasions within the CSU. However, NIPS (email 1.5.20) has stated there are no definitive figures illustrating the proportion of those situations in which drugs/ concealed items were recovered. Such items may be recovered in communal areas and are therefore not attributable to a specific person, or flushed down the toilets in the ablutions area. Sometimes there is a delay between a person leaving one of these cells and the waste trap being checked, making any recovery found not attributable. The Board considers that use of a special accommodation cell is questionable if it does not lead to clear evidence of a recovery.

It would appear that the Board's previous recommendation, for staff who work within the CSU to receive **training in trauma-informed practice**, has not yet been progressed. This should be considered, to promote and enable good quality interactions and increased understanding about possible reasons for/ effective responses to challenging behaviours.

Recommendation: As previously, all staff deployed within the CSU are trained in trauma-informed practice.

14. SPORT AND RECREATION

The **staffing** issues mentioned in last year's IMB Annual Report, which had previously impacted on the delivery of Sport and Recreation activities, have been addressed through recruitment and

Gym staff are, in the main, able to deliver a full regime.

In response to the IMB Recommendation regarding additional **facilities solely for the use of women**, a separate female Gym was created. Female prisoners were involved in the design and decoration of this area and have access to it throughout the day. They also have access to the Ash Gardens area in which to unwind and relax.

Pre-Covid, indoor activity provision centred around the **Gymnasium** where there is a wide range of free weights, fixed weight equipment, cardiovascular equipment, treadmills, spin bikes and rowing machines. In addition, there is a climbing wall and all students, male and female, can be provided with equipment to engage in court sports such as badminton, netball and basketball. Some landings, though not all, have some cardio gym equipment such as rowing machines. Limited opportunities to use the Gym was an issue raised with Board members on rota duty by 2 students in the CSU. In February 2020, 5 young men in Cedar, a young man in Beech and a woman in Ash all complained about limited access to the Gym. All landings have supplies of various board games.

Males and females have had routine access to the **outdoor all-weather and astro-surfaced areas** for supervised structured activity, walks, circuits and football. Uptake by both males and females has generally been good although there is a greater uptake from the young males.

During the year a wide variety of **events and activities** linked to Sports Associations have been provided, including:

- Male and female sports days
- Colour Run
- Yoga
- Belfast Knights Wheelchair Basketball Team coaching and experience
- Female Volleyball
- Prison Fellowship Football
- Headstart Courses
- Manual Handling
- Staff v prisoners football matches
- Irish Football Association 'Stay Onside' Programme
- Ulster Boxing Council & Irish Amateur Boxing Association non-contact boxing course – a first in NIPS establishments. Carl Frampton visited HBW in February 2020 to present certificates to the 15 students who completed the 10-week IABA course.

Recommendation: Every effort should be made to continue to encourage high profile, local sportspeople to visit Hydebank and cement links with the 'outside' community.

15. TUCK SHOP

The Tuck Shop is a **popular and well used resource** for all prisoners. The CJINI inspection report (2020b, p32) commends the Tuck Shop for providing “a wide range of groceries, often at prices well below those in the community. New arrivals had access to the shop within their first 24 hours. Weekly shop orders were managed efficiently and effectively.” While appreciating that there is always room for improvement, the fact that no recommendations were made either in the CJINI report or in the 2018-19 IMB Annual Report would indicate that this resource is working well. This is further borne out by the Inspection surveys in which 75% of women and 78% of male residents responded ‘Yes’ to the question ‘Does the shop sell the things that you need?’ (CJINI, 2020a, p86 and 2020b, p80).

There have been **extra lines added to the list of provisions** which include make-up, hair products and matchstick sets. These additions are in direct response to requests from the women and students, indicating that staff are keen to meet the needs of the population, as far as possible.

The Residential Forums provide a useful mechanism for prisoners to raise **requests**. During the year male students requested to be informed about any changes and asked if face to face provision could be extended. The Tuck Shop now puts up notices on every landing to notify prisoners of changes, such as new lines or price increases. There were plans to extend face to face shopping in the Tuck Shop for the whole of the prison and to enable Cedar 5 to order from the supermarket outlet. These plans have had to be delayed due to Covid-19. However, they will be commenced as soon as circumstances allow. Given the value that prisoners place on the Tuck Shop, these will be welcome additions to the practice of the Tuck Shop.

The Speech and Language Therapist noticed that the **Tuck Shop list** may not be easy to navigate for those with language or learning difficulties. Whilst in broad categories, items are listed in alphabetical order (rather than grouped according to types of product). An easy to read version with pictures was devised and the Speech and Language Therapist is currently working with the Dietician to add dietary information (e.g. about sugar, levels of fat content, gluten free options) to inform health and well-being. The revised version will be laminated and put on landings. This is a laudable example of identifying a need and staff responding in a way that promotes inclusivity while also using an opportunity to help prisoners make healthy choices.

At the time of **committal** the Tuck Shop supplies a pack (including tobacco if required) to tide the prisoner over until they get their own tuck order. Again, this is a commendable feature of Tuck Shop practice, which signifies thoughtfulness in trying to support the men and women.

Of note is the practice of **those with ‘Enhanced’ status** being able to apply to **work in the Tuck Shop**. The benefits of this opportunity include development of numeracy skills and customer service, as well as increasing an individual’s confidence. Consequently, prisoners have gained a

renewed interest in signing up for Learning and Skills courses to build on the informal learning they have gleaned from their experience in the Tuck Shop. The value of this involvement should be commended and will contribute to the resettlement of those who have worked in the Tuck Shop.

16. VISITS

For those in custody, maintaining positive relationships and family contact are important factors in influencing how they cope with imprisonment. Academic research indicates that those with more stable family relationships are more likely to be stable prisoners (Farmer, 2017). Keeping in contact with family and friends can have an important role in the rehabilitation and resettlement processes.

The physical location of the **Visitors Centre** at Hydebank is at the front entrance of the College, convenient to the visitor's car park. The current arrangements to allow largely "free flow" unescorted visits from individual Houses to the Visitors Centre appears to work well. Normally it is approximately a 5 minute walk. To aid identification, male students wear a blue lanyard and are subject to a search when they arrive. Those not deemed suitable for unescorted movement are escorted by staff and wear a red lanyard. Again, they are subject to a search upon arrival. Females from the Enhanced wings in Ash are unescorted, whilst the remainder are searched prior to being escorted by staff to the Visitors Centre.

The Visitors Centre itself provides a pleasant environment and visits are conducted in as relaxed a manner as possible. Over the course of this reporting period NIACRO assumed responsibility for providing support services, including a small refreshments trolley. The normal visiting times are: Monday closed; Tuesday-Friday afternoon from 2pm; Saturday and Sunday can facilitate morning and afternoon visits. The Board commends the bright, comfortable and more child friendly space inside the Centre. A small family visiting room at the rear allows time with those who have children. It has toys plus a TV, tea/coffee and two small settees. There is an enhanced visits room which can facilitate up to three students and their visitors with separate seating available. Both these rooms are kept neat and tidy. Additionally, in the main visiting area, there is a small child's play area with various distractions and toys available.

At the end of last year's reporting period the seating was replaced with heavy free-standing, multi-coloured tables and chairs, with 3 chairs and a table per visiting group. The Board is supportive of this more contemporary environment. The former worn and partially stained blue carpet in the main visits area now has been replaced with blue laminate flooring. The walls and general decor are much brighter and include wall-mounted TV's at one end. The introduction of frosted glass in

the two closed visits rooms has served to “de-escalate” situations where students believed that others were looking in on them.

In keeping with the NIPS *Strengthening Family Relations Strategy*, the Board understands that when operationally available it is intended to have a **Family Officer** in visits to offer support and information to families visiting those in custody; providing an opportunity for them to raise concerns and smooth the visiting process. This is a good idea as, after a long trip to visit someone in custody, it is beneficial to pinpoint a “point of contact”.

Continuing on from last year, the Board welcomes continuation of the concept of “embedding” **Family Induction days**. These are held in the main visits hall, with each agency setting up a stall to explain to guests what they provide at Hydebank. This has included a short tour of the College. Under normal circumstances, this happens every quarter.

Additionally the Board welcomes the fact that a number of **family/ children’s parties** have been held. In October a Halloween party including a magician took place and attracted a large crowd. The first ever Christmas Twilight market was organized as well as the Annual Carol Service. The Visitors Forum made decorations, some students and their families had dinner with NIPS staff and on Christmas Eve there was a children’s party.

There are also plans to construct a small children’s play area at the rear of the Visitors Centre, including an animal corner and BBQ area, but this is on hold due to Covid-19.

A **Barnardo’s Family Worker** has delivered one-to-one support to help prisoners develop parenting skills and late last year started the “Being a Dad” programme. At Christmas, personal stories read by Dads were burnt onto a CD along with an illustrated story book and formed part of a Toy parcel and food hamper.

Away from the Visitors Centre there is the option of a **“Caravan” visit**. These are available to book for those with young children who meet the criteria for use. They are generally held at the weekend for a period of 5 hours, commencing at 10am. The individual puts in a request to use the caravan. If granted, this is booked by visits staff. An accompanying adult brings the children over to the resident where they make their way to the caravan for the duration of the visit.

The College also has a cafe called **“The Cabin”** which is used by both staff and students. Female students can progress to working in The Cabin after working in the main kitchen. As a reward for their work in the main kitchen, those on Enhanced regime are permitted a Cabin visit at the

weekend, on a monthly basis. The Cabin visits are in addition to normal visits and their visitors can have lunch with the student for a nominal cost.

The Board welcomes the continuation of the **Visitors Forum**, again strengthening links between NIPS and families, which meets in the Visitors Centre every other Thursday. The idea is to encourage families to support each other by sharing experiences; developing a network of support and providing opportunities for feedback.

Approaching the end of this reporting period in March, visits were suspended in all Northern Ireland prisons in response to Covid-19 and 'virtual' visits were facilitated through use of Zoom and Skype.

REFERENCES

- CJINI (2018) *Resettlement: An Inspection of Resettlement in the Northern Ireland Prison Service*, CJINI, May 2018
- CJINI (2019) *The Safety of Prisoners Held by the Northern Ireland Prison Service*, CJINI/ RQIA, November 2019
- CJINI (2020a) *Report of an unannounced inspection of Ash House Women's Prison Hydebank Wood, 23-24 October & 4-7 November 2019*, CJINI/ HMIP/ ETI/ RQIA, June 2020
- CJINI (2020b) *Report of an unannounced inspection of Hydebank Wood Secure College, 23-24 October & 4-7 November 2019*, CJINI/ HMIP/ ETI/ RQIA, June 2020
- DoH/ DoJ [Department of Health/ Department of Justice] (2019) *Improving Health Within Criminal Justice, Strategy and Action Plan*, June 2019
- DoJ [Department of Justice] (2019) *The Northern Ireland Prison Population 2018-2019*, September 2019
- Farmer, Lord (2017) *The Importance of Strengthening Prisoners' Family Ties to Prevent Reoffending and Reduce Intergenerational Crime*, Ministry of Justice, August 2017
- NIPS (2020a) *Safety and Support Annual Report 2019*, February 2020
- NIPS (2020b) *IMB Action Plan 2018-2019 - Summary*, January 2020
- Prisoner Ombudsman for Northern Ireland (2019a) *Annual Report 2018-2019*, October 2019
- Prisoner Ombudsman for Northern Ireland (2019b) *Inside Issues: Summer 2019*
- Royal College of Speech and Language Therapists (2019) *Response to the Probation Board Northern Ireland Draft Corporate Plan 2020-2023*, October 2019

**HYDEBANK WOOD COLLEGE & ASH HOUSE WOMEN'S PRISON
INDEPENDENT MONITORING BOARD MEMBERS
1 APRIL 2019 - 31 MARCH 2020**

IMB Member	Appointed	Status
Ann Adams	10/06/13	~
Claire Aitken	01/04/19	~
Clive Smyth	20/05/13	~
Deena Haydon	01/04/16	~
Hazel Patton (Chair)	31/07/13	~
John Watson	01/04/19	~
Michael O'Hara	01/04/19	~
Pip Jaffa	01/04/19	~
Yvonne Adair	01/04/16	~

APPENDIX 1: THE WORK OF HYDEBANK WOOD IMB

The **Hydebank Wood IMB Board** consists of 9 members, with 4 new members appointed in April 2019. In addition to receiving a guidance manual, they joined new members from the two other Boards for Induction Training provided by current members and the IMB Secretariat in March 2019.

The Board has **monthly meetings**. The Governor or Deputy Governor attend to report about events and developments in Hydebank over the previous month, and respond to matters arising from rota visits or specific issues of concern. The Lead Nurse is also invited to attend to report on staffing and initiatives within Healthcare at HBW as well as responding to healthcare-related issues raised during the previous month's rota visits.

When necessary, the Board arranges **additional meetings** to consider specific issues or topics. During 2019-2020 this included a meeting focused on areas of responsibility and preparation of next year's Annual Report (October 2019).

Members carry out weekly **rota visits**, usually in pairs, when they visit each prisoner in the CSU and every House landing plus other areas of Hydebank (e.g. Learning and Skills Centre, gardens, gyms, male Working Out Unit, Murray House for women, the kitchens, the Cabin). In addition to following up any prisoner's request to be seen (placed in a box on their landing), members speak informally to prisoners and staff as they move around the site. Any issues raised by prisoners or staff are noted in log books and followed up with relevant personnel.

Posters aimed at **raising awareness about the IMB** were discussed in May, agreed and produced in August 2019. These have been displayed by the IMB box on each landing. Privacy Notices and Key Messages about the role of the IMB were also produced on small cards, to be given to prisoners when an IMB member first introduced themselves. A Freephone number for prisoners to contact the IMB Secretariat went live in February 2020. This number is included on any relevant literature and NIPS staff were notified of the number by email, with a request that this be included in induction information about the IMB.

IMB members stopped visiting HBW when the **Coronavirus pandemic** led to a UK 'lockdown' in March 2020. The Freephone number was provided to prisoners via a message on the IMB box on every landing and a system was established whereby the Secretariat contacted the IMB member on rota duty if a prisoner rang the Freephone number. The person on rota duty would then make arrangements to speak with the prisoner by phone in confidence, following up any issues raised with relevant NIPS/ Healthcare personnel by phone or email. To date [end of May 2020], no prisoners in HBW have used the Freephone. Regular contact has been maintained with the prison through weekly telephone updates from the Deputy Governor to the Chair of the Board, which have then been circulated to Board members via email. In addition, individual Board

members have received regular telephone updates from the Lead Nurse regarding Healthcare, and from Governors concerning Equality and Diversity as well as Safety and Support, which have also been circulated via email to all Board members.

Throughout the year, members on rota duty have been notified about forthcoming **Rule 32 reviews** and every effort has been made to ensure that each review is attended. The weekly Rule 32 Oversight Committee has also been attended by an IMB member up to March 2020.

Board members have attended **events held at Hydebank** throughout the year, including Prisons Week Service and Carol Services.

The IMB is represented on, and attends, a number of **Committees** in Hydebank: monthly Equality and Diversity Committee meetings; monthly Safer Custody Committee meetings and, whenever possible, weekly Safety and Support meetings.

IMB members attended **training** throughout the year. During 2019-2020 this included: observation of Control and Restraint [C&R] training delivered to prison officers; Suicide Awareness; GDPR (on-line modules); Adjudications; R32s; SPAR EVO and PRISM; fire training; Equality and Diversity. Individual members attended workshops provided by external agencies for NIPS staff about: Cultural Awareness; Speech, Language and Communication Awareness. They also attended a presentation: 'Supporting and Challenging Women in Our Care' and one member joined the 'Towards ZERO Suicide Project' Forum.

All members of the Board usually attend the **IMB AGM**, with colleagues from the two other prisons in Northern Ireland, in March. However, as a result of the Coronavirus pandemic, this year's AGM has not taken place.

Three members of the Board were elected members of the **NI IMB Executive Council**. They attended quarterly meetings to discuss and agree policies and procedures across the three Boards (29.4.19; 5.8.19; 11.11.19; 10.2.20). Separate meetings of the Council were held (21.10.19; 2.3.20) to consider implementation of recommendations within the Kerr Review of the IMB in Northern Ireland.

The Board Chair and/or Vice-Chair have had **meetings with other monitoring bodies**. The Chairs of the three IMB Boards met representatives from the Criminal Justice Inspectorate [CJINI] when they discussed: the CJINI Report on Pre-Release Testing; the new SPAR EVO process; and a forthcoming CJINI report on *Prisoner Safety* (14.10.19). The Chair and Vice-Chair of HBW IMB met the lead Inspector during the October 2019 inspection of HBW. Regular contact has maintained with the Prisoner Ombudswoman, via telephone and email.

The **UK NPM** [National Preventive Mechanism] comprises bodies with powers to enter places of

detention in the four UK jurisdictions of England, Wales, Scotland, and Northern Ireland, including: prisons and young offender centres, police custody, court custody, secure accommodation, mental health institutions, immigration detention, military detention, customs custody facilities. The role of the UK NPM is to independently monitor instances of torture and other cruel, inhuman or degrading treatment or punishment of those detained; make recommendations to authorities to improve treatment and conditions, and prevent torture or other ill-treatment. IMBs are one of the 21 bodies constituting the UK NPM. It was agreed that, where relevant, IMB members would raise matters concerning any inhuman and degrading treatment at Board meetings, enabling on-going recording of information which can then be reported whenever the UK NPM requests examples. Representatives of HBW IMB attended UK NPM Business Meetings (25.6.19 in Belfast; 12.11.19 in Edinburgh; 10.3.20 in Belfast). It was noted that papers for these meetings arrived with little notice, restricting prior discussion by Boards and therefore inhibiting contribution to meetings.

The UN Sub-Committee on the Prevention of Torture visited the UK in September to assess the extent to which the UK NPM discharges its duties, established in the Optional Protocol to the Convention Against Torture [OPCAT], and to examine how the UK Government is supporting performance of this role. Members from each IMB in Northern Ireland joined colleagues from the UK NPM at a preparation workshop on 25.6.19, and to meet representatives of the Sub-Committee in London on 10.9.19. HBW IMB submitted information to inform the CAT Committee review of the UK (written submission 22.3.19; pre-sessional meeting 6.5.19; review of UK by Committee 7-8.5.19) and the *UK NPM Tenth Annual Report* published in March 2020.

It has been proposed that a sub-group of Northern Ireland NPM members (comprising representatives from CJINI, RQIA, Prisoner Ombudsman, and IMB) could be established. While recognising an existing gap in communications between NPM members in Northern Ireland, the HBW Board sought clarification about the purpose of this proposed sub-group and questioned whether its focus would be exchange of local information or NPM processes and profile (February 2020).

Board members have **hosted visitors** to HBW. A guided tour of HBW was provided for a Churchill Fellowship recipient from Australia who was interested in the role and implementation of the UK NPM (April 2019). A Senior OPCAT Inspector from New Zealand, on a fact-finding visit to Northern Ireland, attended a Board meeting to discuss relevant issues including lockdown incidence and reasons (June 2019). The Assistant Co-ordinator of the UK NPM was given a tour of HBW by the Chair of the IMB prior to the UK NPM Business Meeting in Belfast (June 2019).

APPENDIX 2: FACT SHEET RE ACCOMMODATION

FEMALE ACCOMMODATION

Ash House is a stand-alone residential unit within Hydebank Wood Secure College, adjacent to Beech and Cedar Houses for young men. It houses the majority of the female prisoners on the HBW site. Ash House has five self-contained landings, each with a servery and association area. Every room in Ash 1-4 has a hand sink with hot and cold water, together with a toilet.

Ash 1 was used as a first night centre for committals and for induction purposes until July 2019. It may be used at times for women confined under Rule 32 or confined to cell following an adjudication, who are held at the end of the landing beyond an additional grille.

Ash 2 houses Enhanced women.

Ash 3 and **4** house women on all three regimes: Basic, Standard and Enhanced.

Ash 5 houses mostly Enhanced long termers (i.e. serving 2 years or more).

Thus Ash 1, 3 and 4 are feeder landings for students to progress to Ash 2, 5 and Murray House.

Two observation rooms are located on Ash 1, and one on each of Ash 2, 3 and 4.

Ash 2 and Ash 4 each have a double room which has been adapted for disability features or alternatively may be used as 'Mother and Baby' units.

Shower and Bath facilities are located in communal rooms on each floor. The ground floor of Ash House includes a hairdressing classroom, a communal seating area, a training kitchen, a multi faith room, a drop-in centre, a medical room and an adjudication room.

Due to increased numbers of female committals and related issues, in July a new landing known as **Fern** was established within the **Willow** unit to receive committals. There are 20 rooms including one observation room together with an association room, kitchen, servery and communal showers. Generally, women are transferred to a landing in Ash House after induction is completed, unless there are special circumstances necessitating a longer stay in Fern.

A 4-bed unit - called **Primrose** - was established in January 2020 in part of the Healthcare Centre. This includes accommodation suitable for a 'Mother and Baby' as there are two association rooms, one for adults and one for 'Mother and Baby', together with a kitchen and bathroom.

After the start of Covid-19, separate accommodation was established within **Elm**, with use of a recreation area, laundry and kitchen in Willow, for women working in the Kitchens or the Cabin.

An **isolation unit** for female committals was also established in **Willow 3**.

Murray House is a six-bedroom unit for females nearing the end of their sentence. It houses those requiring little supervision who are working in the community.

MALE ACCOMMODATION

Hydebank Wood was opened as a category 'C' Young Offenders Centre in 1979. In November 2012, the establishment stopped holding male juvenile offenders between the ages of 16 and 17. From May 2016, it was given 'Secure College' status, holding sentenced and remand young men aged 18-21.

There are four residential units for young men. Two, Beech and Cedar, are used in full.

Beech has four landings providing 64 cells.

Each room in Beech 1-4 has a hand sink with hot and cold water together with a toilet.

Beech 1 is used as the committal landing for young men. Generally students are transferred to another landing after induction is completed.

Beech 3 is used for Enhanced students.

Beech 2 and 4 are used for students on all three regimes: Basic, Standard and Enhanced.

Cedar has five landings, providing 74 cells.

Cedar 1 was used to deliver the 'Headway' programme until October 2019.

Cedar 2 holds young men vulnerable for various reasons, including the nature of their offence.

Cedar 3 and 4 are used for students on all three regimes: Basic, Standard and Enhanced.

Cedar 5 is a low supervision landing for Enhanced students.

Shower facilities are located on each floor.

The ground floors of Beech and Cedar include classrooms and medical rooms.

Willow has a landing used as a '**Working Out**' Unit for Enhanced students who are working outside the establishment.

One of the landings in **Elm** was refurbished to create a new **CSU** for young men, which opened in July 2019.

During the Coronavirus pandemic, an **isolation unit** for male committals (who were isolated for 14 days) and those showing symptoms of the virus was located on **Elm 2**.

APPENDIX 3: COMPLAINTS

NIPS analysis of complaints demonstrated that, among the males at HBW, five complaint categories covered 50% of the total 320 complaints during 2019. These included: education (40); harassment (34); staff (32); adverse report (29); property and cash (26). The categories covering 50% of the total 238 complaints by females included: accommodation (44); harassment (34); staff (19); property and cash (17); and visits (13) (NIPS, 2020a, p52-53 and 84-85). Given the fact that they are more frequently raised by both females and males, the areas of harassment, staff, property and cash require particular monitoring. Although statistics about NIPS complaints are circulated and discussed at Equality and Diversity Steering Group Meetings, it is difficult to assess the seriousness of complaints under these broad categories.

Prisoners are also able to submit a complaint to the **Prisoner Ombudsman** if they consider that their complaint has not been addressed via the two-staged NIPS internal complaints process. However, during 2018-2019 the Prisoner Ombudsman received just 1 individual complaint from a male and 6 from female prisoners at HBW (compared with 365 from Maghaberry and 36 from Magilligan), stating: "Like young men in custody throughout the UK, those in Hydebank Wood made little or no use of the official complaints system; and complaint rates from the women prisoners in Ash House have always been very low" (Prisoner Ombudsman for Northern Ireland, 2019a, p14). In her most recent annual report, the Prisoner Ombudsman noted that samples of complaints raised by prisoners at Hydebank Wood/ Ash House and Magilligan prison were conducted during 2018/19 to assess whether complaints closed at stages 1 and 2 of the NIPS internal complaints process had been dealt with fairly and provided an adequate response to the complainant. In relation to HBW, 74% of male complaints and 63% of female complaints were deemed to have been dealt with appropriately, with evidence of proper investigation and adequate stage 1/ stage 2 responses. However, "there was evidence of significant flaws within the internal complaints process", leading to recommendations for improvement (Prisoner Ombudsman for Northern Ireland, 2019a, p14). The six recommendations concerning HBW, provided to NIPS in May 2019, included:

- NIPS ensure that the Complaint Details form is signed and dated by the complainant at each stage of the complaints process, and that the signed and dated form is then retained and stored.
- NIPS ensure that all complaints raised by prisoners and placed in complaint boxes are removed and recorded on PRISM within 24 hours.
- NIPS review their existing guidance to staff regarding the purpose of the initial residential managers' interview with prisoners.
- NIPS ensure that all complaints raised are handled correctly and adequately investigated at all stages and that appropriate responses are provided to the complainant.

- In conjunction with the office of the Prisoner Ombudsman, NIPS should provide information to prisoners that clearly explains the Internal Complaints Process, the time limits associated with each stage and the process for escalating a complaint to the next internal stage or to the Prisoner Ombudsman's office.
- That NIPS provide details of work that will be undertaken to address the various negative perceptions outlined above. (Prisoner Ombudsman for NI, 2019b, p2).

In addition to the formal complaints procedure, prisoners can raise issues through the landing representatives who attend monthly **Residential Forums**. Chaired by the Residential Governor or a Senior Officer, these meetings open with an explanation of the purpose of the Forum. The previous month's action points are discussed, with an explanation of reasons if an issue was not actioned or addressed. This is followed by consideration of: Centre Notices, complaints, upcoming events, and details about operational issues or information provided by the Governor. From April 2019 to February 2020, in Ash House Forum the latter focused on: wearing of lanyards, the ASDA spending limit, painting of ablutions and cells, an open gym pilot, high numbers, opening of Fern landing, introduction of room compacts, opening of the new Learning and Skills Centre, process for collection of medication, smoking policy and consultation, religious services, orderlies, experience of visits, furniture for A5, plans for Christmas, incidence of poor behaviour, R32 regime and development of a CSU for women, planned work in Ash, opening of a Mother and Baby Unit in the Healthcare Centre. In the Male Residential Forum the issues noted by the Governor throughout the year included: the new PREPS regime introduced in April 2019; criteria for family visits; refurbishment in male Houses, including floor replacement in Cedar; weekend activities, potential boxing classes, sports day over the summer; introduction of a new timetable and a Record of Achievement for each individual; knowledge of student co-ordinators; timetables for use of washing machines; introduction of the 'Failed Drug Test Programme'; availability of Matchstick model sets; application to go to B3 landing and expectations regarding move from B3 to C5.

The Forums end with a discussion of issues or requests made by the prisoner reps, with associated action points noted. These provide a useful insight into the everyday concerns and topics of importance to prisoners. Between April 2019 and February 2020, the range of issues raised by women in Ash House, included:

- an information folder for new residents to A2 and access to basic food hygiene/ cookery classes for those moving to A2 or A5 [Enhanced landings]
- access to cleaning materials

- PREPS regime (particularly privileges available to women who were Enhanced but not resident on A2 and A5 as these Enhanced landings were full, extension of Cabin visits to Enhanced residents)
- food trolley movement and rota
- negative impact on the regime for Committals of women placed on R32 being located on A1 [Committal landing]
- accommodation (e.g. lack of ventilation in kitchens, presence of silver fish on all landings, sanitary bins not being emptied, heating not working)
- evening and weekend activities, board games for landings, requests for gym equipment on landings and greater access to the Gym
- difficulties exchanging bedding which is badly worn or damaged, mattress protectors on A2 and A5
- equipment replacement or orders (e.g. washing machines, tumble dryers, kettles, microwaves, toasty machines)
- item orders (e.g. crockery, cutlery, pots and pans on A2 and A5; skype tablet and items for the Mother and Baby Unit; better quality hair straighteners, hair dryers, umbrellas)
- bubble officer to call 'Roman Catholic Mass' rather than 'RC Service'
- access to razors on A2; replacement of damaged furniture
- milk storage
- cleaning rotas on landings
- volume of noise on landings
- reception being closed, post and parcels not being delivered
- skype on A2 and A5 not working
- legal correspondence being opened
- claim forms for women whose property was destroyed during an incident in A3 association room
- contingency plans for the Coronavirus pandemic.

Issues raised by young men in the Male Residential Forums during the same period included:

- evening and weekend activities, new Xbox games, repairing pool/ snooker tables
- Sunday cooking classes
- item orders (e.g. toasty machines and breadbins on landings)
- orderlies (role at weekends, serving of food)
- enjoyment of healthy eating week and request for more healthy meals as well as bigger portions
- backlog of appointments for haircuts

- weights sessions in the mornings rather than at 17.30;
- how to come off 'red cards' (i.e. restricted movement);
- more football sessions and attendance at the gym during the day;
- Tuck Shop list changes and provision for Foreign Nationals;
- access to airers to dry clothes;
- PREPS regime (particularly incentives to become Enhanced; progression from B3 to C5/ C5 to Willow Working Out Unit; privileges for those on C5;
- trial of mixed classes;
- possibility of setting up a savings account in preparation for release;
- the price of phone calls;
- time taken for medical appointments;
- being able to purchase a newspaper without having a visit; and
- accessing SKYPE.

The monthly Residential Forums provide a very useful, regular opportunity for prisoners to raise issues, make requests and suggestions as well as remain informed about operational policies and practices.

Issues concerning complaints

Last year the Board considered that ***prisoners lack confidence in the NIPS complaints process***. When prisoners mentioned examples of alleged unacceptable behaviour by staff, including Night Guards, to IMB members during rota visits these were raised with the Governor at Board meetings and he agreed to follow up via discussion with the relevant Senior Officer. During discussion at the October Board meeting about dissatisfaction with the NIPS complaints process expressed to IMB members by prisoners, the attending Governor noted that the Prisoner Ombudsman's Office holds an open meeting for prisoners on Tuesday afternoons in the L&S Centre and the CSU.

The Board also recommended that ***consideration should be given to an evaluation of the current NIPS complaints process***, including: timescales, procedures, and level of satisfaction with outcomes. NIPS reported that it has been working with the Prisoner Ombudsman to raise awareness about the complaints procedure and implement an action plan to address issues raised by the Ombudsman's audit of complaints (NIPS, 2020a, p54).

During discussion of complaints at the Ash House Residential Forums throughout the year, individual concerns included: a complaint staying in the complaint box until it was too late to investigate it; an interview being conducted close to the person being complained about; complaints routinely not being responded to within the established time limits, although an

apology was received when this happened and the response did deal with the issue raised. The Residential Governor encouraged prisoners to speak to her directly if complaints were not collected daily or they were dissatisfied with responses. From September 2019 to February 2020 no issues concerning complaints were raised. In November and January it was recorded that the women felt submitted complaints were taken seriously, with respectful replies which dealt with the issue raised.

The recent inspection noted that responses to complaints “were tracked and monitored effectively”, with complainants seen face-to-face within 24 working hours in 98% of cases and an apology given if this was not the case. Written responses were “polite, detailed and usually addressed the issues raised”, explanations were clear, and apologies were given where appropriate (CJINI, 2020a, p37 and 2020b, p33). In the prison exit survey, comments indicated that “over 80%” of respondents said their complaints had been dealt with satisfactorily (CJINI, 2020a, p37 and 2020b, p33).

However, throughout the year, prisoners continued to raise with Board members on rota duty issues relating to the current procedure, including: complaints being left in the CSU Complaints Box for over a week (x2), prisoners reporting that they had not received any response a week after submitting a complaint (3 young men in Cedar, 1 in Beech, and 1 woman in Ash), and dissatisfaction with the response received (2 young men).

Complaints or issues raised with IMB members during rota visits between 1.4.19-31.3.20

Following removal of NIPS complaints boxes from every landing to a single box on the ground floor of each House, several **NIPS complaints** have been **posted in IMB boxes**. In each case, an IMB member checked with the prisoner whether they wished the complaint to be posted by them in the NIPS complaint box to progress through NIPS procedures. This was usually agreed by the prisoner, although occasionally they withdrew the complaint. If the prisoner wanted the IMB to take action, this was generally a conversation with relevant personnel to clarify the situation/ events and seek resolution to a perceived problem. The IMB member then reported the outcome of their face-to-face discussion or email correspondence to the prisoner. If a prisoner decided to engage in the NIPS complaint process, or to involve their legal representative, the IMB withdrew from the process. Occasionally, the IMB suggested that the prisoner contact the Prisoner Ombudsman’s Office.

Complaints or issues raised with IMB members on rota duty are recorded in log books during each visit to Hydebank. With the prisoner’s permission, these are followed up with relevant personnel (e.g. on the landing, in Healthcare, in the Personal Development Unit, or specific Governors). Significant, recurring, or unresolved issues are raised with the Healthcare Lead Nurse and/or the attending Governor at monthly Board meetings.

During the year 1.4.19 – 31.3.20, the issues most frequently raised by women concerned:

- Healthcare in Prison (physical and mental health) (see Appendix 5).
- Sentence Management (including accommodation post-release, provision for long-term prisoners, liaison with their Sentence Manager, home leave, and the 'Beyond Violence' Programme).
- Staff/Prisoner Concerns (including bullying by other prisoners and by staff/ Night Guards).
- Discipline (including PREPS regime, adverse reports, use of PDD, adjudication, C&R incident).
- Accommodation (including clothing, laundry, having no hot water, ablutions, heating, overcrowding on A5, use of A1 Committals landing for R32s, loud music at night).

The issues most frequently raised by young men in Hydebank throughout the year related to:

- Discipline (including use of the PDD, complaints procedure, adverse reports, PREPS regime, red card).
- Purposeful activity (including access to the Gym, Lockdowns, education/ vocational programmes, work allocation, time out of cell).
- Accommodation (including heating, ablutions, clothing, cells, equipment on landings and association rooms).
- Healthcare in Prison (physical and mental health) (see Appendix 5).

SUMMARY OF ISSUES RAISED WITH HYDEBANK WOOD IMB

2019-2020

WOMEN ON R32, ASH HOUSE AND FERN COMMITAL LANDING

Category	Issue	No. of times raised during the year		
		R32	ASH and FERN	TOTAL
A	Accommodation , including: Cells Ablutions Heating Laundry Clothing Loud music at night Use of A1 for R32s Access to facilities Overcrowding on A5 No hot water	1	1 1 2 3 1 1 1 1 2	14
B	Discipline , including: Adverse report Adjudication PREPS regime level Searching Complaint procedure Use of PDD [Passive Drug Dog] C&R incident	2	3 1 8 1 1	16
C	Equality and Diversity , including: Discrimination re disability, gender, sexuality, religion, culture (Travellers, Foreign Nationals)		2	2
D	Purposeful activity , including: Education Vocational programmes Work allocation Library Gym Association/ Time out of cell Lockdowns/ Lockups/ 'Firewatch'	1 1	5 2	9
E1	Communication , including: Letters/ Mail Visits Telephone Skype Communication within HBW Caravan visits Befriender		2 4 4 1 1 1	13
E2	Finance , including: Wages Private monies Spends		3 2	5
F	Food (quality and quantity)	1	4	6

	Kitchens (equipment, maintenance) Having to push trolley		1	
G	Healthcare in Prison , including: Physical health Mental health Social care	1 2	13 4	20
H1	Property within Hydebank Wood			
H2	Property during transfer or in another establishment/ location		1	1
H3	Prisoner purchases , including: Canteen Facility list Catalogue shopping Tuckshop			
I	Sentence management , including: Parole Release date Re-categorisation Home leave Move to Murray House Probation 'Beyond Violence' Programme Accommodation after release Provision for long-term prisoners Sentence Manager		2 2 6 5 4	19
J	Staff/ prisoner concerns , including: Bullying/ Harassment/ Verbal abuse by other prisoner Alleged assaults by other prisoner Bullying/ Harassment/ Verbal abuse by staff Alleged assault by staff Night guard		11 4 1	16
K	Transfers			
L	Miscellaneous , including: Health and Safety Drugs Rule 32 Segregation Someone claiming coffees against her name when not in Education for 3 weeks Allegedly received threat from ex-partner -> passed to Security, who agreed to pass to PSNI		1 1	2

SUMMARY OF ISSUES RAISED WITH HYDEBANK WOOD IMB

2019-2020

CSU, BEECH AND CEDAR HOUSES

Category	Issue	No. of times raised during the year		
		CSU	Beech and Cedar	TOTAL
A	Accommodation , including: Cells Ablutions Heating Laundry Clothing Association Rooms Equipment	2 6	1 2 1 1	13
B	Discipline , including: Adverse report Adjudication PREPS regime level Searching Complaint procedure Use of PDD [Passive Drug Dog] C&R incident Red card	1 3 14 1	5 3 5 1	33
C	Equality and Diversity , including: Discrimination re disability, gender, sexuality, religion, culture (Travellers, Foreign Nationals)	1		
D	Purposeful activity , including: Education Vocational programmes Work allocation Library Gym Association/ Time out of cell Lockdowns/ Lockups/ 'Firewatch'	1 2 1	2 1 2 7 6	22
E1	Communication , including: Letters/ Mail Visits Boxed visits Telephone Skype	4 1	2 2 2	11
E2	Finance , including: Wages Private monies Spends			
F	Food (quality and quantity) Kitchens (equipment, maintenance)		7	7
G	Healthcare in Prison , including: Physical health Mental health	5	5 2	12

	Social care			
H1	Property within Hydebank Wood			
H2	Property during transfer or in another establishment/ location			
H3	Prisoner purchases , including: Canteen Facility list Catalogue shopping Tuckshop	1		1
I	Sentence management , including: Parole Release date Re-categorisation Home leave Move to Murray House/ Willow Working Out Unit Probation Wish to see Housing Rights/Housing Benefits	1	1 1 1	4
J	Staff/ prisoner concerns , including: Bullying/ Harassment/ Verbal abuse by other prisoner Alleged assaults by other prisoner Bullying/ Harassment/ Verbal abuse by staff Alleged assault by staff Night guard		2 4 1 1	8
K	Transfers			
L	Miscellaneous , including: Health and Safety Drugs Rule 32 Segregation Delay in getting haircut	4	5	9

APPENDIX 4: HEALTHCARE IN PRISON

The following overview of developments in Healthcare in Prison over the last year is based on meetings with managers from the South Eastern Health and Social Care Trust [the Trust].

The ***Healthcare in Prison Leadership Team*** is now well-established and includes: the Assistant Director for Healthcare in Prison, a Clinical Nurse Manager, Lead Nurses, a Lead Pharmacist, Clinical Directors for Medicine and Dentistry, a Business Support Manager, Governance and Allied Health Professional Leads.

The objective is that Healthcare in Prison emulates healthcare practice in the community, while recognising that prisoners have a different profile from the population represented within GP practices. ***Within Healthcare the focus has moved from treatment of illness towards public and preventative health.*** In prisons, known vulnerabilities include: alcohol use, drug use, sexual health, Hepatitis C, diabetes and respiratory problems. Emphasis is placed on inspiring hope and incentivising change.

Healthcare in the community has used the ***'10,000 Voices' methodology to gather service user experiences and suggestions about specific initiatives.*** In the prisons, feedback about peer mentors (regarding when and how to engage as well as the most appropriate language to use) was piloted in Maghaberry Prison and informed development of the 'Ask HIM' [Health Improvement Mentor] project. This methodology has also been used to consider the supply and provision of medication in prisons, which has informed development of guidance about this issue for prisoners.

Building of relationships with other bodies involved in prisoner healthcare has included Trust membership of a 5 Nations Group, providing a useful benchmark against national/international standards and access to information about issues concerning healthcare and detention (e.g. the impacts of drugs and changing trends, conflict-related trauma). At a local level, the Trust also has regular meetings with the RQIA [Regulation and Quality Improvement Agency], CJINI [Criminal Justice Inspection Northern Ireland], and the Prisoner Ombudsman's Office.

Recruitment of Healthcare staff in prisons has been a consistent issue, with vacancies generally covered by agency staff. On 3 May 2020, an 'environmental allowance' of £1,300/year for all healthcare staff in prisons was approved by the Health Minister. It is anticipated that this will be paid from July 2020, and may encourage recruitment of healthcare workers into prisons.

Specific posts have been ***established as part of a 'Transformation Programme'***. A Service User Engagement Officer began work in the three prisons in September 2019, and her post has been made substantive. She has held Forums as well as meeting prisoners one-to-one. Key topics identified to date include: medication, exercise, and making the transition from prison to

the community. She organises 'Lunch and Learn' sessions for Healthcare staff based on identified topics. A male with lived experience of mental health services joined the Healthcare in Prison team in July. Two management trainees worked within Healthcare in Prison throughout the year to support specific posts, conduct small projects, and prepare information for Inspection teams.

A Consultant Psychiatrist and a Consultant Clinical Psychologist offer services to prisoners across the 3 prisons, following referral by the GP or the **mental health** team if deemed necessary. Adoption of the 'Towards Zero Suicide' approach by the 5 Trusts in Northern Ireland has led to development of a toolkit, the appointment of a Co-ordinator who has been in post since April 2019, and establishment of baselines in each prison. A key issue is supporting prisoners to use the services in their own community (including Trust psychiatric units) rather than specialist forensic beds in the regional Shannon Clinic. The Healthcare in Prison Team has worked with the Health and Social Care Board and other Trusts to develop a *Regional Transfer Protocol for Mental Health Services*, enabling access to specialist facilities for those in prison when required.

A public narrative is being developed about the issue of **trauma-informed practice** grounded in understanding of, and responsiveness to, the impacts of trauma (including domestic violence and sexual abuse). Emphasising physical, psychological, and emotional safety for everyone, this is intended to create opportunities for survivors to rebuild a sense of control and empowerment. Health, criminal justice and social services have been working together to develop trauma services across Northern Ireland.

An **Addiction** Consultant has been working across the three prisons since January 2020. There are plans to develop the addictions model, with a focus on harm reduction. If a prisoner is already on an opiate substitution programme when they come into prison this will be maintained, although this requires checks to be made and they cannot be given anything if they have not had medication for 72 hours. If this is the case, they are kept under observation. A clinical work-up needs to be carried out each time the prisoner comes into custody – where this has started in the community before they were committed, information would be shared with Healthcare in Prison so that they can continue the therapy. Any wait is related to other clinical investigations. Cabinet funding was received in summer 2019 to enable Healthcare staff access to electronic care records, including the prisoner's last prescription. However, this does not necessarily include validation of drugs prescribed by a psychologist or mental health practitioner, so the only safe thing to do is not prescribe (which may lead to the prisoner missing medication). Healthcare in Prison have been seeking advanced notification (e.g. from police, courts) so that medication validation is included in the committal meeting and the system is ready to operate as soon as the prisoner enters custody. The Addictions Consultant can initiate Opioid Substitution Therapy [OST]. Espranor tablets have been used for opioid substitution as these dissolve in 5 seconds so are less likely to be diverted. Use of monthly injections is being considered – beneficial because

daily medication is not required and there is no possibility for diversion at all. As a result of COVID-19, this is being introduced in communities and Healthcare in Prison is waiting for agreement to its use in prisons.

Prescribing of medication is a significant issue in the prisons. Based on the Royal College of GP's Guidance about safer prescribing in secure environments, revised in January 2019, the aim is to reduce the amount of medication in the system (especially dangerous drugs). Key factors to be considered by Healthcare staff when medication is being reduced include when to have a conversation with the prisoner about this and how it happens in a way that explains the reasoning and process. Although there are agreed national formulae, it is important for Healthcare staff to help individuals understand the need to change their medication and keep them safe. The Service User Engagement Officer manages Healthcare complaints, the majority of which are about reduction in medication. Going to meet those who have submitted a complaint to discuss what the issue is and what outcomes they want, before talking to clinicians and agreeing actions, she explains the risks of medication and reasons for changes where appropriate. The prisoner's GP in the community will automatically be informed if their medication has been changed.

Healthcare are introducing '**social prescribing**' – other ways of managing anxiety and/or sleeping problems, rather than reliance on medication. Engagement with prisoners, plus availability of other support services, are central to effective implementation of this approach.

Dispensing of medication was aided by the installation of a robotic dispensing system (located at Maghaberry Prison) in the autumn of 2019. Medication is provided in a box on a pull-out strip detailing the prisoner's name, date of birth, tablet description and time of day to be taken. This should reduce medication errors and enable greater flexibility in terms of more person-centred provision. Healthcare staff will carry out spot-checks to ensure that individuals have the correct amount of medication. If there is a discrepancy (i.e. fewer tablets than there should be at that time due to over-use or diversion of medication to other prisoners), there will be a reversion to 'supervised swallow'. Initial practical difficulties experienced during the first few months (including information on boxes being printed in Spanish!) have largely been overcome.

In terms of the **relationship between Healthcare and NIPS**, the two Permanent Secretaries for Health and Justice meet regularly. A joint *Improving Health Within Criminal Justice Strategy* and associated *Action Plan* (DoH/ DoJ, 2019) aims to ensure that children, young people and adults in contact with the criminal justice system "are healthier, safer and less likely to be involved in offending behaviour". As Healthcare in prisons is 'hosted' by another Department, at a local level it is dependent on NIPS facilitation (e.g. regarding movement of prisoners to the Healthcare Centre or combining Healthcare appointments with other activities such as Education, visits, etc.). Healthcare managers have reported that the relationship with NIPS is transparent and clear, with

both areas working hard to find the middle ground when there are disagreements.

All new NIPS recruits receive 'Mental Health First Aid' and 'Suicide Awareness' training. Promoting the 'Towards Zero Suicide' initiative, the plan is to deliver a rolling programme of one-day 'Suicide Awareness' training to all NIPS staff and prisoners. Developed by the Safeguarding Board for Northern Ireland, Trust and NIPS staff at all levels are also receiving one-day training in 'trauma-informed' practice. The ECHO Hub has focused on suicide prevention training throughout the year. The 'Towards Zero Suicide' model has been targeted at a specific group involving NIPS, Healthcare and prisoners. In April 2020, the 'Safety Planning' approach (encouraging individuals to consider what they need to think about, who they could speak to, etc., in a situation of domestic abuse) was adapted for prison use.

APPENDIX 5: HEALTH-RELATED ISSUES RAISED BY PRISONERS

The **health-related issues raised by prisoners during rota visits**, as they described them, throughout the year included:

CSU

- **Physical health** x5:
 - Cuts not assessed by medical staff at time of cutting
 - Not been seen by GP since committed 10 days earlier – reported having been referred to a clinic by his Doctor in the community for mental health and addiction problems
 - Reacted aggressively because he had not received his anti-psychotic medication in the morning
 - Not received medication
 - Request to see nurse/ Doctor not addressed

BEECH HOUSE

- **Physical health**
 - Not yet received meds
- **Mental health**
 - Not receiving the right level of meds for mental health anxieties

CEDAR HOUSE

- **Physical health** x4
 - Meant to receive meds 2x/day and only received at 11.30pm one day last week: “my head was all over the place”. Said he was going to cut and alleged unsympathetic and inappropriate response from NIPS Night Guard.
 - Concern about collecting daily meds downstairs – assessment to see whether he could safely hold meds in his cell was not successful – planned to submit a complaint
 - Reported to IMB that late meds -> distress and ligature round neck
 - Concern re meds
- **Mental health**
 - Need to talk to mental health professional (previously seen by mental health nurse but discharged)

ASH HOUSE

- **Physical health** x12
 - Not received painkillers requested the evening before
 - Claimed to have swallowed parts of a watch but not taken for an x-ray
 - No confidence nurses would help pain management
 - Wants to see Physiotherapist to confirm she can't use stairs -> move from A3 to A2 or A5
 - Need to see Dentist
 - Need for an orthopaedic bed – impossible to sleep at night due to arthritis in leg and hip
 - A1 committal – in pain and having recurring bad dreams, would like to see Healthcare
 - Not getting pain relief at night and needs cream for skin condition

- Needs specific hair products for alopecia
- Complaint about mattress – awaiting hip operations -> pain and mobility problems
- Wants help to lose weight, requesting a gastric band
- Fell from bed twice – says hospital bed is not right for her
- **Mental health x2**
 - Judge had asked for a mental health assessment and this had not been done, due in court the next day
 - Challenging behaviour of woman who refused to use toilet facilities. Defined 'behavioural' by mental health, rather than a mental health disorder

Women on R32

- **Physical health:** Not given anti-psychotic meds, meds changed and reduced but not received for 2 weeks: "feeling wrecked"
- **Mental health x2:**
 - Woman's request to see mental health and Governor's request that a mental health assessment be conducted had not been followed up
 - PDU Co-ordinator stated at R32 review that the woman had a mental health diagnosis, is easily influenced, and requires mental health support but the mental health team had not responded to the Co-ordinator

FERN LANDING

- **Physical health**
 - Anxious to increase meds as unable to sleep. Doctor gave a herbal remedy
- **Mental health x2**
 - Meds reduced. Has mental health problems and been on meds for years before coming into custody so worried about this. Found mental health assessment "too much" and had to postpone part of it
 - Need for mental health support

Specific concerns about the health of individuals raised with the Healthcare representative at Board meetings included:

- Two female prisoners refusing food were closely monitored by Healthcare staff, who maintained good lines of communication between all relevant stakeholders and supported the women to gradually eat solids.
- Access to specialist shampoo for a prisoner with alopecia, which the Pharmacist experienced difficulty sourcing.
- A specialist bed and mattress were purchased by NIPS for a prisoner, as this was more cost-effective than renting the equipment, although this took two months to be delivered by the supplier.
- Limited access to the health history of Foreign National Prisoners, with Healthcare provision based on the information provided during committal.
- The disturbing conduct and actions of one prisoner were defined 'behavioural problems', not 'mental health' issues. However, the individual was regularly assessed and supported by the Healthcare team.
- Progress of a pregnant asylum seeker committed to Fern landing in October. Following release from the hospital where she gave birth in January, she and the baby were placed

in a Mother and Baby Unit established in a landing at the base of the Healthcare Centre with both SE and Belfast Trusts involved in the care plan.

- One female prisoner was found deceased the day after her discharge from HBW in January 2020. As this death occurred within 10 days of discharge, it will be investigated by the Prisoner Ombudsperson and an inquest will be held. She did not seek advice from the IMB during her time in custody. Board members would like to express their condolences to those who knew her.

COMMON ACRONYMS & ABBREVIATIONS

ACE	Assessment, Case Management and Evaluation process
AD:EPT	Alcohol and Drugs: Empowering People through Therapy
BBR	Building Better Relationships
BIR	Bullying Incident Report
C&R	Control and Restraint
CAB	Challenging Anti-social Behaviour
CJINI	Criminal Justice Inspection Northern Ireland
CJO	Criminal Justice Order 2009
CSRA	Cell Sharing Risk Assessment
CSU	Care and Separation Unit
DCS	Determinate Custodial Sentence
DHSSPS	Department of Health Social Services and Public Safety
DOJ	Department of Justice
DST	Dedicated Search Team
ECS	Extended Custodial Sentence
EMIS	Egton Medical Information System (medical computer system)
ESOL	English for Speakers of Other Languages
ETI	Education and Training Inspectorate for Northern Ireland
FNA	Foreign National Prisoners
HBW	Hydebank Wood College & Ash House Women's Prison
HMIP	Her Majesty's Inspectorate of Prisons in England and Wales
HNA	Health Needs Assessment
HSCB	Health and Social Care Board
ICS	Indeterminate Custodial Sentence
ICT	Information and communications technology
IEP	Incentives and earned privileges
IMB	Independent Monitoring Board
IP	In-possession (referring to prescribed medication)
JJC	Juvenile Justice Centre
MAR	Medication Administration Record
MBY	Maghaberry
MDT	Mandatory Drug Test
MGN	Magilligan
NICTS	Northern Ireland Courts and Tribunals Service
NIPS	Northern Ireland Prison Service
NOMS	National Offender Management Service (in England and Wales)
NPM	National Preventive Mechanism
OBP(s)	Offending Behaviour Programme(s)
OMU	Offender Management Unit
OPCAT	Optional Protocol to the Convention Against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment
OPONI	Office of the Police Ombudsman for Northern Ireland
PACE	Police and Criminal Evidence (Act)
PAU	Prisoner Assessment Unit
PBNI	Probation Board for Northern Ireland
PCNI	Parole Commissioners for Northern Ireland

PD	Personality Disorder
PDD	Passive Drug Dog
PDP	Personal Development Plan
PDU	Prisoner Development Unit
PECCS	Prisoner Escorting and Court Custody Services
PONI	Prisoner Ombudsman for Northern Ireland
PPANI	Public Protection Arrangements Northern Ireland
PPS	Public Prosecution Service for Northern Ireland
PREPS	Progressive Regime and Earned Privileges Scheme
PRISM	Prisoner Record Information System Management (computer system used by NIPS)
PRT	Prison Review Team
PSNI	Police Service of Northern Ireland
PSST	Prisoner Safety and Support Team
PST	Post-Sentence Tariff
RQIA	Regulation and Quality Improvement Authority
SAI	Serious Adverse Incident
SEHSCT	South Eastern Health and Social Care Trust / The Trust
SIR	Security Information Report
SLA	Service Level Agreement
SPAR	Supporting Prisoners at Risk
TED	Tariff Expiry Date
UKBA	United Kingdom Border Agency
VCS	Voluntary and Community Sector
WOU	Working Out Unit
YJA	Youth Justice Agency