



Criminal Justice Inspection
Northern Ireland
a better justice system for all



Report on an announced inspection of

Magilligan Prison

by HM Chief Inspector of Prisons and the
Chief Inspector of Criminal Justice in
Northern Ireland

20–24 September 2004

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Introduction

This inspection is the first carried out under the powers of the Chief Inspector of Criminal Justice as set out in the Justice (Northern Ireland) Act 2002. Under those powers, the Chief Inspector of Prisons for England and Wales, Anne Owers, was invited to examine the conditions for and treatment of prisoners at Magilligan, using the criteria developed by her inspectorate for inspecting custodial settings in and outside England and Wales. At the same time, the Chief Inspector of Criminal Justice in Northern Ireland examined issues relating to the management and organisation of the Service, under his 'common core' methodology. This introduction summarises the findings of both Chief Inspectors.

The inspection was also assisted by two other Inspectorates: the Adult Learning Inspectorate (England and Wales) and the Education and Training Inspectorate (Northern Ireland). We are grateful to both for their contributions in relation to prisoner education and training.

The last inspection of Magilligan was carried out by the Chief Inspector of Prisons in 2001. It praised the developing resettlement work, but noted that it was not yet integrated into the rest of the prison. It noted the changes that were taking place in the running and culture of prisons, following 'normalisation', but pointed out the unsatisfactory nature of prisoners' accommodation, in H-blocks without integral sanitary arrangements. The Chief Inspector concluded: *'There is much good to record, and many promising developments. These must now be brought to maturity'*.

At the time of this inspection, there was still much good to record. Staff-prisoner relationships had improved since the last inspection. Prisoners were held safely – without the need to separate prisoners by religion or political affiliation. Reception and induction processes were effective, and picked up prisoners' immediate and resettlement needs. Resettlement continued to be an area of good practice, carried out by dedicated staff within a new unit, and with the benefit of an open facility at Foyleview, from which some prisoners could work outside. Most prisoners had access to activities.

However, it was also clear that a deteriorating industrial relations situation had put a brake on many of the developments that were hoped for in 2001. A combination of external and internal factors had led to a breakdown of trust between managers and staff. As a consequence, prisoners could not be guaranteed regular and predictable access to regime activities; there was insufficient quality work and education; and the activities, resettlement and sentence planning work had not been developed in a way that engaged and involved the whole prison.

Inspectors also noted other areas that needed development. There was an over-emphasis on physical, rather than dynamic security, and this inhibited effective management. This was not unconnected with the poor physical design of the H-blocks, which continued in use. Finally, there was no monitoring of, or action to address, comparative outcomes for Catholic and Protestant prisoners even though that is required, implicitly if not explicitly, under equal opportunities legislation.

There is much that is good to build on at Magilligan. But if it is to move forward, as it should, the Northern Ireland Prison Service will need, as a matter of urgency, to address the underlying industrial relations problems, and to create and support effective management structures. At the time of the inspection, too many decisions essential to the good running of the prison were in effect outside managers' control.

The historical and social context of Northern Ireland inevitably affects the running of its prisons. Prison officers live with the recent memory of intimidation and the murder of colleagues; and the political and security situation in the community can impact directly upon the running of prisons. Partly for those reasons, Magilligan, like other prisons, is well staffed and generously resourced by comparison with prisons in the rest of the United Kingdom.

The Northern Ireland Prison Service needs to develop a human resource strategy for Magilligan that is appropriate for its future. This should ensure appropriate staffing of posts and allocation of duties; a new appraisal and performance management system for prison officers and governors; assessment and provision of training requirements; and the development of a more satisfactory working relationship with the Prison Officers' Association (POA).

Magilligan had managed to retain many of the positive aspects inspectors found in 2001. Aspects of resettlement were excellent; most prisoners felt safe; staff-prisoner relationships, at a personal level, were good; some good training was provided for prisoners. The task for managers and the Service is now to weld these into a whole prison that is able to effectively deliver what prisoners, and Northern Ireland, need, and that can assist in the rehabilitation of prisoners and the reduction of reoffending.

Anne Owers

December 2004

HM Chief Inspector of Prisons

Kit Chivers

Chief Inspector of Criminal Justice in Northern Ireland

Fact page

Task of the establishment

Magilligan is a medium risk prison holding adult male prisoners with six years or less to serve. It has separate low security accommodation for selected prisoners nearing the end of their sentences.

Area organisation

Northern Ireland

Number held

20 September 2004: 333

Certified normal accommodation

412

Operational capacity

348

Last inspection

27-29 March 2001

Brief history

The prison is located at Magilligan Point in County Londonderry and close to Lough Foyle. It was opened in May 1972 and comprised eight Nissen huts. These were replaced in the late 1980s by three H-blocks – each containing 100 cells. Magilligan Prison now holds low and medium security prisoners with up to six years left to serve, and also has low security accommodation for selected prisoners nearing the end of their sentence. (A further unit, Sperrin, was not holding prisoners.)

Description of residential units

H1, H2, H3	100 low and medium security prisoners each
Foyleview	48 prisoners nearing the end of their sentence

Healthy prison summary

Introduction

HP1 All Her Majesty's Inspectorate of Prisons' (HMI) inspection reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this Inspectorate's thematic review *Suicide is everyone's concern*, published in 1999. The criteria are:

Safety	prisoners, even the most vulnerable, are held safely
Respect	prisoners are treated with respect for their human dignity
Purposeful activity	prisoners are able, and expected, to engage in activity that is likely to benefit them
Resettlement	prisoners are prepared for their release into the community and helped to reduce the likelihood of reoffending.

HMI uses these tests for all custodial environments that it inspects, both within and outside England and Wales, bearing in mind the specific nature of particular custodial settings and backgrounds.

HP2 HMI has also built up a database of survey responses from prisoners in different kinds of prison across England, Wales and Northern Ireland. This provides a benchmark against which it can set the responses from an individual establishment. In this report, the benchmark used is category B and C training prisons. While HMI recognises the particular issues that Magilligan faces, these comparisons allow managers to identify those areas where prisoners feel more positive, or more negative, than in other prisons.

Safety

HP3 Prisoners were held in generally safe conditions. However, Magilligan needed to address bullying more systematically and to adopt a safer custody approach across the prison, including substance misuse. There was an over-reliance on physical security, to the detriment of effective management and dynamic security.

HP4 Conditions in reception had recently improved with a move to an alternative unit. Although holding rooms were largely bare, prisoners did not wait long following arrival before they were transferred to residential units. There were relaxed relations between staff and prisoners in the reception unit, and prisoners were processed effectively.

HP5 All prisoners had a structured interview on their first night, and were seen by specially trained first night staff. This initial interview concentrated on any problems they might have been experiencing and focused on their general well being. All prisoners were

offered showers and telephone calls. There was good recording of this information, and night staff were aware of the locations of all new prisoners.

- HP6 In our prisoner survey, 76% of respondents at Magilligan said the induction programme provided them with the information they needed, against a benchmark figure¹ of 60% for training prisons. Induction took place in a good environment, and trained multi-agency staff delivered a comprehensive programme. There was good consultation with prisoners and, on the last day, resettlement issues were identified and this information passed on to resettlement staff. There were plans to transfer induction to a residential unit; it is important that the quality of the programme offered does not suffer if this goes ahead.
- HP7 There was an anti-bullying policy, and booklets and posters were available around the prison, but the system was not effective. The policy had been introduced in April 2002 but had been used on only 13 occasions since then. Anti-bullying work was not linked to other areas, such as security information, intelligence relating to drugs and unexplained injuries. Even when anti-bullying documentation was initiated it was rarely completed fully, and little action was taken other than the removal of victims. Even given the strong anti-informant culture within the prison, it was clear from security information reports that bullying was prevalent, and in our survey 39% of respondents said that they had felt unsafe at some time at Magilligan against a training prison benchmark of 19%.
- HP8 The suicide and self-harm prevention policy had been revised following a death in custody in October 2003. There were bi-monthly suicide prevention committee meetings and also bi-monthly suicide prevention forums. Two prisoners were identified as at risk at the time of this inspection, but relatively few had been identified in the previous three months; systems for identifying prisoners at risk of self-harm needed to be sufficiently thorough. All prisoners monitored on a prisoner at risk booklet were reviewed on time, and documentation was completed properly. There were care suites in residential units and these included a button which, when pressed, gave direct access to the Samaritans. A Listeners' scheme was also in place and Listeners were located on all residential units.
- HP9 There was no mandatory drug testing, and there is no legislative authority for this in Northern Ireland. Our survey indicated that prisoners felt it was relatively easy to get drugs at Magilligan: 42% said it was easy to obtain drugs in the prison against a training prison benchmark of 24%. As a result of the doctor's policy to reduce the number of prisoners taking medication, some prisoners appeared to be trading in tranquillisers and other drugs, which might otherwise have been prescribed. There was no detoxification programme at the time of this inspection and substance misuse was not linked to suicide and anti-bullying initiatives as part of a wider safer custody strategy.
- HP10 There was a heavy reliance on physical security, which was excessive given the nature of the medium to low risk population. This approach impeded the free movement of staff and managers around the prison and reduced managerial effectiveness. The analysis of security information reports was poor; procedural security, such as searching, was thorough but inconsistent. The principles of dynamic security were not firmly established across the prison.

¹ The benchmark figure is calculated by aggregating all survey responses in England, Wales and Northern Ireland together and so is not an average across establishments.

- HP11 On average, four to five prisoners were held at any one time in the special supervision unit (SSU). Conditions in the unit were poor, but prisoners had daily access to telephones, showers and exercise; there were also daily visits by the governor. The special cell was rarely used. Adjudications were conducted properly. Conditions for prisoners held in cellular confinement were excessive – a bible was the only item allowed in the cell. There was also a policy for prisoners to be located in the SSU for 48 hours if the prison's drug dog indicated on them at any time. This amounted to informal punishment of cellular confinement outside the appropriate adjudication process.

Respect

- | | |
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| HP12 | Relationships between staff and prisoners had been conditioned by the historical and social context of Northern Ireland, but had improved since our previous inspection. The prison regime, however, was organised around what was convenient for staff rather than what met the needs of prisoners. There were some key weaknesses in access to night sanitation. No monitoring of take-up of services by religion or ethnicity was carried out; our snapshot analysis showed some areas where Catholic prisoners were disadvantaged. |
|------|--|
- HP13 The prison was generally clean and accommodation for prisoners was tidy and free of offensive displays. Prisoners had good access to clean clothing, sheets and cleaning materials.
- HP14 The H blocks were still in existence. Their design made it difficult for staff to safely supervise and engage with prisoners. Moreover cells did not have integral sanitation. At night prisoners had to be let out to use the toilet, and consequently many prisoners continued to slop out.
- HP15 In our survey, 96% of respondents said they had daily access to showers. Prisoners had good access to association and they also had regular access to exercise.
- HP16 There was an effective shop service, with a wide range of goods at reasonable prices. Prisoners' food was not of a high quality, and there was a gap of 16 hours between the serving of the evening meal on Saturday and breakfast the following morning.
- HP17 There were sufficient telephones in the prison, but mail was delivered at night by staff and there was excessive censoring.
- HP18 Relationships had improved since HMI's last inspection and this had been achieved without the need to segregate prisoners along sectarian lines. There was still a fundamental distance between staff and prisoners but generally the relationship between them was respectful, and inspectors saw many examples of friendly interactions, with some prisoners and staff on first name terms. Staff tended to respond to prisoners' problems but did not take a proactive approach to managing or motivating prisoners. Inspectors saw no evidence of any abuse to prisoners, but in our survey prisoners reported more assaults and insults from staff than we have found in other similar prisons. However, overall there was what we describe as 'institutional disrespect': the regime was not focused on meeting prisoners' needs but on what was convenient for staff.

- HP19 There was no separate applications form for prisoners and all applications were treated through the complaints process. In our survey, prisoners indicated that it was considerably less easy to make applications and complaints than in other similar prisons, and they were more likely to be dissatisfied with the end results of these processes; there were also more frequent claims of pressure to withdraw complaints. There needed to be an analysis of trends, timing and a more careful follow-through of applications and complaints, with senior managers becoming involved and quality-checking the process and its end results.
- HP20 The progressive regimes and earned privileges scheme (PREPS) policy, dated 2002, was not explicit in its requirements and mechanisms. The scheme was linked to earnings, sentence planning and the personal officer scheme. All reports on prisoners were made available to them. It was clear that the voluntary drug testing (VDT) scheme acted as a disincentive to prisoners wanting to get on to the enhanced level because drug testing was a mandatory requirement. Prisoners were also regularly demoted in regime level following proven charges at adjudication: effectively a double punishment. An appeals process was in place but prisoners were not aware of it and there was no central record of appeals made and their outcome.
- HP21 In our survey, 66% of respondents felt their religious needs were met against 56% in other training prisons. However, facilities for worship were poor and consisted of two sheds on two of the house blocks; prisoners in Foyleview units had to take mass on a Thursday afternoon in a television room.
- HP22 Outcomes for prisoners were not monitored by religion; our own snapshot showed that, in some areas, outcomes for Catholic prisoners at the time of the inspection were less favourable. While 42% of the population at Magilligan were Catholic, they made up only 29% of those held in the Foyleview resettlement units, only 22% of those in favoured orderlies jobs, and 34% of those on the enhanced level of the incentive scheme (PREPS); however, 63% of all prisoners on the basic regime were Catholic. There was no indication of differential outcomes in other areas we examined, such as education, the use of force and adjudications.
- HP23 At the time of this inspection there were only three minority ethnic prisoners, and there were no systems to manage the specific needs of the five foreign national prisoners.
- HP24 The main healthcare concern of prisoners was prescribing by the doctor, but overall the primary care service was good. There was also very good access to secondary care consultants with very short waiting lists. Most prisoners were allowed to hold their medication in-possession and there was no waiting list for the dentist; all committals (new arrivals) were given a dental check-up during their induction programme. The available mental health service was poor and there was no counselling service.

Purposeful activity

- HP25 There was a wide range of opportunities for prisoners to work and learn, but activities were badly managed; this resulted in poor prisoner access to activities each day and considerable inefficiency. The quantity and quality of education was poor, and there were no formal arrangements with the education supplier. Few vocational qualifications were offered. Library facilities were inadequate.

- HP26 The prison was short of approximately 70 work places. Allocation to work was made during the induction process, but of those jobs available only around 140 could be considered meaningful. Any prisoner serving a short sentence could work only as a cleaner or orderly, and was unlikely to get a job at all. Attendance at workshops and education was poor throughout. There were late arrivals, frequent closures of workshops and classes, and regime clashes with other activities.
- HP27 There was an inadequate range of foundation programmes in education. The education department could theoretically hold 50 prisoners but the rooms available were too small to achieve this. Accommodation and learning resources were poor, and although there was good information, communications and technology (ICT) equipment it was not being used. Learning plans were poor and took no account of prisoners' prior achievements or initial assessments. There was no contract between the prison and the education provider.
- HP28 Some outstanding skills were being developed in training, especially in metal fabrication and furniture making. But throughout the prison few qualifications were offered, and in some workshop areas the accommodation was poor. There were also poor links between training and Foyleview resettlement unit; once prisoners moved there they were not allowed to continue with their vocational training.
- HP29 Only 17% of respondents to our survey, against a benchmark figure of 58%, said it was easy to get weekly access to the library. Library facilities were restricted to prisoners in education. The library facility in Foyleview was extremely poor, amounting only to a small room with out-of-date books and videos scattered around, including on the floor.
- HP30 The physical education department was functioning well and prisoners enjoyed a well equipped gymnasium and a subsidiary gymnasium in Foyleview. Good recreational programmes were available, but no accredited programmes had been provided for some time.

Resettlement

- HP31 Some good work was being undertaken in this area and would stand comparison with other similar prisons. However, there was no local strategy, based upon a needs analysis of the population. Resettlement needed to be integrated into the overall work of the prison through tighter and more focused management.
- HP32 At the time of this inspection there was no resettlement policy committee or any action plan for the development of resettlement services. There had been no needs analysis of the population. There was a heavy reliance throughout on the role of NIACRO (Northern Ireland Association for the Care and Resettlement of Offenders) and the probation service, rather than prison officers, in carrying out resettlement work. There was a resettlement unit, Foyleview, holding 48 prisoners, but this was not fully integrated into the whole of Magilligan's regime.
- HP33 A system of resettlement planning for all prisoners and had been established in 2002 and was well embedded. A multi-disciplinary team, located in the purpose-built Programmes Development Unit (PDU), assessed all prisoners, in consultation with them, within 20 days; a resettlement board was held at this point. Prisoners also subject to custody probation orders were given career plans and six-monthly reviews.

Resettlement plans, however, did not have specific, measurable or time limited targets and there was no system for chasing or monitoring achievement. The good multi-agency initial planning was therefore less than fully effective, because of the lack of systematic follow-through within the prison as a whole.

- HP34 A variety of programmes was available in the PDU, but sex offender treatment and enhanced thinking skills had not been available for some time. The extent of waiting lists was unknown, and planning was not systematic enough to inform prisoners when they could expect to enter programmes. The further development of resettlement programmes needed to avoid duplicating what was already available at Maghaberry.
- HP35 Since April 2004, probation officers had also interviewed prisoners for whom they were not statutorily responsible, to discuss release plans. NIACRO workers were available to discuss benefits, education and employment – but funding for this work appeared likely to cease from May 2005. There was a strong emphasis on maintaining family links. In our survey, respondents were less likely to be aware of how to seek help with reintegration issues than prisoners in similar prisons.
- HP36 Our survey showed better results for prisoners in Foyleview than in other parts of the prison. There was, however, poor integration of the regime at Foyleview with the rest of the prison. Some prisoners feared that they could be removed from Foyleview for the slightest indiscretion, although our analysis of recent returns from there to the main prison indicated no evidence to support this. Overall, on Foyleview, 84% of respondents said that they had done something while they were there which they felt was likely to reduce their offending.
- HP37 There was a personal officer scheme, but the policy supporting this was not readily available. The scheme was largely driven by the need to complete forms regularly on prisoners for PREPS. Personal officer comments were required weekly for those on the standard regime and monthly for those on the enhanced regime, but this did not happen and sometimes one prison officer completed many reports at a time. In Foyleview, 72% of survey respondents said they found their personal officer helpful but this figure dropped to 49% elsewhere in the prison. Personal officers showed their reports to the prisoner concerned, who signed that they had seen these comments. This was a good basis for further development.
- HP38 The drugs strategy focused on resettlement and good work was going on in the PDU. The Northlands drug and alcohol team worked well and was properly integrated into the regime of the prison. There was also good drugs work with prisoners' families, and good harm reduction and health promotion schemes. The drugs programmes available to prisoners were of high quality, and prisoner feedback was positive. An alcohol awareness course was also provided. The VDT scheme in place was not consistent in its application and it was used as mandatory compliance testing for those on the enhanced level of PREPS.
- HP39 The multi-agency sex offender risk assessment management (MASRAM) system for high risk sex offenders was managed externally. However, other risks presented by prisoners on release were not identified or managed, although the psychology department interviewed about six high risk violent offenders each month. The lack of systems to vet children's visits to prisoners was of particular concern.
- HP40 NIACRO ran a good visits centre, with the assistance of a prisoner from Foyleview. Visitors and prisoners were searched thoroughly, but staff were friendly throughout. The visits hall was of an acceptable standard, and NIACRO provided a good crèche facility. Visits could be booked online, by telephone or in person. There was an

excellent child and family visits scheme for 16 prisoners, and this had the potential to be expanded. NIACRO also provided a bus service for visitors from outlying areas. NIACRO staff were essential to the good quality service provided. They were supported by prison officers who acted as family liaison officers, although they were often diverted to other duties.

Main recommendations

- HP41 The establishment should develop a safer custody strategy and procedures, taking in anti-bullying, suicide and self-harm prevention, and substance misuse.
- HP42 The demolition of the H blocks and their replacement with more suitable accommodation, with integral sanitation, should be prioritised.
- HP43 Physical security in the prison should match the security needs of the population. Electric locking should be reduced and pass keys introduced to allow managers and staff access to all areas of the prison at any time.
- HP44 There should be thorough analysis, by religion and ethnicity, of access to regime activities and services to monitor and ensure equality of outcome.
- HP45 There should be sufficient high-quality education and work for all prisoners, supported by formal agreement or contract with the educational supplier.
- HP46 Managers should ensure that all prisoners are delivered on time, each day, to education and work activities.
- HP47 There should be a local resettlement policy, based on a needs analysis; with an action plan to embed resettlement work into the prison as a whole, overseen by a committee and local manager.
- HP48 There should be a mental health needs assessment to establish what primary mental health services are required. Arrangements should mirror community provision, including a comprehensive counselling service.

Management of human resources summary

HR1 Inspectors were grateful for the honest self-assessment provided by the Governor before the inspection began, and for the helpful comments contributed by a variety of external 'stakeholders' with an interest in the running of the prison.

HR2 Inspectors examined the management of human resources (HR) at Magilligan in relation to the five main criteria which form the core of every Criminal Justice Inspectorates' (CJI) inspection:

Openness and accountability

HR3 Though the HR policies and procedures at the prison were all open and well documented, the management of human resources could not be described as fully accountable. Aspects of the day-to-day deployment of staff fell below the line of sight of prison management. The influence of the Prison Officers' Association (POA) was very strong.

Partnership with other agencies

HR4 There were constructive partnerships with the Probation Service and with NIACRO (Northern Ireland Association for the Care and Resettlement of Offenders), which were of great benefit to the prison. But in HR terms the prison was largely stagnant, with too many staff who had been there, without a break, for many years. The prison would benefit from staff at all levels being given experience of working in other environments.

Promotion of equality and human rights

HR5 The prison had sound policies in place, and though the workforce was still, for historical reasons, disproportionately Protestant there was no evidence of discrimination in HR practices (though HMI noted an absence of monitoring and in some areas there was evidence of negative outcomes for Catholic prisoners). There was a commitment, shared by the POA, to non-discrimination in all future recruitment. All staff received section 75 and human rights training.

Seeking feedback and managing change well

HR6 The senior management of the prison was open and accessible, and there were in principle good mechanisms for downward communication. In practice, however, too much communication passed through the POA. Staff had a variety of concerns which affected their attitude to the job, and it would be useful to conduct regular confidential staff surveys to identify and address those issues. Change was held back by the adverse industrial relations environment.

Delivering results in relation to Government objectives

HR7 Magilligan was an extremely expensive establishment. Its staffing level – particularly of discipline grades – was far higher than any comparator elsewhere in the UK. At the same time its performance, in terms of the extent to which prison officers were engaging with prisoners to address their offending behaviour, was disappointing. Despite their high numbers and the overtime worked, inspectors were told that there

were never enough staff to take part in prisoner programmes. Industrial relations needed to be improved to enhance performance and value for money.

Main recommendations

- HR8 A human resource strategy needs to be developed specifically for Magilligan, designed to ensure that posts are filled and duties allocated appropriately.
- HR9 A new appraisal and performance management system needs to be introduced, linking Northern Ireland Prison Service, prison, sectional and individual objectives.
- HR10 A comprehensive training plan should be prepared on the basis of a proper training needs analysis, and training should be prioritised.

Section 1: Arrival in custody

Courts, escorts and transfers

Expected outcomes:

Prisoners travel in safe, decent conditions to and from court and between prisons. During movement the individual needs of prisoners are recognised and given proper attention.

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| 1.1 | A central group based at Maghaberry provided all escorts. Escort staff were not always responsive to prisoners' needs, and the level of restraint used was not based on individual risk assessments. |
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- 1.2 Most planned prisoner escorts were provided by the prisoner escort group based at Maghaberry prison, approximately two hours' drive from Magilligan. This service included providing escort services for courts, non-emergency hospital appointments and prisoner transfers.
 - 1.3 Approximately 10-12 new committals (receptions) were received each Thursday from Maghaberry. Cellular vehicles we inspected were clean, although staff struggled to find the emergency first aid box. No refreshments were provided in transit, although cool boxes were available when sandwiches were provided by the sending prison.
 - 1.4 All prisoners were transferred in standard handcuffs and were secured in individual cells on the vehicle. This seemed excessive and was not based on individual risk assessment. Escorting staff said that no toilet stops were offered during any journey, and a prisoner would have to relieve himself where he was.

Recommendations

- 1.5 Escorting staff should allow prisoners toilet stops when required and offer drinks during the journey.
- 1.6 Prisoners should not routinely travel handcuffed in secure vehicles unless individual assessments demonstrate a high level of risk.

Housekeeping point

- 1.7 All escorting staff should know where emergency equipment is kept on the transport vans.

First days in custody

Expected outcomes:

Prisoners feel safe on their reception into prison and for the first few days. Their individual needs, both during and after custody, are identified and plans developed to provide help. During a prisoner's induction into the prison he/she is made aware of prison routines, how to access available services and how to cope with imprisonment.

Reception, first night and induction

- 1.8 The reception area was located in a residential unit, but space had been used sensibly. Reception staff were polite and friendly to new committals and the process was conducted efficiently. First night routines were in place, prisoners' needs were met and all staff were made aware of new receptions. The induction course was delivered in well equipped and pleasant surroundings. The programme was comprehensive, multi-disciplinary and linked into the resettlement process.

Reception

- 1.9 Approximately three weeks before this inspection, reception had been relocated to an unused residential unit for maintenance to be carried out on the old reception area. Although this building was not designed for purpose, staff had made good use of the available space. The reception area was clean and bright and provided a generally welcoming environment.
- 1.10 Prisoners were dealt with in a relaxed and professional manner by reception staff. Efficient systems were in operation. Staff knew how many committals (new receptions) were arriving and were prepared for them.
- 1.11 Soon after arrival prisoners were given a cold meal and drinks and were held in one of two holding rooms to await processing. These holding rooms were clean and well decorated but were stark in appearance and contained little information. Once prisoners had been searched and the necessary documentation completed they were located in a further holding room, which contained a television but little else to occupy them. However, prisoners did not spend an excessive amount of time in reception; most completed the process within two hours.
- 1.12 The senior officer on duty in the reception area interviewed all committals. This was essentially to ensure that correct information had been obtained rather than to look at individual needs.

First night

- 1.13 All committals were located on H3 before tea. They had access to showers and the telephone. After the evening unlock at 5.30pm, each committal was formally interviewed by a prison officer. The interview was structured and covered all the information they would need about their first 24 hours in the prison. This included wing routines, night sanitation arrangements, the request/complaints system, details of the induction course and the required standards of behaviour. Prisoners were also asked how they were feeling and whether they had any immediate concerns that needed attention, and they were encouraged to tell staff of these at any point. A record of the interview was filed in the prisoner's history sheet and in the first night log to inform incoming staff of any potential concerns.
- 1.14 Both day and night staff were aware of who the new committals were, where they were located and any significant information they needed to know.

Induction

- 1.15 All new prisoners started a five-day induction course on the Monday after they entered the prison. The course was delivered and facilitated by prison officers in a dedicated classroom in

the programmes development unit (PDU). Two officers, drawn from a trained group of seven, delivered each course. The environment was comfortable, welcoming and well equipped.

- 1.16 The programme was multi-disciplinary, modular and comprehensively covered all that prisoners needed to know about Magilligan. They were informed about policies and procedures, and about how to access the available range of support services. On the final day of the course there were modules on the available work, and each prisoner was seen individually to assess his resettlement needs. On completion, prisoners were given a booklet that gave details on all the main areas of the course.
- 1.17 Prisoners were encouraged to raise questions or to ask for additional information and, if it was not already included in the course, it was added. They were asked to complete an evaluation feedback sheet on the content and delivery of the course. Their comments were entered on a database, which was reviewed regularly to ensure that the course met participants' needs.
- 1.18 We spoke to a group of prisoners who had recently completed induction. They all said it had given them the knowledge and support they needed to settle in at Magilligan. In our prisoner survey, 76% of respondents said the induction course covered all they needed to know; this compared favourably against a benchmark of 60% for training prisons.

Housekeeping point

- 1.19 Holding rooms in reception should contain information and material to occupy prisoners waiting there.

Good practice

- 1.20 *Prisoners' views about induction were entered on a database and the information was evaluated regularly to ensure the course met prisoners' needs.*

Section 2: Environment and relationships

Residential units

Expected outcomes:

Prisoners live in a safe, clean and decent environment within which they are encouraged to take personal responsibility for themselves and their possessions.

- 2.1 Prisoners were housed in the resettlement area of Foyleview or in one of three more secure units. All residential areas were clean and decorated to a satisfactory standard. Prisoners in Foyleview had access to toilets 24 hours a day, but the 300 prisoners in the main part of the prison did not. All prisoners were allowed to wear their own clothes and had at least weekly access to laundry facilities. Prisoners were able to shower daily.

Accommodation and facilities

- 2.2 There were two main residential areas in the prison: Foyleview was a resettlement unit, located just inside the perimeter fence; the other residential units were more secure and located further inside the prison.
- 2.3 Opened in 1994, Foyleview consisted of three units holding 16 prisoners each. The units resembled large portakabins, and all 48 prisoners had single rooms. The units were clean and tidy and there were no offensive displays. They were well decorated and generally in good repair. In addition to a bed, each room had a locker and wardrobe; all prisoners had in-room televisions.
- 2.4 Prisoners in Foyleview had 24-hour access to toilets and washing areas. Each unit had two showers, two urinals and two toilets. Other communal facilities included a television room, dining room, a room with a snooker table, a computer room and a room with some books and videos, which doubled as a mini-library. Prisoners had free access into the units during the day; at night the outer doors were alarmed but not locked and a member of staff acted as a patrol.
- 2.5 The other prisoners were held in one of the three main residential units, which were all of the same H-block design: cells were located down each leg of the units with staff facilities and interviewing areas on the centre corridor joining the two legs. Each unit had a certified capacity of 100 with an operational capacity of 103 in H1 and H2 and 102 in H3; the additional numbers were made up using multi-occupancy cells. There were four safer cells, two of these being on H3.
- 2.6 Cells and communal areas in the main units were kept clean, tidy and generally well decorated; there were no offensive displays. Cells had sliding doors and prisoners could control their own lighting and had call bells for staff attention, which were answered promptly. Each cell was also equipped with a bed, a chair, space for hanging clothes and a desk. Prisoners on standard and enhanced levels of the progressive regimes and earned privileges scheme (PREPS) also had televisions in their rooms.

- 2.7 Each unit had six toilets, four urinals, two baths and six showers with 14 wash basins. There were also four telephones on each block, and an association room with a snooker table, television room and dining room.
- 2.8 Prisoners on the main units did not have 24-hour access to toilets or any washing facilities. There were no in-cell toilets or wash basins. At night, prisoners used their call bells when they wished to use the toilet, and were let out one at a time. Prisoners told us that the wait could sometimes be considerable. The night sanitation system did not operate for about an hour before unlock and about an hour after lock-up, and prisoners were not allowed to use the toilets at all at these times. Prisoners were given pots to use in case they were not able to make it to the toilet in time. Many prisoners considered these pots to be unhygienic, as they were not issued new to each prisoner, and they preferred to urinate into old milk cartons or defecate into other containers, which they could then throw away. This situation was unacceptable (see main recommendation HP42).

Clothing, possessions and hygiene

- 2.9 All prisoners were allowed to wear their own clothes in the residential units and around the prison. Each residential unit had a laundry staffed by prison orderlies, enabling prisoners to wash their clothes, sometimes as often as three times a week. The prison provided washing liquid, although some prisoners used powder bought from the prison shop. There was also a laundry in the Foyleview area of the prison, which was used to wash bedding and larger items.
- 2.10 In our survey, 96% of respondents said they could have a shower every day. Showers were located on each of the residential units and prisoners had access to them during periods of association; prisoners in Foyleview could shower during the day and at night.
- 2.11 A range of toiletries was available in the prison shop and prisoners were encouraged to keep themselves clean.

Staff–prisoner relationships

Expected outcomes:

Prisoners are treated respectfully by staff, throughout the duration of their custodial sentence, and are encouraged to take responsibility for their own actions and decisions. Healthy prisons should demonstrate a well-ordered environment in which the requirements of ‘security’, ‘control’ and ‘justice’ are balanced and in which all members of the prison community are safe and treated with fairness.

- 2.12 Staff–prisoner relationships had improved since our previous inspection, without recourse to segregation along sectarian lines; though they remained essentially reactive and sometimes distant. However, staff and managers were unwilling or unable to ensure that a consistent and full regime was available to prisoners.

- 2.13 There had been an improvement in the quality of staff-prisoner relationships since our last inspection. The quality of relationships between staff and individual prisoners was satisfactory, although marked by a perceptible distance between both sides: partly the consequence of the historical and social context of Northern Ireland. Staff were responsive to prisoners’ requests but saw their role as one of problem solving. However, officers did not play a proactive role in engaging with prisoners, as evidenced by our survey findings on lack of contact during association; also, they did not motivate prisoners in relation to sentence planning, resettlement

or improving behaviour. (See sections on personal officers, progressive regimes and earned privileges scheme and sentence planning.)

- 2.14 The satisfactory relationships between staff and prisoners had been achieved without recourse to segregation along sectarian lines, which had not always been the case in Northern Ireland.
- 2.15 Some of the findings in our survey ran counter to our observations and to what prisoners told us: for example, the number of prisoners reporting that they had been insulted or assaulted by staff was higher than the benchmark figure for similar prisons.
- 2.16 Throughout this inspection what we observed amounted to institutional disrespect in relation to ensuring positive outcomes for prisoner in the care of HMP Magilligan. Prisoners were the principal victims of the poor industrial relations described in paragraph 5.45. Management could not guarantee, and prison officers could not provide, regular and predictable access to regime activities. Regimes were organised to suit the needs of officers rather than prisoners, and prisoners were regularly delivered late to classes or work.

Recommendation

- 2.17 Staff should be encouraged to engage with prisoners during association periods.

Personal officers

Expected outcome:

Prisoners' relationships with their personal officers are based on mutual respect, high expectations and support.

- 2.18 A personal officer scheme was in place but it operated mechanically and was not linked to other aspects of the regime. Staff were supposed to report on prisoners weekly or monthly but this did not happen consistently. Prisoners were required to sign indicating they had seen these reports.
- 2.19 A personal officer scheme was in place, but no member of staff could locate the policy outlining the scheme. All prisoners had a personal officer and there was a system of relief officers. Personal officers had received training when the scheme had been introduced and there had been some ongoing training.
- 2.20 The scheme was linked to PREPS; there were supposed to be monthly written reports on prisoners on the enhanced level and weekly reports on those on standard level. There were no links with other regime elements and, in particular, there was no link with sentence planning.
- 2.21 The quality of some reports was variable. In particular: there were significant gaps in the entries in some reports, of up to several months for some prisoners; some entries were of poor quality and gave very little information about the prisoner; one officer completed reports on a number of prisoners at one time. There was no evidence of quality checks by senior managers.
- 2.22 As part of the personal officer assessment, prisoners were shown all reports written about them and were required to sign that they had seen them. Any disagreement over the content was resolved through discussion between the two parties.

- 2.23 Staff were generally aware of the personal circumstances of their prisoners, but on wings other than Foyleview under half of all prisoners said they found their personal officer helpful; the figure for Foyleview was 79%. Again, nearly 60% of respondents to our survey in Foyleview claimed to have met their personal officer in the first week, compared with 39% on the other units.

Recommendation

- 2.24 The personal officer scheme should be linked to sentence planning, and personal officers should be responsible for monitoring and chasing the completion of targets set for prisoners.

Housekeeping point

- 2.25 A senior manager should quality-check personal officer reports monthly.

Good practice

- 2.26 *Prisoners saw all personal officer reports on them and they were required to sign that they had seen them.*

Section 3: Duty of care

Bullying

Expected outcomes:

Everyone feels safe from bullying and victimisation (which includes verbal and racial abuse, theft, threats of violence and assault). Active and fair systems to prevent and respond to bullying behaviour are known to staff, prisoners and visitors, and inform all aspects of the regime.

- | | |
|-----|---|
| 3.1 | The anti-bullying policy was not adequate to tackle and manage bullying nor was it being used. There was no anti-bullying committee, and staff and prisoners had little faith in the system, preferring to deal with problems informally. |
|-----|---|
- 3.2 An anti-bullying policy, *Safe at Magilligan* (SAM), had been introduced in April 2002 and eye-catching leaflets, booklets and posters on the policy had been produced. These were displayed throughout the prison, including the visitors' search area. However, procedures to tackle bullying were not effective nor did staff or prisoners trust them.
- 3.3 There was no regular anti-bullying committee to take a lead on the policy, and only two sets of meeting minutes were available; these consisted of just a single sheet. Attendance was limited to either two or three governor grades, and limited action points were noted. It was not clear that these meetings would improve the profile or effectiveness of the policy.
- 3.4 The policy consisted of a three-stage reporting system using forms SAM1, 2 and 3. Staff completed form SAM1 for any suspected or reported incident of bullying. This form was sent to the anti-bullying coordinator and to the residential governor, who could appoint two staff to investigate. In the final stage, the anti-bullying coordinator decided whether the anti-bullying management board needed to take action. This board comprised at least three staff from different disciplines. The policy did not mention any direct action to be taken to challenge anti-social behaviour or any positive action to support the victim.
- 3.5 In over two years only 13 SAM1 forms had been raised. Not all had been forwarded for investigation, and forms that were, were often incomplete and the investigation poor. If prisoners refused to submit a written statement, the investigation often concluded that little could be done. At no point had a SAM3 been raised or the multi-disciplinary management board formed. Action that was taken, in the majority of cases, consisted of the victim being moved rather than supported.
- 3.6 Anti-bullying procedures were not linked to security information reports, drug information, injuries to prisoners forms or to prisoners at risk of self-harm. Evidence from these sources indicated that some bullying took place. In our survey, 39% of respondents said they had felt unsafe at some point in Magilligan, against a benchmark of 19% for similar prisons.
- 3.7 Staff and prisoners told us that bullying tended to be 'sorted out' informally rather than using the formal system. An anti-informant culture prevailed and trust had not been established in the current procedures. (See main recommendation HP41.)

Recommendations

- 3.8 A multi-disciplinary anti-bullying committee should be established and should meet monthly.
- 3.9 A comprehensive and detailed policy to address bullying behaviour and to support the victim should be devised. This should be well publicised and staff and prisoners trained in its application and encouraged to use it.

Self-harm and suicide

Expected outcomes:

Prisoners at risk of self-harm or suicide are identified at an early stage, and a care and support plan is drawn up, implemented and monitored. Prisoners who have been identified as vulnerable should be encouraged to participate in all purposeful activity. All staff are aware of and alert to vulnerability issues, are appropriately trained and have access to proper equipment and support.

- 3.10 A suicide and self-harm policy was in operation. There were regular committee meetings as well as an inter-prison forum. The last death in custody was in October 2003; an inquest had not yet been held. There were few instances of self-harm, and prisoners at risk were monitored properly. There was active involvement with the Samaritans and the use of prisoner Listeners. Few staff had received suicide awareness training.
- 3.11 A policy on suicide and self-harm dated March 2004 was in operation. Although there was no multi-disciplinary safer custody committee, a suicide prevention committee met bi-monthly. Meetings were well attended and participants included a coordinator and a member of the Samaritans. Apart from these meetings, bi-monthly meetings of an equivalent forum for all Northern Ireland prisons were also held at Maghaberry. In July 2004, an interim standards audit of these prisons found that Magilligan had many systems in place and had adopted an innovative approach to self-harm and suicide reduction.
- 3.12 The last death in custody had been on 19 October 2003. There had been an internal review of this incident but an inquest had been delayed pending further enquiries by the police. Only 100 staff had been trained in suicide prevention. At the time of this inspection, two prisoners were identified as at risk of self-harm. Between April and July 2004 there had been six instances of self-harm, two of them by the same prisoner. In the same period 19 prisoner at risk (PAR) forms had been opened: many were for the same group of prisoners; most forms were closed within two or so weeks of opening. The PAR forms we sampled were all completed properly and comprehensively and they contained useful information, including all staff-prisoner interactions.
- 3.13 Healthcare staff were notified of any prisoner who refused food. Six Listeners were located on the residential areas but not in healthcare; however, there were no difficulties in getting Listeners to prisoners who needed to see them, and Listeners were involved in prisoners' induction. The prison had four care suites, one each in H1 and H2 and two in H3. Each contained a double bunk and single bed, in-cell sanitation and a television; each room was monitored by CCTV. The rooms also contained a contact button that dialled directly to the Samaritans telephone line. There was no safer cell in healthcare, but work had commenced to install two.

Recommendation

- 3.14 Staff training in self-harm and suicide awareness should be increased.

Good practice

- 3.15 *The care suites on residential units contained a contact button that prisoners could use to dial directly to the Samaritans' telephone line.*

Equality, race relations and foreign nationals

Expected outcomes:

All prisoners experience equality of opportunity in all aspects of prison life, are treated equally and are safe. Diversity is embraced, valued, promoted and respected.

- 3.16 There were very few minority ethnic or foreign national prisoners. Although no co-ordinator or manager was responsible for them, they had equal access to facilities. Forty two percent of prisoners were Catholic, and 48% Protestant. There was no monitoring by religious affiliation to ensure equality of access to activities, and our own snapshot analysis showed that Catholics were at a disadvantage in some areas.
- 3.17 Information supplied by the prison showed that there were three minority ethnic prisoners, five foreign nationals, and that 42% of the population were Catholic, 48% Protestant and 10% of other or no faiths. Ninety percent of the staff were Protestant.
- 3.18 There was no officer responsible for equality or diversity, and no monitoring, by religion or ethnicity, was carried out to establish whether specific groups of prisoners had equal access to regimes and services.
- 3.19 Prisoners of different religious affiliations were held together. Staff told us that monitoring of take-up by religion was unnecessary, because they made no distinction between prisoners. During the inspection, we examined various aspects of prison life to see whether there were any differential outcomes by religion. We found no inequity in allocation to education, the legitimate use of force, or those prisoners on adjudication. We did, however, find significant discrepancies in the following areas. Catholics were significantly under-represented on the resettlement unit (29%), as orderlies (a favoured job)(22%) and on the enhanced level of the incentive (PREPS) scheme (34%). They were however significantly over-represented on the basic level of PREPS (63%).
- 3.20 Without regular monitoring, we were unable to tell whether these figures were atypical, or whether they formed part of a trend that had not been addressed. More importantly, neither was the establishment. (See main recommendation HP44.)
- 3.21 Foreign national prisoners reported no instances of differential treatment, other than the fact that they were ineligible for temporary release into the community because they were regarded as 'high risk'. However, there was nothing in place to meet their specific needs; it was usually prisoners who approached staff if they needed to contact their embassy or consulate, or the Immigration and Nationality Directorate.

Recommendations

- 3.22 The prison should have an equality and diversity committee, to examine and investigate monitoring statistics, supported by an equality and diversity officer.
- 3.23 There should be a policy for dealing with foreign national prisoners, and a coordinator appointed to ensure their needs are met.

Family and friends

Expected outcomes:

Prisoners are encouraged to maintain contact with family and friends through regular access to mail, telephones and visits.

- 3.24 An excessive volume of mail and telephone calls was monitored, and prisoners experienced delays in receiving their mail. The visits' environment was relaxed and pleasant, and child-centred visits were available for a few prisoners.

Mail

- 3.25 All mail for the prison was delivered each morning and kept in a portakabin outside the main entrance. One officer was detailed the task of mail censor and x-rayed all mail and parcels each morning before bringing them into the prison.
- 3.26 An excessive volume of both incoming and outgoing mail was censored. Staff said that they checked for enclosures and 'quick read' all mail. All items were logged and any enclosures of cash, cheques and postal orders were noted; envelopes were endorsed as to contents.
- 3.27 Although mail was received and checked by late morning, it was sent to the gatehouse for collection and distribution by night staff. In our prisoner survey, 40% of respondents said they had problems sending or receiving mail, compared to a benchmark of 31% for similar prisons.

Telephones

- 3.28 Prisoners could transfer money into their telephone account on the same day each week. They had ample opportunity to use telephones as they were left on throughout the day and evening. Telephones were switched off when prisoners returned to their cells at 8.30pm, or 10.30pm on Foyleview. There were sufficient telephones, approximately one per 25 prisoners.
- 3.29 Prisoners were allowed 20 numbers on their personal telephone list. In addition, several numbers were automatically activated for all prisoners, including the Samaritans, Alcoholics Anonymous and the confidential police line Crimestoppers.
- 3.30 Each telephone was within a booth to ensure privacy; notices were clearly displayed informing prisoners that their calls could be recorded. Staff in the emergency control room and in the key room monitored calls, approximately a quarter of all made.

Visits

- 3.31 The visits hall offered spaces for a maximum of 28 domestic visits, two closed visits and three professional or legal visits. Visits took place both mornings and afternoons from Wednesday to Sunday. A system of pre-booked visits enabled visitors to book in person, by telephone or on the internet. Three tables were kept free for visitors to committals who were unaware of the pre-booking system.
- 3.32 A visits centre located just outside the main prison entrance provided a welcoming and homely atmosphere for visitors. Staff from NIACRO (Northern Ireland Association for the Care and Resettlement of Offenders) and a prisoner orderly ran the centre. Refreshments were available and the centre provided a great deal of useful information for visitors. NIACRO also offered transport for visitors at reasonable rates.
- 3.33 A computerised system managed the booking, admission and exit of visitors. They booked in at the front desk, had their fingerprint scanned and photograph taken, and were provided with a pass containing a unique barcode linked to their details on the system. As visitors progressed through the admission unit, there were lockers for personal items, they were searched and belongings taken into the hall were x-rayed. As soon as their visitors booked in, prisoners were notified and they made their way to the rear of the visits hall, where a similar computerised identification system was in operation.
- 3.34 Passive drug dogs worked regularly in the visitor search area and staff explained the procedure and reassured nervous visitors. All visitors to the same prisoner were searched at the same time, and one positive indication from the drug dog on anyone in the group resulted in the entire group being offered a closed visit or refused entry. No supporting intelligence was used in conjunction with the dog's indication nor was there a second confirmation line-up. Apart from this, visitors were treated in a courteous and friendly manner by all staff working in this area and their questions were politely answered.
- 3.35 The visits hall itself was clean and modern, although with fixed, plastic seating, which was uncomfortable. A reasonable-sized crèche had an impressive selection of toys and activities for children of all ages. NIACRO workers staffed this crèche during each visits session. NIACRO staff provided a refreshments trolley service to visitors and prisoners, with a range of sandwiches and confectionery.
- 3.36 With considerable input from NIACRO, the prison operated child-centred visits for up to 16 prisoners at any one time. These prisoners remained on the scheme until they reached their home leave date. This scheme enabled fathers and/or grandfathers to spend time once a month alone with their children. Following a normal domestic visit, the mother or carer of the child left the visits hall for approximately 90 minutes, when they were provided with lunch in the visitors centre and had the opportunity to talk to NIACRO staff and others in a similar position to themselves. Prisoners had the opportunity to play with their children in a more relaxed environment, and a buffet-style lunch was provided. Prisoners could also participate in the 'big book read': this involved selecting a reading book for the child, recording it on to audio tape, and handing it out during a child-centred visit.
- 3.37 Family days were held in the gymnasium at three-monthly intervals. Families could spend from 10.30am to 3pm together, and there were activities such as bouncy castles and snooker for the children. This excellent facility was extended to most prisoners but not to the 16 who were currently on the basic level of PREPS (the incentive scheme).

- 3.38 Three family liaison officers played a central role in the administration and organisation of these arrangements. They were not provided with sufficient facility time to liaise effectively with prisoners' families, and their crucial role was not fully supported by their peers or managers.

Recommendations

- 3.39 A formally agreed limit of mail and telephone calls should be monitored and censored. This should be adhered to.
- 3.40 The passive drug dog should be used in conjunction with other intelligence. Collective restrictions should not be placed on a group of visitors.
- 3.41 Seating in the visits hall should be more comfortable and conducive to a relaxed atmosphere.
- 3.42 Child-centred visits should be available to more prisoners and their children, and family days available to all prisoners.
- 3.43 Family liaison officers should be supported by their managers and peers and should be given facility time to carry out their role effectively.

Housekeeping point

- 3.44 Mail should be delivered as soon as possible to prisoners.

Good practice

- 3.45 *Visitors could pre-book visits in person, by telephone and on the internet.*
- 3.46 *Child-centred visits and family days promoted contact and positive interaction between prisoners and their children and families.*

Applications and complaints

Expected outcomes:

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

- 3.47 Applications were handled under request/complaint procedures. There was no central coordination, and completed forms were kept in prisoners' wing files. Senior managers did not sample decisions and the quality of replies.

- 3.48 Applications were treated under a request/complaint scheme in Northern Ireland prisons. Prisoners had to obtain forms from the wing office, at which stage routine matters were resolved instead of moving to formal procedures. All forms were recorded in a separate wing logbook, and forms were dealt with by wing managers or passed on to relevant departments for a response.

- 3.49 In most completed cases, wing senior or principal officers decided wing matters, and prisoners made little recourse to senior managers as a means of appeal. There was provision for confidential access to the governor or Board of Visitors. In the period January to August 2004 there were only a handful of applications to see the governor. Prisoners often chose to pursue complaints through their solicitors or petitioned the Secretary of State for Northern Ireland directly using form 18AD.
- 3.50 There was no independent administration of complaints and no managerial oversight of replies to prisoners. As all completed decisions were filed individually in prisoners' wing records, we could not readily identify any main reasons for complaints. There were very few complaints about staff, and these were generally allegations of favouritism.
- 3.51 In our prisoner survey, respondents to all questions on applications and complaints were considerably more dissatisfied than the benchmark for training prisons. For example:
- 53% found it easy or very easy to get a complaints form, against an 85% benchmark
 - 30% said their applications were dealt with fairly, against a 62% benchmark
 - 23% said they had been encouraged to withdraw a complaint, compared with a 13% benchmark.

Recommendations

- 3.52 All request/complaint forms should be centrally recorded and copies of completed cases should be centrally filed.
- 3.53 Senior managers should regularly check the quality and appropriateness of replies.
- 3.54 Senior managers should have access to information that identifies any trends in the grounds for complaints.
- 3.55 Managers should identify the reasons why prisoners are under-using confidential access and appeal routes, and encourage them to do so.

Section 4: Healthcare

Expected outcomes:

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

4.1 Healthcare services were closely linked with those at HMP Maghaberry. Although there were inpatient beds at Magilligan, patients who required more than a few days inpatient physical or psychiatric care were transferred to Maghaberry. Healthcare staff at Magilligan provided a good service to prisoners. In our survey, 46% of respondents said the quality of healthcare was good or very good. Prisoners had good access to all primary care services, including the dentist, and there was a variety of health promotion. Access to secondary care, in the form of outpatient consultations, was also good. Mental health provision was poor; there was limited access to psychiatric services and no permanent counselling service.

Environment

- 4.2 The healthcare centre was some distance from the main residential wings. There were eight inpatient beds, which were not part of the prison's certified normal accommodation; however, prison orderlies occupied three of these. Only two rooms had in-cell sanitation. Observation cells were being upgraded and were out of commission. There was also a 'protected room' with padded walls and floor and strip clothing; this had been used only once in the previous three years. There was a small association room with a pool table and television. Patients could also use a treadmill and an exercise bike in the healthcare centre, as they did not have access to the main gym facilities.
- 4.3 Primary care facilities in the healthcare centre included two consulting rooms, a treatment room, dental suite, x-ray room, general office and a waiting room. A variety of health promotion posters and leaflets was available. Healthcare staff had the use of a transit van that held emergency medical equipment and a stretcher. The van was used to travel to the three H-blocks and to transport prisoners back to the hospital if required.
- 4.4 Medicines were stored in five different locations in the prison; there was a pharmacy room and a treatment room within the main healthcare centre, and treatment rooms on each of the three H-blocks. All the treatment rooms were clean and tidy and contained a variety of emergency medical equipment.
- 4.5 Medicine stock levels were low. Healthcare staff said that monthly expiry date checks were carried out, but this was not supported by documentation. Locked medicine trolleys in each treatment room stored special sick medicines and the few medicines intended for administration. A specific cupboard was used to store controlled drugs and records were kept in accordance with legal requirements. A locked metal cupboard in the main treatment room was used as an emergency cupboard to store medicine stocks for out of hours use. Most were stored in the manufacturers' original packs, but the community pharmacy service had repackaged some medicines: some of them were labelled inadequately and several items were missing expiry dates. Lockable wooden cupboards in the pharmacy room contained some special sick medicines and a few external medicines. At the time of the inspection these

cupboards were not locked and the keys were left in the doors. In other respects medication security appeared adequate.

- 4.6 All refrigerators used for storing medication were in working order. Maximum/minimum temperature records were properly maintained, except for a faulty thermometer in H3; staff who made the record had failed to notice the fault.
- 4.7 The temporary reception healthcare room was not ideal but provided a confidential environment for staff to speak to prisoners.

Records

- 4.8 All inmate medical records (IMRs), including dental records, were sent with prisoners when they were transferred from Maghaberry. IMRs were stored in a locked office in the healthcare centre. Records of prisoners who had been discharged from Magilligan were sent back to Maghaberry for storage. There was evidence that if an individual returned to the prison, his original IMR was found and used. Most entries in medical notes were typed, having been dictated by the doctor during a consultation.
- 4.9 The system used for issuing prescriptions was complicated. The doctor wrote and signed a record card, which listed all medication for the patient, written in rows identified by letters of the alphabet, and directions for use. Record cards were filed in the relevant treatment room together with individual administration charts. These charts were completed by the healthcare staff and cross-referenced to record cards. Consequently, an administration chart in itself was meaningless; it had to be read in conjunction with its record card. There was considerable room for error in this system.
- 4.10 All prescribed medication was dispensed to named patients; this allowed full patient medication records to be maintained on the pharmacy computer. The pharmacy could also provide data on prescribing trends in a similar way that data is provided to primary care trust prescribing advisers in England.

Staffing

- 4.11 The hospital manager was a senior nursing officer with a general nursing qualification. He was not a member of the senior management team and was managed by a residential governor. He was supported by a total of eight nurse officers and five hospital officers at the time of the inspection. Although healthcare staff had access to both Prison Service and healthcare training courses, including resuscitation training, opportunities to attend courses had been reduced in 2003 because the time and budget allocated had been diverted elsewhere. Staff had access to off-site clinical supervision.
- 4.12 Medical cover was provided by a local GP practice. Out of hours medical cover was provided by four local GPs; they were also on call as forensic medical officers. No specific administrative staff were dedicated to the healthcare centre, but a secretary was available every day to type dictation.
- 4.13 Dental services were provided by three local dentists who were contracted to provide six sessions per week. An optician attended the prison once a month, and a variety of hospital consultants attended the prison regularly.

- 4.14 A pharmacist from the local Boots pharmacy visited the prison every six weeks. Another pharmacist was contracted by the NI Prison Service to oversee pharmacy services across all three prisons in Northern Ireland. He was involved with the medicine and therapeutics committee and visited Magilligan three times a year.

Delivery of care

Primary care

- 4.15 A member of healthcare staff saw all prisoners on arrival for a medical assessment. They were then seen by a GP the following morning and by the dentist within a week of their arrival. As part of the general prison induction, healthcare staff delivered a half-hour module that explained available healthcare services. Prisoners were encouraged to register for a well man clinic session or smoking cessation course.
- 4.16 Prisoners in the three H-blocks who wished to see a GP applied to wing officers at morning unlock, who then informed healthcare centre staff. Before 10am patients were assessed by healthcare staff, and treatment or advice was provided as required. Patients who had to see a doctor reported to the medical room on the H-block later that morning. Prisoners from Foyleview and those from the special supervision unit saw the doctor in the healthcare centre.
- 4.17 In our survey, 61% of respondents said the quality of care provided by the doctor was bad or very bad. Many prisoners told us they were concerned about how the doctor stopped long-term prescribed medications without considering the consequences for patients, and this had coloured their overall view of healthcare services at the prison. We spoke to prisoners whose anti-depressant medications had been stopped by the doctor. They had initially found it difficult but, with hindsight, realised the benefits of this decision.
- 4.18 Healthcare centre staff had made good links with a variety of healthcare professionals. A diabetes nurse specialist attended the prison regularly, and there was a weekly genito-urinary consultant clinic for patients with sexually transmitted diseases or blood-borne viruses.
- 4.19 Prisoners had access to a variety of health promotion literature in the healthcare centre and could make an appointment with a member of the healthcare team for a well man assessment, which included cholesterol and blood pressure assessments. Staff also ran group smoking cessation clinics where prisoners were issued with nicotine replacement patches. This was at variance with the practice at Maghaberry where prisoners had been prescribed nicotine replacement therapy. They were unable to continue this therapy at Magilligan until they joined a group, for which there was a waiting list.
- 4.20 The policy not to offer hepatitis B vaccinations to prisoners was under review. There was no chronic disease register but staff kept a list of prisoners considered to be at risk, for example, those who were diabetic or who had a history of mental health problems.
- 4.21 Staff and prisoners were involved in the Department of Health 'Essence of Care' project, which aimed to achieve and sustain good practice. As a first step prisoners had been asked about aspects of self-care that they felt could be improved. Consequently, liquid soap dispensers had been fitted in all washrooms in the prison and there were plans to provide all prisoners with disposable hand wipes in their cells.
- 4.22 Approximately 95% of patients received in-possession medication, subject to satisfactory risk assessment and patient agreement. This recent innovation had been well received by both prisoners and staff and no problems were reported. Medicines were supplied from the

medicine trolleys, in the corridors adjacent to the treatment room. Medications were dispensed through the bars of locked gates during two daily treatment times, at approximately 8.30am and 6pm. Queues were not well supervised. The policy for in-possession medication needed updating to bring it in line with actual practice.

- 4.23 There was no opportunity for prisoners to talk to staff confidentially when they received their medications. No provision was made for patients needing a later dose to have it administered. This meant, for example, that a patient who could not have his medication in-possession received his night time dose of anti-depressant as a loose capsule in the morning, to be saved until bedtime. Prisoners did not have lockers in their cells for the storage of the medicines, and requests for repeat prescriptions were the responsibility of the patient.
- 4.24 A special sick policy included a limited list of simple medicines available for supply; the policy needed review. There were few records of supply on the administration charts and the system was not audited. An out of hours cupboard held medicines for use under the direction of an on-call doctor. Stocks were replaced by signed requisition, but these were not audited. The pharmacist had no direct contact with patients other than involvement with the smoking cessation clinic.
- 4.25 As well as an initial appointment, prisoners could see a dentist for a variety of treatments, and prisoners who had completed the smoking cessation course were offered a scale and polish. The waiting list for a routine appointment was four weeks and urgent cases were seen within two days.
- 4.26 Secondary care consultants, such as a general surgeon, an ear, nose and throat surgeon and a dermatologist from Causeway Trust hospital, attended the prison every six-eight weeks. This meant that prisoners who had been referred to them by the GP were seen within a short time of referral. Prisoners who needed to attend outside hospital appointments could often make use of the medical parole system and travel unescorted.
- 4.27 The doctor saw prisoners on the day before their release. If they were taking any medications, they received a three-day supply. Although there were no formal links with community healthcare services, if healthcare staff had particular concerns, they made efforts to make relevant referrals to community services, with the patient's consent.

Inpatients

- 4.28 Healthcare staffing resources did not provide sufficient numbers or skills to use inpatient beds, other than as a holding facility. During this inspection, three prisoners were admitted to the unit for a maximum of 24 hours each. Each had an inpatient care plan that identified his specific healthcare needs. Patients were not able to have a full regime due to staffing numbers, but were given the opportunity of some respite from the main prison.

Mental healthcare

- 4.29 Mental healthcare at Magilligan was poorly developed. At the time of the inspection there were two registered mental health nurses in post, and a psychiatrist attended when required. We met many prisoners who had suffered trauma and bereavements in their lives, but no permanent counselling services were offered at Magilligan. Arrangements with Maghaberry, which had the main mental health resources, meant that Magilligan took only mental health patients who were stable. Consequently, prisoners with mental health problems who needed inpatient care were transferred back to Maghaberry.

Recommendations

- 4.30 There should be a common approach to smoking cessation services and the provision of nicotine replacement therapy across the Northern Ireland Prison Service (NIPS) to ensure continuity of provision.
- 4.31 Healthcare staff should be involved in the arrangements for prisoners being released to assist them in accessing health services.
- 4.32 The medicines and therapeutics committee should produce relevant written policy documents, or standard operating procedures, to define the systems in operation. In particular the in-possession and special sick policies should be updated.
- 4.33 The pharmacy contract should be reviewed and the pharmacist should be encouraged to take a more active role in the provision of healthcare at the prison. Pharmacist-led clinics should be introduced to allow patients to discuss their medication, and to supply medicines for minor ailments.
- 4.34 The system for issuing prescriptions should be reviewed and simplified to reduce the need for transcription and duplication and thereby reduce the risk of error.
- 4.35 Induction medication packs should be provided so that all prisoners receive a supply of simple self-care medication, including paracetamol tablets, at the time of admission.
- 4.36 Special sick records should be audited to ensure proper operation and detection of possible abuse or inappropriate supply.
- 4.37 Patients who need a night time dose of medication should receive it at an appropriate time.

Housekeeping points

- 4.38 Nursing staff should record their interactions with prisoners directly into their inmate medical record (IMR), and all entries should be timed, dated and signed to ensure contemporaneous record keeping.
- 4.39 Special sick supplies should be properly recorded on the patient's prescription chart at the time of supply.
- 4.40 The provision of daily in-possession packs should be encouraged.
- 4.41 Patients should sign to confirm receipt of in-possession medication.
- 4.42 Prisoners should have lockers in which to store in-possession medicines.
- 4.43 The refrigerator thermometer in H3 should be replaced, and staff should be re-trained in the use of the equipment.
- 4.44 All medicines stored in the prison should be kept locked at all times.
- 4.45 Expiry dates on medications should be regularly checked and documented.

- 4.46 Medicines in the out of hours cupboard should be fully labelled in accordance with the requirements of the Medicines Act. Wherever possible, stock medicines should be supplied in the manufacturers' original container.
- 4.47 An audit system should be introduced to reconcile requisitions for out of hours stock with records of usage.

Good practice

- 4.48 *The use of triage algorithms ensured consistency of assessment, diagnosis and care by healthcare staff for all prisoners.*
- 4.49 *Healthcare staff had embraced the concept of 'Essence of Care' as a framework in which to provide good care in a variety of patient-orientated areas.*
- 4.50 *Prisoners had a dental check-up within a week of arrival at the prison, and this promoted oral health.*

Section 5: Activities

Education and library provision

Expected outcomes:

Education and skills training meet the requirements of the Adult Learning Inspectorate's common inspection framework (separately inspected by ALI). Prisoners are encouraged and enabled to learn both during and after sentence, as part of sentence planning; and have access to good library facilities.

5.1 Education provision at Magilligan was unsatisfactory. Only 35 prisoners were in education and classes were often cancelled. The accommodation and most of the learning resources were very poor. The range of foundation programmes was inadequate, and learning plans were poor and quality assurance procedures inadequate. Library facilities were poor, and visiting the library was a problem for many prisoners. There was an inadequate range of material on education or vocational courses.

Education

- 5.2 Education provision at Magilligan was provided by Limavady College. Although there were good informal links with the college, there was no formal partnership or service level agreement. Provision was managed by an education officer who reports to the Governor 4 Resettlement/Services and Activities. Education classes included basic skills, ICT (information communications and technology) and an access course to further and higher education. Most classes took place in the education department, and prisoners felt that staff were caring. Four prisoners were undertaking Open University courses.
- 5.3 The quality of provision in education was unsatisfactory. However, some very good quality work was achieved through the writer in residence, and some prisoners had reached extremely high standards of writing skills. There was also a good access course from which a few learners had progressed into further or higher education.
- 5.4 At the time of inspection only 35 prisoners were in education. The prison had identified spaces for 50 learners, although this was too high for the current accommodation. Staff cover arrangements were poor, and many classes were also cancelled because of regime restrictions.
- 5.5 Accommodation and most learning resources were very poor. Where there was good ICT equipment available this was not being used by learners. Little account was taken of prisoners' prior learning and achievement, and some learners were placed on inappropriate level courses. Initial assessment was not used effectively to clearly identify and plan prisoners' learning. The range of foundation programmes was inadequate to cope with the diverse needs of prisoners in Magilligan. Learning plans were poor. There was inadequate collection, analysis and use of data to plan and track retention effectively, and achievements and quality assurance procedures were inadequate.

Library

- 5.6 The prison had good links with the local library service, but library facilities at Magilligan were poor. The main library was located next to the education block and there was a library room in Foyleview for the prisoners there. Facilities in the Foyleview mini-library were worse; this was little more than an untidy cupboard with out-of-date books and videos scattered around the room and shelves.
- 5.7 A library assistant came to the prison every Wednesday and three officers had been trained to use the library computer; one prisoner orderly also worked in the library.
- 5.8 In theory, the main library was open Monday to Friday, 9.30am to 12 noon and 2pm to 3.30pm, and on Sundays, 9am to 4pm. In practice, a full service was guaranteed only once a week when the library assistant was there. On other days, prisoner access depended on whether trained officers were available to operate the library computer. The mini-library at Foyleview opened for only one hour on Wednesday afternoon, from 4.30 to 5.30pm. There was a small stock of books in the healthcare centre, and these were replenished once a week; there was no service for prisoners on the special supervision unit.
- 5.9 Prisoners in the adjacent education block probably had the best access to the library, although this was only guaranteed on Wednesdays. There was an inadequate range of books and other learning materials for prisoners in education or on vocational courses. Sunday was the main library day for prisoners in the H-blocks. However, staff on duty had not been trained to use the computer and books were issued manually. The librarian had attempted to keep a daily diary recording when the library was shut due to staff shortages, but several of these diaries had gone missing.
- 5.10 The librarian had taken the initiative of issuing a survey to prisoners about their use of the library. Responses showed that 50% of respondents attending education and 85% of those in workshops felt there was inadequate library access. In our own prisoner survey, only 17% of respondents said they went to the library at least once a week against a benchmark of 58% for training prisons.

Recommendations

- 5.11 Coherent and inclusive quality assurance strategy and procedures should be developed for education provision.
- 5.12 There should be a formal partnership or written agreement with the education supplier.
- 5.13 There should be an effective contingency plan to cover for staff absences in the education department.
- 5.14 Senior managers should collect and analyse meaningful data across the education provision and use it to inform decisions; this should include a coherent management information system to plan future provision.
- 5.15 There should be better recording and use of learning plans.
- 5.16 The library should be housed in better accommodation.
- 5.17 All prisoners should be able to use the library at least once a week.

- 5.18 Prisoners on Foyleview and in the special supervision unit and patients in healthcare should have access to a full library service.

Work

Expected outcomes:

Prisoners are engaged in safe work and are treated fairly. Work should prepare prisoners for employment on release and help to reduce reoffending.

- 5.19 There was a wide range of work and vocational training provision in properly equipped workshops, but there was insufficient accreditation of training and very poor attendance. Allocation to jobs was not transparent, and prisoners on Foyleview could not continue vocational training begun in the main prison. Not all prisoners had jobs.
- 5.20 The head of resettlement and services was responsible for managing work and vocational training activities in the prison, and there was a wide range of useful work activities for prisoners. These included carpentry and joinery, catering, laundry, bricklaying and plastering as well as useful skills being developed in areas such as candle making and picture framing.
- 5.21 A weekly work allocation board, chaired by a governor grade and attended by the training and employment manager, was in theory responsible for work placements. The movement control manager was responsible for the allocation of cleaners and orderlies. The allocation board, in effect, rubber-stamped decisions that had already been made. On induction, new prisoners were assessed for their skills, motivation, employment history and educational level, and work places were identified for them then.
- 5.22 As most work places required a minimum nine-month commitment, prisoners serving a short sentence were usually appointed as cleaners and orderlies. These jobs were regarded as attractive, and it was not unusual for them to be allocated on the basis of staff's personal knowledge of the prisoner or on another prisoner's recommendation. Applications for a change of labour were pre-determined without reference to the allocation board, and senior managers were not always involved in the decision making process. Consequently, the job allocation system was not transparent and was open to abuse.
- 5.23 About 70 prisoners were employed as cleaners and orderlies and there was a shortfall of work spaces of around 72. Only 140 jobs in the workshops and in education were meaningful. Prisoner attendance at work was very poor due to lateness of staff delivering them and workshop closures. The indifference of staff to getting prisoners to work seriously impeded the opening of workshops and reduced the overall working day. (See main recommendation HP46.)
- 5.24 Senior staff at Magilligan did not have a clear strategic vision and direction for the development of education and vocational training at work. There was inadequate coordination between education and training at Magilligan, and this was particularly poor between the main prison and Foyleview. Prisoners who had started an accredited vocational training programme in the main prison did not have the opportunity to continue this if they were moved to Foyleview.
- 5.25 There was particularly good teaching and learning in metal fabrication and furniture manufacturing, where learners developed outstanding skills in well equipped workshops. However, there was poor and cramped accommodation in most other areas.

- 5.26 There was an inadequate range of accredited vocational programmes leading to qualifications to help resettlement on release. There were missed opportunities to accredit training in such areas as gardens, laundry, cleaning, bricklaying, joinery and work in the community.
- 5.27 There was poor cover for staff absences in vocational training areas, and many workshops were cancelled at short notice because staff were redeployed to other duties. Vocational training in the prison and in the community was not always recorded, and there were no overarching quality assurance arrangements to monitor provision. However, prisoners' wages at Magilligan were adequate and did not disadvantage those in education or vocational training.

Recommendations

- 5.28 The allocation of all prisoner jobs should be managed centrally.
- 5.29 Prisoners serving a short sentence should have access to work other than domestic jobs.
- 5.30 A senior manager should be responsible for ensuring that workshops open on time, and that all prisoners allocated to work attend.
- 5.31 Accreditation should be available for the range of vocational training on offer.
- 5.32 Accommodation for education classes and vocational workshops should be improved.

Physical education and health promotion

Expected outcomes:

Physical education (PE) and facilities meet the requirements of the Adult Learning Inspectorate's common inspection framework (separately inspected by ALI). Prisoners are also encouraged and enabled to take part in recreational PE, in safe and decent surroundings.

- 5.33 Good PE facilities were available for all prisoners, and access to them was fair. The PE programme accommodated all needs, abilities and ages. Although accredited programmes could be delivered, none had been completed for some time.
- 5.34 The gymnasium was converted from an old workshop and was suitable for its purpose. It was spacious and consisted of a sports hall and weights area. Gymnasium facilities were also available for prisoners in Foyleview. There was also an outdoor area with running track, a seven-a-side football pitch and a grass sports field. There were showering facilities for prisoners and staff, and there was a classroom, office and staff changing room separate from the gymnasium. Prisoners mainly used their own sports clothing, but good quality sports clothing was available for those prisoners who did not have their own.
 - 5.35 The gymnasium was open from 9am to 8.30pm each weekday and from 9am to 4pm at the weekend. There was a published PE programme on each of the wings. The programme varied each week to give all prisoners equal opportunity to attend all activities. Access was by application and, as up to 45 could be accommodated at each session, all prisoners could regularly attend PE. The PE staff collected prisoners from the wings and escorted them to the gymnasium. This ensured that an accurate record of attendance could be maintained. Records showed that 50% of the population had attended the gymnasium in the week prior to this

inspection. The PE programme was mainly recreational but accommodated the needs of all abilities and age groups. Referrals from the hospital for remedial PE were programmed in for Monday and Wednesday mornings.

- 5.36 Instructors provided good supervision and support to prisoners. Although they were trained to deliver accredited programmes, none had been completed for many months and the impetus to give prisoners transferable skills had declined. Several prisoners had achieved qualifications in a range of activities in 2003, including canoeing and rescue emergency care. The recreation programmes were well planned and managed. They were carefully scheduled and ensured prisoners had good opportunities to participate in a broad and secure range of activities.

Recommendation

- 5.37 Accredited programmes should be reintroduced and embedded in the physical education provision.

Faith and religious activity

Expected outcomes:

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

- 5.38 Although there was no daily chaplaincy presence at Magilligan, prisoners' religious needs were met. There was no chapel and prayers were conducted in an unsuitable environment. A chaplain saw all new prisoners.

- 5.39 There was no daily or regular chaplaincy team presence at Magilligan, although only 8% of respondents to our survey said they were not able to speak to a religious leader of their faith. Chaplains generally came to the prison to conduct services, but also attended when prisoners wanted to see them. Church of Ireland, Catholic, Methodist, Presbyterian and Free Presbyterian denominations were represented.

- 5.40 There was no suitable chapel or room for prayer. Religious services were held in one of two store rooms in the grounds of H2 and H3 blocks. Catholic worship was held on Sundays in H2, but prisoners in Foyleview were not allowed to participate; a separate mass was held for them on Thursday evening in a television room. A combined service for most other denominations was held in H3, and a separate one for Free Presbyterians was held afterwards. A maximum of 30 prisoners was allowed at any one time, mainly because of limited space; if more wanted to attend, an additional service was held. A bible studies group met every Friday evening in the H-blocks and then in Foyleview.

- 5.41 Chaplains did not visit prisoners in the special supervision unit as a matter of course. There were arrangements for one minister to see all prisoners on induction every Thursday. Chaplains had no difficulties in seeing prisoners, and their relations with staff were good. Chaplains were beginning to become involved in the work of the prison; for example, they were included in meetings of the suicide prevention committee.

Recommendations

5.42 Religious services should take place in a proper chapel or room dedicated for worship.

5.43 Prisoners on Foyleview should be able to participate in the main religious services.

Time out of cell

Expected outcomes:

All prisoners are actively encouraged to engage in out of cell activities, and the prison offers a timetable of regular and varied extra-mural activities.

5.44 Association and exercise outdoors were offered regularly, but industrial relations problems seriously disrupted the delivery of the core day.

5.45 Published daily routines were available and understood by prisoners. However, because many staff were working to rule, they did not enter the prison until their shift start time. This severely disrupted the normal core day, making unlock times unpredictable. In our prisoner survey, only 14% of respondents said they spent 10 or more hours out of their cell on a weekday, compared to the benchmark of 25% for comparable prisons. In addition, the published core day itself was unrealistic, for example, stating that staff start times, prisoner head counts and unlock would occur simultaneously.

5.46 Association was offered each evening, except for Saturdays, and was rarely cancelled. Exercise yards were opened routinely during association so that prisoners could spend time in the open air. In our survey, 68% of respondents said they had access to outside exercise three or more times each week; this compared favourably with the benchmark of 49%. For those who wished to stay indoors, there were recreational rooms equipped with pool tables and snooker tables and televisions.

Recommendation

5.47 A realistic core day should be devised and published. It should be strictly adhered to.

Section 6: Good order

Security and rules

Expected outcomes:

Security and good order are maintained through proactive staff-prisoner relationships based on mutual respect as well as attention to physical and procedural matters. Rules and routines are well publicised, proportionate, fair and encourage responsible behaviour. Categorisation and allocation procedures are based on an assessment of a prisoner's risks and needs; and are clearly explained, fairly applied and routinely reviewed.

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| 6.1 | Physical security was excessive for the type of prisoner held in Magilligan. Movement within the prison was restricted and prevented managers from being effective. Dynamic security was not well established. Security information was poorly analysed and procedural security was applied inconsistently. Prisoners knew and understood the local rules. There was no formal system of security categorisation of prisoners: decisions about allocation and access to activities and regimes were based on structured sentence planning assessments. |
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- 6.2 Physical security at Magilligan was of the highest order. The main perimeter wall was covered by camera and floodlit at night. Inside, there were several walled zones leading to the accommodation areas. There was electronic entry to almost all parts of the prison. This very high level of physical security was excessive: many prisoners were serving short sentences, and most served less than 18 months before being discharged. (See main recommendation HP43.)
- 6.3 Managers did not have unrestricted access to all parts of the prison. Entry to any part of the prison relied on either electrical access or a prison officer unlocking a gate. This effectively prevented managers from being able to conduct unannounced checks, or to provide first hand management and direction. (See main recommendation HP43.)
- 6.4 Dynamic security was not well established. Prison officers did not get close enough to their charges to build relationships based on trust. The lack of purposeful activity for all prisoners also impeded dynamic security. There was some mistrust among staff: prison officers told us they would not pass information to security because they were wary of where it might end up and that it would be traced back to them. The security department knew this and were attempting to remedy the situation.
- 6.5 Security information was submitted via security information reports (SIRs). In 2004 to date (mid-September), 107 reports had been submitted. However, analysis was poor and resulted in either no action taken or poor actions recommended.
- 6.6 Procedural security was not applied consistently. For example, although all staff were thoroughly searched when entering the prison and their bags put through an x-ray machine, this did not happen when prison officers had their break, when no one was searched.
- 6.7 Prisoners knew the local rules. These were explained when they first arrived and they were given a booklet which set them out in detail. Some published rules and policy statements were available on all the wings. Prisoners told us they knew the rules and how they were applied.

Categorisation

- 6.8 Prisoners were given an initial security categorisation of high, medium or low risk based on the nature of their main offence. High risk prisoners were held only at Maghaberry. There was a process whereby high risk prisoners could be recategorised to medium risk, but there were otherwise no systematic or routine reviews and most prisoners retained their initial categorisation throughout their time in custody. Decisions about a prisoner's suitability for particular activities, regimes or temporary release were based on the structured assessment, case management and evaluation (ACE) system (see paragraph 8.7).

Recommendations

- 6.9 A senior manager should check all security information reports to ensure that they are properly analysed and followed up with appropriate action.
- 6.10 Searching of staff should be consistent.

Discipline

Expected outcomes:

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

- 6.11 Disciplinary hearings were conducted properly and paperwork was fully completed. Prisoners found guilty were also usually downgraded under the incentive scheme, a form of double punishment. Force to restrain prisoners was used as a last resort and had been used on 16 occasions in a 13-month period. Paperwork authorising use of force was not properly certified. The special supervision unit (SSU) provided poor accommodation with no in-cell electricity or in-cell toilets and no access to night sanitation. Staff treated prisoners well, and prisoners had access to daily showers, exercise and use of a telephone. Prisoners who had been indicated by the drugs dog were held in the SSU without adjudication
- 6.12 Prisoners facing disciplinary charges were seen by a doctor before they attended an adjudication hearing. All hearings were held in a small portakabin adjacent to the special supervision unit. There was sufficient room and the prisoner was seated throughout.
- 6.13 We observed some hearings. They were conducted well and prisoners had ample opportunity to participate. Prisoners wishing to appeal against adjudication awards could use their own legal representatives or petition the Secretary of State for Northern Ireland using form 18AD. Prisoners found guilty were also reviewed under the progressive regimes and earned privileges scheme (PREPS) and this usually resulted in a downgrade to the next level (see also 6.31). This amounted to double jeopardy.
- 6.14 The completed adjudication forms we sampled had been completed properly, and punishments were consistent with the offence. Awards were generally fair and reasonable; in the period January to August 2004, there had been 237 adjudications.

The use of force

- 6.15 The levels of recorded assaults at Magilligan were low. In the period August 2003 to August 2004 there had been no assaults by prisoners on staff, and about 15 assaults by prisoners on other prisoners. During this time the legitimate use of force, control and restraint (C&R), had been used on 16 occasions, mainly on prisoners on H1, H3 and the SSU. In each case a healthcare officer had seen the prisoner.
- 6.16 In a recent three-month period, the special cell in the SSU had been used only once and the prisoner had not been kept there overnight.
- 6.17 Although there was the relevant paperwork with details of each use of C&R, in only a few instances had forms been properly certified and signed off by a senior manager.

Special supervision unit

- 6.18 The SSU was a single building in a compound that also housed the portakabin used for adjudication hearings. The unit was staffed by one senior officer and two officers; two additional officers carried out voluntary drugs tests in the SSU.
- 6.19 The unit had 15 single cells, all of them sparsely furnished with a concrete bed and table and no in-cell toilet. The SSU had no night sanitation and prisoners had to slop out every morning. (See main recommendation HP42.) Eight cells were kept for prisoners on cellular confinement and a separate cell was used as an observation cell. None of these cells had in-cell electricity or televisions. The other seven cells were used to hold prisoners on Rule 32. Their cells had the advantage of a television but, in all other respects, they provided a stark environment.
- 6.20 In the three months before the inspection, an average of four or five prisoners had been in the SSU. At the time of this inspection there was only one occupant who had been there for three days' cellular confinement following adjudication: he told us that he knew why he was there and said that staff treated him well. The paperwork authorising detention in the SSU was properly completed. The prisoner had been offered a daily shower, daily exercise and the use of the telephone. Apart from basic toiletries and a towel, a bible was the only item he was allowed to have in his cell.
- 6.21 Prisoners on good order or discipline were usually those on whom the drug dog had indicated. In these circumstances prisoners were automatically taken to the SSU for a period of 48 hours without adjudication. If they were on enhanced level of PREPS (the incentives scheme), they had a drugs test. During their time in the SSU they continued to receive pay if they had previously been in paid work or education. Otherwise they had the same regime as prisoners on punishment. Holding prisoners in the SSU in this way meant that they were being unofficially punished without recourse to adjudication.
- 6.22 Prisoners rarely spent much time in the SSU – generally two or three days. There were daily visits by the governor and each day prisoners were taken to see the doctor in the adjacent healthcare building. A member of the Board of Visitors visited the SSU at least once a week.

Recommendations

- 6.23 Prisoners found guilty of charges in adjudication hearings should not be routinely downgraded under the progressive regimes and earned privileges scheme (PREPS).
- 6.24 Prisoners on cellular confinement should have access to reading material other than a bible.
- 6.25 Prisoners should not be held in the special supervision unit (SSU) on the sole basis of an indication by the drug dog.

Housekeeping point

- 6.26 All control and restraint (C&R) paperwork should be properly authorised and certified by a senior manager.

Progressive regimes and earned privileges scheme

Expected outcomes:

Incentives and earned privilege schemes are well publicised, designed to improve behaviour and are applied fairly, transparently and consistently within and between establishments, with regular reviews.

- 6.27 The progressive regimes and earned privileges scheme (PREPS) had been operating for over three years but was not regularly reviewed. Some prisoners and staff thought its application was unfair. The link with voluntary drugs testing was a disincentive to enhanced status, and some prisoners were demoted as a consequence of one instance or following adjudication where charges had been proven. A system of open reporting was in operation.
- 6.28 PREPS had been introduced to Magilligan in May 2001 and had been reviewed in the October of that year. A policy dated May 2002 was in place at the time of our inspection; it was not clear whether there had been subsequent reviews. The policy document did not clearly set out what was expected of staff operating the scheme nor did it contain or explain the various forms associated with the policy.
- 6.29 The normal three incentive levels were in operation: basic, standard and enhanced. The scheme was clearly linked to earning potential – prisoners on enhanced level could earn up to £20 per week and those on basic only £6 per week. Other incentives included increased gym opportunities, more spending allowance in the tuck shop and the potential to move to Foyleview. Prisoners on enhanced level also had to agree to participate in the voluntary drugs testing programme. This effectively made voluntary testing compliance testing, and it was a disincentive for prisoners to progress to enhanced.
- 6.30 Progression through the levels was heavily reliant on reports from personal officers. A minimum of four positive weekly personal officer reports were required before prisoners were eligible for progression from basic to standard, and at least eight such reports to move from standard to enhanced. Progression was not automatic; a personal officer had to recommend it. Many prisoners told us they did not believe the system was fair, a view supported by some

staff. At the time of our inspection, there was a Catholic prisoner population of 42%; 63% of prisoners on basic and 34% on enhanced were Catholic. There was no monitoring to ensure equitable treatment within the scheme.

- 6.31 Prisoners who were nominated for upgrading were assessed and decisions were also based on their participation in offending behaviour programmes and meeting sentence plan targets. A prisoner's personal officer and unit senior officer were required to comment on his suitability before the residential principal officer made the final decision.
- 6.32 Prisoners were demoted for receiving adverse reports and many were demoted as a direct consequence of being found guilty at adjudication (see also recommendation 6.23). In addition, prisoners on enhanced level who tested positive on a voluntary drug test were automatically demoted to standard regime. This also applied to prisoners in Foyleview who, in addition, would be returned to the main prison.
- 6.33 A system of open reporting was in operation and all paperwork used in PREPS was seen and signed by prisoners (see also good practice example 2.26). Appeals against decisions were forwarded to the residential governor. There was no central register of the number of appeals made, their reasons or their outcomes.

Recommendations

- 6.34 The progressive regimes and earned privileges scheme (PREPS) policy should be reviewed annually. Its expectations for staff should be explicit and supported by a full set of documentation.
- 6.35 Voluntary drugs testing should be separate from PREPS.
- 6.36 Prisoner progression on the scheme should be automatic once they have reached the appropriate level of behaviour.
- 6.37 Prisoners should not be demoted automatically as a consequence of a single act.
- 6.38 There should be a central register of appeals indicating the reason for the appeal and the outcome.

Section 7: Services

Catering

Expected outcomes:

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

- 7.1 Arrangements for the storage and preparation of food were satisfactory, but poor practices in the serving of meals went unchecked and unchallenged. The daily food allocation per prisoner was significantly higher than in similar prisons. Dining facilities with toasters and microwaves were provided on the main units, but Foyleview prisoners enjoyed no additional benefits. The gap between meals on Saturday evening and Sunday morning was excessive.
- 7.2 Staffing levels for the kitchen were set at one principal officer, two senior officers, eight catering officers and eight civilian porters. Placements for up to six prisoners were available, but restricted to Foyleview residents. At the time of this inspection, there was one senior officer vacancy, two catering officers were off sick and only two prisoners were undertaking national vocational qualification training.
- 7.3 The kitchen was clean, well presented and had adequate facilities to meet its demands. Its location outside the main security fencing could delay the delivery of meals to the main residential units. There was also some variation in delivery times. Lunch was supposed to be despatched from the kitchen at 11.45am, but we observed food trolleys waiting on H1 unit at 11.40am; lunch was served in the healthcare unit at 11.35am and lunch for Foyleview prisoners was collected at 12.30pm. Breakfast was served each morning, but the gap between dinner on Saturday evening and breakfast on Sunday morning was 16 hours without any snack to see prisoners through this period.
- 7.4 When the food arrived on the units, catering staff checked food temperatures; we saw subsequent temperature checks once the food had been transferred from the heated trolleys to the servery. Servery workers had received basic hygiene training from catering staff, but we saw some examples of poor and unacceptable practice in the serving of meals. White coats, hats and protective gloves were not always worn and, in one instance, servery workers handled food directly rather than using the appropriate utensils. We observed double servings given to prisoners who told staff that other prisoners did not want their lunch. Staff delivered hot meals to the cells of prisoners who were on visits and due to return late to the unit. Records of regular servery checks by catering staff focused on the presentation of the servery area and always took place outside mealtimes.
- 7.5 Prisoners could dine in association but many told us they preferred to eat in their cell or with others on their wing. Servery areas also provided toasters and microwaves for prisoners' use. Prisoners in Foyleview enjoyed few additional opportunities for self-catering; kitchen facilities were limited for the number of prisoners in each unit, and prisoners were not allowed to purchase food when they were out in the community.
- 7.6 At £2.34 per prisoner, the daily food budget was around 40% higher than in similar prisons and did not represent good value for money. A three-week menu cycle offered an adequate number of meal choices; three for lunch and four for dinner. Vegetarian, low fat and healthy options were routinely offered and special diets were catered for. There were six diabetic diets

at the time of our inspection. No ethnic or culturally specific diets were provided. The system for ordering meals differed between units: some prisoners submitted their menu choices one week in advance while others had to order for the full three-week cycle.

- 7.7 Food comments books were not available on the wings and prisoners wishing to comment on food had to use the complaints system. Although there was an annual survey by the kitchen, the response rate from prisoners was usually low; only 16% of prisoners had replied to the last survey. In our survey, 35% of respondents rated the food as food or very good compared to the 39% benchmark for other training prisons. After 'toilets and washing facilities in cells', 'better quality of food' was second in the list of items prisoners most wanted to see at Magilligan.

Recommendations

- 7.8 The 16-hour gap between meals at the weekend should be reduced.
- 7.9 The serving of food should conform to relevant food safety and hygiene requirements.
- 7.10 Staff should supervise the serving of food effectively and be models of good practice to prisoner kitchen workers.
- 7.11 Prisoners in Foyleview should have more opportunities to self-cater as part of their preparation for release.

Housekeeping points

- 7.12 The selection criteria for kitchen workers should be reviewed to maximise the number of prisoners achieving relevant qualifications.
- 7.13 Lunch should not be served before noon.
- 7.14 Food temperatures should be checked and logged at serveries.
- 7.15 Prisoners should not have to make meal choices more than one week in advance.
- 7.16 Prisoners should be able to make comments about the food without resorting to the complaints system.

Good practice

- 7.17 *All units had dining areas, which included toasters and microwaves for prisoners' use.*

Prison shop

Expected outcomes:

Prisoners can purchase a suitable range of goods at reasonable prices to meet their ethnic, cultural and gender needs, and can do safely, from an effectively managed shop.

7.18 The tuck shop provided a weekly service to all prisoners, offering a wide range of goods at competitive prices.

7.19 The in-house tuck shop was staffed by two full-time workers and an orderly. There was a weekly system of ordering and delivery, and each residential area had a designated day for its shop service. All new committals were offered a limited service the day after arrival. The good arrangements between prisoners' personal cash clerks at Maghaberry (where prisoners came from) and staff at Magilligan ensured that monies were transferred shortly after prisoners had arrived. The cash clerk at Magilligan anticipated the monies to be credited to prisoners' accounts and offered them spending up to that limit.

7.20 A wide range of items was available to prisoners on their weekly orders, including confectionery, tinned goods and hobby materials. A separate order form was available to order fresh fruit from a local supplier. In our survey, 46% of respondents said that the tuck shop sold a wide enough range of goods to meet their needs, compared to a benchmark of 39% for training prisons. Prices were low, as the establishment purchased items at cost.

7.21 Once prisoners had made their selection, goods were selected from the storeroom and sealed in a paper bag. Orders were delivered directly to the residential unit and prisoners had to check and sign for their goods. Any discrepancies were amended the same day. There was no formal process of consultation with prisoners to improve the service offered, although the prisoner orderly often made suggestions, and these were generally implemented.

Recommendation

7.22 There should be a formal process of prisoner consultation for feedback and suggestions for improvements in the tuck shop.

Good practice

7.23 *Shop goods were available to prisoners at cost price.*

Section 8: Resettlement

Resettlement strategy

Expected outcomes:

Resettlement underpins the work of the whole establishment, supported by strategic partnerships in the community and informed by assessment of prisoner risk and need so as to minimise the likelihood of reoffending on release.

- 8.1 A resettlement strategy for the Northern Ireland Prison Service had been published in June 2004, and a head of resettlement appointed. Local strategies and management systems needed to be put in place at Magilligan to deliver resettlement services across the whole prison.
- 8.2 Although a member of the senior management team had been designated as head of resettlement, Magilligan had neither a resettlement policy nor a resettlement policy committee. There had been commendable developments in the resettlement services offered to prisoners – notably in the programmes development unit (PDU) and Foyleview (see sections below on sentence/custody and reintegration planning) – but these had been mainly due to the initiative of the principal and senior officers involved along with probation staff and NIACRO (Northern Ireland Association for the Care and Resettlement of Offenders), and were not part of a strategic plan.
- 8.3 In January 2004, the head of the PDU tried to set up a programme steering group to ‘ensure that a variety of positive and constructive activities were available for prisoners in addressing their offending behaviour and helping to reduce the risk of reoffending.’ Due to staffing shortages the group had met only twice, and a representative of the senior management team had attended only the first meeting. Inevitably, the group focused on operational and staffing issues.
- 8.4 The Northern Ireland Prison Service (NIPS) resettlement strategy was published in June 2004. It was based on a joint strategic review of resettlement services by NIPS and the Probation Board for Northern Ireland in 2003. Corporate leadership rested with the newly appointed head of resettlement at Prison Service headquarters, who had held his first meeting with resettlement staff at Magilligan earlier in September 2004. Some managers and staff said they thought that the director would take responsibility for drawing up and implementing an action plan for Magilligan. However, the strategy document made clear that the governor was responsible for the delivery of resettlement services within his establishment and that the work programme of the resettlement team must be included in the establishment’s business plan. (See main recommendation HP47.)

Sentence and custody planning

Expected outcomes:

All prisoners have a sentence or custody plan based upon an individual assessment of risks and needs, regularly reviewed and implemented throughout and after their time in custody. Prisoners, together with all relevant staff, are involved with drawing up and reviewing plans.

- 8.5 There were prompt and thorough assessments of all prisoners, resulting in individual resettlement plans agreed with the prisoner at a resettlement board. Understaffing of the PDU and the absence of an effective personal officer or similar scheme meant that plans were not routinely monitored or reviewed.
- 8.6 Sentence planning at Magilligan had been replaced in June 2002 by a system of resettlement planning. Designated prison officers, probation and psychology staff had lead responsibility for assessment, resettlement planning and the delivery of offending behaviour programmes. These staff, together with dedicated administrative staff, were located in the purpose-built PDU. This excellent facility provided a spacious, welcoming and comfortable environment for staff and prisoners.
- 8.7 All prisoners had a series of assessments including the probation service's structured assessment, case management and evaluation (ACE) system to identify risk factors and resettlement needs. To comply with the probation service's target, all these assessments were completed within 20 days of the prisoner's arrival at Magilligan. This compared very favourably with the eight to 12 week target set by the offender assessment system (OASys) used in England and Wales. All resettlement files were returned to Maghaberry following a prisoner's release; files were reactivated if the offender returned to prison within six months.
- 8.8 After 20 days, there was a formal resettlement board to agree each prisoner's resettlement plan. We observed a number of these boards. They were chaired by the resettlement governor and attended by the prisoner and personnel such as workshop and education managers, probation and NIACRO workers. The atmosphere was relaxed and the prisoner was fully involved in the process and had ample opportunity to raise any questions or concerns. At the end of the board, he signed a copy of his resettlement plan. We read a number of resettlement plans. Most of the targets were very general and descriptive; none were specific or time-limited.
- 8.9 The thorough and thoughtful work that went into the initial assessment and planning process was not sustained throughout the sentence. A key performance target in the Prison Service's business plan was 'to ensure 82.5% of prisoners sentenced to six months or more are working to a resettlement plan.' While Magilligan exceeded this target in terms of having plans in place, there was in fact no further work on these plans. Prolonged prison officer understaffing of the PDU meant that quarterly reviews of resettlement plans were not taking place, and in the absence of an effective personal officer or similar scheme, prisoners' progress was not routinely monitored. As in many prisons, too much responsibility was left with the prisoner to ensure targets were achieved without adequate information or support.
- 8.10 Over 60% of prisoners were subject to custody probation orders, which required them to be under probation supervision following release for a period determined by the judge at the time of sentencing. While probation staff completed six-monthly reviews of these cases, the prison also had a responsibility to ensure that all resettlement plans were effectively managed and identified targets achieved.

Recommendations

- 8.11 The resettlement plans of all prisoners should be reviewed at predetermined intervals throughout their sentence.

- 8.12 Resettlement plan targets should be prioritised, implemented, monitored and continually reviewed; identified staff should be responsible for ensuring that agreed targets are achieved.

Housekeeping point

- 8.13 Resettlement plan targets should be more specific and time-limited.

Good practice

- 8.14 *The programmes development unit (PDU) was an excellent facility providing a spacious, welcoming and comfortable environment for staff and prisoners.*
- 8.15 *All prisoners were assessed for their individual needs and risk of reoffending within 20 days of arrival.*
- 8.16 *All resettlement files were returned to Maghaberry following a prisoner's release and were reactivated if he returned to prison within six months.*

Offending behaviour programmes

Expected outcomes:

Effective programmes are available to address identified prisoner risk and need, to allow timely progression through sentence.

- 8.17 Although a range of validated programmes was on offer, there were continuing problems in providing an adequate pool of tutors for enhanced thinking skills (ETS) and sex offender treatment programmes (SOTP). The size of the waiting lists for these was not known; there was no guarantee that prisoners would complete a programme before their release.
- 8.18 The PDU provided a range of programmes, most of which had been, or were, in the process of validation by the external programmes accreditation board. These included a number of substance use related programmes, a Barnardo's parenting course and other life and social skills courses. The main offending behaviour programmes on offer were anger management, ETS and SOTP – on a rolling and core basis.
- 8.19 While probation commitment had ensured the continuation of the anger management programme, ETS and SOTP had not run for over nine months and it was not clear that they would restart in January 2005 as proposed. Staff vacancies in the psychology department and lack of suitably trained prison officers meant there was an insufficient pool of tutors for these programmes.
- 8.20 The recently appointed head of psychology was developing a database but, at the time of inspection, details of the number of prisoners waiting to be assessed or to attend an ETS or SOTP programme were unknown. Prisoners were told during induction that staff shortages were impacting upon programme delivery, and that the prison could not guarantee that prisoners assessed as suitable for these programmes would be able to attend them prior to release.

- 8.21 Awareness training for non-PDU staff had last taken place in 2001, and there had been a poor response to trawls for new tutors. The Prison Service for England and Wales no longer provided places for Northern Ireland staff on its SOTP training courses. However, the need to develop local training would add significant further delay to the provision of these programmes for prisoners.
- 8.22 Psychology staff had introduced a motivational enhancement group for prisoners about to undertake a groupwork programme or approaching the end of their sentence. They also provided individual assessment and some one-to-one work with the small number of prisoners convicted of violent and sexual offences who presented a high risk of both harm and reoffending. There was a perceived need for suitable interventions with sex offenders in denial of their offence, but the lack of any collective data meant that other possible gaps in provision were not being identified. PDU staff and managers hoped that the new resettlement strategy (see paragraph 8.4) would lead to better integration and coordination of programme work between Magilligan and Maghaberry.

Recommendations

- 8.23 Gaps in the current tutor pool for offending behaviour programmes should be filled and a system of succession planning introduced to ensure a constant supply of trained tutors.
- 8.24 The size of the existing backlog for programme places should be quantified and a realistic plan implemented to manage it and meet future demand.
- 8.25 The choice of offending behaviour programmes and the number of places available should meet the needs of the prisoner population.
- 8.26 The Prison Service of England and Wales should reinstate training for offending behaviour programmes delivery for the Northern Ireland Prison Service (NIPS).

Reintegration planning

Expected outcomes:

Prisoners are supported to return to the community in safety and dignity, using community and family links and appropriate licence and curfew arrangements to meet their practical needs and maximise the prospects for avoiding reoffending on release.

- 8.27 Reintegration was firmly based on maintaining family and community links, but services were underdeveloped. Preparation for release arrangements were ad hoc and inadequate, and continuing funding for NIACRO work was in doubt. The regime at Foyleview provided a good experience for a small proportion of prisoners, but had potential to be more effective. Prisoners based on Foyleview had restricted movement to the main prison for other services, such as workshop-based training.
- 8.28 At the time of our inspection only a quarter of prisoners held at Magilligan had a home address within 50 miles of the prison, and the isolated geographic location of the prison presented particular challenges when preparing prisoners for release. One notable characteristic of all resettlement work at Magilligan was the value placed on helping the prisoner to maintain family and community links, recognising his continuing role and responsibilities for his dependants, an aspect often overlooked in other training prisons.

- 8.29 Our survey showed that, compared with similar training prisons, significantly fewer prisoners knew who to contact within the prison to get help with education, employment, healthcare and claiming benefits on release. Although some voluntary agencies worked as part of the PDU, reintegration services were under-developed and not provided consistently to all prisoners. Shortfalls in the resettlement planning process (see paragraph 8.9) contributed to the lack of guidance available to prisoners.
- 8.30 As part of the scheme to help prisoners find employment and provide them with some support in the weeks following release, a NIACRO worker had been allocated to each of Northern Ireland's three prisons. The worker at Magilligan currently had a workload of 70, but had been willing to see others on request. Funding for the project was due to finish in May 2005 and there were no indications that work would continue beyond that date. The probation service funded another NIACRO worker to visit the prison once a week and deal with financial, debt and benefit queries. In an attempt to fill the gap in pre-release preparation, since April 2004 a member of the probation team had been assigned to contact all prisoners three months prior to their release date. These initiatives were no substitute for effective pre-release preparation.
- 8.31 The reintegration needs of a small proportion (less than 15%) of selected prisoners were well addressed by the structured programme offered by the Foyleview unit. Located outside the security fence of the main prison, Foyleview provided a less secure environment for up to 48 prisoners; building work was under way to increase the capacity to 82 by the beginning of 2005. Although many staff and prisoners referred to it as the 'open' part of the prison, it did not have the characteristics of an open prison; neither did it serve as a resettlement unit as the selection criteria for Foyleview excluded a large percentage of prisoners. Once in Foyleview, prisoners could qualify for fortnightly home leaves, and graduate from working voluntarily in community-based projects to full-time paid employment.
- 8.32 The unit had been in operation for 10 years and the programme was well established and valued by the prisoners, families and community agencies who benefited from it. In response to our survey question, 'have you done anything, or has anything happened to you here that you think will make you less likely to offend in the future?' 84% of Foyleview respondents replied 'yes' compared to 59% in the main prison. Despite the unit's apparent success, there was a perceived lack of transparency in the selection process – it was felt that certain groups of prisoners were excluded or under-represented. Several prisoners told us that induction into Foyleview was inadequate and they relied heavily on other prisoners to know what to do. Some felt the regime relied more on the threat of deselection and return to the main prison than on positive inducements and support by staff.
- 8.33 Inconsistencies in the rules on the movement of prisoners between the main prison and the less secure area had an adverse impact on opportunities for prisoners. For example, prisoners placed in Foyleview could not continue with workshop-based training but could attend education or PDU programmes; only Foyleview prisoners could work in the kitchen, while prisoners from the main prison were employed in the nearby laundry.
- 8.34 Since January 2003, 150 prisoners had been transferred to Foyleview, of whom 38 were current residents. The pattern of new arrivals fluctuated significantly, with 10 in February 2004 and four in March. Contribution forms were sent out to various departments as part of the selection procedure, but no return date was specified and staff admitted they frequently had to resend forms. Although a number of completed files were awaiting a decision at the time of our inspection, no date had yet been set for the selection board. A tightening of these procedures could ensure that this valuable resource ran at maximum capacity for more of the time to the advantage of more prisoners. Since January 2003, 28 (19%) of prisoners had been deselected; almost half of these resulted from breaches of home leave conditions.

- 8.35 Aside from the special home leave arrangements for prisoners in Foyleview, prisoners in the main prison could apply for home leave and home leave boards were held regularly. In the 12-month period up to March 2004, 1,852 applications were made of which 382 (21%) were approved. Inadequate monitoring meant that the prison could not analyse the data further to show, for example, how many prisoners were involved, their location and characteristics or the reasons for refusal.
- 8.36 New home leave arrangements introduced across the prison estate in March 2004 had reduced automatic eligibility for standard home leave but allowed resettlement leave, which required proof that the prisoner was engaging in activity such as attending a job interview or meeting with his probation officer. These changes had proved unpopular with prisoners, and we were not surprised that home leave issues were the most common subject of complaint to the Board of Visitors. However, we commended the principle of granting home leave during the working week, when prisoners could reach the necessary services and support.

Recommendations

- 8.37 All prisoners should be subject to effective resettlement planning to make the best use of their time in custody and to prepare for release.
- 8.38 Prisoners should be offered help to develop links with voluntary and statutory agencies in the community to provide them with support on release.
- 8.39 The selection procedure for Foyleview should be reviewed to ensure that the decision making process is transparent and accountable and that the unit does not carry vacant places unnecessarily.
- 8.40 The rules on movement of prisoners between the main prison and the less secure area should be reviewed.
- 8.41 All eligible prisoners should be granted a period of home leave as part of their staged preparation for release, except where risk prevents this.

Good practice

- 8.42 *All resettlement work at Magilligan was based on helping the prisoner to maintain family and community links, and recognising his continuing role and responsibilities for his dependants.*
- 8.43 *Home leave was granted during the working week when prisoners could access necessary services and support, thus reducing their vulnerability and likelihood of breaching conditions.*

Public protection

Expected outcomes:

Arrangements are in place to assess and manage the risks presented to the public by prisoners during sentence and after release. Clear systems operate to ensure that all affected prisoners are fully informed of the arrangements, the implications for them individually and the avenues available to them for challenge.

8.44 The prison was contributing to community-based multi-agency work in the management of high risk sex offenders. There was no public protection policy to cover these and other categories of cases, such as child protection.

8.45 Public protection work was managed by police and probation services in the community. This work currently applied only to sex offenders assessed as presenting a high risk of harm to others and a high risk of reoffending. Multi-agency sex offender risk assessment management (MASRAM) had been in place for two years and MASRAM meetings were now held regularly at the prison as over 80% of the prison's 77 sex offenders were subject to MASRAM procedures. We spoke to a number of sex offenders who confirmed that they were aware of the procedures and how they impacted upon them.

8.46 The head of resettlement and the senior probation officer took responsibility for ensuring the implementation of any action points arising from MASRAM meetings. However, there was no public protection policy to notify staff across the prison of what was required or desirable in the management of MASRAM, child protection or other categories of public protection cases. We were particularly concerned that the absence of a robust and prompt system for approving child visitors could place some children at risk unnecessarily.

Recommendations

8.47 A local public protection policy should be developed that ensures effective arrangements to assess and manage the risks presented to the public by prisoners during their sentence and after release.

8.48 Strict clearance procedures should be introduced to ensure that prisoners identified as high risk of harming others do not have unauthorised access to actual or potential victims.

Substance use

Expected outcomes:

Prisoners with substance-related needs are identified at reception and receive effective support and treatment throughout their stay in custody, including pre-release planning. All prisoners are safe from exposure to and the effects of substance use while in prison.

8.49 With the reallocation of the drug and alcohol teams to the PDU there were opportunities to integrate interventions and services for prisoners. There was good quality care planning for prisoners with substance misuse problems and many initiatives had been implemented. There was no co-ordinated approach to reduce the supply of drugs in the prison.

8.50 The 2004 drugs and alcohol strategy focused on three strands: supply reduction, demand reduction and harm reduction. The head of resettlement and services was responsible for the strategy and a monthly drug strategy meeting reviewed progress.

8.51 There were no detoxification facilities at the prison as HMP Maghaberry specialised in this work. A substitute prescribing policy was being developed, based on NIPS's guidelines on substitution treatment for opiate dependence.

- 8.52 During the induction programme, prisoners were provided with information packs about drug behavioural programmes and the role of the drug and alcohol teams. Prisoners said they received adequate information about these services.
- 8.53 A joint drugs action plan for 2004-06 had been produced in August 2004. This was a collaborative plan between the prison and Northlands, the provider of programmes, advice and counselling for alcohol and drug related issues.
- 8.54 A service level agreement had been signed with Northlands since 2000. The Northlands team comprised five civilian staff who were based in the PDU. The skill mix of the team was impressive and enabled it to provide specialist interventions. Its role was similar to that of counselling, assessment, referral, advice and throughcare (CARAT) teams in England and Wales. The team was assisted by three uniformed staff who played key roles in co-facilitating behavioural programmes.
- 8.55 Prisoners who were referred to Northlands were needs assessed. The outcome was a care plan with prisoners agreeing to commit to programmes offered to them. Each of the Northlands team carried caseloads; arrangements for case supervision were in place and worked well. We saw good relationships between prisoners and staff, and feedback from prisoners about the team's services was unanimously positive.
- 8.56 One-to-one counselling was offered and led by a senior counsellor accredited by the British Association of Counsellors. Prisoners appreciated the counselling services, particularly for bereavement.
- 8.57 Northlands co-facilitated several behavioural programmes for prisoners. These included Open College accredited courses on drugs education and awareness and the DABBLE (drug awareness about basic lifestyle and education) programme. There were training opportunities for both prisoners and staff to become DABBLE facilitators. These courses had created opportunities for peer-led education, and took account of the need to deliver content geared towards prisoners with literacy problems (30-40% according to prison sources). In addition, there were six to eight substance misuse information group sessions per year, giving further opportunities for prisoners to gain insight into dependency issues.
- 8.58 Prisoners complained that there were long waiting lists to join the above programmes. Staff were aware of this and waiting times had been partially reduced because of better targeting by the resettlement planning process.
- 8.59 One member of the Northlands team was a designated family development worker. Families of prisoners experiencing substance misuse problems could contact this worker, who offered advice and acted as a point of liaison with relevant drug agencies. Close joint working took place between Northlands and prisoners before and after release. This was an important initiative and an integral part of the prison's throughcare provision.
- 8.60 There were plans to introduce a drug-free residential area in the unit that was temporarily housing reception. This would reduce exposure to drug availability and, potentially, enhance health outcomes. As one prisoner said: 'we're being punished on a regular basis for failing drug tests and indirectly because of passive smoking.'
- 8.61 In the healthcare centre, a range of high quality health promotion material relating to substance misuse was displayed and widely available to prisoners. The team worked closely with Northlands and was involved in the needs assessment of prisoners. No joint working protocols had been developed by the teams. One member of the health care team had been nominated for a Butler Trust award for the smoking cessation programme.

- 8.62 There was no legislative authority for mandatory drug testing at the prison. There was a voluntary drug testing (VDT) programme with dedicated facilities. There was VDT for prisoners moving on to the enhanced regime and routinely for those already on enhanced, and for prisoners on temporary release. No targets were set for testing but the VDT team aimed to complete 10-15 tests per day. There was no centralised system to generate test lists and there had been no needs analysis.
- 8.63 A new drug testing regime was being introduced because of dissatisfaction with the application of the present VDT programme. This regime would entail a move away from 'dip' testing to laboratory testing. A contract had been drawn up with an accredited private sector company to provide test kits, collect and analyse samples. Staff training for this new regime had been completed.
- 8.64 Staff on the Foyleview residential unit used a breathalyser for prisoners suspected of drinking alcohol, for work parolees or prisoners on home visits. Five staff on this unit were trained to carry out testing. If prisoners scored higher than the appropriate score they were returned to the main prison and referred to the Northlands team.
- 8.65 Finds of monthly alcohol and drug/drug-related items were relatively low during the period from August 2003- August 2004. Although this did not suggest extensive drug usage, in our survey 42% of respondents perceived drugs to be widely available in the prison, higher than the benchmark of 24% for similar prisons.
- 8.66 A combined standards and security audit (November 2002) had awarded an 'unacceptable' rating (50.59%) to the prison's searching strategy. A revamped searching strategy had been produced (August 2003) and set out key functions, systems and procedures to combat drug trafficking.
- 8.67 The drug supply reduction strategy needed to be better co-ordinated. Systems for reporting and recording drug-related data were in place, but a more dynamic and proactive approach was needed to analyse and utilise this data. There was a lack of integration between security information reports and other intelligence sources for monitoring drug supply.

Recommendations

- 8.68 A drug-free residential area should be introduced.
- 8.69 There should be a full review of the voluntary drug testing (VDT) programme and its role and function.
- 8.70 A drug supply reduction strategy should be developed based on the drug strategy unit's *Drug reduction supply - good practice guide*.

Good practice

- 8.71 *The integration of treatment interventions in the programmes development unit (PDU) led to well co-ordinated programmes and good service development.*

Section 9: Management of human resources

Introduction

- 9.1 This section of the report has been structured to reflect the Criminal Justice Inspectorates' (CJI) method of inspection. It applies the CJI's 'common core' framework of:
- openness and accountability;
 - partnership with other agencies;
 - promotion of equality and human rights;
 - seeking feedback and managing change well;
 - delivering results in relation to government objectives.
- 9.2 Before the inspection begins CJI invites the head of the organisation being inspected to conduct a self-assessment against the framework. Inspectors were grateful to the Governor and his team for their careful and honest response, which highlighted areas of good practice and innovation together with action areas which he and his colleagues had identified.
- 9.3 CJI also invites outside organisations to comment on their experience of working with the organisation to be inspected. A list of those who were approached in relation to Magilligan is at Appendix III. Inspectors were grateful for the responses received, which significantly helped to inform the inspection.

Openness and accountability

- 9.4 Inspectors found that some decisions about the running of the prison and the deployment of staff, which were properly the function of management, were in fact determined by senior and principal prison officers. Inspectors saw examples of main grade prison officers determining significant regime changes unchallenged by managers. There was a tendency for principal and senior officers not to see themselves as middle managers, properly responsible to senior management. This raised issues of accountability.
- 9.5 At the time of the inspection, Magilligan depended upon officers working substantial amounts of overtime. There is an inevitable process in a prison of trading favours over shift patterns and leave, but the allocation of substantial amounts of overtime is open to abuse if it is not properly and impartially supervised.
- 9.6 There was a considerable amount of temporary working in a higher grade, especially among administrative staff due to ongoing staffing reviews or secondments to other projects. This 'acting up', which could last for a year or more, was intrinsically less transparent and accountable than open recruitment to the position.

- 9.7 On the positive side, HR policies were well documented and staff were generally clear about the terms and conditions under which they were employed, or at any rate they knew where to turn if they needed to refer to the relevant documents. There were policies on, for example: recruitment and selection procedures, staff training and development, industrial relations, staff appraisal, absence management, principles of conduct, code of ethics, harassment, pay and conditions of service and grievance procedures.
- 9.8 The problem was not the lack of policies, but the difficulty of implementing them in a context of poor industrial relations. Although the standard civil service arrangements for performance appraisal applied to the general service grade staff, arrangements for the discipline grades were stalled because of failure to agree on a new reporting form. The old form was unsatisfactory in that it only reported on personal traits, not on performance against objectives, and the new form had not yet been agreed and had so far only been completed in relation to a minority of staff. The management of sick absence, discussed below, was also uneven.
- 9.9 The allocation of grades to duties was not always optimal. For example, senior officers spent much of their time on scheduling, which could be done by administrative staff, and one was observed operating gates from a 'pod'. These are not duties appropriate to the grade.
- 9.10 Conversely, inspectors would have expected to see substantially more prison officer involvement in prisoner education, training and offending behaviour programmes. Some staff told inspectors that they thought that all duties in the prison should be performed by discipline grades, others that specialists should be brought in to do all but turnkey duties. A fresh effort is needed to relate the discipline grades to appropriate duties and to ensure that staff are exercising the full range of skills expected of a prison officer.
- 9.11 Inspectors were told that the Prisoner Development Unit's complement was nine members of staff, but it often ran with just three members. Two of the nine posts were filled by staff on long-term sick absence, which had been agreed with the Prison Officers' Association (POA). Without the necessary prison officer input, programmes were severely restricted, and this impacted on the prison's ability to provide an effective service.
- 9.12 There was no documented HR strategy specific to Magilligan setting out the organisation, number and grade of staff required to address the action steps of the 'Road Map' strategic plan. More work needed to be done on this. Consideration needed to be given to the competences required for specific posts and what programmes and initiatives exist or need to be designed and implemented to attract, develop and retain an effective level of staff.

Recommendation

- 9.13 The responsibilities of the different grades need to be clarified, and duties need to be assigned to the appropriate grade.

Partnership with other agencies

- 9.14 Magilligan offers little opportunity for mobility through exchanges, secondments or transfers of staff to and from other agencies and there is also a lack of recruitment and promotion opportunities. The workforce is static, with little opportunity for progression or for interchange with other agencies. The majority of officers had been there for their whole career and no staff secondments into or from partner agencies were planned at present. While the scope for interchange is more limited in the Northern Ireland Prison Service (NIPS) than in many other public services, plans should be developed for exposing staff and managers wherever possible

to other working environments through temporary postings, shadowing arrangements and reciprocal interchange with prison services of other jurisdictions.

- 9.15 There is a full-time partnership with the Probation Board for Northern Ireland (PBNI), with a service level agreement between the Governor and the PBNI manager which is signed annually and subject to a six-monthly review. The PBNI manager attended Governor's meetings and had input into other regime based meetings (suicide and self-harm; Home Leave Board; risk assessment; MASRAM (multi-agency sex offender risk assessment management) and programme planning). Prison staff commented favourably about the support they received across the prison from probation staff. PBNI staff trained prison officers in facilitation skills and for their role as personal officers. There was an appreciation that working alongside PBNI on the joint delivery of programmes had proved beneficial. The working of the new Prisoner Development Unit provided evidence of this.
- 9.16 The service bought in from NIACRO (Northern Ireland Association for the Care and Resettlement of Offenders), particularly in relation to the prison's visitors' centre, was exemplary. Officers valued NIACRO's role within and outside the prison, which helped to manage family liaison with prisoners and organisation of children's activities including periodic fun days. This input from the voluntary sector was essential in view of the limited support available from the prison's own resources.
- 9.17 Inspectors noted that there was good co-operation between the Governor and the local Police Service of Northern Ireland (PSNI) District Commander regarding emergency cover during industrial disputes and serious incidents. Police officers attended during the testing of contingency plans and a police liaison officer was in place.

Recommendation

- 9.18 Plans should be developed for exposing staff and managers to experience of other working environments.

Promotion of equality and human rights

- 9.19 NIPS is an equal opportunity employer, and the equality agenda is well publicised throughout the establishment. Recruitment and selection procedures follow approved good practice for filling vacancies internally. There are well-established grievance and harassment procedures in place and complaints regarding equality issues are monitored on a quarterly basis. Section 75 and equal opportunity training is included for all new employees at Magilligan.
- 9.20 For historical reasons the proportion of Catholics in the workforce was low, at 11%. However sound policies on equality and on human rights were in place and the POA was on record as being committed to equal opportunities. The lack of recruitment following a programme of downsizing and redeployment of staff from the Maze meant that there had been few opportunities for the Service to address the inequalities. While NIPS was fully aware of its Section 75 obligations, plans should be developed to set out how it proposes to address the imbalance of the workforce when opportunity arises.
- 9.21 While a career at Magilligan is attractive for local staff a significant number of officers commute from the greater Belfast area following redeployment after the closure of the Maze and Belfast prisons. Some staff mentioned a return journey of up to 168 miles to attend work on a daily basis. This equates to approximately four hours' travel time and has material implications for the pattern of shifts they are able to work comfortably. There must also be a concern in the

long run about their health and welfare. A positive HR strategy would address this as a welfare and operational issue.

Learning, seeking feedback and managing change effectively

Training and development

- 9.22 Inspectors found that for years there had been insufficient training and development of staff, either internally or at the Prison Service College at Millisle. This had affected the ability of officers to participate in offending behaviour programmes and to undertake management responsibilities. A number of officers who were 'acting up' or recently promoted admitted to being insufficiently or belatedly prepared for their duties in the higher grade.
- 9.23 Magilligan is an Investors in People (IIP) employer. But inspectors found a lack of meaningful training plans in place across the prison, either in terms of functional areas or on an individual personal development plan basis. There was also little evidence of training evaluation. Inspectors were shown a consultant's report which indicated several areas of difficulty the prison would face in obtaining IIP re-certification.
- 9.24 Inspectors were told that some staff did not want to avail themselves of training and that some of the training that had been done, especially in respect of personal officers, had not been applied. This suggested that officers were free to choose what training they wished to undertake beyond the minimum that was mandatory, with little control being exercised to ensure that the needs of the prison were met.

Staff attitudes

- 9.25 Most staff told inspectors that Magilligan was not a bad place to work, which is why many of them were content to commute such long distances. However, staff morale had been adversely affected by personal security issues following two separate incidents of records being accessed allegedly by terrorist organisations. Staff told inspectors that the handling of these incidents had reduced their confidence in NIPS management. Other issues impacting on morale were pay, pensions, accommodation, operation of the attendance system and the recruitment of new night patrol grades.
- 9.26 Some staff told inspectors that they felt that they were not valued by HQ management, and their concerns were not taken seriously. The pattern of concerns expressed to inspectors was not consistent, however, with some officers saying that for them the issue of the security breaches was now in the past, while for others it remained a live issue.
- 9.27 While most staff were now broadly content with their safety and security arrangements both within and outside the prison there remained a lack of trust between prison officers and NIPS Headquarters. This manifested itself in different ways: one example being prison officers withholding their contact details from local and central personnel records. This had resulted in important correspondence being misdirected. Staff said that they needed assurances that information held by NIPS about their personal circumstances was securely stored and that their personal security was paramount.
- 9.28 It would be timely to conduct a staff attitude survey to assess and prioritise the issues that are of most current concern to the majority of staff. A strategy for addressing those concerns could then form part of the development of an appropriate HR strategy.

Communication

- 9.29 Senior managers made a creditable effort to be accessible to staff, and there was in principle good communication by means of email and a pattern of regular meetings. But not all staff had, or made the effort to have, access to email communications from management, and cascaded messages could be filtered as they travelled down. Staff indicated that they generally heard when decisions had been made rather than feeling part of the decision making process. Most staff tended to rely on the POA as a channel of communication for messages from management, or to trust the POA's message rather than management's if the two were different, and the POA was the predominant channel for upward communication from staff to management.
- 9.30 Management needed to focus on means of direct communication with all staff and to reduce the dependence on the POA as a channel of upward and downward communication. The communications function needed to be given a higher profile and to be properly resourced. But it was not just a communications issue: management needed to be seen to be active in caring for staff, not just reacting to demands from the POA.

Recommendations

- 9.31 A staff attitude survey should be conducted to assess and prioritise the issues that are of most concern to staff.
- 9.32 Management needs to focus on means of direct communication with staff, reducing reliance on the Prison Officers' Association (POA) as a channel of communication.

Results in relation to Government objectives

Staffing levels and deployment

- 9.33 Magilligan has a target staffing level of 405 discipline officers (including eight governor grades) and 22 support staff. Of those 405 discipline officers, 359 were in post at the time of the inspection, 41 having been sent on loan to Maghaberry as a consequence of the policy of separation of paramilitary prisoners and five assigned to prison escort duties. Twenty-three were on sick absence, leaving an active force of 336. In addition, an average of over 2000 hours of overtime a week was being worked.
- 9.34 Inspectors were told that Magilligan had always utilised some overtime because of an inability to allow time off in lieu for unavoidable compulsory hours (UCH). There were days of rostered overtime, known on the system as 'yellow days', but staff could also volunteer to work overtime or could transfer their overtime 'entitlements' to other staff. As a result overtime was unequally distributed, with some main grade prison officers working as many as 25 overtime hours a week, giving them total earnings at an annual rate of over £50,000 a year.
- 9.35 The detailing of staff, which includes the allocation of overtime, was conducted by the senior officers on each wing. It was a time-consuming task, because the picture was constantly changing as a result of unscheduled absences. Inspectors were told that it was not unknown for senior officers to spend their whole day at the computer screen engaged in this activity. There is a case for returning to the former practice of central detailing under a central duty office. Inspectors were told that as many as 50 staff had the authority to enter overtime on the

system. Although the use of overtime was monitored and checked by an administrator under supervision of a principal officer, inspectors believed that centralisation would strengthen control and would improve the transparency and perceived fairness of the system.

9.36 In principle, hours worked by officers were recorded by the swipe cards they used. But the system was said to be unreliable for timekeeping, and there was in any case an agreement with the POA that it was not to be used for that purpose. Time recording was therefore mainly in the hands of the senior officers. While there was no reason to suspect that there was any abuse, a clocking-in system linked to the payroll computer would provide more reliable control. The length of time it took to move from the gate to the actual place of work on the wings was a cause of inefficiency.

9.37 The number of staff employed was substantially greater in proportion to the prison population than in any comparable prison in England and Wales. Inspectors took as their benchmarks training prisons mainly in category C, but including Garth (category B), which is the comparator favoured by NIPS.

<u>Establishment</u>	<u>Population</u>	<u>Discipline officers</u>	<u>Ratio to prisoners</u>
Blundeston	457	154	0.34
Coldingley	386	101	0.26
Erlestoke	410	125	0.30
Usk Prescoed	392	94	0.24
Weare	376	122	0.32
Whatton	352	106	0.30
Garth (cat B)	649	240	0.37
Magilligan	348	405	1.16

9.38 The disparity is reduced if one looks at the ratio of total staff to prisoners, because there are no prison support grades at Magilligan, but it is still significant:

<u>Establishment</u>	<u>Population</u>	<u>Total staff</u>	<u>Ratio to prisoners</u>
Blundeston	457	294	0.64
Coldingley	386	212	0.55
Erlestoke	410	241	0.59
Usk Prescoed	392	220	0.56
Weare	376	217	0.58
Whatton	352	205	0.58
Garth (cat B)	649	432	0.67
Magilligan	348	435	1.25

9.39 Inspectors were puzzled to find that despite the high staff to prisoner ratio and the amount of overtime being worked there was always said to be a shortage of staff. One principal officer estimated that the deficit was 600 hours a week or the equivalent of about 15 officers. The deficit was said to prevent officers from being able to take part in prisoner activities, education or treatment programmes and from undertaking any but the minimum mandatory training themselves.

9.40 Reasons for the apparent shortage of staff included the following:

Excessive security. There were too many staff on security duties in proportion to the status of the prison and the relatively low threat posed by the inmates.

Inflexibility. The Governor had suggested that the safe staffing level on the wings could be reduced from four to three or two at different times of the day so that staff could be released for prisoner activities, but that had not been accepted by the POA.

Sick absence. Even leaving aside the days of the so-called 'blue flu', sick absence had been inflated by disaffection among the staff. It had reduced to around 16 days a year at Magilligan, which was better than the average for the Service, but that was still excessive – especially for a well-paid, largely male workforce, where sick absence should be in single figures. Inspectors were told that not all of it was genuine.

Personal security. Special leave continued to be given, often at short notice, to enable staff to attend when security improvements were being installed in their homes.

Industrial action. Low-key industrial action continued to deprive the prison of effective officer time.

- 9.41 Some of these factors had historical origins. Some were not strictly related to Magilligan but were service-wide issues which had spilt over from Maghaberry. Inspectors recognised the very real concerns which led to the requirement for security measures in prison officers' homes. Nevertheless, the conclusion is inescapable that there are in principle sufficient staff at Magilligan, even without the 41 who have been lent to Maghaberry, if they were deployed appropriately and flexibly. Achieving a willingness to agree to more flexible deployment depends, however, on the resolution of issues which are outside the scope of local management.

- 9.42 The cost of Magilligan is even more out of line than the staffing. Benchmarks are as follows:

<u>Establishment</u>	<u>Population</u>	<u>Running cost</u> <u>£ million p.a.</u>	<u>Cost per prisoner place</u> <u>£ thousand p.a.</u>
Blundeston	457	11.7	25.6
Coldingley	386	9.1	23.6
Erlestoke	410	8.1	19.8
Usk Prescoed	392	7.9	20.2
Weare	376	8.5	22.5
Whetton	352	7.0	19.9
Garth (cat B)	649	14.6	22.5
Magilligan	348	22.3	64.0 (estimated)

- 9.43 The difference is partly explained by the non-use of auxiliary grades and partly by the higher rates of pay earned by prison officers in Northern Ireland. Although the pay differential was originally negotiated in relation to 'efficiencies' and not related to the 'troubles', few would argue that NI prison officers had not earned their premium rates of pay over that period. Twenty-nine were murdered because of their job, and others had to pay – and continue to pay – a heavy price in terms of the sacrifice of normal social life, for example being unable to tell their neighbours or even their children what job they did.

- 9.44 In the longer term, however, if the ceasefire continues and especially if the paramilitary organisations are to be decommissioned, it will be hard to justify such rates of pay for new recruits to the Service – though of course the terms and conditions of existing officers must be

protected. How a realignment of the pay structure is achieved is a problem of employment law and of transitional finance, but in a more peaceful Northern Ireland any administration is likely to want to divert money away from security expenditures like prisons to meet other, more pressing, demands.

Conclusion: Industrial relations

- 9.45 Inspectors agreed with the Governor's assessment that the prison has the potential to deliver a high quality of service to support NIPS's vision:
- "To be recognised as a model of good practice in dealing with prisoners and to be valued and respected for its service to the community."
- 9.46 However, the state of industrial relations at the time of the inspection was putting a brake on the developments needed. The POA had failed to agree key policies and procedures, so that the progressive regime envisaged had not yet been achieved, and management had not been able effectively to challenge the repeated failures to agree. The unwillingness of the POA to agree proposed new safe staffing levels, together with the deployment of 41 staff to Maghaberry, had forced the reintroduction of overtime and a reduction of officer involvement in offender programmes, training, education and resettlement. It had also disrupted the regime, with significant wastage of money due to failure to get prisoners to activities on time.
- 9.47 There were two main issues which continued to rankle with the staff. They blamed management for the leaks of personal information in 2002 and considered that the handling of the security issue was inept and showed little consideration for their situation. But that issue was no longer quite so live, and the new Director General of NIPS should be able to put it behind him. There was, however, a continuing sense of unfairness over the decision in last year's pay award to cap the pensionable pay of prison officers on the maximum of the scale and award only a non-consolidated increase. Although staff understood that the pension scheme was becoming increasingly expensive, and that the decision of the Pay Review Body reflected Government financial policy, this was a particularly unpopular way of limiting the overall cost of the award.
- 9.48 Inspectors were told that the POA at Magilligan commanded strong support. Staff told inspectors that pressure was sometimes exerted on individual officers to secure compliance with POA directions. Some officers interviewed were reluctant to comment on the influence of the POA. Several believed that it was unhealthy for the prison. While, on the face of it, a strong union was in the interests of staff, it made discipline harder to enforce. Several staff said that they had welcomed the firmer line the Governor had recently taken over discipline cases.
- 9.49 Industrial relations are constantly shifting, and it would not be helpful for inspectors to comment on matters that are currently under negotiation. At the time of the inspection there was an urgent need for a negotiation with the POA to get Magilligan back to normal, constructive day-to-day working. But there was also a need, as some of those interviewed recognised, for a longer-term negotiation, which would aim at a strategy for gradual adjustment of the whole Northern Ireland Prison Service to suit the new, more normal and more peaceful environment in Northern Ireland.

Recommendation

- 9.50 There needs to be a longer-term negotiation with the Prison Officers' Association (POA) to agree a strategy for handling the gradual adjustment of the Northern Ireland Prison Service (NIPS) to the changing circumstances of Northern Ireland.

Section 10: Recommendations, housekeeping and good practice

The following is a listing of recommendations and examples of good practice included in this report. The reference numbers at the end of each refer to the paragraph location in the main report.

	Main recommendations	To the governor
10.1	The establishment should develop a safer custody strategy and procedures, taking in anti-bullying, suicide and self-harm prevention, and substance misuse. (HP41)	
10.2	The demolition of the H blocks and their replacement with more suitable accommodation, with integral sanitation, should be prioritised. (HP42)	
10.3	Physical security in the prison should match the security needs of the population. Electric locking should be reduced and pass keys introduced to allow managers and staff access to all areas of the prison at any time. (HP43)	
10.4	There should be thorough analysis, by religion and ethnicity, of access to regime activities and services to monitor and ensure equality of outcome. (HP44)	
10.5	There should be sufficient high-quality education and work for all prisoners, supported by formal agreement or contract with the educational supplier. (HP45)	
10.6	Managers should ensure that all prisoners are delivered on time, each day, to education and work activities. (HP46)	
10.7	There should be a local resettlement policy, based on a needs analysis; with an action plan to embed resettlement work into the prison as a whole, overseen by a committee and local manager. (HP47)	
10.8	There should be a mental health needs assessment to establish what primary mental health services are required. Arrangements should mirror community provision, including a comprehensive counselling service. (HP48)	
10.9	A human resource strategy needs to be developed specifically for Magilligan, designed to ensure that posts are filled and duties allocated appropriately. (HR8)	
10.10	A new appraisal and performance management system needs to be introduced, linking Prison Service, prison, sectional and individual objectives. (HR9)	
10.11	A comprehensive training plan should be prepared on the basis of a proper training needs analysis, and training should be prioritised. (HR10)	

Courts and transfers

- 10.12 Escorting staff should allow prisoners toilet stops when required and offer drinks during the journey. (1.5)
- 10.13 Prisoners should not routinely travel handcuffed in secure vehicles unless individual assessments demonstrate a high level of risk. (1.6)

Staff–prisoner relationships

- 10.14 Staff should be encouraged to engage with prisoners during association periods. (2.17)

Personal officers

- 10.15 The personal officer scheme should be linked to sentence planning, and personal officers should be responsible for monitoring and chasing the completion of targets set for prisoners. (2.24)

Bullying

- 10.16 A multi-disciplinary anti-bullying committee should be established and should meet monthly. (3.8)
- 10.17 A comprehensive and detailed policy to address bullying behaviour and to support the victim should be devised. This should be well publicised and staff and prisoners trained in its application and encouraged to use it. (3.9)

Self-harm and suicide

- 10.18 Staff training in self-harm and suicide awareness should be increased. (3.14)

Equality, race relations and foreign nationals

- 10.19 The prison should have an equality and diversity committee, to examine and investigate monitoring statistics, supported by an equality and diversity officer. (3.22)
- 10.20 There should be a policy for dealing with foreign national prisoners, and a coordinator appointed to ensure their needs are met. (3.23)

Family and friends

- 10.21 A formally agreed limit of mail and telephone calls should be monitored and censored. This should be adhered to. (3.39)
- 10.22 The passive drug dog should be used in conjunction with other intelligence. Collective restrictions should not be placed on a group of visitors. (3.40)

- 10.23 Seating in the visits hall should be more comfortable and conducive to a relaxed atmosphere. (3.41)
- 10.24 Child-centred visits should be available to more prisoners and their children, and family days available to all prisoners. (3.42)
- 10.25 Family liaison officers should be supported by their managers and peers and should be given facility time to carry out their role effectively. (3.43)

Applications and complaints

- 10.26 All request/complaint forms should be centrally recorded and copies of completed cases should be centrally filed. (3.52)
- 10.27 Senior managers should regularly check the quality and appropriateness of replies. (3.53)
- 10.28 Senior managers should have access to information that identifies any trends in the grounds for complaints. (3.54)
- 10.29 Managers should identify the reasons why prisoners are under-using confidential access and appeal routes, and encourage them to do so. (3.55)

Healthcare

- 10.30 There should be a common approach to smoking cessation services and the provision of nicotine replacement therapy across the Northern Ireland Prison Service (NIPS) to ensure continuity of provision. (4.30)
- 10.31 Healthcare staff should be involved in the arrangements for prisoners being released to assist them in accessing health services. (4.31)
- 10.32 The medicines and therapeutics committee should produce relevant written policy documents, or standard operating procedures, to define the systems in operation. In particular the in-possession and special sick policies should be updated. (4.32)
- 10.33 The pharmacy contract should be reviewed and the pharmacist should be encouraged to take a more active role in the provision of healthcare at the prison. Pharmacist-led clinics should be introduced to allow patients to discuss their medication, and to supply medicines for minor ailments. (4.33)
- 10.34 The system for issuing prescriptions should be reviewed and simplified to reduce the need for transcription and duplication and thereby reduce the risk of error. (4.34)
- 10.35 Induction medication packs should be provided so that all prisoners receive a supply of simple self-care medication, including paracetamol tablets, at the time of admission. (4.35)
- 10.36 Special sick records should be audited to ensure proper operation and detection of possible abuse or inappropriate supply. (4.36)
- 10.37 Patients who need a night time dose of medication should receive it at an appropriate time. (4.37)

Education and library provision

- 10.38 Coherent and inclusive quality assurance strategy and procedures should be developed for education provision. (5.11)
- 10.39 There should be a formal partnership or written agreement with the education supplier. (5.12)
- 10.40 There should be an effective contingency plan to cover for staff absences in the education department. (5.13)
- 10.41 Senior managers should collect and analyse meaningful data across the education provision and use it to inform decisions; this should include a coherent management information system to plan future provision. (5.14)
- 10.42 There should be better recording and use of learning plans. (5.15)
- 10.43 The library should be housed in better accommodation. (5.16)
- 10.44 All prisoners should be able to use the library at least once a week. (5.17)
- 10.45 Prisoners on Foyleview and in the special supervision unit and patients in healthcare should have access to a full library service. (5.18)

Work

- 10.46 The allocation of all prisoner jobs should be managed centrally. (5.28)
- 10.47 Prisoners serving a short sentence should have access to work other than domestic jobs. (5.29)
- 10.48 A senior manager should be responsible for ensuring that workshops open on time, and that all prisoners allocated to work attend. (5.30)
- 10.49 Accreditation should be available for the range of vocational training on offer. (5.31)
- 10.50 Accommodation for education classes and vocational workshops should be improved. (5.32)

Physical education

- 10.51 Accredited programmes should be reintroduced and embedded in the physical education provision. (5.37)

Faith and religious activity

- 10.52 Religious services should take place in a proper chapel or room dedicated for worship. (5.42)
- 10.53 Prisoners on Foyleview should be able to participate in the main religious services. (5.43)

Time out of cell

- 10.54 A realistic core day should be devised and published. It should be strictly adhered to. (5.47)

Security and rules

- 10.55 A senior manager should check all security information reports to ensure that they are properly analysed and followed up with appropriate action. (6.9)
- 10.56 Searching of staff should be consistent. (6.10)

Discipline

- 10.57 Prisoners found guilty of charges in adjudication hearings should not be routinely downgraded under the progressive regimes and earned privileges scheme (PREPS). (6.23)

Special supervision unit

- 10.58 Prisoners on cellular confinement should have access to reading material other than a bible. (6.24)
- 10.59 Prisoners should not be held in the special supervision unit (SSU) on the sole basis of an indication by the drug dog. (6.25)

Progressive regimes and earned privileges scheme

- 10.60 The progressive regimes and earned privileges scheme (PREPS) policy should be reviewed annually. Its expectations for staff should be explicit and supported by a full set of documentation. (6.34)
- 10.61 Voluntary drugs testing should be separate from PREPS. (6.35)
- 10.62 Prisoner progression on the scheme should be automatic once they have reached the appropriate level of behaviour. (6.36)
- 10.63 Prisoners should not be demoted automatically as a consequence of a single act. (6.37)
- 10.64 There should be a central register of appeal indicating the reason for the appeal and the outcome. (6.38)

Catering

- 10.65 The 16-hour gap between meals at the weekend should be reduced. (7.8)
- 10.66 The serving of food should conform to relevant food safety and hygiene requirements. (7.9)
- 10.67 Staff should supervise the serving of food effectively and be models of good practice to prisoner kitchen workers. (7.10)

- 10.68 Prisoners in Foyleview should have more opportunities to self-cater as part of their preparation for release. (7.11)

Prison shop

- 10.69 There should be a formal process of prisoner consultation for feedback and suggestions for improvements in the tuck shop. (7.22)

Sentence and custody planning

- 10.70 The resettlement plans of all prisoners should be reviewed at predetermined intervals throughout their sentence. (8.11)
- 10.71 Resettlement plan targets should be prioritised, implemented, monitored and continually reviewed; identified staff should be responsible for ensuring that agreed targets are achieved. (8.12)

Offending behaviour programmes

- 10.72 Gaps in the current tutor pool for offending behaviour programmes should be filled and a system of succession planning introduced to ensure a constant supply of trained tutors. (8.23)
- 10.73 The size of the existing backlog for programme places should be quantified and a realistic plan implemented to manage it and meet future demand. (8.24)
- 10.74 The choice of offending behaviour programmes and the number of places available should meet the needs of the prisoner population. (8.25)
- 10.75 The Prison Service of England and Wales should reinstate training for offensive behaviour programmes delivery for the Northern Ireland Prison Service (NIPS). (8.26)

Reintegration planning

- 10.76 All prisoners should be subject to effective resettlement planning to make the best use of their time in custody and to prepare for release. (8.37)
- 10.77 Prisoners should be offered help to develop links with voluntary and statutory agencies in the community to provide them with support on release. (8.38)
- 10.78 The selection procedure for Foyleview should be reviewed to ensure that the decision making process is transparent and accountable and that the unit does not carry vacant places unnecessarily. (8.39)
- 10.79 The rules on movement of prisoners between the main prison and the less secure area should be reviewed. (8.40)
- 10.80 All eligible prisoners should be granted a period of home leave as part of their staged preparation for release, except where risk prevents this. (8.41)

Public protection

- 10.81 A local public protection policy should be developed that ensures effective arrangements to assess and manage the risks presented to the public by prisoners during their sentence and after release. (8.47)
- 10.82 Strict clearance procedures should be introduced to ensure that prisoners identified as high risk of harming others do not have unauthorised access to actual or potential victims. (8.48)

Substance use

- 10.83 A drug-free residential area should be introduced. (8.68)
- 10.84 There should be a full review of the voluntary drug testing (VDT) programme and its role and function. (8.69)
- 10.85 A drug supply reduction strategy should be developed based on the drug strategy unit's *Drug reduction supply - good practice guide*. (8.70)

Human resources

- 10.86 The responsibilities of the different grades need to be clarified, and duties need to be assigned to the appropriate grade. (9.13)
- 10.87 Plans should be developed for exposing staff and managers to experience of other working environments. (9.18)
- 10.88 A staff attitude survey should be conducted to assess and prioritise the issues that are of most concern to staff. (9.31)
- 10.89 Management needs to focus on means of direct communication with staff, reducing reliance on the Prison Officers' Association (POA) as a channel of communication. (9.32)
- 10.90 There needs to be a longer-term negotiation with the Prison Officers' Association (POA) to agree a strategy for handling the gradual adjustment of the Northern Ireland Prison Service (NIPS) to the changing circumstances of Northern Ireland. (9.50)

Housekeeping points

Courts and transfers

- 10.91 All escorting staff should know where emergency equipment is kept on the transport vans. (1.7)

First days in prison

- 10.92 Holding rooms in reception should contain information and material to occupy prisoners waiting there. (1.19)

Personal Officers

- 10.93 A senior manager should quality-check personal officer reports monthly. (2.25)

Family and friends

- 10.94 Mail should be delivered as soon as possible to prisoners. (3.44)

Healthcare

- 10.95 Nursing staff should record their interactions with prisoners directly into their inmate medical record (IMR), and all entries should be timed, dated and signed to ensure contemporaneous record keeping. (4.38)
- 10.96 Special sick supplies should be properly recorded on the patient's prescription chart at the time of supply. (4.39)
- 10.97 The provision of daily in-possession packs should be encouraged. (4.40)
- 10.98 Patients should sign to confirm receipt of in-possession medication. (4.41)
- 10.99 Prisoners should have lockers in which to store in-possession medicines. (4.42)
- 10.100 The refrigerator thermometer in H3 should be replaced, and staff should be re-trained in the use of the equipment. (4.43)
- 10.101 All medicines stored in the prison should be kept locked at all times. (4.44)
- 10.102 Expiry dates on medications should be regularly checked and documented. (4.45)
- 10.103 Medicines in the out of hours cupboard should be fully labelled in accordance with the requirements of the Medicines Act. Wherever possible, stock medicines should be supplied in the manufacturers' original container. (4.46)
- 10.104 An audit system should be introduced to reconcile requisitions for out of hours stock with records of usage. (4.47)

Use of force

- 10.105 All control and restraint (C&R) paperwork should be properly authorised and certified by a senior manager. (6.26)

Catering

- 10.106 The selection criteria for kitchen workers should be reviewed to maximise the number of prisoners achieving relevant qualifications. (7.12)
- 10.107 Lunch should not be served before noon. (7.13)
- 10.108 Food temperatures should be checked and logged at serveries. (7.14)

- 10.109 Prisoners should not have to make meal choices more than one week in advance. (7.15)
- 10.110 Prisoners should be able to make comments about the food without resorting to the complaints system. (7.16)

Sentence and custody planning

- 10.111 Resettlement plan targets should be more specific and time-limited. (8.13)

Examples of good practice

- 10.112 Prisoners' views about induction were entered on a database and the information was evaluated regularly to ensure the course met prisoners' needs. (1.20)
- 10.113 Prisoners saw all personal officer reports on them and they were required to sign that they had seen them. (2.26)
- 10.114 The care suites on residential units contained a contact button that prisoners could use to dial directly to the Samaritans' telephone line. (3.15)
- 10.115 Visitors could pre-book visits in person, by telephone and on the internet. (3.45)
- 10.116 Child-centred visits and family days promoted contact and positive interaction between prisoners and their children and families. (3.46)
- 10.117 The use of triage algorithms ensured consistency of assessment, diagnosis and care by healthcare staff for all prisoners. (4.48)
- 10.118 Healthcare staff had embraced the concept of 'Essence of Care' as a framework in which to provide good care in a variety of patient-orientated areas. (4.49)
- 10.119 Prisoners had a dental check-up within a week of arrival at the prison, and this promoted oral health. (4.50)
- 10.120 All units had dining areas, which included toasters and microwaves for prisoners' use. (7.17)
- 10.121 Shop goods were available to prisoners at cost price. (7.23)
- 10.122 The programmes development unit (PDU) was an excellent facility providing a spacious, welcoming and comfortable environment for staff and prisoners. (8.14)
- 10.123 All prisoners were assessed for their individual needs and risk of reoffending within 20 days of arrival. (8.15)
- 10.124 All resettlement files were returned to Maghaberry following a prisoner's release and were reactivated if he returned to prison within six months. (8.16)
- 10.125 All resettlement work at Magilligan was based on helping the prisoner to maintain family and community links, and recognising his continuing role and responsibilities for his dependants. (8.42)

10.126 Home leave was granted during the working week when prisoners could access necessary services and support, thus reducing their vulnerability and likelihood of breaching conditions. (8.43)

10.127 The integration of treatment interventions in the programmes development unit led to well co-ordinated programmes and good service development. (8.71)

Appendix I: Inspection team

Anne Owers	-	Chief Inspector
Gary Deighton	-	Team leader
Janine Harrison	-	Inspector
Gail Hunt	-	Inspector
Pat Mosley	-	Inspector
Ruth Whitehead	-	Inspector

Criminal Justice Inspectorate, Northern Ireland

Kit Chivers	-	Chief Inspector
Brendan McGuigan	-	Deputy Chief Inspector
John Shanks	-	Inspector

Specialist inspectors

Steve Gascoigne	-	Pharmacy
Digby Ingle	-	Substance use
Angela Johnson	-	Human resources
Elizabeth Tysoe	-	Healthcare
Neil Edwards	-	Adult Learning Inspector (lead)
Bob Bland	-	Adult Learning Inspector
Sue Metcalfe	-	Adult Learning Inspector
Jen Walters	-	Adult Learning Inspector
Mike White	-	Adult Learning Inspector
John Baird	-	Education and Training Inspectorate
Maureen Bennett	-	Education and Training Inspectorate

Researchers

Mark Challen	-	Research officer
Julia Fossi	-	Research officer

Appendix II: Prison population profile

(i) Status	Number	%
Sentenced	327	100%
Total	327	100%

(ii) Sentence	Number	%
Less than 6 months	5	1.5
6 months-less than 12 months	25	7.6
12 months-less than 2 years	55	16.8
2 years-less than 4 years	82	25.2
4 years-less than 10 years	123	37.6
10 years and over (not life)	37	11.3
Life	NIL	0
Total	327	100

(iii) Length of stay	Number	%
Less than 1 month	30	9.2
1 month to 3 months	68	20.8
3 months to 6 months	61	18.6
6 months to 1 year	73	22.3
1 year to 2 years	61	18.6
2 years to 4 years	29	8.9
4 years or more	5	1.5
Total	327	100

(iv) Main offence	Number	%
Violence against the person	57	17.4
Sexual offences	59	18.1
Burglary	19	5.8
Robbery	62	18.9
Theft and handling	12	3.6
Drugs offences	43	13.1
Other offences	75	23.1
Total	327	100

(v) Age	Number	%
21 years to 29 years	133	40.6
30 years to 39 years	96	29.4
40 years to 49 years	56	17.2
50 years to 59 years	30	9.2
60 years to 69 years	12	3.6
Maximum age: 68 years		
Total	327	100

(vi) Home address	Number	%
Within 50 miles of the prison	81	24.7
Between 50 and 100 miles of the prison	220	67.3
Over 100 miles from the prison	11	3.4
Overseas	5	1.5
No fixed abode	10	3.1
Total	327	100

(vii) Nationality	Number	%
British	323	98.5
Foreign nationals	5	1.5
Total	327	100

(viii) Ethnicity	Number	%
<i>White</i>		
British	316	96.6
Irish	7	2.2
Other White	2	0.6
<i>Asian or Asian British:</i>		
Other Asian	1	0.3
<i>Chinese or other ethnic group</i>		
Chinese	1	0.3
Total	327	100

(ix) Religion	Number of prisoners	%
Baptist	-	
Church of Ireland	49	14.9
Roman Catholic	137	41.9
Other Christian denominations	107	32.7
Muslim	-	
Sikh	-	
Hindu	-	
Buddhist	-	
Jewish	-	
Other	31	9.5
No religion	3	0.9
Total	327	100

Appendix III: Outside organisations with experience of working with Magilligan

Finlay Spratt
Prison Officers Association (NI)
Castell House
Prison Service College
Millisle
Co Down

Superintendent Michael Rankin
District Commander
Police Service of Northern Ireland
LIMAVADY
Co Londonderry

Donny Sweeney
NIACRO
Old City Factory
19C Queen Street
LONDONDERRY

James Grant
NORTHLANDS
Shepherds Way
Dungiven Road
LONDONDERRY

Rita O'Hare
Probation Board for NI
80-90 North Street
BELFAST
BT1 1LD

Alan Darnbrook
Prison-Link Programme Delivery Unit
44 Great Patrick Street
BELFAST
BT1 2LT

Professor Brice Dickson
Chief Commissioner
NI Human Rights Commission
Temple Court
39 North Street
BELFAST
BT1 1NA

The Principal
Limavady College of Further
Education
Main Street
LIMAVADY
Co Londonderry

Martin McCaul
Acting Chief Executive
Extern
Bishop Street
LONDONDERRY

Chief Executive
Limavady Borough Council
7 Connell Street
LIMAVADY
Co Londonderry

Chief Executive
Coleraine Borough Council
Cloonavin
66 Portstewart Road
COLERAINE
Co Londonderry
BT52 1EY

Chief Executive
Ballymoney Borough Council
Rasharkin Community Hall
Duneany Road
BALLYMONEY
Co Antrim

Messrs Madden & Finucane
Solicitors
88 Castle Street
BELFAST

Kevin Winters & Co
Solicitors
76A Market Street
DOWNPATRICK
Co Down

Messrs Sandhu & Co
Solicitors
1 Main Street
LIMAVADY
Co Londonderry

Messrs Bogue & McNulty
Solicitors
32 Lyndon Court
BELFAST

Messrs John J Rice & Co
Solicitors
Law Society House
94 Victoria Street
BELFAST
BT1 3JZ

Messrs Donnelly & Wall
Solicitors
58-60 Upper Arthur Street
BELFAST
BT1 4GP

Messrs Patrick Fahy & Co
Solicitors
4 John Street
OMAGH
Co Tyrone

Messrs Trevor Smyth & Co
Solicitors
Chester House
13 Chichester Street
BELFAST
BT1

Appendix IV: Summary of prisoner questionnaires and interviews

Prisoner survey methodology

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

Choosing the sample size

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

At the time of the survey on 5 - 6 May 2004 the prisoner population at HMP Magilligan was 340. The baseline sample size was 110. Overall, this represented 32% of the prisoner population.

Selecting the sample

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

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

Interviews were carried out with any respondents with literacy difficulties. No respondents were interviewed.

Methodology

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

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

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

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

Response rates

In total, 102 respondents completed and returned their questionnaires. This represented 30% of the prison population. The response rate was 93% (In addition to the four respondents who refused to complete a questionnaire, four questionnaires were returned blank).

Comparisons

The following document details the results from the survey. All missing responses are excluded from the analysis. All data from each establishment has been weighted, in order to mimic a consistent percentage sampled in each establishment.

Presented alongside the results from this survey, are the benchmark figures for all prisoners surveyed in trainer prisons. This benchmark is based on all responses from prisoner surveys carried out in 11 trainer prisons since April 2003.

In all the above documents, statistically significant differences are highlighted. Statistical significance merely indicates whether there is a real difference between the figures, i.e. the difference is not due to chance alone. Results that are significantly better are indicated by grey shading, results that are significantly worse are indicated by a black background and where there is no significant difference, there is no shading

Summary of prisoner survey responses

At the time of the pre-inspection the population at HMP Magilligan was 340. A LIDS printout of all prisoners was requested and from this a systematic random sample was formed. In total 110 prisoners were selected and interviews were offered to those with literacy problems. In total 102 completed questionnaires were returned. Four prisoners refused to complete the form and four questionnaires were returned blank.

In total, 30% of the prison population was successfully sampled:

H1 block = 23 respondents
H2 block = 30 respondents
H3 block = 27 respondents
SSU = 4 respondents
Hospital = 3 respondents
Foyleview = 15 respondents

All missing data has been excluded when calculating the overall percentages. Percentages have been rounded up or down and may not add up to 100%.

Prisoner Survey Responses Magilligan 2004

		Magilligan	Trainer Prisons Benchmark
	TRAINER ESTABLISHMENTS (Missing data has been excluded for each question) Please note: Where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.		
	Number of completed questionnaires returned	102	1016
	SECTION 1: GENERAL INFORMATION (There were no tests run on the general information section)		
2	Are you under 21 years of age?	1	0
3	Are you sentenced?	100	100
4	Is your sentence more than four years?	43	61
5	Do you have less than six months to serve?	43	28
6	Have you been in this prison less than a month?	3	8
7	Are you a foreign national?	4	8
8	Is English your first language?	100	95
9	Are you from a minority ethnic group? (including all those who did not tick White British, White Irish or White other categories)	0	19
10	Have you been in prison more than five times?	20	28
11	Do you have any children?	62	60
	SECTION 2: COURTS, TRANSFERS AND ESCORTS		
12a	We want to know about the most recent journey you have made either to or from court or between establishments. How was the cleanliness of the van? (very good/good)	36	47
12b	We want to know about the most recent journey you have made either to or from court or between establishments. How was your personal safety during the journey? (very good/good)	50	61
12c	We want to know about the most recent journey you have made either to or from court or between establishments. How was the comfort of the van? (very good/good)	12	17
12d	We want to know about the most recent journey you have made either to or from court or between establishments. How was the attention paid to your health needs?	24	32
12e	We want to know about the most recent journey you have made either to or from court or between establishments. How was the frequency of comfort breaks? (very good/good)	11	13
13	Did you spend more than four hours in the van?	2	11
14	Were you treated well/very well by the escort staff?	67	71
15a	Did you know where you were going when you left court or when transferred from another establishment?	90	90
15b	Before you arrived here did you receive any written information about what would happen to you?	9	20
15c	When you first arrived here did your property arrive at the same time as you?	82	91
	SECTION 3: RECEPTION, FIRST NIGHT AND INDUCTION		
17	Did you have any problems when you first arrived?	63	53
18	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	26	20
19a	Please answer the following question about reception: were you seen by a member of healthcare staff?	80	89



No significant difference



Significantly worse than the benchmark



Significantly better than the benchmark

		Magilligan	Trainer Prisons Benchmark
	TRAINER ESTABLISHMENTS (Missing data has been excluded for each question) Please note: Where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.		
	Number of completed questionnaires returned	102	1016
19b	Please answer the following question about reception: when you were searched, was this carried out in a sensitive and understanding way?	65	73
20	Were you treated well/very well in reception?	78	74
21a	Did you receive a reception pack on your day of arrival?	42	72
21b	Did you receive information about what was going to happen here on your day of arrival?	32	54
21c	Did you receive information about support for feeling depressed or suicidal on your day of arrival?	18	45
21d	Did you have the opportunity to have a shower on your day of arrival?	52	53
21e	Did you get the opportunity to have a free telephone call on your day of arrival?	16	45
21f	Did you get information about routine requests on your day of arrival?	37	40
21g	Did you get something to eat on your day of arrival?	84	76
21h	Did you get information about visits on your day of arrival?	31	46
22a	Did you have access to the chaplain/priest within the first 24 hours of you arriving at this prison?	16	44
22b	Did you have access to someone from healthcare within the first 24 hours?	65	73
22c	Did you have access to a Listener/Samaritans within the first 24 hours of you arriving at this prison?	20	33
22d	Did you have access to the prison shop/canteen within the first 24 hours?	44	25
23	Did you feel safe on your first night here?	73	89
24	Did you go on an induction course within the first week?	80	74
25	Did the induction course cover everything you needed to know about the prison?	76	60
	SECTION 4: LEGAL RIGHTS AND RESPECTFUL CUSTODY		
27a	Can you get access to legal reference books?	18	62
27b	Can you get access to communication with your solicitor or legal representative?	75	76
27c	Can you get access to information about leave to appeal?	41	54
27d	Can you get access to legal visits?	75	70
27e	Can you get access to help with legal costs?	54	50
27f	Can you get access to bail information?	41	32
28a	Please answer the following question about the wing/unit you are currently on: are you normally offered enough clean, suitable clothes for the week?	79	69
28b	Please answer the following question about the wing/unit you are currently on: are you normally able to have a shower every day?	96	94
28c	Please answer the following question about the wing/unit you are currently on: do you normally receive clean sheets every week?	94	86
28d	Please answer the following question about the wing/unit you are currently on: do you normally get cell cleaning materials every week?	85	77
28e	Please answer the following question about the wing/unit you are currently on: is your cell call bell normally answered within five minutes?	47	52

		Magilligan	Trainer Prisons Benchmark
	TRAINER ESTABLISHMENTS (Missing data has been excluded for each question) Please note: Where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.		
	Number of completed questionnaires returned	102	1016
28f	Please answer the following question about the wing/unit you are currently on: is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	71	75
28g	Please answer the following question about the wing/unit you are currently on: can you normally get your stored property, if you need to?	66	41
28h	Can you get free sanitary products when you need them?	N/A	N/A
29	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	47	43
30	Is the food in this prison good/very good?	35	39
31	Does the shop/canteen sell a wide enough range of goods to meet your needs?	46	39
32a	Is it easy/very easy to get a complaints form?	53	85
32b	Is it easy/very easy to get an application form?	60	91
33a	Do you feel applications are sorted out fairly?	30	62
33b	Do you feel complaints are sorted out fairly?	19	22
33c	Do you feel applications are sorted out promptly?	30	54
33d	Do you feel complaints are sorted out promptly?	20	20
33e	Are you given information about how to make an appeal?	25	39
34	Have you ever been made to or encouraged to withdraw a complaint since you have been in the prison?	23	13
35	Do you know how to apply to the Prisons and Probation Ombudsman?	28	52
36	Is it easy/very easy to contact the Independent Monitoring Board (BOV)?	30	45
37	Are you on the enhanced (top) level of the IEP scheme?	55	53
38	Do you feel you have been treated fairly in your experience of the IEP scheme?	55	57
39a	In the last six months have any members of staff physically restrained you (C & R)?	6	5
39b	In the last six months have you spent a night in the segregation unit?	26	15
40a	Do you feel your religious beliefs are respected?	66	56
40b	Are you able to speak to a religious leader of your faith in private if you want to?	65	63
41	Are you able to speak to a Listener at any time, if you want to?	70	66
42a	Do you have a member of staff, in this prison, that you can turn to for help if you have a problem?	69	75
42b	Do most staff, in this prison, treat you with respect?	78	82
	SECTION 5: SAFETY		
44	Have you ever felt unsafe in this prison?	39	19
45	Have you been victimised (insulted or assaulted) by another prisoner?	16	17
46	Have you had insulting remarks made about you, your family or friends since you have been here? (By prisoners)	12	9

		Magilligan	Trainer Prisons Benchmark
	TRAINER ESTABLISHMENTS (Missing data has been excluded for each question) Please note: Where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.		
	Number of completed questionnaires returned	102	1016
47a	Have you been hit, kicked or assaulted since you have been here? (By prisoners)	5	5
47b	Have you been sexually abused since you have been here? (By prisoners)	3	1
47c	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	3	3
47d	Have you been victimised because of drugs since you have been here? (By prisoners)	1	2
47e	Have you ever had your canteen/property taken since you have been here? (By prisoners)	2	2
47f	Have you ever been victimised because you were new here? (By prisoners)	1	2
47g	Have you ever been victimised because you were from a different part of the country than other since you have been here? (by prisoners)	1	3
48	Have you been victimised (insulted or assaulted) by a member of staff?	21	19
49a	Have you had insulting remarks made about you, your family or friends since you have been here? (By staff)	15	10
49b	Have you been hit, kicked or assaulted since you have been here? (By staff)	6	3
49c	Have you been sexually abused since you have been here? (By staff)	3	1
49d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	3	3
49e	Have you been victimised because of drugs since you have been here? (By staff)	3	3
49f	Have you ever been victimised because you were new here? (By staff)	3	1
49g	Have you ever been victimised because you were from a different part of the country than other since you have been here? (By staff)	4	3
50	Did you report any victimisation that you have experienced?	13	10
	SECTION 6: HEALTHCARE		
52	Do you think the overall quality of the healthcare is good/very good?	46	46
53a	Do you think the quality of healthcare from the doctor is good/very good?	26	45
53b	Do you think the quality of healthcare from the nurse is good/very good?	67	60
53c	Do you think the quality of healthcare from the dentist is good/very good?	77	30
53d	Do you think the quality of healthcare from the optician is good/very good?	33	24
53e	Do you think the quality of healthcare from the dispensing staff/pharmacist is good/very good?	60	46
54	Is it easy/very easy to get illegal drugs in this prison?	42	24
55a	Do you think you will have a problem with drugs when you leave this prison?	8	12
55b	Do you think you will have a problem with alcohol when you leave this prison?	10	9
	SECTION 7: PURPOSEFUL ACTIVITY		
57a	Do you feel your job will help you on release?	45	33
57b	Do you feel your vocational or skills training will help you on release?	34	31
57c	Do you feel your education (including basic skills) will help you on release?	43	44

		Magilligan	Trainer Prisons Benchmark
	TRAINER ESTABLISHMENTS (Missing data has been excluded for each question) Please note: Where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.		
	Number of completed questionnaires returned	102	1016
57d	Do you feel your offending behaviour programmes will help you on release?	31	30
57e	Do you feel your drug or alcohol programmes will help you on release?	27	29
58	Do you go to the library at least once a week?	17	58
59	Can you get access to a newspaper every day?	77	69
60	On average, do you go to the gym three or more times a week?	35	48
61	On average, do you go outside for exercise three or more times a week?	68	49
62	On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	14	25
63	On average, do you spend ten or more hours out of your cell on a weekend day?(This includes hours at education, at work etc)	16	16
64	On average, do you go on association more than five times each week?	79	81
65	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	30	24
	SECTION 8: RESETTLEMENT		
67	Did you first meet your personal officer in the first week?	42	33
68	Do you think your personal officer is helpful/very helpful?	52	49
69	Do you have a custody/sentence plan?	54	66
70	Were you involved/very involved in the development of your sentence plan?	45	45
71	Have you had any problems with sending or receiving mail?	40	31
72	Have you had any problems with access to the telephones?	27	26
73	Did you have a visit in the first week that you were here?	62	28
74	Does this prison give you the opportunity to have the visits you are entitled to? (e.g. number and length of visit)	79	78
75a	Do you know who to contact, within this prison, to get help with finding a job on release?	37	51
75b	Do you know who to contact, within this prison, to get help with finding accommodation on release?	48	52
75c	Do you know who to contact, within this prison, to get help with your finances in preparation for release?	38	39
75d	Do you know who to contact, within this prison, to get help with claiming benefits on release?	46	55
75e	Do you know who to contact, within this prison, to get help with arranging a place at college/continuing education on release?	35	42
75f	Do you know who to contact within this prison to get help with external drugs courses etc	43	49
75g	Do you know who to contact, within this prison, to get help with continuity of healthcare on release?	38	49

	TRAINER ESTABLISHMENTS (Missing data has been excluded for each question) Please note: Where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.	Magilligan	Trainer Prisons Benchmark
	Number of completed questionnaires returned	102	1016
76	Have you done anything, or has anything happened to you here that you think will make you less likely to offend in the future?	62	57