

Report on an unannounced full
follow-up inspection of
Maghaberry Prison

19 – 23 January 2009



Criminal Justice Inspection
Northern Ireland
a better justice system for all





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full follow-up inspection of

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

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July 2009



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Chief Inspectors' Foreword

This report presents the findings of an unannounced inspection into Maghaberry Prison undertaken in January 2009. Maghaberry, one of only two adult male prisons in Northern Ireland, is a complex prison holding all categories of prisoners including remand, short sentenced and life sentenced prisoners. These prisoners require varying levels of security, but Maghaberry is a maximum security institution and all its prisoners are held in maximum security conditions. Thus someone serving five days for fine default receives the same security regime as someone serving a 10-year sentence for serious assault. The complexity of Maghaberry is compounded by the decision to separate paramilitary prisoners within the main prison.

This report comes at a particularly challenging time for the Northern Ireland Prison Service (NIPS). A Prisoner Ombudsman report published in January 2009, into a death in custody at Maghaberry raised significant concerns around the management and delivery of services and support to vulnerable prisoners. At the same time, the Northern Ireland Prison Service is itself undergoing a major change programme designed to improve the Service. The governor and prison officer workforce is ageing and reflects an imbalanced equality profile. It has been static for over 15 years with no external recruitment during that time. Meanwhile new accommodation is being built to cater for steadily rising numbers of prisoners being committed to custody.

This inspection followed up the recommendations made in the last report, published in 2006. It followed the same format as prison inspections in England and Wales and performance was measured against the four criteria that comprise internationally recognised healthy prison standards: safety, respect, purposeful activity and resettlement. As part of this approach Maghaberry was awarded a rating against each criterion – ‘performing well’, ‘performing reasonably well’, ‘not performing sufficiently well’ or ‘performing poorly’.

As detailed in the healthy prison summary, we did not find that the prison was performing sufficiently well in any of the four criteria. In the areas of safety and purposeful activity, the prison was performing poorly and in respect and resettlement, not performing sufficiently well.

Overview of findings – current situation cannot continue

Safety was a particular concern. While first night procedures and induction had improved, too little attention was paid to anti-bullying and investigating violent incidents. There was still no local suicide and self harm policy to set out exactly what would be done at Maghaberry, little therapeutic support for some very vulnerable men and, poor monitoring



procedures for those at risk. The Standby Search Team (SST) still had too forceful a presence in the prison and its activities were not subject to independent monitoring, nor had the many complaints about its conduct been properly investigated. Clinical support for those addicted to alcohol and drugs was poor and led to unacceptable risk. The prison was performing poorly in this area.

We continued to have concerns about a number of the areas covered in our heading of respect. While most officers were friendly, there was little supportive and active engagement with prisoners. The prison was generally clean, but overcrowded. Shared cells were too cramped and the original square houses were very difficult to supervise. Few prisoners considered the quality of food was satisfactory and mealtimes were too early. Although some work on equality and diversity was beginning and some reasonable support had been provided for foreign national prisoners, little had been done to monitor by religion and ethnicity to promote equality. The complaints system did not provide the safeguards of confidentiality we would expect to see, and some serious allegations against staff had not been adequately investigated. Delays in the transfer of health services to the National Health Service had hindered their further development and, in particular, there were insufficient mental health services. The prison was not performing sufficiently well against the healthy prison test for respect.

The lack of activity places to keep men purposefully engaged led to many men spending most of their days locked up without the opportunity to acquire any useful skills. The provision in education, training and work was wholly inadequate. The quality of the restricted education and training opportunities delivered was good but, inexplicably these scarce resources were not fully used. Use of the library had declined despite an increase in opening hours. Physical education facilities remained good and well used. In relation to purposeful activity, Maghaberry was performing poorly against the healthy prison test.

There was no clear local identification of resettlement needs or account of how these needs would be met but resettlement services had benefited from some increased resources. Most eligible prisoners had sentence plans. Reintegration services were better and some were now directed towards those staying a short time, but they were not actively promoted in residential areas and prisoners had little awareness of them. Provision of offending behaviour programmes was inadequate and delivery was low. There was little to help those with addiction problems deal with them while at Maghaberry. A clearer strategy for managing and progressing life sentence prisoners was still needed. In relation to resettlement, the prison was not performing sufficiently well.

Our overall conclusion is that the current position in Maghaberry cannot continue and that there remains significant room for improvement in its operation as a public service. Of the 155 recommendations made in our announced inspection in 2006, only 44 (28%) had been



achieved and 28 (18%) partially achieved three years later. A total of 83 recommendations (54%) had not been achieved. In many respects, performance in the prison had slipped since our last inspection. As a consequence of this inspection, we have made 124 new recommendations and 76 repeat recommendations.

In making 200 recommendations for change it is not our intention to undermine staff morale within the prison or the many good practices which exist there. The reality, however, is that Maghaberry Prison is significantly underperforming in relation to what should be expected of an effective UK prison in the 21st Century. It is one of only three of the 169 establishments inspected by HM Inspectorate of Prisons since April 2005 which is performing poorly in the crucial area of safety. In relation to the other tests, it is in the bottom third in terms of performance. Yet with an average annual cost per prisoner place of £81,500 it is one of the most expensive prisons in the United Kingdom.

Significant changes are required with a clear management commitment to deliver improvements in services.

This situation in our view cannot be permitted to continue. There are three key areas that we believe require immediate attention to improve performance. These relate to:

- governance and accountability arrangements;
- the relationship between Prison HQ and the prison; and
- changes to established working practices.

Strengthening Governance and Accountability arrangements

We have made 11 core recommendations which we believe require urgent action. Our additional recommendations are, in the main, operational matters that we expect to be addressed as part of routine prison management.

In order to ensure performance improvement we require that an Action Plan is produced – as is the case in other UK prisons after an inspection – detailing a response to each of our recommendations, with timescales, prioritisation and clear allocation of accountability for delivery.

Immediate responsibility for the Action Plan should rest with the Governor of Maghaberry Prison, with overall responsibility held by the Director General of the Northern Ireland Prison Service. Delivery of this plan should form a major part of the Governor's performance objectives, and NIPS HQ should fulfil a performance management function to monitor its delivery.

We also recommend that a Non-Executive Director of the Prison Service Management



Board should have oversight responsibility for the delivery of the Action Plan, and that performance against the Action Plan should be visible at Board level, with at least quarterly updates reported in the Board's minutes.

Strengthening the linkages between Prison HQ and Maghaberry

In the course of the inspection we have identified a number of issues that reflected disconnection between Maghaberry Prison and NIPS HQ, particularly in relation to the delivery of policies and procedures. The existence of a policy in itself is insufficient to deliver change. We encountered frequent examples of confusion around the development and introduction of prison policy. There needs to be clear articulation of how each of the wider service policies should be implemented within the prison, and effective monitoring of whether this is in fact occurring.

Many of the underlying issues identified in our 2006 report were still visible during this inspection. Some of Maghaberry's problems resulted from deficiencies within the overall prison estate and need strategic planning by HQ. The use of Magilligan Prison, for example, for appropriate life sentence prisoners could reduce some of Maghaberry's pressures while simultaneously offering a better regime for the prisoners.

In overall terms we found a major disconnect between the entirely commendable strategic objectives of the NIPS and the outcomes for prisoners in Maghaberry. While no-one would disagree with the stated goals of the Prison Service, this does not always translate into activity within the prison. It is essential that the implications of central policies and procedures are clearly articulated and planned for at local level. These need to form the basis of operational delivery within Maghaberry Prison, and for regular monitoring checks by the NIPS. We will return to these issues in our overall inspection agenda with the Northern Ireland Prison Service.

Challenge working practices that undermine prison performance

We encountered some working practices that actively undermined management's attempts to ensure smooth and effective operation of the prison. Examples include staffing levels and scheduling, lack of free and unannounced access to the houses for governors, and weak performance management. We saw several instances where poor working practices and industrial relations had a major (negative) impact on the regime for prisoners.

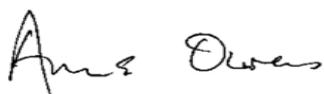
Maghaberry's dominant ethos was still based on static security provided by large numbers of staff and highly-restricted movement of prisoners. This dominated the culture of the prison and ultimately, undermined the relationship between prison officers and prisoners. It disabled meaningful attempts to develop an approach focused around dynamic security



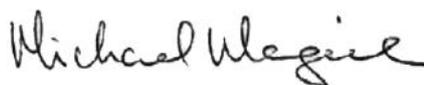
where staff-prisoner interaction could provide a better level of security. It further undermined the creation of a normalised prison environment that challenged prisoners and focused on those areas likely to reduce re-offending. There is a clear and continuing need for training for prison staff to equip them to assist in rehabilitation, engage properly with prisoners and implement effective safety and support systems.

Maghaberry is a prison with serious operational deficiencies that will require a concerted effort to change. There needs to be a clear development plan for improvement and a demonstrable management commitment to challenge the status quo and make change happen. Without this commitment we are not optimistic that the substantial improvements that are needed will occur. However, if the commitment does exist, then this report can provide a firm basis upon which future successful operations can be built.

The inspection was carried out by a joint team from Her Majesty's Inspectorate of Prisons and Criminal Justice Inspection Northern Ireland. We also received considerable help from the Education and Training Inspectorate and the Regulation and Quality Improvement Authority. We offer our thanks to all those involved in the inspection team and the NIPS staff who supported them.



Dame Anne Owers
HM Chief Inspector of Prisons
for England and Wales



Dr Michael Maguire
Chief Inspector of Criminal Justice
in Northern Ireland

July 2009



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Fact page

Brief history and function

The Maghaberry site originally included two prisons for men and women. The women's prison, Mourne House, was adjacent to the main prison. In 2004, women were transferred to Ash House at Hydebank Wood Young Offenders Centre. The Mourne House complex now accommodates medium-risk life-sentenced prisoners nearing their tariff date and a small protected witness unit. There is also a pre-release centre, known as the prisoner assessment unit, in Belfast. The men's prison opened in 1987 and until 1996 had a relatively static long-term and life-sentenced population. Following the closure of Crumlin Road prison that year, non-paramilitary remand prisoners and short-term sentenced prisoners began to be held at Maghaberry. Since 2003, it has held separated paramilitary prisoners from loyalist and republican backgrounds.

Maghaberry is the only committal prison for Northern Ireland. It holds remand prisoners and those with determinate and life sentences. It also holds civil prisoners and some immigration detainees. In the main prison, all prisoners are held in high security conditions. Due to population pressures, many of the cells designed for one prisoner have to be shared.

Number held

794

Cost per place per annum

£81,500

Certified normal accommodation

752

Operational capacity

Subject to operational demands

Last full inspection

October 2005

Budget

£58 million for 2008-09

Staffing

There were 879 prison grade staff in post, including 16 governor grades and an additional 129 civilian grades.



Description of residential units

The majority of prisoners were accommodated in six residential houses on the main site. Four of these, Erne, Foyle, Lagan and Bann houses, were the original accommodation. Each of these houses had six landings with a total of 108 cells.

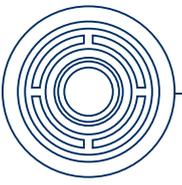
- Erne House accommodated most of the life-sentenced prisoners. Population pressures meant there were also some short-term determinate-sentenced prisoners in Erne.
- Foyle and Lagan Houses accommodated mostly remand prisoners. Landing 5 on Lagan House was the REACH unit, which managed prisoners who found it difficult to mix in the general population because of their mental health, age or personality.
- Bann House held determinate-sentenced prisoners.
- Bush and Roe were newer houses built in 1999. Each had four landings with a total of 96 cells. Bush 1 and 2 landings held separated Loyalists prisoners. Bush 3 and 4 held sentenced and remand prisoners who needed to be kept apart either for their own protection due to the nature of their offence, or to protect others. Roe 1 and 2 landings were used for new committals. Landings 3 and 4 accommodated separated Republican prisoners.
- The vulnerable prisoner unit, Glen House, had 15 cells for prisoners who would be at risk from other prisoners if they were placed in the general population.
- The special supervision unit (SSU), refurbished in May 2000, had 27 cells including two safer cells.
- The Mourne House complex included Wilson and Martin Houses and had a total of 59 cells. Wilson House held 21 medium-risk life-sentenced prisoners and Martin House held 11 lifers in preparation for progression to the prisoner assessment unit in Belfast. Martin House also had a small separate protected witness unit.
- Within the Mourne House complex, a ready to use unit was under construction with a capacity of 120 cells.
- The prisoner assessment unit in Belfast was for life-sentenced prisoners nearing the end of their sentence and other low-risk prisoners specially selected. This had 22 places.



Section



Healthy prison summary and progress on main recommendations





Introduction

HP1 All inspection reports include a summary of an establishment's performance against the model of a healthy prison. The four criteria of a healthy prison 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.

HP2 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the Northern Ireland Prison Service.

...performing well against this healthy prison test.

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

...performing reasonably well against this healthy prison test.

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

...not performing sufficiently well against this healthy prison test.

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

...performing poorly against this healthy prison test.

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



HP3 The Inspectorate conducts unannounced follow-up inspections to assess progress against recommendations made in the previous full inspection. Follow-up inspections are proportionate to risk. In full follow-up inspections sufficient Inspector time is allocated to enable an assessment of progress and also to allow in-depth analysis of areas of serious concern identified in the previous inspection, particularly on safety and respect, or matters of concern subsequently drawn to the attention of the Chief Inspector. Inspectors use the findings of prisoner surveys (where available), prisoner focus groups, research analysis of prison data and observation. This enables a reassessment of previous healthy prison assessments held by the Inspectorate on all establishments, and published in reports from 2004 onwards.

Safety

HP4 Reception was clean and generally efficient, but we received many complaints about disrespectful searching. First night procedures and induction had improved. Too little attention was paid to anti-bullying and investigating violent incidents. A focus on safer custody had been re-established only after a recent death in the prison, but there was still no local suicide and self-harm strategy, little therapeutic support and poor monitoring procedures for those at risk. Controls on movements remained too restrictive. Some improvements had been made to the special supervision unit, which was no longer run by the search and standby team (SST). The SST still had too dominant a presence in the prison and allegations about its conduct had not been properly investigated. Clinical management of those addicted to alcohol and drugs was poor and led to unacceptable risk. The prison was performing poorly against this healthy prison test.

HP5 A helpful information leaflet about Maghaberry had been produced, but was not given to prisoners at court. Most journeys to the prison were relatively short and there were few late arrivals. Survey results about escorts were poor and being handcuffed on vans made prisoners feel particularly unsafe. Effective use was made of video links for court appearances and for inter-prison visits.

HP6 Significantly fewer than the comparator in our survey said they had been treated well in reception. Individual processes were brisk and efficient and the area was clean, but newly arrived prisoners often remained at least two hours in reception. Many prisoners complained about disrespectful strip searching. A useful short introductory DVD had been produced, but was not routinely shown. Prisoners could shower in reception and were given a free telephone call on the first night wing.

HP7 A helpful first night booklet, available in four languages, was placed in well prepared first night cells. First night staff on Roe House interviewed new arrivals in privacy and engaged well with them. Significantly more prisoners than previously in our survey said they had felt safe on their first night. Despite their specialist role, staff were subject to the same rotation policy as other officers on Roe House, designed to prevent conditioning by paramilitary prisoners.

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- HP8 Induction included a series of practical group presentations as well as input by relevant specialists. Fellow prisoners provided contributions on housing and the Listener scheme, which were well received.
- HP9 Although our survey indicated that prisoners felt safer than when we last inspected, more than the comparator still said they had felt unsafe at some time and had been assaulted by other prisoners. Some areas of the prison were not directly supervised by officers. Significantly more than the comparator said they had been victimised by staff. Injuries to prisoners and allegations of assault were not properly investigated and there was no analysis of potential indicators of bullying. The formal anti-bullying policy had not been reviewed since 2001 and more recent guidance on managing bullies was not much used. There had been little staff training in anti-bullying procedures. Only 13 potential bullies had been identified for monitoring in 2008, but the monitoring booklets were not well completed. The anti-bullying board had not met at all between May and September 2008 and was poorly attended.
- HP10 There was no clear ownership of the service-wide suicide prevention policy in the prison and still no local policy for Maghberry. This important subject had been neglected for some time and there had been no self-harm and suicide prevention meeting between February and September 2008, when it began to meet regularly again after a much publicised death. In addition, weekly safer custody meetings were now well attended and were a useful forum to discuss individual cases. It was positive that a Listener scheme had now been established. However, there was little analysis of incidents of self-harm and monitoring documents were poor, with little recorded interaction. Few reviews were multidisciplinary and most care plans had inadequate targets. Although the rate of self-inflicted deaths was commendably low, there was a lack of a therapeutic response to support prisoners at risk of self-harm. Strip clothing was used routinely for prisoners placed in observation rooms, where they were held too long in cold and unsuitable conditions. The REACH landing had not developed as originally planned and there was insufficient mental health or psychology input, a poor regime and a dispirited staff. Instructions for monitoring prisoners at risk were confusing and it was unacceptable that vulnerable prisoners were woken frequently through the night. There was little evidence of local ownership or learning from Action Plans from previous deaths.
- HP11 Physical security and use of security intelligence were necessarily given a very high priority, but dynamic security was weak. Although there were good systems to process information and utilise intelligence, there were relatively few security information reports. Some aspects of the prison regime were hampered because of restrictive procedures for moving prisoners, particularly separated prisoners, and to facilitate SST searches. As at the last inspection, the SST had a disproportionate presence and influence in the prison and there was a high number of allegations of assault and threatening behaviour involving the SST.



- HP12 Communal areas of the special supervision unit (SSU) were reasonably clean, but drab and cells had little natural light. Staffing arrangements had improved since the unit was no longer run by the SST, but formal selection criteria had not been published. Generally, officers treated the small number of difficult long-stay prisoners decently. Some were able to continue with education and accredited offending behaviour programmes while they were in the SSU. Adjudications were conducted fairly and fully investigated, but some charges were for relatively minor matters that should not have required formal disciplinary procedures. Punishments were consistent, but cellular confinement was used much too frequently with the routine loss of all privileges including access to telephones. Conditions for those serving cellular confinement were poor.
- HP13 Use of force documents were mostly completed to a good standard. Proper authority was sought for planned interventions, some of which were now filmed. Staff statements indicated that control and restraint techniques were used properly.
- HP14 The drug testing scheme remained unchanged and there was still no random testing. In our survey, significantly more than the comparator said it was easy to get hold of drugs in the prison. Clinical management was dangerously poor and new arrivals with addictions to drugs or alcohol got little support.

Respect

- HP15 Most landing officers were friendly, but there was little supportive and active engagement with prisoners. The prison was generally clean, but overcrowded and shared cells were too cramped. The original square houses remained unsuitable. Food was unsatisfactory and mealtimes too early. Prisoners had good access to the shop. The progressive regimes and earned privileges scheme did not act as an appropriate incentive. Although some work on equality and diversity was beginning and some reasonable support had been provided for foreign national prisoners, there was still a need for regular monitoring by religion and ethnicity to promote equality. The complaints system did not provide appropriate confidentiality and some serious complaints were not adequately investigated. Health services had not yet improved on transfer to the National Health Service and in particular, there were insufficient mental health services. The prison was not performing sufficiently well against this healthy prison test.
- HP16 In our survey, 73% of prisoners, significantly more than at the time of the last inspection and than the comparator, said most staff treated them with respect, although Roman Catholic prisoners were less positive. Significantly fewer than the comparator said they had a member of staff they could turn to for help if they had a problem and almost half said they had been victimised by a member of staff; in comments, many referred to poor treatment by the search team. Relationships were superficially relaxed and, although we saw some good engagement, most officers kept their distance from prisoners. Without free and unannounced access to the houses, it was difficult for us and for managers to judge what normal



everyday interactions were like. There was still no personal officer scheme, but during 2008 all officers had attended a two-day development training course to help improve engagement. Comments in wing files were regular, but observational, and did not reflect individual knowledge of prisoners and their circumstances.

- HP17 The living areas were generally clean and well maintained, although the older square houses remained unsuitable. Glen House, a special unit for some prisoners needing protection, was claustrophobic and unsatisfactory for long stays. Many single cells across the prison were doubled, cramped and unsanitary to eat in with unscreened or inadequately screened toilets. There was good access to showers, clothes and bedding and no longer any problems with telephones. Laundry facilities were adequate and there was a good store of basic clothing, but no outdoor clothing for use in the prison. All exercise yards on the main site were in poor condition. There were still no consultation meetings with prisoners.
- HP18 The progressive regimes and earned privileges scheme was not an effective way of motivating prisoners and was related principally to drug testing and rule breaches. Some prisoners stayed on basic for too long without sufficient support or improvement targets and reviews were too infrequent.
- HP19 Many prisoners described the food as bad and it was often served lukewarm. Meal times were much too early and there was no consultation with prisoners about menus. Prisoners responsible for serving food were often inappropriately dressed. A new kitchen, one of our main recommendations last time, was about to open.
- HP20 An adequate range of products was stocked in the prison shop, to which prisoners had good access. Restrictions on sending money out and on catalogue shopping for clothes placed too much burden on families to provide clothes.
- HP21 Those in the SSU and on the REACH landing for vulnerable prisoners could not attend religious services. Services for separated prisoners were held in unsuitable rooms with interruptions. Pastoral work still did not take place in the chaplaincy, but in cells or kitchen areas on the houses. Chaplains were now invited to a range of prison meetings, but did not always regularly attend them.
- HP22 Although prisoners' religion and nationality were recorded on arrival, there was no effective, regular monitoring by religion or ethnicity of prisoners' experiences or active promotion of equality. Much of the classification of ethnicity or community background was decided by staff rather than by self-identification. The perceptions of Roman Catholic prisoners compared to Protestants about their treatment were significantly more negative in most areas of our survey. There was no diversity policy or monitoring to cover the needs of other minority groups such as gay men, older prisoners or prisoners with disabilities. Some work on equality and diversity had just begun and reasonable efforts had begun to be made to meet the individual needs of foreign national prisoners.



- HP23 The complaints system provided no confidentiality. Around a third of complaints were answered out of time, replies varied in standard and there was no effective quality monitoring. We found a number of complaints against staff, some of which made very serious allegations of assault that had not been answered at the appropriate level and most of which needed further investigation. As previously, a high number in our survey said they had been encouraged to withdraw complaints.
- HP24 Health services were commissioned by the Eastern Health and Social Care Board (EH&SCB), but Ministerial agreements to achieve this had taken longer than envisaged and inevitably this had led to slower progress than planned. Governance arrangements were basic, there had been no health needs assessments and it was not clear that there was an appropriate skills mix. Some nurses still inappropriately carried staves. There was little effective use of data to promote improvement. A shortage of staff impacted on patient care, but in our survey satisfaction with the overall quality of healthcare had improved. In primary care, committal screening was reasonable, but the information obtained was not always acted on. Nurse triage operated on the main houses, but access to GPs was limited. There was no effective system to monitor life-long conditions. Dental services were good. Arrangements for men in Wilson and Martin Houses and in the prisoner assessment unit to access primary services were poor. Pharmacy arrangements still required time consuming and risky secondary dispensing. A high proportion of prisoners had medications in possession, but not all had somewhere to store them safely. The physical environment of the in-patient facility was poor and while some therapeutic interventions were delivered, there was a lack of individualised care planning. Mental health services needed better coordination and staff shortages meant there were unacceptable waiting lists and no permanent support for the REACH landing. There were difficulties transferring men to secure mental health beds in the community.

Purposeful activity

- HP25 Time out of cell had not improved for most prisoners, particularly those without allocated activity, and many spent most of the day locked up. Activity places in education, training and work were wholly inadequate for the population. Although resources were insufficient, there were some good education and training opportunities, but these were not fully used and there was a lack of strategic oversight. Use of the library had declined despite an increase in opening hours. Physical education facilities remained good and well used and gym activities were actively promoted. The prison was performing poorly against this healthy prison test.
- HP26 Time out of cell varied considerably between units and there was no standardised core day. Our roll check indicated that during the main working day, 42% of prisoners were locked behind their doors compared with 36% at the last inspection. Despite high staffing levels, there were frequent delays in morning



unlock. Unemployed prisoners could spend less than four hours out of their cells and a maximum of six hours.

- HP27 There had been insufficient analysis of the educational needs of the population and the development of a strategy to meet those needs. The range of education provision had increased a little, including more English for speakers of other languages, but there was still much unmet need and very little for prisoners on remand. A high proportion, about 327 prisoners, were involved in education and were positive about it, but could attend for only a maximum of three sessions each week. Most attended for only two and not all classes were full, with attendance averaging 70%. Afternoon classes often did not begin on time and ended early resulting in very short sessions. The standards of teaching and learning were generally good, with good relationships and very supportive staff. Quality assurance arrangements had just been introduced and more effective use of data was needed to promote improvement.
- HP28 There were 80 vocational training places in workshops for 20% of the sentenced population. In addition, there were another 172 work opportunities primarily for sentenced prisoners, including about 100 orderly roles on wings. This was not enough, yet not all activity places were used or allocated. When we checked, fewer than half of the 80 workshop places were used and only 123 of the other 172 work places. Management of movement to workshops was better so prisoners arrived on time and remained all day in the workshop area, but they left earlier than scheduled. For those involved, the standard of training and learning was generally good and allowed men to achieve accredited qualifications matched to future work aspirations, but at too low a level. There were still no opportunities for work for most of the remand population, who represented half of the men in the prison.
- HP29 In our survey, many fewer than the comparator said they went to the library once a week. Although opening hours had been extended, usage over the previous three years had declined and the library was often closed on Saturdays due to staff redeployment. There was a good range of stock, including for those needing help with reading and foreign nationals. Textbooks explaining immigration law in various languages were available, as were up-to-date legal materials.
- HP30 Prisoners were very positive about the gym and gym staff. There were good physical education (PE) facilities with high quality and well-maintained equipment, but the outside grass pitch was not playable during the winter. There was good access to PE and PE staff actively ensured that all prisoners had an opportunity to use the gym and that spaces were filled. There was a reasonable range of accredited courses, but little at a higher level.



Resettlement

- HP31** There was no local resettlement strategy, but resettlement services had improved with increased resources. Most eligible prisoners had sentence plans. Reintegration services were better and some were now directed towards those staying a short time. However, prisoners had little awareness of resettlement services. Provision of offending behaviour programmes was inadequate and delivery was low. A clearer strategy for lifers was still needed; Wilson and Martin Houses provided some progression opportunities, but criteria needed to be objectively based on risk. Work to help men maintain their family ties continued to be a strength. There was no coherent strategy to ensure that those with addiction problems were able to deal with them while in custody. The prison was not performing sufficiently well against this healthy prison test.
- HP32** There was no local Maghaberry resettlement strategy setting out how the needs of specific groups would be met. Additional resources to implement the Criminal Justice Order had led to significant improvements in services, including a dedicated team of prison staff and voluntary and community sector workers with clear working processes and roles. There were better relationships and joint work with other statutory bodies and services for short-term prisoners had improved. The different agencies worked together well as a team. However, there was insufficient senior oversight of resettlement matters in the prison. Six months of senior management team minutes showed no discussion of resettlement strategy. New public protection arrangements had recently been introduced to tighten the assessment and management of risk processes, but it was too early to judge how effectively they would be delivered.
- HP33** Including life-sentenced prisoners, 277 out of 403 eligible prisoners had resettlement or lifer plans, with over 100 yet to be completed. Prisoners serving less than three months had induction and pre-release interventions, but no formal resettlement file or custody plan was opened. Many prisoners displayed little knowledge of the sentence planning process or how it helped with their resettlement. Resettlement files were better organised and although a routine quality assurance process had been introduced, little feedback was given. Partner agencies reported that the resettlement board process was good, but were less positive about the quality of outcomes.
- HP34** There were too few accredited offending behaviour programmes and no targets for delivery. There was a waiting list of 130 for programmes, of whom 68 were lifers. There had been very few completions in 2008, with only 13 enhanced thinking skills completions and 100 men waiting to be assessed. This was expected to improve with the recruitment of additional psychology staff, some of whom were in training at the time of the inspection. Other non-accredited interventions were run such as the recently introduced two-day GOAL motivational programme, which was popular with prisoners and had had 40 completions since September 2008.

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- HP35 There was no clear strategy for lifers and potential lifers and much relied on self motivation in the early years of sentence. Meaningful activity was too limited for this group. The development of Martin and Wilson Houses in the old Mourne House complex was a significant improvement in providing progression opportunities. Selection criteria were published and known to prisoners, but many lifers in the main prison believed they were applied unfairly. Criteria inappropriately included a competition element rather than being based on an objective risk assessment. Regression from Wilson, Martin and the prisoner assessment unit (PAU) appeared to be based too much on behaviour rather than risk. Governors did not consult regularly with groups of lifers, and regular lifer days to deal with issues to do with their sentence were not held. Lifers reported a lack of staff support to motivate them through their sentence.
- HP36 Resettlement services had expanded, but facilities were largely focused on the sentenced population, with little for remand prisoners. There was a range of pre-release provision and some good motivational work, job search, housing and benefit advice, although financial advice was more limited. Despite the relative expansion of provision, prisoner awareness in our survey of the services available was significantly less than in comparator prisons and than at the time of the last inspection.
- HP37 The main visits room was cramped and noisy with little privacy between groups of visitors. Overall services for families and friends continued to be very good with supportive staff in the visitors' centre, three family support officers, themed visits weeks throughout the year and weekly child visits. Barnardo's parenting and family courses were also run.
- HP38 There was no up-to-date substance misuse strategy and no strategy meetings had been held in the previous eight months. There was a long waiting list for Dunlewey Substance Advice. Narcotics Anonymous had recently begun to run a group in the prison, but there was no supportive drug-free unit and overall services for those with addictions, including alcohol, were poor.

Main recommendations

- HP39 An effective and responsive violence reduction and anti-bullying strategy should be developed and implemented taking into account consultation and surveys with prisoners and staff to help ensure that all prisoners feel safe.**
- HP40 A local suicide prevention policy should be delivered that describes how the Northern Ireland Prison Service policy is implemented at Maghaberry, and sets out local procedures and responsibilities for introducing a supportive and therapeutic response to those at risk of suicide and self-harm.**



- HP41** Managers should be able to enter residential units freely and without warning to allow them to supervise more effectively the staff and prisoners for whom they are responsible.
- HP42** The search and standby team should be disbanded and its resources used to allow prison searching and incident management to be carried out by generic residential and security staff.
- HP43** A personal officer/wing based case manager scheme for staff should be developed and implemented to encourage residential staff to engage more positively with prisoners and take an active part in the development of resettlement plans, to improve dynamic security and help ensure that resettlement becomes an integral part of the prison's purpose.
- HP44** The complaints system should be revised to allow prisoners to make complaints without disclosing the matter to residential staff, and all allegations about staff should be fully and impartially investigated at an appropriate senior level and to incorporate quality monitoring.
- HP45** Sufficient activity places should be provided in work, education and training to provide an active day for all prisoners, including those on separated wings.
- HP46** An effective, comprehensive and regular monitoring scheme should be introduced, with advice from the Equality Commission for Northern Ireland, covering prisoners' treatment, access to regime activities and services by religion or community background, ethnic origin, disability, age and nationality in order to help meet the duty to promote equality under section 75 of the Northern Ireland Act 1998.
- HP47** The commissioners of health services should undertake a physical and mental health needs assessment to ensure that the services commissioned from the providers are relevant to meet the needs of the population.
- HP48** A comprehensive strategy for managing life-sentenced prisoners in Northern Ireland should be developed and implemented that ensures that risk factors are identified at an early stage, that prisoners are able to address these before their tariff expiry, and that they have the opportunity to engage in purposeful activity during their sentence and progress to less secure conditions as their risk diminishes.
- HP49** The resettlement needs of all categories of prisoners at Maghaberry should be reflected in the design and implementation of a local resettlement strategy based on a full needs analysis that sets out how those needs will be met.



Progress on main recommendations since the previous report

(The paragraph numbers at the end of each main recommendation refer to its location in the previous inspection report)

Main recommendations

To the Governor

MR1 A formal first-night strategy and a comprehensive induction programme should be introduced, involving prisoners as peer supporters and trained officers to ensure that newly arrived prisoners receive all the information and support they need. (HP40)

Partially achieved. Many of the constituent parts of a first night strategy had been introduced; first night cells were well prepared and significantly more prisoners than previously said they felt safe on their first night. However, the strategy was not made explicit in a published document, staff had not been trained in first night procedures and some identified this as a particular concern. Prisoners now had some input to the induction programme, but there was still no peer support. (See section on arrival in custody).

MR2 A new anti-bullying policy should be introduced with a clear responsibility for residential staff to monitor suspected bullies and challenge unacceptable behaviour. The policy should incorporate learning from surveys of prisoners and staff, and include interventions for bullies and support for victims. (HP41)

Not achieved. The policy was unchanged. A general survey of prison life in 2006 had included some questions about bullying and feelings of safety, but there had been no analysis of the results or evidence of learning from this. Bullying information reports could lead to interventions for bullies and victims, but were rarely used by staff.

See main recommendation HP41.

MR3 A local suicide prevention policy should be introduced that describes how the Northern Ireland Prison Service policy is implemented at Maghaberry, and sets out local procedures and responsibilities for introducing a more supportive and therapeutic response to those at risk of suicide and self-harm. (HP42)

Not achieved. There was no local policy describing how the service-wide suicide prevention policy applied to the particular context of Maghaberry.

See main recommendation HP42.



MR4 A personal officer scheme should be developed to encourage residential staff to engage more positively with prisoners and take an active part in the development of resettlement plans, to improve dynamic security, and help ensure that resettlement becomes an integral part of the prison's purpose. (HP43)

Not achieved. All officers had attended 'officer development' training in 2008 (see section on staff-prisoner relationships), but there was still no personal officer scheme. Prisoners had no formal individual officer support for such matters as parole reports, resettlement planning, public protection matters and the progressive regimes and earned privileges scheme. Officers continued to see their role as observing and supervising rather than actively engaging with and supporting prisoners.

See main recommendation HP43.

MR5 The complaints system should be revised to ensure that staff dealing with complaints are trained in informal resolution where this is required; that prisoners are able to take complaints about members of staff to an appropriate senior level in confidence; that impartial investigations take place; and that replies to complaints are monitored for quality. (HP44)

Not achieved. Complaints had progressed from a paper-based to a computer-based system, but there was little confidence in it. Many complaints were dealt with at the first stage by staff and very few were referred upwards. Complaints about staff were not dealt with by senior staff and most were dismissed. There was no evidence of impartial investigations or that complaints were monitored.

See main recommendation HP44.

MR6 The kitchen should be fully refurbished or replaced. (HP45)

Achieved. A new kitchen had been built and was due to open shortly.

MR7 Sufficient activity places should be provided in work, education and training to provide an active day for all prisoners, including those on separated wings. (HP46)

Not achieved. The number of places and the range of provision were wholly insufficient to keep prisoners occupied and education opportunities were very limited. There had been no improvement in the proportion of prisoners with meaningful work. Most prisoners were not allocated to any work activity and there was still no work for most of the remand population, which represented half of all prisoners. There remained insufficient work opportunities for prisoners on the separated wings.

See main recommendation HP46.

MR8 Management of movements should improve so that prisoners reach their work and education places on time and remain for the published duration. (HP47)

Partially achieved. Punctuality at morning education classes had improved, but prisoners often arrived late for afternoon classes and left early, resulting in very short sessions. Punctuality at vocational training and work had improved, but attendance remained poor, with not all places used or allocated. (See section on activities).



MR9 **Comprehensive analysis of prisoners' experiences and access to regime activities and services by religion and ethnicity should be established to monitor and help promote and ensure equality of outcome. (HP48)**

Not achieved. There was still no effective, regular or comprehensive monitoring of prisoners' experience by religion and ethnicity. The prison had begun to collect some statistics, but these were unsatisfactory and none of the statistics collected by religion or ethnicity contained any analysis or comparison with other groups of prisoners to identify any under or over-representation. There was no evidence of promotion of equality of opportunity. (See section on equality, race relations and foreign nationals).

See main recommendation HP48.

MR10 **A comprehensive strategy for managing life-sentenced prisoners in Northern Ireland should be developed which ensures that risk factors are identified at an early stage, that prisoners are able to address these before their tariff expiry, and that they have the opportunity to engage in purposeful activity during their sentence, and progress to less secure conditions as their risk diminishes. (HP49)**

Not achieved. A review of lifers had taken place in 2006, but had not resulted in a lifer strategy and we were told that development of lifer management was based more on reaction to crises than proactive planning. Some of the component elements of a lifer strategy were in place in that there were published criteria for progression to Wilson and Martin Houses and to the prisoner assessment unit (PAU), lifer file recording had improved and lifer standards had been introduced. However, these were not collated in a coherent policy document that was reviewed, analysed and updated (see section on life-sentenced prisoners).

See main recommendation HP49.

MR11 **Case management and quality assurance processes should be introduced to ensure that targets set in resettlement plans are implemented and regularly reviewed with the full involvement of the prisoner. (HP50)**

Achieved. A total of 108 sentenced prisoners, plus all 169 lifers had resettlement or lifer plans. New resources provided to deliver the Criminal Justice (NI) Order 2008 had led to the establishment of a dedicated resettlement team, which meant there had been considerable improvements in operational resettlement work and case management. Resettlement files were now much better in terms of structure, layout and content. A basic quality assurance process had been introduced, but needed to develop to provide more meaningful learning points for staff. There were however some concerns about Maghaberry's ability to deliver some targets, particularly offending behaviour programmes and other interventions that had lengthy waiting lists. Most resettlement files contained quarterly reviews signed by prisoners. Although prisoners indicated they had little interest in resettlement plans, those we interviewed were able to describe their plans and confirmed they were involved in regular reviews.



Section



Progress on other recommendations since the last report





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.

- 1.1 Prisoners should be interviewed in private by reception officers who are able to engage confidently with prisoners and identify and assess individual risks and needs. (1.30)**

Partially achieved. Two booths allowed staff to interview prisoners in private. Interviewers were mainly concerned with risk issues rather than identifying needs. This was reflected in our survey, where prisoners responded more negatively than the comparator in eight of the 10 welfare-related questions.

Further recommendation

- 1.2 Staff interviewing prisoners in reception should identify needs as well as risk factors.**

- 1.3 Prisoners should be given information, in reception or on their first night, in a form they can understand about what to expect in the first 24 hours in custody. (1.31)**

Achieved. Prisoners were given a first night booklet that clearly outlined what they needed to know about the first 24 hours in custody. This was available in four languages and could be translated into other languages when necessary.

- 1.4 Refreshments, as well as means to pass the time in holding rooms, should be provided in reception. (1.32)**

Partially achieved. Not all prisoners were offered something to eat and drink in reception. Some holding rooms had televisions and newspapers, but it was not unusual for prisoners to remain in reception for up to two hours with nothing to occupy them.

We repeat the recommendation.



1.5 All prisoners should be given the opportunity to shower and make a telephone call on the day of their arrival, and this should be recorded. (1.33)

Achieved. All new arrivals we spoke to said they had been offered a shower in reception and a telephone call when they arrived on their first night accommodation.

1.6 Night staff should be aware of the location and needs of new prisoners. (1.34)

Achieved. New arrivals had a yellow card in a pocket outside their cells. Night staff found this helpful and were aware of the needs of new prisoners, particularly those identified as vulnerable.

Additional information

Reception

1.7 In our survey, significantly fewer prisoners than the comparator said they had been treated well in reception and many complained vehemently about how they had been strip searched. There was little information on display for prisoners, but a brief introductory DVD had been produced in a useful initiative that had involved staff and prisoners. The aim was for the DVD to be shown on continuous loop in the admission holding room, but none of the prisoners we spoke to on induction had seen it. Prisoners often had to wait up to two hours in reception, supposedly due to staff shortages even though the complement of staff available meant there was no good reason for such delays.

First night

1.8 The first night accommodation was clean and the cells were well prepared. Staff interviewed all new arrivals in private and engaged positively with them. Some were concerned about the policy requiring them to move to another area after three years to combat 'conditioning', although this was designed for those working with separated paramilitary prisoners. In our survey, significantly more prisoners than at the previous inspection said they had felt safe on their first night, but this was still significantly worse than the comparator.

Induction

1.9 Most prisoners said they had completed an induction course. Only 44% in our survey said it had covered everything they needed to know, but more recent arrivals we spoke to said they had found it useful and particularly valued the contributions of fellow prisoners on the Listener scheme and advice on housing. Induction included a series of practically based group presentations as well as input by relevant specialists. All prisoners were interviewed by a governor and, unless they were serving a very short sentence, by a probation officer. The induction timetable was quite loosely organised and not always completed within the allocated three days. Some prisoners could wait up to a week to complete it.



Further recommendations

- 1.10 Strip searches in reception should be carried out respectfully and managers should make checks to ensure that correct procedures are followed.
- 1.11 Prisoners should be transferred to their allocated unit without delay once reception procedures have been completed.
- 1.12 Officers working on the committal and induction landings should not be subject to the staff rotation policy designed for those working with separated prisoners.

Housekeeping point

- 1.13 All new arrivals should be given the opportunity to watch the introductory DVD.





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 The square houses should be replaced as part of the Northern Ireland Prison Service Estate review. (2.24)

Not achieved. The need to replace this unsuitable accommodation had been agreed in principle, but was a long-term objective. In the meantime, plans had been tabled for a proposed refurbishment of the original square houses.

We repeat the recommendation.

2.2 Cells on Bush and Roe Houses designed for one prisoner should not be shared. (2.25)

Not achieved. The situation had not changed. Population pressures meant that 95 single cells were used for two prisoners.

We repeat the recommendation.

2.3 Some opportunities should be introduced for prisoners, particularly new committals, to eat together. (2.26)

Partially achieved. New committals on Roe House and prisoners on Bush House could usually eat one meal a day communally. Convicted prisoners on the square houses had similar opportunities, but those on remand did not.

Further recommendation

2.4 Prisoners on remand should be given the same opportunity to eat out of their cells as those who have been convicted.

2.5 Staff should actively patrol landings and communal facilities whenever prisoners are unlocked. (2.27)

Not achieved. Staff did not actively patrol landings and did not engage with prisoners during association.

We repeat the recommendation.



- 2.6 **Glen House should not be used for women prisoners. (2.28)**
Achieved. Glen House was no longer reserved for potential women prisoners.
- 2.7 **Adequate screening of all cell toilets should be installed. (2.29)**
Not achieved. The situation was unchanged. Prisoners sharing accommodation on the two newer houses, Roe and Bush, had screened toilets, but this was not the case on the square houses.
We repeat the recommendation.
- 2.8 **Broken telephones should be replaced. (2.30)**
Achieved. All telephones on the residential units were working and some additional telephones had been installed.
- 2.9 **Additional interview rooms should be provided for Erne House. (2.31)**
Achieved. There were now three dedicated interview rooms on Erne House, which was sufficient.
- 2.10 **Recreational facilities should be improved. Damaged pool tables should be repaired or replaced. (2.32)**
Achieved. Most of the equipment in the recreational areas was in good condition and damaged items were repaired.
- 2.11 **Monthly minuted house meetings should be introduced between prisoner representatives and staff. (2.33)**
Not achieved. Prisoners still had no opportunity to meet as a group to discuss their experiences with staff.
We repeat the recommendation.

Additional information

- 2.12 All living areas were generally clean and well maintained. The accommodation on the two houses in the Mourne complex was particularly good and consisted of single cells that had been personalised and well equipped communal living areas. The living conditions on the two newer houses, Roe and Bush, were reasonable, apart from the cramped double cells. The four older square houses with their narrow corridors and low ceilings remained unsatisfactory and difficult to supervise. None of the doubled cells contained a lockable cupboard.
- 2.13 Prisoners had good access to showers and laundry facilities were adequate. Prisoners were able to wear their own clothes and there was a large store of good quality clothing for men who needed it. Outdoor clothing was not routinely provided for prisoners taking exercise. All exercise yards on the main site were very poor, with no facilities and some were dirty. There was scope to use the wide open area known as 'Red Square' as an exercise area for more trusted prisoners.



Further recommendations

- 2.14 Lockable cupboards should be provided in shared cells.
- 2.15 Prisoners wanting to take exercise in poor weather should be provided with outdoor clothing.
- 2.16 Exercise yards should be clean and contain adequate seating.
- 2.17 The Red Square area should be used as an exercise area for suitably risk assessed prisoners.

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.

- 2.18 **Positive efforts through training and management commitment should be made to encourage and support staff to engage actively with prisoners, including during association periods. (2.39)**

Not achieved. All senior managers and officers had attended officer development training in 2008, which was a positive development designed to encourage staff to identify their skills, competencies and workplace responsibilities and included pro-social modelling. While we saw some positive individual interaction, staff collectively continued to be reluctant to engage fully with prisoners and tended to keep their physical and emotional distance. There was no interaction with prisoners during association and little evidence that senior operational managers promoted more active involvement.

We repeat the recommendation.

Additional information

- 2.19 An in-house survey of prisoners carried out in October 2006 had generated an 81% response rate, but no action plan had been developed to address the issues raised. In this survey, 66% of prisoners said they would not talk to an officer about a personal problem, 40% said officers were too busy to talk to them and 65% said other prisoners were often the best source of information.



- 2.20 In our survey, 73% said most staff treated them with respect, although the figure dropped to 67% among Roman Catholic prisoners compared to 80% of Protestant prisoners. However, only 57%, significantly worse than the comparator, and significantly fewer Roman Catholic than Protestant prisoners, said they had a member of staff they could turn to for help if they had a problem. Almost half said they had been victimised by a member of staff. Many prisoners added comments about staff, specifically expressing their dissatisfaction with treatment by the search team. Examples included 'Some here they are OK but on other landings they will keep them locked up and talk to them like s**t', 'There is good and bad staff...I've seen staff do things which are wrong and I've seen staff close ranks around these particular staff', 'They let us run the wing as we want', 'The search team are forceful, intimidating abusers and they fail to comply with prison procedure' and '...the search team beat and pick on prisoners'. These views were reflected in many of our discussions and interviews with prisoners.
- 2.21 The top five issues raised at our safety and staff-prisoner relationship interviews were lack of trust in staff, aggressive body language of staff, procedures for adjudications, response by staff to fights, bullying and self-harm and lack of confidence in staff. We saw some individual officers responding well to prisoners, but we also saw unprofessional reactions and heard staff using unacceptable language when talking to and about prisoners (see also section on equality, race relations and foreign nationals).
- 2.22 Managers did not have free access to houses, but instead had to wait for staff inside to let them in. It was therefore difficult for them to assess everyday interactions or challenge unacceptable behaviour. We regularly found several staff clustered in offices on landings, sometimes watching television or cooking food for themselves. During association, prisoners were still locked in association rooms without staff supervision. None of the staff wore name badges or had numbered epaulets, so could not be identified by prisoners. There were no consultation groups where prisoners could discuss regimes and services with staff. Staff still failed to adhere to consistent lock and unlock times or to get prisoners to work and education on time.

Further recommendation

- 2.23 Officers should wear name badges or identification numbers.



Personal officers

Expected outcome:

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

2.24 Weekly entries in prisoners' files should record progress against resettlement and sentence plans and significant incidents in the prisoner's or his family's lives, as well as recording custodial behaviour. (2.43)

Not achieved. Comments continued to be entirely observations about compliance with wing routines rather than reflecting any knowledge of prisoners, their individual circumstances or resettlement needs. It was impossible to distinguish one prisoner from another or to show that officers ever actually spoke to them. There was no evidence of management quality checks. Comment forms were still rarely signed by prisoners to confirm that comments had been shared with them.

We repeat the recommendation.





Bullying and violence reduction

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 violence and intimidation are known to staff, prisoners and visitors, and inform all aspects of the regime.

3.1 A survey of prisoners' perceptions and experiences of bullying should be carried out to inform the development of local policy and strategy. (3.16)
Not achieved. See paragraph MR2.
We repeat the recommendation.

3.2 Bullying information reports should be opened in all cases of suspected bullying. Managers should ensure there is effective daily monitoring of suspected bullies. (3.17)
Not achieved. Only 13 bullying information reports (BIRs) had been opened in 2008 and the last recorded incident on an anti-bullying database had been in October 2008. Staff said one prisoner was currently being monitored as a bully, but his name was not on the database and there was confusion as to how the database was updated. The number of identified bullies was low for a population of over 800 prisoners and this had been discussed at anti-bullying board meetings. Many closed monitoring booklets were poorly completed, often with gaps in monitoring.
We repeat the recommendation.

3.3 Monitoring information about bullying should be improved, to enable managers to develop a profile of this behaviour. (3.18)
Not achieved. There was no monitoring information on bullying, which was not surprising given the sparse use of BIRs. Minutes of the few meetings of the anti-bullying board in 2008 indicated limited discussion of the small number of cases reported, but there was no monitoring of potential indicators of bullying such as unexplained injuries, evidence from adjudications or from security reports to help managers develop a profile of bullying or violent and anti-social behaviour.
We repeat the recommendation.



3.4 All staff working directly with prisoners should receive training in the anti-bullying training strategy. (3.19)

Not achieved. There had been little staff training in anti-bullying procedures.

The last training had involved 43 staff in 2007.

We repeat the recommendation.

Additional information

- 3.5 Safer custody had largely been a neglected area and there had been no consistent leadership in recent years. At the previous inspection, safer custody had been led by the Deputy Governor, which had helped to raise its profile, but this had since lost momentum. Key staff comprised only a governor and a recently appointed full-time principal officer, and it was difficult to see how anti-bullying could be championed on residential units. This loss of direction was reflected in the anti-bullying board and self-harm and suicide prevention meetings, which had met regularly only since September 2008. Meetings of the anti-bullying board were chaired by the governor responsible for safer custody, but were poorly attended with only between three and five staff present including the chair. The minutes included comment on the poor attendance and indicated a lack of strategic direction.
- 3.6 There had been no review of anti-bullying policy for some years. A new approach to monitoring bullies piloted on Bann House in 2005 had not become established practice. Guidance on the procedures had been provided for staff, but there had been little training. In theory, senior officers were responsible for investigating reported incidents and officers were required to make regular monitoring entries. Decisions about the management of individual cases were made by a multidisciplinary anti-bullying board following the period of monitoring. Anti-bullying procedures were not publicised and the prisoners' induction booklet made no reference to bullying.
- 3.7 Although our survey indicated some improvements since 2005, responses to questions about safety were generally poorer than comparator prisons. More prisoners than the comparator said they had felt unsafe at some time and that they had been assaulted by other prisoners; 56% of all prisoners said they had felt unsafe and this rose to 62% among the Roman Catholic population. Some areas of the prison, such as association rooms, were still not directly supervised by officers.
- 3.8 Indicators of violence were not properly investigated, including injuries to prisoners and allegations of assault. Unlike information on self-harm, data on bullying was not captured on the prison record and inmate system management (PRISM) and there was no overarching violence reduction strategy.
- 3.9 In the prison's 2006 survey of prisoners (see paragraph MR2), 39% of respondents said they had feared for their safety in the previous month. Almost a quarter said a prison officer was responsible for their feelings and 19% that they had been bullied by a member of staff. This was consistent with our survey, in which significantly more than the comparator said they had been victimised by staff. Much of this appeared to relate



to prisoners' experiences and perceptions of the search and standby team (see section on security and rules). In our safety interviews, prisoners highlighted aggressive body language from staff as one of the most serious issues.

- 3.10 Several managers accepted that there was probably more bullying than was reported. There were no interventions for bullies or established procedures to ensure that victims felt safe to report bullying.
- 3.11 There were several locations in the prison where prisoners were accommodated for protection. Glen House and Martin House (protected witness unit) held prisoners who needed protection due to threats or potential threats from others. Bush landings 3 and 4 accommodated some prisoners who were vulnerable due to the nature of their offences or who needed to be separated from others because of past conflicts. The REACH landing (Lagan 5) held prisoners who were vulnerable because of their mental health, age or personality. In addition to those prisoners who had asked for separation, we were told there were around 150 prisoners who were required to be kept apart. The arrival of a large group of foreign national prisoners had caused some tensions and conflicts involving them.

Self-harm and suicide

Expected outcomes:

Prisons work to reduce the risks of self-harm and suicide through a whole-prison approach. 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 are 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.

- 3.12 **A greater range of disciplines should be represented at the suicide and self-harm prevention meetings, and should also be involved in planned PAR1 reviews. (3.35)**

Not achieved. The suicide and self-harm team had held no meetings between February and September 2008. Meetings at other times had been poorly attended, with no consistent representatives from residential areas and no representatives from healthcare, the chaplaincy, psychology, activities, the REACH landing or drugs services. In most cases, only the safer anti-bullying coordinator, Listener coordinator, Listeners and Samaritans attended. The lack of a multidisciplinary approach was also evident at prisoner at risk (PAR1) reviews, which usually included only residential staff and sometimes a representative from healthcare. Prisoners were not routinely invited to attend their reviews.

We repeat the recommendation.



Further recommendation

3.13 Prisoners should routinely be invited to prisoner at risk reviews and any reasons for refusal recorded. As an alternative, they should be offered the opportunity to submit a written contribution and helped to do so when necessary.

3.14 **A Listener scheme should be established with access to Listener suites, and Listeners should participate in suicide and self-harm prevention meetings. (3.36)**

Achieved. A small number of dedicated staff had made a significant effort to establish a Listener scheme. Listeners attended the self-harm and suicide prevention meetings and contributed to induction. The Listener scheme and the support available from the Samaritans were described in the induction booklet. Four Listeners were resident on the main Maghaberry site and two in the Mourne House complex. They met weekly with the Samaritans and a principal officer who was the Listener liaison officer. Potential Listeners had been identified and further training was planned.

3.15 **There should be improved monitoring and analysis of incidents of self-harm. (3.37)**

Not achieved. The minutes of the self-harm and suicide prevention meetings indicated little monitoring or analysis of self-harm. The data presented were limited to the number and location of where PAR1s had been opened in the previous period. Why these forms were opened, the location and time and the numbers involved were not analysed.

We repeat the recommendation.

3.16 **Senior managers should make regular quality checks of PAR1 procedures. (3.38)**

Not achieved. Senior managers did not formally quality check the PAR1 procedures. None of the sample of documents we looked at, all of which had been completed to a poor standard, indicated that the quality had been checked by senior or principal officers.

We repeat the recommendation.

3.17 **All use of special accommodation and strip clothing for prisoners at risk of self-harm should be recorded. (3.39)**

Achieved. The authorisation of special accommodation and strip clothing was now recorded through a CRC1 form, but frequency of use was not monitored.

Further recommendation

3.18 The frequency of use of special accommodation and strip clothing should be monitored and inappropriate uses challenged.

3.19 **There should be a periodic review of recommendations from previous death investigations, to ensure that changes to practice are being sustained. (3.40)**

Not achieved. We were told that death in custody action plans and outcomes from coroner's inquests were discussed at the bi-monthly service-wide self-harm and suicide prevention forum that involved all three Northern Ireland establishments. However, the minutes from four meetings in 2008 made no reference to progress on action plans. Managers saw action plans as a headquarters function, which resulted in little discussion, few learning opportunities and lack of operational ownership of plans. This was particularly important for those responsible for implementing the plans and confused the accountability. Action plans were not discussed at Maghaberry's self-harm and suicide prevention meeting.

Further recommendation

3.20 Progress on implementing recommendations accepted by the Prison Service following a death in custody investigation or from findings at a coroner's inquest should be reviewed by Maghaberry's self-harm and suicide prevention meetings and any problems in implementing them drawn to the attention of the governor.

3.21 **To minimise delays, the emergency procedures for entering cells at night should be improved. (3.41)**

Not achieved. Cell keys for emergency access to cells at night were located in a 'break glass' box in the secure pod on each residential unit. This risked unnecessary and potentially fatal delay in reaching a prisoner in an emergency.

Further recommendation

3.22 Night custody officers should carry a cell key in a sealed pouch and be provided with guidance about entering cells that recognises the primary aim of preserving life.

Additional information

3.23 The self-harm and suicide prevention meeting had recommenced regular meetings only after a much publicised death (see over). Since the previous inspection, there had been six deaths classified as from natural causes and one from a suspected drugs overdose. There had also been two apparent self-inflicted deaths. The Prison Service had not received investigation reports from all the natural causes deaths, four of which had occurred in 2008. In one case from 2007, the report had been received, but no action plan had been completed. The report had included recommendations about emergency access to cells and access to emergency equipment. The prison had only recently received the investigation report of an apparent self-inflicted death in the special supervision unit in June 2007. This had included similar recommendations about emergency responses.



- 3.24 A more recent self-inflicted death in an observation cell on the REACH landing in August 2008 had received considerable publicity and a very critical report by the Prisoner Ombudsman had been published the week before this inspection. The prisoner involved had progressed through the life sentence process to Wilson House but, following a relatively minor disciplinary matter, had been returned to the main prison where his vulnerability increased. The comprehensive and robust report included 44 recommendations that reiterated some from previous death investigations. In direct response, all recommendations had been accepted, a ministerial forum on safer custody had been established and a review team appointed to identify action needed to bring about progress towards a modern Prison Service with a culture of care and accountability. The prison had completed Action Plans in response to interim recommendations made in September 2008 and also to the full report. The Prisoner Ombudsman's intention was to follow up progress six months after publication of her report.
- 3.25 There were no protocols for investigating serious or near-fatal incidents of self-harm, which provided an opportunity to learn lessons.
- 3.26 On average, 29 PAR1s were opened each month. There were 24 open during the inspection. Seventy-five PAR1s had been opened in 2008 following self-harm incidents. Records of self-harm incidents did not cover those who self-harmed frequently or who harmed themselves while on an open PAR1. When we checked a list of self-harm injuries provided by healthcare for the health and safety officer against PRISM, no PAR1 form had been raised in four out of 12 randomly chosen cases.
- 3.27 PAR1 procedures were inadequate in many respects and this had been identified in a review across the service by the director of operations in October 2008. Reviews were not multidisciplinary and prisoners were still not routinely invited to attend. Care plans were poor and non-specific and many monitoring records contained mainly observations with little evidence of any meaningful interaction. Cards outside cells identified prisoners subject to PAR1 procedures, which risked victimisation.
- 3.28 The service-wide policy, last reviewed in 2006, required PAR1 reviews to be chaired by a principal officer or governor. In practice, senior officers often took this role. There was no training for this task and, without the collective support of other disciplines, there was a reluctance to reduce the level of observations or make clear what level of observations was considered appropriate. By default, this usually meant 15-minute observations. The instructions for monitoring prisoners at risk were confusing and during the inspection vulnerable prisoners were woken frequently throughout the night to check on them, which amounted to inhumane treatment and was contrary to an instruction from the director of operations in December 2008.
- 3.29 Strip clothing was routinely given to men placed in observation rooms. These rooms were cold and unsuitable and the antithesis of a therapeutic environment. Vulnerable men were often held there for considerably longer than 48 hours. Listeners said it was difficult to carry out their duties in these conditions. Concerns about the length



of time prisoners were held in these rooms had been raised at the self-harm and suicide prevention meeting, but the practice continued.

- 3.30 Weekly safer custody meetings were now well attended by a range of disciplines and chaired by the safer custody governor. The meetings considered any prisoner with complex needs, many of whom were subject to PAR1 procedures. The meetings acted as a referral point for the REACH landing.
- 3.31 The REACH (reaching out to prisoners through engagement, assessment, collaborative working and holistic approach) landing had opened on landing 5 of Lagan House in April 2007 to support those identified as poor copers or with challenging behaviours. It had been under-resourced and had not developed as planned. The landing had 16 staff and all of the initial staff group had received specific training. However, only eight original staff remained on the landing and only one further officer had received training. Mental health and psychology support was insufficient, the regime was poor and staff were dispirited following the death on the landing in August. Weekly case conferences were held with the intention that all prisoners were reviewed every six weeks, but this was not achieved in all cases. Reviews often lacked professional support from other disciplines. The support plans we looked at were poor. Some prisoners had been on the landing for over 18 months and staff could not recall any prisoners being reintegrated onto the main locations.
- 3.32 Safer cells on the landing were often used for prisoners from other areas of the prison, which was disruptive. Very occasionally, prisoners sentenced to short periods of custody for non-payment of fines had also been placed there. Prisoners on the landing were offered exercise and gym with prisoners from other landings, but few took this up, which was unsurprising given the levels of vulnerability. The minimal educational opportunities comprised a weekly yoga class and a fortnightly arts and crafts class. Activities centred on a pleasant garden area created by prisoners and officers, but there were no instructional staff and little activity particularly during the winter months. Prisoners had to be security cleared to attend this area. The prisoners we met cited lack of activity and support as their major concerns.
- 3.33 Security clearance for Listener applicants was difficult and trained Listeners were often transferred to Magilligan prison. Listeners felt well supported by the liaison officer and the local Samaritans, but did not feel they had the support of all staff and general facilities for them were poor. These issues had been raised several times at the self-harm and suicide prevention meetings. Listeners could often wait several hours to be returned to their cells following a call during the night and not all staff understood the confidentiality aspect of their role. Little use was made of the Listener suite, which was located on the REACH landing. There were no easily accessible Listeners in reception or on the committal landings and they were not used on Glen House.
- 3.34 There were two safer cells each in the healthcare centre, the special supervision unit and on the REACH landing. These provided closed-circuit television cover, a television,



direct communication with the secure pods and a direct line to the Samaritans. Those we tested were working. Each unit also had two mobile telephones allowing prisoners to contact the Samaritans. A log was kept of their use, but their availability was not advertised and one log contained no entries since August 2008.

- 3.35 Ligature cutters were kept in the secure pods and in landing offices. The aim was to issue all officers who collected keys with a cutter, but this had been delayed after 120 ligature knives had been mislaid. More had been ordered.
- 3.36 There had been no training in PAR1 procedures since November 2007. There were plans to introduce new procedures and training similar to the assessment, care in custody and teamwork procedures used in England and Wales. A total of 142 staff had completed the more general ASIST (applied suicide intervention skills training) suicide prevention training, but this was not specific to the prison environment. It had been targeted at groups of staff including night custody officers, staff from the special supervision unit and those on the committal landings. All operational support grade staff received this training as part of their induction.

Further recommendations

- 3.37 Serious near-fatal incidents of self-harm should be investigated and learning disseminated through the service-wide self-harm and suicide prevention forum.
- 3.38 Prisoner at risk forms should be opened in all cases where a prisoner self-harms and healthcare should ensure that all relevant information about self-harm incidents is supplied to ensure this happens.
- 3.39 Staff from a range of disciplines should be trained and given the authority to chair prisoner at risk reviews and to oversee the development of effective care plans.
- 3.40 If the REACH approach is to be continued, in order to meet its original aims the unit should be relocated to a more appropriate therapeutic environment with suitably trained staff and sufficiently well resourced with mental health and psychological support and enough activities to keep men occupied.
- 3.41 Ligature cutters should be issued to all officers.
- 3.42 All staff with prisoner contact should be given training in suicide prevention procedures.
- 3.43 Prisoners at risk of suicide and self-harm should not be held in strip clothing in cold bare cells and the observation cells should be used for the minimum time necessary and only in extreme circumstances where there is no alternative therapeutic response.
- 3.44 Prisoners at risk of suicide and self-harm should not routinely be woken during the night.



Equality, race relations and foreign nationals

Expected outcomes:

All prisoners should have equality of access to all prison facilities. All prisons should be aware of the specific needs of minority groups and implement distinct policies, which aim to represent their views, meet their needs and offer peer support. All prisoners experience equality of opportunity in all aspects of prison life, are treated equally and are safe. Racial and religious diversity is embraced, valued, promoted and respected. Foreign national prisoners should have the same access to all prison facilities as other prisoners. All prisons are aware of the specific needs that foreign national prisoners have and implement a distinct strategy, which aims to represent their views and offer peer support.

3.45 All staff should receive relevant training in cultural, racial and diversity issues. (3.50)

Not achieved. The officer development training undertaken by all staff (see section on staff-prisoner relationships) did not include anything specific to cultural, racial or diversity issues. Some officers used unacceptable terminology when referring to prisoners, such as calling Travellers ‘tinkers’ and officers called one prisoner with disabilities ‘hopalong’. The minutes of the foreign national management meeting of July 2008 noted a ‘lack of training for staff in cultural awareness’, while those of November 2008 said ‘there is a case for more ethnic awareness for staff and prisoners’.
We repeat the recommendation.

3.46 Foreign national prisoners should be properly identified, regularly consulted and service provision appropriately targeted. (3.51)

Partially achieved. Foreign national prisoners were identified on arrival. A clerical officer recorded information about their immigration status and liaised with the UK Border Agency. A draft foreign national policy had been introduced across the three Northern Ireland prisons, but there was no local policy and no needs analysis of the population at Maghaberry on which to base services, although some efforts had been made to meet the needs of this expanding group of prisoners. There was no foreign national liaison officer. Foreign national prisoners were not seen individually and had no opportunity to meet as a group.

Further recommendations

- 3.47 A foreign national coordinator should be appointed and a local foreign national policy and strategy should be introduced based on the assessed needs of prisoners at Maghaberry.
- 3.48 Foreign national prisoner support and information groups should be held at least monthly and areas of concern fed back to senior managers.



3.49 All complaints alleging discrimination on grounds of race, religion or other improper grounds should be fully investigated, overseen by senior management, and any necessary action taken. (3.52)

Not achieved. There was no senior management oversight of any complaints and many prisoners expressed a lack of confidence in the complaints system (see section on applications and complaints).

We repeat the recommendation.

Additional information

- 3.50 Under Section 75 of the Northern Ireland Act 1998, the Northern Ireland Prison Service has a duty to promote equality of opportunity among different categories of persons. Thirty-nine per cent of prisoners were Protestant, 45% were Roman Catholic and 16% were 'other'. Among uniformed staff, 80% were Protestant, 9% Roman Catholic and 11% 'not declared'.
- 3.51 We were given a number of published prisoner statistics broken down by religion, including the number of prisoners unemployed/employed, place of work, progressive regimes and earned privileges status, allocated accommodation and those 'under restriction of association' (this latter classification also included a breakdown of age). The date of these was 22 January 2009, the week of the inspection. We also received published figures of the religious breakdown of prisoners who had attended education, been subject to adjudication and/or control and restraint, had home leave and who had been 'under restriction of association' and who had had an adjudication (this latter classification also included age) between 1 July 2008 and 22 January 2009.
- 3.52 Prisoners' religion, nationality and ethnicity were recorded on arrival, although nationality and ethnicity were not self-identified, but recorded by reception staff, which was likely to reduce accuracy.
- 3.53 We were given two sets of statistics regarding ethnicity. The control and restraint classification included a breakdown of prisoners as black African, black 'other', Chinese, Irish Traveller and white. The second set of figures, dated 15 January 2009, included these categories and black Caribbean, mixed ethnic group, 'other' ethnic group and Pakistani. The population profile gave four 'ethnic groups' of GB, IRE, NI and 'other'. These classifications were different from those suggested in a July 2008 publication by the Equality Commission for Northern Ireland, which also included guidance on monitoring for disability, sexual orientation and religion.
- 3.54 There was no comparison or analysis of the religion or ethnicity statistics with other groups of prisoners to identify any over or under-representation. None of the minutes of the senior management meetings from April 2008 to date recorded any discussion of the figures. An equality and diversity meeting had been introduced in December 2008. The minutes of the first meeting did not record any discussion of existing statistics, but noted discussion about the 'preparation of statistics that will be required'. The minutes recorded why monitoring was needed, but not what monitoring



was planned. A second meeting had been held in January 2009. This had no published agenda and the minutes had not yet been published.

- 3.55 As at the previous inspection, it was not possible to assess whether the rules, routines and services in the prison were applied openly, fairly and consistently, without discrimination. The perceptions of Roman Catholic prisoners compared to Protestant prisoners about their treatment were significantly more negative in many areas of our survey (see section on staff-prisoner relationships).
- 3.56 There were 102 foreign national prisoners from 22 countries. Half were Chinese nationals. There were two immigration detainees. Our survey highlighted some significant differences between foreign national and British prisoners, particularly in the areas of safety and respect. Just over three-quarters of foreign national men, significantly more than others, said they had felt unsafe in the prison at some time and very many more than the comparator said they felt unsafe at the time of the survey. More foreign nationals said they had been victimised by another prisoner and fewer said most staff treated them with respect.
- 3.57 Four foreign national management meetings had been held since July 2008. Management of this group of prisoners was due to be incorporated in the newly developed equality and diversity meetings from February 2009. The foreign national meetings were chaired by a senior manager, but were very poorly attended and only two staff attended the meeting in November 2008. Senior management meetings including an agenda item for 'ethnic diversity/foreign nationals'. Minutes from previous meetings identified some issues, but did not always detail discussions or any action taken.
- 3.58 There were figures for the number of foreign national prisoners involved in constructive activities and adjudications between 1 July and 31 December 2008. However, these figures served little purpose as they had not been analysed or compared with other groups of prisoners to highlight whether foreign national men were over or under-represented.
- 3.59 Services for foreign national prisoners were in the early stage of development, but efforts were made to meet their needs. This included information in languages other than English in reception, on the first night wing and on some of the houses. Officers knew they could use a telephone interpreting service and foreign national prisoners said it had sometimes been used to communicate with them. Interpreters were also brought into the prison. However, some wing files clearly indicated a need for interpreting services to be used more regularly. Comments included 'understands no English but seems to get by' and 'no real problems-obvious language barrier'. Officers on one house said they communicated with non-English speakers using basic hand signals. English for speakers of other languages classes were provided in education and there was a good supply of books, magazines and newspapers in languages other than English in the library. Immigration staff held quarterly 'surgeries' for prisoners.



- 3.60 There was no evidence in wing files that staff were aware of prisoners' families or home life. Foreign national prisoners received free weekly telephone calls home unless they had more than £20 in their spending accounts.
- 3.61 There was no diversity policy or strategy to outline how the needs of other minority groups such as black and minority ethnic, gay, bisexual, older prisoners or prisoners with disabilities would be monitored and met. An equality and diversity committee had been set up in December 2008 and had met twice. Some monitoring figures had been produced, but these had not been analysed and there was no evidence of any discussion or action taken (see paragraph MR9).
- 3.62 In our survey, 25% of prisoners considered themselves to have a disability. Survey results showed some significant differences between prisoners with a disability and those without. Staff on many wings could identify prisoners with obvious disabilities, but not those with less visible disabilities such as dyslexia, diabetes or mental health issues. There were no personal evacuation plans or care plans and prisoners were not consulted or involved in decisions about their care. An adapted cell on Foyle House contained suitable fixtures and fittings. A shower on the lower floor of Bush House had grab-rails and a fixed seat.
- 3.63 There was no disability discrimination officer and no specific screening to identify disability, which was seen by officers as the responsibility of healthcare. The wing files of some prisoners with a disability included notes from healthcare about their needs, but otherwise there was little reference to disabilities. Officers said they would not usually push a prisoner in a wheelchair.
- 3.64 Minutes of the senior management meetings contained a standing agenda item for 'DDA' (Disability Discrimination Act). Minutes for May, June and August 2008 recorded the same paragraph stating that there were a number of 'infirm' prisoners on Bush House with wheelchairs and walking frames and that 'there is no disabled shower in Bush House, the cell door access is not good and one prisoner cannot get to the exercise yard as his zimmer frame does not fit through the turnstile'. There was no record of any action taken.
- 3.65 A number of diversity liaison officers had been identified and the role was under development. Minutes of the equality and diversity meeting of December 2008 recorded that 'those present were of the opinion that there were 10 to 12 diversity officers appointed but no one really knew who they were'. There was still no evidence of any promotion of ethnic and cultural diversity.
- 3.66 There was no policy for older prisoners. There were 61 prisoners in their 50s, eight aged between 60 and 65 and nine over 65. Three prisoners were over 70, the oldest being 77.



Further recommendations

- 3.67 A multidisciplinary committee should be established to ensure that the needs of foreign national prisoners are represented.
- 3.68 Interpreting services should be used whenever necessary and this should be recorded.
- 3.69 A diversity policy should be introduced that meets the requirements of anti-discrimination legislation and outlines how the needs of minority groups will be met.
- 3.70 Monitoring by a multidisciplinary team should be introduced to ensure that prisoners from minority groups are not victimised or excluded from any activity.

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.

3.71 Request and complaints forms and respective guidelines should be available in languages other than English. (3.96)

Not achieved. Prisoners were given some information on how to make requests and complaints in the induction booklet available in four languages, but there was no information on the units in any language and no forms available other than in English.
We repeat the recommendation.

3.72 Consultative committees should be introduced. (3.97)

Not achieved. There were no consultation arrangements and the prison had rejected this recommendation, consistent with the historical position of staff distancing themselves from prisoners. Some staff said they carried out informal consultation with prisoners about particular issues, but there were no records of this.
We repeat the recommendation.

3.73 Complaints and requests should be monitored and evaluated so that any patterns or trends can be identified. (3.98)

Not achieved. The prison information system (PRISM) had been developed to provide a computerised request and complaints system. This was easy to interrogate and allowed managers to look at requests and complaints by area, type and quality of response, but they rarely did so. An overview carried out shortly before the inspection evaluated the system over the previous year, but there was no quality control (see additional information below).
We repeat the recommendation.



3.74 The internal complaints register and the request register should be properly maintained on all house units so that a clear audit trail is available. (3.99)

Achieved. The paper system had been replaced by an electronic system that provided a clear log of all requests and complaints. However, this was not used to identify late or non-replies (see additional information below).

Additional information

3.75 Staff took requests and complaints verbally or on paper and were responsible for transferring this information onto the computer system, but this gave the prisoner no confidentiality. This was then sent electronically to the department or member of staff concerned. The Prisoner Ombudsman's office had received 240 ineligible complaints in 2008, many of which referred to prisoners not getting an answer from the internal complaints system or indeed being able to access it. Prisoners used the Ombudsman's direct line to express their frustration with the system and they expressed serious concerns that staff would collude to deny their complaint or that they would be treated poorly after complaining. This was reiterated to us by prisoners during this inspection.

3.76 In our survey, more prisoners than at the previous inspection said it was easy to get a complaint form, but more also said they had been encouraged to withdraw a complaint. Of 1031 complaints logged in 2008, 196 had been withdrawn for reasons that were unspecified and not analysed.

3.77 There were a number of complaints of assaults against staff, particularly some searching staff, and we were not satisfied that these had been properly investigated. Some had been passed to the police, but the outcome, if any, was unclear. Most were sent to the senior officer or manager in charge of the staff involved in the allegation, which was inappropriate and not sufficiently impartial. Senior managers had little involvement and there was no evidence that serious complaints were given sufficient management attention. One prisoner who had complained of an assault by staff six days after the incident had been berated for the delay by a senior officer who was dismissive of the claim stating that he found it 'difficult to believe'. There was no record that the prisoner had been interviewed in person about his allegation. Complaints had been made by four different prisoners about an alleged assault by staff on a prisoner in a neighbouring cell during a night search. The response was 'this is not a complaint relating to this inmate, therefore cannot be answered'. No investigation had taken place despite the seriousness of the allegations.

3.78 Where complaints were answered, replies were generally relevant and sometimes, but not always, respectful. However, prisoners we spoke to were concerned about the lack of confidentiality because it was not possible to make a confidential complaint without disclosing it at some point to landing staff. Prisoners could request to see a governor and some did so, but this was dependent on the general request system. The



lack of free landing association and restrictions in movement meant it was unlikely that prisoners would see a governor without making an appointment.

- 3.79 There was little evidence of any quality audit of the system. No single person was responsible for monitoring the timeliness of requests or complaints and around a third of complaints were answered outside the required timescales, with some prisoners released before receiving an answer. The prison's review of the complaints system had identified problems with complaints being answered late, some complaints not being issued to an individual and complaints stalling without resolution, but it had not examined the quality of responses.
- 3.80 Just under two-thirds of requests in the previous six months had been answered within the required seven days, although 8% were registered as incomplete. Issues about clothing, property and telephone accounts and access featured strongly. Responses to requests varied, but all were legible and most were respectful. Most were dealt with at the correct level.
- 3.81 The Independent Monitoring Board (IMB) was a visible presence throughout the prison. IMB members said that they faced some unacceptable restrictions on access to prisoners' records. They were also prevented from observing when the search and standby team was carrying out searches in residential units. The short core day also meant they had a brief window to see prisoners and problems seeing prisoners when the wings were locked up.

Further recommendations

- 3.82 The request and complaints system should be subject to rigorous daily monitoring by a named manager to ensure that issues are dealt with at the appropriate level and answered within the correct timescales.
- 3.83 The eligibility for access to the Prisoner Ombudsman should be reviewed to ensure prisoners are not unnecessarily impeded from taking complaints forward when they are unable to get satisfaction in the prison system.
- 3.84 Complaints about members of staff should be referred first to a senior manager and investigated by someone trained in investigations. All allegations of assault should be referred initially to the governor.
- 3.85 Independent Monitoring Board staff should be able to observe any area of prison life and should be given open access to all documentation in order to carry out their duties.
- 3.86 Paper complaint forms should be provided on all residential units and prisoners should be allowed to place these unobserved in a box, which should be emptied by an administrative member of staff.



Substance use

Expected outcomes:

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

3.87 The drug and alcohol strategy should be updated, and should contain detailed action plans, targets and performance measures. (8.93)

Not achieved. The drug and alcohol action plan had not been updated since 2006 and according to the prison's action plan was no longer valid. There were no action plan targets or performance measures. The drug strategy committee, which was coordinated by headquarters staff to cover all three Northern Ireland prisons, had not met in the previous 18 months.

We repeat the recommendation.

3.88 A strategy leader for the coordination of treatment services should be appointed. (8.94)

Partially achieved. An addictions manager had been appointed in June 2007 for all three prisons, but was not available during the inspection due to sickness. Her responsibility had been to ensure strategic direction, partnership with voluntary agencies, coordination of clinical audit and the delivery of therapeutic interventions. From October 2008, longer-term provision of the addictions services was the responsibility of the health service. There was little evidence of clinical management guidelines being used and there was no multidisciplinary substance misuse team, although two addictions services nurses were due to be appointed within the next few months.

We repeat the recommendation.

3.89 Treatment providers should develop joint working protocols and integrated care pathways for prisoners with substance problems. (8.95)

Not achieved. Seven prisoners were receiving substitute medication for their substance use problems, but many more were given little or no support. There was little communication between health services and Dunlewey Substance Advice, which provided counselling support for those with problems. The lack of communication apparently extended to them not being consulted over the new proposals for addiction services at the establishment.

We repeat the recommendation.

3.90 Prisoners should be informed of available substance misuse services during induction. (8.96)

Achieved. Dunlewey Substance Advice staff attended the induction course and informed prisoners of their services.

3.91 Every prisoner with substance-related needs should receive an assessment within a set timeframe, followed by a care plan. (8.97)

Not achieved. The health services screening of prisoners on committal identified any substance use problems, but there were numerous examples of poor or non-existent subsequent care. One man with a known history of chronic alcoholism was not given any treatment or symptomatic relief for his obvious discomfort and distress for several days, during which time he was moved to a safer cell and made to wear strip clothing. Another prisoner who had admitted to health services staff that he was injecting heroin had been seen by a GP the following day, but the entry in the clinical notes recorded that he had been advised 'it is up to him to wean himself off by reducing consumption of illegally acquired substances – he can be treated for withdrawal when it occurs'. There were no further entries in the clinical records and no care plan, which was unacceptable. In our survey, significantly more prisoners than the comparator said they had a drug problem when they arrived at Maghaberry and significantly more said they had a problem with alcohol. No provision was made for those using drugs in the prison, such as disinfecting tablets.

We repeat the recommendation.

Further recommendation

3.92 Prisoners should have access to disinfectant tablets for cleaning injecting equipment and given the means of safe disposal of this equipment.

3.93 The new clinical management guidelines should be fully implemented, and a dedicated substance misuse team established. (8.98)

Not achieved. Clinical management guidelines were not followed and no dedicated substance misuse team had been established.

We repeat the recommendation.

3.94 All prisoners, including those on remand and those serving short sentences, should have access to short-duration programmes that focus on alcohol and drug awareness, harm reduction and relapse prevention. (8.99)

Partially achieved. The resettlement department provided the drug and alcohol awareness programme and an alcohol management programme. The former had been run twice in the previous year with 18 prisoners participating, while the latter had run four courses with 32 participants. Both courses had significant waiting lists. There were no specific courses for those on remand and serving short sentences.

We repeat the recommendation.

3.95 A drug-free unit should be established that offers structured support, including voluntary drug testing. (8.100)

Not achieved. Maghaberry did not have a drug-free unit and in our survey, significantly more prisoners than the comparator said it was easy to get illegal drugs in the prison. Prisoners rated the availability of illicit drugs as the sixth most serious safety concern in our safety interviews.

We repeat the recommendation.



3.96 A random mandatory drug testing scheme should be introduced. (8.101)
Not achieved. Despite the legislative authority to introduce mandatory drug testing (MDT), the prison rules had not yet been changed to allow it. The prison operated a ‘voluntary’ scheme for all but remand prisoners who were not on the enhanced level. Drug testing could be random or targeted, replicating MDT run elsewhere in the UK. This was linked to the progressive regimes and earned privileges (PREP) scheme. Those who refused testing could not progress and a positive result led to an automatic downgrading to standard or basic level. Prisoners on the basic level said it could take a long time to be put forward for another test.
We repeat the recommendation.

3.97 The current ‘voluntary’ drug testing scheme and its role and structure should be reviewed and revised. Sanctions should not be part of a voluntary scheme. (8.102)
Not achieved. There had been no change in the scheme, which was still based on the PREP scheme. Testing took place every week day, but not at weekends. Prisoners hoping to progress in the PREP scheme were prioritised for testing, followed by suspicion testing. Any member of staff could request a suspicion test, but there were no links to security and no equality monitoring to check for fairness. Twenty-nine prisoners were on a waiting list for suspicion testing. In the previous 12 months, there had been 704 tests identified as suspicion tests, of which 128 failed and 105 refused. Staff who undertook the testing were taken from Bann House and two were allocated each day along with a senior officer and a principal officer. The number of prisoners testing each month varied. In the previous nine months, 24% of prisoners had either failed or refused a drugs test.
We repeat the recommendation.

Further recommendation

3.98 Suspicion drug tests should be based on assessed intelligence, authorised by a manager and subject to equality monitoring.

Additional information

3.99 Dunlewey Substance Advice staff offered one-to-one counselling and a ‘drugs and self’ course. Prisoners could self refer to the former, but could also be referred by their solicitor or probation staff. They were supposed to be assessed by Dunlewey Substance Advice staff within three weeks of a referral, but the current waiting list for initial assessments was about 30 prisoners. Another 70 had been assessed, but had yet to commence counselling. Those receiving counselling could be put forward for the ‘drugs and self’ course. Two courses had run in the previous year and 12 prisoners had attended. The OCNI level 1 accredited course included stress management, anger management and awareness sessions. It was run mainly for sentenced prisoners. Separated loyalists and separated republicans were excluded. Narcotics Anonymous



(NA) also ran sessions and staff and prisoners were impressed by the service and care provided.

Further recommendation

3.100 All prisoners with substance use problems should be assessed shortly after arrival and prioritised for counselling services.



CHAPTER 4:

Health services



Expected outcomes:

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

4.1 Access to healthcare rooms, wherever they are in the prison, should be limited to healthcare staff. (4.50)

Achieved. The healthcare rooms on the houses were readily accessible by health services staff. Spare keys were kept in a glass-fronted box in each of the entrance 'pods' so that discipline staff could access them in an emergency.

4.2 The in-patient beds should not form part of the prison's certified normal accommodation. (4.51)

Not achieved. This recommendation had been rejected and the beds remained on the certified normal accommodation.

We repeat the recommendation.

4.3 Nursing staff should not carry staves. (4.52)

Not achieved. A small number of nurses and hospital officers continued to carry wooden staves. One said that, although he had never used the stave in many years of service, he would continue to carry it until given a direct order not to do so. Staff had the option of carrying personal alarms to summon immediate assistance if required.

We repeat the recommendation.

4.4 The skill mix of healthcare staff should be reviewed to ensure that all staff's skills are being used appropriately and to their full potential. (4.53)

Not achieved. There had been no significant change in the allocation of staff.

However, the overall number of staff available to work had reduced significantly, partly due to promotion to other posts in the three Northern Ireland prisons as well as long-term sick absence and resignations. Recruitment campaigns were under way with some success, but did not keep pace with the attrition rate and vetting procedures took a long time. New posts such as the two addiction nurse posts (see section on substance use) were initially advertised internally, which compounded the problem if existing staff were successful. Internal recruitment also meant that fresh ideas and talent were not necessarily available. The mental health support team was particularly short staffed, with only the senior nurse available on one day of the inspection.



However, mental health-trained staff were working on the in-patient unit, two of whom were observing prisoners engaged in an occupational therapy class. We were told that managers were not allowed to relocate staff to meet patient need.

We repeat the recommendation.

4.5 There should be a fair and auditable system for the allocation of continuing professional development. (4.54)

Achieved. There had been recent investment in staff training and the South Eastern Health and Social Care Trust had arranged training from a local provider in a range of subjects including mental health awareness, care planning and documentation and discharge planning. A timetable of training was available to all three health services departments and staff were allocated to attend the various days. Staff training needs had been identified, but it was not possible to determine whether all these had been met.

4.6 The number of hours for which GPs attend the prison should be reviewed to ensure that they meet the needs of the population, and that the contract is providing value for money. (4.55)

Partially achieved. The number of GP sessions had increased, but the extra sessions were used to rewrite prescriptions so the number of prisoners seen each week had not increased. It was not possible to determine whether any prisoners waited more than a week to be seen as no records appeared to be kept, but prisoners said they often waited longer. Prisoners on Wilson, Martin and Glen Houses and the prisoner assessment unit (PAU) reported particular difficulty in accessing a GP. PAU prisoners had to return to Maghaberry for appointments. Prisoners on Wilson and Martin Houses had to undergo strip searches through the main Maghaberry reception and on return, which was time consuming and disrespectful and acted as a disincentive to seeing a doctor. The arrival and leaving times of the GPs showed that some stayed less than an hour on days they were allocated to work. However, the new contract for the GP service identified surgery times of three hours 20 minutes in the mornings and two hours in the afternoons Monday to Saturday, as well as specific tasks and responsibilities, including patient monitoring using the quality and outcomes framework (QOF) standards.

Further recommendations

- 4.7 Once in place, there should be robust monitoring of the GP contract and this should be reported to the partnership board at least every quarter.
- 4.8 All prisoners should have equal access to the services of a GP and prisoners attending appointments from the Mourne House complex should not be required to undergo strip searches unless there is an identified individual risk.
- 4.9 Prisoners in the prisoner assessment unit should not have to attend Maghaberry for routine GP appointments.

4.10 **All clinical records should be made contemporaneously. (4.56)**

Not achieved. Clinical records were kept electronically using EMIS, which meant that nurses on the houses now had easy and ready access to patients' clinical records. There were some good clinical entries, but also some omissions; the records of one man on the REACH landing, where most prisoners were known to the mental health support team, contained no entry by a nurse for over three months. Only eight of the 14 residents on the landing (excluding the safer cells) had nursing entries in their clinical notes in the month of the inspection. Medication was administered to patients without medication administration charts present and at other times records were filled in before the medication was handed out.

We repeat the recommendation.

4.11 **The applications and triage system that has been piloted on Lagan wing should be adopted on the other wings. (4.57)**

Achieved. The triage system had been adopted by nurses working in all the main houses. Prisoners were assessed using triage algorithms and referred to the GP if required.

4.12 **Nurses should stop the risky practice of re-dispensing and/or repacking dispensed medicines. (4.58)**

Not achieved. Secondary dispensing was commonplace, some doses of medications were prepared in the morning for the afternoon and evening administration times and almost all the daily in possession medicines were dispensed by nurses into daily packs for patients. Nursing staff did not appear worried that this was happening and the risky and time-consuming practice was condoned by health service and other managers despite Nursing and Midwifery Council guidelines that it should be carried out only in 'exceptional circumstances'. It was unclear to nursing staff whether monthly in possession medication was allowed except for the safest of medications.

We repeat the recommendation.

Further recommendations

4.13 Policy decisions about the duration of in possession medication should be disseminated to all relevant staff.

4.14 Patients risk assessed as requiring 'see to take' medication should receive this service.

4.15 If daily in possession medication is required, it should be supplied by the pharmacy in a suitable form.

4.16 **Reviews should take place of treatment times, accessibility to patients and assessments for suitability to be included on the self-medication scheme. (4.59)**

Partially achieved. Eighty per cent of patients now received in possession medication, the majority a week at a time, although some medicines were provided monthly. Twenty per cent of medicines were given on a daily in possession or 'see to



take' basis. This was not formally risk assessed and there was no documentation to explain why some were in possession and some were not. The prescription chart contained a space for prisoners to sign for receipt of their in possession medications, but this did not happen. Nursing staff said it was too time-consuming. There was a policy to perform 10 checks a month per wing to ensure compliance and deter trading and bullying, but there was no record of these happening.

Further recommendations

- 4.17 The in possession risk assessment should be more robust and adhered to by staff. The use of daily in possession medication should be discouraged.
- 4.18 A signature should be obtained from the patient to confirm receipt of any medication supplied that is intended for self-administration.
- 4.19 The policy of random checks by security and nursing staff to ensure compliance and deter trading and bullying should be adhered to and audited.

4.20 **Prisoners receiving a night-time dose of a medicine should be able to receive the dose at an appropriate time. (4.60)**

Partially achieved. Most patients requiring a night time dose were given their medication in possession daily. However, this was secondarily dispensed by nursing staff, which was inappropriate.

Further recommendation

- 4.21 The use of night sedation should be reviewed and if in possession is thought suitable, a policy should be developed and followed.

4.22 **The complicated Cardex system for issuing prescriptions should be discontinued, and a prescription and administration record sheet introduced. (4.61)**

Achieved. A new medication administration chart had been introduced, but it described patients as 'inmates' and did not differentiate between daily in possession and see to take medication. It was difficult to determine what the current medication was at any one time. Current in possession risk assessments were stapled to the front of the charts. Prescriptions were issued using the EMIS computer system.

Further recommendation

- 4.23 The medication chart should be further adapted to include the in possession risk assessment.

4.24 **The method of ordering medications should be revised to ensure a system that has robust auditing to reconcile prescriptions against orders. (4.62)**

Achieved. Prescriptions were faxed to the supplying pharmacy and were checked off on receipt against a copy kept by the prison.

4.25 **A repeat slip system for patients who have had their medication written up for 84 days should be introduced. (4.63)**

Not achieved. There was no repeat slip system and, as the maximum amount of medication prescribed was 28 days, prisoners had to request repeat medications more often. Similarly, the GPs spent too long rewriting prescriptions for long-term medications. As nurses wrote out a full list of medications to be re-prescribed daily for the doctors, a large amount of clinical time was wasted that could have been better used to see patients.

We repeat the recommendation.

4.26 **Nurses should follow the NMC guidelines for the safe administration of medications. (4.64)**

Not achieved. There was widespread secondary dispensing every day and medication charts appeared to be signed by staff before or after administration rather than at the time. We observed nurses administering medications to prisoners on the house landing rather than from a secure environment, which was unsafe.

We repeat the recommendation.

Further recommendation

4.27 Medications should be administered from a safe environment.

4.28 **Prisoners should be provided with lockers in which to store prescribed medicines. (4.65)**

Not achieved. Staff said this prevented larger amounts of in possession medication being given to patients. A trial scheme was in operation on Bann House, but the lockers provided were on a landing rather than in cells so could not be accessed when prisoners were locked up. Prisoners therefore tended not to use them and the scheme was seen by some staff to be a waste of time.

We repeat the recommendation.

4.29 **Formal clinical governance arrangements should be put in place for recording pharmacy interventions, and adverse incidents such as errors. (4.66)**

Achieved. A system of recording errors, near misses and other incidents had been introduced and was being used.

4.30 **Smoking cessation services should be introduced. (4.67)**

Achieved. Two staff were trained to deliver smoking cessation courses, which could be requested by prisoners themselves or through the GP. There were 32 on a waiting list. Staff ran two groups a week, with sentenced and remand prisoners in separate



groups. Prisoners had an initial assessment before joining the group, four weeks of group sessions and visits by the staff to their house. However, the course was cancelled if there were staff shortages so there was no guarantee of continuity. Only one of the nine prisoners who started the last course had completed it. Results were not reported to the partnership board or South Eastern Health and Social Care Trust. Prisoners were given nicotine replacement patches, but these had to be prescribed by a GP, which added an unnecessary task to the GP's schedule.

Further recommendations

4.31 Smoking cessation staff should be able to administer nicotine replacement patches using patient group directions.

4.32 Smoking cessation courses should not be curtailed due to staffing issues.

4.33 **The use of strip clothing in healthcare should be recorded in a central register. (4.68)**

Not achieved. While the use of strip clothing was recorded on a CRC1 form, this was filed in the individual prisoner's file and there was no central register.

We repeat the recommendation.

Additional information

4.34 Since April 2008, health services had been commissioned by the Eastern Health & Social Services Board and provided by the South Eastern Health and Social Care Trust. The Prison Service had been planning such a change for some years in order to improve the delivery of health services to prisoners, but obtaining the necessary Ministerial agreements to implement the changes has taken longer than envisaged. While there was evidence of some good strategic vision to develop services, inevitably the delays had caused uncertainty among health services staff and others and had hampered the introduction of several initiatives including the GP contract. Further uncertainty was caused by the imminent reorganisation of the Northern Ireland Health and Social Services. The partnership board was attended by providers and commissioners and the Governors of all three Northern Ireland establishments, but the consultant psychiatrists did not attend. There was no up-to-date health needs assessment or action plan to identify service needs. There was a clinical governance committee for the three establishments, but there was a lack of clinical policies and protocols. Prisoners had a separate complaints system for complaints relating to health services and this was well known to discipline staff and prisoners.

4.35 There was a lack of monitoring of activity and no safeguards or checks to assure patient care. Unexplained injuries were not followed up. The clinical notes on one man with a black eye that had obviously been sustained in the previous few days stated that his account of the event was vague and inconsistent, but the injury had not been followed up. Lists such as those for outside hospital appointments, GP attendance, vaccinations and waiting lists for allied health professionals including the



physiotherapist and optician were not checked or analysed. Thirty-four out of 140 outside hospital appointments had been cancelled for a range of reasons in the previous three months, but no action had been taken and staff were surprised that such monitoring would be expected.

- 4.36 The healthcare manager was a principal healthcare officer. He reported to the assistant director of prison health, who was one of only four employees of the South Eastern Health and Social Care Trust, as all other staff had maintained their prison conditions of employment as part of the transfer of responsibility arrangements. There were four senior managers, each of whom took responsibility for a different work stream, namely primary care (two managers), mental health and in-patients. There was no formal clinical supervision for staff, although training for this had started.
- 4.37 The healthcare department environment was reasonable, as were most clinic rooms on the houses, but there was no evidence that an infection control audit had been undertaken. The waiting room was stark, with no posters or health promotion displays. The whole department was due to be refurbished shortly after the inspection and there were plans to alter the layout of the in-patient unit. The in-patient unit provided limited therapeutic interventions and care plans were not individualised. Some of the in-patients were on the unit due to frailty rather than any specific clinical need. There was a defibrillator on every house and discipline staff and prisoners on Wilson and Martin Houses had been trained in its use.
- 4.38 Primary care services were rudimentary due to staffing shortages. There was no monitoring of life-long conditions in line with Department of Health guidance, or nurse-led clinics. Prisoners were not offered Hepatitis B vaccinations. Care of those with physical health problems on the houses was limited. There were no care plans for those requiring nursing interventions and we met one prisoner who was dressing his own leg wound and who had to request dressings from nursing staff when he could. There was no lead nurse for older people. Prisoners could not get condoms or other barrier protection.
- 4.39 The dental surgery had last been refurbished in 2000. It had access for prisoners with disabilities and was spacious and well decorated. The dental chair, operating light, x-ray machine and cabinetry were fairly modern and in good working order. An amalgam separator was incorporated. A connecting decontamination room containing the ultrasonic cleaning bath and autoclave also housed the x-ray developer. Cross-infection control procedures were very good, with widespread use of disposables in accordance with current guidelines. However, there was no washer-disinfector. Clinical and hazardous waste was appropriately stored. Relevant documentation was in place. Emergency resuscitation equipment was stored in a locked cupboard in another room beyond a gate in the healthcare wing. The dentist did not have a key to the cupboard.
- 4.40 Dental records were maintained on EMIS. The standard of record-keeping and radiograph management by the dentist was very high. Monthly statistics on clinical activity were submitted by the dentist to the Trust. A full-time dentist and dental



surgery assistant were employed by the South Eastern Health and Social Care Trust. Cover for absences had been problematic, but a new dentist had recently been appointed to improve this. Prisoners were told about the service on admission and an application for dental treatment could be submitted at any time. These were entered on the PRISM system, which was checked daily by the dental surgery assistant, when all applications were taken off the system and duplicate/repeat applications recognised. Patients requiring urgent treatment were treated that day, while patients deemed 'routine' from triage or application were put on a waiting list. Waiting time for routine treatment was three months, which was too long. About seven patients were treated at each session and prisoners were positive about the treatment they received. Treatment time was frequently lost, usually at the beginning of each session, due to inefficient escort arrangements. A full range of health service treatment was offered and, once started, courses of treatment were completed efficiently. There was a recall system for long-stay prisoners. Oral health education was delivered at the chair side, there was a full range of oral health education leaflets and useful wall displays in the surgery and the adjacent corridor.

- 4.41 Mental health services were minimal. This was hampered by a general shortage of registered mental health nurses in Northern Ireland. There were eight consultant psychiatry sessions plus sessions from junior staff, but not all patients seen by the consultants were also supported by the mental health nursing team. There was no single point referral meeting. The nursing team consisted of six nurses plus the manager, but the off duty rota meant there were some days when none of the team were on duty. They had a waiting list of nearly 40 patients, some of whom had been allocated a nurse at least six weeks previously, but had not been seen. The team was supposed to provide support to the REACH landing, but this was lacking. There were no counselling services or day services. REACH landing lacked enhanced mental health services and therapeutic interventions. Prisoners requiring transfer to secure health services mental beds often had to wait many months while assessments were carried out and arrangements for transfers put in place.
- 4.42 Health service discharge arrangements were poor and inconsistent. Prisoners without a GP were merely advised to contact the Central Services Agency to be allocated one. Staff were not clear how to ensure continuity of care for those with mental health problems that required ongoing support in the community. We were told that the SE Trust's plans to select discharge nurses to fill this gap were at an advanced stage.



Further recommendations

- 4.43 There should be relevant clinical policies and protocols in place.
- 4.44 There should be management scrutiny and challenge of data to ensure equity of service and maintenance of targets.
- 4.45 Care plans for in-patients should be individualised.
- 4.46 The in-patients unit should not be used to house those less able to cope on the houses.
- 4.47 Prisoners with life-long conditions should receive care in line with national guidelines and evidenced-based practice.
- 4.48 Prisoners with physical health needs should have individualised care plans.
- 4.49 There should be a lead nurse with sufficient seniority and knowledge for the care of older people.
- 4.50 Prisoners should be able to obtain condoms and other barrier protection.
- 4.51 A washer/disinfector should be installed in the dental surgery.
- 4.52 Patient escort arrangements should be improved to reduce wasted clinical time.
- 4.53 Dedicated resuscitation equipment should be kept in the dental surgery.
- 4.54 There should be comprehensive arrangements for the mental health of prisoners on the REACH unit.
- 4.55 There should be a single point referral meeting for all mental health referrals and a multidisciplinary approach towards mental health care.
- 4.56 Patients requiring secondary or tertiary mental health services should be transferred expeditiously.
- 4.57 Prisoners being released should be given information and assistance to access health and social care services and support in accessing the services if required.
- 4.58 Prisoners with mental health problems being released should be referred to community mental health services teams to ensure continuity of care.







Learning and skills and work activities

Expected outcomes:

Learning and skills provision meets the requirements of the specialist education Inspectorate's Common Inspection Framework (separately inspected by specialist education Inspectors). Prisoners are encouraged and enabled to learn both during and after sentence, as part of sentence planning; and have access to good library facilities. Sufficient purposeful activity is available for the total prisoner population.

5.1 **A wider range of education courses should be offered to meet the needs of more prisoners. (5.12)**

Not achieved. Although the number of education places had increased slightly, the amount and range of provision including progression opportunities were wholly inadequate to meet the needs of most prisoners. No prisoners could engage in full-time education and the number of sessions was restricted to only three a week, with most attending only two.

We repeat the recommendation.

5.2 **More opportunities, particularly essential skills classes, should be provided for remand prisoners. (5.13)**

Not achieved. Although the range of provision had increased a little, particularly English for speakers of other languages, there was still very little for those on remand.

We repeat the recommendation.

5.3 **Prisoner movements should be better managed to improve attendance and punctuality at education classes. (5.14)**

Partially achieved. Punctuality in the mornings had improved, but prisoners frequently arrived late for afternoon classes and left early, resulting in very short sessions.

We repeat the recommendation.



5.4 Measures should be taken to increase general work opportunities, allowing prisoners to acquire relevant employment skills. (5.22)

Not achieved. The proportion of prisoners with meaningful work had not increased and most prisoners were not allocated to any work activity. Many of the existing opportunities were not used.

We repeat the recommendation.

5.5 Remand and separated prisoners should have the opportunity to work. (5.23)

Not achieved. Most remand prisoners, who represented half the population, still had no opportunities for work and there were still insufficient work opportunities for separated prisoners.

We repeat the recommendation.

5.6 Prisoners should arrive at their workplaces as scheduled. (5.24)

Achieved. Punctuality at vocational training and work had improved in that prisoners arrived on time, but general attendance across training and work remained poor and many left earlier than scheduled.

5.7 Library opening hours should be increased to offer more sessions in the evenings and at weekends. (5.15)

Partially achieved. The library opening hours had increased to include Wednesday evenings and all day Saturday, although the library did not always open on Saturdays as officers were often redeployed to other tasks. In the previous 10 months, the library had been closed for 63% of the time at the weekend. There had been a 14% decline in the number of prisoners using the library since 2006/07.

We repeat the recommendation.

5.8 More materials for those with learning difficulties should be stocked in the library. (5.16)

Achieved. There was a range of 'quick reads' and talking books for the less confident reader. There were sufficient resources to support those with literacy and language needs.

Additional information

5.9 The education department was managed by a full-time education manager and three senior teachers. They were supported by five full-time and eight part-time teachers. All were employed by the Northern Ireland Prison Service (NIPS). Five further part-time teachers were employed by the Prison Arts Foundation and another two by Belfast Metropolitan College. The range of education provision had increased slightly and included some provision in areas of the prison such as the separated units, the vulnerable prisoners' unit and the remand houses. However, it did not adequately meet the learning needs of the whole population.

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- 5.10 The learning experience for most prisoners who accessed education was good, but this was less than half of all prisoners and no one could attend more than three sessions each week. There were good links with the Prison Arts Foundation, which offered a range of creative courses. The curriculum for prisoners on remand and those on the committal wing was restricted. There were long waiting lists for a number of courses including essential skills numeracy and literacy, and information and communication technology. Support for the development of literacy and numeracy skills in the workshops was available for a small number of prisoners. In almost all sessions observed, learners' achievements were good. The standards of teaching and learning were good or better and there were good working relationships between tutors and learners.
- 5.11 The range of vocational training programmes had improved to reflect employment opportunities. However, the number of training places had not improved and, at 80, remained insufficient. Despite this, less than half the workshop places were occupied. For those who participated, the quality of the training was mostly good and most prisoners who completed their training achieved a vocational qualification, mainly at level 1. Too few prisoners progressed to level 2. The standard of work completed by prisoners was generally good. The accreditation of relevant vocational qualifications for the acquisition of skills by prisoners working in the kitchens and the gardens remained poor.
- 5.12 Many prisoners did not have access to some of the good quality placements in the prison. Access was particularly poor for prisoners on remand and those in the separated units.
- 5.13 The library was managed by NIPS and stocked by the South Eastern Education and Library Board. It was staffed full-time by two prison officers, one of whom had an appropriate library qualification. Access was provided for most prisoners and use was monitored daily and monthly.

Further recommendations

- 5.14 The strategic management of prison education, training and work provision, including other areas of prisoner support, should provide a coherent and integrated service.
- 5.15 Data should be used effectively to identify areas for development and set key targets to measure improvement.
- 5.16 The arrangements for quality assurance for education, training and work, at all levels in the prison, should be developed further to identify and address key areas for improvement.



Physical education and health promotion

Expected outcomes:

Physical education and PE facilities meet the requirements of the specialist education Inspectorate's Common Inspection Framework (separately inspected by specialist education Inspectors). Prisoners are also encouraged and enabled to take part in recreational PE, in safe and decent surroundings.

5.17 Prisoners on the committal wing should have regular access to the gym and other PE facilities. (5.30)

Achieved. Prisoners on the committal wing had access to two gym sessions a week.

5.18 A wider range of accredited courses should be offered. (5.31)

Achieved. A suitable range of sports and first aid qualifications were available and success rates were good.

Additional information

5.19 The physical education (PE) provision was led effectively by a principal officer, supported by two senior officers and 11 instructors. All staff had developed their skills through participation in a wide range of courses in areas such as sports therapy, first aid, sports coaching and outdoor education. Staff interacted effectively with prisoners and offered helpful assistance to them as they took part in the various activities. These included indoor soccer, volleyball, basketball, badminton and other activities such as short mat bowling. The prisoners attending the gym, including a good proportion of foreign national prisoners, developed their levels of fitness through resistance and free weight training and the use of cardio-vascular machines. Staff provided opportunities for them to raise their self-esteem through participation in occasional intra-mural competitions and fund-raising events for charities.

5.20 Indoor facilities were very good and included a large sports hall, a gym with resistance machines and free-standing weights as well as a good range of cardio-vascular machines. The indoor facilities and equipment were kept very clean. Each residential unit also had a stationary bicycle, a cross-trainer and a rowing machine. Outdoor facilities included one grass and two all-weather pitches. The grass pitch was unplayable during the winter. Separated prisoners used the astroturf pitches and a smaller gym equipped with resistance machines, free-standing weights and a range of cardio-vascular machines.

5.21 Vocationally relevant qualifications were provided in teaching, exercise and fitness and in fitness instructing. Other award-bearing courses included introduction to resistance training and using free weights and machines. For prisoners who opted for the award-bearing courses, achievements and outcomes were good. The PE department also delivered a Duke of Edinburgh Award scheme that promoted teamwork and mutual



respect. The prisoners who attended the gym regularly were positive about the opportunities for recreational PE as well as the courses on offer. There was scope to offer higher level and health promotion courses.

- 5.22 The changing and showering facilities were acceptable, but some areas were still difficult to supervise. Clean kit, fresh towels and shower gel were offered to all prisoners each time they used the gym.

Further recommendations

- 5.23 Higher level courses should be developed to meet the needs of more able prisoners and prisoners serving longer sentences.
- 5.24 Health promotion courses should be developed in collaboration with healthcare to educate all prisoners in how to maintain a healthy lifestyle while in prison and after release.

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 the life of the establishment and contributes to the overall care, support and resettlement of prisoners.

- 5.25 **All new prisoners should be asked if they wish to see a chaplain or priest on reception, and should be able to see one within 24 hours if they wish to do so. (5.43)**

Partially achieved. Prisoners were not routinely asked if they wished to see a chaplain or priest on reception or on the induction landing, but they were seen at committal interviews by a chaplain and offered a visit from a minister or priest from their denomination or faith. It was not possible to guarantee prisoners a meeting with a representative of their own faith within 24 hours.

Further recommendation

- 5.26 Prisoners should be asked in reception if they wish to see a chaplain.

- 5.27 **A multi-faith room should be provided. (5.44)**

Achieved. A multi-faith room had been in use for about 12 months. It was an adequate size for the number of prisoners using it, clean and freshly decorated. The room was used every Friday for Muslim prayers, but had no specific washing facilities. A washbasin in a nearby toilet provided running water.



5.28 Segregated prisoners in the SSU and vulnerable prisoners located in Lagan House should have access to services at appropriate times and in a location suitable for services. (5.45)

Not achieved. Services were not provided for prisoners in the special supervision unit (SSU) or vulnerable prisoners in Lagan House, whose only access to the chaplaincy was through individual visits.

We repeat the recommendation.

5.29 Prisoners in Martin House should be able to attend relevant services. (5.46)

Achieved. Prisoners on Martin House were not prevented from attending services, but none did so. As with attendance at healthcare appointments, prisoners coming in to Maghaberry from the Mourne House complex were subject to strip searching, which acted as a deterrent to attendance.

5.30 Chaplains should not be denied access to segregated prisoners in the SSU, unless there is a serious temporary security emergency. (5.47)

Not achieved. Chaplains said they were on occasions denied access to the SSU for reasons such as meetings being held, adjudications taking place and staff shortages. This was disputed by SSU staff, but we had no reason not to accept the chaplaincy account.

We repeat the recommendation.

5.31 Prisoners should be escorted to the chapel for pastoral visits when requested by the chaplains. (5.48)

Not achieved. All pastoral visits took place on the wings in cells, kitchens or common rooms. The chaplains made the best of this situation, but it did not provide a suitable environment or an acceptable degree of privacy.

We repeat the recommendation.

5.32 Chaplains should be consulted routinely about all prisoners they are involved with, and regularly invited to meetings concerning the strategic management of important aspects of prisoner care, such as suicide and self-harm prevention, anti-bullying and resettlement. (5.49)

Achieved. Chaplains were invited to attend meetings concerning the strategic management of important aspects of prisoner care.

Additional information

5.33 The chaplaincy team comprised full and part-time chaplains with part-time administrative support. The Christian denominations represented were Roman Catholic, Presbyterian, Methodist, Church of Ireland and Free Presbyterian. A Muslim chaplain attended every Friday and a Buddhist priest was available when required.

5.34 Following a recent review, the chaplains were not directly employed by the Prison Service, but provided by their respective organisations under service level agreements.



Existing chaplains felt this change had been poorly handled with inadequate consultation. The coordinating chaplain intended to undertake his own review over the coming year.

- 5.35 Services on separated wings, in healthcare and on the committals landing took place in rooms that were not always private and sometimes used simultaneously by other prisoners for domestic purposes. A separate service was held in the chapel for sex offender prisoners on Sundays.
- 5.36 The chaplaincy was involved in several aspects of prison life. Chaplains accompanied some prisoners on day release if they were visiting areas deemed unsafe by prison officers. They were invited to a range of prisoner care meetings, but did not always attend.

Further recommendations

- 5.37 The coordinating chaplain should establish an effective system for chaplaincy representation at prisoner care meetings.
- 5.38 Religious services on the separated wings should take place in uninterrupted private rooms.

Time out of cell

Expected outcomes:

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

- 5.39 **More time out of cell should be provided for all prisoners. (5.55)**
Not achieved. The core day had been restructured to provide working prisoners with more time in the work place, but many prisoners were still locked up for 20 to 21 hours a day. Although slightly longer than at the previous inspection, the core day was still short.
We repeat the recommendation.
- 5.40 **Regime activities should start and finish at the published times. (5.56)**
Not achieved. The core day was not published to prisoners and there were frequent delays to unlock times.
We repeat the recommendation.
- 5.41 **Better equipment should be provided in association rooms. (5.57)**
Achieved. Association areas were mostly well equipped with items such as pool tables, table tennis and darts boards. All areas had some gym/cardiovascular equipment, which was well used. Recreation rooms on the separated units also had showers.



Additional information

- 5.42 There had been some changes to the regime in that working prisoners were expected to participate in a working day that was more comparable to real working life. This meant they were not returned to their units and had lunch in their work place in a specially built canteen area. Those on the wing either unemployed or not required could participate in morning and evening association or lunch time association, with the regime changing every other day depending on which landing a prisoner was located. This meant unoccupied prisoners could have three periods of association every two days.
- 5.43 There was no standardised core day and a different regime ran on each wing. The core day was not published to prisoners and many said there were frequent changes depending on staffing levels and who was on duty. The written core day stated that most prisoners should be unlocked between 8am and 8.15am, but staffing arrangements did not allow this and the reality was 30 minutes later. There were also different routines within wings and some scope for staff to place their own interpretation on the core day.
- 5.44 Our roll check during the morning period indicated that 42% of prisoners were locked in their cells, which was slightly worse than at the previous inspection. No record was kept of how long prisoners spent out of their cells, although the prison stated a constructive activity figure of around eight hours for remand prisoners and 19 hours for sentenced prisoners. It was not clear how this was achieved. Remand prisoners were not allowed to work and there were not enough jobs for sentenced prisoners. Punctuality at work was also frequently poor (see section on learning and skills and work activities) and many places were unoccupied.
- 5.45 There were also frequent delays to morning unlock times. Apart from the lifer units and a few designated landings on the sentenced units, most wings operated a system of 'controlled unlock', which meant only a designated number of cells were opened at one time. This delayed serving meals and meant prisoners had a very short window in which to get a meal, have a shower, or carry out any other landing activities. On some remand units, those not at court were not let out until after 9.30am. With the exception of very few landings, there was no landing association. During activity periods, prisoners could participate in full association, which meant being locked in an unsupervised (except for camera cover) association area and exercise yard. Some chose not to do this and remained in their cells. No record was kept of who declined association. All exercise yards were bleak and dirty.
- 5.46 Prisoners and staff said association was rarely cancelled, but this was not recorded centrally. A record kept on one of the sentenced units indicated that one landing was shut down during the evening about once a week.

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- 5.47 Some areas operated a system of 'in-cell association' where prisoners could elect to be locked in their cell with a friend when they were not due for communal association. This was restricted mostly to enhanced prisoners and there was a limit on numbers.
- 5.48 Life on the separated landings for loyalist and republican prisoners (Bush and Roe Houses) was more restrictive, with staffing levels of five staff to three prisoners out at any one time. This also affected the non-separated side of Bush House, which accommodated prisoners who could not mix with the main population due to their offence or history. These prisoners had less access to the regime. Other than orderlies, there was no work and access to the gym and library was less than for the main population.
- 5.49 Working prisoners were often not unlocked until about 20 minutes before they were required at work and were often locked up very quickly after returning, leaving insufficient time to have a shower. This was a particular problem for those in construction workshops. Some staff were willing to arrange for individual prisoners to get out to complete particular tasks or use the telephone, but this relied on staff discretion and was not predictable.
- 5.50 Prisoners on Martin and Wilson Houses had a much better regime with courtesy keys to their cells and time out of cell in some cases until 11pm at night. Glen House, which accommodated vulnerable prisoners, did not offer any work apart from some cleaning opportunities and prisoners could spend up to 21 hours a day locked up.

Further recommendations

- 5.51 The core regime day should be published to prisoners and adhered to.
- 5.52 Controlled unlock on the main units should cease.
- 5.53 Periods of landing association should be available on all non-separated wings.
- 5.54 Non-separated prisoners on Bush House should not be subject to the same restricted regimes as those who have elected to be separated.





Security and rules

Expected outcomes:

Security and good order are maintained through positive 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.

6.1 Security systems should be flexible enough to recognise and adapt to the fact that most prisoners at Maghaberry present only a medium risk. (6.13)

Not achieved. There had been changes to the security classification system but there had been little change in the strong emphasis on overarching physical and procedural security. Security systems were rigidly applied regardless of perceived risk from individual prisoners and, although most continued to be classified as medium risk, in practice this made little difference to how they were treated.

We repeat the recommendation.

6.2 The prison should introduce less restrictive procedures for moving prisoners around internally, particularly on the separated units, where the arrangements were unnecessarily restrictive. (6.14)

Not achieved. The high levels of physical security continued to restrict some aspects of regime delivery. A controlled free-flow system allowed mainstream prisoners to move to education and workshops from the normal residential units twice during prescribed periods in the core day. Movement at other times was restricted because only very small groups of prisoners could be escorted at one time to other areas by staff. As a result, general movement around the site was slower than at comparable prisons. The restricted movement system used on the separated units had not changed. Only three prisoners were allowed out at any one time, with no less than five staff present. Prisoners could be rub-down searched up to three times when covering a very short distance, still in full view of staff at all times. This was in spite of the fact that we were told that instructions had been issued by HQ to prevent this.

We repeat the recommendation.



6.3 Prisoners' cells should be searched respectfully and left in a decent condition afterwards. (6.15)

Not achieved. Searching of residential units, including prisoners' cells, was primarily carried out by the dedicated search and standby team (SST) as part of a searching schedule generated by the security department. Residential staff continued to carry out routine cell searches each month. As at the previous inspection, many cells searched by the SST were left in an unacceptable condition. Regular landing staff then had to deal with the angry prisoner as the SST left the area as soon as they had finished the search. We were told that pressure to complete targets meant the SST did not always have time to leave all cells in the condition they found them.

We repeat the recommendation.

6.4 The security department should acknowledge all security reports submitted by staff. (6.16)

Achieved. Security information reports had to be submitted by staff directly to the security office (see additional information). All were acknowledged on receipt, usually by a senior officer.

6.5 Attendance at the security committee should be increased, with greater representation from non-security staff. (6.17)

Not achieved. Security committee meetings were scheduled monthly, but were often cancelled. Meetings were generally poorly attended and did not extend far beyond the security department. The standing agenda was weak and did not include security reports from other important areas such as residential units, resettlement or activities.

We repeat the recommendation.

6.6 Decisions on a prisoner's security classification should not be taken by a single officer. (6.18)

Achieved. Categorisation procedures had improved and the individual risk of prisoners was assessed using a risk algorithm that clearly showed how decisions had been reached. All decisions were ratified by the principal security officer, the security manager and, in the case of most category B prisoners, the deputy governor. Decisions on category A prisoners were ratified at Prison Service headquarters.

6.7 All prisoners should have their security classification reviewed at least annually. (6.19)

Achieved. A system had recently been introduced to ensure that prisoners' security categories were reviewed annually. Senior managers reviewed all cases except category A prisoners, which were done at Prison Service headquarters.

6.8 The role, selection, training and oversight of the SST should be re-examined to ensure that that the team operates effectively and respectfully throughout the prison. (6.20)

Not achieved. The number of SST officers had been reduced from 48 to 40, but there had been no meaningful review of their role, training or oversight. We were told



that the reduction in the team's size had been caused by a reduction in some searching targets and the fact that it no longer provided staff to run the segregation unit (see section on segregation). Its primary role was to carry out searching according to the prison's search targets and to respond to all general alarms. Management arrangements had not changed and its day-to-day operation was still the responsibility of a principal officer supported by four senior officers. Governance beyond this was unclear.

- 6.9 The SST continued to have a disproportionate influence in the prison. It had its own culture and its presence was in evidence everywhere. Although search targets were met and there were regular finds of mobile telephones and drugs, results were not excessive given the size of the prison and not more than we would expect to find in comparable prisons without dedicated search teams. The daily regime was often disrupted by the routine lockdown of a whole area to facilitate an SST search. During a single incident, the movement of the entire prison was stopped, regardless of its extent or location, until the SST gave authority for it to continue. Although incidents involving the use of force were not higher than in comparator prisons without dedicated response teams, the prison could not be unlocked in the morning without confirmation that at least eight SST officers were on duty to provide incident response.
- 6.10 Prisoners said team members were disrespectful and particularly intimidating. Many complained that there was little to control their behaviour and that the SST not the Governor controlled the prison. Staff said that cells were not always left by the SST in the condition they were found. A high number of formal complaints from prisoners alleging assault by SST officers had not been adequately investigated and any complaints about the behaviour of SST staff were dealt with in house by the SST senior officer (see section on applications and complaints).
- 6.11 **The practice of the SST removing staff's keys from them during targeted searching is unnecessary, and should cease. (6.21)**
Not achieved. The practice continued despite a governor's order instructing staff not to hand their keys over to the SST during targeted searching. SST staff said residential staff preferred to hand the security of the unit over to the team during a search. Residential staff we spoke to said they were unaware of the Governor's order.
We repeat the recommendation.

Additional information

- 6.12 Maghaberry held prisoners of all security categories. Most prisoners' security classification was medium risk, although the presence of category A prisoners (123 including separated prisoners) and the separated paramilitary prisoners on Bush and Roe Houses meant there were high security levels for the entire prison.
- 6.13 There were effective systems to process information and use intelligence to inform risk assessments and links with outside security agencies were strong, but the number



of security information reports (SIRs) was very low for the size and complexity of the prison. An average of 45 SIRs a month had been received by the security department between July and December 2008, 18 a month fewer than at the previous inspection. Blank SIRs were not found on residential units or other areas where staff worked and the importance of their use was not promoted or explained. The relatively small number of staff using the system usually telephoned the information to the security department where staff transferred it to a form for processing.

- 6.14 Staff management of prisoners was on the whole over-controlled, levels of personal engagement were low, most staff spent too much time in offices when prisoners were unlocked and prisoners continued to be locked in communal rooms during association with no staff presence. The principles of dynamic security through proportionate engagement between staff and prisoners were restricted on the separated units as a matter of policy and discouraged by custom and practice everywhere else.

Further recommendations

6.15 Staff engagement with prisoners should be developed to improve dynamic security.

6.16 Staff should be actively encouraged to submit security information reports.

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.

- 6.17 **Punishment ranges for various types of offence should be agreed and published to staff and prisoners, to ensure consistency among adjudicating governors. (6.49)**

Partially achieved. A range of punishments had been agreed and published as guidance for adjudicating governors, but the information was not made available to prisoners. Cellular confinement was used too frequently as a punishment.

Further recommendations

6.18 The use of cellular confinement as a punishment should be reduced and confined to the most serious cases.

6.19 Punishment ranges should be published to prisoners.

6.20 **Prisoners given a punishment of cellular confinement should have their specific loss of privileges clearly set by the adjudicating governor, with no automatic loss of all privileges. (6.50)**

Not achieved. Adjudicating governors recorded the losses of privileges to accompany cellular confinement, but prisoners given cellular confinement automatically lost all privileges, including access to telephones and reading and writing material.

We repeat the recommendation.

Further recommendation

6.21 Prisoners should not lose access to telephones and writing or reading material as part of their punishment at any time.

6.22 **When a punishment of cellular confinement is given, a prisoner should be allowed to contact his solicitor by telephone immediately after the adjudication. (6.51)**

Not achieved. Prisoners given cellular confinement were not allowed to use the telephones. Staff said officers could call the prisoner's solicitor on his behalf, but prisoners said this did not happen.

We repeat the recommendation.

6.23 **Staff should complete use of force documentation immediately after every occasion when force is used against prisoners, before they go off duty. (6.52)**

Achieved. Managers ensured that staff involved in the use of force completed associated documentation directly following the end of the incident (see additional information).

6.24 **Governors who sign off use of force paperwork should, before countersigning it, satisfy themselves that all the documentation is present. (6.53)**

Achieved. All documentation we examined was complete. Completed documentation was taken to the security department where it was checked by a governor grade. Identified problems were dealt with immediately.

6.25 **All planned use of force interventions should be video-recorded. (6.54)**

Partially achieved. A system to video record all planned interventions had recently been introduced, but a lack of staff trained to operate the camera meant that most, but not all, incidents had been recorded.

Further recommendation

6.26 Enough staff should be trained to operate the video camera to ensure that all planned use of force interventions are recorded.



6.27 Duty governors should attend all planned cell removals. (6.55)

Achieved. Use of force records showed that all incidents involving the use of force were supervised by the duty governor.

6.28 Special accommodation should only be used for the purposes defined in the Prison Rules, and not following an indication from the passive drug dog. (6.56)

Not achieved. Use of the three special cells in the segregation unit (dry cells) had been clearly defined and met the definition of special accommodation as contained in the local security manual. Signs pasted to each door reminded staff that they were to be used only following authorisation from the governor. Despite this, some forms showed that special cells continued to be used following an indication by a passive drug dog or a positive response from a metal detector following a strip search. In each of these cases, there was no evidence of violent behaviour. We saw three examples of prisoners kept in these conditions overnight, one for over 24 hours.

Further recommendation

6.29 Special accommodation should be used only as a last resort for violent and unmanageable prisoners and only until the prisoner is no longer violent.

6.30 All use of special accommodation, including the unfurnished cell in healthcare and the dry cells in the SSU, should be designated as 'special cells' and separately authorised by a governor and a doctor, and regular observations should be made by staff at least every 15 minutes (6.57)

Achieved. All unfurnished cells had been designated special accommodation. All paperwork showed that they had been authorised and that levels of observation had been prescribed, but, as noted above, not all use was appropriate. Documents showed that the prisoner's mood and general conditions were adequately monitored, although a designated manager was not assigned to ensure that on-going monitoring was carried out as directed.

6.31 All use of special accommodation should be separately logged. (6.58)

Not achieved. There was no separate log to record the use of special accommodation.

We repeat the recommendation.

6.32 The high-security cell should be decommissioned and sealed off. (6.59)

Achieved. The high security cell had been decommissioned and was used as a store room.

6.33 There should be greater staff interaction with prisoners held in the SSU. This interaction should be recorded. (6.60)

Partially achieved. Relationships between staff and the few prisoners segregated under prison rule 32 (good order or discipline) at their own request or for their own protection were particularly good. Officers dealt with a small number of difficult



individuals respectfully using appropriate levels of care. These prisoners were unlocked for long periods during the core day and could use the unit's fitness room and attend offending behaviour programmes following an assessment of risk. Their cells had televisions and they could keep their personal property with them. Case management plans had been opened for all prisoners segregated under good order or discipline for longer than 28 days. Behavioural issues were identified and improvement targets were set and monitored in direct consultation with the prisoner.

- 6.34 However, most prisoners were located in the unit for cellular confinement punishment following adjudication. Relationships between staff and this group of prisoners were distant and had not improved since the previous inspection. Prisoners said they had not been treated well by special supervision unit (SSU) staff. We saw no evidence of this, but nor did we see any positive interaction and the regime was very poor. Prisoners had to keep most of their possessions outside in plastic crates or bags. Chains on all doors prevented them from opening fully so staff spoke to prisoners through a narrow gap even when the door was open. Exercise and daily showers were not always offered and no prisoners were unlocked with less than four staff present.

Further recommendation

- 6.35 There should be greater interaction between staff and prisoners segregated for cellular confinement.

6.36 **Prisoners entering the SSU should not be strip-searched without an individual risk assessment. (6.61)**

Not achieved. All prisoners were strip-searched on entering the unit, regardless of any perceived risk.

We repeat the recommendation.

6.37 **The SSU should be managed by residential staff, rather than by staff from the SST. All staff should be carefully selected to work there, and their selection should be approved by the governor. (6.62)**

Partially achieved. Staff from the search and standby team (SST) had been replaced by officers from the security group, many of whom had worked on the SST. Staff said they had been chosen for the role and we understood that their selection had been approved by the governor, but no selection criteria had been published and there was no formal selection process or assessment of skills. Managerial responsibility for the unit remained with the security group.

Further recommendations

- 6.38 All staff should be individually selected to work in the special supervision unit and their selection should be based on clear criteria.

- 6.39 The special supervision unit should be managed by the residential function.



6.40 The reasons behind the high use of force in the SSU should be investigated, and there should be routine analysis of all use of force data. (6.63)

Not achieved. The number of incidents involving the use of force in the SSU had reduced, but continued to be relatively high in relation to the numbers held there. Although information was collated, it was not analysed (see additional information).
We repeat the recommendation.

6.41 A means of keeping the SSU clean should be found other than the use of long-term prisoners as orderlies - such as utilising prisoners located in the SSU for their own protection. (6.64)

Not achieved. Two long-term prisoners were used as orderlies and continued to be resident on the unit.
We repeat the recommendation.

Additional information

6.42 The adjudication room was in the segregation unit. It was a good size, had adequate natural light and was furnished with a desk for the adjudicating governor and comfortable chairs for staff and the prisoner. There had been 568 adjudications opened from July to December 2008. Some charges were relatively petty, such as minor infringements of prison rules that could have been managed through less formal procedures. All hearings were tape recorded and those observed were well conducted. The prisoner was put at ease and addressed by his first name. The adjudicator took time to ensure that the prisoner understood the process before moving on and all were offered the opportunity to seek legal advice. Throughout the hearing, the prisoner could challenge the evidence and state his version of events. Where a hearing resulted in a finding of guilt, the prisoner was given details of the punishment and the appeal process. Although results of proven offences were noted and categorised, they were not communicated to adjudicators to identify trends and deal with particular problem areas as they arose. Adjudication standardisation meetings did not take place.

Use of force

6.43 Force had been used 353 times in 2008, a significant increase of over 200 since the previous inspection in 2005. Of the incidents in 2008, 171 involved use of control and restraint and 184 had resulted in a prisoner being 'close-escorted' to the segregation unit (SSU) or back to his own cell. This usually involved the prisoner being handcuffed and walked with staff supporting either arm, without use of control and restraint locks. Information including the nature of the incident, its location and the ethnicity of the prisoners involved was collated each month, but was not used to identify trends to inform possible changes in strategy. A use of force committee had been set up to monitor the quality of documentation, but its membership was limited to the SST and security managers. There were no strategic connections between the use of force



committee and the rest of the prison or links to an overarching violence reduction strategy.

- 6.44 Planned intervention was well organised and properly carried out and documentation was completed correctly. Proper authority was recorded and all incidents were appropriately supervised by senior staff. Prisoners were seen by healthcare staff immediately after a use of force incident.
- 6.45 The quality of records on the use of force following spontaneous incidents was good and there were examples where de-escalation had been used to good effect. Overall, the written reports from officers gave sufficient assurance that de-escalation was used as a preferred response.

Segregation unit

- 6.46 The SSU was located in the main prison compound near to the normal residential units. Accommodation was on two floors and consisted of 23 normal cells, three special cells (dry cells) and one observation cell (see section on self-harm and suicide). Living conditions on the unit were mostly acceptable. Communal corridors were clean, showers worked and screening provided appropriate privacy. However, the unit was dark with low ceilings and little natural light. There were no displays of art or any other normalising features. An annex added since the previous inspection provided a visiting area, small gym and well decorated interview room.
- 6.47 Normal segregation cells were an adequate size, although some were in need of refurbishment, flooring was cracked and most were deprived of natural light due to the proximity of the fenced exercise yard. Conditions in the three special cells were poor. They were dark, dirty and lacked furniture of any kind, with strip blankets placed on the floors.
- 6.48 A published basic regime for prisoners segregated for punishment and those segregated for a short time under rule 32 was impoverished and included showers and exercise only by application. Prisoners were required to be up and dressed before staff took applications at 8.30am, otherwise applications were forfeited. Tobacco was permitted for prisoners under good order or discipline, but lighters or matches were not. Prisoners had to ask staff for a light and said they were often refused.
- 6.49 Fourteen prisoners were held on the unit and all had been given the reasons in writing. Prisoners had daily access to a governor and the chaplain in private and a record of these visits was kept.



Further recommendations

- 6.50 Adjudication standardisation meetings should take place to allow adjudicating governors to analyse information about adjudications to ensure consistency, identify trends and deal with any emerging problems.
- 6.51 The regime offered to prisoners under cellular confinement should be improved to include daily access to showers, telephones and exercise without the need to make an application.
- 6.52 Segregated prisoners allowed tobacco should be allowed matches or a lighter following an individual assessment of risk.
- 6.53 Conditions in the special cells should be improved.

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.

- 6.54 **More help and support should be given to prisoners on the basic regime for more than four weeks. Officers should record what targets are required to progress, and show what support has been offered to achieve these. Prisoners should be encouraged to comment on their progress. (6.84)**
Not achieved. There were no individual plans to support and encourage prisoners to improve their behaviour on the basic regime. Behaviour improvement targets were not set and, apart from a cursory review every 28 days, there was nothing to show that officers engaged with prisoners on basic and talked to them about their situations. Entries in wing files were poor and gave no indication that staff were aware of the prisoner's circumstances or any motivating factors that might have been affecting his behaviour.
We repeat the recommendation.
- 6.55 **Prisoners on the basic regime should be given an opportunity to use the phone during the evening. (6.85)**
Not achieved. The regime for basic prisoners continued to involve too much time unoccupied in cells. There was no weekday association so prisoners were still unable to use the telephones in the evenings to contact their families.
We repeat the recommendation.

6.56 There should be an equitable application of the scheme for sentenced and remand prisoners. (6.86)

Achieved. There was a single scheme for remand and sentenced prisoners.

6.57 There should be improved monitoring of PREPS. (6.87)

Not achieved. No management checks took place to ensure that entries in wing files were fair, consistent and represented a balanced record of what had occurred or that reviews were consistent and timely. There was no routine monitoring of ethnicity, religion or how long prisoners spent on the basic regime.

We repeat the recommendation.

Additional information

6.58 The progressive regimes and earned privileges (PREP) scheme had been introduced for convicted prisoners in November 2000 and for unconvicted prisoners in March 2002. The scheme had been reviewed in 2006 and, although a document had been produced describing how a new scheme based on prisoner consultation was to be introduced, it had not been implemented.

6.59 The scheme was advertised on some landing notice boards and a leaflet explaining how it operated had been published and was issued to all new committals. The leaflet described the three incentive levels of basic, standard and enhanced. There was sufficient between the levels to encourage responsible behaviour. Sentenced prisoners on the enhanced regime received a £14 regime allowance, had opportunities for more visits and association and could have more telephone cards and tobacco. However, there was little use of the scheme to address the large number of prisoners who refused to go to work.

6.60 There had been little change in how the scheme operated. Movement through the levels was based on written reports in wing files about the prisoner's behaviour in terms of compliance with prison rules and level of engagement with the prison regime along with his general attitude towards staff and other prisoners. Prisoners could be recommended for promotion after four consecutive weeks of good reports and this was then endorsed by the unit senior officer. At the time of inspection, 330 prisoners were on enhanced, 354 on standard and 72 on basic. The quality of the written reports in prisoner files was generally poor and usually described single behaviours. This did not give assurance that officers knew much about the prisoner they were reporting on.

6.61 The voluntary drug testing programme was still an integral part of the PREP scheme. Many prisoners lost their status following a single positive drugs test or for refusing to participate in a test and some were demoted to basic for refusing to comply with the 'voluntary' drug testing programme. Prisoners had to provide a negative test for drugs before they could be considered for promotion.



6.62 A modified version of the scheme based on a two tier system had been introduced for prisoners in the separated units on Roe and Bush Houses. Tier one was equivalent to the standard level of the PREP scheme where prisoners kept the same privileges as they had prior to the system's introduction. Tier two was equivalent to the enhanced level of the PREP scheme and could be gained if the prisoner had a clear disciplinary record for three months, engaged in the prison regime and agreed to compliance drug testing. There was no basic regime.

Further recommendations

6.63 Prisoners should not be demoted to basic for failure to comply with voluntary drug testing.

6.64 Regular management checks should be conducted to ensure that the quality of entries reflects staff knowledge of the prisoner.

6.65 The progressive regimes and earned privileges scheme should be used to encourage attendance at work for sentenced prisoners.



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 Meal times should be revised, and the evening meal served after 5pm. (7.5)
Not achieved. Lunch was still served before noon and the 'evening' meal between 3.30pm and 4pm.

We repeat the recommendation.

7.2 All prisoners should be given training in basic food hygiene, and should be provided with appropriate personal protective clothing. (7.6)

Not achieved. Prisoners working in the kitchen received basic food hygiene training, but those working on the house serveries did not. Some, but not all, prisoners on house serveries wore aprons, hats and gloves to serve food and those who did not were not told to do so by supervising officers.

We repeat the recommendation.

7.3 Food temperatures should be checked at serving points. (7.7)

Not achieved. Food temperatures were taken before leaving the kitchen, but not at serving points. Many prisoners complained that food was cold or lukewarm.

We repeat the recommendation.

7.4 Additional catering staff should be recruited. (7.8)

Not achieved. The kitchen staffing levels included about 10 chefs, but there were actually only five. Staffing levels meant staff could not supervise any meals being served or receive first hand feedback from prisoners about the food.

We repeat the recommendation.

7.5 A healthy choice of menus should be introduced. (7.9)

Partially achieved. The menu operated on a three-week cycle and included three choices for lunch and three for tea. The menu indicated the 'low-fat' and 'no spice no onion' meal options. Although we were told that the menu was approved by a dietician, the catering manager was unaware of this.



Additional information

- 7.6 In our survey, only 20% of prisoners described the food as good and 69% described it as bad. There was no prisoner consultation about the quality of food and meal choice. The last survey had taken place in 2005. No food comments books were provided at serveries.
- 7.7 Many prisoners ate in cells with unscreened toilets (see section on residential units), although prisoners on some houses could eat together on their landings on a rota basis. Newly arrived prisoners on Roe House could not choose their meals and had to settle for what was sent to the unit. On the day we observed, there was no vegetarian option. Only the committal landing on Roe House had in-cell kettles. Other prisoners had to buy flasks. Drinking water was not available in cells on Foyle, Lagan, Bann or Erne Houses and prisoners had to collect drinking water from a dispenser.

Further recommendation

- 7.8 Prisoners should be regularly consulted about the menu and should be able to make comments about the food.

Prison shop

Expected outcomes:

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

- 7.9 **In addition to the annual survey, a forum should be established in which prisoners can be consulted regularly on such matters as items on the shop list. (7.17)**

Not achieved. The annual survey had received a response rate of 40% and shop managers were responsive to comments made, but there was no forum at which prisoners could be consulted.

We repeat the recommendation.

- 7.10 **Nationalist families should be able to order newspapers from a shop located in an area in which they feel comfortable. (7.18)**

Not achieved. The only shop available to families was near the prison, but orders could be made remotely by debit card.



Additional information

- 7.11 The tuck shop was run in-house and provided an adequate range of products. Although there was no consultative committee, the prison was responsive to the changing population and had, for example, made a new arrangement with a specialist local wholesaler to cater for the increasing number of Chinese prisoners. Prisoners were generally satisfied with the shop and 52% in our survey, compared with 22% in other local prisons, said they had access to the shop within the first 24 hours. More were also satisfied with the range of products, although this was less true among foreign national prisoners.
- 7.12 In addition to the standard shop list, prisoners could make a separate fruit order for up to 12 pieces of fruit a week. There was a specialist catalogue for hobby materials and a clothing/sportswear catalogue, although only prisoners who did not have visits could buy clothes three times a year. This placed additional financial burdens on families as prisoners were also prevented from sending money to families from their prison accounts. This was based on a Northern Ireland instruction to prevent illicit activity, but some prisoners said they had got round the system by, for example, buying canteen products for other prisoners who would then send items of clothes in exchange.

Further recommendation

- 7.13 All prisoners should be allowed to buy clothing out of their prison accounts or to send money out to families so that families are not adversely affected financially.





Strategic management of resettlement

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.

8.1 NIPS should seek to ensure that other statutory bodies play their part in the Northern Ireland Resettlement Strategy. (8.8)

Partially achieved. Maghaberry resettlement staff suggested that the Northern Ireland Housing Executive (NIHE) and Department of Health, Social Services and Public Safety (DHSSPS) were now adequately involved at operational level and had better working protocols than previously, including joint training. For example, the NIHE had changed its legislation to enable prisoners to apply for accommodation 30 days before release, which was a major improvement on the previous inspection.

8.2 Ironically, at a time when operational resettlement practice had improved significantly, the higher level resettlement strategy that was becoming well established at the previous inspection had faltered. The multi-agency steering group that was meant to coordinate all the participants had not effectively met since February 2008 and the full-time Northern Ireland Prison Service (NIPS) headquarters resettlement manager post had been downgraded to half-time. Some of this loss would, however, be offset by deployment of staff to deliver the new Criminal Justice Order.

8.3 Maghaberry should extend its resettlement planning strategy to cater more fully for short-term prisoners, remand prisoners and fine defaulters. (8.9)

Partially achieved. The resettlement approach, rather than strategy, took better account of short-term prisoners, but not remand prisoners or fine defaulters. A dedicated team comprising a governor 5, a principal officer, two senior officers and five prison officers and voluntary and community sector (VCS) workers had been in place since mid-2008. They had dedicated premises, clear working processes and roles and were due to increase further in size by Easter 2009.

8.4 Although less than a third of sentenced prisoners in our survey said they had a sentence plan, the fact that 277 sentenced prisoners had resettlement or lifer plans was a commendable achievement. Plans were opened on any consenting prisoner serving over three months, while prisoners serving less than three months had induction and pre-release interventions.



Additional information

- 8.5 There was no local resettlement oversight body at Maghaberry and six months of senior management team minutes showed that resettlement had been mentioned only once and then as 'not discussed'. The main oversight forum for resettlement was periodic meetings at NIPS headquarters for resettlement personnel from each establishment.
- 8.6 NIACRO, the Housing Rights Service and Barnardo's all had desks in the resettlement office and reported positive working relationships. All suggested good integration, clarity about boundaries and recognition of their roles. Dunlewey Substance Advice had separate offices in the resettlement area.

Further recommendation

- 8.7 A local resettlement policy committee should be established chaired by a senior manager and involving service providers to provide strategic development and direction for resettlement services.

Offender management and planning

Expected outcomes:

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

- 8.8 **Separated prisoners should be involved in resettlement planning. (8.17)** *Partially achieved.* There had been some progress in providing opportunities for separated prisoners to undertake resettlement planning, but these were almost entirely individually-based and situation-specific. As in most other respects, separated prisoners were very constrained by the highly secure nature of their residential arrangements and the limitations on their mixing with other prisoners.

Further recommendation

- 8.9 Resettlement staff should actively engage with separated prisoners to encourage participation in resettlement planning.
- 8.10 **Short-term and unconvicted prisoners should have a custody plan that specifies how their needs will be met during and after custody. (8.18)** *Partially achieved.* Plans were now opened on any consenting prisoner serving over three months, and prisoners serving less than three months had induction and pre-release interventions. However, there was no form of planning for those on remand, although they could be at the prison for some time.



Further recommendation

8.11 Unconvicted prisoners' resettlement needs should be assessed and appropriate interventions provided.

Life-sentenced prisoners

8.12 **A detailed strategy should be developed to meet the needs of potential lifers. (8.34)**

Partially achieved. There were about 100 prisoners on remand for murder and other offences that could attract an indeterminate sentence. While there was no strategy for potential lifers, there was a process for identifying them via the PRISM IT system and specialist governors interviewed them and recorded the discussion on a pro forma. We saw six files that contained pro formas signed by the potential lifer and a governor. A recently-sentenced lifer confirmed that the governor had interviewed him while he was on remand and outlined the possible scenarios. Staff were aware of potential lifers and made some concessions, including allowing one prisoner on remand charged with murder and anticipating a life sentence who needed time alone to have his own cell.

We repeat the recommendation.

8.13 **Life-sentenced prisoners should have their tariffs explained to them by a lifer-reporting governor. (8.35)**

Achieved. A pro forma had been introduced and provided an example of good practice in the lifer management process. There were records signed by prisoners and confirmed by individual lifers that governors had met them to explain their tariffs.

8.14 **All stages of life-sentence planning should take place within the required timescales. (8.36)**

Partially achieved. The annual lifer review process had become embedded and adhered to schedule. However, there was still a critical deficiency in Maghaberry's inability to deliver offending behaviour programmes at relevant times in relation to lifers' tariffs (see additional information).

8.15 **Lifers should be adequately prepared for their annual reviews. They should always be invited and encouraged to attend. (8.37)**

Achieved. We witnessed very good work by lifer governors in encouraging life-sentenced prisoners at all stages of their sentence to attend annual reviews and heard considerate and insightful contributions by staff at the reviews, even though they were not designated personal officers. However, apart from the annual reviews, it was suggested that only those lifers who were actively self-motivated were likely to achieve anything constructive during the early years of their imprisonment. We observed three annual reviews. The prisoners attended in each case and were engaged. It was clearly a challenge for staff to identify creative opportunities for lifers in their early years and prisoners' expectations were commensurately low.



8.16 There should be sufficient work and training to meet the needs of all life-sentenced prisoners. (8.38)

Not achieved. Lifers suffered the same insufficiency of work and training and delays in getting to work and education as other prisoners. About half of Erne House lifers remained in their house throughout the day and Maghaberry's December 2008 action plan update noted that '...matching suitable employment to prisoners, especially in Martin and Wilson Houses, remains a challenge.' Lifers complained that workshop programmes were unsuitable for their needs because they had been designed to last a maximum of six months to cater for the needs of short-term determinate-sentenced prisoners.

We repeat the recommendation.

8.17 All staff working with lifers should receive lifer training. (8.39)

Not achieved. Forty-two per cent of Erne/Mourne staff had lifer training. No lifer training had been delivered recently and it did not feature on the NIPS corporate training plan despite repeated representations by the lifer management unit (LMU) governors. Not all the officers at the prisoner assessment unit (PAU) had been trained, including the senior officer in charge, and a local arrangement at the PAU meant that night custody officers, who were not trained for engagement with any prisoners, were in contact with all the prisoners there, including lifers, each evening. The implications of this training deficiency could be important for lifers. They were reflected in complaints from prisoners about reports written with little or no consultation, occasionally by authors who barely knew them, disrespectful and subjective comments by staff, and negative application of the progressive regimes and earned privileges scheme that sometimes failed to take into account the disproportionate consequences for a lifer of punishments such as being 'backhoused' within the system.

We repeat the recommendation.

8.18 Lifer groups and lifer days should be introduced. (8.40)

Not achieved. The aim of this recommendation was to address and dissipate some of the tension among lifers who felt their voice was not being heard. However, lifer groups had still not been introduced. Apart from some Wilson and Martin House lifers meeting together informally to take group decisions about matters such as menus, there was no consultative process for lifers. The second half of the recommendation was only addressed in terms of 'family days' rather than days to actively consider the specific circumstances of a life sentence and help men understand the process. Even then, family days applied only to lifers on Wilson and Martin Houses and the last lifer family day had been held in 2007. A non-compliance notice was issued from NIPS headquarters in January 2009 to permit derogation in respect of lifer days due to building work on Wilson and Martin Houses.

We repeat the recommendation.

8.19 There should be a clear policy setting out the role and function of Martin House and the pre-release unit, as part of a staged pre-release progression route for life-sentenced prisoners. (8.41)

Partially achieved. Opportunities to progress to less secure conditions had improved in that Wilson and Martin Houses had become fully operational. They provided places for up to 40 prisoners. There were potentially up to 22 lifer places at the PAU in Belfast, with 10 allocated at the time of the inspection. However, the criteria for life prisoners to progress were not clear and included an inappropriate competitive element rather than an objective assessment of risk. There had been three 'competitions' for Wilson and Martin Houses during 2008. Thirty-five lifers applied and were successful, put on a reserve list or unsuccessful. Eleven applications were successful at first stage and most of the failures were due to late applications. Other applications were withdrawn as the prisoners preferred to remain in Erne House to continue their current work or for other reasons. The benefits of Martin and Wilson Houses were reflected in our survey, which showed that 37 areas (mainly resettlement, healthcare and purposeful activity) scored significantly better than the main prison. The basis on which life-sentenced prisoners were brought back from Wilson, Martin and the PAU was not always clear and some decisions to regress lifers to the main prison appeared to be based too much on particular incidents or behaviour rather than a formal and objective assessment of increased risk.

8.20 Life-sentenced prisoners in the PAU felt unsupported by staff there in their progress towards release and believed that officers waited for things to go wrong rather than encouraging and supporting them at this important stage of their sentence. There was a relatively high rate of return to the prison from the PAU, which suggested that lifers were not getting the help they needed. They described it as 'walking on eggshells'. Many thought they had been set up to fail and there were concerns about the apparently arbitrary nature of some of the suspensions from the PAU. No resettlement services were provided in the PAU such as housing and finance advice.

Further recommendations

- 8.21 The competitive element for lifer progression should be removed and replaced with equal opportunity for all to progress, subject to their tariff and risk assessment.
- 8.22 Decisions to regress life-sentenced prisoners from the PAU or from Wilson and Martin Houses should be based on a clear increase in risk factors indicating that the allocation is no longer appropriate and prisoners should be given full reasons for the decisions.
- 8.23 All life-sentenced prisoners in the prisoner assessment unit should have a staff mentor to support and encourage them in their progress towards release and to help with any difficulties encountered.



Additional information

- 8.24 Maghaberry's population of adult male lifers had increased from 142 to 169. Their tariffs ranged from one day to 35 years, with an average of 13 years seven months. Twenty-eight were recalled lifers and a further 26 were still in custody beyond their tariff expiry date (with a range of four months to 18 years beyond tariff).
- 8.25 Risk factors were identified at the outset of a life sentence through probation court reports and assessment case management and evaluation (ACE) risk assessments. However, many lifers were not given the opportunity to address their risks by undertaking offending behaviour programmes before tariff expiry. Purposeful activity for lifers was limited and 50% of Erne House prisoners remained in the house during the day.
- 8.26 Security categorisation of lifers had major implications for their progression through the system. Despite a re-categorisation exercise in 2008 that aimed to reduce the number of prisoners requiring high security conditions, 24 lifers were classified as category A and 103 as category B. Consequently, their opportunities for movement within Maghaberry or elsewhere in the prison estate were severely impeded. Maghaberry had made progress in that Martin and Wilson Houses now held some 40 lifers within a more relaxed environment than Erne House, although still within a high security perimeter.
- 8.27 Between January 2005 and June 2008, 24 lifers had moved from Maghaberry to the PAU. Of these, 13 were suspended and returned to Maghaberry, four were in the PAU in September 2008 and seven had been granted life licence. Although a small sample, the suspension rate of 54% was high.

Public protection

- 8.28 **A personal officer scheme should report fully on prisoners subject to MASRAM processes and/or other high-risk prisoners. (8.67)**
Not achieved. We were given an undated and untitled document that was basically a Maghaberry handbook. This outlined that a personal officer scheme had been introduced so that personal officers were assigned usually to two or three prisoners, but this was not the case. There was still no personal officer to provide a report on prisoners subject to public protection procedures. Seventy Maghaberry prisoners were subject to public protection arrangements, all of whom were sex offenders. All 169 lifers were risk assessed and risk managed for public protection purposes. Probation provided significant input to the public protection arrangements and provided the designated risk managers for 50% of public protection prisoners. The public protection arrangements for Northern Ireland had been introduced in



October 2008 to supersede the multi-agency sex offender risk assessment and risk management (MASRAM) process. The aim was to improve notification procedures between community and prison for remand and sentenced prisoners to ensure that no public protection cases were overlooked. However, some staff expressed reservations about the viability of important aspects of the procedures.

Further recommendation

8.29 A personal officer or other key worker who knows the prisoner well should report fully on prisoners subject to public protection arrangements and/or other high-risk prisoners.

Additional information

8.30 We were concerned about the risk of revictimisation under the NIPS temporary release policy whereby victims' representations were shared with a prisoner applying for home leave. In the event that he was unsuccessful or deferred, the prisoner might blame the victim for the weight attached to their representations and exact revenge after release.

8.31 Maghaberry Probation Board for Northern Ireland (PBNI) made 240 notifications to social services and MASRAM agencies between April 2007 and March 2008.

8.32 Minutes were provided of four inter-establishment child protection committee meetings in 2008. One of the main agenda items was to expedite introduction of two new child protection policies and procedures: for 'visits to, and communication with, prisoners who present a risk to children' and for 'children visiting prison establishments in Northern Ireland'. Neither policy was marked as a draft and both were dated April 2007. However, the November 2008 minutes stated that 'a wide discussion took place about the introduction of the new policy. It remains delayed as the South Eastern Trust have not yet finalised the details'. The status of the policies was unclear and it was not evident that relevant staff understood them or had received appropriate training.

Further recommendations

8.33 In order to protect third parties, prisoners should not be provided with victims' statements in relation to their applications for release on temporary licence.

8.34 Child protection policies should be up to date and relevant staff trained in the agreed procedures.



Offending behaviour programmes

- 8.35 Broadly based interventions should be provided that contribute to reducing re-offending by prisoners who are not eligible for offending behaviour programmes - including personal development, education about alcohol and substance misuse, and social skills. (8.51)**

Achieved. A good range of broader-based resettlement activities were provided in Maghaberry. These included GOALS, Alcoholics Anonymous, Barnardo's parenting programmes, Cruse bereavement care, the Duke of Edinburgh/Endeavour Award and the Toe by Toe reading programme. There were some specific provisions for lifers, such as approved Martin House residents undertaking shopping trips with staff.

- 8.36 Separated prisoners should be permitted to participate in offending behaviour programmes. (8.52)**

Achieved. Separated prisoners were now participating in programmes. Although numbers were small and the logistics were complicated, the situation had progressed to include lifers and determinate-sentenced prisoners from both traditions.

- 8.37 New programmes should be developed to address specific offending behaviours. (8.53)**

Not achieved. Whereas the April 2006 action plan suggested there would be new programmes to address domestic violence and sectarianism, these proposals had disappeared from the December 2008 action plan and there was no indication that they had ever materialised. Instead, a motivational enhancement and guidance (MEG) programme had been piloted, with small numbers, and, as with the existing offending behaviour programmes, it had a much longer waiting list than throughout.

We repeat the recommendation.

Additional information

- 8.38** Offending behaviour programme provision and delivery was inadequate. Some additional psychology staff had been recruited, some of whom were in training at the time of the inspection. This was intended to improve the rate of delivery. The database provided to us did not have a time period or targets. It suggested a waiting list of 130, of which 68 were lifers. Our analysis provided the following breakdown:

	Completed	To be assessed
Motivational enhancement and guidance	27	79
Enhanced thinking skills	13	100
Core sex offender treatment	1	16
Rolling sex offender treatment	1	17
Cognitive self-change	0	54



Further recommendations

- 8.39 Priority attention should be paid to undertaking the outstanding assessments and delivering offending behaviour programmes, especially for lifers who are approaching their tariff expiry date.
- 8.40 A clear process for managing offending behaviour programme referrals should be developed, with targets for delivery.

Reintegration planning

- 8.41 **Development of the NIPS estate should provide accommodation for different security levels to match the needs of the Northern Ireland prisoner population and allow prisoners to make planned progressive moves as part of their preparation for release. (8.60)**

Not achieved. A long-term estates review proposed by the Prison Service had not yet taken place. A new quick-build unit was planned, but was likely to be used by the increasing life-sentenced population. Many prisoners were moved to Magilligan Prison following sentencing, but many low or medium risk prisoners remained at Maghaberry in conditions of high security.

We repeat the recommendation.

- 8.42 **All prisoners should be provided with and made fully aware of services available within the prison to aid their reintegration. (8.61)**

Achieved. All prisoners were given an information booklet containing information about resettlement services and there was some publicity around the prison about what was available. Resettlement staff gave a presentation to newly arrived prisoners about the services available. In our survey, however, despite some good services provided, the level of awareness about services remained lower than in comparator prisons.

- 8.43 **Specific opening times and dedicated resources should be established for the throughcare centre, so that prisoners have predictable access to its services. (8.62)**

Achieved. The throughcare centre in the workshop area was staffed consistently by a multidisciplinary group of staff. The centre was staffed every weekday and staff were rarely taken out for other tasks. A wide range of services was available.

Additional information

- 8.44 The resettlement/throughcare unit had expanded, with a multidisciplinary team. Three uniformed staff were responsible for targeting throughcare services and there were usually another three responsible for carrying out resettlement needs profiles of the sentenced population. There were also two NIACRO workers, one of whom acted as



an outreach worker for prisoners being released to support them in finding employment. The advice worker was based two days in the prison and the remainder in the community with a caseload of around 30 prisoners. The other NIACRO worker was a fairly recent initiative and was responsible for running a job club course aimed at getting prisoners into employment and providing skills such as job interviews, CV writing and information about disclosure of criminal convictions. A benefits adviser was responsible for providing one-to-one advice and was able to give individual debt management advice.

- 8.45 Housing advice was given by a full-time housing rights worker who saw all new prisoners on induction irrespective of their status. The worker was responsible for practical support and guidance such as saving tenancy agreements, liaising with housing providers and advocacy on behalf of individuals. The housing worker was supported by three trained prisoner peer advisers. They were part of a group who had received a four-week course in housing advice and guidance and were well trained to carry out their role. However, they were not used to their full potential. Peer advisers attended induction and resettlement sessions and delivered a presentation alongside staff, but were not allowed to go on units to see new receptions in person and were not based on the first night/induction unit, which limited the work they were able to do. Unlike Listeners, housing peer workers were not given 'walker' status so could not move freely between the units when required.
- 8.46 Access to most resettlement services was limited to sentenced prisoners. Resettlement staff met newly sentenced receptions in their first week and provided a stimulating and well-delivered presentation about what was available. Prisoners were then seen individually to go through their resettlement needs in terms of training, employment and housing. This took place within the first 20 days of sentencing and prisoners were seen again two to three months before discharge. Information was sent electronically to other prisons in Northern Ireland if the prisoner was transferred. An emphasis was placed on motivation and seven programmes of GOAL, a motivational course, had been run in 2008 and had been well received.
- 8.47 Interventions and advice for prisoners on remand or serving very short sentences were limited. Although remand prisoners had the same access to housing advice and services, many were unaware of it. Very few prisoners were released homeless, with just under 3% of those released in the three months preceding the inspection going out with a homeless discharge grant.
- 8.48 Seventy-one per cent (76) of home leave applications had been granted between 1 July 2008 and 14 January 2009. While this was a high rate, it was likely to reflect the number of potential applicants who were counselled out of applying in the first place. Use of resettlement leave for job interviews and driving tests had increased.



Further recommendations

- 8.49 The use of peer advisers in delivering resettlement advice to remand and sentenced prisoners should be expanded.
- 8.50 Prisoners on remand should receive resettlement advice such as information about housing, employment and finance as part of their induction programme.

Family and friends

- 8.51 **Sufficient working telephones should be provided to allow prisoners to keep in easy contact with their families. (3.75)**
Achieved. There were enough working telephones on the houses.
- 8.52 **An accessible and monitored feedback system procedure should be introduced to allow visitors to suggest improvements or complain if necessary. (3.76)**
Partially achieved. Visitors' comments, complaints and suggestions forms were available in the visitors' reception building alongside a locked box. On the morning we looked at these, only one form and no pen was provided. There was no formal monitoring of these forms by senior managers. However, a formal complaint form was being developed and the minutes of the visitors' centre group meeting on 14 January 2009 recorded 'visitors' complaint form update' as an agenda item. The minutes of this meeting had not yet been published so it was not possible to see what had been discussed or agreed.

Further recommendation

- 8.53 Feedback and complaints from visitors should be monitored by managers.
- 8.54 **Closed visits should not be imposed automatically on a single drug dog indication without any supporting intelligence or consideration of alternative operational procedures. (3.77)**
Not achieved. A closed visit or leaving continued to be the only option following an indication by a drug dog.
We repeat the recommendation.
- 8.55 **Visits should begin at the published time, and the visitors reception building should be opened in readiness for visitors. (3.78)**
Partially achieved. The visitors' reception building was open in good time for visitors. Visits began on time during the inspection, but some prisoners and visitors complained that, while visitors arrived in the visits room on time, prisoners were sometimes delayed. Staff in the visitors' centre confirmed that visitors often made this complaint.



Further recommendation

8.56 Prisoners should arrive in the visits room in time for their visit.

8.57 **The capacity of the visits room serving the majority of prisoners should be increased. (3.79)**

Not achieved. The visits room accommodating the majority of prisoners was unchanged and continued to be cramped, with fixed furniture, and was noisy with little privacy between groups of visitors.

We repeat the recommendation.

Additional information

8.58 Unless marked as legal correspondence, every letter going in and out of the prison continued to be read. In our survey, 61% of prisoners, against a comparator of 43%, said staff had opened post from their legal representative. Staff recorded any legal post opened in error.

8.59 We saw a letter in the censors' office containing unacceptable comment about 'the depth of sectarian hatred on the other side of the fence', which included an inappropriate newspaper cutting. We were told that the letter would not be forwarded to the security department for information and that similar letters 'were common'. Censors did not receive any awareness training to help them identify inappropriate or discriminatory comment or possible risk factors regarding public and child protection issues.

8.60 The good services for visitors continued. Booking arrangements were good. The prison continued to fund a bus service from Lisburn railway station and NIACRO provided regular transport from other areas. The visitors' centre, run by the Quakers, was comfortable, welcoming and supportive. Staff provided information and advice and children could be looked after in the centre's play area while their carers visited the prison. A variety of local and national information was displayed. The centre manager met the family support officers and a senior manager regularly. A bus took visitors to the visitors' reception building where they were searched and had their identification confirmed. A bus then took visitors to the prison.

8.61 Children could play in a large staffed play area in the visits room. Child-centred visits were available on Saturdays and were open to all prisoners serving life, a determinate sentence or a minimum of three months on remand. Lunch was provided for the children's mothers or carers in a separate room and they spent time with the family support officers (FSOs). There were three full-time FSOs who acted as links between prisoners and their families. Their role was advertised to visitors and they also gave information to prisoners as part of the induction programme. The FSOs kept a record of referrals received and noted the source of the referral, such as prisoner self referral, family, prison staff and 'others' such as social services. Referrals had increased from 2172 in 2007 to 2846 in 2008.



8.62 Barnardo's ran several parenting courses for fathers in prison, some of which involved prisoners' partners. Prisoners and visitors could be helped to access Relate for relationship counselling, and bereavement counselling via the FSOs.

8.63 Regular themed visits sessions continued to be run throughout the year.

8.64 The video link facility was used to allow prisoners to have contact with partners or family members in other Northern Ireland prisons.

Further recommendation

8.65 Letter censors should receive training to enable them to identify possible risk factors.

Good Practice

8.66 The three family support workers provided a good service to prisoners and their families and helped resolve some difficult family issues to help with effective resettlement.



Section



Summary of recommendations





Summary of recommendations

The following is a listing of recommendations, housekeeping points 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.

- 9.1 An effective and responsive violence reduction and anti-bullying strategy should be developed and implemented taking into account consultation and surveys with prisoners and staff to help ensure that all prisoners feel safe. (HP39)
- 9.2 A local suicide prevention policy should be introduced that describes how the Northern Ireland Prison Service policy is implemented at Maghaberry, and sets out local procedures and responsibilities for introducing a supportive and therapeutic response to those at risk of suicide and self-harm. (HP40)
- 9.3 Managers should be able to enter residential units freely and without warning to allow them to supervise more effectively the staff and prisoners for whom they are responsible. (HP41)
- 9.4 The search and standby team should be disbanded and its resources used to allow prison searching and incident management to be carried out by generic residential and security staff. (HP42)
- 9.5 A personal officer wingbased case manager scheme for staff should be developed to encourage residential staff to engage more positively with prisoners and take an active part in the development of resettlement plans, to improve dynamic security and help ensure that resettlement becomes an integral part of the prison's purpose. (HP43)
- 9.6 The complaints system should be revised to allow prisoners to make complaints without disclosing the matter to residential staff, and all allegations about staff should be fully and impartially investigated at an appropriate senior level and to incorporate quality monitoring. (HP44)



- 9.7 Sufficient activity places should be provided in work, education and training to provide an active day for all prisoners, including those on separated wings. (HP45)
- 9.8 An effective, comprehensive and regular monitoring scheme should be introduced, with advice from the Equality Commission for Northern Ireland, covering prisoners' treatment, access to regime activities and services by religion or community background, ethnic origin, disability, age and nationality in order to help meet the duty to promote equality under section 75 of the Northern Ireland Act 1998. (HP46)
- 9.9 The commissioners of health services should undertake a physical and mental health needs assessment to ensure that the services commissioned from the providers are relevant to meet the needs of the population. (HP47)
- 9.10 A comprehensive strategy for managing life-sentenced prisoners in Northern Ireland should be developed and implemented ensures that risk factors are identified at an early stage, that prisoners are able to address these before their tariff expiry, and that they have the opportunity to engage in purposeful activity during their sentence and progress to less secure conditions as their risk diminishes. (HP48)
- 9.11 The resettlement needs of all categories of prisoners at Maghaberry should be reflected in the design and implementation of a local resettlement strategy based on a full needs analysis that sets out how those needs will be met. (HP49)

RECOMMENDATIONS

First days in custody

- 9.12 Staff interviewing prisoners in reception should identify needs as well as risk factors. (1.2)
- 9.13 Refreshments, as well as means to pass the time in holding rooms, should be provided in reception. (1.4)
- 9.14 Strip searches in reception should be carried out respectfully and managers should make checks to ensure that correct procedures are followed. (1.10)
- 9.15 Prisoners should be transferred to their allocated unit without delay once reception procedures have been completed. (1.11)
- 9.16 Officers working on the committal and induction landings should not be subject to the staff rotation policy designed for those working with separated prisoners. (1.12)



Residential units

- 9.17 The square houses should be replaced as part of the Northern Ireland Prison Service Estate review. (2.1)
- 9.18 Cells on Bush and Roe Houses designed for one prisoner should not be shared. (2.2)
- 9.19 Prisoners on remand should be given the same opportunity to eat out of their cells as those who have been convicted. (2.4)
- 9.20 Staff should actively patrol landings and communal facilities whenever prisoners are unlocked. (2.5)
- 9.21 Adequate screening of all cell toilets should be installed. (2.7)
- 9.22 Monthly minuted house meetings should be introduced between prisoner representatives and staff. (2.11)
- 9.23 Lockable cupboards should be provided in shared cells. (2.14)
- 9.24 Prisoners wanting to take exercise in poor weather should be provided with outdoor clothing. (2.15)
- 9.25 Exercise yards should be clean and contain adequate seating. (2.16)
- 9.26 The Red Square area should be used as an exercise area for suitably risk assessed prisoners. (2.17)

Staff-prisoner relationships

- 9.27 Positive efforts through training and management commitment should be made to encourage and support staff to engage actively with prisoners, including during association periods. (2.18)
- 9.28 Officers should wear name badges or identification numbers. (2.23)

Personal officers

- 9.29 Weekly entries in prisoners' files should record progress against resettlement and sentence plans and significant incidents in the prisoner's or his family's lives, as well as recording custodial behaviour. (2.24)



Bullying and violence reduction

- 9.30 A survey of prisoners' perceptions and experiences of bullying should be carried out to inform the development of local policy and strategy. (3.1)
- 9.31 Bullying information reports should be opened in all cases of suspected bullying. Managers should ensure there is effective daily monitoring of suspected bullies. (3.2)
- 9.32 Monitoring information about bullying should be improved, to enable managers to develop a profile of this behaviour. (3.3)
- 9.33 All staff working directly with prisoners should receive training in the anti-bullying training strategy. (3.4)

Self-harm and suicide

- 9.34 A greater range of disciplines should be represented at the suicide and self-harm prevention meetings, and should also be involved in planned PAR1 reviews. (3.12)
- 9.35 Prisoners should routinely be invited to prisoner at risk reviews and any reasons for refusal recorded. As an alternative, they should be offered the opportunity to submit a written contribution and helped to do so when necessary. (3.13)
- 9.36 There should be improved monitoring and analysis of incidents of self-harm. (3.15)
- 9.37 Senior managers should make regular quality checks of PAR1 procedures. (3.16)
- 9.38 The frequency of use of special accommodation and strip clothing should be monitored and inappropriate uses challenged. (3.18)
- 9.39 Progress on implementing recommendations accepted by the Prison Service following a death in custody investigation or from findings at a coroner's inquest should be reviewed by Maghaberry's self-harm and suicide prevention meetings and any problems in implementing them drawn to the attention of the governor. (3.20)
- 9.40 Night custody officers should carry a cell key in a sealed pouch and be provided with guidance about entering cells that recognises the primary aim of preserving life. (3.22)
- 9.41 Serious near-fatal incidents of self-harm should be investigated and learning disseminated through the service-wide self-harm and suicide prevention forum. (3.37)
- 9.42 Prisoner at risk forms should be opened in all cases where a prisoner self-harms and healthcare should ensure that all relevant information about self-harm incidents is supplied to ensure this happens. (3.38)

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- 9.43 Staff from a range of disciplines should be trained and given the authority to chair prisoner at risk reviews and to oversee the development of effective care plans. (3.39)
- 9.44 If the REACH approach is to be continued, in order to meet its original aims the unit should be relocated to a more appropriate therapeutic environment with suitably trained staff and sufficiently well resourced with mental health and psychological support and enough activities to keep men occupied. (3.40)
- 9.45 Ligature cutters should be issued to all officers. (3.41)
- 9.46 All staff with prisoner contact should be given training in suicide prevention procedures. (3.42)
- 9.47 Prisoners at risk of suicide and self-harm should not be held in strip clothing in cold bare cells and the observation cells should be used for the minimum time necessary and only in extreme circumstances where there is no alternative therapeutic response. (3.43)
- 9.48 Prisoners at risk of suicide and self-harm should not routinely be woken during the night. (3.44)

Equality, race relations and foreign nationals

- 9.49 All staff should receive relevant training in cultural, racial and diversity issues. (3.45)
- 9.50 A foreign national coordinator should be appointed and a local foreign national policy and strategy should be introduced based on the assessed needs of prisoners at Maghaberry. (3.47)
- 9.51 Foreign national prisoner support and information groups should be held at least monthly and areas of concern fed back to senior managers. (3.48)
- 9.52 All complaints alleging discrimination on grounds of race, religion or other improper grounds should be fully investigated, overseen by senior management, and any necessary action taken. (3.49)
- 9.53 A multidisciplinary committee should be established to ensure that the needs of foreign national prisoners are represented. (3.67)
- 9.54 Interpreting services should be used whenever necessary and this should be recorded. (3.68)
- 9.55 A diversity policy should be introduced that meets the requirements of anti-discrimination legislation and outlines how the needs of minority groups will be met. (3.69)



9.56 Monitoring by a multidisciplinary team should be introduced to ensure that prisoners from minority groups are not victimised or excluded from any activity. (3.70)

Applications and complaints

9.57 Request and complaints forms and respective guidelines should be available in languages other than English. (3.71)

9.58 Consultative committees should be introduced. (3.72)

9.59 Complaints and requests should be monitored and evaluated so that any patterns or trends can be identified. (3.73)

9.60 The request and complaints system should be subject to rigorous daily monitoring by a named manager to ensure that issues are dealt with at the appropriate level and answered within the correct timescales. (3.82)

9.61 The eligibility for access to the Prisoner Ombudsman should be reviewed to ensure prisoners are not unnecessarily impeded from taking complaints forward when they are unable to get satisfaction in the prison system. (3.83)

9.62 Complaints about members of staff should be referred first to a senior manager and investigated by someone trained in investigations. All allegations of assault should be referred initially to the governor. (3.84)

9.63 Independent Monitoring Board staff should be able to observe any area of prison life and should be given open access to all documentation in order to carry out their duties. (3.85)

9.64 Paper complaint forms should be provided on all residential units and prisoners should be allowed to place these unobserved in a box, which should be emptied by an administrative member of staff. (3.86)

Substance use

9.65 The drug and alcohol strategy should be updated, and should contain detailed action plans, targets and performance measures. (3.87)

9.66 A strategy leader for the coordination of treatment services should be appointed. (3.94)

9.67 Treatment providers should develop joint working protocols and integrated care pathways for prisoners with substance problems. (3.89)

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- 9.68 Every prisoner with substance-related needs should receive an assessment within a set timeframe, followed by a care plan. (3.91)
- 9.69 Prisoners should have access to disinfectant tablets for cleaning injecting equipment and given the means of safe disposal of this equipment. (3.92)
- 9.70 The new clinical management guidelines should be fully implemented, and a dedicated substance misuse team established. (3.93)
- 9.71 All prisoners, including those on remand and those serving short sentences, should have access to short-duration programmes that focus on alcohol and drug awareness, harm reduction and relapse prevention. (3.94)
- 9.72 A drug-free unit should be established that offers structured support, including voluntary drug testing. (3.95)
- 9.73 A random mandatory drug testing scheme should be introduced. (3.96)
- 9.74 The current 'voluntary' drug testing scheme and its role and structure should be reviewed and revised. Sanctions should not be part of a voluntary scheme. (3.97)
- 9.75 Suspicion drug tests should be based on assessed intelligence, authorised by a manager and subject to equality monitoring. (3.98)
- 9.76 All prisoners with substance use problems should be assessed shortly after arrival and prioritised for counselling services. (3.100)

Health services

- 9.77 The in-patient beds should not form part of the prison's certified normal accommodation. (4.2)
- 9.78 Nursing staff should not carry staves. (4.3)
- 9.79 The skill mix of healthcare staff should be reviewed to ensure that all staff's skills are being used appropriately and to their full potential. (4.4)
- 9.80 Once in place, there should be robust monitoring of the GP contract and this should be reported to the partnership board at least every quarter. (4.7)
- 9.81 All prisoners should have equal access to the services of a GP and prisoners attending appointments from the Mourne House complex should not be required to undergo strip searches unless there is an identified individual risk. (4.8)



- 9.82 Prisoners in the prisoner assessment unit should not have to attend Maghaberry for routine GP appointments. (4.9)
- 9.83 All clinical records should be made contemporaneously. (4.10)
- 9.84 Nurses should stop the risky practice of re-dispensing and/or repacking dispensed medicines. (4.12)
- 9.85 Policy decisions about the duration of in possession medication should be disseminated to all relevant staff. (4.13)
- 9.86 Patients risk assessed as requiring 'see to take' medication should receive this service. (4.14)
- 9.87 If daily in possession medication is required, it should be supplied by the pharmacy in a suitable form. (4.15)
- 9.88 The in possession risk assessment should be more robust and adhered to by staff. The use of daily in possession medication should be discouraged. (4.17)
- 9.89 A signature should be obtained from the patient to confirm receipt of any medication supplied that is intended for self-administration. (4.18)
- 9.90 The policy of random checks by security and nursing staff to ensure compliance and deter trading and bullying should be adhered to and audited. (4.19)
- 9.91 The use of night sedation should be reviewed and if in possession is thought suitable, a policy should be developed and followed. (4.21)
- 9.92 The medication chart should be further adapted to include the in possession risk assessment. (4.23)
- 9.93 A repeat slip system for patients who have had their medication written up for 84 days should be introduced. (4.25)
- 9.94 Nurses should follow the NMC guidelines for the safe administration of medications. (4.26)
- 9.95 Medications should be administered from a safe environment. (4.27)
- 9.96 Prisoners should be provided with lockers in which to store prescribed medicines. (4.28)
- 9.97 Smoking cessation staff should be able to administer nicotine replacement patches using patient group directions. (4.31)

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- 9.98 Smoking cessation courses should not be curtailed due to staffing issues. (4.32)
 - 9.99 The use of strip clothing in healthcare should be recorded in a central register. (4.33)
 - 9.100 There should be relevant clinical policies and protocols in place. (4.43)
 - 9.101 There should be management scrutiny and challenge of data to ensure equity of service and maintenance of targets. (4.44)
 - 9.102 Care plans for in-patients should be individualised. (4.45)
 - 9.103 The in-patients unit should not be used to house those less able to cope on the houses. (4.46)
 - 9.104 Prisoners with life-long conditions should receive care in line with national guidelines and evidenced-based practice. (4.47)
 - 9.105 Prisoners with physical health needs should have individualised care plans. (4.48)
 - 9.106 There should be a lead nurse with sufficient seniority and knowledge for the care of older people. (4.49)
 - 9.107 Prisoners should be able to obtain condoms and other barrier protection. (4.50)
 - 9.108 A washer/disinfector should be installed in the dental surgery. (4.51)
 - 9.109 Patient escort arrangements should be improved to reduce wasted clinical time. (4.52)
 - 9.110 Dedicated resuscitation equipment should be kept in the dental surgery. (4.53)
 - 9.111 There should be comprehensive arrangements for the mental health of prisoners on the REACH unit. (4.54)
 - 9.112 There should be a single point referral meeting for all mental health referrals and a multidisciplinary approach towards mental health care. (4.55)
 - 9.113 Patients requiring secondary or tertiary mental health services should be transferred expeditiously. (4.56)
 - 9.114 Prisoners being released should be given information and assistance to access health and social care services and support in accessing the services if required. (4.57)



- 9.115 Prisoners with mental health problems being released should be referred to community mental health services teams to ensure continuity of care. (4.58)

Learning and skills and work activities

- 9.116 A wider range of education courses should be offered to meet the needs of more prisoners. (5.1)
- 9.117 More opportunities, particularly essential skills classes, should be provided for remand prisoners. (5.2)
- 9.118 Prisoner movements should be better managed to improve attendance and punctuality at education classes. (5.3)
- 9.119 Measures should be taken to increase general work opportunities, allowing prisoners to acquire relevant employment skills. (5.4)
- 9.120 Remand and separated prisoners should have the opportunity to work. (5.5)
- 9.121 Library opening hours should be increased to offer more sessions in the evenings and at weekends. (5.7)
- 9.122 The strategic management of prison education, training and work provision, including other areas of prisoner support, should provide a coherent and integrated service. (5.14)
- 9.123 Data should be used effectively to identify areas for development and set key targets to measure improvement. (5.15)
- 9.124 The arrangements for quality assurance for education, training and work, at all levels in the prison, should be developed further to identify and address key areas for improvement. (5.16)

Physical education and health promotion

- 9.125 Higher level courses should be developed to meet the needs of more able prisoners and prisoners serving longer sentences. (5.23)
- 9.126 Health promotion courses should be developed in collaboration with healthcare to educate all prisoners in how to maintain a healthy lifestyle while in prison and after release. (5.24)



Faith and religious activity

- 9.127 Prisoners should be asked in reception if they wish to see a chaplain. (5.26)
- 9.128 Segregated prisoners in the SSU and vulnerable prisoners located in Lagan House should have access to services at appropriate times and in a location suitable for services. (5.28)
- 9.129 Chaplains should not be denied access to segregated prisoners in the SSU, unless there is a serious temporary security emergency. (5.30)
- 9.130 Prisoners should be escorted to the chapel for pastoral visits when requested by the chaplains. (5.31)
- 9.131 The coordinating chaplain should establish an effective system for chaplaincy representation at prisoner care meetings. (5.37)
- 9.132 Religious services on the separated wings should take place in uninterrupted private rooms. (5.38)

Time out of cell

- 9.133 More time out of cell should be provided for all prisoners. (5.39)
- 9.134 Regime activities should start and finish at the published times. (5.40)
- 9.135 The core regime day should be published to prisoners and adhered to. (5.51)
- 9.136 Controlled unlock on the main units should cease. (5.52)
- 9.137 Periods of landing association should be available on all non-separated wings. (5.53)
- 9.138 Non-separated prisoners on Bush House should not be subject to the same restricted regimes as those who have elected to be separated. (5.54)

Security and rules

- 9.139 Security systems should be flexible enough to recognise and adapt to the fact that most prisoners at Maghaberry present only a medium risk. (6.1)
- 9.140 The prison should introduce less restrictive procedures for moving prisoners around internally, particularly on the separated units, where the arrangements were unnecessarily restrictive. (6.2)



- 9.141 Prisoners' cells should be searched respectfully and left in a decent condition afterwards. (6.3)
- 9.142 Attendance at the security committee should be increased, with greater representation from non-security staff. (6.5)
- 9.143 The practice of the SST removing staff's keys from them during targeted searching is unnecessary, and should cease. (6.11)
- 9.144 Staff engagement with prisoners should be developed to improve dynamic security. (6.15)
- 9.145 Staff should be actively encouraged to submit security information reports. (6.16)

Discipline

- 9.146 The use of cellular confinement as a punishment should be reduced and confined to the most serious cases. (6.18)
- 9.147 Punishment ranges should be published to prisoners. (6.19)
- 9.148 Prisoners given a punishment of cellular confinement should have their specific loss of privileges clearly set by the adjudicating governor, with no automatic loss of all privileges. (6.20)
- 9.149 Prisoners should not lose access to telephones and writing or reading material as part of their punishment at any time. (6.21)
- 9.150 When a punishment of cellular confinement is given, a prisoner should be allowed to contact his solicitor by telephone immediately after the adjudication. (6.22)
- 9.151 Enough staff should be trained to operate the video camera to ensure that all planned use of force interventions are recorded. (6.26)
- 9.152 Special accommodation should be used only as a last resort for violent and unmanageable prisoners and only until the prisoner is no longer violent. (6.29)
- 9.153 All use of special accommodation should be separately logged. (6.31)
- 9.154 There should be greater interaction between staff and prisoners segregated for cellular confinement. (6.35)
- 9.155 Prisoners entering the SSU should not be strip-searched without an individual risk assessment. (6.36)

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- 9.156 All staff should be individually selected to work in the special supervision unit and their selection should be based on clear criteria. (6.38)
 - 9.157 The special supervision unit should be managed by the residential function. (6.39)
 - 9.158 The reasons behind the high use of force in the SSU should be investigated, and there should be routine analysis of all use of force data. (6.40)
 - 9.159 A means of keeping the SSU clean should be found other than the use of long-term prisoners as orderlies - such as utilising prisoners located in the SSU for their own protection. (6.41)
 - 9.160 Adjudication standardisation meetings should take place to allow adjudicating governors to analyse information about adjudications to ensure consistency, identify trends and deal with any emerging problems. (6.50)
 - 9.161 The regime offered to prisoners under cellular confinement should be improved to include daily access to showers, telephones and exercise without the need to make an application. (6.51)
 - 9.162 Segregated prisoners allowed tobacco should be allowed matches or a lighter following an individual assessment of risk. (6.52)
 - 9.163 Conditions in the special cells should be improved. (6.53)

Progressive regimes and earned privileges scheme

- 9.164 More help and support should be given to prisoners on the basic regime for more than four weeks. Officers should record what targets are required to progress, and show what support has been offered to achieve these. Prisoners should be encouraged to comment on their progress. (6.54)
- 9.165 Prisoners on the basic regime should be given an opportunity to use the phone during the evening. (6.55)
- 9.166 There should be improved monitoring of PREPS. (6.57)
- 9.167 Prisoners should not be demoted to basic for failure to comply with voluntary drug testing. (6.63)
- 9.168 Regular management checks should be conducted to ensure that the quality of entries reflects staff knowledge of the prisoner. (6.64)



- 9.169 The progressive regimes and earned privileges scheme should be used to encourage attendance at work for sentenced prisoners. (6.65)

Catering

- 9.170 Meal times should be revised, and the evening meal served after 5pm. (7.1)
- 9.171 All prisoners should be given training in basic food hygiene, and should be provided with appropriate personal protective clothing. (7.2)
- 9.172 Food temperatures should be checked at serving points. (7.3)
- 9.173 Additional catering staff should be recruited. (7.4)
- 9.174 Prisoners should be regularly consulted about the menu and should be able to make comments about the food. (7.8)

Prison shop

- 9.175 In addition to the annual survey, a forum should be established in which prisoners can be consulted regularly on such matters as items on the shop list. (7.9)
- 9.176 All prisoners should be allowed to buy clothing out of their prison accounts or to send money out to families so that families are not adversely affected financially. (7.13)

Strategic management of resettlement

- 9.177 A local resettlement policy committee should be established chaired by a senior manager and involving service providers to provide strategic development and direction for resettlement services. (8.7)

Offender management and planning

- 9.178 Resettlement staff should actively engage with separated prisoners to encourage participation in resettlement planning. (8.9)

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- 9.179 Unconvicted prisoners' resettlement needs should be assessed and appropriate interventions provided. (8.11)

Life-sentenced prisoners

- 9.180 A detailed strategy should be developed to meet the needs of potential lifers. (8.12)
- 9.181 There should be sufficient work and training to meet the needs of all life-sentenced prisoners. (8.16)
- 9.182 All staff working with lifers should receive lifer training. (8.17)
- 9.183 Lifer groups and lifer days should be introduced. (8.18)
- 9.184 The competitive element for lifer progression should be removed and replaced with equal opportunity for all to progress, subject to their tariff and risk assessment. (8.21)
- 9.185 Decisions to regress life-sentenced prisoners from the PAU or from Wilson and Martin Houses should be based on a clear increase in risk factors indicating that the allocation is no longer appropriate and prisoners should be given full reasons for the decisions. (8.22)
- 9.186 All life-sentenced prisoners in the prisoner assessment unit should have a staff mentor to support and encourage them in their progress towards release and to help with any difficulties encountered. (8.23)

Public protection

- 9.187 A personal officer or other key worker who knows the prisoner well should report fully on prisoners subject to public protection arrangements and/or other high-risk prisoners. (8.29)
- 9.188 In order to protect third parties, prisoners should not be provided with victims' statements in relation to their applications for release on temporary licence. (8.33)
- 9.189 Child protection policies should be up to date and relevant staff trained in the agreed procedures. (8.34)



Offending behaviour programmes

- 9.190 New programmes should be developed to address specific offending behaviours. (8.37)
- 9.191 Priority attention should be paid to undertaking the outstanding assessments and delivering offending behaviour programmes, especially for lifers who are approaching their tariff expiry date. (8.39)
- 9.192 A clear process for managing offending behaviour programme referrals should be developed, with targets for delivery. (8.40)

Reintegration planning

- 9.193 Development of the NIPS estate should provide accommodation for different security levels to match the needs of the Northern Ireland prisoner population and allow prisoners to make planned progressive moves as part of their preparation for release. (8.41)
- 9.194 The use of peer advisers in delivering resettlement advice to remand and sentenced prisoners should be expanded. (8.49)
- 9.195 Prisoners on remand should receive resettlement advice such as information about housing, employment and finance as part of their induction programme. (8.50)

Family and friends

- 9.196 Feedback and complaints from visitors should be monitored by managers. (8.55)
- 9.197 Closed visits should not be imposed automatically on a single drug dog indication without any supporting intelligence or consideration of alternative operational procedures. (8.54)
- 9.198 Prisoners should arrive in the visits room in time for their visit. (8.56)
- 9.199 The capacity of the visits room serving the majority of prisoners should be increased. (8.57)
- 9.200 Letter censors should receive training to enable them to identify possible risk factors. (8.65)



HOUSEKEEPING POINT

First days in custody

9.201 All new arrivals should be given the opportunity to watch the introductory DVD. (1.13)

GOOD PRACTICE

Family and friends

9.202 The three family support workers provided a good service to prisoners and their families and helped resolve some difficult family issues to help with effective resettlement. (8.66)



Section



Appendices





Appendix I: Inspection team

Anne Owers	HM Chief Inspector of Prisons
Michael Maguire	Chief Inspector, CJI
Michael Loughlin	Team Leader
Joss Crosbie	Inspector
Hayley Folland	Inspector
Paul Fenning	Inspector
Gordon Riach	Inspector
Ian MacFadyen	Inspector
Andy Rooke	Inspector
Tom McGonigle	Inspector CJI

Elizabeth Tysoe	Healthcare Inspector
Jude O'Neill	RQIA Inspector
Sue Melvin	Pharmacy Inspector
Jennifer Davies	Dental Inspector

Paul McAlister	ETI Assistant Chief Inspector
Mark Barr	ETI Team Leader
Alistair Gilmore	Inspector
Jayne Walkingshaw	Inspector
John Kennedy	Inspector
Bob Cowdrey	Ofsted Inspector

Research Team

Louise Falshaw
Laura Nettleingham
Catherine Nichol
Rachel Murray



Appendix II: Prison population profile

Status

Custodial Code	No of Inmates	Percentage
Sentenced	403	50.76 %
Unsentenced	391	49.24 %
Sum:	794	100.00 %

Age and Status

Age and Status	Sentenced	Percentage	Unsentenced	Percentage	Sum:
21 - 24	57	14.14 %	80	20.46 %	137
25 - 29	76	18.86 %	97	24.81 %	173
30 - 34	54	13.40 %	74	18.93 %	128
35 - 39	70	17.37 %	50	12.79 %	120
40 - 44	57	14.14 %	29	7.42 %	86
45 - 49	41	10.17 %	31	7.93 %	72
50 - 59	34	8.44 %	27	6.91 %	61
60 - 65	7	1.74 %	1	0.26 %	8
Over 65	7	1.74 %	2	0.51 %	9
Sum:	403	100.00 %	391	100.00 %	794

Main Alleged Offence Group

Main Alleged Offence Group	Sentenced	Percentage	Unsentenced	Percentage
Burglary/Robbery/Theft	34	8.44 %	59	15.09 %
Criminal Damage	7	1.74 %	2	0.51 %
Drug Offences	11	2.73 %	58	14.83 %
Fraud & Forgery			4	1.02 %
Motoring Offences	11	2.73 %	3	0.77 %
Murder	145	35.98 %	16	4.09 %
Non-Police Offences	1	0.25 %	1	0.26 %
Offences Against the State	6	1.49 %	7	1.79 %
Other Offences	9	2.23 %	7	1.79 %
Other Offences Against the Person	145	35.98 %	183	46.80 %
Sex Offences	33	8.19 %	50	12.79 %
	1	0.25 %	1	0.26 %
Sum:	403	100.00 %	391	100.00 %

Home Area

Town	No Fixed Abode Flag	Address Not Known	No of Inmates	Percentage
Belfast	N	N	279	35.14 %
Belfast	Y	N	88	11.08 %
Londonderry	N	N	31	3.90 %
Ballymena	N	N	25	3.15 %
Bangor	N	N	18	2.27 %
Lurgan	N	N	16	2.02 %
Coleraine	N	N	15	1.89 %
Portadown	N	N	15	1.89 %
Armagh	N	N	14	1.76 %
Dungannon	N	N	14	1.76 %
Dungannon	N	Y	14	1.76 %
Antrim	N	N	13	1.64 %
Lisburn	N	N	13	1.64 %
Newry	N	N	13	1.64 %
Newtownabbey	N	N	13	1.64 %
Craigavon	N	N	10	1.26 %
Downpatrick	N	N	9	1.13 %
Omagh	N	N	9	1.13 %
Newtownards	N	N	8	1.01 %
Banbridge	N	N	7	0.88 %
Larne	N	N	7	0.88 %
Limavady	N	N	6	0.76 %
Ballyclare	N	N	5	0.63 %
Carrickfergus	N	N	5	0.63 %
London	N	N	5	0.63 %
Magherafelt	N	N	5	0.63 %
Enniskillen	N	N	4	0.50 %
Glengormley	N	N	4	0.50 %
Strabane	N	N	4	0.50 %
Ahoghill	N	N	3	0.38 %
Castlewellan	N	N	3	0.38 %
Cookstown	N	N	3	0.38 %
Newcastle	N	N	3	0.38 %
Portrush	N	N	3	0.38 %



Ballycastle	N	N	2	0.25 %
Ballygowan	N	N	2	0.25 %
Ballymoney	N	N	2	0.25 %
Coalisland	N	N	2	0.25 %
Cork	N	N	2	0.25 %
Crossmaglen	N	N	2	0.25 %
Donaghadee	N	N	2	0.25 %
Dundalk	N	N	2	0.25 %
Dunmurry	N	N	2	0.25 %
Edgeware	N	N	2	0.25 %
Groomspport	N	N	2	0.25 %
Hollywood	N	N	2	0.25 %
Kilkeel	N	N	2	0.25 %
Portglenone	N	N	2	0.25 %
Tandragee	N	N	2	0.25 %
Aghalee	N	N	1	0.13 %
Andersonstown	N	N	1	0.13 %
Annalong	N	N	1	0.13 %
Ayr	N	N	1	0.13 %
Ballymena	N	N	1	0.13 %
Ballyhalbert	N	N	1	0.13 %
Ballykelly	N	N	1	0.13 %
Ballykinler	N	N	1	0.13 %
Ballynahinch	N	N	1	0.13 %
Belleek	N	N	1	0.13 %
Birmingham	N	N	1	0.13 %
Boyle	N	N	1	0.13 %
Bristol	N	N	1	0.13 %
Broughshane	N	N	1	0.13 %
Bushmills	N	N	1	0.13 %
Cairdale	N	N	1	0.13 %
Camlough	N	N	1	0.13 %
Cape Town	N	N	1	0.13 %
Cardiff	N	N	1	0.13 %
Carlow	N	N	1	0.13 %

Carnlough	N	N	1	0.13 %
Carrowdore	N	N	1	0.13 %
Carryduff	N	N	1	0.13 %
Castle Blaney	N	N	1	0.13 %
Castlecaulfield	N	N	1	0.13 %
Claudy	N	N	1	0.13 %
Cloughmills	N	N	1	0.13 %
Comber	N	N	1	0.13 %
Coney Island	N	N	1	0.13 %
Conlag	N	N	1	0.13 %
Corbane	N	N	1	0.13 %
Crossgar	N	N	1	0.13 %
Derrylin	N	N	1	0.13 %
Dromore	N	N	1	0.13 %
Dublin	N	N	1	0.13 %
Dunmurray	N	N	1	0.13 %
East Barnet	N	N	1	0.13 %
Edgbaston	N	N	1	0.13 %
Forkhill	N	N	1	0.13 %
Garvagh	N	N	1	0.13 %
Glenavy	N	N	1	0.13 %
Greenisland	N	N	1	0.13 %
Grimsby	N	N	1	0.13 %
Gwent	N	N	1	0.13 %
Hillsborough	N	N	1	0.13 %
Kilkenny	N	N	1	0.13 %
Killyleagh	N	N	1	0.13 %
Kircubbin	N	N	1	0.13 %
Kowloon	N	N	1	0.13 %
Laurelvale	N	N	1	0.13 %
Lisnaskea	N	N	1	0.13 %
Luton	N	N	1	0.13 %
Macosquin	N	N	1	0.13 %
Maghera	N	N	1	0.13 %
Markethill	N	N	1	0.13 %



Millisle	N	N	1	0.13 %
Moy	N	N	1	0.13 %
Muckamore	N	N	1	0.13 %
Newtownabby	N	N	1	0.13 %
Newtownbutler	N	N	1	0.13 %
Newtownstewart	N	N	1	0.13 %
Poleglass	N	N	1	0.13 %
Portadown	N	N	1	0.13 %
Portavogie	N	N	1	0.13 %
Portstewart	N	N	1	0.13 %
Randalstown	N	N	1	0.13 %
Rathcoole	N	N	1	0.13 %
Redcastle	N	N	1	0.13 %
Richhill	N	N	1	0.13 %
Rostrevor	N	N	1	0.13 %
Rotherham	N	N	1	0.13 %
Seaforde	N	N	1	0.13 %
Sion Mills	N	N	1	0.13 %
Stoneyford	N	N	1	0.13 %
Swatragh	N	N	1	0.13 %
Tipperary	N	N	1	0.13 %
Toomebridge	N	N	1	0.13 %
Tyrella	N	N	1	0.13 %
Whitehead	N	N	1	0.13 %
	N	N	1	0.13 %
		Sum:	794	100.00 %

Ethnic Groups

	Sentenced	Percentage	Unsentenced	Percentage	Sum:
GB	39	9.68 %	35	8.95 %	74
IRE	22	5.46 %	47	12.02 %	69
NI	326	80.89 %	226	57.80 %	552
Other	16	3.97 %	83	21.23 %	99
Sum:	403	100.00 %	391	100.00 %	794

Religious Groups

	Sentenced	Percentage	Unsentenced	Percentage	Sum:
Other	36	8.93 %	92	23.53 %	128
Protestant	202	50.12 %	105	26.85 %	307
Roman Catholic	165	40.94 %	194	49.62 %	359
Sum:	403	100.00 %	391	100.00 %	794

Religion Breakdown

	Sentenced	Percentage	Unsentenced	Percentage	Sum:
Atheist	1	0.25 %			1
Baptist	1	0.25 %	1	0.26 %	2
Buddhist	2	0.50 %	19	4.86 %	21
Christian	3	0.74 %	11	2.81 %	14
Church of England	3	0.74 %	5	1.28 %	8
Church of Ireland	59	14.64 %	41	10.49 %	100
Church of Scotland			1	0.26 %	1
Free Presbyterian	52	12.90 %	12	3.07 %	64
Jew	1	0.25 %			1
Methodist	10	2.48 %	5	1.28 %	15
Muslim	1	0.25 %	5	1.28 %	6
Nil	18	4.47 %	44	11.25 %	62
Other	10	2.48 %	13	3.32 %	23
Presbyterian	77	19.11 %	40	10.23 %	117
Roman Catholic	165	40.94 %	194	49.62 %	359
Sum:	403	100.00 %	391	100.00 %	794



Appendix III: Safety and staff-prisoner relationship interviews

Thirty six prisoners were approached by the research team to undertake structured interviews regarding issues of safety and staff prisoner relationships at HMP Maghaberry. Seven individuals were randomly selected from each of the main wings (Bann, Erne, Lagan & Foyle) in the establishment, and four individuals were approached on the overspill landings on Bush and Roe wings.

Location of interviews

	Number of interviews
Bann	7
Erne	7
Foyle	7
Lagan	7
Roe	4
Bush	4
Total	36

Interviews were undertaken in a private interview room, and participation was voluntary. An interview schedule was used to maintain consistency; therefore all interviewees were asked the same questions. The interview schedule had two distinct sections, the first covering safety and the second staff prisoner relationships.

The demographic information of interviewees is detailed below followed by the results from each section.

Demographic information

- Length of time in prison on this sentence ranged from one day to 18 years.
- Length of time at Maghaberry Prison ranged from one day to 18 years.
- 13 prisoners were in prison for the first time.
- 16 prisoners were sentenced, and the remaining 20 were on remand.
- Sentence length ranged from 28 days to life.
- Average age was 35 (ranging from 22 to 62).
- There were no interviews conducted with black and minority ethnic prisoners.
- Two interviewees did not have English as a first language.
- 17 interviewees stated their religion as Roman Catholic, 10 as Protestant, one as Muslim, one as Christian and seven stated that they had no religion.
- 10 interviewees stated they had a disability.
- Two interviewees stated they were a foreign national.

Safety

All interviewees were asked to identify areas of concern with regards to safety within HMP Maghaberry, as well as rating the problem on a scale of 1-4 (1 = a little unsafe, to 4 = extremely unsafe). A 'seriousness score' was then calculated, by multiplying the number of individuals who thought the issue was a problem by the average rating score.

Safety

The ranking column shows the order of the 21 potential safety concerns covered in the interview schedule based on the seriousness score. A ranking of '1' shows the issue with the highest seriousness score.

Scores highlighted in red indicate areas in which over 50% of respondents mentioned the area to be of concern.

	Yes, this is a problem (number of respondents)	Average rate (1 = a little unsafe, to 4 = extremely unsafe)	Seriousness score	Ranking
Number of staff on duty during the day	5	2.4	12	20
Number of staff on duty during association	11	3	33	11
Surveillance cameras	10	2.4	24	14
Layout/structure of the prison	16	2.4	38	8
Healthcare facilities	7	3	21	=15
Existence of an illegal market	6	3.5	21	=15
Availability of drugs	13	3	39	=6
Staff behaviour with prisoners	15	2.6	39	=6
Response of staff with regards to fights/ bullying/self harm in the prison	14	3.1	43	4
Staff members giving favours in return for something	11	3.1	34	10
Lack of trust in staff	22	3	65	1
Lack of confidence in staff	13	3.2	41	5
Aggressive body language of staff	19	3.3	63	2
Aggressive body language of prisoners	11	2.5	27	13
Procedures for discipline (adjudications)	13	3.4	44	3
Lack of information about prison regime	6	2.5	15	19
Overcrowding	13	2.8	37	9
The way meals are served	6	3.5	21	=15
Movement to work/education/gym	2	2.5	5	21
Gang culture	5	3.2	16	18
Isolation (within the prison)	10	2.8	28	12



The top five issues were:

1. Lack of trust in staff
2. Aggressive body language of staff
3. Procedures for discipline (adjudications)
4. Response of staff with regards to fights/bullying/self harm in the prison
5. Lack of confidence in staff

Examples of comments from top five issues were:

Lack of trust in staff

“... I know they have a duty to for self harm but certain officers spread any information received.”

“Everyone on the landing would know if you wanted to speak to the Samaritans at night. You have to press the alarm and then they shout, asking you why you pressed the bell and then why you want to use the Samaritans phone.”

“...I've been told by staff things that I shouldn't know.”

Aggressive body language of staff

“Some can be very, very, nasty”

“They do, they look for a reaction”

“You can do nothing about it”

Procedures for discipline (adjudications)

“It doesn't matter what you say, you're guilty. It's a kangaroo court here”

“They lie, they don't even look at the evidence”

“Can't complain or if you phone police/ complain then they will bribe you to withdraw and will be more lenient on adjudications so that they cover their a**s. They drag people out of visits in front of their children. They have too much power 'law upon themselves'. Needs to be half and half with religion or it will never change.”

“Different punishments, no consistency.”



Response of staff with regards to fights/bullying/self harm in the prison

“Bullying they will lock victim up and not the bully. Been suicidal and all they say is ‘hurry up and do it’. I’ve been on a PAR 1 for 3 months.”

“Bullying, unless obvious they don’t deal with it. Cell bells at night are dreadful.”

“There is a suspected thief on the landing and they have told me who it is and are setting him up with other prisoners. Staff share all business/vulnerability and reasons for a transfer off the wing. Leave people to sort out their issues for themselves. They want information from you on others and if you don’t give it then they won’t help you.”

Lack of confidence in staff

“[Staff are] more lazy than anything. Couldn’t help unless you hand over loads of information about others.”

“Share it with other staff. Medical files are up on the computer and always hanging about listening to conversations due to security.”

“They tell you what they think you want to hear.”

Overall Rating

Interviewees were asked to give an overall rating for safety at HMP Maghaberry, with 1 being very bad and 5 being very good. The average rating was 3.3.

A breakdown of the scores given are shown in the table below:

1	2	3	4	5
4 (11%)	3 (8%)	10 (28%)	16 (44%)	3 (8%)

Five of the seven responses that were very bad or bad were from Erne and two from Lagan.

Two of those responses that rated very good were from Foyle and one from Lagan. Further, it is notable that every prisoner from Roe rated safety as good.

There was no notable difference between the scores of Protestants and Roman Catholics.

Please see the annex at the end for the selection of comments about the SST. There were several times on every wing that prisoners spoke at length about the SST when commenting about safety.





Staff Prisoner Relationships

All interviewees were asked to rate their relationship with wing staff for the following questions. For each question, a breakdown of responses is provided, as well as an average rating, where applicable.

1. Do you feel that staff are respectful towards you?

1 Completely	2	3	4 Not at all
21 (58%)	7 (19%)	4 (11%)	4 (11%)

The average rating was 1.8

Examples of comments were:

“Couple are ok but the SST and the ones that come from the maze have poorer attitudes”

“Rude and impolite, picked on”

2. How often are staff appropriate in their comments and attitudes to you?

1 Always	2	3	4 Never
21 (58%)	8 (22%)	4 (11%)	3 (8%)

The average rating was 1.7

Examples of comments were:

“Some here they are ok but on other landings they will keep them locked up and talk to them like sh*t”

“Rude”

“If they had a bad day outside”

3. How often do wing staff address you by your first name or by Mr?

1 Always	2	3	4 Never
26 (72%)	4 (11%)	1 (3%)	5 (14%)

The average rating was 1.6



Examples of comments were:

“They can’t pronounce my name, so they use my surname”

“Surname only”

4. How often do wing staff knock before entering your cell?

1 Always	2	3	4 Never
11 (31%)	4 (11%)	5 (14%)	16 (44%)

The average rating was 2.7

Examples of comments were:

“Just open the door when you’re on the toilet”

“They get arsy about you being on the toilet but they’re the ones that just open your door”

5. How helpful are staff generally with questions and day to day issues?

1 Very helpful	2	3	4 Not at all helpful
17 (47%)	9 (25%)	5 (14%)	5 (14%)

The average rating was 2

Examples of comments were:

“Had legal visit but it wasn’t on the board and it’s supposed to be. Lazy on here”

“Some will help and you can have a laugh with them but others will just ignore you”

“Helpful, but forgetful”

6. How often are staff appropriate in their behaviour?

1 Always	2	3	4 Never
16 (44%)	9 (25%)	6 (17%)	5 (14%)

The average rating was 2.1





Examples of comments were:

“Officers smell of alcohol. I have smelt this numerous times and if they have a hangover they sit in the office. I was on half hour checks on PAR 1 and they didn’t come round and check”

“Cooking food every morning it’s outrageous”

“Sometimes they are hung over so they can be blunt”

“A few of the staff come back after lunch more chirpy after a few drinks at lunch”

“Never patrolling but in office a lot”

“Staff drink and sit in the office”

7. Do staff treat prisoners fairly?

1 Completely	2	3	4 Not at all
18 (50%)	4 (11%)	7 (19%)	7 (19%)

The average rating was 2.1

Examples of comments were:

“One guy, they were pushing his button deliberately. They put their hands on you.”

“Very moody when something outside affects them”

“The difference between basic and enhanced is all or nothing”

“Informers”

“Staff have favourites, e.g. Give information or chores. They get prisoners to do their job e.g. Shout for lock up”

“Favourites are paramilitaries”

“You get perks for certain jobs. Security have favourites (Sex Offenders)”

“Favourites are the ones they are frightened of.”

8. Do staff members treat you fairly when applying the rules of the prison?

1 Completely	2	3	4 Not at all
19 (53%)	4 (11%)	7 (19%)	6 (17%)

The average rating was 2

Examples of comments were:

“Up until a few weeks waited hours and its worse at night”

“I’ve done everything and I’m still waiting for a job”

9. Are staff fair and consistent in their approach to the IEP scheme?

1 Completely	2	3	4 Not at all
20 (56%)	4 (11%)	3 (8%)	9 (25%)

The average rating was 2

Examples of comments were:

“Can never move up, once on basic that’s it”

“Reports to move up to enhanced and they copy them from the previous week as they don’t know you and can’t comment on you.”

“Remands get it better, as soon as your found guilty and sentenced there attitude changes.”

“They can use it against people. They find a way of dropping you down.”

“Scoring is arbitrary, they keep people on basic”

“Different rules for one than another”

“Pick people deliberately who aren’t on drugs for testing. There are ways around the testing (that the staff are aware of, e.g. using others’ samples)”



10. Would staff take it seriously if you were being victimised or bullied on the wing?

Yes	No	Depends who you approach
19 (53%)	13 (36%)	4 (11%)

Examples of comments were:

“Not sure I would assume so”

“They don’t respond”

“Have to go through loads of staff and they will want loads of information on others before they help you”

“Would move the victim not the bully”

“Tell you to put it in writing”

“When I told them I was under threat they didn’t move me”

“They laugh about it”

“They didn’t take it seriously”

11. How often do staff interact with you?

1 Always	2	3	4 Never
13 (36%)	10 (28%)	5 (14%)	8 (22%)

The average rating was 2.2

Examples of comments were:

“Depends on who – staff in Lagan are much better.”

“They don’t-when I was feeling depressed I wanted to get a job and get out but told me it’s against the law to work as I’m on a PAR1 and was on basic and they wouldn’t help me. Deal with you by locking you up.”

“It’s usually me that tells them I’m unhappy then they talk to me”

“Always have to go to them”

“50/50 for them to instigate conversation”



12. Do you have a member of staff to turn to if you have a problem?

13 (36%) stated they did not. Of the 23 (64%) who said that they did, they gave the following rating of how many staff they felt they could approach:

1 Many	2	3	4 One
8 (35%)	6 (26%)	4 (17%)	5 (21%)

The average rating was 1.8

13. Can you approach your personal officer?

Yes	No	Don't have one
1 (3%)	3 (8%)	32 (89%)

Examples of comments were:

“No idea they don't know themselves”

14. Do staff challenge inappropriate behaviour?

1 Always	2	3	4 Never
8 (22%)	5 (14%)	5 (14%)	18 (50)

The average rating was 2.9

Examples of comments were:

“They let it go, they want an easy life. Tell you to put it in writing but can't get forms. Prisoners are always chasing them up.”

“Never challenge anything, they are lazy and want an easy life. They always cover one another's back.”

“Challenge prisoners, but not staff”

“They all stick together”

“They let us run the wing as we want”





15. Do staff promote responsible behaviour?

1 Always	2	3	4 Never
7 (19%)	3 (8%)	6 (17%)	20 (56%)

The average rating was 3.1

Examples of comments were:

“You have to tell them and then they will put you on the waiting list”

“You don’t ask you don’t get”

“I have to approach them”

“No work on remand”

16. Do staff provide assistance if you need it in applying for jobs/education/ ROTL etc.?

1 Always	2	3	4 Never
9 (25%)	2 (2%)	12 (33%)	13 (36%)

The average rating was 2.8

Examples of comments were:

“Mainly help each other”

“Depends what you ask for”

17. Do staff actively encourage you to take part in activities outside your cell?

1 Always	2	3	4 Never
5 (14%)	1 (3%)	7 (19%)	23 (64%)

The average rating was 3.3

Examples of comments were:

“Its up to us at the end of the day to motivate ourselves, the staff won’t”

“Ask if you are ok”



“If you don’t want to leave your cell you don’t for the first 3 months I went nowhere”

“They don’t go near you”

“I’ve seen it happen they leave people - it’s a big problem”

“Never leave my cell”

“I’m a listener, so they check I’m ok when I’m in my cell”

18. Have you ever been discriminated against by staff because of:

• Your ethnicity

Yes	No
2 (6%)	34 (94%)

• Your nationality

Yes	No
0 (0%)	36 (100%)

• Your religion

Yes	No
6 (17%)	30 (83%)

• Your age

Yes	No
0 (0%)	36 (100%)

• You have a disability

Yes	No
0 (0%)	36 (100%)

• Your sexual orientation

Yes	No
0 (0%)	36 (100%)

• Your sentence status i.e.VP/remand/sentenced/recalled/IPP/lifer

Yes	No
2 (6%)	34 (94%)





Overall Rating

Interviewees were asked to give an overall rating for staff prisoner relationships at HMP Maghaberry, with 1 being excellent and 4 being poor. The average rating was 2.3

A breakdown of the scores given is shown in the table below:

1	2	3	4
8 (24%)	15 (46%)	4 (12%)	6 (18%)

Comments on the SST

Attitude:

“They take no care, they violate your personal affects, like pictures of your children.”

“The search team are horrible people; they use a lot of heavy swearing. They are trained to be impolite. They try and antagonize you.”

“SST are extremely aggressive. 1000% against you, its intimidation. It’s like the hard man attitude on the street. It could be dangerous to those who are vulnerable.”

“They are heavy boys, their use of force needs reigning in. It’s unnecessary on so many occasions. They are straight in with the violence.”

“Over Christmas same wing staff stepped in to SST to cover. They were good guys on the wing, but once in the boiler suits we are like Satan. That will be the issue for everyone in reaction to staff and safety.”

“They make you turn around whilst naked, wiggle your toes, move your legs, there is no dignity. They’re animals.”

Allegations:

“SST came into rec room and someone sniggered so they dragged him out and kicked the shit out of him.”

“They are violent during searches, rough, lie about how they find items, e.g. it fell out, when actually they pull it out of your body. They also plant stuff.”

“When they hit you, they are wearing shields etc. so you can’t tell who they are. They will hit you if you ask who they are and never tell you.”



“Two brothers made a complaint about them and they get searched and their cells ransacked all the time.”

“You can hear prisoners screaming when they are taken off the landings [by the search team].”

“The search team badly injured me whilst I was handcuffed, I had cuts all over my body.”

“There were two brothers before Christmas on Bann who had such a bad beating the police took statements.”

Miscellaneous:

“They are a law upon themselves.”

“They run themselves as untouchables, like a paramilitary organisation.”

“The search team are meant to make you feel safe, but it’s the reverse.”



Appendix IV: Summary of prisoner questionnaires and interviews

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 government department statistician. Essentially, the formula indicates the sample size that is required and the extent to which the findings from a sample of that size reflect the experiences of the whole population.

At the time of the survey on the 14th January 2009 the main prisoner population at HMP Maghaberry was 752. On the main wings the sample size was 126. Overall, this represented 17% of the prisoner population. The population on the separated units was 26 on Roe, 32 on Bush and 32 on Mourne House. These units were sampled separately and a questionnaire was offered to every prisoner on these units.

Selecting the sample

Respondents from the main prison population were randomly selected from a PRISM prisoner population printout using a stratified systematic sampling method. This basically means every second person is selected from a PRISM 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. On the main units, ten respondents refused to complete a questionnaire. On Bush there was one refusal, on Roe there were 21 refusals and on Mourne House there were two refusals.

Interviews are carried out with any respondents with literacy difficulties. No interviews were required.

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

Main Prison

In total, 106 respondents completed and returned their questionnaires. This represented 14% of the main prison population. The response rate was 84%. In addition to the 10 respondents who refused to complete a questionnaire, seven questionnaires were not returned and three were returned blank.

On Mourne House 30 respondents completed and returned their questionnaires. The response rate was 94%. Two respondents refused to complete their questionnaires.

Separated Units

On Bush 29 respondents completed and returned their questionnaires. The response rate was 91%. In addition to the one respondent that refused to complete a questionnaire, two surveys were returned blank.

On Roe five respondents completed and returned their questionnaires. The response rate was 19%. 21 respondents refused to complete their questionnaire.

Due to the low response rate, a comparison between the responses from Roe and all other main wings at Maghaberry, and a comparison to the responses from Roe in 2005 has NOT been carried out.

Comparisons

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

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

The following analyses have been conducted on the main prisoner units at Maghaberry Prison:

- The current survey responses in 2009 against comparator figures for all prisoners surveyed in local prisons. This comparator is based on all responses from prisoner surveys carried out in 37 local prisons since April 2003.
- The current survey responses in 2009 against the responses of prisoners surveyed at HMP Maghaberry in 2005.
- A comparison within the 2009 survey between the responses of Roman Catholic and Protestant prisoners.



- A comparison within the 2009 survey between the responses of foreign national prisoners and British nationals.
- A comparison within the 2009 survey between the responses of prisoners who consider themselves to have a disability and those that do not consider themselves to have a disability.
- The current survey responses in 2009 from Mourne House (Wilson and Martin) and all other main wings in Maghaberry.

The following analyses have been conducted on the separated units at Maghaberry:

- The current survey responses in 2009 from Bush (Loyalist separated prisoners) and all other main wings in Maghaberry.
- The current survey responses in 2009 from Bush (separated prisoners) against the responses of separated prisoners surveyed on Bush in 2005.
- As mentioned above, there has been no analysis conducted on Roe unit due to the small number of respondents.

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

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

Summary

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

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

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

Maghaberry main summary

Section 1: About You

In order for us to ensure that everyone is treated equally within this prison, we ask that you fill in the following information about yourself. This will allow us to look at the answers provided by different groups of people in order to detect discrimination and to investigate whether there are equal opportunities for all across all areas of prison life. Your responses to these questions will remain both anonymous and confidential.

Q1.1 How old are you?

<i>Under 21</i>	1%
<i>21 - 29</i>	41%
<i>30 - 39</i>	32%
<i>40 - 49</i>	20%
<i>50 - 59</i>	7%
<i>60 - 69</i>	0%
<i>70 and over</i>	0%

Q1.2 Are you sentenced?

<i>Yes</i>	44%
<i>Yes - on recall</i>	4%
<i>No - awaiting trial</i>	32%
<i>No - awaiting sentence</i>	20%
<i>No - awaiting deportation</i>	0%

Q1.3 How long is your sentence?

<i>Not sentenced</i>	54%
<i>Less than 6 months</i>	5%
<i>6 months to less than 1 year</i>	3%
<i>1 year to less than 2 years</i>	3%
<i>2 years to less than 4 years</i>	6%
<i>4 years to less than 10 years</i>	5%
<i>10 years or more</i>	2%
<i>ICS/ ECS</i>	0%
<i>Life</i>	23%

Q1.4 Approximately, how long do you have left to serve (if you are serving life or ICS/ ECS, please use the date of your next board)?

<i>Not sentenced</i>	59%
<i>6 months or less</i>	15%
<i>More than 6 months</i>	27%

Q1.5 How long have you been in this prison?

<i>Less than 1 month</i>	11%
<i>1 to less than 3 months</i>	21%



3 to less than 6 months	14%
6 to less than 12 months.....	16%
12 months to less than 2 years	15%
2 to less than 4 years.....	9%
4 years or more	16%

Q1.6 Do you hold UK citizenship?

Yes	87%
No	13%

Q1.7 Is English your first language?

Yes	94%
No	6%

Q1.8 What is your ethnic origin?

White - British	44%	Asian or Asian British - Bangladeshi	0%
White - Irish	47%	Asian or Asian British - Other	1%
White - Other	1%	Mixed Race - White and Black Caribbean ..	0%
Black or Black British - Caribbean ..	1%	Mixed Race - White and Black African.....	1%
Black or Black British - African ...	1%	Mixed Race - White and Asian	0%
Black or Black British - Other	0%	Mixed Race - Other	0%
Asian or Asian British - Indian	0%	Chinese	4%
Asian or Asian British - Pakistani ...	0%	Other ethnic group	0%

Q1.9 What is your religion?

None	13%	Buddhist.....	1%
Church of Ireland	12%	Hindu.....	0%
Catholic	49%	Jewish.....	1%
Presbyterian	14%	Muslim	1%
Methodist	0%	Sikh	0%
Other Christian denomination	8%	Other.....	1%

Q1.10 How would you describe your sexual orientation?

Heterosexual/ Straight	98%
Homosexual/Gay	1%
Bisexual.....	0%
Other.....	1%

Q1.11 Do you consider yourself to have a disability?

Yes	25%
No	75%

Q1.12 How many times have you been in prison before?

0	1	2 to 5	More than 5
27%	18%	33%	22%

Q1.13 Including this prison, how many prisons have you been in during this sentence/remand time?

1	2 to 5	More than 5
74%	23%	2%

Q1.14 Do you have any children under the age of 18?

Yes	61%
No	39%

Section 2: Courts, transfers and escorts

Q2.1 We want to know about the most recent journey you have made either to or from court or between prisons? How was ...

	Very good	Good	Neither	Bad	Very Bad	Don't remember	N/A
The cleanliness of the van	6%	23%	12%	22%	26%	6%	5%
Your personal safety during the journey	7%	33%	14%	19%	22%	2%	3%
The comfort of the van	3%	12%	10%	27%	44%	1%	3%
The attention paid to your health needs	3%	21%	23%	17%	27%	2%	6%
The frequency of toilet breaks	6%	14%	13%	7%	39%	4%	17%

Q2.2 How long did you spend in the van?

Less than 1 hour	Over 1 hour to 2 hours	Over 2 hours to 4 hours	More than 4 hours	Don't remember
24%	52%	18%	3%	3%

Q2.3 How did you feel you were treated by the escort staff?

Very well	Well	Neither	Badly	Very badly	Don't remember
12%	40%	29%	9%	9%	0%

Q2.4 Please answer the following questions about when you first arrived here:

	Yes	No	Don't remember
Did you know where you were going when you left court or when transferred from another prison?	85%	15%	0%
Before you arrived here did you receive any written information about what would happen to you?	12%	80%	8%
When you first arrived here did your property arrive at the same time as you?	68%	24%	7%



Section 3: Reception, first night and induction

Q3.1 In the first 24 hours, did staff ask you if you needed help or support with the following? (Please tick all that apply to you)

<i>Didn't ask about any of these</i>	18%	<i>Money worries</i>	13%
<i>Loss of property</i>	10%	<i>Feeling depressed or suicidal</i>	35%
<i>Housing problems</i>	20%	<i>Health problems</i>	52%
<i>Contacting employers</i>	7%	<i>Needing protection from other prisoners</i> .	23%
<i>Contacting family</i>	65%	<i>Accessing phone numbers</i>	41%
<i>Ensuring dependants were being looked after</i>			13%
<i>Other</i>	5%		

Q3.2 Did you have any of the following problems when you first arrived here? (Please tick all that apply)

<i>Didn't have any problems</i>	28%	<i>Money worries</i>	21%
<i>Loss of property</i>	9%	<i>Feeling depressed or suicidal</i>	27%
<i>Housing problems</i>	23%	<i>Health problems</i>	33%
<i>Contacting employers</i>	6%	<i>Needing protection from other prisoners</i> .	12%
<i>Contacting family</i>	18%	<i>Accessing phone numbers</i>	12%
<i>Ensuring dependants were looked after</i> .	10%		
<i>Other</i>	2%		

Q3.3 Please answer the following questions about reception:

	Yes	No	Don't remember
<i>Were you seen by a member of health services?</i>	67%	25%	8%
<i>When you were searched, was this carried out in a respectful way?</i>	53%	41%	6%

Q3.4 Overall, how well did you feel you were treated in reception?

Very well	Well	Neither	Badly	Very badly	Don't remember
11%	35%	26%	19%	8%	1%

Q3.5 On your day of arrival, were you offered information on the following? (Please tick all that apply)

<i>Information about what was going to happen to you</i>	35%
<i>Information about what support was available for people feeling depressed or suicidal</i>	25%
<i>Information about how to make routine requests</i>	35%
<i>Information about your entitlement to visits</i>	39%
<i>Information about health services</i>	34%
<i>Information about the chaplaincy</i>	29%
<i>Not offered anything</i>	45%



**Q3.6 On your day of arrival, were you offered any of the following?
(Please tick all that apply)**

<i>A reception pack</i>	49%
<i>The opportunity to have a shower</i>	45%
<i>The opportunity to make a free telephone call</i>	68%
<i>Something to eat</i>	71%
<i>Did not receive anything</i>	14%

Q3.7 Did you meet any of the following people within the first 24 hours of your arrival at this prison? (Please tick all that apply)

<i>Chaplain or religious leader</i>	27%
<i>Someone from health services</i>	76%
<i>A listener/Samaritans</i>	9%
<i>Did not meet any of these people</i>	21%

Q3.8 Did you have access to the tuck shop/canteen within the first 24 hours of your arrival at this prison?

<i>Yes</i>	52%
<i>No</i>	48%

Q3.9 Did you feel safe on your first night here?

<i>Yes</i>	64%
<i>No</i>	28%
<i>Don't remember</i>	8%

Q3.10 How soon after your arrival did you go on an induction course?

<i>Have not been on an induction course</i>	20%
<i>Within the first week</i>	52%
<i>More than a week</i>	18%
<i>Don't remember</i>	10%

Q3.11 Did the induction course cover everything you needed to know about the prison?

<i>Have not been on an induction course</i>	20%
<i>Yes</i>	35%
<i>No</i>	33%
<i>Don't remember</i>	12%





Section 4: Legal rights and respectful custody

Q4.1 How easy is it to?

	Very easy	Easy	Neither	Difficult	Very difficult	N/A
Communicate with your solicitor or legal representative?	15%	39%	18%	20%	7%	1%
Attend legal visits?	13%	55%	17%	12%	1%	2%
Obtain bail information?	8%	29%	19%	18%	9%	17%

Q4.2 Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?

Not had any letters	18%
Yes	61%
No	22%

Q4.3 Please answer the following questions about the wing/unit you are currently living on:

	Yes	No	Don't know	N/A
Are you normally offered enough clean, suitable clothes for the week?	56%	22%	4%	18%
Are you normally able to have a shower every day?	86%	13%	1%	0%
Do you normally receive clean sheets every week?	93%	4%	0%	3%
Do you normally get cell cleaning materials every week?	73%	22%	4%	2%
Is your cell call bell normally answered within five minutes?	30%	41%	20%	10%
Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	54%	43%	1%	2%
Can you normally get your stored property, if you need to?	36%	38%	22%	3%

Q4.4 What is the food like here?

Very good	Good	Neither	Bad	Very bad
0%	20%	11%	27%	42%

Q4.5 Does the tuck shop/canteen sell a wide enough range of goods to meet your needs?

Have not bought anything yet	3%
Yes	51%
No	46%

Q4.6 Is it easy or difficult to get either

	Very easy	Easy	Neither	Difficult	Very difficult	Don't know
A complaint form	39%	41%	8%	4%	0%	9%
An application form	32%	37%	12%	2%	2%	15%

Q4.7 Have you made an application?

Yes	52%
No	48%



Q4.8 Please answer the following questions concerning applications

(If you have not made an application please tick the 'not made one' option)

	<i>Not made one</i>	<i>Yes</i>	<i>No</i>
Do you feel applications are dealt with fairly?	49%	19%	32%
Do you feel applications are dealt with promptly? <i>(within seven days)</i>	52%	23%	26%

Q4.9 Have you made a complaint?

Yes	46%
No	54%

Q4.10 Please answer the following questions concerning complaints

(If you have not made a complaint please tick the 'not made one' option)

	<i>Not made one</i>	<i>Yes</i>	<i>No</i>
Do you feel complaints are dealt with fairly?	54%	11%	35%
Do you feel complaints are dealt with promptly? <i>(within seven days)</i>	55%	18%	27%
Were you given information about how to make an appeal?	44%	18%	38%

Q4.11 Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?

Not made a complaint	53%
Yes	22%
No	24%

Q4.12 How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?

<i>Don't know who they are</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
42%	8%	18%	13%	13%	6%

Q4.13 Please answer the following questions about your religious beliefs?

	<i>Yes</i>	<i>No</i>	<i>Don't know/ N/A</i>
Do you feel your religious beliefs are respected?	62%	15%	22%
Are you able to speak to a religious leader of your faith in private if you want to?	67%	3%	30%

Q4.14 Can you speak to a listener at any time, if you want to?

<i>Yes</i>	<i>No</i>	<i>Don't know</i>
51%	10%	39%

Q4.15 Please answer the following questions about staff in this prison?

	<i>Yes</i>	<i>No</i>
Is there a member of staff you can turn to for help if you have a problem?	57%	43%
Do most staff treat you with respect?	73%	27%





Section 5: Safety

Q5.1 Have you ever felt unsafe in this prison?

Yes 56%
 No 44%

Q5.2 Do you feel unsafe in this prison at the moment?

Yes 19%
 No 81%

**Q5.3 In which areas of this prison do you/have you ever felt unsafe?
 (Please tick all that apply)**

Never felt unsafe.....45%	At meal times..... 8%
Everywhere.....10%	At health services..... 8%
SSU.....16%	Visit's area..... 14%
Association areas..... 21%	In wing showers..... 12%
Reception area.....13%	In gym showers..... 9%
At the gym.....9%	In corridors/stairwells..... 14%
In an exercise yard.....19%	On your landing/wing..... 11%
At work.....7%	In your cell..... 13%
During movement.....12%	At religious services..... 5%
At education.....9%	

Q5.4 Have you been victimised by another prisoner or group of prisoners here?

Yes31%
 No.....69%

**Q5.5 If yes, what did the incident(s) involve/what was it about?
 (Please tick all that apply)**

Insulting remarks (about you or your family or friends).....15%	Because you were new here.....7%
Physical abuse (being hit, kicked or assaulted).....13%	Because of your sexuality.....1%
Sexual abuse..... 2%	Because you have a disability.....2%
Because of your race or ethnic origin.....7%	Because of your religion/religious beliefs...9%
Because of drugs.....4%	Being from a different part of the country than others.....9%
Having your canteen/property taken.....4%	Because of your offence/ crime.....15%

Q5.6 Have you been victimised by a member of staff or group of staff here?

Yes47%
 No53%



**Q5.7 If yes, what did the incident(s) involve/what was it about?
(Please tick all that apply)**

<i>Insulting remarks (about you or your family or friends)</i>	18%
<i>Because of your sexuality</i>	1%
<i>Physical abuse (being hit, kicked or assaulted)</i>	12%
<i>Because you have a disability</i>	3%
<i>Sexual abuse</i>	4%
<i>Because of your religion/religious beliefs</i>	11%
<i>Because of your race or ethnic origin</i>	4%
<i>Being from a different part of the country than others</i>	9%
<i>Because of drugs</i>	9%
<i>Because of your offence/crime</i>	15%
<i>Because you were new here</i>	10%

Q5.8 If you have been victimised by prisoners or staff, did you report it?

<i>Not been victimised</i>	41%
<i>Yes</i>	21%
<i>No</i>	37%

Q5.9 Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?

<i>Yes</i>	31%
<i>No</i>	69%

Q5.10 Have you ever felt threatened or intimidated by a member of staff/group of staff in here?

<i>Yes</i>	42%
<i>No</i>	58%

Q5.11 Is it easy or difficult to get illegal drugs in this prison?

<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>	<i>Don't know</i>
26%	15%	5%	3%	7%	44%





Section 6: Health services

Q6.1 How easy or difficult is it to see the following people:

	<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
<i>The doctor</i>	10%	6%	19%	10%	34%	21%
<i>The nurse</i>	7%	22%	52%	13%	5%	1%
<i>The dentist</i>	19%	5%	13%	6%	28%	29%
<i>The optician</i>	38%	4%	10%	11%	24%	13%

Q6.2 Are you able to see a pharmacist?

Yes 19%
 No..... 81%

Q6.3 What do you think of the quality of the health service from the following people:

	<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
<i>The doctor</i>	13%	6%	17%	11%	24%	30%
<i>The nurse</i>	10%	20%	34%	13%	15%	8%
<i>The dentist</i>	31%	14%	19%	7%	9%	19%
<i>The optician</i>	45%	11%	9%	14%	11%	9%

Q6.4 What do you think of the overall quality of the health services here?

Not been *Very good* *Good* *Neither* *Bad* *Very bad*
 8% 4% 27% 15% 19% 27%

Q6.5 Are you currently taking medication?

Yes 58%
 No 42%

Q6.6 If you are taking medication, are you allowed to keep possession of your medication in your own cell?

Not taking medication..... 42%
 Yes 49%
 No 9%

Q6.7 Do you feel you have any emotional well being/ mental health issues?

Yes 57%
 No 43%

Q6.8 Are your emotional well-being/mental health issues being addressed by any of the following? (Please tick all that apply)

Do not have any issues/Not receiving any help 58%
Doctor..... 11%
Nurse 13%
Psychiatrist..... 6%
Mental Health Support team 15%
Counsellor..... 4%
Other..... 8%



Q6.9 Did you have a problem with either of the following when you came into this prison?

	Yes	No
Drugs	37%	63%
Alcohol	45%	55%

Q6.10 Have you developed a problem with either of the following since you have been in this prison?

	Yes	No
Drugs	15%	85%
Alcohol	5%	95%

Q6.11 Do you know who to contact in this prison to get help with your drug or alcohol problem?

Yes	40%
No	15%
<i>Did not/do not have a drug or alcohol problem.....</i>	<i>44%</i>

Q6.12 Have you received any intervention or help (including substance use support teams, Health Services etc.) for your drug/alcohol problem, whilst in this prison?

Yes	17%
No	38%
<i>Did not/do not have a drug or alcohol problem.....</i>	<i>44%</i>

Q6.13 Was the intervention or help you received, whilst in this prison, helpful?

Yes	11%
No	5%
<i>Did not have a problem/Have not received help</i>	<i>84%</i>

Q6.14 Do you think you will have a problem with either of the following when you leave this prison?

	Yes	No	Don't know
Drugs	12%	68%	20%
Alcohol	19%	62%	19%

Q6.15 Do you know who in this prison can help you contact external drug or alcohol agencies on release?

Yes	16%
No	24%
N/A	61%





Section 7: Purposeful Activity

Q7.1 Are you currently involved in any of the following activities? (Please tick all that apply)

Prison job	31%
Vocational or skills training	6%
Education (including basic skills)	27%
Offending behaviour programmes.....	14%
Not involved in any of these	52%

Q7.2 If you have been involved in any of the following, whilst in prison, do you think it will help you on release?

	Not been involved	Yes	No	Don't know
Prison job	37%	34%	22%	7%
Vocational or skills training	52%	23%	17%	9%
Education (including basic skills)	40%	37%	15%	8%
Offending behaviour programmes	45%	28%	17%	10%

Q7.3 How often do you go to the library?

Don't want to go	12%
Never	40%
Less than once a week	20%
About once a week	16%
More than once a week	3%
Don't know.....	8%

Q7.4 On average how many times do you go to the gym each week?

	0	1	2	3 to 5	More than 5	Don't know
Don't want to go	28%	19%	5%	15%	28%	3%
					3%	2%

Q7.5 On average how many times do you go outside for exercise each week?

	0	1 to 2	3 to 5	More than 5	Don't know
Don't want to go	17%	11%	14%	20%	34%
				34%	3%

Q7.6 On average how many hours do you spend out of your cell on a weekday? (Please include hours at education, at work etc)

Less than 2 hours.....	17%
2 to less than 4 hours	34%
4 to less than 6 hours	14%
6 to less than 8 hours	16%
8 to less than 10 hours	5%
10 hours or more.....	10%
Don't know.....	5%



Q7.7 On average, how many times do you have association each week?

<i>Don't want to go</i>	<i>0</i>	<i>1 to 2</i>	<i>3 to 5</i>	<i>More than 5</i>	<i>Don't know</i>
8%	8%	4%	23%	43%	14%

Q7.8 How often do staff normally speak to you during association time?

<i>Do not go on association</i>	23%
<i>Never</i>	38%
<i>Rarely</i>	19%
<i>Some of the time</i>	6%
<i>Most of the time</i>	7%
<i>All of the time</i>	6%

Section 8: Resettlement

Q8.1 When did you first meet your personal officer?

<i>Still have not met him/her</i>	71%
<i>In the first week</i>	9%
<i>More than a week</i>	6%
<i>Don't remember</i>	14%

Q8.2 How helpful do you think your personal officer is?

<i>Do not have a personal officer</i>	<i>Very helpful</i>	<i>Helpful</i>	<i>Neither</i>	<i>Not very helpful</i>	<i>Not at all helpful</i>
74%	6%	9%	5%	1%	4%

Q8.3 Do you have a sentence plan?

<i>Not sentenced</i>	55%
<i>Yes</i>	14%
<i>No</i>	31%

Q8.4 How involved were you in the development of your sentence plan?

<i>Do not have a sentence plan</i>	87%
<i>Very involved</i>	1%
<i>Involved</i>	5%
<i>Neither</i>	1%
<i>Not very involved</i>	4%
<i>Not at all involved</i>	2%

Q8.5 Can you achieve all or some of your sentence plan targets in this prison?

<i>Do not have a sentence plan</i>	86%
<i>Yes</i>	8%
<i>No</i>	6%





Q8.6 Are there plans for you to achieve all/some of your sentence plan targets in another prison?

Do not have a sentence plan 87%
Yes 5%
No 8%

Q8.7 Do you feel that any member of staff has helped you to address your offending behaviour whilst at this prison?

Not sentenced 56%
Yes 14%
No 30%

Q8.8 Do you feel that any member of staff has helped you to prepare for your release?

Yes 13%
No 87%

Q8.9 Have you had any problems with sending or receiving mail?

Yes 56%
No 38%
Don't know 6%

Q8.10 Have you had any problems getting access to the telephones?

Yes 25%
No 73%
Don't know 2%

Q8.11 Did you have a visit in the first week that you were here?

Not been here a week yet 3%
Yes 61%
No 33%
Don't remember 3%

Q8.12 Does this prison give you the opportunity to have the visits you are entitled to? (e.g. number and length of visit)

Don't know what my entitlement is 16%
Yes 71%
No 14%

Q8.13 How many visits did you receive in the last week?

<i>Not been in a week</i>	0	1 to 2	3 to 4	5 or more
4%	36%	60%	0%	0%



Q8.14 Have you been helped to maintain contact with your family/friends whilst in this prison?

Yes 39%
No 61%

Q8.15 Do you know who to contact to get help with the following within this prison: (please tick all that apply)

Don't know who to contact 62%
Help with your finances in preparation for release 15%
Maintaining good relationships 17%
Claiming benefits on release 25%
Avoiding bad relationships 14%
Arranging a place at college/continuing education on release 12%
Finding a job on release 17%
Continuity of health services on release 21%
Finding accommodation on release 24%
Opening a bank account 18%

Q8.16 Do you think you will have a problem with any of the following on release from prison? (please tick all that apply)

No problems 33%
Help with your finances in preparation for release 41%
Maintaining good relationships 20%
Claiming benefits on release 38%
Avoiding bad relationships 14%
Arranging a place at college/continuing education on release 22%
Finding a job on release 47%
Continuity of health services on release 26%
Finding accommodation on release 40%
Opening a bank account 27%

Q8.17 Have you done anything, or has anything happened to you here that you think will make you less likely to offend in the future?

Not sentenced 56%
Yes 24%
No 19%





Bush House summary

Section 1: About You

In order for us to ensure that everyone is treated equally within this prison, we ask that you fill in the following information about yourself. This will allow us to look at the answers provided by different groups of people in order to detect discrimination and to investigate whether there are equal opportunities for all across all areas of prison life. Your responses to these questions will remain both anonymous and confidential.

Q1.1 How old are you?

<i>Under 21</i>	3%
<i>21 - 29</i>	24%
<i>30 - 39</i>	41%
<i>40 - 49</i>	28%
<i>50 - 59</i>	3%
<i>60 - 69</i>	0%
<i>70 and over</i>	0%

Q1.2 Are you sentenced?

<i>Yes</i>	97%
<i>Yes - on recall</i>	3%
<i>No - awaiting trial</i>	0%
<i>No - awaiting sentence</i>	0%
<i>No - awaiting deportation</i>	0%

Q1.3 How long is your sentence?

<i>Not sentenced</i>	0%
<i>Less than 6 months</i>	0%
<i>6 months to less than 1 year</i>	0%
<i>1 year to less than 2 years</i>	0%
<i>2 years to less than 4 years</i>	34%
<i>4 years to less than 10 years</i>	38%
<i>10 years or more</i>	24%
<i>ICS/ ECS</i>	0%
<i>Life</i>	3%

Q1.4 Approximately, how long do you have left to serve (if you are serving life or ICS/ECS, please use the date of your next board)?

<i>Not sentenced</i>	0%
<i>6 months or less</i>	38%
<i>More than 6 months</i>	62%



Q1.5 How long have you been in this prison?

Less than 1 month	0%
1 to less than 3 months	3%
3 to less than 6 months	3%
6 to less than 12 months	17%
12 months to less than 2 years	14%
2 to less than 4 years	45%
4 years or more	17%

Q1.6 Do you hold UK citizenship?

Yes	90%
No	10%

Q1.7 Is English your first language?

Yes	93%
No	7%

Q1.8 What is your ethnic origin?

White - British	.97%	Asian or Asian British - Bangladeshi	0%
White - Irish	.3%	Asian or Asian British - Other	0%
White - Other	.0%	Mixed Race - White and Black Caribbean	0%
Black or Black British - Caribbean	.0%	Mixed Race - White and Black African	0%
Black or Black British - African	.0%	Mixed Race - White and Asian	0%
Black or Black British - Other	.0%	Mixed Race - Other	0%
Asian or Asian British - Indian	.0%	Chinese	0%
Asian or Asian British - Pakistani	.0%	Other ethnic group	0%

Q1.9 What is your religion?

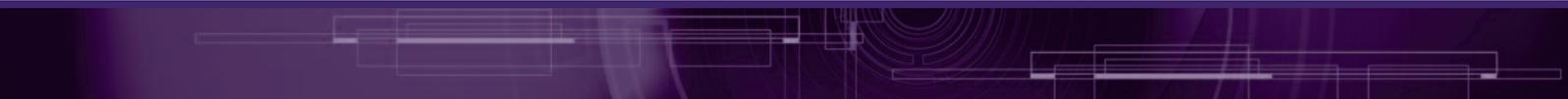
None	.0%	Buddhist	0%
Church of Ireland	25%	Hindu	0%
Catholic	.0%	Jewish	0%
Presbyterian	.75%	Muslim	0%
Methodist	.0%	Sikh	0%
Other Christian denomination	.0%	Other	0%

Q1.10 How would you describe your sexual orientation?

Heterosexual/ Straight	100%
Homosexual/Gay	0%
Bisexual	0%
Other	0%

Q1.11 Do you consider yourself to have a disability?

Yes	21%
No	79%





Q1.12 How many times have you been in prison before?

0	1	2 to 5	More than 5
28%	31%	41%	0%

Q1.13 Including this prison, how many prisons have you been in during this sentence/remand time?

1	2 to 5	More than 5
68%	32%	0%

Q1.14 Do you have any children under the age of 18?

Yes.....	72%
No.....	28%

Section 2: Courts, transfers and escorts

Q2.1 We want to know about the most recent journey you have made either to or from court or between prisons? How was ...

	Very good	Good	Neither	Bad	Very Bad	Don't remember	N/A
<i>The cleanliness of the van</i>	3%	28%	14%	14%	41%	0%	0%
<i>Your personal safety during the journey</i>	7%	43%	14%	14%	18%	0%	4%
<i>The comfort of the van</i>	0%	10%	10%	28%	52%	0%	0%
<i>The attention paid to your health needs</i>	0%	14%	24%	28%	28%	0%	7%
<i>The frequency of toilet breaks</i>	0%	24%	24%	17%	28%	0%	7%

Q2.2 How long did you spend in the van?

<i>Less than 1 hour</i>	<i>Over 1 hour to 2 hours</i>	<i>Over 2 hours to 4 hours</i>	<i>More than 4 hours</i>	<i>Don't remember</i>
24%	59%	14%	0%	3%

Q2.3 How did you feel you were treated by the escort staff?

Very well	Well	Neither	Badly	Very badly	Don't remember
3%	41%	48%	7%	0%	0%

Q2.4 Please answer the following questions about when you first arrived here:

	Yes	No	Don't remember
<i>Did you know where you were going when you left court or when transferred from another prison?</i>	93%	7%	0%
<i>Before you arrived here did you receive any written information about what would happen to you?</i>	7%	86%	7%
<i>When you first arrived here did your property arrive at the same time as you?</i>	76%	21%	3%

Section 3: Reception, first night and induction

Q3.1 In the first 24 hours, did staff ask you if you needed help or support with the following? (Please tick all that apply to you)

Didn't ask about any of these.....	31%	Money worries	0%
Loss of property	0%	Feeling depressed or suicidal.....	31%
Housing problems.....	10%	Health problems.....	55%
Contacting employers.....	3%	Needing protection from other prisoners...	31%
Contacting family.....	52%	Accessing phone numbers.....	38%
Ensuring dependants were being looked after.....	0%		
Other.....	0%		

Q3.2 Did you have any of the following problems when you first arrived here? (Please tick all that apply)

Didn't have any problems.....	23%	Money worries	15%
Loss of property	8%	Feeling depressed or suicidal.....	27%
Housing problems	15%	Health problems.....	19%
Contacting employers	0%	Needing protection from other prisoners.	35%
Contacting family.....	15%	Accessing phone numbers	12%
Ensuring dependants were looked after	8%		
Other.....	4%		

Q3.3 Please answer the following questions about reception:

	Yes	No	Don't remember
Were you seen by a member of health services?	59%	31%	10%
When you were searched, was this carried out in a respectful way?	69%	31%	0%

Q3.4 Overall, how well did you feel you were treated in reception?

Very well	Well	Neither	Badly	Very badly	Don't remember
7%	34%	34%	24%	0%	0%

Q3.5 On your day of arrival, were you offered information on the following? (Please tick all that apply)

Information about what was going to happen to you.....	52%
Information about what support was available for people feeling depressed or suicidal.....	41%
Information about how to make routine requests.....	56%
Information about your entitlement to visits	52%
Information about health services	56%
Information about the chaplaincy.....	52%
Not offered anything.....	30%



**Q3.6 On your day of arrival, were you offered any of the following?
(Please tick all that apply)**

A reception pack	48%
The opportunity to have a shower	48%
The opportunity to make a free telephone call.....	62%
Something to eat.....	59%
Did not receive anything.....	10%

Q3.7 Did you meet any of the following people within the first 24 hours of your arrival at this prison? (Please tick all that apply)

Chaplain or religious leader	28%
Someone from health services	59%
A listener/Samaritans.....	3%
Did not meet any of these people.....	38%

Q3.8 Did you have access to the tuck shop/canteen within the first 24 hours of your arrival at this prison?

Yes.....	55%
No.....	45%

Q3.9 Did you feel safe on your first night here?

Yes.....	62%
No.....	38%
Don't remember.....	0%

Q3.10 How soon after your arrival did you go on an induction course?

Have not been on an induction course.....	21%
Within the first week.....	61%
More than a week.....	18%
Don't remember.....	0%

Q3.11 Did the induction course cover everything you needed to know about the prison?

Have not been on an induction course.....	21%
Yes.....	46%
No.....	21%
Don't remember.....	11%

Section 4: Legal rights and respectful custody

Q4.1 How easy is to?

	Very easy	Easy	Neither	Difficult	Very difficult	N/A
Communicate with your solicitor or legal representative?	14%	59%	17%	10%	0%	0%
Attend legal visits?	19%	52%	26%	4%	0%	0%
Obtain bail information?	0%	35%	39%	4%	9%	13%

Q4.2 Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?

Not had any letters.....	14%
Yes.....	50%
No.....	36%

Q4.3 Please answer the following questions about the wing/unit you are currently living on:

	Yes	No	Don't know	N/A
Are you normally offered enough clean, suitable clothes for the week?	54%	17%	0%	29%
Are you normally able to have a shower every day?	100%	0%	0%	0%
Do you normally receive clean sheets every week?	82%	14%	0%	4%
Do you normally get cell cleaning materials every week?	93%	7%	0%	0%
Is your cell call bell normally answered within five minutes?	57%	43%	0%	0%
Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	86%	14%	0%	0%
Can you normally get your stored property, if you need to?	50%	36%	7%	7%

Q4.4 What is the food like here?

Very good	Good	Neither	Bad	Very bad
0%	14%	25%	57%	4%

Q4.5 Does the tuck shop/canteen sell a wide enough range of goods to meet your needs?

Have not bought anything yet.....	0%
Yes.....	50%
No.....	50%

Q4.6 Is it easy or difficult to get either

	Very easy	Easy	Neither	Difficult	Very difficult	Don't know
A complaint form	46%	43%	7%	0%	0%	4%
An application form	37%	48%	7%	0%	4%	4%



Q4.7 Have you made an application?

Yes.....55%
 No.....45%

Q4.8 Please answer the following questions concerning applications

(If you have not made an application please tick the 'not made one' option)

	Not made one	Yes	No
Do you feel applications are dealt with fairly?	45%	34%	21%
Do you feel applications are dealt with promptly? (within seven days)	45%	41%	14%

Q4.9 Have you made a complaint?

Yes.....45%
 No.....55%

Q4.10 Please answer the following questions concerning complaints

(If you have not made a complaint please tick the 'not made one' option)

	Not made one	Yes	No
Do you feel complaints are dealt with fairly?	55%	3%	41%
Do you feel complaints are dealt with promptly? (within seven days)	55%	17%	28%
Were you given information about how to make an appeal?	62%	19%	19%

Q4.11 Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?

Not made a complaint.....57%
 Yes.....4%
 No.....39%

Q4.12 How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?

<i>Don't know who they are</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
39%	0%	18%	32%	7%	4%

Q4.13 Please answer the following questions about your religious beliefs?

	Yes	No	Don't know/N/A
Do you feel your religious beliefs are respected?	79%	14%	7%
Are you able to speak to a religious leader of your faith in private if you want to?	96%	4%	0%

Q4.14 Can you speak to a listener at any time, if you want to?

Yes	No	Don't know
41%	7%	52%



Q4.15 Please answer the following questions about staff in this prison?

	Yes	No
Is there a member of staff you can turn to for help if you have a problem?	71%	29%
Do most staff treat you with respect?	86%	14%

Section 5: Safety

Q5.1 Have you ever felt unsafe in this prison?

Yes.....	55%
No.....	45%

Q5.2 Do you feel unsafe in this prison at the moment?

Yes.....	10%
No.....	90%

Q5.3 In which areas of this prison do you/have you ever felt unsafe? (Please tick all that apply)

Never felt unsafe.....	46%	At meal times.....	0%
Everywhere.....	4%	At health services.....	0%
SSU.....	18%	Visit's area.....	14%
Association areas.....	0%	In wing showers.....	0%
Reception area.....	4%	In gym showers.....	0%
At the gym.....	0%	In corridors/stairwells.....	0%
In an exercise yard.....	0%	On your landing/wing.....	0%
At work.....	0%	In your cell.....	0%
During Movement.....	29%	At religious services.....	0%
At education.....	4%		

Q5.4 Have you been victimised by another prisoner or group of prisoners here?

Yes.....	10%
No.....	90%

Q5.5 If yes, what did the incident(s) involve/what was it about? (Please tick all that apply)

Insulting remarks (about you or your family or friends).....	3%	Because you were new here.....	0%
Physical abuse (being hit, kicked or assaulted).....	0%	Because of your sexuality.....	0%
Sexual abuse.....	0%	Because you have a disability.....	3%
Because of your race or ethnic origin.....	0%	Because of your religion/religious beliefs.....	7%
Because of drugs.....	0%	Being from a different part of the country than others.....	3%
Having your canteen/property taken.....	0%	Because of your offence/ crime.....	10%
			0%





Q5.6 Have you been victimised by a member of staff or group of staff here?
 Yes..... 14%
 No..... 86%

Q5.7 If yes, what did the incident(s) involve/what was it about? (Please tick all that apply)

Insulting remarks (about you or your family or friends)4%
Because of your sexuality.....0%
Physical abuse (being hit, kicked or assaulted).....4%
Because you have a disability.....0% *Because of your religion/religious beliefs..11%*
Sexual abuse.....0% *Being from a different part of the country ...*
Because of your race or ethnic origin 0% *than others.....0%*
Because of drugs.....0% *Because of your offence/ crime.....4%*
Because you were new here.....7%

Q5.8 If you have been victimised by prisoners or staff, did you report it?
 Not been victimised 78%
 Yes 4%
 No..... 19%

Q5.9 Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?
 Yes..... 21%
 No..... 79%

Q5.10 Have you ever felt threatened or intimidated by a member of staff/group of staff in here?
 Yes..... 29%
 No..... 71%

Q5.11 Is it easy or difficult to get illegal drugs in this prison?

Very easy	Easy	Neither	Difficult	Very difficult	Don't know
10%	7%	14%	3%	3%	62%

Section 6: Health services

Q6.1 How easy or difficult is it to see the following people:

	Don't know	Very easy	Easy	Neither	Difficult	Very difficult
The doctor	7%	11%	18%	18%	39%	7%
The nurse	0%	26%	48%	4%	22%	0%
The dentist	3%	3%	21%	7%	59%	7%
The optician	18%	7%	32%	11%	32%	0%

Q6.2 Are you able to see a pharmacist?
 Yes..... 24%
 No..... 76%



Q6.3 What do you think of the quality of the health service from the following people:

	<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
<i>The doctor</i>	11%	4%	11%	14%	39%	21%
<i>The nurse</i>	4%	21%	36%	18%	18%	4%
<i>The dentist</i>	18%	21%	25%	11%	21%	4%
<i>The optician</i>	29%	18%	21%	14%	18%	0%

Q6.4 What do you think of the overall quality of the health services here?

	<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
	0%	0%	31%	17%	45%	7%

Q6.5 Are you currently taking medication?

Yes.....	52%
No.....	48%

Q6.6 If you are taking medication, are you allowed to keep possession of your medication in your own cell?

<i>Not taking medication</i>	50%
Yes.....	46%
No.....	4%

Q6.7 Do you feel you have any emotional well being/ mental health issues?

Yes.....	31%
No.....	69%

Q6.8 Are your emotional well-being/mental health issues being addressed by any of the following? (Please tick all that apply)

<i>Do not have any issues/Not receiving any help</i>	85%
<i>Doctor</i>	7%
<i>Nurse</i>	11%
<i>Psychiatrist</i>	7%
<i>Mental Health Support team</i>	11%
<i>Counsellor</i>	4%
<i>Other</i>	0%

Q6.9 Did you have a problem with either of the following when you came into this prison?

	<i>Yes</i>	<i>No</i>
<i>Drugs</i>	19%	81%
<i>Alcohol</i>	33%	67%

Q6.10 Have you developed a problem with either of the following since you have been in this prison?

	<i>Yes</i>	<i>No</i>
<i>Drugs</i>	3%	97%
<i>Alcohol</i>	0%	100%





Q6.11 Do you know who to contact in this prison to get help with your drug or alcohol problem?

Yes..... 31%
 No..... 7%
 Did not/do not have a drug or alcohol problem 62%

Q6.12 Have you received any intervention or help (including substance use support teams, Health Services etc.) for your drug/alcohol problem, whilst in this prison?

Yes 7%
 No..... 29%
 Did not/do not have a drug or alcohol problem 64%

Q6.13 Was the intervention or help you received, whilst in this prison, helpful?

Yes 8%
 No..... 4%
 Did not have a problem/Have not received help..... 88%

Q6.14 Do you think you will have a problem with either of the following when you leave this prison?

	Yes	No	Don't know
Drugs	0%	69%	31%
Alcohol	4%	68%	29%

Q6.15 Do you know who in this prison can help you contact external drug or alcohol agencies on release?

Yes..... 17%
 No..... 14%
 N/A..... 69%

Section 7: Purposeful Activity

Q7.1 Are you currently involved in any of the following activities? (Please tick all that apply)

Prison job..... 0%
 Vocational or skills training 7%
 Education (including basic skills)..... 61%
 Offending behaviour programmes..... 7%
 Not involved in any of these 32%



Q7.2 If you have been involved in any of the following, whilst in prison, do you think it will help you on release?

	Not been involved	Yes	No	Don't know
Prison job	57%	0%	43%	0%
Vocational or skills training	43%	14%	43%	0%
Education (including basic skills)	23%	42%	27%	8%
Offending behaviour programmes	47%	13%	40%	0%

Q7.3 How often do you go to the library?

Don't want to go	14%
Never	21%
Less than once a week	46%
About once a week	4%
More than once a week	0%
Don't know	14%

Q7.4 On average how many times do you go to the gym each week?

Don't want to go	0	1	2	3 to 5	More than 5	Don't know
21%	14%	4%	0%	54%	7%	0%

Q7.5 On average how many times do you go outside for exercise each week?

Don't want to go	0	1 to 2	3 to 5	More than 5	Don't know
4%	7%	11%	43%	36%	0%

Q7.6 On average how many hours do you spend out of your cell on a weekday? (Please include hours at education, at work etc)

Less than 2 hours	11%
2 to less than 4 hours	29%
4 to less than 6 hours	32%
6 to less than 8 hours	7%
8 to less than 10 hours	7%
10 hours or more	11%
Don't know	4%

Q7.7 On average, how many times do you have association each week?

Don't want to go	0	1 to 2	3 to 5	More than 5	Don't know
4%	0%	4%	39%	54%	0%

Q7.8 How often do staff normally speak to you during association time?

Do not go on association	4%
Never	26%
Rarely	22%
Some of the time	19%
Most of the time	11%
All of the time	19%





Section 8: Resettlement

Q8.1 When did you first meet your personal officer?

Still have not met him/her..... 74%

In the first week 19%

More than a week 4%

Don't remember..... 4%

Q8.2 How helpful do you think your personal officer is?

<i>Do not have a personal officer</i>	<i>Very helpful</i>	<i>Helpful</i>	<i>Neither</i>	<i>Not very helpful</i>	<i>Not at all helpful</i>
74%	4%	7%	15%	0%	0%

Q8.3 Do you have a sentence plan?

Not sentenced..... 0%

Yes..... 7%

No..... 93%

Q8.4 How involved were you in the development of your sentence plan?

Do not have a sentence plan 93%

Very involved 4%

Involved 4%

Neither 0%

Not very involved 0%

Not at all involved 0%

Q8.5 Can you achieve all or some of your sentence plan targets in this prison?

Do not have a sentence plan 93%

Yes 4%

No..... 4%

Q8.6 Are there plans for you to achieve all/some of your sentence plan targets in another prison?

Do not have a sentence plan 93%

Yes 0%

No..... 7%

Q8.7 Do you feel that any member of staff has helped you to address your offending behaviour whilst at this prison?

Not sentenced 0%

Yes..... 15%

No..... 85%



Q8.8 Do you feel that any member of staff has helped you to prepare for your release?

Yes.....4%
No96%

Q8.9 Have you had any problems with sending or receiving mail?

Yes.....39%
No.....61%
Don't know0%

Q8.10 Have you had any problems getting access to the telephones?

Yes7%
No.....93%
Don't know.....0%

Q8.11 Did you have a visit in the first week that you were here?

Not been here a week yet.....4%
Yes.....86%
No.....7%
Don't remember.....4%

Q8.12 Does this prison give you the opportunity to have the visits you are entitled to? (e.g. number and length of visit)

Don't know what my entitlement is4%
Yes.....96%
No.....0%

Q8.13 How many visits did you receive in the last week?.....

Not been in a week	0	1 to 2	3 to 4	5 or more
4%	14%	82%	0%	0%

Q8.14 Have you been helped to maintain contact with your family/friends whilst in this prison?

Yes.....48%
No.....52%

Q8.15 Do you know who to contact to get help with the following within this prison: (please tick all that apply)

Don't know who to contact65%	Help with your finances in preparation for release8%
Maintaining good relationships8%	Claiming benefits on release27%
Avoiding bad relationships4%	Arranging a place at college/continuing education on release.....4%
Finding a job on release27%	Continuity of health services on release19%
Finding accommodation on release23%	Opening a bank account.....4%





Q8.16 Do you think you will have a problem with any of the following on release from prison? (please tick all that apply)

No problems.....	36%	Help with your finances in preparation for release.....	25%
Maintaining good relationships.....	11%	Claiming benefits on release	36%
Avoiding bad relationships	4%	Arranging a place at college/continuing education on release	11%
Finding a job on release	57%	Continuity of health services on release.....	14%
Finding accommodation on release.....	43%	Opening a bank account.....	14%

Q8.17 Have you done anything, or has anything happened to you here that you think will make you less likely to offend in the future?

Not sentenced.....	0%
Yes.....	46%
No.....	54



Prisoner Survey Responses HMP Maghaberry 2009

Prisoner Survey Responses (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.

Key to tables

		Maghaberry 2009	Local prisons comparator	Maghaberry 2009	Maghaberry 2005
Any percent highlighted in green is significantly better					
Any percent highlighted in blue is significantly worse					
Any percent highlighted in orange shows a significant difference in prisoners' background details					
Percentages which are not highlighted show there is no significant difference					
Number of completed questionnaires returned		106	3952	106	104
SECTION 1: General Information					
2	Are you under 21 years of age?	1%	4%	1%	3%
3a	Are you sentenced?	48%	65%	48%	50%
3b	Are you on recall?	4%	8%	4%	
4a	Is your sentence less than 12 months?	8%	18%	8%	8%
4b	Are you here under a public protection sentence (ICS/ ECS)?	0%	3%	0%	
5	Do you have six months or less to serve?	15%	31%	15%	15%
6	Have you been in this prison less than a month?	11%	15%	11%	12%
7	Are you a foreign national?	13%	13%	13%	13%
8	Is English your first language?	94%	90%	94%	97%
9	Are you from a minority ethnic group? (including all those who did not tick White British, White Irish or White other categories)	8%	26%	8%	0%
10	Are you Muslim?	1%		1%	
11	Are you homosexual/gay or bisexual?	2%	3%	2%	
12	Do you consider yourself to have a disability?	25%	16%	25%	
13	Is this your first time in prison?	27%	27%	27%	30%
14	Have you been in more than 5 prisons this time?	2%	11%	2%	
15	Do you have any children under the age of 18?	61%	57%	61%	67%
SECTION 2: Transfers and Escorts					
For the most recent journey you have made either to or from court or between prisons:					
1a	Was the cleanliness of the van good/very good?	29%	49%	29%	26%
1b	Was your personal safety during the journey good/very good?	41%	58%	41%	47%
1c	Was the comfort of the van good/very good?	15%	11%	15%	13%
1d	Was the attention paid to your health needs good/very good?	24%	28%	24%	21%
1e	Was the frequency of toilet breaks good/very good?	20%	12%	20%	8%
2	Did you spend more than four hours in the van?	3%	5%	3%	3%
3	Were you treated well/very well by the escort staff?	53%	67%	53%	54%
4a	Did you know where you were going when you left court or when transferred from another prison?	85%	72%	85%	88%
4b	Before you arrived here did you receive any written information about what would happen to you?	12%	14%	12%	12%
4c	When you first arrived here did your property arrive at the same time as you?	68%	81%	68%	75%



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 	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction					
1	In the first 24 hours, did staff ask you if you needed help/support with the following:				
1b	Problems with loss of property?	10%	17%	10%	
1c	Housing problems?	20%	40%	20%	
1d	Problems contacting employers?	7%	19%	7%	
1e	Problems contacting family?	65%	50%	65%	
1f	Problems ensuring dependants were looked after?	13%	16%	13%	
1g	Money problems?	13%	24%	13%	
1h	Problems of feeling depressed/suicidal?	35%	64%	35%	
1i	Health problems?	52%	63%	52%	
1j	Problems in needing protection from other prisoners?	23%	34%	23%	
1k	Problems accessing phone numbers?	41%	41%	41%	
2	When you first arrived:				
2a	Did you have any problems?	72%	78%	72%	74%
2b	Did you have any problems with loss of property?	9%	11%	9%	7%
2c	Did you have any housing problems?	23%	23%	23%	14%
2d	Did you have any problems contacting employers?	6%	7%	6%	4%
2e	Did you have any problems contacting family?	18%	32%	18%	32%
2f	Did you have any problems ensuring dependants were being looked after?	10%	8%	10%	8%
2g	Did you have any money worries?	21%	26%	21%	30%
2h	Did you have any problems with feeling depressed or suicidal?	27%	24%	27%	41%
2i	Did you have any health problems?	33%	25%	33%	25%
2j	Did you have any problems with needing protection from other prisoners?	12%	9%	12%	17%
2k	Did you have problems accessing phone numbers?	12%	32%	12%	
3a	Were you seen by a member of health services in reception?	67%	85%	67%	69%
3b	When you were searched in reception, was this carried out in a respectful way?	53%	67%	53%	46%
4	Were you treated well/very well in reception?	46%	57%	46%	49%
5	On your day of arrival, were offered any of the following information:				
5a	Information about what was going to happen to you?	35%	42%	35%	18%
5b	Information about what support was available for people feeling depressed or suicidal?	25%	41%	25%	11%
5c	Information about how to make routine requests?	35%	31%	35%	21%
5d	Information about your entitlement to visits?	39%	41%	39%	22%
5e	Information about health services?	34%	57%	34%	
5f	Information about the chaplaincy?	30%	58%	30%	

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		Maghaberry 2009	Local prisons comparator	Maghaberry 2009	Maghaberry 2005
SECTION 3: Reception, first night and induction continued					
6	On your day of arrival, were you offered any of the following:				
6a	A reception pack?	49%	74%	49%	3%
6b	The opportunity to have a shower?	45%	33%	45%	50%
6c	The opportunity to make a free telephone call?	68%	54%	68%	18%
6d	Something to eat?	71%	82%	71%	51%
7	Within the first 24 hours did you meet any of the following people:				
7a	The chaplain or a religious leader?	28%	49%	28%	26%
7b	Someone from health services?	77%	67%	77%	64%
7c	A listener/Samaritans?	9%	31%	9%	4%
8	Did you have access to the tuck shop/ canteen within the first 24 hours?	52%	22%	52%	30%
9	Did you feel safe on your first night here?	64%	73%	64%	53%
10	Have you been on an induction course?	80%	74%	80%	74%
For those who have been on an induction course:					
11	Did the course cover everything you needed to know about the prison?	44%	56%	44%	41%
SECTION 4: Legal Rights and Respectful Custody					
1	In terms of your legal rights, is it easy/very easy to:				
1a	Communicate with your solicitor or legal representative?	54%	42%	54%	
1b	Attend legal visits?	68%	62%	68%	
1c	Obtain bail information?	37%	25%	37%	
2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	61%	43%	61%	60%
3	For the wing/unit you are currently on:				
3a	Are you normally offered enough clean, suitable clothes for the week?	56%	51%	56%	68%
3b	Are you normally able to have a shower every day?	86%	78%	86%	85%
3c	Do you normally receive clean sheets every week?	93%	83%	93%	86%
3d	Do you normally get cell cleaning materials every week?	73%	64%	73%	75%
3e	Is your cell call bell normally answered within five minutes?	30%	36%	30%	37%
3f	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	54%	63%	54%	60%
3g	Can you normally get your stored property, if you need to?	36%	29%	36%	41%
4	Is the food in this prison good/very good?	20%	23%	20%	17%
5	Does the tuck shop/canteen sell a wide enough range of goods to meet your needs?	51%	44%	51%	46%
6a	Is it easy/very easy to get a complaints form?	80%	79%	80%	65%
6b	Is it easy/very easy to get an application form?	69%	84%	69%	56%
7	Have you made an application?	52%	81%	52%	53%



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	Percentages which are not highlighted show there is no significant difference				
SECTION 4: Legal Rights and Respectful Custody continued					
For those who have made an application:					
8a	Do you feel applications are dealt with fairly?	37%	53%	37%	31%
8b	Do you feel applications are dealt with promptly? (within 7 days)	47%	49%	47%	38%
9	Have you made a complaint?	46%	50%	46%	53%
For those who have made a complaint:					
10a	Do you feel complaints are dealt with fairly?	24%	33%	24%	16%
10b	Do you feel complaints are dealt with promptly? (within 7 days)	40%	35%	40%	22%
11	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	48%	27%	48%	40%
10c	Were you given information about how to make an appeal?	18%	28%	18%	24%
12	Is it easy/very easy to see the Independent Monitoring Board?	26%	30%	26%	22%
13a	Do you feel your religious beliefs are respected?	62%	53%	62%	58%
13b	Are you able to speak to a religious leader of your faith in private if you want to?	67%	57%	67%	67%
14	Are you able to speak to a Listener at any time, if you want to?	52%	63%	52%	25%
15a	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	57%	64%	57%	54%
15b	Do most staff, in this prison, treat you with respect?	73%	67%	73%	67%
SECTION 5: Safety					
1	Have you ever felt unsafe in this prison?	56%	40%	56%	62%
2	Do you feel unsafe in this prison at the moment?	19%	20%	19%	
4	Have you been victimised by another prisoner?	31%	23%	31%	31%
5	Since you have been here, has another prisoner:				
5a	Made insulting remarks made about you, your family or friends?	15%	12%	15%	18%
5b	Hit, kicked or assaulted you?	13%	8%	13%	16%
5c	Sexually abused you?	2%	1%	2%	1%
5d	Victimised you because of your race or ethnic origin?	7%	4%	7%	5%
5e	Victimised you because of drugs?	4%	4%	4%	1%
5f	Taken your canteen/property?	4%	5%	4%	4%
5g	Victimised you because you were new here?	7%	6%	7%	3%
5h	Victimised you because of your sexuality?	1%	1%	1%	
5i	Victimised you because you have a disability?	2%	2%	2%	
5j	Victimised you because of your religion/religious beliefs?	9%	3%	9%	
5k	Victimised you because you were from a different part of the country?	9%	5%	9%	4%
5l	Victimised you because of your offence/crime?	15%	15%	15%	



Key to tables

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	Percentages which are not highlighted show there is no significant difference				
SECTION 5: Safety continued					
6	Have you been victimised by a member of staff?	47%	27%	47%	30%
7	Since you have been here, has a member of staff:				
7a	Made insulting remarks made about you, your family or friends?	18%	14%	18%	18%
7b	Hit, kicked or assaulted you?	12%	5%	12%	12%
7c	Sexually abused you?	4%	1%	4%	3%
7d	Victimised you because of your race or ethnic origin?	4%	5%	4%	6%
7e	Victimised you because of drugs?	9%	5%	9%	1%
7f	Victimised you because you were new here?	10%	6%	10%	9%
7g	Victimised you because of your sexuality?	1%	1%	1%	
7h	Victimised you because you have a disability?	3%	2%	3%	
7i	Victimised you because of your religion/religious beliefs?	11%	4%	11%	
7j	Victimised you because you were from a different part of the country?	9%	4%	9%	3%
7k	Victimised you because of your offence/crime?	13%	10%	13%	
For those who have been victimised by staff or other prisoners:					
8	Did you report any victimisation that you have experienced?	36%	31%	36%	51%
9	Have you ever felt threatened or intimidated by another prisoner/ group of prisoners in here?	31%	25%	31%	
10	Have you ever felt threatened or intimidated by a member of staff in here?	42%	26%	42%	
11	Is it easy/very easy to get illegal drugs in this prison?	41%	34%	41%	41%
SECTION 6: Healthcare					
1a	Is it easy/very easy to see the doctor?	25%	26%	25%	
1b	Is it easy/very easy to see the nurse?	73%	41%	73%	
1c	Is it easy/very easy to see the dentist?	18%	11%	18%	
1d	Is it easy/very easy to see the optician?	14%	13%	14%	
2	Are you able to see a pharmacist?	19%	42%	19%	
For those who have been to the following services, do you think the quality of the health service from the following is good/very good:					
3a	The doctor?	26%	46%	26%	27%
3b	The nurse?	60%	59%	60%	63%
3c	The dentist?	49%	33%	49%	61%
3d	The optician?	38%	36%	38%	58%
4	The overall quality of health services?	33%	41%	33%	28%



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Healthcare continued					
5	Are you currently taking medication?	58%	45%	58%	
For those currently taking medication:					
6	Are you allowed to keep possession of your medication in your own cell?	85%	64%	85%	
7	Do you feel you have any emotional well being/mental health issues?	57%	35%	57%	
For those with emotional well being/mental health issues, are these being addressed by any of the following:					
8a	Not receiving any help?	8%	40%	8%	
8b	A doctor?	25%	28%	25%	
8c	A nurse?	28%	8%	28%	
8d	A psychiatrist?	14%	13%	14%	
8e	The Mental Health Support Team?	33%	43%	33%	
8f	A counsellor?	8%	8%	8%	
9a	Did you have a drug problem when you came into this prison?	37%	24%	37%	23%
9b	Did you have an alcohol problem when you came into this prison?	45%	20%	45%	16%
10a	Have you developed a drug problem since you have been in this prison?	15%	15%	15%	
10b	Have you developed an alcohol problem since you have been in this prison?	5%	7%	5%	
For those with drug or alcohol problems:					
11	Do you know who to contact in this prison for help?	73%	80%	73%	
12	Have you received any help or intervention whilst in this prison?	31%	67%	31%	
For those who have received help or intervention with their drug or alcohol problem:					
13	Was this intervention or help useful?	69%	76%	69%	
14a	Do you think you will have a problem with drugs when you leave this prison? (Yes/don't know)	32%	31%	32%	23%
14b	Do you think you will have a problem with alcohol when you leave this prison? (Yes/don't know)	38%	25%	38%	30%
For those who may have a drug or alcohol problem on release, do you know who in this prison:					
15	Can help you contact external drug or alcohol agencies on release?	40%	54%	40%	
SECTION 7: Purposeful Activity					
1	Are you currently involved in any of the following activities:				
1a	A prison job?	31%	51%	31%	
1b	Vocational or skills training?	6%	11%	6%	
1c	Education (including basic skills)?	27%	27%	27%	
1d	Offending Behaviour Programmes?	14%	11%	14%	

Key to tables

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Purposeful Activity continued					
2ai	Have you had a job whilst in prison?	63%	64%	63%	57%
For those who have had a prison job whilst in prison:					
2aii	Do you feel the job will help you on release?	54%	37%	54%	46%
2bi	Have you been involved in vocational or skills training whilst in prison?	49%	54%	49%	47%
For those who have had vocational or skills training whilst in prison:					
2bii	Do you feel the vocational or skills training will help you on release?	47%	47%	47%	47%
2ci	Have you been involved in education whilst in prison?	60%	63%	60%	57%
For those who have been involved in education whilst in prison:					
2cii	Do you feel the education will help you on release?	62%	57%	62%	61%
2di	Have you been involved in offending behaviour programmes whilst in prison?	55%	50%	55%	46%
For those who have been involved in offending behaviour programmes whilst in prison:					
2dii	Do you feel the offending behaviour programme(s) will help you on release?	51%	45%	51%	45%
3	Do you go to the library at least once a week?	19%	36%	19%	29%
4	On average, do you go to the gym at least twice a week?	46%	41%	46%	46%
5	On average, do you go outside for exercise three or more times a week?	55%	39%	55%	51%
6	On average, do you spend ten or more hours out of your cell on a weekday?	10%	9%	10%	2%
7	On average, do you go on association more than five times each week?	43%	49%	43%	36%
8	Do staff normally speak to you most of the time/all of the time during association?	13%	17%	13%	9%
SECTION 8: Resettlement					
1	Do you have a personal officer?	29%	37%	29%	26%
For those with a personal officer:					
2	Do you think your personal officer is helpful/very helpful?	60%	65%	60%	74%
For those who are sentenced:					
3	Do you have a sentence plan?	31%	36%	31%	31%
For those with a sentence plan?					
4	Were you involved/very involved in the development of your plan?	46%	60%	46%	78%
5	Can you achieve some/all of your sentence plan targets in this prison?	57%	59%	57%	
6	Are there plans for you to achieve some/all your targets in another prison?	38%	47%	38%	
For those who are sentenced:					
7	Do you feel that any member of staff has helped you address your offending behaviour whilst at this prison?	33%	24%	33%	
8	Do you feel that any member of staff has helped you to prepare for release?	13%	15%	13%	
9	Have you had any problems with sending or receiving mail?	56%	44%	56%	47%
10	Have you had any problems getting access to the telephones?	25%	33%	25%	40%
11	Did you have a visit in the first week that you were here?	61%	36%	61%	65%
12	Does this prison give you the opportunity to have the visits you are entitled to? (e.g. number and length of visit)	71%	64%	71%	66%



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Resettlement continued					
13	Did you receive one or more visits in the last week?	60%	39%	60%	
14	Have you been helped to maintain contact with family/friends whilst in this prison?	40%	37%	40%	
15	Do you know who to contact within this prison to get help with the following:				
15b	Maintaining good relationships?	17%	20%	17%	
15c	Avoiding bad relationships?	14%	15%	14%	
15d	Finding a job on release?	17%	40%	17%	25%
15e	Finding accommodation on release?	24%	42%	24%	32%
15f	With money/finances on release?	15%	29%	15%	23%
15g	Claiming benefits on release?	25%	45%	25%	29%
15h	Arranging a place at college/continuing education on release?	12%	29%	12%	19%
15i	Accessing health services on release?	21%	35%	21%	31%
15j	Opening a bank account on release?	19%	31%	19%	
16	Do you think you will have a problem with any of the following on release from prison?				
16b	Maintaining good relationships?	20%	16%	20%	
16c	Avoiding bad relationships?	14%	15%	14%	
16d	Finding a job?	47%	57%	47%	
16e	Finding accommodation?	40%	50%	40%	
16f	Money/finances?	41%	58%	41%	
16g	Claiming benefits?	38%	40%	38%	
16h	Arranging a place at college/continuing education?	22%	38%	22%	
16i	Accessing health services?	26%	25%	26%	
16j	Opening a bank account?	27%	44%	27%	
For those who are sentenced:					
17	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	56%	49%	56%	55%



Prisoner Survey Responses HMP Maghaberry 2009

Prisoner Survey Responses (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.

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Number of completed questionnaires returned		51	27
SECTION 1: General Information			
2	Are you under 21 years of age?	2%	0%
3a	Are you sentenced?	42%	54%
3b	Are you on recall?	4%	0%
4a	Is your sentence less than 12 months?	6%	4%
4b	Are you here under a public protection sentence (ICS/ ECS)?	0%	0%
5	Do you have six months or less to serve?	15%	14%
6	Have you been in this prison less than a month?	12%	11%
7	Are you a foreign national?	10%	4%
8	Is English your first language?	96%	100%
9	Are you from a minority ethnic group? (including all those who did not tick White British, White Irish or White other categories)	2%	4%
10	Are you Muslim?	0%	0%
11	Are you homosexual/gay or bisexual?	0%	4%
12	Do you consider yourself to have a disability?	24%	18%
13	Is this your first time in prison?	22%	22%
14	Have you been in more than 5 prisons this time?	0%	9%
15	Do you have any children under the age of 18?	63%	78%
SECTION 2: Transfers and Escorts			
For the most recent journey you have made either to or from court or between prisons:			
1a	Was the cleanliness of the van good/very good?	26%	39%
1b	Was your personal safety during the journey good/very good?	34%	62%
1c	Was the comfort of the van good/very good?	4%	25%
1d	Was the attention paid to your health needs good/very good?	20%	42%
1e	Was the frequency of toilet breaks good/very good?	16%	25%
2	Did you spend more than four hours in the van?	4%	0%
3	Were you treated well/very well by the escort staff?	44%	68%
4a	Did you know where you were going when you left court or when transferred from another prison?	86%	92%
4b	Before you arrived here did you receive any written information about what would happen to you?	4%	25%
4c	When you first arrived here did your property arrive at the same time as you?	70%	64%



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SECTION 3: Reception, first night and induction			
1	In the first 24 hours, did staff ask you if you needed help/support with the following:		
1b	Problems with loss of property?	10%	4%
1c	Housing problems?	12%	25%
1d	Problems contacting employers?	6%	4%
1e	Problems contacting family?	74%	58%
1f	Problems ensuring dependants were looked after?	10%	17%
1g	Money problems?	12%	12%
1h	Problems of feeling depressed/suicidal?	32%	38%
1i	Health problems?	46%	58%
1j	Problems in needing protection from other prisoners?	20%	29%
1k	Problems accessing phone numbers?	34%	62%
2	When you first arrived:		
2a	Did you have any problems?	80%	58%
2b	Did you have any problems with loss of property?	13%	0%
2c	Did you have any housing problems?	26%	0%
2d	Did you have any problems contacting employers?	9%	0%
2e	Did you have any problems contacting family?	18%	21%
2f	Did you have any problems ensuring dependants were being looked after?	13%	5%
2g	Did you have any money worries?	18%	10%
2h	Did you have any problems with feeling depressed or suicidal?	30%	26%
2i	Did you have any health problems?	28%	37%
2j	Did you have any problems with needing protection from other prisoners?	13%	21%
2k	Did you have problems accessing phone numbers?	15%	10%
3a	Were you seen by a member of health services in reception?	61%	72%
3b	When you were searched in reception, was this carried out in a respectful way?	43%	79%
4	Were you treated well/very well in reception?	40%	68%
5	On your day of arrival, were offered any of the following information:		
5a	Information about what was going to happen to you?	37%	40%
5b	Information about what support was available for people feeling depressed or suicidal?	18%	40%
5c	Information about how to make routine requests?	35%	28%
5d	Information about your entitlement to visits?	35%	32%
5e	Information about health services?	33%	36%
5f	Information about the chaplaincy?	25%	40%



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SECTION 3: Reception, first night and induction continued

6	On your day of arrival, were you offered any of the following:		
6a	A reception pack?	43%	56%
6b	The opportunity to have a shower?	43%	56%
6c	The opportunity to make a free telephone call?	76%	60%
6d	Something to eat?	70%	72%
7	Within the first 24 hours did you meet any of the following people:		
7a	The chaplain or a religious leader?	16%	40%
7b	Someone from health services?	75%	72%
7c	A listener/Samaritans?	6%	20%
8	Did you have access to the tuck shop/ canteen within the first 24 hours?	45%	64%
9	Did you feel safe on your first night here?	59%	84%
10	Have you been on an induction course?	84%	80%
For those who have been on an induction course:			
11	Did the course cover everything you needed to know about the prison?	38%	50%

SECTION 4: Legal Rights and Respectful Custody

1	In terms of your legal rights, is it easy/very easy to:		
1a	Communicate with your solicitor or legal representative?	46%	68%
1b	Attend legal visits?	61%	77%
1c	Obtain bail information?	42%	50%
2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	68%	58%
3	For the wing/unit you are currently on:		
3a	Are you normally offered enough clean, suitable clothes for the week?	49%	74%
3b	Are you normally able to have a shower every day?	84%	88%
3c	Do you normally receive clean sheets every week?	98%	96%
3d	Do you normally get cell cleaning materials every week?	72%	84%
3e	Is your cell call bell normally answered within five minutes?	24%	38%
3f	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	52%	64%
3g	Can you normally get your stored property, if you need to?	31%	50%
4	Is the food in this prison good/very good?	12%	35%
5	Does the tuck shop/canteen sell a wide enough range of goods to meet your needs?	52%	61%
6a	Is it easy/very easy to get a complaints form?	82%	84%
6b	Is it easy/very easy to get an application form?	71%	74%
7	Have you made an application?	55%	48%





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SECTION 4: Legal Rights and Respectful Custody continued			
For those who have made an application:			
8a	Do you feel applications are dealt with fairly?	33%	55%
8b	Do you feel applications are dealt with promptly? (within 7 days)	44%	70%
9	Have you made a complaint?	52%	40%
For those who have made a complaint:			
10a	Do you feel complaints are dealt with fairly?	27%	22%
10b	Do you feel complaints are dealt with promptly? (within 7 days)	32%	67%
11	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	46%	64%
10c	Were you given information about how to make an appeal?	15%	26%
12	Is it easy/very easy to see the Independent Monitoring Board?	25%	31%
13a	Do you feel your religious beliefs are respected?	72%	71%
13b	Are you able to speak to a religious leader of your faith in private if you want to?	73%	79%
14	Are you able to speak to a Listener at any time, if you want to?	48%	73%
15a	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	44%	61%
15b	Do most staff, in this prison, treat you with respect?	67%	80%
SECTION 5: Safety			
1	Have you ever felt unsafe in this prison?	62%	35%
2	Do you feel unsafe in this prison at the moment?	20%	8%
4	Have you been victimised by another prisoner?	29%	23%
5	Since you have been here, has another prisoner:		
5a	Made insulting remarks made about you, your family or friends?	15%	8%
5b	Hit, kicked or assaulted you?	15%	11%
5c	Sexually abused you?	2%	0%
5d	Victimised you because of your race or ethnic origin?	6%	0%
5e	Victimised you because of drugs?	4%	4%
5f	Taken your canteen/property?	2%	4%
5g	Victimised you because you were new here?	6%	0%
5h	Victimised you because of your sexuality?	0%	0%
5i	Victimised you because you have a disability?	0%	0%
5j	Victimised you because of your religion/religious beliefs?	6%	0%
5k	Victimised you because you were from a different part of the country?	6%	0%
5l	Victimised you because of your offence/crime?	8%	15%



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SECTION 5: Safety continued

6	Have you been victimised by a member of staff?	51%	19%
7	Since you have been here, has a member of staff:		
7a	Made insulting remarks made about you, your family or friends?	20%	19%
7b	Hit, kicked or assaulted you?	16%	8%
7c	Sexually abused you?	6%	4%
7d	Victimised you because of your race or ethnic origin?	6%	0%
7e	Victimised you because of drugs?	12%	4%
7f	Victimised you because you were new here?	12%	4%
7g	Victimised you because of your sexuality?	0%	0%
7h	Victimised you because you have a disability?	2%	0%
7i	Victimised you because of your religion/religious beliefs?	12%	0%
7j	Victimised you because you were from a different part of the country?	10%	4%
7k	Victimised you because of your offence/crime?	10%	8%

For those who have been victimised by staff or other prisoners:

8	Did you report any victimisation that you have experienced?	41%	50%
9	Have you ever felt threatened or intimidated by another prisoner/ group of prisoners in here?	32%	21%
10	Have you ever felt threatened or intimidated by a member of staff in here?	49%	20%
11	Is it easy/very easy to get illegal drugs in this prison?	41%	46%

SECTION 6: Healthcare

1a	Is it easy/very easy to see the doctor?	27%	35%
1b	Is it easy/very easy to see the nurse?	74%	81%
1c	Is it easy/very easy to see the dentist?	15%	20%
1d	Is it easy/very easy to see the optician?	11%	18%
2	Are you able to see a pharmacist?	21%	23%

For those who have been to the following services, do you think the quality of the health service from the following is good/very good:

3a	The doctor?	12%	52%
3b	The nurse?	53%	87%
3c	The dentist?	36%	81%
3d	The optician?	18%	73%
4	The overall quality of health services?	28%	56%





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Healthcare continued			
5	Are you currently taking medication?	55%	58%
For those currently taking medication:			
6	Are you allowed to keep possession of your medication in your own cell?	89%	87%
7	Do you feel you have any emotional well being/mental health issues?	57%	48%
For those with emotional well being/mental health issues, are these being addressed by any of the following:			
8a	Not receiving any help?	5%	20%
8b	A doctor?	26%	30%
8c	A nurse?	21%	50%
8d	A psychiatrist?	10%	20%
8e	The Mental Health Support Team?	26%	20%
8f	A counsellor?	16%	0%
9a	Did you have a drug problem when you came into this prison?	41%	19%
9b	Did you have an alcohol problem when you came into this prison?	46%	40%
10a	Have you developed a drug problem since you have been in this prison?	20%	5%
10b	Have you developed an alcohol problem since you have been in this prison?	2%	8%
For those with drug or alcohol problems:			
11	Do you know who to contact in this prison for help?	69%	85%
12	Have you received any help or intervention whilst in this prison?	35%	15%
For those who have received help or intervention with their drug or alcohol problem:			
13	Was this intervention or help useful?	56%	100%
14a	Do you think you will have a problem with drugs when you leave this prison? (Yes/don't know)	42%	24%
14b	Do you think you will have a problem with alcohol when you leave this prison? (Yes/don't know)	44%	36%
For those who may have a drug or alcohol problem on release, do you know who in this prison:			
15	Can help you contact external drug or alcohol agencies on release?	42%	50%
SECTION 7: Purposeful Activity			
1	Are you currently involved in any of the following activities:		
1a	A prison job?	25%	46%
1b	Vocational or skills training?	6%	4%
1c	Education (including basic skills)?	27%	25%
1d	Offending Behaviour Programmes?	12%	8%



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Purposeful Activity continued			
2ai	Have you had a job whilst in prison?	58%	68%
For those who have had a prison job whilst in prison:			
2aii	Do you feel the job will help you on release?	46%	47%
2bi	Have you been involved in vocational or skills training whilst in prison?	55%	47%
For those who have had vocational or skills training whilst in prison:			
2bii	Do you feel the vocational or skills training will help you on release?	39%	43%
2ci	Have you been involved in education whilst in prison?	60%	61%
For those who have been involved in education whilst in prison:			
2cii	Do you feel the education will help you on release?	48%	64%
2di	Have you been involved in offending behaviour programmes whilst in prison?	59%	43%
For those who have been involved in offending behaviour programmes whilst in prison:			
2dii	Do you feel the offending behaviour programme(s) will help you on release?	40%	50%
3	Do you go to the library at least once a week?	8%	25%
4	On average, do you go to the gym at least twice a week?	60%	28%
5	On average, do you go outside for exercise three or more times a week?	59%	58%
6	On average, do you spend ten or more hours out of your cell on a weekday?	18%	4%
7	On average, do you go on association more than five times each week?	42%	48%
8	Do staff normally speak to you most of the time/all of the time during association?	8%	11%
SECTION 8: Resettlement			
1	Do you have a personal officer?	25%	39%
For those with a personal officer:			
2	Do you think your personal officer is helpful/very helpful?	27%	90%
For those who are sentenced:			
3	Do you have a sentence plan?	26%	30%
For those with a sentence plan?			
4	Were you involved/very involved in the development of your plan?	0%	100%
5	Can you achieve some/all of your sentence plan targets in this prison?	25%	60%
6	Are there plans for you to achieve some/all your targets in another prison?	25%	40%
For those who are sentenced:			
7	Do you feel that any member of staff has helped you address your offending behaviour whilst at this prison?	28%	33%
8	Do you feel that any member of staff has helped you to prepare for release?	11%	16%
9	Have you had any problems with sending or receiving mail?	56%	50%
10	Have you had any problems getting access to the telephones?	28%	15%
11	Did you have a visit in the first week that you were here?	64%	69%
12	Does this prison give you the opportunity to have the visits you are entitled to? (e.g. number and length of visit)	70%	85%





Key to tables

		Catholic prisoners	Protestant prisoners
	Any percent highlighted in green is significantly better		
	Any percent highlighted in blue is significantly worse		
	Any percent highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Resettlement continued			
13	Did you receive one or more visits in the last week?	62%	67%
14	Have you been helped to maintain contact with family/friends whilst in this prison?	32%	46%
15	Do you know who to contact within this prison to get help with the following:		
15b	Maintaining good relationships?	12%	14%
15c	Avoiding bad relationships?	9%	9%
15d	Finding a job on release?	16%	18%
15e	Finding accommodation on release?	23%	14%
15f	With money/finances on release?	9%	14%
15g	Claiming benefits on release?	26%	18%
15h	Arranging a place at college/continuing education on release?	14%	0%
15i	Accessing health services on release?	16%	22%
15j	Opening a bank account on release?	19%	9%
16	Do you think you will have a problem with any of the following on release from prison?		
16b	Maintaining good relationships?	21%	9%
16c	Avoiding bad relationships?	11%	4%
16d	Finding a job?	51%	17%
16e	Finding accommodation?	40%	13%
16f	Money/finances?	40%	17%
16g	Claiming benefits?	36%	31%
16h	Arranging a place at college/continuing education?	21%	4%
16i	Accessing health services?	28%	9%
16j	Opening a bank account?	32%	4%
For those who are sentenced:			
17	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	56%	46%



Key Question Responses (Nationality & Disability) HMP Maghaberry (main) 2009

Diversity Analysis

Prisoner Survey Responses (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.

Key to tables

		Foreign National prisoners	British National Prisoners	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percent highlighted in green is significantly better				
	Any percent highlighted in blue is significantly worse				
	Any percent highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		13	89	27	79
1.3	Are you sentenced?	38%	50%	54%	46%
1.7	Are you a foreign national?			27%	8%
1.8	Is English your first language?	62%	99%	83%	97%
1.9	Are you from a minority ethnic group? Including all those who did not tick White British, White Irish or White other categories.	62%	0%	15%	5%
1.10	Are you Muslim?	8%	0%	0%	1%
1.12	Do you consider yourself to have a disability?	54%	21%		
1.13	Is this your first time in prison?	54%	25%	18%	30%
2.1d	Was the attention paid to your health needs good/very good on your journey here?	17%	25%	17%	27%
2.3	Were you treated well/very well by the escort staff?	41%	53%	48%	54%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	62%	88%	82%	87%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	54%	66%	77%	61%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	38%	35%	31%	37%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	46%	52%	54%	51%
3.2a	Did you have any problems when you first arrived?	84%	70%	91%	66%
3.3a	Were you seen by a member of healthcare staff in reception?	70%	66%	72%	65%
3.3b	When you were searched in reception, was this carried out in a respectful way?	33%	55%	46%	55%



Key to tables

		Foreign National prisoners	British National Prisoners
	Any percent highlighted in green is significantly better		
	Any percent highlighted in blue is significantly worse		
	Any percent highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
3.4	Were you treated well/very well in reception?	54%	43%
3.7b	Did you have access to someone from healthcare within the first 24 hours?	92%	75%
3.9	Did you feel safe on your first night here?	50%	66%
3.10	Have you been on an induction course?	83%	80%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	54%	53%
4.3a	Are you normally offered enough clean, suitable clothes for the week?	78%	54%
4.3b	Are you normally able to have a shower every day?	85%	85%
4.3e	Is your cell call bell normally answered within five minutes?	46%	28%
4.4	Is the food in this prison good/very good?	15%	21%
4.5	Does the tuck shop /canteen sell a wide enough range of goods to meet your needs?	30%	53%
4.6a	Is it easy/very easy to get a complaints form?	62%	82%
4.6b	Is it easy/very easy to get an application form?	45%	72%
4.9	Have you made a complaint?	54%	47%
4.13a	Do you feel your religious beliefs are respected?	54%	64%
4.13b	Are you able to speak to a religious leader of your faith in private if you want to?	73%	66%
4.14	Are you able to speak to a Listener at any time, if you want to?	33%	53%
4.15a	Is there a member of staff you can turn to for help if you have a problem in this prison?	67%	56%
4.15b	Do most staff, in this prison, treat you with respect?	59%	76%
5.1	Have you ever felt unsafe in this prison?	77%	54%
5.2	Do you feel unsafe in this prison at the moment?	46%	14%
5.4	Have you been victimised by another prisoner?	62%	27%

Diversity Analysis

Consider themselves to have a disability	Do not consider themselves to have a disability
41%	47%
85%	73%
63%	64%
80%	80%
44%	57%
48%	59%
77%	88%
42%	26%
30%	17%
52%	51%
69%	83%
61%	71%
42%	47%
69%	60%
72%	65%
35%	57%
58%	56%
72%	73%
56%	56%
22%	17%
30%	32%



Key to tables

		Foreign National prisoners	British National Prisoners
	Any percent highlighted in green is significantly better		
	Any percent highlighted in blue is significantly worse		
	Any percent highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	30%	2%
5.5i	Have you been victimised because you have a disability? (By prisoners)	0%	1%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	15%	7%
5.6	Have you been victimised by a member of staff?	54%	47%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	8%	2%
5.7h	Have you been victimised because you have a disability? (By staff)	8%	2%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	15%	9%
5.9	Have you ever felt threatened or intimidated by another prisoner/ group of prisoners in here?	55%	28%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	38%	42%
5.11	Is it easy/very easy to get illegal drugs in this prison?	30%	43%
6.1a	Is it easy/very easy to see the doctor?	30%	24%
6.1b	Is it easy/ very easy to see the nurse?	77%	74%
6.2	Are you able to see a pharmacist?	25%	19%
6.5	Are you currently taking medication?	46%	61%
6.7	Do you feel you have any emotional well being/mental health issues?	67%	55%
7.1a	Are you currently working in the prison?	17%	34%
7.1b	Are you currently undertaking vocational or skills training?	8%	6%
7.1c	Are you currently in education (including basic skills)?	41%	25%
7.1d	Are you currently taking part in an Offending Behaviour Programme?	25%	13%
7.3	Do you go to the library at least once a week?	38%	17%

Diversity Analysis

Consider themselves to have a disability	Do not consider themselves to have a disability
7%	7%
4%	1%
0%	12%
52%	45%
0%	5%
7%	1%
4%	13%
28%	32%
37%	43%
26%	47%
19%	27%
76%	72%
19%	19%
74%	53%
79%	49%
17%	35%
0%	8%
22%	29%
17%	13%
17%	20%



Key to tables

		Foreign National prisoners	British National Prisoners	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percent highlighted in green is significantly better				
	Any percent highlighted in blue is significantly worse				
	Any percent highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
7.4	On average, do you go to the gym at least twice a week?	59%	45%	24%	53%
7.5	On average, do you go outside for exercise three or more times a week?	64%	54%	46%	57%
7.6	On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	8%	10%	4%	12%
7.7	On average, do you go on association more than five times each week?	38%	44%	36%	45%
7.8	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	17%	12%	17%	12%
8.1	Do you have a personal officer?	59%	25%	34%	28%
8.9	Have you had any problems sending or receiving mail?	62%	56%	61%	54%
8.10	Have you had any problems getting access to the telephones?	17%	28%	24%	26%
8.12	Does this prison give you the opportunity to have the visits you are entitled to? (e.g. number and length of visit)	67%	70%	65%	72%



Prisoner Survey Responses Mourne House 2009

Prisoner Survey Responses (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.

Key to tables

		Mourne House (Wilson & Martin) 2009	Maghaberry (main wings) 2009
	Any percent highlighted in green is significantly better		
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	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		30	106
SECTION 1: General Information			
2	Are you under 21 years of age?	0%	1%
3a	Are you sentenced?	100%	48%
3b	Are you on recall?	3%	4%
4a	Is your sentence less than 12 months?	0%	8%
4b	Are you here under a public protection sentence (ICS/ ECS)?	0%	0%
5	Do you have six months or less to serve?	5%	15%
6	Have you been in this prison less than a month?	0%	11%
7	Are you a foreign national?	7%	13%
8	Is English your first language?	97%	94%
9	Are you from a minority ethnic group? (including all those who did not tick White British, White Irish or White other categories)	0%	8%
10	Are you Muslim?	0%	1%
11	Are you homosexual/gay or bisexual?	11%	2%
12	Do you consider yourself to have a disability?	11%	25%
13	Is this your first time in prison?	42%	27%
14	Have you been in more than 5 prisons this time?	8%	2%
15	Do you have any children under the age of 18?	37%	61%
SECTION 2: Transfers and Escorts			
For the most recent journey you have made either to or from court or between prisons:			
1a	Was the cleanliness of the van good/very good?	21%	29%
1b	Was your personal safety during the journey good/very good?	20%	41%
1c	Was the comfort of the van good/very good?	4%	15%
1d	Was the attention paid to your health needs good/very good?	17%	24%
1e	Was the frequency of toilet breaks good/very good?	13%	20%
2	Did you spend more than four hours in the van?	4%	3%
3	Were you treated well/very well by the escort staff?	48%	53%
4a	Did you know where you were going when you left court or when transferred from another prison?	82%	86%
4b	Before you arrived here did you receive any written information about what would happen to you?	12%	12%
4c	When you first arrived here did your property arrive at the same time as you?	44%	68%



Key to tables

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	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction			
1	In the first 24 hours, did staff ask you if you needed help/support with the following:		
1b	Problems with loss of property?	12%	10%
1c	Housing problems?	12%	20%
1d	Problems contacting employers?	8%	7%
1e	Problems contacting family?	27%	65%
1f	Problems ensuring dependants were looked after?	12%	13%
1g	Money problems?	12%	13%
1h	Problems of feeling depressed/suicidal?	44%	35%
1i	Health problems?	56%	52%
1j	Problems in needing protection from other prisoners?	23%	23%
1k	Problems accessing phone numbers?	41%	41%
2	When you first arrived:		
2a	Did you have any problems?	72%	72%
2b	Did you have any problems with loss of property?	28%	9%
2c	Did you have any housing problems?	8%	23%
2d	Did you have any problems contacting employers?	0%	6%
2e	Did you have any problems contacting family?	28%	18%
2f	Did you have any problems ensuring dependants were being looked after?	16%	10%
2g	Did you have any money worries?	16%	21%
2h	Did you have any problems with feeling depressed or suicidal?	32%	27%
2i	Did you have any health problems?	42%	33%
2j	Did you have any problems with needing protection from other prisoners?	8%	12%
2k	Did you have problems accessing phone numbers?	42%	12%
3a	Were you seen by a member of health services in reception?	61%	67%
3b	When you were searched in reception, was this carried out in a respectful way?	45%	53%
4	Were you treated well/very well in reception?	46%	46%
5	On your day of arrival, were offered any of the following information:		
5a	Information about what was going to happen to you?	41%	35%
5b	Information about what support was available for people feeling depressed or suicidal?	27%	25%
5c	Information about how to make routine requests?	44%	35%
5d	Information about your entitlement to visits?	44%	39%
5e	Information about health services?	37%	34%
5f	Information about the chaplaincy?	37%	30%



Key to tables

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SECTION 3: Reception, first night and induction continued

6	On your day of arrival, were you offered any of the following:		
6a	A reception pack?	36%	49%
6b	The opportunity to have a shower?	57%	45%
6c	The opportunity to make a free telephone call?	39%	68%
6d	Something to eat?	50%	71%
7	Within the first 24 hours did you meet any of the following people:		
7a	The chaplain or a religious leader?	15%	28%
7b	Someone from health services?	70%	77%
7c	A listener/Samaritans?	0%	9%
8	Did you have access to the tuck shop/ canteen within the first 24 hours?	38%	52%
9	Did you feel safe on your first night here?	56%	64%
10	Have you been on an induction course?	62%	80%
For those who have been on an induction course:			
11	Did the course cover everything you needed to know about the prison?	33%	44%

SECTION 4: Legal Rights and Respectful Custody

1	In terms of your legal rights, is it easy/very easy to:		
1a	Communicate with your solicitor or legal representative?	80%	54%
1b	Attend legal visits?	57%	68%
1c	Obtain bail information?	16%	37%
2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	80%	61%
3	For the wing/unit you are currently on:		
3a	Are you normally offered enough clean, suitable clothes for the week?	50%	56%
3b	Are you normally able to have a shower every day?	100%	86%
3c	Do you normally receive clean sheets every week?	50%	93%
3d	Do you normally get cell cleaning materials every week?	93%	73%
3e	Is your cell call bell normally answered within five minutes?	17%	30%
3f	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	73%	54%
3g	Can you normally get your stored property, if you need to?	41%	36%
4	Is the food in this prison good/very good?	45%	20%
5	Does the tuck shop/canteen sell a wide enough range of goods to meet your needs?	32%	51%
6a	Is it easy/very easy to get a complaints form?	83%	80%
6b	Is it easy/very easy to get an application form?	82%	69%
7	Have you made an application?	66%	52%





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SECTION 4: Legal Rights and Respectful Custody continued			
For those who have made an application:			
8a	Do you feel applications are dealt with fairly?	50%	37%
8b	Do you feel applications are dealt with promptly? (within 7 days)	42%	47%
9	Have you made a complaint?	77%	46%
For those who have made a complaint:			
10a	Do you feel complaints are dealt with fairly?	27%	24%
10b	Do you feel complaints are dealt with promptly? (within 7 days)	38%	40%
11	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	70%	48%
10c	Were you given information about how to make an appeal?	38%	18%
12	Is it easy/very easy to see the Independent Monitoring Board?	41%	26%
13a	Do you feel your religious beliefs are respected?	63%	62%
13b	Are you able to speak to a religious leader of your faith in private if you want to?	80%	67%
14	Are you able to speak to a Listener at any time, if you want to?	63%	52%
15a	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	77%	57%
15b	Do most staff, in this prison, treat you with respect?	80%	73%
SECTION 5: Safety			
1	Have you ever felt unsafe in this prison?	77%	56%
2	Do you feel unsafe in this prison at the moment?	7%	19%
4	Have you been victimised by another prisoner?	60%	31%
5	Since you have been here, has another prisoner:		
5a	Made insulting remarks made about you, your family or friends?	50%	15%
5b	Hit, kicked or assaulted you?	33%	13%
5c	Sexually abused you?	3%	2%
5d	Victimised you because of your race or ethnic origin?	3%	7%
5e	Victimised you because of drugs?	3%	4%
5f	Taken your canteen/property?	7%	4%
5g	Victimised you because you were new here?	14%	7%
5h	Victimised you because of your sexuality?	3%	1%
5i	Victimised you because you have a disability?	0%	2%
5j	Victimised you because of your religion/religious beliefs?	17%	9%
5k	Victimised you because you were from a different part of the country?	3%	9%
5l	Victimised you because of your offence/crime?	17%	15%



Key to tables

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SECTION 5: Safety continued			
6	Have you been victimised by a member of staff?	41%	47%
7	Since you have been here, has a member of staff:		
7a	Made insulting remarks made about you, your family or friends?	23%	18%
7b	Hit, kicked or assaulted you?	7%	12%
7c	Sexually abused you?	0%	4%
7d	Victimised you because of your race or ethnic origin?	0%	4%
7e	Victimised you because of drugs?	0%	9%
7f	Victimised you because you were new here?	8%	10%
7g	Victimised you because of your sexuality?	4%	1%
7h	Victimised you because you have a disability?	0%	3%
7i	Victimised you because of your religion/religious beliefs?	8%	11%
7j	Victimised you because you were from a different part of the country?	4%	9%
7k	Victimised you because of your offence/crime?	12%	13%
For those who have been victimised by staff or other prisoners:			
8	Did you report any victimisation that you have experienced?	52%	36%
9	Have you ever felt threatened or intimidated by another prisoner/ group of prisoners in here?	62%	31%
10	Have you ever felt threatened or intimidated by a member of staff in here?	45%	42%
11	Is it easy/very easy to get illegal drugs in this prison?	45%	42%
SECTION 6: Healthcare			
1a	Is it easy/very easy to see the doctor?	21%	25%
1b	Is it easy/very easy to see the nurse?	17%	73%
1c	Is it easy/very easy to see the dentist?	47%	18%
1d	Is it easy/very easy to see the optician?	41%	14%
2	Are you able to see a pharmacist?	4%	19%
For those who have been to the following services, do you think the quality of the health service from the following is good/very good:			
3a	The doctor?	21%	26%
3b	The nurse?	29%	60%
3c	The dentist?	76%	49%
3d	The optician?	59%	38%
4	The overall quality of health services?	25%	33%





Key to tables

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Percentages which are not highlighted show there is no significant difference			
Healthcare continued			
5	Are you currently taking medication?	60%	58%
For those currently taking medication:			
6	Are you allowed to keep possession of your medication in your own cell?	100%	85%
7	Do you feel you have any emotional well being/mental health issues?	7%	57%
For those with emotional well being/mental health issues, are these being addressed by any of the following:			
8a	Not receiving any help?	50%	8%
8b	A doctor?	0%	25%
8c	A nurse?	0%	28%
8d	A psychiatrist?	0%	14%
8e	The Mental Health Support Team?	0%	33%
8f	A counsellor?	50%	8%
9a	Did you have a drug problem when you came into this prison?	17%	37%
9b	Did you have an alcohol problem when you came into this prison?	57%	45%
10a	Have you developed a drug problem since you have been in this prison?	4%	15%
10b	Have you developed an alcohol problem since you have been in this prison?	0%	5%
For those with drug or alcohol problems:			
11	Do you know who to contact in this prison for help?	100%	73%
12	Have you received any help or intervention whilst in this prison?	94%	31%
For those who have received help or intervention with their drug or alcohol problem:			
13	Was this intervention or help useful?	100%	69%
14a	Do you think you will have a problem with drugs when you leave this prison? (Yes/don't know)	8%	32%
14b	Do you think you will have a problem with alcohol when you leave this prison? (Yes/don't know)	11%	38%
For those who may have a drug or alcohol problem on release, do you know who in this prison:			
15	Can help you contact external drug or alcohol agencies on release?	80%	40%
SECTION 7: Purposeful Activity			
1	Are you currently involved in any of the following activities:		
1a	A prison job?	90%	31%
1b	Vocational or skills training?	37%	6%
1c	Education (including basic skills)?	60%	27%
1d	Offending Behaviour Programmes?	60%	14%

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	Percentages which are not highlighted show there is no significant difference		
Purposeful Activity continued			
2ai	Have you had a job whilst in prison?	100%	63%
For those who have had a prison job whilst in prison:			
2aii	Do you feel the job will help you on release?	64%	54%
2bi	Have you been involved in vocational or skills training whilst in prison?	96%	49%
For those who have had vocational or skills training whilst in prison:			
2bii	Do you feel the vocational or skills training will help you on release?	87%	47%
2ci	Have you been involved in education whilst in prison?	100%	60%
For those who have been involved in education whilst in prison:			
2cii	Do you feel the education will help you on release?	91%	62%
2di	Have you been involved in offending behaviour programmes whilst in prison?	100%	55%
For those who have been involved in offending behaviour programmes whilst in prison:			
2dii	Do you feel the offending behaviour programme(s) will help you on release?	88%	51%
3	Do you go to the library at least once a week?	3%	19%
4	On average, do you go to the gym at least twice a week?	59%	46%
5	On average, do you go outside for exercise three or more times a week?	63%	55%
6	On average, do you spend ten or more hours out of your cell on a weekday?	71%	10%
7	On average, do you go on association more than five times each week?	97%	43%
8	Do staff normally speak to you most of the time/all of the time during association?	45%	13%
SECTION 8: Resettlement			
1	Do you have a personal officer?	41%	29%
For those with a personal officer:			
2	Do you think your personal officer is helpful/very helpful?	50%	60%
For those who are sentenced:			
3	Do you have a sentence plan?	73%	31%
For those with a sentence plan?			
4	Were you involved/very involved in the development of your plan?	68%	46%
5	Can you achieve some/all of your sentence plan targets in this prison?	100%	57%
6	Are there plans for you to achieve some/all your targets in another prison?	33%	38%
For those who are sentenced:			
7	Do you feel that any member of staff has helped you address your offending behaviour whilst at this prison?	61%	33%
8	Do you feel that any member of staff has helped you to prepare for release?	42%	13%
9	Have you had any problems with sending or receiving mail?	60%	56%
10	Have you had any problems getting access to the telephones?	10%	25%
11	Did you have a visit in the first week that you were here?	75%	61%
12	Does this prison give you the opportunity to have the visits you are entitled to? (e.g. number and length of visit)	79%	71%



Key to tables

		Mourne House (Wilson & Martin) 2009	Maghaberry (main wings) 2009
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	Percentages which are not highlighted show there is no significant difference		
Resettlement continued			
13	Did you receive one or more visits in the last week?	57%	60%
14	Have you been helped to maintain contact with family/friends whilst in this prison?	58%	40%
15	Do you know who to contact within this prison to get help with the following:		
15b	Maintaining good relationships?	35%	17%
15c	Avoiding bad relationships?	25%	14%
15d	Finding a job on release?	38%	17%
15e	Finding accommodation on release?	25%	24%
15f	With money/finances on release?	38%	15%
15g	Claiming benefits on release?	25%	25%
15h	Arranging a place at college/continuing education on release?	18%	12%
15i	Accessing health services on release?	18%	21%
15j	Opening a bank account on release?	35%	19%
16	Do you think you will have a problem with any of the following on release from prison?		
16b	Maintaining good relationships?	15%	20%
16c	Avoiding bad relationships?	15%	14%
16d	Finding a job?	59%	47%
16e	Finding accommodation?	52%	40%
16f	Money/finances?	23%	41%
16g	Claiming benefits?	27%	38%
16h	Arranging a place at college/continuing education?	15%	22%
16i	Accessing health services?	8%	26%
16j	Opening a bank account?	19%	27%
For those who are sentenced:			
17	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	83%	56%



Survey Responses Bush (loyalist seperated prisoners) Maghaberry 2009

Prisoner Survey Responses (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.

Key to tables

		Bush seperated 2009	Maghaberry (main units) 2009	Bush 2009	Bush 2005
	Any percent highlighted in green is significantly better				
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	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		29	106	29	41
SECTION 1: General Information					
2	Are you under 21 years of age?	3%	1%	3%	2%
3a	Are you sentenced?	100%	48%	100%	51%
3b	Are you on recall?	3%	4%	3%	0%
4a	Is your sentence less than 12 months?	0%	8%	0%	
4b	Are you here under a public protection sentence (ICS/ ECS)?	0%	0%	0%	
5	Do you have six months or less to serve?	38%	15%	38%	8%
6	Have you been in this prison less than a month?	0%	11%	0%	4%
7	Are you a foreign national?	9%	13%	9%	4%
8	Is English your first language?	94%	94%	94%	98%
9	Are you from a minority ethnic group? (including all those who did not tick White British, White Irish or White other categories)	0%	8%	0%	0%
10	Are you Muslim?	0%	1%	0%	
11	Are you homosexual/gay or bisexual?	0%	2%	0%	
12	Do you consider yourself to have a disability?	22%	25%	22%	
13	Is this your first time in prison?	28%	27%	28%	23%
14	Have you been in more than 5 prisons this time?	0%	2%	0%	
15	Do you have any children under the age of 18?	72%	61%	72%	65%
SECTION 2: Transfers and Escorts					
For the most recent journey you have made either to or from court or between prisons:					
1a	Was the cleanliness of the van good/very good?	31%	29%	31%	21%
1b	Was your personal safety during the journey good/very good?	50%	41%	50%	35%
1c	Was the comfort of the van good/very good?	9%	15%	9%	10%
1d	Was the attention paid to your health needs good/very good?	13%	24%	13%	11%
1e	Was the frequency of toilet breaks good/very good?	25%	20%	25%	10%
2	Did you spend more than four hours in the van?	0%	3%	0%	11%
3	Were you treated well/very well by the escort staff?	44%	53%	44%	38%
4a	Did you know where you were going when you left court or when transferred from another prison?	94%	85%	94%	85%
4b	Before you arrived here did you receive any written information about what would happen to you?	6%	12%	6%	9%
4c	When you first arrived here did your property arrive at the same time as you?	75%	68%	75%	78%



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SECTION 3: Reception, first night and induction					
1	In the first 24 hours, did staff ask you if you needed help/support with the following:				
1b	Problems with loss of property?	0%	10%	0%	
1c	Housing problems?	9%	20%	9%	
1d	Problems contacting employers?	3%	7%	3%	
1e	Problems contacting family?	53%	65%	53%	
1f	Problems ensuring dependants were looked after?	0%	13%	0%	
1g	Money problems?	0%	13%	0%	
1h	Problems of feeling depressed/suicidal?	31%	35%	31%	
1i	Health problems?	56%	52%	56%	
1j	Problems in needing protection from other prisoners?	31%	23%	31%	
1k	Problems accessing phone numbers?	38%	41%	38%	
2	When you first arrived:				
2a	Did you have any problems?	76%	72%	76%	71%
2b	Did you have any problems with loss of property?	7%	9%	7%	11%
2c	Did you have any housing problems?	14%	23%	14%	24%
2d	Did you have any problems contacting employers?	0%	6%	0%	2%
2e	Did you have any problems contacting family?	14%	18%	14%	35%
2f	Did you have any problems ensuring dependants were being looked after?	7%	10%	7%	9%
2g	Did you have any money worries?	14%	21%	14%	16%
2h	Did you have any problems with feeling depressed or suicidal?	28%	27%	28%	18%
2i	Did you have any health problems?	21%	33%	21%	16%
2j	Did you have any problems with needing protection from other prisoners?	35%	12%	35%	32%
2k	Did you have problems accessing phone numbers?	11%	12%	11%	
3a	Were you seen by a member of health services in reception?	59%	67%	59%	57%
3b	When you were searched in reception, was this carried out in a respectful way?	69%	53%	69%	21%
4	Were you treated well/very well in reception?	41%	46%	41%	26%
5	On your day of arrival, were you offered any of the following information:				
5a	Information about what was going to happen to you?	52%	35%	52%	8%
5b	Information about what support was available for people feeling depressed or suicidal?	40%	25%	40%	4%
5c	Information about how to make routine requests?	57%	35%	57%	17%
5d	Information about your entitlement to visits?	52%	39%	52%	15%
5e	Information about health services?	57%	34%	57%	
5f	Information about the chaplaincy?	52%	30%	52%	

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		Bush seperated 2009	Maghaberry (main units) 2009	Bush 2009	Bush 2005
SECTION 3: Reception, first night and induction continued					
6	On your day of arrival, were you offered any of the following:				
6a	A reception pack?	47%	49%	47%	8%
6b	The opportunity to have a shower?	47%	45%	47%	35%
6c	The opportunity to make a free telephone call?	63%	68%	63%	8%
6d	Something to eat?	59%	71%	59%	58%
7	Within the first 24 hours did you meet any of the following people:				
7a	The chaplain or a religious leader?	28%	28%	28%	9%
7b	Someone from health services?	59%	77%	59%	53%
7c	A listener/Samaritans?	3%	9%	3%	0%
8	Did you have access to the tuck shop/ canteen within the first 24 hours?	56%	52%	56%	9%
9	Did you feel safe on your first night here?	63%	64%	63%	30%
10	Have you been on an induction course?	77%	80%	77%	84%
For those who have been on an induction course:					
11	Did the course cover everything you needed to know about the prison?	58%	44%	58%	21%
SECTION 4: Legal Rights and Respectful Custody					
1	In terms of your legal rights, is it easy/very easy to:				
1a	Communicate with your solicitor or legal representative?	72%	54%	72%	
1b	Attend legal visits?	70%	68%	70%	
1c	Obtain bail information?	35%	37%	35%	
2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	50%	61%	50%	64%
3	For the wing/unit you are currently on:				
3a	Are you normally offered enough clean, suitable clothes for the week?	54%	56%	54%	82%
3b	Are you normally able to have a shower every day?	100%	86%	100%	63%
3c	Do you normally receive clean sheets every week?	81%	93%	81%	85%
3d	Do you normally get cell cleaning materials every week?	94%	73%	94%	35%
3e	Is your cell call bell normally answered within five minutes?	58%	30%	58%	27%
3f	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	87%	54%	87%	84%
3g	Can you normally get your stored property, if you need to?	50%	36%	50%	35%
4	Is the food in this prison good/very good?	13%	20%	13%	0%
5	Does the tuck shop/canteen sell a wide enough range of goods to meet your needs?	50%	51%	50%	32%
6a	Is it easy/very easy to get a complaints form?	90%	80%	90%	87%
6b	Is it easy/very easy to get an application form?	86%	69%	86%	71%
7	Have you made an application?	56%	52%	56%	



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SECTION 4: Legal Rights and Respectful Custody continued

For those who have made an application:					
8a	Do you feel applications are dealt with fairly?	61%	37%	61%	17%
8b	Do you feel applications are dealt with promptly? (within 7 days)	77%	47%	77%	26%
9	Have you made a complaint?	44%	46%	44%	
For those who have made a complaint:					
10a	Do you feel complaints are dealt with fairly?	7%	24%	7%	6%
10b	Do you feel complaints are dealt with promptly? (within 7 days)	40%	40%	40%	17%
11	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	8%	48%	8%	41%
10c	Were you given information about how to make an appeal?	21%	18%	21%	35%
12	Is it easy/very easy to see the Independent Monitoring Board?	19%	26%	19%	10%
13a	Do you feel your religious beliefs are respected?	78%	62%	78%	35%
13b	Are you able to speak to a religious leader of your faith in private if you want to?	97%	67%	97%	56%
14	Are you able to speak to a Listener at any time, if you want to?	41%	52%	41%	2%
15a	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	71%	57%	71%	10%
15b	Do most staff, in this prison, treat you with respect?	87%	73%	87%	38%

SECTION 5: Safety

1	Have you ever felt unsafe in this prison?	56%	56%	56%	75%
2	Do you feel unsafe in this prison at the moment?	9%	19%	9%	
4	Have you been victimised by another prisoner?	9%	31%	9%	29%
5	Since you have been here, has another prisoner:				
5a	Made insulting remarks made about you, your family or friends?	3%	15%	3%	18%
5b	Hit, kicked or assaulted you?	0%	13%	0%	11%
5c	Sexually abused you?	0%	2%	0%	
5d	Victimised you because of your race or ethnic origin?	0%	7%	0%	18%
5e	Victimised you because of drugs?	0%	4%	0%	
5f	Taken your canteen/property?	0%	4%	0%	2%
5g	Victimised you because you were new here?	0%	7%	0%	
5h	Victimised you because of your sexuality?	0%	1%	0%	
5i	Victimised you because you have a disability?	3%	2%	3%	
5j	Victimised you because of your religion/religious beliefs?	6%	9%	6%	
5k	Victimised you because you were from a different part of the country?	3%	9%	3%	9%
5l	Victimised you because of your offence/crime?	9%	15%	9%	



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Percentages which are not highlighted show there is no significant difference				

SECTION 5: Safety continued					
6	Have you been victimised by a member of staff?	13%	47%	13%	52%
7	Since you have been here, has a member of staff:				
7a	Made insulting remarks made about you, your family or friends?	3%	18%	3%	33%
7b	Hit, kicked or assaulted you?	3%	12%	3%	17%
7c	Sexually abused you?	0%	4%	0%	10%
7d	Victimised you because of your race or ethnic origin?	0%	4%	0%	13%
7e	Victimised you because of drugs?	0%	9%	0%	2%
7f	Victimised you because you were new here?	7%	10%	7%	4%
7g	Victimised you because of your sexuality?	0%	1%	0%	
7h	Victimised you because you have a disability?	0%	3%	0%	
7i	Victimised you because of your religion/religious beliefs?	10%	11%	10%	
7j	Victimised you because you were from a different part of the country?	0%	9%	0%	10%
7k	Victimised you because of your offence/crime?	3%	13%	3%	
For those who have been victimised by staff or other prisoners:					
8	Did you report any victimisation that you have experienced?	14%	36%	14%	45%
9	Have you ever felt threatened or intimidated by another prisoner/ group of prisoners in here?	23%	31%	23%	
10	Have you ever felt threatened or intimidated by a member of staff in here?	29%	42%	29%	
11	Is it easy/very easy to get illegal drugs in this prison?	19%	41%	19%	4%
SECTION 6: Healthcare					
1a	Is it easy/very easy to see the doctor?	29%	25%	29%	
1b	Is it easy/very easy to see the nurse?	73%	73%	73%	
1c	Is it easy/very easy to see the dentist?	25%	18%	25%	
1d	Is it easy/very easy to see the optician?	39%	14%	39%	
2	Are you able to see a pharmacist?	25%	19%	25%	
For those who have been to the following services, do you think the quality of the health service from the following is good/very good:					
3a	The doctor?	15%	26%	15%	24%
3b	The nurse?	60%	60%	60%	57%
3c	The dentist?	56%	49%	56%	54%
3d	The optician?	55%	38%	55%	22%
4	The overall quality of health services?	31%	33%	31%	29%





Key to tables

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Healthcare continued					
5	Are you currently taking medication?	53%	58%	53%	
For those currently taking medication:					
6	Are you allowed to keep possession of your medication in your own cell?	93%	85%	93%	
7	Do you feel you have any emotional well being/mental health issues?	31%	57%	31%	
For those with emotional well being/mental health issues, are these being addressed by any of the following:					
8a	Not receiving any help?	43%	8%	43%	
8b	A doctor?	25%	25%	25%	
8c	A nurse?	43%	28%	43%	
8d	A psychiatrist?	25%	14%	25%	
8e	The Mental Health Support Team?	43%	33%	43%	
8f	A counsellor?	13%	8%	13%	
9a	Did you have a drug problem when you came into this prison?	20%	37%	20%	
9b	Did you have an alcohol problem when you came into this prison?	33%	45%	33%	
10a	Have you developed a drug problem since you have been in this prison?	3%	15%	3%	
10b	Have you developed an alcohol problem since you have been in this prison?	0%	5%	0%	
For those with drug or alcohol problems:					
11	Do you know who to contact in this prison for help?	83%	73%	83%	
12	Have you received any help or intervention whilst in this prison?	18%	31%	18%	
For those who have received help or intervention with their drug or alcohol problem:					
13	Was this intervention or help useful?	67%	69%	67%	
14a	Do you think you will have a problem with drugs when you leave this prison? (Yes/don't know)	31%	32%	31%	14%
14b	Do you think you will have a problem with alcohol when you leave this prison? (Yes/don't know)	32%	38%	32%	21%
For those who may have a drug or alcohol problem on release, do you know who in this prison:					
15	Can help you contact external drug or alcohol agencies on release?	60%	40%	60%	
SECTION 7: Purposeful Activity					
1	Are you currently involved in any of the following activities:				
1a	A prison job?	0%	31%	0%	
1b	Vocational or skills training?	7%	6%	7%	
1c	Education (including basic skills)?	61%	27%	61%	
1d	Offending Behaviour Programmes?	7%	14%	7%	

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	Percentages which are not highlighted show there is no significant difference				
Purposeful Activity continued					
2ai	Have you had a job whilst in prison?	44%	63%	44%	12%
For those who have had a prison job whilst in prison:					
2aii	Do you feel the job will help you on release?	0%	54%	0%	0%
2bi	Have you been involved in vocational or skills training whilst in prison?	56%	49%	56%	24%
For those who have had vocational or skills training whilst in prison:					
2bii	Do you feel the vocational or skills training will help you on release?	22%	47%	22%	11%
2ci	Have you been involved in education whilst in prison?	76%	60%	76%	33%
For those who have been involved in education whilst in prison:					
2cii	Do you feel the education will help you on release?	55%	62%	55%	33%
2di	Have you been involved in offending behaviour programmes whilst in prison?	53%	55%	53%	17%
For those who have been involved in offending behaviour programmes whilst in prison:					
2dii	Do you feel the offending behaviour programme(s) will help you on release?	22%	51%	22%	0%
3	Do you go to the library at least once a week?	3%	19%	3%	11%
4	On average, do you go to the gym at least twice a week?	61%	46%	61%	72%
5	On average, do you go outside for exercise three or more times a week?	77%	55%	77%	57%
6	On average, do you spend ten or more hours out of your cell on a weekday?	10%	10%	10%	2%
7	On average, do you go on association more than five times each week?	55%	43%	55%	37%
8	Do staff normally speak to you most of the time/all of the time during association?	30%	13%	30%	2%
SECTION 8: Resettlement					
1	Do you have a personal officer?	27%	29%	27%	10%
For those with a personal officer:					
2	Do you think your personal officer is helpful/very helpful?	43%	60%	43%	50%
For those who are sentenced:					
3	Do you have a sentence plan?	7%	31%	7%	0%
For those with a sentence plan?					
4	Were you involved/very involved in the development of your plan?	100%	46%	100%	0%
5	Can you achieve some/all of you sentence plan targets in this prison?	50%	57%	50%	
6	Are there plans for you to achieve some/all your targets in another prison?	0%	38%	0%	
For those who are sentenced:					
7	Do you feel that any member of staff has helped you address your offending behaviour whilst at this prison?	14%	33%	14%	
8	Do you feel that any member of staff has helped you to prepare for release?	3%	13%	3%	
9	Have you had any problems with sending or receiving mail?	39%	56%	39%	56%
10	Have you had any problems getting access to the telephones?	7%	25%	7%	59%
11	Did you have a visit in the first week that you were here?	87%	61%	87%	88%
12	Does this prison give you the opportunity to have the visits you are entitled to? (e.g. number and length of visit)	97%	71%	97%	58%

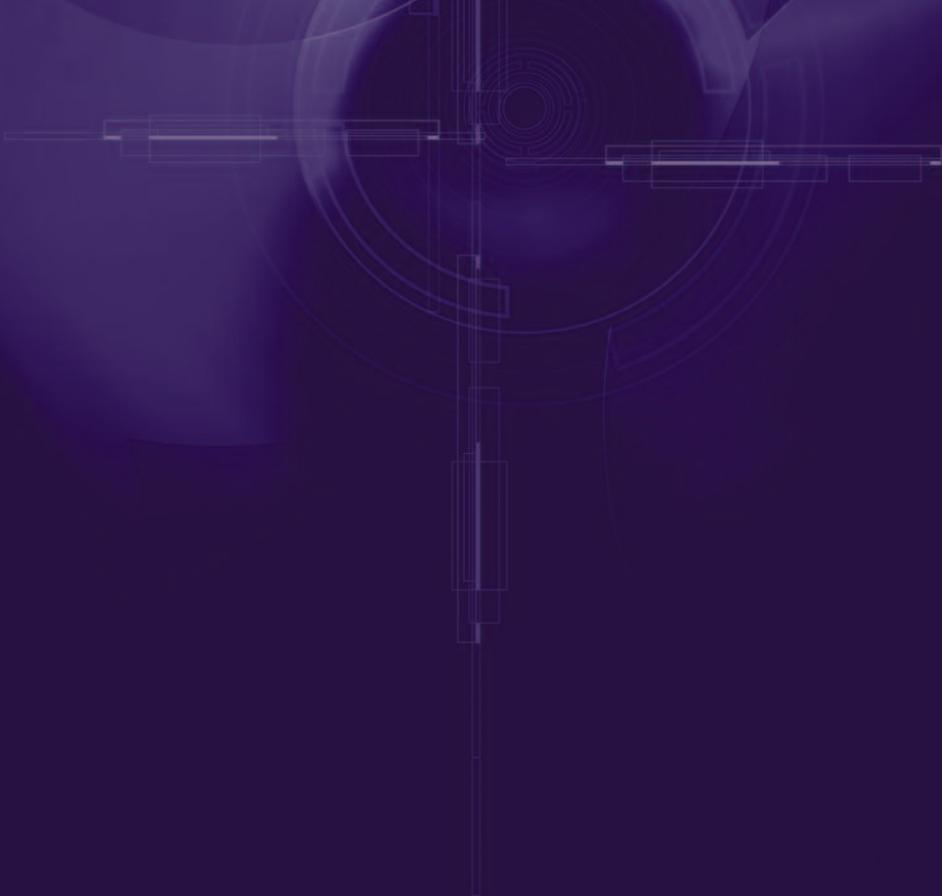


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Resettlement continued					
13	Did you receive one or more visits in the last week?	81%	60%	81%	
14	Have you been helped to maintain contact with family/friends whilst in this prison?	48%	40%	48%	
15	Do you know who to contact within this prison to get help with the following:				
15b	Maintaining good relationships?	7%	17%	7%	
15c	Avoiding bad relationships?	3%	14%	3%	
15d	Finding a job on release?	28%	17%	28%	11%
15e	Finding accommodation on release?	24%	24%	24%	15%
15f	With money/finances on release?	7%	15%	7%	9%
15g	Claiming benefits on release?	28%	25%	28%	11%
15h	Arranging a place at college/continuing education on release?	3%	12%	3%	11%
15i	Accessing health services on release?	21%	21%	21%	13%
15j	Opening a bank account on release?	3%	19%	3%	
16	Do you think you will have a problem with any of the following on release from prison?				
16b	Maintaining good relationships?	10%	20%	10%	
16c	Avoiding bad relationships?	3%	14%	3%	
16d	Finding a job?	58%	47%	58%	
16e	Finding accommodation?	42%	40%	42%	
16f	Money/finances?	26%	41%	26%	
16g	Claiming benefits?	36%	38%	36%	
16h	Arranging a place at college/continuing education?	10%	22%	10%	
16i	Accessing health services?	13%	26%	13%	
16j	Opening a bank account?	13%	27%	13%	
For those who are sentenced:					
17	Have you done anything, or has anything happened to you here to make you less likely to offend in future ?	46%	56%	46%	46%







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