



23-24 OCTOBER & 4-7 NOVEMBER 2019

SUMMARY











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by the Chief Inspector of Criminal Justice in Northern Ireland; Her Majesty's Chief Inspector of Prisons; the Regulation and Quality Improvement Authority; and the Education and Training Inspectorate.

Laid before the Northern Ireland Assembly under Section 49(2) of the Justice (Northern Ireland) Act 2002 (as amended by paragraph 7(2) of Schedule 13 to The Northern Ireland Act 1998 (Devolution of Policing and Justice Functions) Order 2010) by the Department of Justice.

JUNE 2020







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LIST OF ABBREVIATIONS

REPORT ON AN UNANNOUNCED INSPECTION OF HYDEBANK WOOD SECURE COLLEGE

JUNE 2020

ACE	Assessment, Case management and Evaluation		
AD:EPT	Alcohol and Drugs: Empowering People through Therapy		
CAB	Challenging Antisocial Behaviour		
CER	Conditional Early Release		
CJI	Criminal Justice Inspection Northern Ireland		
DoJ	Department of Justice		
EAT	Equality Action Team		
ECS	Extended Custodial Sentence		
ESOL	English for Speakers of Other Languages		
ETI	Education and Training Inspectorate		
ETS	Enhanced Thinking Skills		
GP	General Practitioner		
HMIP	Her Majesty's Inspectorate of Prisons in England and Wales		
ICT	Information and Communication Technology		
IMB	Independent Monitoring Board		
MDT	Mandatory Drug Test		
NIPS	Northern Ireland Prison Service		
NMC	Nursing and Midwifery Council		
NPM	National Preventive Mechanism		
OPCAT	Optional Protocol to the UN Convention Against Torture and		
	other Cruel, Inhuman or Degrading Treatment or Punishment		
PDM	Prisoner Development Model		
PDP	Personal Development Plan		
PDU	Prisoner Development Unit		
PE	Physical Education		
PECCS	Prisoner Escort and Court Custody Service		
PPANI	Public Protection Arrangements Northern Ireland		
PREPs	Progressive Regime and Earned Privileges scheme		
PRISM	Prison Record Information System Management		
DCVII	(computer system used by the NIPS)		
PSNI	Police Service of Northern Ireland		
ROTL	Release on Temporary Licence		
RQIA	Regulation and Quality Improvement Authority South Factors Health and Social Care Trust		
SEHSCT	South Eastern Health and Social Care Trust		
SPAR	Supporting Prisoners At Risk		

CHIEF INSPECTORS'
FOREWORD

REPORT ON AN UNANNOUNCED INSPECTION OF HYDEBANK WOOD SECURE COLLEGE

JUNE 2020

Hydebank Wood Secure College (the College) is an establishment in Belfast holding young adult male prisoners aged between 18 and 24.

The arrangements whereby Her Majesty's Inspectorate of Prisons (HMIP) supports the inspection of prisons in Northern Ireland are set out in the body of this report. The College was last inspected in May 2016, and before that in 2013. It is no exaggeration that the progress made during this time has been quite remarkable. In 2013 it was judged that three of the four areas of the healthy prison tests were either 'poor' or 'not sufficiently good', and only resettlement and release planning (then referred to as resettlement) was found to be 'reasonably good'. By 2016 significant progress had been made, with improvements in two of the tests.

This inspection shows more marked progress with improvements in three of the healthy prison tests. Three of the tests were judged to be at the highest standard, 'good', and in particular, safety had improved two grades from 'not sufficiently good' to 'good' – a very unusual achievement

The Hydebank Wood campus includes
Ash House, a stand-alone residential unit
that holds women prisoners. There is a small
amount of well-managed contact between
the male and female prisoners, which has
caused some discussion as to whether this
is fully in accordance with international
standards concerning the separation of
the sexes in the custodial environment.
Our observation during this inspection,
supported by observations from both male
and female prisoners, is that if properly

supervised and managed, such contact can be of considerable benefit to both men and women. The then two Chief Inspectors, at the invitation of a group of women, joined a group discussing the impact of trauma, and they were very clear in their views that there were distinct benefits to properly controlled contact.

Inspections of comparable establishments in England and Wales have repeatedly shown young adults to be experiencing the poorest treatment and outcomes in the adult prison estate. Reasons that are sometimes cited for this are the immaturity of the cohort and the difficulties experienced by the particular age group in settling in to life in prison and using the time constructively. In light of this, we would recommend that those with responsibility for designing and delivering custodial services for young adults in England and Wales should study the findings of this report carefully, and where appropriate learn from it. The report is rich with examples of where the College performs favourably, in some respects dramatically better, than comparable prisons in England and Wales.

After we had come to our judgements, we found that 64% of the 2016 recommendations had been fully achieved and a further 12% partly achieved. This is an exceptionally high figure and shows what improvements can be achieved when inspection recommendations are approached in a constructive and positive way.

Violence is often a matter of grave concern in establishments holding young adults, and so it was reassuring to find that violence at the College had reduced and was at a much lower level than in comparable prisons. Nevertheless, we do express concern that the governance of the use of force by staff and the use of body-worn video cameras, needed to be improved. The strategy to reduce the supply of illicit drugs into the College also needed to be developed, and better use made of the available intelligence, and more analysis applied to it.

We found the College to be a respectful establishment, with the positive relationships between prisoners and staff a particular strength. It was notable that staff did not wear Prison Officer uniforms and that relationships were conducted on a first name basis. However, this did not in any way compromise the essential authority of the staff in carrying out their duties. It was also notable that in the area of respect, 19 out of 23 recommendations from the last inspection had been fully achieved.

Improvements to collaborative working between health and prison staff at all levels is also encouraging. Prisoners/students have good access to primary health care services and they are treated professionally with compassion and dignity. The quality improvement work underway has the potential to deliver further positive outcomes for prisoners/students.

The only area in which the establishment was judged not to be at the highest level was in the area of purposeful activity, where our colleagues from the Education and Training Inspectorate (ETI) were of the view that there needed to be more attention paid to the overall impact of the learning and skills provision of the population, improved workshops and enhanced utilisation of them and that there should be better use of data and more involvement of the various providers and agencies. This issue constitutes one of our three key concerns and recommendations.

Overall this was a heartening inspection that shows how progress can be made when there is a clear vision and drive for improvement with effective leadership and good teamwork. Both Chief Inspectors are thoroughly impressed by the findings of this inspection and commend all who have worked so hard over many years to achieve, sustain and build on this.

We express our thanks to the Inspection Team and all those who assisted them during this inspection.

Jacqui Durkin

Chief Inspector of Criminal Justice in Northern Ireland

June 2020





Peter Clarke CVO OBE QPM

HM Chief Inspector of Prisons in England and Wales

June 2020





FACT PAGE

Task of the establishment

Hydebank Wood Secure College accommodates young male offenders between the ages of 18-24.

Certified normal accommodation and operational capacity¹

Prisoners held at the time of inspection:

Baseline certified normal capacity:

In-use certified normal capacity:

Operational capacity:

88

210

141

258

Prison status (public or private) and key providers

Public



South Eastern Health and Social Care Trust

Physical health provider

Mental health provider



Prison education framework provider







Substance use treatment providers

NORTHERN IRELAND



Prisoner Escort and Court Custody Service

Escort contractor

Prison department

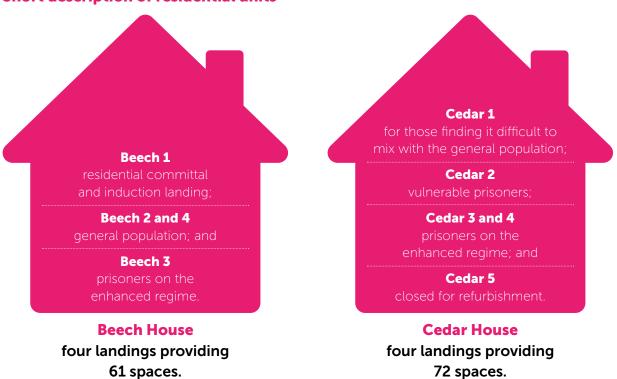


Baseline Certified Normal Accommodation (CNA) is the sum total of all certified accommodation in an establishment except cells in segregation units, health care cells or rooms that are not routinely used to accommodate long stay patients. In-use CNA is baseline CNA less those places not available for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

Brief history



Short description of residential units



Elm – four landings providing 73 spaces, 46 of which were not in use; includes 12 rooms in the segregation unit.

Willow – eight-bed working out unit located in Elm.

Name of governor and date in post

Gary Milling, April 2018

Independent Monitoring Board (IMB) chair

Hazel Patton

Date of last inspection

9-16 May 2016

Copies of all previous inspection reports can be found on the CJI website - www.cjini.org

ABOUT THIS INSPECTION AND REPORT



HMIP is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, secure training centres, immigration detention facilities, police and court custody and military detention. Criminal Justice Inspection Northern Ireland (CJI) is an independent statutory Inspectorate, established under the Justice (Northern Ireland) Act 2002, constituted as a non-departmental public body in the person of the Chief Inspector. CJI was established in accordance with Recommendation 263 of the Review of the Criminal Justice System in Northern Ireland of March, 2000.

The Regulation and Quality Improvement Authority (RQIA) is a non-departmental public body responsible for monitoring and inspecting the quality, safety and availability of health and social care services across Northern Ireland. It also has the responsibility of encouraging improvements in those services. The functions of the RQIA are derived from the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.

All inspections carried out by HMIP and those prison inspections jointly carried out with CJI contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HMIP, CJI and the RQIA are three of several bodies making up the NPM in the United Kingdom.

The ETI is a unitary Inspectorate, and provides independent inspection services and information about the quality of education, youth provision and training in Northern Ireland. It also provides for CJI inspection services of the learning and skills provision within prisons, in line with an agreed annual memorandum of understanding and an associated Service Level Agreement.

The Inspectorates who participated in this inspection are all independent, statutory organisations which report on the treatment and conditions of those detained in prisons, young offender institutions, immigration detention facilities and police custody.

All HMIP and CJI reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison. The tests are:

Safety	Prisoners, particularly the most vulnerable, are held safely.
Respect	Prisoners are treated with respect for their human dignity.
Purposeful activity	Prisoners are able, and expected, to engage in activity that is likely to benefit them.
Rehabilitation and release planning	Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release into the community.

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

• Outcomes for prisoners are good.

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

• Outcomes for prisoners are reasonably good.

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

Outcomes for prisoners are not sufficiently good.

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

Outcomes for prisoners are poor.

There is evidence that outcomes for prisoners are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.

Our assessments might result in one of the following:

• **Key concerns and recommendations:** identify the issues of most importance to improving outcomes for prisoners and are designed to help establishments prioritise and address the most significant weaknesses in the treatment and conditions of prisoners.

- Recommendations: will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections.
- **Examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for prisoners.

Five key sources of evidence are used by Inspectors: observation; prisoner surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.

Since April 2013, all our inspections in Northern Ireland have been unannounced, other than in exceptional circumstances. This replaces the previous system of announced and unannounced full main inspections with full or short follow-ups to review progress. All our inspections now follow up recommendations from the last full inspection.

THIS REPORT

This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four chapters each containing a detailed account of our findings against our *Expectations*. *Criteria for assessing the treatment of and conditions for men in prisons (Version 5, 2017).*² The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report (2016). Chapter 5 collates all key concerns, recommendations and examples of good practice arising from the inspection. Appendix I details the Inspection Team and Appendix II lists the recommendations from the previous inspection report, and our assessment of whether they have been achieved.

Appendix III includes photographs of the condition of and facilities used by the young adults at the time of the inspection fieldwork. Details of the prison population profile and findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendices IV and V respectively.

Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.³ This material can be obtained directly from the CJI website – **www.cjini.org**

² Available at www.justiceinspectorates.gov.uk/hmiprisons/our-expectations/prison-expectations/

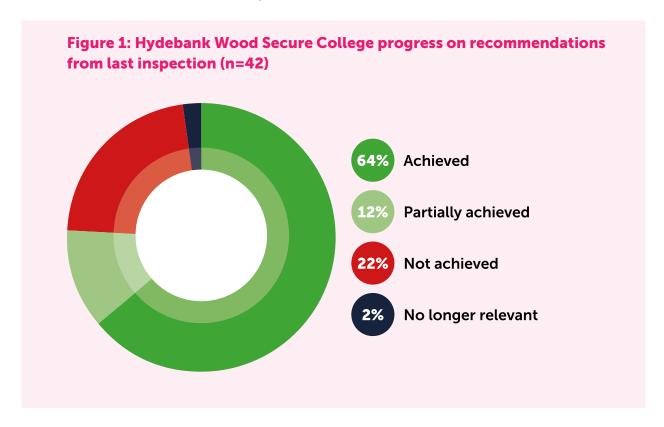
³ The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

EXECUTIVE SUMMARY

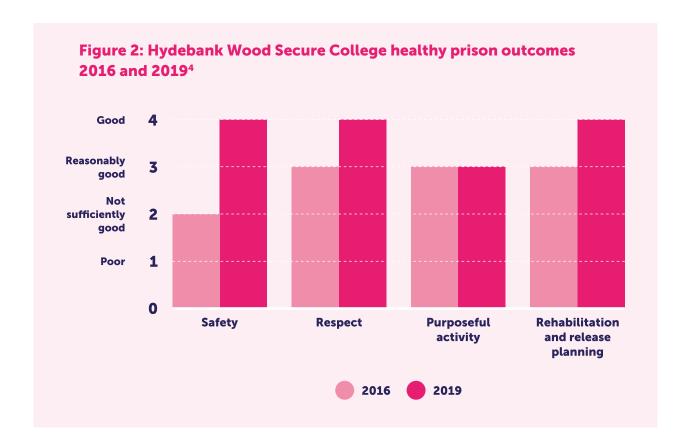


At this inspection we found that the prison had achieved 27 of those recommendations, partially achieved five recommendations and not achieved nine recommendations.

One recommendation was no longer relevant.



Since our last inspection outcomes for prisoners have stayed the same in one healthy prison area, with purposeful activity remaining 'reasonably good'. Outcomes improved in all other healthy prison areas: safety improved from 'not sufficiently good' to 'good'; and respect and rehabilitation and release planning improved from 'reasonably good' to 'good'.



SAFETY

REPORT ON AN UNANNOUNCED INSPECTION OF HYDEBANK WOOD SECURE COLLEGE

JUNE 2020

Work to support prisoners in their early days was good. Levels of violence had reduced and were lower than in similar prisons. The earned privileges scheme successfully motivated good behaviour. Weaknesses in the adjudication system left some rule breaking unpunished. The use of force was lower than at the previous inspection but governance arrangements were not sufficiently robust. The segregation environment was now fit for purpose, and staff-prisoner relationships were good. Levels of self-harm were lower than in similar prisons and care for prisoners in crisis was good. Physical and procedural security was proportionate and supported the positive environment. There were some weaknesses in the management of intelligence, and drug supply reduction measures were not sufficiently robust. **Outcomes for prisoners were good against this healthy prison test.**

At the last inspection in May 2016 we found that outcomes for prisoners in Hydebank Wood Secure College were not sufficiently good against this healthy prison test. We made eight recommendations in the area of safety.⁵ At this inspection we found that two of the recommendations had been achieved, one had been partially achieved and five had not been achieved.

⁴ Please note that the criteria assessed under each healthy prison area were amended in September 2017. Healthy prison outcomes reflect the expectations in place at the time of each inspection.

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

In our survey, most prisoners said they spent less than two hours in reception and were treated respectfully by staff. Holding rooms were small and basic, but arrivals were there for a relatively short time. First night interviews covered all key risk information but were not conducted in private, which inhibited the sharing of confidential information. First-night accommodation was well equipped and clean. Staff conducted appropriate welfare checks on new arrivals. Induction was comprehensive and supported well by peer workers. Prisoners on induction spent most of their time out of their cells, which was better than we usually see.

Recorded levels of violence had reduced since the previous inspections and were much lower than in similar prisons. The approach to managing behaviour was more cohesive and effective than at the previous inspection, but actions identified following antisocial incidents needed more focus. The prison was effective in keeping the vulnerable prisoner population safe, and there was good support for prisoners who were social isolators. The Progressive Regimes and Earned Privileges scheme (PREPs) was used effectively to encourage good behaviour. The governor routinely scrutinised adjudication data to identify potential learning points. Nevertheless, almost half of all adjudications were not concluded, which left some serious breaches of rules unpunished. Records of adjudication did not always demonstrate sufficient investigation.

The number of incidents involving the use of force had reduced, but governance of its use was not sufficiently robust: Body-worn camera footage was not systematically reviewed, and documentation did not always provide clear justification to explain why force was necessary.

An impressive new segregation unit was now fit for purpose. Staff managed the unit with a balance of discipline and kindness, providing a relaxed and therapeutic environment. The number of prisoners segregated had reduced since our previous inspection, but lengths of stay had increased and we were not always assured that this was appropriate.

Most aspects of physical and procedural security were proportionate and contributed to a relaxed atmosphere in the prison. The management of intelligence did not focus sufficiently on identified risks. Positive Mandatory Drug Testing (MDT) results were higher than we see in similar prisons, and drug supply reduction measures were not sufficiently robust.

There had been no deaths in custody since the previous inspection. Incidents of self-harm had reduced and were much lower than in similar prisons. The monthly safer custody meeting was well attended and included good analysis of data, although subsequent actions were not always well recorded. In our survey, significantly more prisoners than the comparator said they had mental health issues. Prisoners in crisis told us they received good support from staff who were well informed about their specific issues. Serious case reviews were held to discuss prisoners with complex and long-term needs. However, we were not assured that there was an effective system to refer prisoners to the HSC Trusts' adult safeguarding team where appropriate.

RESPECT

Good staff and prisoner relationships were a real strength at Hydebank Wood Secure College. Living conditions were excellent. Catering arrangements and access to an on-site shop were good. Prisoner requests and complaints were managed well, and consultation was effective. The management of equality work had improved significantly and was good. The chaplaincy was active in providing valuable spiritual and pastoral support. The management and provision of health services had improved and were appropriately patient-centred. Psychosocial and clinical substance treatment was reasonably good.

Outcomes for prisoners were good against this healthy prison test.

At the last inspection in May 2016 we found that outcomes for prisoners in Hydebank Wood Secure College were reasonably good against this healthy prison test. We made 23 recommendations in the area of respect. At this inspection we found that 19 of the recommendations had been achieved, two had been partially achieved, one had not been achieved and one was no longer relevant.

Relationships between prisoners and staff were relaxed and friendly. The lack of staff uniforms and use of first names helped to break down barriers and normalise the environment, without compromising staff authority. Our survey and observations demonstrated that staff were aware of the needs of individuals and offered good care. Prisoners felt supported and many of their day-to-day issues were resolved informally.

In our survey, prisoners were positive about many aspects of daily life. Living conditions for most were excellent. Each prisoner had a single cell that was well equipped, well presented and clean, as were shower facilities. Communal areas were bright and welcoming throughout, and association facilities were good. Rules and routines were generally well understood, and in-possession entitlements were generous.

Menus were varied and met dietary and religious needs, and prisoners could dine communally. They were no longer able to order their own supermarket shop to self-cater but there were plans to reopen a self-catering landing on Cedar unit. Poor staff supervision of the meal service compromised hygiene and portion control. A range of reasonably priced grocery items were available through the on-site tuck shop, and new arrivals had access to the shop on their first full day in custody. Prisoners could also shop from online catalogues.

Consultation with prisoners was regular and effective. The 'requests' process was managed well. There was improved monitoring of complaints and all complainants were seen face-to-face, which enabled quick resolution of minor issues. In our survey, prisoners were more positive than the comparator about access to their legal representative, and they could exercise their legal rights freely.

The management of equality work had improved significantly. An equality strategy broadly met the needs of the population, although the corporate action plan had not been updated since 2015. There was excellent analysis of equality monitoring data, and no significant disparities in outcomes for prisoners from protected groups. This was confirmed in our focus groups and survey. Prisoners with protected characteristics were identified on arrival, although this part of the committal process was not carried out in a confidential setting. There was good local support for foreign national prisoners, and the introduction of computer tablets to aid translation was an excellent initiative. However, there were weaknesses in communication regarding immigration status. Work to support prisoners with different sexual orientations was underdeveloped.

Faith provision was good. The chaplaincy was also active in providing valuable pastoral support for all prisoners.

The working culture and clinical environment in health care had improved, which contributed to better conditions for the delivery of patient-centred care. Identification of patients eligible for health screening programmes was not systematic, and we were not assured that all eligible patients had been screened. Patients had good access to primary care and mental health services that were, in most cases, equivalent to those in the community. At the time of the inspection there were no formal arrangements for access to mental health services out of hours, although there were credible plans to expand the services to seven days a week.

Psychosocial and clinical substance treatment teams provided reasonably good services. Although there was no intense group therapy, improvements to the provision were under way. The disposal of certain medicines prescribed but no longer required was not audited, increasing the risk of misuse. Pre-release arrangements for patients with continuing health, mental health and substance use treatment needs were very good.

PURPOSEFUL ACTIVITY

Time out of cell was better than in many similar establishments. The library and Physical Education (PE) provision were very good. The leadership and management of education, skills and work was collaborative and there was a positive learning culture. The range of activities had improved although vocational workshops were underused. The provision from Belfast Metropolitan College (Belfast Met) was good, as was the quality of learning, teaching and training. Attendance and behaviour were excellent. The number of registrations and accreditations had increased but there was a lack of access and progress in essential skills. Too few work activities provided accreditation and progression into employment on release. **Outcomes for prisoners were reasonably good against this healthy prison test.**

At the last inspection in May 2016 we found that outcomes for prisoners in Hydebank Wood Secure College were reasonably good against this healthy prison test. We made four recommendations in the area of purposeful activity. At this inspection we found that two of the recommendations had been achieved and two had been partially achieved.

The core day offered generally good time out of cell for prisoners and we found very few locked up during our inspection. This was better than we often see, and staff clearly prioritised attendance at activities. However, recent unpredictable regime curtailment had resulted in some prisoners being locked up for short periods. The library provision was very good. The facilities for PE were also very good, and there had been investment in outdoor and indoor facilities.

The leadership and management of education, skills and work was collaborative and good. Leaders had successfully established and embedded a culture of mutually respectful and supportive relationships with prisoners. There had been significant investment in the education environment but, by contrast, the vocational workshops needed extensive refurbishment and were underused. Almost all prisoners participated fully in a broader range of education, skills and work activities than previously. The provision was at times ad hoc and affected by staff absence. The self-evaluation and quality improvement planning processes required improvement.

Prisoners had good opportunities to develop and apply employability skills. However, the waiting lists in important areas, such as essential skills, needed to be addressed with more urgency. Lack of access to and progress in essential skills constrained learner access to Level Two work and attainment. The College provision was good overall, and some of it was very good. The curriculum for workshop-based vocational training was not wide enough to meet the needs of the population. The arrangements for the continuing professional development of NIPS instructors required improvement, particularly in learning, teaching and assessment.

The quality of the learning, teaching and training was good, or better, in almost all the sessions observed. Prisoners had very good opportunities to participate in work, training or education, with almost all engaging in activities throughout the week. They now had more opportunities to work in the grounds, such as with animal husbandry and gardening. However, too few of the work activities provided the opportunity to achieve accreditation and possible progression into employment on release. Access to relevant curriculum provision had improved notably for the small number of vulnerable prisoners and was now good. The provision for English for Speakers of Other Languages (ESOL) was good.

Attendance at education and work activities was high during our inspection, at over 90%. There was very good learner engagement in almost all the sessions observed, and most prisoners demonstrated good practical skills. Provision for the essential skills of literacy, numeracy and Information and Communication Technology (ICT) required improvement. Almost all prisoners who engaged regularly in education and skills were developing better social and life skills.

The number of registrations and accreditations had increased over the last three years, although a high proportion were short-course qualifications. The curriculum did not accurately match employment potential on release, and too few learners progressed to further education and training on release.

Arrangements for care, welfare and support had a positive effect on teaching, training and learning, and the outcomes attained. The very good relationships between tutors and learners were characterised by high levels of trust, encouragement and self-confidence.

REHABILITATION AND RELEASE PLANNING

Children and families work was excellent. An impressive range of voluntary organisations and the work of Personal Development Plan (PDP) co-ordinators ensured that most prisoner needs were met. Co-ordinators were well trained and had good contact with prisoners on their caseload. Development plans were good quality and reviewed regularly. Public protection arrangements were sound. There was a broad range of personal development programmes and extensive one-to-one work. Pre-release work was managed effectively. **Outcomes for prisoners were good against this healthy prison test.**

At the last inspection in May 2016 we found that outcomes for prisoners in Hydebank Wood Secure College were reasonably good against this healthy prison test. We made seven recommendations in the area of resettlement.⁶ At this inspection we found that four of the recommendations had been achieved and three had not been achieved.

Work to help prisoners maintain family ties was excellent. They had good access to telephones on their units, and there was a wide range of visiting opportunities, including a separate room for family visits and the opportunity to have private visits. A family worker offered one-to-one parenting interventions. There had been significant improvements to the visits hall, and Skype was used where visits were not possible. A fortnightly family forum improved the visits experience.

The strategic management of reducing reoffending work was informal, and not informed by a specific needs analysis. This was somewhat mitigated by the good group of PDP co-ordinators, who used a person-centred approach to meet prisoners' needs. Most prisoners had a PDP, which included learning and skills targets. Plans were of good quality and were reviewed regularly. An impressive range of voluntary and community sector organisations continued to support resettlement work. Release on Temporary Licence (ROTL) was also used well to support resettlement. In our survey, 66% of prisoners said that their experience at the prison had made them less likely to reoffend in future, which was much higher than in similar establishments.

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

The number of PDP co-ordinators had increased and they were now less likely to be cross-deployed. Their manageable caseloads supported good levels of contact with prisoners. Co-ordinators received appropriate supervision and training, including awareness of domestic violence and sexual abuse. Local categorisation arrangements were proportionate and well managed. Very few prisoners were eligible for conditional early release.

Co-ordinators identified new arrivals who were subject to the Public Protection Arrangements Northern Ireland (PPANI) and contributed to the management of these cases. The few prisoners identified as at significant risk of serious harm were managed effectively, with multi-agency case conferences arranged as required. There were appropriate child contact processes and arrangements to monitor mail and telephone calls for prisoners with public protection risks.

There were very few accredited offending behaviour programmes, although waiting lists were small. Partner agencies delivered a broad range of personal development programmes, and there was extensive one-to-one work.

Co-ordinators ensured that suitable referrals of prisoners were made to resettlement agencies on release. All sentenced prisoners were offered the opportunity for sustainable accommodation and, in the previous six months no prisoner had been released without an address. Some prisoners had received beyond-the-gate support, although the prison did not collect data on this. Practical support on release included the provision of clothing, refreshments, signposting to support agencies, and the opportunity to charge mobile phones.

KEY CONCERNS AND RECOMMENDATIONS

Key concern: Despite our previous recommendations, governance of the use of force was not sufficiently robust: reports did not explain why force had been necessary and what de-escalation had taken place; managers did not review reports quickly enough; some paperwork was signed off without comment; body-worn camera and CCTV footage was not systematically reviewed; we saw no evidence of debriefs; and the meetings to consider data or trends were infrequent and insufficiently analytical. Unfurnished accommodation was used without appropriate authority, and the rationale for using anti-tear clothing was not always clearly recorded.

Recommendation: The scrutiny of incidents involving the use of force (including the use of unfurnished accommodation and anti-tear clothing) should ensure that it is only used as a last resort, and is legitimate, necessary and proportionate. (To the governor)

Key concern: Illicit drugs and diverted prescribed medicines were easily available. The positive drug test rate was high, and searching resulted in many finds relating to drug use. In our survey, significantly more prisoners than in similar prisons said that they had developed a problem with drugs or medication not prescribed to them while at the prison. Despite this, security intelligence was not used effectively to understand and manage the risks of drugs, the substance misuse strategy was weak and there was no drug supply reduction action plan.

Recommendation: An effective strategy should be implemented to reduce drug supply. (To the governor)

Key concern: Key education and prison staff did not reflect sufficiently on the impact of the overall learning and skills provision on the population. They did not use available data or first-hand evidence, and did not take into account the work of external providers and agencies. The quality improvement plan was not used to drive improvement.

Recommendation: The learning and skills self-evaluation and quality improvement planning process should have a stronger impact, including more incisive use of data and first-hand evidence, and better involvement of all the various providers and agencies to inform a more coherent strategic plan for the further development of the provision. (To the governor and Head of Prison Education (Belfast Met))



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