



Criminal Justice Inspection  
Northern Ireland  
*a better justice system for all*



Report on an announced inspection of

# Maghaberry Prison

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

10-14 October 2005

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# Contents

<b>Introduction</b>	<b>5</b>
<b>Fact page</b>	<b>7</b>
<b>Healthy prison summary</b>	<b>9</b>
<b>1 Arrival in custody</b>	
First days in custody	19
<b>2 Environment and relationships</b>	
Residential units	23
Staff-prisoner relationships	26
Personal officers	27
<b>3 Duty of care</b>	
Bullying	29
Self-harm and suicide	31
Equality, race relations and foreign nationals	34
Family and friends	35
Applications and complaints	38
<b>4 Healthcare</b>	
	41
<b>5 Activities</b>	
Education and library provision	49
Work	51
Physical education and health promotion	52
Faith and religious activity	53
Time out of cell	55
<b>6 Good order</b>	
Security and rules	57
Discipline	60
Progressive regimes and earned privileges scheme	65

<b>7</b>	<b>Services</b>	
	Catering	69
	Prison shop	70
<b>8</b>	<b>Resettlement</b>	
	Resettlement policy, strategy and management	71
	Sentence and custody planning	72
	Life-sentenced prisoners	73
	Offending behaviour programmes	76
	Reintegration planning	78
	Public protection	79
	Substance use	80
<b>9</b>	<b>Recommendations, housekeeping points and good practice</b>	
		85
	<b>Appendices</b>	
	I Inspection team	i
	II Stakeholder organisations canvassed	ii
	III Prison population profile	iii
	IV Summary of prisoner questionnaires and interviews	viii
	<b>Prisoner Survey Responses</b>	No.1
		No.2
		No.3
		No.4
	<b>N.I. Prison Service Action Plan</b>	1-27

# Introduction

Maghaberry is one of only two adult male prisons in Northern Ireland. It is a complex prison, holding men in all security categories. Since the last inspection, its complexity has been reduced in one respect, as women prisoners were moved out to Hydebank Wood; but increased in another, with the decision to separate paramilitary prisoners within the main prison.

The second decision has had far-reaching consequences for the prison's management and culture, and for the treatment and conditions of the prisoners it holds. Significant resources and managerial time had been sucked in to provide the levels of security that were insisted on in order to manage 79 separated prisoners – who, nevertheless, had almost none of the activities and interventions required in order to address their offending. This has reduced the staffing and support available for the great majority of prisoners; and set back plans to improve resettlement, offending behaviour work and educational provision.

But, more importantly, it has also driven a security-led and defensive culture among staff, which does not seek to engage with prisoners proactively, or ensure that the resources that are available are properly used. The average cost per prisoner place in Northern Ireland is £86,000, and the actual cost at Maghaberry will be higher than this: making it twice as expensive as the highest security prison in England and Wales. Yet the return for that expenditure, in terms of prisoner care and rehabilitation, is inadequate.

Almost all the systems for ensuring prisoner safety – first night and induction procedures, anti-bullying, suicide prevention – were underdeveloped. Our survey found that nearly two-thirds of Maghaberry's prisoners had felt unsafe at some time; and it was particularly noticeable that more prisoners than at the last inspection felt at risk from other prisoners, in spite of separation. While relationships with staff were superficially relaxed, they were not positive or active. Prisoners were locked away from staff during association periods – adding to the possibilities for bullying – and there was little or no involvement of residential staff in supporting prisoners at risk or assisting in resettlement planning.

Though educational provision had improved, and there were more workshops, there was still not enough work and training available for Maghaberry's prisoners. But what there was was reduced still further by the fact that prisoners were not delivered to classes or workshops on time, or sometimes at all. In the middle of the core day, we counted only 103 prisoners who were off their wings. Some of the remainder were, at least notionally, engaged in wing work; but those who were unemployed would spend 22 hours a day in their cells.

Some of the pioneering work which had begun in resettlement, too, was inhibited. Very positive and groundbreaking work was being done to strengthen links between prisoners and their families; it should be replicated in England and Wales. Good resettlement plans had been introduced, but they needed to be followed up during sentence. However, the management of life-sentenced prisoners was poor, with virtually no planning work being done until three years before release, and priority for work and education spaces being given to determinate-sentenced prisoners. This was compounded by the fact that lifers would spend nearly all their sentence in different wings of the old 'square houses', which were in any event unsuitable and difficult to supervise.

There are other underlying issues which the Northern Ireland Prison Service needs to tackle. Some of Maghaberry's problems result from deficiencies within the prison estate, and need strategic planning. Since Maghaberry is one of only two adult male prisons, all prisoners, whatever their security classification, are held in maximum security conditions; and for those serving long sentences, there is little opportunity for progression. Development of the Northern

Ireland prison estate should provide appropriate accommodation for different security levels to match the needs of prisoners and allow them to move progressively through the system and prepare for release. It should also ensure that accommodation is fit for purpose: at present the smaller cells at Maghaberry are too small to hold two prisoners.

Security is crucial to the effective and safe management of Maghaberry, and the threats to prisoners and staff, both inside and outside the prison, are real. So are the memories of staff; and the effect of once again separating paramilitary prisoners has undoubtedly had a damaging effect on the morale of staff who are all too aware of the consequences of segregation in the Maze. But the emphasis on physical security, embodied in the search and standby team, and the fear of conditioning, had undermined the dynamic security – founded on appropriate staff–prisoner relationships – that is also necessary to manage a prison well and safely.

For the majority of Maghaberry's prisoners, it is necessary to move towards a normalised prison environment, focused towards challenging prisoners, and reducing the likelihood of reoffending. This movement had begun at our last inspection; but it had since stalled. As a consequence, Maghaberry was not providing Northern Ireland either with value for money, or with effective public protection in the longer term. Managing this, in a way that retains the confidence of staff, is a significant challenge for the Northern Ireland Prison Service, and for managers at Maghaberry.

**Anne Owers**  
HM Chief Inspector of Prisons

February 2006

**Kit Chivers**  
Chief Inspector of Criminal Justice in Northern Ireland

# Fact page

## **Brief history and task of establishment**

Maghaberry Prison is a high-security prison with several other functions. It holds male remand, determinate-sentenced, and life-sentenced prisoners. It also accommodates fine defaulters and prisoners held on civil matters. Many prisoners it holds have a mental illness. The prison opened in November 1987. In 1999 it was expanded by the construction of two additional accommodation blocks, Bush House and Roe House. Since the Steele report in late August 2003, it also accommodates separated paramilitary prisoners from loyalist and republican backgrounds.

There was also a pre-release centre in Belfast adjacent to the Crumlin Road Prison site. This scheme was for prisoners serving life sentences who had been given provisional release dates by the Secretary of State, and other eligible prisoners within the last four months of sentence.

Male immigration detainees are also accommodated in a unit at this site. At the time of the inspection there was only one immigration detainee at the Unit, who left during the week.

## **Number held**

At one snapshot during the inspection, there were a total of 748 prisoners, including 404 on remand and 344 sentenced prisoners, of which around 127 were serving life sentences (including four prisoners detained at the Secretary of State's pleasure). Following the recommendations and implementation of the Steele report, there were 48 separated loyalist prisoners held in Bush House and 34 separated republican prisoners held in Roe House.

## **Cost per place per annum**

£86,290

## **Certified normal accommodation**

745

## **Operational capacity**

Subject to operational demands

## **Last full inspection**

13–17 May 2002

## **Staffing**

In September 2005 there were 976 staff in post, which included 14 governor grades and 112 civilian staff.

The current budget for the year 2005/06 was £56.1 million.

## **Description of residential units**

The accommodation comprised six residential houses (Erne, Lagan, Bann, Foyle, Roe, and Bush). Erne, Lagan, Bann and Foyle each had 108 cells, divided into six units of 18. All cells had integral sanitation and in-cell power-points. A vulnerable prisoner unit was located in Lagan House. Remand prisoners were accommodated in Lagan and Foyle Houses.

Glen House served as an additional accommodation area, providing a 15-cell area for separated females, although this accommodation had not been used for this purpose. The two new accommodation blocks, Roe and Bush, had been modified to accommodate separated prisoners. The new blocks comprised two wings of 48 cells, and featured wide landings leading from a central

administrative area. A newly refurbished gymnasium was opened in September 2004, in what had previously been a workshop. This was used by separated prisoners. Roe House, while catering for separated prisoners, also holds all new committals, remand induction prisoners and sentence induction prisoners. A small unit, Martin House, comprising eight cells capable of holding appropriately assessed life-sentenced prisoners in low-supervision conditions, was opened in Mourne House on 23 September. There were seven prisoners held there at the time of the inspection.

# Healthy prison summary

## Introduction

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

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

HP2 HMI uses these tests for all custodial environments that it inspects, both within and outside England and Wales, bearing in mind the specific nature of particular custodial settings and backgrounds.

HP3 HMI has also built up a database of survey responses from prisoners in different kinds of prison across England, Wales and Northern Ireland. This provides a benchmark against which it can set the responses from an individual establishment. In this report, the benchmark used is local prisons. While HMI recognises the particular issues that Maghaberry faces, these comparisons allow managers to identify those areas where prisoners feel more positive, or more negative, than in other prisons.

## Safety

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HP4 Reception was clean and efficient, but first-night procedures and induction were inadequate. 62% of prisoners reported feeling unsafe at some time and more than in 2002 said they had been victimised by other prisoners. Investigations into bullying were thorough, but there was little ownership of the strategy by residential staff. Levels of self-harm were low. Good recent priority had been given to prisoner at risk (PAR1) training, but some monitoring and reviews were of a poor quality and procedures were over-reliant on healthcare. The special supervision unit was well ordered but very austere, and the use of the special or dry cell for a single drug dog indication was not acceptable. The search team were too forceful a presence in the prison. A safe environment had been provided in the separated houses, but at the cost of excessive control, which had permeated the rest of the prison. Detoxification arrangements were satisfactory.

HP5 Few prisoners had long journeys, but they were generally negative about their experience. Almost a quarter of escorts to courts were late. All prisoners were handcuffed from reception to vans and during their journey, irrespective of individual

risk. Few prisoners had received information about the prison before arrival, but a helpful booklet had recently been produced for this purpose.

- HP6 The reception was clean, well laid out and well controlled, with good sightlines. Procedures were efficient, but there was little engagement with prisoners, who waited too long in holding rooms. Our survey indicated that prisoners had a generally poor perception of their experience in reception, compared with the benchmark for local prisons in England and Wales. Showers in reception were not being used, and prisoners were not always able to take a shower on arrival on the committal wing. New receptions we saw were all offered a free telephone call. They had a private interview with an officer, but information provided was not always consistent. The provision of a 'comfort pack' for those without funds was good practice.
- HP7 There was no formal first-night system of support for new prisoners, no peer support, and little information provided. In our survey only 53%, against a benchmark of 71%, said they felt safe on their first night. Staff on duty at night did not know the location of new arrivals. Induction was delivered inconsistently, and some important information was not provided. In our survey, only 31% said that induction covered everything they needed to know. There was insufficient engagement with prisoners on the committal wing, who spent too long locked in cells.
- HP8 In our survey, 62% said they had felt unsafe in the prison, compared to a benchmark of 38%, while more than the benchmark figure – and significantly more than when we surveyed in 2002 – said they had been victimised by other prisoners. This did not indicate that the separation of loyalist from republican prisoners had led to a generally safer environment. It was encouraging that many prisoners felt able to report victimisation to staff, and there were good and prompt investigations into allegations of bullying. These were followed by good attention to individual cases and monitoring through a monthly anti-bullying group. However, residential officers were not fully included and responsible. Although they had been informed, some residential staff and managers were unaware of suspected bullies who they should have been monitoring. Because of the lack of opportunities to transfer, the main response to extreme cases of bullying was segregation.
- HP9 Levels of self-harm were generally low. However, self-harm was treated too much as a medical issue, and the suicide prevention team meeting did not involve a full range of disciplines. Those at risk were often placed in special accommodation in the prison hospital in strip clothing, rather than provided with more therapeutic support. Attempts to provide a Listener scheme had foundered on security grounds. There had been no central training in the new prisoner at risk (PAR 1) system introduced in 2004 to monitor those at risk. To its credit, the prison had developed its own training package, and 220 staff had been trained. Nevertheless, the reviews were not well planned, prisoners very rarely attended, and some of the monitoring was poor. There had been delays in developing action plans and implementing recommendations from previous deaths in custody. Night custody officers did not carry cell keys, so there could be delays in entering cells in an emergency.
- HP10 Physical security was central to everything at Maghaberry, and there was little evidence of dynamic security, which was officially discouraged as a policy on the separated units. There were relatively few security information reports, but intelligence received was acted on. We recognised that prison officers had been and still were, subject to threats from paramilitary prisoners. However, throughout the prison there was little engagement with, or support, of prisoners. The search and

standby team had a militaristic style, and its presence was felt throughout the prison. Prisoners and some staff regarded it as disrespectful and intimidating. Security arrangements took little account of the fact that most prisoners did not present a high risk. On the separated units the arrangements for movements were too restrictive, as they were in the rest of the prison except during a period of free-flow.

- HP11 The punishment unit had officially changed its name to the special supervision unit (SSU), but many continued to use the old term, and the ethos was still punitive. All entrants to the unit were strip-searched, without an individual risk assessment. The regime was regimented and very basic, and there was little interaction with prisoners there for disciplinary reasons. Those who were there for their own protection had few complaints about living arrangements, and we noted that one prisoner had progressed from the basic to the enhanced regime. Adjudications held in the SSU were efficiently carried out, but there was no method to ensure consistency. Cellular confinement was almost invariably applied, with the loss of most privileges.
- HP12 Use of force in the prison was not high, and a good close escort system had been introduced to help de-escalate incidents. Documentation was well completed by the search and standby team, but spontaneous use of force by wing staff was not always recorded, and there was no trend analysis. No records were kept of the use of special accommodation, including the special cell in healthcare. There was also some confusion about the function of the 'dry cell' in the SSU – an unfurnished cell whose use should have been separately authorised and logged. The routine use of this cell to hold prisoners for 48 hours when they had received a drug dog indication on return to the prison was unacceptable.
- HP13 The drug-testing scheme was not applied consistently to the whole of the prison population, and tests could be either random, targeted, or for progression. The use of the term 'voluntary' to describe the scheme was inappropriate. Test results and finds were mainly for cannabis and prescribed drugs, but some heroin had also been found. Those arriving at the prison with withdrawal symptoms – usually from alcohol or benzodiazepines – received appropriate care. New clinical guidelines for continuation prescribing for opiate users had been implemented successfully.

## Respect

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HP14 Staff-prisoner relationships, while relaxed, were usually superficial, with little active engagement. There was no personal officer work and little interaction with prisoners during association periods. The external environment was well maintained. Some doubled cells were too small for sharing, and the square houses were unsuitable for managing prisoners well. The new complaints system was not operating effectively. Some prisoners stayed on the basic regime level too long. Prisoners were very dissatisfied with the quality of the food. Little was done to recognise or monitor diversity and promote equal opportunities. Healthcare services were satisfactory, but needed to develop further to match prisoners' needs.

- HP15 Prisoners had mixed views about their relationships with staff. In our survey, 67% said that most staff treated them with respect, but only 54% said there was a member of staff they could turn to for help if they had a problem, which was significantly worse than the benchmark. On the surface, relationships appeared to be relaxed, and first names were often used. However, while there were some positive individual

interactions, staff collectively seemed reluctant to engage fully with prisoners. The personal officer scheme was no longer functioning. There were regular weekly entries in wing files by unit staff, but few displayed in-depth knowledge of prisoners. There was very little engagement with prisoners during association.

- HP16 The external environment of the prison was well maintained. Individual accommodation was reasonable, but cells on Bush and Roe houses were too small for sharing, and the original square houses were claustrophobic and difficult to supervise. Prisoners were positive about their access to clean clothes, sheets, cleaning materials and showers, and had little difficulty in getting to their stored property. Time for association was generally good, but facilities were poor. Many telephones were not working.
- HP17 The progressive regime and earned privileges scheme had recently been reviewed, but the proposed changes had not yet been implemented. The majority of prisoners were on standard or enhanced levels, but some prisoners on the basic level remained on it for months at a time, with no target-setting or support. The basic regime was very restrictive, with too much time spent locked in cells without a television. Some inconsistencies in the operation of the scheme had been recognised by the review and needed to be addressed. Monitoring had recently been introduced, but this did not cover any analysis of regime level by location, religion or other relevant factors.
- HP18 The kitchen urgently needed replacing, and some of the equipment was in poor condition. Food handling was poor, as were the arrangements for serving meals, and few prisoners had been trained in basic food hygiene. However, there were opportunities for those working in the kitchen to gain NVQs. In our survey, 72% of prisoners said the food was bad or very bad, and we found it of indifferent or poor quality. Meal times were far too early, with the 'evening meal' beginning to be served at 3.30pm. There was no provision for prisoners to eat together outside their cells.
- HP19 The shop had an extensive product range, and there was quick access on arrival and good weekly access afterwards. Wages were paid in advance, and prisoners had a useful weekly update on their finances.
- HP20 Most prisoners were positive in the survey about their ability to see a religious leader in private, and about their religious beliefs being respected. The latter was not the case with separated republican prisoners. Most prisoners could get to appropriate services, except for those in the SSU, who also had limited access to chaplains. Some of the services held on units were not in suitable accommodation. The chaplains provided good pastoral care and accompanied many prisoners on compassionate release to their homes, but did not feel fully integrated into the wider work of the prison. The chapel was an underused resource, as it was difficult to get officers to escort prisoners there.
- HP21 Despite a legal duty to promote equality of opportunity, including between people of different religious beliefs, there was no equal opportunities policy for prisoners, and no routine monitoring by religious affiliation or ethnic background. Some good work had been done to raise awareness of cultural issues for travellers, but there was still a need to promote awareness of these and other minority groups. There was some evidence of a general lack of awareness of cultural and diversity issues among staff. There was no appropriate complaints system to deal with discrimination issues.

- HP22 A recently introduced complaints system was not working well. All the responses in the survey about handling internal requests and complaints were significantly worse than the benchmark. There was little evidence of investigation, and some complaints against members of staff were answered inappropriately by the person against whom the allegation was made. There had been no training in how to deal with complaints, and some responses were dismissive and unhelpful. There was no management oversight, and it was difficult to measure timeliness of responses or be clear about accountability. There were similar problems with requests, and no consultative committees to allow prisoners to raise issues with managers collectively.
- HP23 Few prisoners rated the overall quality of healthcare as good. They were positive about the individual service they received from nurses, the dentist and the optician, but not the doctor. Healthcare staff had a broad range of experience and skills, and provided good care. GPs attended each house once a week, but this was insufficient for the committal wing. Nurse triage was not aligned with GP clinics. Some good nurse-led clinics were run, but not smoking cessation. Visiting consultants covered a range of specialities. Mental health services were developing satisfactorily, with recently improved access to mental health beds, but there was little treatment for prisoners with personality disorders. The Resettlement Assessment and Support Unit (RASU) needed better day-care facilities. Accommodation for inpatients was poor, but there was a reasonable regime. Despite generally good procedures in medicines management, there was inappropriate secondary dispensing.

## Purposeful activity

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HP24 Time out of cell was inadequate, particularly for remand prisoners. Some positive work was taking place in education, with good achievements, but resources were stretched. Similarly, there was some good work and training opportunities, but not enough to meet demand. Most prisoners had little to do. Prisoners in separated houses were not allowed to work. Some of the education and training resources were wasted because of poor attendance and punctuality. PE facilities were good, and the majority of prisoners were able to benefit from them.

HP25 The amount of time prisoners were able to spend out of their cells was poor. There was considerable deviation from the published routines, with a lot of late unlocks and early lockups. On days when they were not due to get evening association, unemployed prisoners could spend as long as 22.5 hours locked in their cells. Only a minority of prisoners were engaged in purposeful activity during the day. Exercise and association took place daily.

HP26 The education department offered a range of academic and vocational courses, and some aimed at recreational interests such as drama and music. English and mathematics were the main subjects with progression to 'A' level and beyond. There was a lot of good teaching and learning, and effective support was offered in the workshops for literacy and numeracy. Some evening classes were offered. Learning plans focused principally on essential skills were well integrated with resettlement plans to support learning. Access to the internet was possible for those involved in courses. However, there were few resources to support further curriculum development and expansion. Existing resources were not well used, and attendance at classes was low and punctuality poor, with some operating with less than half those enrolled.

- HP27 The library offered good support to prisoners in education, but access was limited, with no evening or weekend sessions.
- HP28 There were 80 fulltime vocational training places. Most of the rest of the work available was domestic, and opportunities for remand prisoners were very poor. About half of the population were not allocated any work activity at all. The range of vocational places was reasonable, but the number was insufficient to meet demand. Most offered recognised qualifications. Resources were good, and some very high standards of work were produced. However, as with education, attendance and punctuality were often poor. Life-sentenced prisoners who remained at Maghaberry for the whole of their sentence had little chance of acquiring work skills, as determinate-sentenced prisoners were given priority. It was unsatisfactory that there was no work for prisoners on the separated units. A small number of opportunities were available for working outside the prison at the Crumlin Road site, mainly for lifers at the end of their sentence.
- HP29 PE resources were good, with a sports hall, weights room and gym facilities for the main prison. Gym facilities and Astro turf pitches were provided for the separated units. There were also exercise facilities on each house. Most prisoners had access to PE, but this was not the case for committal prisoners on Roe House. Those on the basic regime had only one session each week, while those on the standard and enhanced regimes had three and five sessions. Only sentenced prisoners were able to take part in weekend programmes. Five prisoners were enrolled on NVQ programmes, with a small number on other accredited courses, but at a low level.

## Resettlement

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- HP30 The prison had a good resettlement model, and plans that involved prisoners and relevant agencies. This needed reinforcing with a system to ensure that identified needs were met. Some good programmes were run, but there was not enough for short-term prisoners – particularly those with drug and alcohol needs. More needed to be done to connect prisoners with reintegration services, but there was good use of release on temporary licence to aid reintegration. The number of life-sentenced prisoners had grown quickly, but the physical environment, casework and activities for lifers did not match their needs. There was a good focus on work to help prisoners maintain relationships with their families.
- HP31 Progress had been made in the area of resettlement since we had last inspected Maghaberry, with the establishment of a Northern Ireland Resettlement Strategy and a resettlement team at the prison. The strategy relied on interagency cooperation, but its full implementation had been impeded by the establishment of the separated units and by limited engagement of some of the statutory bodies. The voluntary sector was well engaged with the strategy, and had worked in partnership with the prison in the development of some new programmes.
- HP32 There was good data capture by the resettlement team, and 183 prisoners were working to resettlement plans. Plans were devised by a resettlement board, and prisoners were engaged with the process, which involved interagency perspectives and took an appropriate and balanced account of risk. The resettlement planning model was good, but there was a need for further development to include a case-management approach, and to bring quality assurance to bear on the plans. The

existing system meant that information was held by a range of agencies, but the files did not demonstrate continuity of intervention or managerial oversight and analysis.

- HP33 Assessment of need and suitability for programmes was based on the Assessment Case Management and Evaluation (ACE) system, and on pre-sentence reports completed by the Probation Service. Provision of programmes and access to them was sufficient for high-risk prisoners serving sentences of over 12 months, but there was a need to develop programmes suitable for those on remand, or serving short sentences. Programmes were delivered by a range of disciplines and by various agencies, with joint facilitation. Programme integrity was overseen by an independent external panel. There were good arrangements in place to ensure that prisoners involved in programmes were not transferred to Magilligan prison. Prisoners on the separated houses were not able to take part in offending behaviour programmes, although some were on custody probation orders (CPOs) and life sentences that would require them to demonstrate a reduction in the risk they represented. There was scope for future development of programmes, including for men involved in domestic violence, and to address short-duration drugs problems and sectarianism.
- HP34 Initial categorisation decisions were based on the assessment of an officer with considerable scope for subjective decision-making. There was no prisoner involvement in the process, and no appeal mechanisms, because of the limited opportunity for progressive transfers. In practice, the reality for most prisoners in Maghaberry was that their security classification made little difference to their day-to-day lives. Reviews of categorisation were supposed to take place after 60 days, but there was little evidence that this happened. The system was under review.
- HP35 Life-sentenced prisoners represented 17% of the population, and there was also a high number who might potentially attract a life sentence. Little progress had been made in the development of a strategy for lifers in Northern Ireland – a problem that had been addressed in a recent review. No decisions had been taken about the review at the time of the inspection. Little work was being done to meet their specific needs, either as a group or individually. Annual reviews were held, but lifers were not properly involved in them. There was not enough constructive activity for lifers, who usually spent their whole sentence at Maghaberry. The prison had only just begun formal life-sentence planning, and most plans were simply a list of targets. Priority was given to three-year pre-tariff cases which was too late to motivate many or to begin programmes to reduce risk. The physical environment for lifers was poor, and they had little opportunity to cook and look after themselves as they progressed through their sentence. Shortly before the inspection, one of the units on Mourne House had been opened as a route for progression. This was a welcome development, but its function was not clear.
- HP36 A throughcare centre had opened in the workshop area in January 2005 to coordinate reintegration services, but the resource was not always available, and was too dependent on the services and enthusiasm of one individual. Our questionnaire indicated that many prisoners were unaware of how to get advice and help on key reintegration matters. There was good use of home leave, and resettlement leave was also used for specific reintegration needs. A small number of prisoners were able to progress to release from the working out scheme in Crumlin Road, and some prisoners transferred to Magilligan, but most were released from Maghaberry. Prisoners being released had their conditions of licence explained to them.

- HP37 Multi-agency risk management assessment meetings (MASRAM) were arranged for the release of sex offenders, and there was good interagency work led by the Probation Service, but other risks posed by prisoners at the end of their sentence were not managed. However, risk strategy meetings were also convened in respect of remand prisoners, about whom the prison had some concerns. The prison service's contribution to monthly meetings of the area sex offender risk-management committee was made more difficult by the fact that there were no personal officers.
- HP38 There was a well managed visits centre and good transport links to the prison, with buses funded jointly with NIACRO. A crèche operated in the visits centre for those who did not wish to take their children to the prison. Visits were timed from when visitors were seated. Space in the visits hall had been reduced for the majority, because of the need to provide distinct facilities for separated prisoners and their families. Closed visits were imposed on whole groups following a single drug-dog indication on one of them, without any further intelligence or use of discretion. There was very good support from a fulltime family contact officer, and child-centred visits operated each Saturday. Imaginative regular 'themed' visits weeks were held, and a number of good initiatives were under way to help prisoners maintain relationships with their partners and family. Good information and support was provided for visitors.
- HP39 The drug strategy meetings focused mainly on supply reduction, and needed more therapeutic input. There were no initial assessments of substance users' needs, and little information about substance misuse services. Individual counselling was provided, but there was a long waiting list. Although a good four-week group course was run for those with substance use problems, it was only for those who had previously received counselling. Only two alcohol and drug awareness courses had been run in 2005, with just 13 participants, although this was essential work for many prisoners. There was very little provision in this area for remand and short-term prisoners. More multidisciplinary teamwork was needed with voluntary drug testing, independent of the progressive and earned privileges scheme (PREPS). The biggest substance use problem was with alcohol, and more services were needed.

## Main recommendations

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- HP40 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.
- HP41 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.
- HP42 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.
- HP43 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.

- HP44 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.
- HP45 The kitchen should be fully refurbished or replaced.
- HP46 Sufficient activity places should be provided in work, education and training to provide an active day for all prisoners, including those on separated wings.
- HP47 Management of movements should improve so that prisoners reach their work and education places on time and remain for the published duration.
- HP48 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.
- HP49 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.
- HP50 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.



# Section 1: Arrival in custody

## First days in custody

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### 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 Most responses in our survey about first days in custody were lower than the benchmark for similar prisons. The reception was large but stark. Staff worked effectively, but there was little engagement of prisoners or identification of their needs. Some prisoners waited for hours in holding rooms with nothing to do, and no refreshments. Provision of first-night information was poor and there was little support for new arrivals. There was no specific training for staff working on the committal and induction unit. Officers delivering induction sessions interacted well, but induction was not sufficiently comprehensive.

### Reception

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- 1.2 The reception area was large and clean, but unwelcoming. It was staffed by a regular pool of six officers from the security group, led by a senior officer. The area was smoke-free, which frustrated many prisoners and added to their anxieties, as they were also unable to smoke in escort vans.
- 1.3 Escort and reception staff quickly transferred possessions and documentation. Holding rooms had very good sightlines, but had no information displayed, and nothing was provided to pass the time. Men returning from court moved quickly through reception, but newly committed prisoners could wait in holding rooms for more than two hours with nothing to do. Information about searching procedures was displayed at the counter, but this was not brought to the notice of prisoners.
- 1.4 As we noted in our last report, prisoners were interviewed at the counter by reception staff, and often two officers interviewed two prisoners simultaneously. Although small screens had been erected, they did not provide sufficient privacy, which inhibited prisoners from disclosing sensitive information or asking for help.
- 1.5 Prisoners were asked if this was their first time in custody, and a newly introduced cell-sharing risk assessment (CSRA) was initiated. Reception staff recorded whether they had received the necessary documents, but there was no specific discussion with prisoners to identify risk factors or welfare needs.
- 1.6 After the booking-in process and searching had been completed, prisoners moved to other holding rooms, from which they were escorted to Roe House. Some of the holding rooms contained graffiti referring to paramilitary organisations.
- 1.7 Prisoners received no written information about regimes and services, and although officers answered questions, they were not required to give any specific first-night information. As at

our last inspection, reception procedures were process-driven, rather than focusing on prisoners' individual needs, and there was only basic engagement with them.

- 1.8 One orderly worked in reception, but he was not expected to interact with new arrivals or offer support.
- 1.9 All new prisoners were photographed and searched in private. In our survey, only 46% of prisoners – compared to a benchmark of 66% – said that this process was carried out in a sensitive manner. Responses were even lower from prisoners on the separated units, with responses of 21% and 10% from Bush and Roe Houses.
- 1.10 Prisoners wore their own clothes, and there was a good supply of new prison-issue clothing, and shoes for those who needed them. A list identifying what clothing was allowed in possession was clearly displayed in the search area.
- 1.11 The reception had clean, well maintained showers, but we did not see them being used. Officers told us that they were not used for prisoners arriving during the late afternoon and early evening, as showering would slow down the reception process. In our survey, 50% of prisoners said that they were able to shower on the day of their arrival, compared to a benchmark of 36%.
- 1.12 Forty-nine percent of prisoners, compared to a benchmark of 56%, said that they were well treated in reception – and, again, separated prisoners were much less positive. We did not see prisoners offered a hot drink or any food while in reception, and only 51% said they had been given something to eat on the day of their arrival, compared to a benchmark of 81%.
- 1.13 Prisoners' property was held securely in the reception area. Property requests were managed by a small number of regular staff, records were well kept, and there was no backlog of requests or items to be collected during the inspection.

## First night

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- 1.14 New prisoners went to the committal and induction wing on Roe House. Staff on the unit were not drawn from a group of dedicated officers, and did not receive any specific training for working with newly committed prisoners.
- 1.15 Before being allocated to a cell, prisoners were seen by a nurse, and then in private by a wing officer. If prisoners arrived late onto the wing, officers told us that they would not be seen individually until the next day. Prisoners signed television and cell compacts on the day of arrival. At the time of the inspection, many new arrivals did not have the opportunity of a shower.
- 1.16 We observed three interviews, each taking approximately five minutes. There was no standard checklist to ensure that each officer gave the same information, and there was no formal first-night strategy. During our night visit, officers on the unit were unaware of the cells in which newly arrived prisoners were held.
- 1.17 The interviews were carried out in private, and the atmosphere was relaxed and friendly. The prisoner confirmed his personal information, and whether he had been in prison before; but there was no special attention for those who were in for the first time. The prisoner was told to 'keep yourself and your cell clean and tidy and cooperate with staff'.

- 1.18 In our survey, 74% of men said they had problems when they arrived, and 20% – compared to a benchmark of 29% – said that they received help from staff within their first 24 hours. As previously, perceptions of separated prisoners were worse.
- 1.19 Each prisoner we saw was offered a free telephone call, but relatively few in our survey said that they had received one. As no record was kept, this was difficult to verify. Every man was also offered a reception pack, and free tobacco packs were given to prisoners who had no money. In our survey, only 3% of men said that they received a pack on the day of their arrival, reflecting the fact that most were dealt with on the next day.
- 1.20 An information leaflet entitled 'General Information for all Inmates' was provided, although there were not enough copies for all new arrivals, and not all were asked if they could read. The leaflet was in some cells, but the information was not available in any other form for those who could not read. The written information was very basic, and some of it was incorrect. There was an expectation that prisoners would ask officers for advice, rather than that officers would actively provide it. The information leaflet listed 19 additional information sheets that prisoners could request, including one for women prisoners.
- 1.21 Nursing staff completed part of the CSRA during each interview. The interviewing officer also completed a section, although, as with the reception process, there was no direct discussion with the prisoner about risk issues. Some were questioned about affiliation with paramilitary groups, but prisoners were not directly asked about personal anxieties about their situation, or about dependants. Prisoners were invited to ask questions at the end of the short interview, but there was no structured staff or peer support.
- 1.22 In our survey, only 18% of men, compared with a benchmark of 38%, said that they received information on the day of arrival about what was going to happen to them. Only 53% of prisoners said that they felt safe on their first night, compared to a benchmark of 71%. Feelings of safety were lower for separated prisoners, with 30% of men on Bush, and only 13% of those on Roe, saying they had felt safe on their first night.
- 1.23 Prisoners were generally able to order items from the prison shop, known as 'committal tuck', shortly after arrival.

## Induction

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- 1.24 The day after their arrival, all prisoners were seen by the duty governor, a doctor and – unless they were serving a very short sentence – a probation officer.
- 1.25 The duty governor, accompanied by an officer, saw all men individually, using a standard form to ensure consistency. Although the focus was chiefly on gathering and checking formal information from the prisoner, the interviews were relaxed. However, there were few 'open' questions to allow welfare and domestic issues to be raised. Very good questions were asked about drug misuse, including any misuse of prescription drugs or solvents, but there were no questions about alcohol – although this was quickly rectified when it was pointed out.
- 1.26 The induction process consisted of three presentations: gym induction, landing induction, and fire awareness, which were delivered to prisoners when they moved from cells on the first landing to cells on the second. This was supposed to happen the day after their arrival, but in practice it could take some days. There was no induction timetable, and prisoners were not kept fully occupied by a structured, multidisciplinary programme.

- 1.27 Prisoners often waited a week or more before they received some or all of the induction information. In our survey, only 31% said that the course covered everything that they needed to know. Prisoners told us that they obtained much of the information they needed from other prisoners.
- 1.28 The landing induction was delivered by two officers in a dedicated classroom. Induction staff were not from a dedicated pool of staff, and had received no specific training for this work. Information was delivered verbally using a PowerPoint presentation. Some of the information in the presentation was incorrect, although officers were aware of this. The officers did not introduce themselves, and prisoners had no information booklet to refer to, and no writing material to make any notes. However, the presentation was delivered in a relaxed and friendly manner, and prisoners were encouraged to ask questions. Some information was not covered in sufficient depth, and some important subjects, such as healthcare, diversity and equal opportunities, and suicide and self-harm, were not covered at all.
- 1.29 Management of the induction process was inconsistent, and record-keeping was poor.

## Recommendations

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- 1.30 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.
- 1.31 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.
- 1.32 Refreshments, as well as means to pass the time in holding rooms, should be provided in reception.
- 1.33 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. (See also main recommendation HP40)
- 1.34 Night staff should be aware of the location and needs of new prisoners.

## Housekeeping points

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- 1.35 A comprehensive information booklet should be provided.
- 1.36 Graffiti in reception holding rooms should be removed.
- 1.37 Prisoners should be asked about their use of alcohol as well as other drugs in their interview with the duty governor.

## Good practice

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- 1.38 *The availability of a free smokers' pack for prisoners arriving without money removed their need to borrow tobacco from others, thus reducing the opportunity for bullying.*

# Section 2: Environment and relationships

## Residential units

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### Expected outcomes:

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

- 2.1 The accommodation and facilities on Bush House and Roe House were significantly better than older houses, which due to their design were difficult to supervise. Some houses, particularly those holding remand prisoners, were more overcrowded, and many spent a long time on their house units with little activity. There was good access to showers, clothes and bedding, but better provision of telephones and recreational facilities was required.
- 2.2 Since our last inspection there had been two major changes in the use of accommodation. The first was that women prisoners had moved from Mourne House to Hydebank Wood Young Offenders' Centre. Within the Mourne House complex, which is adjacent to the main prison, a small unit for life-sentenced prisoners had opened around two weeks before this inspection. Known as Martin House, this unit provided a more relaxed environment for prisoners within three years of their tariff expiry date. The unit could accommodate up to 12 prisoners, and there were seven there at the time of the inspection. Prisoners in Martin House were allowed access to the grounds and gym, and there were plans to provide cooking facilities, although there were none when we visited.
- 2.3 The second significant change was in the use of Bush and Roe Houses. These had previously held remand prisoners, but two landings on each house were now used for separated prisoners.
- 2.4 Bush and Roe provided the most modern residential accommodation in the prison. Each house had certified normal accommodation (CNA) for 96 prisoners. At the time of the inspection, Bush House was holding 100 prisoners and Roe House 102. The majority were single cells, but each house had four double cells.
- 2.5 These houses had wide landings which could be observed from a central administrative area. Each house had interview rooms, laundries on each landing, cleaning stores, treatment rooms and a sufficient number of showers. The houses were generally bright, and cells and communal areas were clean and well maintained. All cells had televisions, as well as integral sanitation and drinking water.
- 2.6 On Bush House there were 30 cells designed for one person that were holding two. On Roe House, 58 cells were 'doubled up'. These shared cells on Bush and Roe were too small for two prisoners.
- 2.7 Bush's landings 3 and 4 were predominantly used for remand prisoners, and Roe's landings 1 and 2 for committals. Prisoners on these landings spent most of their time on the wing. There were adequate recreational facilities, including exercise machines – but there were insufficient opportunities to use the outside Astroturf pitches. Remand prisoners and new committals were not able to eat communally. Cell-sharing risk assessments had been introduced during the

week of the inspection. Efforts were made to provide cells for non-smokers, but the security department had the major influence on where prisoners were located.

- 2.8 Bann, Erne, Foyle and Lagan Houses were older, original buildings. Each provided 108 cells divided into six landings. Built in the shape of a square, these houses had narrow corridors with low ceilings, and were cramped. They were difficult to supervise, unsafe, and unsuitable for their purpose. Staff did not actively patrol the landings when prisoners were unlocked to improve feelings of safety (see section on bullying).
- 2.9 Glen House was an additional accommodation area with 15 cells provisionally set aside for separated women. Although this accommodation had not yet been required, we did not consider the proposed accommodation within a male prison was a suitable environment for women.
- 2.10 Bann and Erne Houses were for sentenced prisoners. At the time of the inspection, Bann held 124 and Erne, which provided the lifer unit, held 100. The houses containing un-sentenced prisoners were more overcrowded – Lagan held 130 and Foyle 144.
- 2.11 Many of the single cells, with the exception of those in Erne House, accommodated two prisoners. Some cells on Lagan House used for two prisoners had unscreened toilets, which had been the case at our previous inspection. Other cells for one prisoner had no modesty board. Televisions were available for prisoners on the standard and enhanced levels of the progressive and earned privileges scheme.
- 2.12 Cell alarms and cell observation panels were checked daily, and these checks were recorded in the class officers' journal.
- 2.13 All of the four older houses had similar facilities. These included communal toilets and showers, laundries, interview and treatment rooms, and association rooms. There were no safer cells or Listener suites on any of the house units (see section on self-harm and suicide prevention).
- 2.14 Each house had a small dining room with a microwave, fridge and toaster. The dining rooms were not used for communal meals, and prisoners ate in their cells. Drinking water was available from identified taps on each landing, and there were documented water quality checks.
- 2.15 Our survey results were generally very positive about access to clean clothes, sheets, cleaning materials, and showers. For example, 85% of prisoners said that they were normally able to shower every day, compared to the 69% benchmark. There were three showers on each landing, and most were clean and in working order. One shower was not working on Lagan 6 – the cubicle was being used to store mops and buckets, although we were told that the fault had been reported.
- 2.16 Prisoners could wear their own clothes, and new non-uniform clothing was provided for those who required it. There was good access to wing laundries. There was one laundry room, with a washer and dryer for two landings, supervised by wing orderlies. Washing powder was provided, as were soap and basic hygiene items for prisoners.
- 2.17 Although we were told that it was difficult to get new mattresses, there was evidence of 200 mattresses being replaced on the six main residential houses since January 2005. Prisoners were supplied with duvets, and clean sheets were provided weekly. Eighty-six percent of

prisoners said that they were provided with clean sheets every week, compared to the benchmark of 78%.

- 2.18 Most of the houses had similar recreational facilities, with pool tables, table tennis tables, and some exercise equipment. Several of the pool tables were in poor condition.
- 2.19 There were two telephones on each of the landings, and a further four in the recreation rooms. Most were enclosed in booths for privacy – but not those on the landings. Many phones were damaged, or were not working. For example, there was only one phone on Bann’s landings 1 and 2, catering for 46 prisoners. In Lagan’s association room, only one of the four phones was working. Staff operated a list in the evenings allowing 12 prisoners 10 minutes each on the phone. We were told that there had been contractual problems with the supplier of the telephone service, but that this was being rectified.
- 2.20 Cells were in a reasonable condition, appropriately furnished and tidy. Volumetric control of property was not operated, but a list of what property could be held in possession was available. Some additional property could be held by life-sentenced prisoners and those on the enhanced regime. An offensive displays policy was exhibited on some wings, and extended to singing sectarian songs and wearing football shirts. Officers ensured compliance with the policy.
- 2.21 Foyle was the only integrated house with suitable access for wheelchairs, and included one adapted cell.
- 2.22 Erne House, holding mainly life-sentenced prisoners, was the only house where some prisoners had privacy keys for their cells. The house had only one interview room, which was insufficient for the number of different staff who needed to prepare reports.
- 2.23 There was a lack of consultation with prisoners on all the houses about the routines and facilities. We recognised that there had been little tradition of such consultation in Northern Ireland, but it would be a useful mechanism for improving interaction and trust between prisoners and staff.

## Recommendations

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- 2.24 The square houses should be replaced as part of the Northern Ireland Prison Service Estate review.
- 2.25 Cells on Bush and Roe Houses designed for one prisoner should not be shared.
- 2.26 Some opportunities should be introduced for prisoners, particularly new committals, to eat together.
- 2.27 Staff should actively patrol landings and communal facilities whenever prisoners are unlocked.
- 2.28 Glen House should not be used for women prisoners.
- 2.29 Adequate screening of all cell toilets should be installed.
- 2.30 Broken telephones should be replaced.

- 2.31 Additional interview rooms should be provided for Erne House.
- 2.32 Recreational facilities should be improved. Damaged pool tables should be repaired or replaced.
- 2.33 Monthly minuted house meetings should be introduced between prisoner representatives and staff.

### Housekeeping point

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- 2.34 There should be better opportunity for new committal prisoners and remand prisoners on Roe House to use the Astroturf facilities.

## Staff–prisoner relationships

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### 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.

- 2.35 Staff–prisoner relationships were generally distant throughout the prison, but deliberately so, on the separated wings. Individual interactions were superficially relaxed, but there was a general lack of mutual trust and respect, partly due to the historical context of prisons in Northern Ireland.
- 2.36 The quality of relationships between staff and prisoners appeared relaxed on the surface, with many members of staff addressing prisoners by their first names. However, prisoners tended to be mixed in their opinions about staff. Most were neutral in their views about how well they were treated. In our survey, 67% said that most staff treated them with respect, but only 54% said there was a member of staff they could turn to for help if they had a problem, which was significantly worse than the benchmark. Thirty per cent said they had been victimised by a member of staff. We noted that there had been a number of complaints about treatment by staff, and many of the responses – particularly those at the first stage – were not entirely respectful. Prisoners said that staff did not routinely knock on their cell doors or otherwise announce their presence. They found their treatment by the dedicated search team particularly disrespectful.
- 2.37 Although we noted some positive individual interactions between prisoners and staff, staff collectively seemed reluctant to engage fully with prisoners. There was some apparent mutual distrust; it appeared that opportunities to provide a supportive relationship were almost discouraged, and staff tended to keep their distance. This was partly a consequence of the historical and social context of Northern Ireland. Regular moves of staff did not help build good relationships, and the deliberate policy of not engaging with prisoners on the separated units to avoid the danger of conditioning appeared to have begun to spread to the rest of the prison. Most prisoners were locked away from staff during association, so there was very little interaction during those times and provided opportunities for bullying.

- 2.38 Nor was there any positive involvement with prisoners in matters such as motivating those on the basic regime to move from that status, or encouraging and helping prisoners to deal with targets in their resettlement plans. The failure to lock and unlock prisoners according to the published regime, or to get prisoners to work and education on time, were also indicative of a general lack of respect and positive engagement by staff.

## Recommendation

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

## Personal officers

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Expected outcome:

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

2.40 The personal officer scheme was not operating at Maghaberry. Residential staff completed routine weekly entries on wing files, but these displayed little depth.

2.41 The personal officer scheme was no longer functioning at Maghaberry. At the time of the last inspection one had been introduced, and there had been considerable investment in training, so this was disappointing. We were told that all regular staff on the houses acted as personal officers, but in practice this meant that none did. While we understood some of the difficulties of operating a personal officer scheme with a large and changing remand population, the absence of a single nominated officer as a first and central point of contact for long-term and lifer prisoners was a particular deficiency. There was no one person dealing consistently with issues such as parole reports, liaison with families, public protection matters, and attending PAR 1 reviews. An effective and supportive personal officer role would have helped to establish the more positive relations that we noted were missing (see section on staff-prisoner relationships).

2.42 Although there was no nominated personal officer, staff generally made regular weekly entries in wing files. There was a place on the form for these to be signed by prisoners as an indication that the entry had been shared with them, but this was never done. There was evidence of some management checks being carried out. The entries we saw were generally about custodial behaviour and the management of the progressive regime. Few displayed any in-depth knowledge of prisoners, or of their resettlement or life-sentence targets. This again was indicative of staff seeing their role as observing and supervising, rather than actively engaging with and supporting prisoners.

## Recommendation

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- 2.43 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.



## Section 3: Duty of care

### Bullying

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#### Expected outcomes:

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

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- 3.1 There was good identification and investigation into suspected bullying incidents. However, there was little ownership of the anti-bullying strategy by residential officers, and some monitoring of suspected bullies was ineffective, and was seen as the responsibility of a small number of staff from Inmate Services. Better management information was needed, along with improved supervision and training.
- 3.2 In our survey, 62% of prisoners said they had felt unsafe in the prison. This compared to a 38% benchmark for local prisons. More than the benchmark also said they had been victimised by other prisoners, and the survey indicated this had increased by 11% since our survey from 2002.
- 3.3 There had been no internal survey of prisoners' perceptions and experiences of bullying since 2002, and there was no monitoring of information about bullying to provide management information on which to base a strategy.
- 3.4 A bullying register indicated that in 2005 there had been 16 incidents of bullying investigated, involving 17 bullies and 19 victims. The log of security information reports identified a number of incidents that were related to bullying, but there was no evidence that bullying information reports (BIRs) were opened as a response to all suspected incidents.
- 3.5 Prisoners were not always adequately supervised. During association, for example, prisoners were locked into the association rooms with no direct supervision. Although many areas were covered by CCTV, there was little evidence that this was effective at identifying bullying. In our survey, among those prisoners who had ever felt unsafe, most said this had been during association periods.
- 3.6 Staff were working to the same 2001 anti-bullying strategy as when we last inspected.
- 3.7 In 2003 the psychology department had completed a report called 'Evaluation of Strategies for Dealing with Prisoners who Bully'. This had recommended more support for victims of bullying, with an increased focus on the investigation and recording of bullying incidents.
- 3.8 A small policy group had developed a new strategy that was being piloted on Bann House. Prisoners had not been involved in the development of the strategy. Twenty staff from Bann had completed some training in the new approach. Two prisoners had been placed on the strategy, which aimed to involve officers more in anti-bullying procedures. This was generally not regarded as an integral part of residential officers' work, as many saw it as the responsibility of the central Inmate Services. Most staff had not been trained in the anti-bullying strategy.

- 3.9 Posters about the effects of bullying, and encouraging prisoners and visitors to report bullying, were displayed around the prison. Many investigations were instigated as a result of prisoners informing staff – 22% said that they had reported victimisation, compared with a 12% benchmark for local prisons.
- 3.10 When incidents of suspected bullying were identified, staff were required to complete a BIR. These were passed to Inmate Services for investigation. The investigations were generally completed promptly and to a good standard, usually by the governor responsible for the area or a senior officer. Both victims and alleged perpetrators were interviewed, if the victim believed that this would not lead to further intimidation. Statements were taken in some cases, and some serious cases had been referred to the police for investigation.
- 3.11 Daily monitoring of suspected bullies had only been in place for around nine months. We were told that during the week of the inspection there were six prisoners being monitored on the strategy. In some cases, managers were unaware that prisoners on their house were being monitored. In one case, a prisoner had been placed on the strategy over four weeks earlier, but none of the daily entries required had been made. In another there had been no entries for over a week. In a third case, there had also been no entries made – this BIR was found by officers under other papers on the office desk when enquiries were made by an inspector.
- 3.12 The approach to anti-bullying from uniformed staff contrasted sharply with that from other disciplines. We saw some very good examples of multidisciplinary case conferences involving psychology, probation and others, convened by Inmate Services to discuss particular complex cases where bullying was a significant element. Some had involved prisoners with mental health problems whose behaviour was seen as threatening, or prisoners whose bullying was related to drugs. In these cases, mental health nurses and drugs counsellors had attended. These conferences demonstrated a good understanding of bullying behaviour.
- 3.13 Ongoing cases were monitored through a monthly anti-bullying board, where it was decided whether they should remain on the strategy. Meetings were well attended, with a range of disciplines represented, including psychology, healthcare and drug workers. The minutes of these meetings indicate, though, that residential officers and managers rarely attended.
- 3.14 There was a small vulnerable prisoner unit (VPU) located on Lagan landing 5. The unit had 24 spaces, and 16 were occupied. The regime was landing-based, and included some education provision and gym. We found no evidence that vulnerable prisoners here felt particularly unsafe.
- 3.15 There were no structured interventions for bullies, who were in most cases either segregated or moved to a different house unit. In a small number of cases, there had been tangible outcomes from case discussions, such as attendance at cognitive behavioural groups or drugs support. There were no specific interventions for victims.

## Recommendations

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- 3.16 **A survey of prisoners' perceptions and experiences of bullying should be carried out to inform the development of local policy and strategy. (See also main recommendation HP41)**
- 3.17 **Bullying information reports should be opened in all cases of suspected bullying. Managers should ensure there is effective daily monitoring of suspected bullies.**

- 3.18 Monitoring information about bullying should be improved, to enable managers to develop a profile of this behaviour.
- 3.19 All staff working directly with prisoners should receive training in the anti-bullying training strategy.

## Self-harm and suicide

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### Expected outcomes:

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

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- 3.20 Suicide and self-harm prevention was seen too much as a healthcare issue, with insufficient involvement of a range of other relevant disciplines. A better balance was needed between security and care, and residential officers needed to become more involved in supporting prisoners at risk. Prisoners did not attend their PAR 1 reviews, which were of poor quality. There was no peer support. We had some concerns about emergency procedures.
- 3.21 A suicide and self-harm prevention (SSHP) meeting was held regularly, and chaired by a governor. The meetings were predominantly attended by uniformed and healthcare staff, with regular attendance by the Samaritans and chaplains. There was little input from other disciplines, such as psychology, probation and the drugs workers, who could have made effective and relevant contributions. There were no prisoner representatives, and the minutes of the meetings did not reflect many of the issues associated with self-harm that were often important to prisoners. Generally, there was still an overemphasis on the healthcare aspects of self-harm.
- 3.22 Other than a Governor's Order (No.1.12: Self-harm and Suicide Prevention, reissued 7/9/05), there was no local suicide prevention policy setting out clear roles and responsibilities within the particular context of Maghaberry, a high-security prison holding many low-category prisoners. There was a need for such a policy to provide guidance to staff on balancing security needs with the sensitivities required in responding to those who self-harm and to provide practical, clear advice on matters such as procedures for entering cells at night.
- 3.23 A full-time suicide prevention coordinator at principal officer level had been in post since April 2005. This had previously been the responsibility of a senior officer. Since his appointment, his priority had been training staff in PAR 1 procedures. These had been introduced throughout the service in April 2004, but without any planned programme of staff training. Around 220 staff at Maghaberry had received some training since May 2005. This had focused on officers involved in escorts, and on staff working at night. Future priorities for the Suicide Prevention Coordinator (SPC) were the development of a Listener scheme, and monitoring of the daily operation of PAR 1 procedures.
- 3.24 Records of self-harm were kept by healthcare. These indicated when PAR 1 forms had been opened and closed. In the six months before the inspection, there had been an average of 20 PAR 1 forms opened each month. At the time of the inspection, there were 19 open forms. No analysis or monitoring had been done by location, initiating member of staff, length of time they

had been open, and other relevant factors, to build up a picture over time. According to our analysis, there had been an average of seven incidents per month. Some prisoners had harmed themselves on several occasions.

- 3.25 There had been six self-inflicted deaths since our last inspection, in 2002 – four apparent suicides, and two suspected accidental overdoses. There had been delays in developing action plans in response to investigation reports. But it was clear from the findings of investigations, and from internal case conferences chaired by headquarters staff, that efforts were being made to improve practice.
- 3.26 On occasion, prisoners at risk of self-harm had been placed in healthcare or in the SSU, and required to wear strip clothing. This response should not be necessary in most cases. We were told this did not happen often, but these incidents were not recorded, despite a Governor's Order (112: Self-harm and Suicide Prevention) requiring this to be done in the healthcare centre. The order made no reference to the use of strip clothing or special cells within the SSU for those at risk of self-harm, and their use was also not recorded.
- 3.27 In one case, a prisoner apparently threatening to self-harm was removed to the SSU by a control and restraint team. Although compliant, the prisoner was handcuffed and escorted in the SSU, where he was then given a full-body search. The report of the incident gave no indication of what, if any, alternative strategies had been attempted before this action was taken. In contrast to what appeared relatively insensitive treatment of a prisoner at risk of self-harm, we also saw examples where a caring approach was taken, including patient and sensitive handling of a prisoner with an eating disorder.
- 3.28 A sample of recently closed PAR 1 forms showed that most were poorly completed and included late reviews, with poor support plans and little recorded evidence of interaction between staff and prisoner. The need to improve the quality of recording had been highlighted on several occasions at self-harm and suicide-prevention meetings. One case we read was closed without a review. Prisoners were very rarely present at the review of their case, and there was an apparent reluctance on the part of officers to work closely with prisoners. There was no personal officer or key worker identified, which was seen as the responsibility of chaplains and probation officers. PAR 1 forms completed by healthcare staff, in which prisoners were often referred to by their first names, were of better quality than those completed by officers. There were no formal management checks of the quality of completed forms.
- 3.29 PAR 1 reviews were not fully multidisciplinary. In most cases they were attended by officers and a member of the healthcare staff. Participants from other disciplines were not routinely invited, or were invited only at short notice rather than as a planned part of their work, which made attendance difficult. Mental health-trained nurses attended PAR 1 reviews of cases they were involved with.
- 3.30 Support plans were often vague, but again quality was better when completed by healthcare staff. There were few therapeutic resources on offer, and little reference to support from counsellors, chaplains or others. Nor was it clear how integrated the work of the Resettlement, Assessment and Support Unit (RASU) was with supporting prisoners at risk of self-harm. Many plans outlined practical prison issues such as frequency of observations, suitable locations and need for body and cell searches, rather than addressing or investigating any of the underlying causes.
- 3.31 There were no Listeners at Maghaberry. The obstacles to establishing a scheme had been recorded in SSHP meetings for over a year. From an initial 18 potential Listener trainees, the

security department had excluded 12 as unsuitable. Before training began, others had been transferred or released, or had been found to be unsuitable for other reasons. Consideration was being given to transferring four temporary Listeners from Magilligan prison, to get the scheme off the ground. There were also plans to develop Listener suites and safer cells on each house unit.

- 3.32 Prisoners could call the Samaritans direct from the landings, but there were no portable phones to allow them to speak to the Samaritans during the night.
- 3.33 We had some concerns about the emergency response to prisoners who had self-harmed, particularly during the night. Two investigation reports had recommended that access to ligature cutters should be improved. Night custody officers carried a night guard belt, which included some emergency equipment. We noted during our night visit that one night guard did not wear her belt when checking cells. Moreover, staff were unaware where the prisoners who had arrived that day were located. Night custody officers did not have immediate access to cell keys in an emergency. In the event of discovering a prisoner hanging, a senior officer would have to be called in order to access a cell. Potentially, this could mean fatal delays.
- 3.34 Only healthcare staff carried ligature cutters on their belts during the day. These were also held in each landing office, along with first aid kits, which were checked monthly by hospital staff.

## Recommendations

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- 3.35 A greater range of disciplines should be represented at the suicide and self-harm prevention meetings, and should also be involved in planned PAR 1 reviews.
- 3.36 A Listener scheme should be established with access to Listener suites, and Listeners should participate in suicide and self-harm prevention meetings.
- 3.37 There should be improved monitoring and analysis of incidents of self-harm.
- 3.38 Senior managers should make regular quality checks of PAR 1 procedures.
- 3.39 All use of special accommodation and strip-clothing for prisoners at risk of self-harm should be recorded.
- 3.40 There should be a periodic review of recommendations from previous death investigations, to ensure that changes to practice are being sustained.
- 3.41 To minimise delays, the emergency procedures for entering cells at night should be improved. (See also main recommendation HP42)

## Equality, race relations and foreign nationals

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### Expected outcomes:

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

- 3.42 The Northern Ireland Prison Service had no strategy in the areas of equality, race relations or foreign nationals, and there were no local policies. Monitoring by religious affiliation was very limited, and the needs of foreign national prisoners were not met. There was no monitoring by race or ethnicity. Separated prisoners believed they received less favourable treatment in many areas. There was little promotion of diversity among staff and prisoners, although some work had begun.
- 3.43 The Northern Ireland Prison Service (NIPS) had no corporate strategy to deal with equality, race relations or foreign nationals, and there were no local policies. There were few black and minority ethnic prisoners at Maghaberry, and the establishment was not required to identify prisoners according to their ethnicity. There was no monitoring by ethnic background. We accepted that this was not a major issue for the prison, but as the general Northern Ireland population becomes more diverse there will be a need to reflect this in policies in the prison.
- 3.44 The needs of foreign national prisoners, of whom the prison identified 24, were not established or championed in any way. Foreign national men told us that they felt isolated and poorly supported. They were not consulted about their needs, and they received no free telephone calls or airmail letters.
- 3.45 As we highlighted during the last inspection, there was only limited monitoring by religion, which was carried out only in the areas of work allocation and vocational training. There was no analysis of religious affiliation in areas such as PREPS, use of force, adjudications, requests and complaints, or the use of cellular confinement. It was not possible, therefore, to assess whether the rules, routines and services within the prison were applied openly, fairly and consistently, without discrimination.
- 3.46 Separation of loyalist and republican prisoners had been introduced in September 2003. Our survey highlighted many differences between separated prisoners on Bush and Roe units, both in comparison with each other, with other wings, and with the local prisons benchmark. While these responses reflected the perceptions of prisoners on those wings, they could indicate differences of treatment and needed further examination.
- 3.47 There was little promotion of ethnic and cultural diversity throughout the establishment, and a general lack of awareness of cultural and diversity issues among staff. Managers were aware of this and had begun to address it. Only a week before the inspection, awareness training had been delivered to a cross-section of staff from members of the Irish travelling community.
- 3.48 There were no specific racist incident report forms. One prisoner wrote on a complaint form that he felt discriminated against because of his race. An officer wrote on the form that he was 'not sure what this prisoner actually wants', although the prisoner had stated his feelings very clearly. The complaint was not taken further. Such a response was likely to have compounded the prisoner's feeling of discrimination.
- 3.49 A publication for staff entitled 'Equal Opportunities: A Guide for Staff', dated May 2005, had been produced by NIPS. It contained comprehensive and useful information. We were told that

a number of staff had recently received training in this area, but the prison was not able to provide details of this.

## Recommendations

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- 3.50 All staff should receive relevant training in cultural, racial and diversity issues.
- 3.51 Foreign national prisoners should be properly identified, regularly consulted, and service provision appropriately targeted.
- 3.52 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. (See also main recommendation HP48)

## Family and friends

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### Expected outcomes:

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

- 3.53 The prison made excellent efforts to promote and facilitate contact with families. There were some problems with the telephone system and insufficient working telephones. Visits were easy to book, and the visits centre was well run. All visits lasted at least one hour, but did not start at the published time. Children had access to a supervised play area, but the main visits room was cramped. Closed visits were imposed on groups after a single drug dog indication. A family support officer ensured that a high priority was given to the needs of prisoners, children and families.
- 3.54 Every letter arriving at and leaving the prison, unless marked as legal correspondence, was read by censors and recorded. In our survey, 47% of prisoners, similar to the benchmark, said that they had experienced problems with sending or receiving mail. Separated prisoners on Bush and Roe Houses reported more problems.
- 3.55 Some prisoners complained about problems accessing a telephone. We found that many telephones were broken, and this increased the demand for the working telephones. The prison accepted there were difficulties with the service and a new contractor was being sought.
- 3.56 Visits ran from Tuesday to Sunday during the mornings and afternoons. Booking arrangements were good; there was no need for visiting orders and the system was computerised. All prisoners received an individual booking reference number, which visitors used to pre-book a visit. Newly committed prisoners could receive a visit without pre-booking, and a number of visit slots were kept free for this purpose. Lifers based in Martin House could only receive visits at the weekend.
- 3.57 Sixty-five percent of prisoners said that they had received a visit during their first week in custody – much higher than the 34% benchmark. Sixty-three percent of prisons felt that they received the number and length of visits that they were entitled to.

- 3.58 Visits could be booked by telephone, by fax, or by using the prison website. A telephone was also provided in the visitors' centre, which visitors could use free of charge to book a visit.
- 3.59 The prison funded a bus service from Lisburn railway station to the prison, and the Northern Ireland Association for the Care and Resettlement of Offenders (NIACRO) also provided regular transport from various areas. Details were displayed in the visits centre, and also included in the visitors' information leaflet.
- 3.60 The visitors' centre was provided and run by the Quakers. A large visitors' car park was available. The centre was comfortable and welcoming, and provided refreshments and toilet facilities. Staff provided information and advice to visitors, 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. Centre staff also managed the refreshment facilities and play area inside the prison.
- 3.61 The centre was well managed, and relationships with prison managers and outside groups were supportive and fruitful. The manager met regularly with the deputy governor and family support officer, and there were quarterly meetings including centre staff, NIACRO, prison staff, and Barnardo's, which often included guest speakers. There were no visitors' forums.
- 3.62 Visitors spoke highly of the support received from the staff in the visits centre, and said that they were well received by staff in the visits rooms. However, some complained about the attitude of a minority of officers in the visits reception building. As at our last inspection, some visitors said that some officers were 'unpleasant and patronising'. Both the visits centre manager and senior managers were aware of the complaints, and were monitoring the situation.
- 3.63 There was still no feedback or specific complaints system for visitors. As previously, visitors could write to the governor, but we were told that this process could take some time.
- 3.64 A minibus took visitors from the visits centre to the main gate. Visitors stood in a queue to wait for the main gate to open, then waited in line again for the door into the visitors' reception building to be opened. Although shelter was provided outside the main gate, there was none inside.
- 3.65 The visitors' reception had recently been refurbished, and was clean and tidy. Visitors had their photographs and fingerprints taken, and could hand in money or clothing to officers in the area. They were subject to an appropriate search. A drug dog operated, and if it indicated any visitor, they and the rest of their party had to have a closed visit or leave. No individual risk assessment was undertaken, or alternative offered, even when there were children in the party.
- 3.66 Visitors were asked to arrive at the prison 30 minutes before the start of their visit, but visits did not always start at the published time. One day we observed the first visitors arriving at the visits hall 20 minutes later than their booked time. Nevertheless, everyone received a visit of one hour, because visits were timed from when visitors arrived in the room. However, this assumed that all visitors had the necessary extra time available. Late starts impacted on visits for the rest of the afternoon.
- 3.67 There were two visits rooms and one had had to be set aside for separated prisoners, while the other of similar size catered for the large majority. The visits room for separated prisoners was spacious and comfortable. Because of the numbers, the other room was noisy and

cramped; furniture was fixed, and there was little space between groups. Children visiting in either room had access to a staffed play area, and refreshments were available.

- 3.68 Closed visits rooms were scruffy, some containing graffiti, and were in need of refurbishment.
- 3.69 Very good efforts were made to provide information and support to prisoners and their families, to help them keep in contact.
- 3.70 All sentenced prisoners serving over 12 months could apply to have a child-centred visit, irrespective of their privilege level. These took place on a Saturday, when up to eight fathers could spend time interacting with their children during the morning, and then have lunch with them. Lunch was also provided for the children's mothers or carers in a separate room.
- 3.71 There was a full-time family support officer (FSO) for prisoners and visitors. She acted as a link between prisoners and their families, and her role was advertised in the visitors' information leaflet. However, prisoners were not given information about the FSO during the induction process, and her role was not advertised around the prison.
- 3.72 A number of initiatives had been introduced, or were due to be introduced. Barnardo's was running a parenting course for sentenced prisoners called 'Staying In Touch', and Relate NI was due to start a course in the week following the inspection designed for prisoners due to be released and their partners.
- 3.73 The prison ran regular themed visits sessions, during periods such as Halloween, the summer school holidays and Christmas, when the visits rooms were specially decorated. Health promotion information had also been incorporated into the visits rooms. There had been a display about the dangers of the road during road safety week.
- 3.74 The FSO and visitors centre manager had recently collaborated on plans to develop visitor information sessions, to be held during the evening, which would provide information specifically designed to meet the needs of visitors.

## Recommendations

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- 3.75 Sufficient working telephones should be provided to allow prisoners to keep in easy contact with their families.
- 3.76 An accessible and monitored feedback system procedure should be introduced to allow visitors to suggest improvements or complain if necessary.
- 3.77 Closed visits should not be imposed automatically on a single drug dog indication without any supporting intelligence or consideration of alternative operational procedures.
- 3.78 Visits should begin at the published time, and the visitors' reception building should be opened in readiness for visitors.
- 3.79 The capacity of the visits room serving the majority of prisoners should be increased.

## Housekeeping points

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- 3.80 A visitors' forum should be introduced.

- 3.81 The closed visits facilities should be refurbished.
- 3.82 The role of the family support officer should be better advertised within the prison.

### Good practice

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- 3.83 *The variety of visit booking methods ensured that bookings could be made easily and at the convenience of visitors.*
- 3.84 *Visitors could leave their children to be cared for in the visitors' centre, which enabled carers to visit without the responsibility of having to look after their child.*
- 3.85 *The family support officer provided a necessary 'bridge' between prisoners and their families, and also ensured that a high priority was given to the needs of children and of fathers in prison.*

## Applications and complaints

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### 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.

- 3.86 A recently revised complaints system was not dealing effectively with complaints. Prisoners could not access or submit request or complaints forms confidentially, even for complaints about bullying or victimisation by staff. There was no management oversight of requests and complaints, and no monitoring for equality, or to identify patterns or trends. Prisoners had little confidence in either system.
- 3.87 Prisoners usually found out about how to make requests and complaints by asking officers on their house unit, since little information was conveyed to them during induction (see section on arrival in custody). Most of the units displayed two separate 'Guide for Prisoner' leaflets – one for requests and one for complaints – which had been produced by the Northern Ireland Prison Service (NIPS). The information was available only in English, although there was a small number of prisoners at Maghaberry who spoke very little English.
- 3.88 Prisoners generally understood how to make requests and complaints, but had little confidence in the system. Responses in our survey about the internal complaints and requests system were all significantly worse than the benchmark.
- 3.89 A new system of complaints had been introduced in April 2005, but it was not working well. A review of the system had been carried out by NIPS, and the revised system had been rolled out nationally. One of the main new features was the introduction of a Prisoner Ombudsman to intervene if the prisoner was not satisfied having followed the three stages of the internal system.
- 3.90 The system was designed to encourage informal resolution of complaints by residential staff, so that prisoners did not have to resort to the formal system. However, staff had not been trained in techniques for informal conflict resolution, which required good interpersonal skills.

The conditions necessary for informal resolutions to be effective – such as frequent contact between staff and prisoners, and an environment in which discussion about areas of disagreement could routinely occur – were not in place (see also sections on personal officers and relationships). There were no consultative committees to underpin and support informal resolution.

- 3.91 There was no confidentiality at any point in the three stages of the complaints process. Prisoners had to ask a member of staff in the first instance for a complaint form. They were then required to return the completed form to a member of staff. A senior officer on the house unit usually allocated the complaint. However, following the principles of informal resolution set out in the guidelines, the complaint was allocated in the first instance to the staff member who had been responsible for the decision or action that was the subject of the complaint.
- 3.92 Of the complaints we sampled, we found examples of complaints against members of staff being dealt with inappropriately by the member of staff who was the subject of the complaint. In one case, a prisoner in the segregation unit had submitted a complaint about a member of staff losing her temper with him. The response was: 'I presume that you are referring to me. Unfortunately I have no idea as to what you are talking about.'
- 3.93 We came across complaints about alleged staff assault, discrimination and racism, which had been dealt with incorrectly and had not been referred in the first instance to staff at an appropriate level of seniority. Some responses to other complaints were dismissive, and did not answer the actual complaint. There was no evidence that staff were making efforts to investigate the complaint. They generally responded before looking into the matter and reporting back the findings to the prisoner. There were a few notable exceptions, in which staff had given a detailed explanation to the prisoner and offered further help if necessary, including an explanation of the right to appeal to the next stage. There were two levels of appeal to the next level of authority. Thereafter, prisoners could appeal to the Prisoner Ombudsman, and there was evidence that prisoners were using this new tier of appeal.
- 3.94 There were clear timescales for responses to be returned to the prisoner. However, staff did not always complete the documentation properly. There was an internal complaints register held on each house unit, but it was not consistently kept up to date, and did not require a record to be made of the outcome. Consequently, it was not possible to measure timeliness or track the progress of a complaint through a clear audit trail. There was no management oversight, and no quality assurance. There was no analysis of data to monitor equality, or to identify patterns or trends.
- 3.95 As part of the revised system of complaints, a new form had been introduced for requests, since previously the same form had been used for both requests and complaints. There was a register of requests held on the house units, which showed that most requests were dealt with by staff based on the units. The manner in which requests were dealt with varied. We found some poor examples in individual files, but when managers were involved in the process, requests were usually dealt with well. The register was not always kept up to date on all house units – particularly when the request had been passed to a governor – and, as with complaints, requests were not subject to management oversight or any form of monitoring for equality, patterns or trends.

## Recommendations

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- 3.96 Request and complaint forms and respective guidelines should be available in languages other than English.

- 3.97 Consultative committees should be introduced.
- 3.98 Complaints and requests should be monitored and evaluated so that any patterns or trends can be identified. (See also main recommendation HP44)
- 3.99 The internal complaints register and the request register should be properly maintained on all house units, so that a clear audit trail is available.

## Section 4: Healthcare

### Expected outcomes:

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

4.1 Although prisoners had a relatively poor perception of the overall quality of healthcare provision, they were positive about the service from nurses, the dentist, and the optician. There was a rich skill mix among staff, and a good range of primary care services was provided, including nurse-led clinics. However, access to GPs was limited. We had some concerns about how medicines were administered. The inpatient regime was satisfactory, but mental health provision for those less able to cope with life on the wings was not well resourced.

### Environment

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- 4.2 The healthcare centre was situated near the visits centre, and included an inpatient unit and a primary care facility. The primary care unit comprised a pharmacy room, a large treatment room, various consulting rooms, an X-ray room, a dental surgery, and offices. There were also staff offices, and a small kitchen. The holding room for prisoners was bare – there was no health promotion material on display, and the room was stark and unwelcoming. There was a range of health promotion posters and leaflets displayed in the healthcare corridor, but prisoners had little opportunity to read them.
- 4.3 Medicines were stored in a number of different locations in the prison: there was a pharmacy room, a treatment room in the main healthcare centre, an inpatients' treatment room, and treatment rooms on each house. All rooms inspected were clean and tidy. In all but one room the medicines were stored securely in locked cupboards or trolleys. We were concerned that the treatment rooms on the units were accessible by discipline staff.
- 4.4 All dispensed medicines supplied by the pharmacy were labelled in accordance with labelling legislation, and patient information leaflets were supplied as policy. There were no stock medicines in the treatment areas, apart from discretionary medicines.
- 4.5 Thermolabile medicines were stored appropriately, and records of maximum and minimum fridge temperatures were maintained. Controlled drugs were stored correctly, and records were maintained in accordance with the Misuse of Drugs Act. Registers and running balances were checked regularly by pharmacy staff. The emergency 'out-of-hours' cupboard was secure, and agreed stock lists were in place.
- 4.6 The dental surgery was pleasant and well designed, and facilities conformed fully to current guidelines. The equipment was suitable for the provision of modern dentistry. Cross-infection protocols were satisfactory. Protocols were in place for weekly compressor maintenance.
- 4.7 There were 20 beds in the inpatient unit, which were part of the certified normal accommodation (CNA). Seventeen of the beds were used for patients, and three for cleaners. There was a six-bed bay that could be viewed from the small, dimly lit office, which was used for prisoners with mental health conditions. At the other end of the corridor was a four-bed ward for prisoners with physical illnesses or disabilities. The rest of the accommodation was in

single cells, three of which were designated for those with mental health conditions, known as 'observation cells', and fitted with closed-circuit TV cameras. There was also a protected cell, which we were told had not been used for some time; it was being used as a storeroom during the inspection. At the entrance to the ward there was a room used for occupational therapy, a dayroom with a pool table, a kitchen, a laundry, and some storerooms. Space had been made for some cardiovascular gym equipment, but this was new, and the staff had not been shown how to use it, and prisoners were not yet able to use it.

- 4.8 Emergency equipment in the form of a 'grab bag' was available in each of the treatment rooms. There was a defibrillator in the healthcare centre, in Roe House, and in Martin House. Documented weekly checks of the equipment were made.

## **Staffing**

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- 4.9 The healthcare manager was a registered general nurse (RGN), and a principal nursing officer grade, but was not available during the week of the inspection. She was not a member of the senior management team; she reported instead to a governor 5, who reported in turn to another more senior governor grade.
- 4.10 There were four senior officers, three of whom had a nursing qualification, while the other had a prison hospital officer qualification. There were two teams of staff – one for mental health and the other for primary care. There were a total of 14 registered mental health nurses (RMNs), and 15 RGNs, in post. Each team had healthcare officers attached to it. Not all nurses were available for work, due to long-term sickness and maternity leave. Consequently there were four agency nurses employed to cover vacancies and absences. The nurses were employed at nursing officer grades, and had therefore all received prison officer training. We were surprised to see that some of the nurses carried staves, which we considered to be inappropriate for a healthcare professional.
- 4.11 The staffing rota provided a total of 13 staff for a core day, seven during the evening, and two at night. But the skill mix was not always appropriate, and we witnessed occasions when an RMN from the mental health team, who worked mainly on the inpatient unit, worked on a house unit, administering medications and triaging physical health problems.
- 4.12 We were unable to confirm the registration details of healthcare staff, as the details were only kept at prison headquarters. Staff were able to access a variety of continuing professional development (CPD) resources, and one of the RGNs was an advanced life support course (ALS) instructor and UK Resuscitation Council registered. Other staff told us of academic qualifications they had been able to achieve while working at HMP Maghaberry. However, the central training records had not been kept up to date, and some staff felt that access to CPD was not allocated fairly.
- 4.13 There was a variety of administrative staff, including two medical typists and two general clerks.
- 4.14 A pharmacist was contracted by the prison service to oversee pharmacy services for the three establishments in Northern Ireland. She was a member of the medicines and therapeutics committee (MTC). A pharmacist visited the prison every week, and sometimes twice a week. In addition, there was a fulltime pharmacy technician employed to oversee the daytoday running of the pharmacy room.
- 4.15 A fulltime senior medical officer (SMO), who had been seconded to the prison service in 1985, had been at Maghaberry since 1988. He was a qualified GP, although he did not practise

anywhere other than in the prison, and kept up to date by attending GP courses and other relevant prison conferences.

- 4.16 Seven GPs provided the clinical service to prisoners. Each wing had one GP clinic per week. A GP also attended the prison each day to see new committals.
- 4.17 Two forensic psychiatrists from South East and Belfast Health and Social Care Trust, one of whom specialised in addiction, provided mental health cover. They were each accompanied by a specialist registrar, and in total 14 psychiatry sessions were provided each week.
- 4.18 The contract for dental services was held with Down and Lisburn Trust, and a dentist had recently been appointed (provision had previously been by a locum service). The newly appointed dentist was covering dental services at another prison on one day each week, but it was anticipated that, within a few months, the post at Maghaberry would become fulltime (ten sessions per week). The dentist was assisted by a fulltime dental nurse.

## **Records**

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- 4.19 Medical records were held in the healthcare centre. They were filed on an open, rotating filing system. Old notes for all prisoners in Northern Ireland were also kept in the healthcare centre. Staff were therefore able to amalgamate the notes of prisoners who had been in prison before if they were readmitted. The notes of detainees at Crumlin Road were also kept at Maghaberry.
- 4.20 The majority of entries made in the clinical records by medical staff were typed, as were some of the entries by senior nursing staff.
- 4.21 All prescribed medication was dispensed on a named patient basis, which allowed full patient medication records to be maintained on the pharmacy computer. An updated copy disk of the records was supplied on a daily basis to the prison, providing the fulltime pharmacy technician with access to up-to-date information about patients' medication, which enabled her to deal with queries from the nursing staff.
- 4.22 The system used for issuing prescriptions was complicated. The doctor wrote a 'Cardex' for each patient – a record card written as a prescription chart and signed by the prescriber. The card listed all medication for the patient and directions for use, written in rows identified by letters of the alphabet. The Cardex for each patient was stored in the relevant treatment room, in a file with separate individual administration charts. The administration chart was completed by the healthcare staff, cross-referenced to the Cardex. The system was such that the administration chart in isolation was meaningless, and there was a large potential for transcribing errors. Nurses did not routinely annotate the administration record at the time of administration, which contravened the Nursing and Midwifery Council guidelines for the safe administration of medications.
- 4.23 The doctor also wrote copy prescriptions onto specially designed triplicate stationery, and the top copy was faxed to the pharmacy to enable them to dispense the prescriptions.
- 4.24 The dentist made a record of dental treatment on service-designed cards which were kept in a locked cabinet, but did not duplicate this in clinical records.
- 4.25 Staff had access to a range of policies and protocols, including triage algorithms.

## Primary care

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- 4.26 When prisoners first arrived, they were seen by a member of the healthcare team in a room on the committal wing. Of the prisoners surveyed, 64% said that they had seen a member of healthcare on arrival. Where necessary, a GP was then supposed to see them on the following day. However, when we reviewed the records of the GPs' attendance, we found that most of them did not attend the prison for a full session to see committals, or indeed for some GP clinics. As a consequence, we found prisoners who were not seen by a GP within 24 hours of admission, and had not had required medications prescribed.
- 4.27 Nursing staff from the primary care team were allocated to work on each of the house units. Whenever possible, the same staff worked on the same house, in order to provide continuity of care. However, as we have noted, this did not always occur.
- 4.28 If a prisoner wanted to see a doctor, he had to speak to the nursing officer on his unit, and his name was added to the GP list for his house unit. On all but Lagan House the healthcare staff then triaged all the prisoners on the morning of the GP clinic. This meant that the nursing officer could be seeing up to 40 prisoners in no more than an hour. On Lagan House, prisoners completed an application form stating who they needed to see and why. Nurses then undertook triage daily, and prisoners were given an appointment with the relevant healthcare professional. This system was more appropriate and manageable. In both cases, the nursing staff then requested the clinical notes from the administrative staff, so that they were available to the GP. There were a maximum of 12 GP appointments for each house each week.
- 4.29 Almost all medicines were supplied on a named patient basis. The print on some of the drug labels was faded, and therefore difficult to read. There was a formal, documented risk assessment for prisoners to receive medications in possession. The default procedure was that patients would receive 28 days of medication to self-medicate, unless otherwise indicated by the prescriber or a nurse. Some patients, who were on stable long-term medication, could have prescriptions written for up to 84 days' supply, but they only received 28 days of medication at a time. The system worked well, but there was no reminder system in place to initiate repeat supplies. Prisoners did not have secure facilities to store their medicines.
- 4.30 There was a problem with the way in which those without in-possession medications received their medication. We were told that there were three treatment times when patients would receive their medication, administered by nurses: 8.30am, 12.30pm and 4pm, with an additional treatment time at 6pm for night-time medication if required. During the inspection, it was apparent that this was not happening, and that nurses were instead making up envelopes for individual patients containing a day's supply of prescribed medications, using the medicines dispensed by the pharmacy. This constituted secondary dispensing. The name and number of the patient, and the names and doses of the medication, were handwritten onto an envelope by the nurses. The nurses did not transcribe any warnings indicated on the original dispensed labels, and the medicines were supplied as individually cut foils or loose tablets.
- 4.31 This poor practice was further compounded by nurses, in that, on receipt of prescribed medicines that had been supplied in original manufacturer's blister packs, or venalink compliance aids, they would routinely cut the foiled/blistered tablets up into individual doses, to speed up secondary dispensing. We even witnessed this being done with medications to be administered the next day. Pharmacy staff were aware of this practice, and had agreed to supply properly labelled daily self-medication packs for two of the houses. But the volume of work that this generated prohibited the service being extended to the other houses, due to safety and staff resource issues.

- 4.32 The visiting pharmacists had begun to have direct contact with patients through the introduction of a medicines management scheme. A member of the healthcare team made referrals, and an invitation to the patient was sent offering the service. The scheme had only just started, and the focus was on patients on more than four different types of medication, most of whom resided in Erne House.
- 4.33 Prisoners were able to purchase a range of home remedies – such as aqueous cream, Deep Heat rub and polytar shampoo – from the tuckshop list.
- 4.34 The pharmacy provided a dispensing service for the working out scheme and for the immigration detention centre on the Crumlin Road site. Pharmacy staff had delivered accredited 'care of medicines' training to officers at that site.
- 4.35 Some healthcare staff had specific responsibilities for the management of chronic diseases, such as heart disease and hypertension. Each kept their own registers, and there was a system for identifying chronic diseases on the patient's clinic notes.
- 4.36 Smoking cessation services were not offered, but we were told that they were to be reintroduced within a few weeks, and would be in line with the services offered at Magilligan, to ensure continuity of provision.
- 4.37 Prisoners were offered dental treatment on admission. Men in pain were offered an appointment for the dentist's next session. The waiting lists for examination and treatment had previously been long, but the newly appointed dentist and her assistant had already made effective attempts to reduce these lists. There was a policy document on the delivery of dental treatment. The length of clinical sessions had been extended, and formal arrangements were in place for out-of-hours emergencies.
- 4.38 The dental team worked well, both alone and with various agencies, with the aim of providing a quality service. Quality and quantity monitoring, clinical governance, and peer review systems had been put in place.
- 4.39 Prisoners could be referred to physical education instructors (PEIs) for remedial gym sessions. Four of the gym staff were qualified sports injury therapists, and the PEIs were able to keep the GPs informed of a prisoner's progress.
- 4.40 Secondary care consultants from local hospitals – including a general surgeon, an ear, nose and throat surgeon, and a dermatologist – held clinics at the prison. These were arranged as and when there were enough patients needing to be seen, so it was possible for prisoners to wait up to six months for an appointment. However, the SMO reviewed all test results, and if he judged that a prisoner needed to be seen more quickly he referred him for an appointment in the community. Other allied health professionals, including a podiatrist, an optician and a radiographer, also visited the prison. All had short waiting lists.
- 4.41 The healthcare administrative staff initiated the risk assessments for prisoners who needed to attend outside hospital appointments. Only one appointment was permitted each morning and afternoon. In the previous four months, approximately 13% of appointments had been cancelled by the prison escort group (PEG), while 5% had been cancelled because the prisoner refused to attend. Only six (3%) had been cancelled by the outside hospital.
- 4.42 Not all prisoners were seen by healthcare staff before they were discharged. Prisoners who required medications were given a three-day supply. Those involved with the mental health support team had comprehensive discharge plans.

## **Inpatients**

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- 4.43 The inpatient unit was staffed mainly by RMNs. There were four or five staff on duty during the core day, and two at night. Together with an occupational therapist, who conducted two sessions per week, they provided a reasonable therapeutic regime, but they accepted this could be enhanced.
- 4.44 Staff operated a 'key worker' system. On admission to the unit, patients were allocated to one of three groups of staff, who then coordinated their care while they were an inpatient.
- 4.45 As we have noted, there were three single cells for use by prisoners with mental health conditions. Prisoners in these cells could be put into 'strip' or canvas clothing. However, the only record of this was in the individual nursing notes, rather than in a central register.

## **Mental healthcare**

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- 4.46 Three of the RMNs were designated as a mental health support team. Prisoners could be referred to them by a primary care nurse, or by a GP. A member of the team then aimed to see the prisoner within five days of receiving the referral, although they said that this was not always possible. They undertook a full mental health assessment, and either referred the patient to a psychiatrist or arranged to see them on a regular basis. Prisoners with severe and enduring mental health illnesses were seen regularly by the team. They coordinated their depot injections, blood tests and liaison with their families. They also ensured there were discharge plans in place on release. Prisoners with primary mental health concerns were seen as required, but for a minimum of six sessions. During these one-to-one sessions with the team, prisoners were encouraged to use workbooks to challenge negative thoughts, or taught distraction techniques or other skills to manage their mental health. The team could also refer prisoners to the nurse, who provided sleep management clinics. Members of the team were also involved in PAR 1 reviews if they knew the prisoner.
- 4.47 Each of the forensic psychiatric teams had its own workload. One was responsible for inpatients and sentenced prisoners, while the other looked after remand prisoners, and also provided the lead physician for substance use. Each aimed to see prisoners within five days of receiving a referral.
- 4.48 We were told that a medium-secure mental health unit had opened in Northern Ireland in April 2005. While not fully operational, it had relieved the problem of transferring prisoners with acute mental health needs to the health service.
- 4.49 The prison provided day facilities for those less able to cope with life on the residential wings. The resettlement, assessment and support unit (RASU) was based in the workshops area of the prison. Referrals to the unit came from either the mental health support team, discipline staff, or prisoners themselves. Prisoners who attended the unit were provided with a weekly programme of events, which included yoga, literacy, art, charity work, and gym. Prisoners who attended the unit told us that sessions were often cancelled due to staff shortages. The discipline staff who worked on the unit had not received any mental health awareness training, and healthcare staff were not always available. Consequently, a valuable service was not fully resourced or utilised, and was only able to benefit a few prisoners.

## Recommendations

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- 4.50 Access to healthcare rooms, wherever they are in the prison, should be limited to healthcare staff.
- 4.51 The inpatient beds should not form part of the prison's certified normal accommodation.
- 4.52 Nursing staff should not carry staves.
- 4.53 The skill mix of healthcare staff should be reviewed to ensure that all staffs' skills are being used appropriately and to their full potential.
- 4.54 There should be a fair and auditable system for the allocation of continuing professional development.
- 4.55 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.
- 4.56 All clinical records should be made contemporaneously.
- 4.57 The applications and triage system that has been piloted on Lagan wing should be adopted on the other wings.
- 4.58 Nurses should stop the risky practice of redispensing and/or repacking dispensed medicines.
- 4.59 Reviews should take place of treatment times, accessibility to patients and assessments for suitability to be included on the self-medication scheme.
- 4.60 Prisoners receiving a night-time dose of a medicine should be able to receive the dose at an appropriate time.
- 4.61 The complicated Cardex system for issuing prescriptions should be discontinued, and a prescription and administration record sheet introduced.
- 4.62 The method of ordering medications should be revised to ensure a system that has robust auditing to reconcile prescriptions against orders.
- 4.63 A repeat slip system for patients who have had their medication written up for 84 days should be introduced.
- 4.64 Nurses should follow the NMC guidelines for the safe administration of medications.
- 4.65 Prisoners should be provided with lockers in which to store prescribed medicines.
- 4.66 Formal clinical governance arrangements should be put in place for recording pharmacy interventions, and adverse incidents such as errors.
- 4.67 Smoking cessation services should be introduced.
- 4.68 The use of strip clothing in healthcare should be recorded in a central register.

## Housekeeping points

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- 4.69 The healthcare holding room should have appropriate health promotion literature displayed.
- 4.70 Records of professional registrations of healthcare staff should be available locally.
- 4.71 Healthcare staff should receive training so that they can supervise prisoners using the newly installed gym equipment in the inpatient unit.
- 4.72 The print quality on drug labels should be of an acceptable standard.
- 4.73 A signature should be obtained from the patient to confirm receipt of any medication supplied that is intended for self-administration.

## Good practice

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- 4.74 *The pharmacy staff had trained officers working at Crumlin Road in the care of medicines. This ensured the safety of medicines in an environment where there were no healthcare professionals.*

# Section 5: Activities

## Education and library provision

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### Expected outcomes:

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

- 5.1 The range of education generally met the needs of the population who chose or were able to access it, but only about half the population did so. Attendance and punctuality were poor. Courses were available from pre-entry level through to Open University degrees, although the emphasis was mainly on English and maths. Good links had been forged with the Prison Arts Foundations, which offered a variety of creative courses. The curriculum was impoverished for those on remand and committal. There were long waiting lists for essential skills programmes, and only limited literacy and numeracy support in workshops. In most areas, the standard of teaching was satisfactory or better, and learners' achievement was generally high. Library services were reasonable for most prisoners, but there was no weekend access.
- 5.2 The education department was managed by a full-time education manager and two senior teachers. A further five full-time teachers and 15 part-time teachers supported the full-time staff. All were employed by the Northern Ireland Prison Service. Further part-time teachers were employed by the Prison Arts Foundation and the Belfast Institute of Further and Higher Education. Extra staff were employed through an agency, when the need arose. Education for approximately 512 learners was available in the education department. This included some provision for the two separated units, the vulnerable prisoners' unit, the healthcare centre, and for both remand and sentenced prisoners from the residential units.
- 5.3 The prison offered courses in essential and life skills, GCSEs in mathematics and English, and a small range of higher-level courses, including Open University degrees. This provision was enhanced by prisoners being given appropriate access to the Internet. A variety of courses was offered through the Prison Arts Foundation, including practical theatre skills, drama, music, and creative writing. Evening classes included law, hairdressing, and arts and crafts. Information and communications technology classes providing the European Computer Driving Licence (ECDL) and Computer Literacy and Information Technology (CLAIT) Plus were offered in the computer workshops. However, for most prisoners the academic curriculum was narrow, and focused mainly on English and mathematics. Some courses which had previously been run by local colleges had had to be discontinued as the colleges were unable to continue to provide support.
- 5.4 Education provision for separated prisoners was relatively restricted, but a recent survey had been carried out in the separated units, and the education department was preparing a range of activities to try to meet their needs.
- 5.5 There was no formal induction into the education department, and the full prospectus was not routinely shared with prisoners on entry to education.
- 5.6 Classes were often below full capacity (sometimes with less than 50% attendance). Some, but not all of the absences were accounted for by prisoners being required for court appearances,

for visits, and for offending behaviour programmes. A lack of planning meant that there were long waiting lists, particularly for the course in essential skills for remand prisoners. Prisoners arrived late for classes and left early. This reduced the amount of effective teaching time.

- 5.7 Standards of work and the achievement of qualifications by prisoners were good. Prisoners in GCSE English were confident, independent readers, and worked well in groups. Those on guitar courses were developing good skills, which they applied effectively to song-writing and recording. There were many examples of men engaging in creative writing and performing arts activities, achieving prestigious awards. Essential skill learners were well motivated, and demonstrated good debating skills, taking turns effectively, listening and presenting solid arguments, and moving the debate forward.
- 5.8 We observed some good teaching. Individual sessions were well planned, and allowed for differentiation within groups. Tutors provided good one-to-one support, and there was also evidence of good peer support. Most men were highly motivated, and engaged well in the various learning activities. Individual learning plans for essential skills were used well, and were integrated with resettlement plans. Prisoners were given an initial literacy and numeracy screening, an assessment of their preferred learning styles, and a full diagnostic test in these areas if appropriate. Good initial targets were set, which reflected individual needs. Regular progress reviews accurately reflected achievements. Recordkeeping was comprehensive and detailed. However, learning plans in other areas were not individualised or routinely completed.
- 5.9 While the management of the educational provision was satisfactory and generally met the needs of those able to access it, quality assurance arrangements were inadequate. There were few opportunities to share good practice, and the roles and responsibilities of staff coordinating learning activities were unclear. Self-assessment processes were in the early stages of development, and not yet fully understood or implemented. The education manager had introduced a lesson-observation programme, but it was too early to determine its impact.
- 5.10 The library service was managed by the prison, and provided adequate access for most prisoners. The book and tape club (BAT) initiative had been very successful in supporting learners with poor literacy skills. Prisoners were encouraged to read aloud and tape children's story books, which were then loaned to their children during children's visits. The story tapes were listened to, and a message was taped by the child and returned to the prisoner. This reinforced the prisoners' parenting role, and helped to develop their reading skills. A small stock of books was available in a range of European languages and Chinese, appropriately reflecting the prison population at Maghaberry. Good links had been forged with external cultural groups and foreign embassies, to provide appropriate newspapers and magazines. A stock of talking books was steadily growing, and was very popular with prisoners with low literacy levels – although there was insufficient age-appropriate reading material for adult prisoners with literacy difficulties.
- 5.11 Weekday access to library services was provided for most prisoners. Two experienced prison officers and a volunteer ran the prison library service. The library was open from Monday to Friday every morning and afternoon, and on Wednesday evenings. A stock of 250 books, comprising both fiction and non-fiction, was supplied to both separated units. Prisoners on these units had access to the library once a fortnight, on a Tuesday morning, when a supply of approximately 50 books was routinely replenished. Waiting times for new or requested books were long for all prisoners. Some teaching staff provided their own supply of books to support learning. Good supervised Internet access was provided for Open University and ECDL prisoners. Access was provided in the library, and through portable computers, for prisoners on the separated units. Additional Internet access was provided in the education department.

There was no weekend access to the library, and evening access only on one evening per week.

## Recommendations

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- 5.12 A wider range of education courses should be offered to meet the needs of more prisoners.
- 5.13 More opportunities, particularly essential skills classes, should be provided for remand prisoners.
- 5.14 Prisoner movements should be better managed to improve attendance and punctuality at education classes.
- 5.15 Library opening hours should be increased to offer more sessions in the evenings and at weekends.
- 5.16 More materials for those with learning difficulties should be stocked in the library. (See also main recommendation HP46)

## Work

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### Expected outcomes:

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

- 5.17 Employment opportunities were limited, and many prisoners had no purposeful activity. There were 80 full-time vocational training places, and most offered recognised qualifications. Attendance and punctuality were not well managed. Most jobs were domestic. The construction workshops offered a good range of vocationally related qualifications, but overall provision was insufficient, and there was no work for those in the separated units or the vulnerable prisoner unit, or for those on remand. A small number of prisoners were able to take part in a working out scheme.
- 5.18 Although there was some good quality employment in the prison, there was not enough meaningful work. Many prisoners had no access to these opportunities and about half the population was not allocated to any activity. Opportunities for those on remand and for those in the separated units were particularly poor. There was no work for separated prisoners. Most of the jobs were domestic, as orderlies and wing cleaners. There were 99 full-time vocational-related training places in a range of areas, including PE and catering. Construction training was well developed, and developed good skills with excellent standards of work. Courses included carpentry and joinery, bricklaying, and painting and decorating. Prisoners undertaking an NVQ in catering also acquired good skills, but their progress was hampered by inadequate staff levels in the main kitchen and the poor kitchen facilities. NVQs and skills tests were offered in the gardens, but progress was limited by staff shortages and sickness.
- 5.19 There was some good work going on to develop educational support for essential skills, with small group and one-to-one support given by education staff in the work areas. Staff worked well in ensuring that assignments were vocationally relevant. Despite the enthusiasm and

dedication of training staff, as with education, poor management of prisoner movement meant that many prisoners arrived late at work and training places and left early, or did not attend at all.

- 5.20 Courses in manual handling, health and safety and food hygiene were routinely provided. Access to workshops was good for those with mobility difficulties. While qualifications were offered to those in the sewing and knitting workshops, the training did not reflect real work opportunities and the work was unlikely to continue in the prison.
- 5.21 A small number of prisoners were able to progress to a working out programme at the Crumlin Road site. Those who were deemed suitable through the risk assessment process were able to work on refurbishment projects and in the community on a day-release basis. This included working for charitable organisations, and provided real opportunities to develop employment-related skills and also enabled prisoners to develop their interpersonal skills.

## Recommendations

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- 5.22 Measures should be taken to increase general work opportunities, allowing prisoners to acquire relevant employment skills.
- 5.23 Remand and separated prisoners should have the opportunity to work.
- 5.24 Prisoners should arrive at their workplaces as scheduled.

## Physical education and health promotion

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### Expected outcomes:

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

- 5.25 PE was well delivered, with a good range of resources and equipment, including cardiovascular equipment on residential units. The number of accredited PE courses was limited. Outdoor facilities were good for most prisoners and satisfactory for separated ones. There were good links with the healthcare department for those requiring remedial PE. Access to PE was generally satisfactory for most prisoners, but it was unsatisfactory that remand prisoners on the committal wing did not have access to recreational PE.
- 5.26 The provision of PE was good, and the department was well staffed, with two senior officers and 10 physical education instructors. Access was good for those who chose to use the gym facilities – around 50% of all prisoners. There was increased access for those on enhanced status, from three to five sessions each week. Those on the basic regime received one session a week. However, prisoners on the committal wing received no recreational PE. There were evening sessions and weekend opportunities for sentenced prisoners only. Leadership and management were effective, and accredited courses were provided including NVOs and British Weight Lifters Association (BWLA). The PE department also provided manual handling programmes, which were accredited internally. However, the range of courses was limited. The PE staff were highly motivated and dedicated, and the external quality audits recorded good standards of teaching and learning, and the achievement of targets.

- 5.27 Induction into PE was good. Resources were very good, with an excellent indoor sports hall and well equipped gym facilities. There was also cardiovascular equipment on most residential units, to which prisoners had good access. These were used regularly by prisoners and staff. Four staff were qualified in sports therapy, and rooms to support remedial work were very good. Links with healthcare were satisfactory, with a protocol in place for dealing with those prisoners requiring remedial PE. However, if prisoners were identified with remedial needs not known to healthcare, then the process relied on prisoners self-referring to the doctor.
- 5.28 The shower facilities were adequate in all areas, but some areas in the main sports section were difficult to supervise. Prisoners were provided with PE kit when they entered the prison, and clean towels were provided for each gym session. Access to showers was good, and PE staff provided shower gel and soap.
- 5.29 Gym courses and activities were advertised on the wings, and there was an effective complaints and comment procedure, with post boxes in the main gym area. There were a few learners on NVQ programmes.

## Recommendations

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- 5.30 Prisoners on the committal wing should have regular access to the gym and other PE facilities.
- 5.31 A wider range of accredited courses should be offered.

## Faith and religious activity

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### Expected outcomes:

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

5.32 In our survey significantly more than the benchmark believed that their religious beliefs were respected, and were able to speak to a religious leader in private. Fewer said they had the opportunity to see a chaplain or priest within a day of their arrival. The majority of prisoners were able to access group worship, but segregated prisoners, vulnerable prisoners, and those on Martin House could not, and their needs were not always catered for. The chaplaincy team provided a much needed service in relation to escorting prisoners on compassionate temporary release, but was not fully integrated into other important aspects of prisoner care, such as anti-bullying, suicide and self-harm prevention, and resettlement.

- 5.33 The chaplaincy team operated a rota system to interview all new committals as soon as possible. However, in our survey only 26% of prisoners said that they had access to the chaplain or priest within the first 24 hours of their arriving at the prison, which was significantly lower than the benchmark of 46%.
- 5.34 The chaplaincy team included ministers representing the five main denominations in the prison – Church of Ireland, Roman Catholic, Presbyterian, Free Presbyterian, and Methodist. The only full-time minister was the Roman Catholic priest – all others were part-time. The services of an imam had been secured to conduct prayers when there had been Muslims in the prison. There was no multi-faith room.

- 5.35 During the committal interview, prisoners were asked if they wished to see a chaplain of their faith if they registered as being of a faith other than the five main denominations, and this was arranged as a chaplaincy visit if required. Prisoners were able to receive visits from their own minister or priest through ecclesiastical visits.
- 5.36 Three separate Sunday services were held in the prison chapel for Roman Catholics, Free Presbyterians, and a combined service for all other Protestants. Sunday services for the separated prisoners in Bush House and Roe House were held in their respective recreation rooms. There was sufficient capacity to cater for the number of prisoners who wished to, and were permitted to, attend the chapel services.
- 5.37 Some prisoners did not have access to services in the chapel – including low-risk life-sentenced prisoners residing in Martin House, prisoners located in the healthcare centre, vulnerable prisoners located on Lagan House, and segregated prisoners located in the special supervision unit (SSU). A Roman Catholic service was held on Saturday evenings in the healthcare centre’s dining room for residents there, and vulnerable prisoners from Lagan House were also permitted to attend. There was no service for Protestant prisoners located in the vulnerable prisoners unit. Prisoners in the SSU were not permitted to attend. We were told that prisoners who could not attend the chapel or the service in the healthcare centre were catered for individually, but we found that this was not always the case. In particular, the chaplains reported difficulty in accessing prisoners in the SSU.
- 5.38 Prisoners made written requests to see their minister in private. Ministers carried out most of their pastoral work on the residential houses, and very little use was made of the chapel and adjacent rooms, which were more appropriate for pastoral work. We were told that it was difficult to get officers to escort individual prisoners to the chapel for this purpose.
- 5.39 There was no prison visitor scheme, but members of the Catholic charity, the St. Vincent De Paul Society, came into the prison once a week and befriended a number of prisoners. An Alpha course ran each Friday night.
- 5.40 A significant part of the chaplaincy workload involved chaplains accompanying prisoners on compassionate temporary release visits. By doing so chaplains filled a considerable gap, because officers generally did not feel safe enough to undertake these duties in the community. Much of this work was conducted outside the chaplains’ contracted hours.
- 5.41 Chaplains were not routinely invited to take part in management meetings relating to important aspects of prisoner care, such as suicide and self-harm prevention, anti-bullying, and resettlement. Nor were they routinely invited to attend individual case management reviews, such as PAR 1 reviews or sentence planning boards.
- 5.42 In our survey, 58% of the general population said they thought that their religious beliefs were respected, and 67% said that they were able to speak to a religious leader of their faith in private if they wanted – significantly higher than the respective benchmarks of 53% and 60%. However, in Roe House only 23% of prisoners said they thought that their religious beliefs were respected.

## Recommendations

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- 5.43 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.

- 5.44 A multi-faith room should be provided.
- 5.45 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.
- 5.46 Prisoners in Martin House should be able to attend relevant services.
- 5.47 Chaplains should not be denied access to segregated prisoners in the SSU, unless there is a serious temporary security emergency.
- 5.48 Prisoners should be escorted to the chapel for pastoral visits when requested by the chaplains.
- 5.49 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.

## Time out of cell

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### Expected outcomes:

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

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5.50 Time out of cell was relatively low, and this was made worse by considerable regime slippage at the start and end of activity sessions. Association and exercise in the fresh air took place every day. Many prisoners were not allocated work or education, and the regime was particularly impoverished for them; they could spend up to 22 hours in their cells each day. We counted 250 prisoners locked in their cells one morning and only just over 100 engaged in activities off the wing.

5.51 Time out of cell was poor when judged in terms of average provision across the prison. This was principally because there were not enough work, education and activity places. The core day was extremely short, at around only two hours in the morning and 1.5 hours in the afternoon. The fact that there was also a lot of regime slippage, with late unlocks and early lockups happening routinely, made the situation worse. We saw activities regularly starting up to half an hour late, and then finishing early. Although the prison did not record or calculate the average time out of cell per prisoner, we estimated it to be no more than an average of six to seven hours per day at best.

5.52 This average, although itself low, masked wide variations. For prisoners not assigned to an activity place, the regime was particularly impoverished, with unemployed prisoners spending up to 22 hours locked in their cells each day. Life-sentenced prisoners and those on remand were particularly poorly served.

5.53 We conducted a count on one day during the inspection at around 10.30am, and found relatively few prisoners purposefully occupied. Approximately 250 prisoners were locked in their cells. A similar number were engaged in association or exercise, while around 100 were

engaged in 'on-wing' activities, the majority of which were low grade domestic cleaning or orderly jobs. Only 103 prisoners were engaged in off-wing activities at this time.

- 5.54 Exercise in the fresh air and association were provided daily, either in the morning or afternoon, and evening association was provided on two alternate evenings between Monday and Thursday. Evening association, however, was cut short of the allocated times. On one evening we found that prisoners were locked up by 20.10pm, although the published core day stated that evening lockup was not until 20.30pm. There was also some loss of evening association due to apparent staff shortages. This was managed on a rota basis. Exercise yards were quite bare, with no seating provided, and association rooms were also poorly equipped and supervised.

## Recommendations

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- 5.55 More time out of cell should be provided for all prisoners.
- 5.56 Regime activities should start and finish at the published times.
- 5.57 Better equipment should be provided in association rooms.

# Section 6: Good order

## Security and rules

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### Expected outcomes:

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

- 6.1 Physical security dominated at Maghaberry, with little encouragement of dynamic security. Maghaberry was required to hold prisoners of all security categories. Most prisoners' security classification was medium risk, although the presence of high-security prisoners and the separated paramilitary prisoners on Bush and Roe Houses meant there were high security levels for the entire prison. In practice, prisoners' individual security classification made little difference to how they were treated. The search and standby team (SST) had a strong influence on the establishment, which was not wholly positive.
- 6.2 Physical security was an overwhelming priority in Maghaberry, with little or no evidence of the positive elements of dynamic security that we would expect. Dynamic security was discouraged as a matter of policy on the separated units, and discouraged by custom and practice elsewhere – for example, by locking prisoners in association with no staff presence or interaction, and by the fact that there was no personal officer scheme in operation.
- 6.3 The high levels of physical security had a negative effect on regime delivery (see section on activities), due largely to the fact that there was severely restricted prisoner movement around most parts of the prison, with (other than at free-flow times) only very small numbers of prisoners moving around at any time with staff escorts. Consequently, movement around the site was very slow. This was particularly noticeable on the separated units where, even within the unit itself, the system of controlled movement meant that only three prisoners were allowed out at any one time, with no less than five staff present. Prisoners could be 'rubdown' searched up to three times when covering a very short distance, still in full view of staff at all times. This procedure was excessively restrictive, and could be relaxed without any negative impact on security. We were told that these procedures were currently under review.
- 6.4 Searching was primarily carried out by a dedicated team, known as the search and standby team (SST), which was part of the security department. This team was extremely large, consisting of 48 officers, plus senior and principal officers. In addition to searching, staff from the SST also staffed the SSU (see section on segregation) and acted as the establishment's response team to general alarms (see section on use of force). Residential staff also carried out routine searches of prisoners' accommodation. Every prisoner's cell was searched once each fortnight by residential staff, which was very frequent. Search targets were predominantly for mobile phones and drugs. There were regular finds of both but, given the size of the prison, not excessive. There had been an average of nine individual finds per month in the three months before the inspection. Over 40% of these finds were of cannabis, while five mobile phones had been found (around 20% of total finds).
- 6.5 The SST presence was in evidence everywhere at Maghaberry, and clearly had its own culture. We understood the need for a dedicated team of search specialists in an

establishment like Maghaberry, but on occasions the manner in which they operated could be disrespectful and construed as intimidating. For example, when target searching residential areas, the practice was that the SST staff 'commandeered' the landing from residential staff in order to carry out cell searches. This included taking the keys away from the residential staff, purportedly to facilitate access to the cells. The whole approach was unnecessarily heavy-handed, and removing keys from residential staff effectively disempowered the staff in the full sight of prisoners, rendering them inoperative and confining them to the wing office. Prisoners often told us that it was clear that the SST ran the prison. We looked at some of the cells on different occasions after they had been searched by the SST, and found that they were left in an unacceptable condition. Regular landing staff were then left with the task of calming down angry prisoners, as the SST left the area as soon as they had finished the search.

- 6.6 We fully recognised that there was a genuine security threat. Explosives and guns had been smuggled into the jail before, so there was a need for a strong emphasis on security. The security department also dealt, in conjunction with the police, with high numbers of coded threats against staff. However, security and control in the prison were very inflexible, and took little account of the fact that most prisoners (around two-thirds) were categorised as medium risk. This was one of the problems of running an establishment such as Maghaberry, which is required to hold all categories and types of prisoner together. There were also some inconsistencies in practice suggesting that some staff had only limited understanding of the key principles of security. Some of the security rules seemed over-stringent, such as not allowing food temperature probes on wings. Yet one member of the Inspectorate, requiring to talk to two prisoners in private, was locked into the cell with them by staff – a most fundamental breach of personal security.
- 6.7 Some of the rules did not appear to support security. For example, the only way a prisoner could be placed on closed visits, other than when a visitor had a drug dog indication, was if he was found guilty on adjudication of attempting to receive unauthorised items. There was no provision for placing a prisoner on closed visits based on intelligence, no matter how firm, that he was planning to smuggle drugs or other contraband in through visits.
- 6.8 In terms of general intelligence, the number of security information reports (SIRs) was relatively low for an establishment of the size and complexity of Maghaberry, averaging around 74 per month over the previous six months, and under 60 per month in the previous three months. Intelligence was generally acted on, but we noted that security information reports were not acknowledged by the security department, and no routine monthly briefing on general intelligence and security matters was published for staff. Security committee meetings took place monthly, but attendance was relatively poor, and often did not extend much beyond staff from the security department itself. There was considerable scope for the security department to become better integrated with the rest of the prison, and the residential department in particular.

### **Categorisation**

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- 6.9 Prisoners were all placed into one of four security classifications – low, medium, high, or top risk – based on both internal and external factors. This applied to all prisoners, both remand and sentenced.
- 6.10 Initial security classification assessments were made by an officer based in the security department. There was no information in the assessment paperwork that showed how the decision had been reached, with no algorithms followed and nothing written down. No ratification of the decision took place if the outcome was low or medium risk. There were no safeguards to prevent the risk of officers having pressure placed on them to give a prisoner a

lower security classification than was appropriate, but if the outcome was high or top risk, the decision was then ratified by a senior manager. There was no prisoner involvement in the process, and no right of appeal against decisions, although the reality for most prisoners in Maghaberry was that their security classification made no difference to their day-to-day lives. Low-risk prisoners lived side by side with – and faced almost identical restrictions to – high-risk prisoners, because the whole regime focused on provision for maximum security prisoners.

- 6.11 The initial categorisation decision was supposed to be reviewed and validated after 60 days, but prisoners' core files did not provide any evidence that this routinely happened. There was also no system in place for subsequent reviews to occur, but a transfer board met weekly to consider any prisoners suitable for onward transfer to Magilligan prison (see section on offending behaviour programmes).
- 6.12 The whole security classification system was under review at the time of the inspection. The principal difficulty was the inherent problem in Northern Ireland of having insufficient different types of prison to provide suitable regimes for the diverse prisoner population. The existing arrangement, with only two prisons for adult men, meant that inevitably most were subject to higher security conditions than necessary, and our expectation that prisoners should be held in the lowest security conditions appropriate to their category was unable to be met.

## Recommendations

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- 6.13 Security systems should be flexible enough to recognise and adapt to the fact that most prisoners at Maghaberry present only a medium risk.
- 6.14 The prison should introduce less restrictive procedures for moving prisoners around internally, particularly on the separated units, where arrangements were unnecessarily restrictive.
- 6.15 Prisoners' cells should be searched respectfully and left in a decent condition afterwards.
- 6.16 The security department should acknowledge all security reports submitted by staff.
- 6.17 Attendance at the security committee should be increased, with greater representation from non-security staff.
- 6.18 Decisions on a prisoner's security classification should not be taken by a single officer.
- 6.19 All prisoners should have their security classification reviewed at least annually.
- 6.20 The role, selection, training and oversight of the SST should be re-examined to ensure that the team operates effectively and respectfully throughout the prison.
- 6.21 The practice of the SST removing staffs' keys from them during targeted searching is unnecessary, and should cease.

# Discipline

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## Expected outcomes:

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

6.22 Adjudication procedures were thorough and frequently tested through judicial review. Use of force was mainly carried out by the search and standby team. The number of occasions on which force was used was not high, although, residential staff did not always complete use of force paperwork. The segregation unit was still known locally as the punishment unit, and practices there were outdated, and had not moved on from the time of the last inspection. The special cells were being used for a variety of inappropriate uses, and their use was not being recorded.

## Adjudications

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- 6.23 Adjudications were carried out from a room in the special supervision unit (SSU). The room was formal, although suitable for the purpose. The chair used by prisoners was fixed to the floor. The average number of adjudications was around 65 per month. Adjudications were carried out by the more senior governors at the establishment. More serious charges could be referred to the independent commissioner, although this had not yet taken place.
- 6.24 The adjudication process itself was very formal, and hearings were tape-recorded. The local policy stated that a written record of the main points of a hearing should also be kept, although in practice this did not happen. The procedures that we observed were efficiently and thoroughly carried out. Prisoners received a pencil and paper, a copy of the charge sheet, and an explanation of procedures. The charges were fully investigated. We looked back at a number of the charges from completed documentation; some appeared relatively petty, and the incidents could have been managed other than by resorting to placing a prisoner on report.
- 6.25 Prisoners were not routinely provided with written confirmation of the decision, or information about their right of appeal. We were told that this would be provided on request.
- 6.26 The formal appeal route for prisoners following a guilty decision was by petition to the Secretary of State. However, in practice, most prisoners used their solicitors to appeal. It was not uncommon for solicitors immediately to seek a judicial review of governors' decisions, and interim relief from punishments was often granted if the punishment was still current (for example, cellular confinement). However, prisoners receiving a punishment of cellular confinement did not have the opportunity to contact their solicitor immediately following a hearing, since the use of telephones was prohibited under cellular confinement restrictions. The local compact stated that staff from the SSU would either contact a prisoner's solicitor in order to arrange a legal visit, or provide stationery if the prisoner wished to write to his solicitor.
- 6.27 There was no method in place to ensure consistency of punishments at adjudications. We also noted that cellular confinement was still being applied with automatic loss of all privileges, despite a recently published governor's order stating that this should be specified individually by the adjudicating governor.

## **Use of force**

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- 6.28 The search and standby team (SST) carried out all planned use of force, and acted as the establishment's response team to any general alarms. If a spontaneous incident occurred, residential staff would contain it and then hand over any restrained prisoners to the SST staff when they arrived.
- 6.29 Use of force was not especially high. Force had been used 107 times in the 6 months before the inspection, although only 64 of these incidents involved actual use of control and restraint (C&R). The other 43 occasions had resulted in a prisoner being 'close-escorted' to the SSU. This usually involved the prisoner being handcuffed and walked to the SSU with staff supporting either arm, without actual use of C&R locks. The use of handcuffs as a means of de-escalation had been developed following concerns over the number of close-escorts that had previously escalated into C&R incidents. The current close-escort method worked well. Inspectors observed one C&R incident during the inspection, where a prisoner was restrained to prevent further injury to himself, and was subsequently close-escorted, without handcuffs, to the healthcare centre. This incident was very well handled by staff, who dealt sympathetically with the prisoner.
- 6.30 After an incident when force was used, the staff involved completed relevant paperwork. There were different forms for spontaneous incidents and for planned incidents, and a separate form for the supervisor to complete. The forms completed by SST staff were completed to a high standard, but the forms for spontaneous use completed by residential wing staff were not generally completed to the same standard.
- 6.31 We were concerned to find several incident reports where wing staff who had initiated the use of force had not completed any of the associated documentation. Without this paperwork, there was no assurance that the force had been used legitimately, or as a last resort. All such incident reports were supposed to be signed off by a governor. However, there were examples of filed paperwork without any governor's signature, and other examples of reports that had been signed off by governors without all the documentation being present. 'Injury to inmate' forms were completed after all use of force incidents, but were not filed with the rest of the documentation. We noted from a brief analysis of all recent forms that 10% of recent injuries to inmates occurred following a use of force incident.
- 6.32 Planned interventions were not video-recorded in any way, and such incidents were supervised by the senior officer on duty from the SST. Duty governors did not attend all planned cell removals.
- 6.33 Use of force was logged by location, but we could not find any evidence that this information was subsequently analysed for trends, or that any action was taken based on the findings.

## **Special accommodation**

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- 6.34 There was much local confusion surrounding the definitions and uses of the prison's special accommodation. There were two types of special or protected cells, but neither was recognised by the prison as special accommodation.
- 6.35 There were three cells in the special supervision unit (SSU), which were bare and unfurnished. These were known locally simply as the 'dry cells', and were used for a variety of purposes:

- as a reception facility for full body searching new arrivals to the SSU;
  - as a holding room for prisoners awaiting adjudications;
  - occasionally, for prisoners at risk of self-harm;
  - for de-escalation purposes with violent prisoners.
- 6.36 There was another bare, unfurnished cell in healthcare, which was used for prisoners deemed to be at risk of self-harm. (See sections on healthcare, and suicide and self-harm). The prison did not record the use of this accommodation for any purpose, either in the SSU or in healthcare, and no separate authorisation was given for its use. Similarly, there was no record made of when prisoners had been placed in anti-suicide clothing in these cells.
- 6.37 However, both of these types of cell clearly met the definitions of special accommodation contained in the local security manual, which states: 'special cells are bare unfurnished cells which do not contain normal furniture, fittings, bedding or clothing.' We considered that, for the safety of prisoners and the protection of staff, their use should therefore have been specifically authorised.
- 6.38 The dry cells in the SSU were also used routinely to hold prisoners returning to the prison from home leave or other external activity for a period of 48 hours following a positive indication from the passive drug dog. We did not consider this was appropriate. Two days spent in special accommodation was an entirely disproportionate response, particularly when there was frequently no accompanying evidence or intelligence to support suspicions. Some prisoners returning from the Crumlin Road working out scheme spent the entire weekend there and then returned to Crumlin Road on the Monday. We noted that there did not appear to have been any recoveries of contraband from prisoners while they had been located in the SSU dry cells, which cast serious doubt on the efficacy of the practice and its purpose.
- 6.39 We questioned the legitimacy of the practice, which appeared to be outside the terms of the Prison Rules. The authorisation for temporary confinement in a special cell is contained in Prison Rule 47, which states that: 'for the purpose of preventing disturbance, damage or injury, a refractory or violent prisoner may be temporarily confined in a special cell or protected room ... but shall not be confined in such a cell as a punishment or after he has ceased to be refractory or violent'.
- 6.40 On this basis, we could not see how automatic confinement for 48 hours in dry cells could be legitimate solely on the basis of an indication from a passive drug dog. When we raised this with the prison, we were referred to the outcome of a previous judicial review. However, this ruling related to removal from association, not to the use of special accommodation.

## **Segregation**

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- 6.41 We recommended at our previous inspection that the punishment unit be renamed. Shortly before this inspection, the unit changed its name to 'special supervision unit' (SSU). However, we noted that many staff at Maghaberry – including those who worked in the SSU – still referred to it as the punishment unit, and this usage was also reflected in some of the unit's documentation. There was still an overemphasis on punitive measures, with very little actual supervision taking place, and little had changed since the last inspection.
- 6.42 The SSU was basically clean, but was dingy and drab. It consisted of 23 ordinary cells and three special cells, known locally as 'dry cells'. There was also one 'high control cell', which

had been purposely designed to deal with the threat to staff from a particularly violent prisoner by means of minimal contact between the two parties. We were told that it had not been used in several years.

- 6.43 There were no special selection arrangements for recruiting staff to work in this difficult and sensitive unit. The SSU was staffed from the search and standby team (SST – see security section). The SST was widely disliked and distrusted by prisoners at Maghaberry. We thought that the potential for conflict was high, and considered it inappropriate that the special supervision unit be staffed by the SST, and that it should be brought under residential management, staffed by officers used to managing prisoners on a daily basis.
- 6.44 On first arrival at the SSU, all prisoners were strip-searched in one of the 'dry cells' (see use of force section). No individual risk assessments were carried out to determine whether or not this level of search was necessary. Once prisoners were given a furnished cell, they had to keep many of their possessions outside in plastic crates. There were also chains on all doors, preventing them from opening fully. Staff therefore spoke to prisoners through a narrow gap, even when the door was open. No prisoners were unlocked with less than four staff present. This was excessive – particularly for those on Rule 32 seeking protection.
- 6.45 There was a roll of ten prisoners in the SSU at the time of the inspection (two on cellular confinement, one on anti-bullying measures, four for their own protection, and one 'dry cell' occupant who had been indicated by the passive drug dog and two orderlies). Prisoners had a very basic regime in the SSU. On application, they could get a shower, a phone-call and exercise in the fresh air, but little else. None of the prisoners we spoke to was involved in any form of education, and although they could, in theory, apply to use the gym once a week, this was not advertised anywhere, and none of the prisoners we spoke to were using the gym. There was a requirement to be up and dressed before the staff took applications at 8.30am; otherwise applications were forfeited, which was unnecessarily regimented. The wing diaries showed that not all prisoners received the basic regime requirements, despite having asked for them. It was not possible to establish whether this was a result of poor recordkeeping.
- 6.46 We interviewed all but one of the prisoners located in the SSU. Those prisoners held there for their own protection reported that they felt safe and had no complaints about their treatment. One prisoner with special needs had progressed from the basic to the enhanced regime while there, and was clearly being looked after well by the staff. However, those prisoners held in the SSU for cellular confinement or good order and discipline, and some other prisoners that we spoke to around the prison, said they had not been treated well by SSU staff. While we saw no evidence of this, there was no positive interaction taking place between staff and these prisoners, nor any signs of an effort or desire to engage meaningfully with them. In the six months before the inspection, between a quarter and a third of all C&R incidents at Maghaberry took place in the SSU.
- 6.47 Authorisation forms were all filled in correctly, but prisoners' history sheets reflected only minimal contact from staff, and provided little meaningful information about prisoners. Reviews of prisoners on Rule 32 took place within the required time limits, although some had remained in the SSU for long periods of time.
- 6.48 The SSU employed two prisoners as orderlies. Between them, they had worked in the SSU for a combined total of over six years, and both had more than two years to serve. Due to the negative perceptions among prisoners of the role of the segregation unit orderly, it was unlikely that these two prisoners would be able to live or work anywhere else in the prison. Although neither made any complaint to us, we felt that this was an inappropriate environment for prisoners to work in for such long periods of time.

## Recommendations

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- 6.49 Punishment ranges for various types of offence should be agreed and published to staff and prisoners, to ensure consistency among adjudicating governors.
- 6.50 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.
- 6.51 When a punishment of cellular confinement is given, a prisoner should be allowed to contact his solicitor by telephone immediately after the adjudication.
- 6.52 Staff should complete use of force documentation immediately after every occasion when force is used against prisoners, before they go off duty.
- 6.53 Governors who sign off use of force paperwork should, before countersigning it, satisfy themselves that all the documentation is present.
- 6.54 All planned use of force interventions should be video-recorded.
- 6.55 Duty governors should attend all planned cell removals.
- 6.56 Special accommodation should only be used for the purposes defined in the Prison Rules, and not following an indication from the passive drug dog.
- 6.57 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.
- 6.58 All use of special accommodation should be separately logged.
- 6.59 The high-security cell should be decommissioned and sealed off.
- 6.60 There should be greater staff interaction with prisoners held in the SSU. This interaction should be recorded.
- 6.61 Prisoners entering the SSU should not be strip-searched without an individual risk assessment.
- 6.62 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.
- 6.63 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.
- 6.64 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.

## Housekeeping points

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- 6.65 Copies of injury to inmate forms should be filed for safekeeping with use of force paperwork.
- 6.66 Prisoners should be routinely provided with written confirmation of any punishments, and with information about their right of appeal.
- 6.67 The salient points of an adjudication hearing should be recorded on the written transcript.

## Progressive regimes and earned privileges scheme

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### 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.

6.68 A high proportion of prisoners were on the enhanced level of privileges. Entries were made regularly on history files, but more needed to be done to encourage and support prisoners in positive behaviour, rather than using the scheme as an opportunity to punish negative behaviour. There were clear discrepancies between sentenced and remand prisoners. Some prisoners remained on the basic regime for too long. A thorough review had been completed of the scheme but had yet to be implemented. Improved monitoring of the operation of the scheme was required.

- 6.69 Progressive regimes and earned privileges scheme (PREPS) had been introduced for sentenced prisoners in November 2000, and for untried prisoners in March 2002. The scheme was not being applied to separated prisoners, whose regime was equated to that of a prisoner on the standard level. Across all the integrated houses at the time of the inspection, 271 (42%) prisoners were on the enhanced level, against a benchmark of 25%, while 337 (52%) were on standard and 37 (5.7%) were on the basic level. The PREPS was not location-based – prisoners on any of the levels could be located on any house.
- 6.70 PREPS was operated to some extent in the special supervision unit (SSU), but within certain constraints, since no association was offered to prisoners in the unit. One prisoner in the unit had recently moved from the basic to the enhanced regime, and had been provided with a television, but he was clearly not receiving all the benefits he would have expected had he been located elsewhere. This seemed reasonable in the circumstances. Prisoners did not automatically go onto the basic regime on reception in the SSU.
- 6.71 The scheme was described on some landing notice-boards, and a leaflet explaining the scheme had been produced, although not all new receptions had received it. Prisoners were allowed to see all reports written for the PREPS, and could make comments on them, although few had done so.
- 6.72 For prisoners on the basic and standard regimes, officers made a weekly entry in the residential file. Those on the enhanced regime required only a monthly entry. In our sample of residential files, entries were made frequently. Officers would include a numerical recommendation from 1 – ‘The prisoner continues with exceptional behaviour’ to 5 – ‘Poor

reports continue and recommendation is made for a reduction in privileges'. Through this process, prisoners could be recommended for promotion after four consecutive weeks of good reports, which was then endorsed by the house senior officer. It took four weeks to move from the standard to enhanced regimes for sentenced prisoners, but eight for unsentenced prisoners. Other departments or officers could complete a 'Staff Contribution/Input Form' to comment on prisoners' behaviour and staff from workshops and education were required to complete these on a monthly basis.

- 6.73 Compliance drug testing was an integral part of PREPS. Many prisoners lost their status as a consequence of a positive drugs test, or for refusing to participate in a test. Prisoners had to provide a negative test for drugs before they could be considered for promotion. Remand prisoners could achieve the enhanced level without a progression test but were then tested on a random basis. A recent review recommended that they too took a progression test.
- 6.74 In theory, a prisoner could be promoted from the basic regime following four consecutive good reports along with a negative drugs tests. We found, however, that too many prisoners remained on the basic regime for too long. One, described as a 'model prisoner' in his residential file, had been on this level for 14 months. From the sample of files we read, there was no target-setting or support for those on the basic regime. For example, we saw no evidence that officers discussed positive drug tests with prisoners with a view to offering help. The records of one prisoner who had been on the basic regime for over five months read, 'from daily reports this prisoner shall probably remain on basic for a long time to come'. There was no evidence of engagement with the prisoner to address his apparent poor behaviour.
- 6.75 Two adverse reports or adjudications for minor offences within a three-month period, or one adjudication for a single serious offence, could lead to a downgrading of regime. The adjudicating governor would use discretion in deciding whether the adjudication should impact on the regime level. There was confusion among some staff about whether adjudications were also to be counted as adverse reports within PREPS. The review had sought to clarify this.
- 6.76 Prisoners were asked to sign adverse reports to acknowledge that they had been given to them. Prisoners could appeal against a downgrading of regime, and we saw some evidence that this was done.
- 6.77 The basic regime involved too much time locked in cell. There was no regime pay for prisoners on the basic regime, nor in-cell TV, weekday association, or access to hot water in the evenings. This meant that they had no access to telephones in the evenings to contact their families unless they could convince officers that a call was urgent. They were entitled to one gym session.
- 6.78 Staff we spoke to supported the scheme, as they thought that the threat of a move to basic was a useful tool. Some aspects of the scheme had the character of a secondary punishment system, rather than a scheme to encourage and reward good behaviour positively, which was its initial purpose.
- 6.79 Different financial incentives were paid to sentenced and untried prisoners. Significantly fewer untried prisoners had achieved enhanced status. Doing so was more difficult for this group, as they had to sustain good behaviour for eight weeks, as opposed to the four weeks for sentenced prisoners. Sentenced prisoners also received higher rates of regime payment compared to untried prisoners.

- 6.80 It was argued that more demands were made on sentenced prisoners, as they were required to participate actively in sentence planning, but we could see no strong reason why untried prisoners should be disadvantaged in this way.
- 6.81 A review of PREPS had been completed in April 2005. Its findings had not yet been implemented, and it was waiting to be ratified by senior management. The review had included the views of staff and prisoners – 32.6% (158) of prisoners on the integrated houses responded to a survey. Their main concern was the insufficient range of privileges available. However, sentenced prisoners on the enhanced regime received a £14 regime allowance, had opportunities for more visits and association, and could have more phone cards and tobacco. We thought these were reasonable incentives. In our survey, 44% of prisoners said that they had been treated fairly in their experience of the scheme, which was close to the benchmark.
- 6.82 Staff had raised issues relating to the need for training in PREPS, insufficient monitoring of the system, and the lack of incentives for untried prisoners. A corporate review of PREPS was due in November 2005
- 6.83 There were insufficient management checks of the operation of the scheme. Some recent monitoring of the numbers promoted and demoted on the scheme had been introduced. Between April and August 2005, 92 prisoners had been promoted and 33 demoted, although the monitoring had not distinguished between the various levels on which prisoners had started. There was no routine monitoring, for example, by location or religion, although this was provided when we asked for it. We saw some evidence that appeals were made against decisions, but it was not clear how frequently these were submitted, as they were not recorded.

## Recommendations

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- 6.84 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.
- 6.85 Prisoners on the basic regime should be given an opportunity to use the phone during the evening.
- 6.86 There should be an equitable application of the scheme for sentenced and remand prisoners.
- 6.87 There should be improved monitoring of PREPS.

## Housekeeping point

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- 6.88 The leaflet explaining PREPS should be given to all newly received inmates.



# Section 7: Services

## Catering

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### Expected outcomes:

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

- 7.1 Catering standards were poor. There were insufficient catering staff, and the kitchen facilities were not well organised, and some areas were in a poor state of repair. Unit serveries were generally clean and tidy, but serving arrangements were inadequate. Prisoners working on serveries were not properly trained in basic food hygiene, and there were insufficient checks on food temperature at the point of service. Many prisoners complained about the quality of the food. Meals were served at inappropriate times.
- 7.2 Meals were often uninspired and served at inappropriate times. The 'evening' meal began at approximately 3.30pm, and most prisoners ate in cells. Prisoners were provided with a medium-sized packet of biscuits on Tuesdays and Fridays, and a piece of fruit on Mondays, for evening snacks. Breakfast comprised cereal and toast, with a boiled egg on occasion. Prisoners in Martin House made sandwiches for lunch, and had a cooked evening meal transported from the main kitchen. Those on the working out programme were also given the ingredients to make sandwiches, and were then provided with cook-chill meals each day. In our survey, 72% of prisoners rated the food as bad or very bad.
- 7.3 The kitchens were in a poor state, with insufficient storage and preparation space. One refrigerator did not have a light working. A disused, rusty mixer was still in the kitchen. The waste disposal unit was not working, and staff were using a hole in the floor or bags to dispose of waste. Many of the prisoners working in the kitchen had not received training in basic food hygiene. Those on NVOs were making very slow progress due to staff shortages. The ceiling of the main kitchen leaked.
- 7.4 Heated trolleys and insulated boxes were used to transport food to units. There were no checks of temperature at the point of service, and the levels of use of personal and protective equipment were poor. Hats were not routinely worn, and transparent aprons were worn over shorts. Food was often left uncovered for long periods of time before serving, and in some cases bain maries were barely warm. Cultural and other special dietary items were bought in when required. There was a refrigerated trailer for transporting goods from the gate to the kitchen, but it was not used, and goods were regularly moved in the same vans as those used for transporting laundry. Prisoners had to pass a medical screening before starting work in the kitchen, but they did not receive an adequate induction for their work.

## Recommendations

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- 7.5 Meal times should be revised, and the evening meal served after 5pm.
- 7.6 All prisoners should be given training in basic food hygiene, and should be provided with appropriate personal protective clothing. (See also main recommendation HP40)
- 7.7 Food temperatures should be checked at serving points.

- 7.8 Additional catering staff should be recruited.
- 7.9 A healthy choice of menus should be introduced.

(See also main recommendation HP45)

## Prison shop

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Expected outcomes:

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

- 7.10 The shop offered a wide range of products, including fruit and health supplements. A local pharmacy supplied toiletries, and electrical goods and DVDs were ordered from an external company.
- 7.11 The shop stocked a wide range of hobby materials, and handicrafts could also be ordered from a catalogue, as could clothes.
- 7.12 The premises were clean, spacious and well managed; they had expanded to accommodate a wider range of goods, and employed five orderlies.
- 7.13 An annual survey was conducted, and new items introduced if requested and approved. No other consultation mechanisms were in place.
- 7.14 Prisoners could quickly access the shop when they arrived, and those without money were given a free 'comfort pack', in an initiative which was funded by a local charity.
- 7.15 Wages were paid in advance. Prisoners received weekly updates on their finances from the prisoners' personal cash section, and they could place weekly orders.
- 7.16 Newspapers had to be purchased by prisoners' families at a local newsagent. The Steele report had noted that nationalist families objected to this, as it was in a loyalist area, and recommended different arrangements. We were told that this was not necessary, as orders could be made by telephone. Nevertheless, an alternative acceptable to the nationalist community was needed.

## Recommendations

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- 7.17 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.
- 7.18 Nationalist families should be able to order newspapers from a shop located in an area in which they feel comfortable.

## Good practice

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- 7.19 *Prisoners who arrived without their own money were given free 'comfort packs', in an initiative funded by a local charity.*

# Section 8: Resettlement

## Resettlement policy, strategy and management

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### Expected outcomes:

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

- 8.1 Maghaberry was beginning to develop its resettlement model as part of the Northern Ireland interagency resettlement strategy. A resettlement team had been established in the prison to work with other agencies but was finding it difficult to involve some of the key statutory bodies. There was good voluntary sector involvement and some innovative work with families. More needed to be done for short term and remand prisoners.
- 8.2 Progress had been made in the area of resettlement since we had last inspected Maghaberry, with the establishment of a Northern Ireland Resettlement Strategy and a resettlement team at the prison. The strategy relied on interagency cooperation, but its full implementation has been impeded by the establishment of the separated units and by limited engagement of some of the statutory bodies. The voluntary sector was well engaged with the strategy, and had worked in partnership with the prison in the development of some new programmes.
- 8.3 An interagency resettlement strategy for Northern Ireland was published in June 2004. The Northern Ireland Prison Service (NIPS) was centrally involved in the design and delivery of this initiative, and appointed a head of resettlement to oversee its implementation. At local level, Maghaberry had set up a resettlement team, which comprised dedicated discipline officers working in conjunction with other agencies.
- 8.4 Maghaberry prison managers had been imaginative in progressing the resettlement strategy since the last inspection, especially by establishing a resettlement team. Stakeholder feedback provided to the Criminal Justice Inspectorate (CJI) verified that the Probation Board for Northern Ireland (PBNI) and voluntary sector bodies were well engaged in the prison's resettlement process. A particular strength was the focus on families and a range of new programmes had been developed, including a Barnardo's Parenting Programme, a Book Club, a photo scheme for fathers and children, Duke of Edinburgh's Endeavour Award, child-centred visits, and the Toe to Toe literacy programme. These and other programmes helped retain family links and promote successful resettlement.
- 8.5 The resettlement model the prison had begun to work to looked impressive, but it was too early to judge results.
- 8.6 There were two ongoing impediments to full implementation of the resettlement strategy at Maghaberry:
- separation, which demanded disproportionate financial and workforce resources, and also reinforced a security-driven culture elsewhere in the prison;
  - underdeveloped engagement of some external statutory bodies, reported by NIPS. The consequence of this was that Maghaberry staff or their agents were still assisting prisoners with problems that statutory bodies resolve for citizens who live in the community such as

benefits issues, employment and accommodation. These were areas where the Northern Ireland Prison Service needed to continue to promote prisoners' statutory eligibility for services routinely provided to other citizens.

- 8.7 Besides these structural difficulties, there were categories of prisoner for whom resettlement services were underdeveloped – particularly remand prisoners and those serving short sentences. They received little resettlement input, yet had many of the same resettlement needs as longer-term prisoners. Fine defaulters accounted for a large percentage of Maghaberry's committals, but no real attention was paid to their resettlement needs, due to the brevity of their stays in the prison. We questioned the appropriateness of holding fine defaulters in Maghaberry, but so long as they were there some attention needed to be paid to their effective resettlement, particularly as many were repeat offenders.

## Recommendations

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- 8.8 NIPS should seek to ensure that other statutory bodies play their part in the Northern Ireland Resettlement Strategy.
- 8.9 Maghaberry should extend its resettlement planning strategy to cater more fully for short-term prisoners, remand prisoners and fine defaulters.

## Good practice

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- 8.10 *An imaginative range of programmes had been introduced to help prisoners maintain family links and helped promote successful resettlement.*

## Sentence and custody planning

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### Expected outcomes:

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

- 8.11 The resettlement planning model was sound, and dealt comprehensively with eligible prisoners at initial assessment stage. However, it lacked a consistent case-management approach after completion of initial assessments; prisoners were not fully engaged in the process and quality assurance was needed. There was no custody planning for unconvicted prisoners, or for those serving short sentences.

- 8.12 Sentence planning had been replaced by a system of resettlement plans. Resettlement planning entailed designated prison officers, probation, teachers and psychology staff working as a team with prisoners to identify and address their resettlement needs. The resettlement team and NIPS HQ captured some useful data: at 12 October 2005, there were 183 prisoners in Maghaberry working to resettlement plans, and 683 plans had been completed to date. Seventy percent of the prisoner population functioned at Literacy and Numeracy Level 1, indicating high levels of basic need. At 31 October 2005, Maghaberry was surpassing the NIPS target of 87% prisoners serving more than six months having a 'sentence plan' (HQ

performance monitoring terminology still used this term). Maghaberry had achieved 96.4% in relation to completion of plans.

- 8.13 We observed a resettlement board chaired by a governor. This was a weekly event that comprised representatives from a range of disciplines, including vocational training, probation, education and drugs workers. Individual prisoners attended, and were genuinely engaged in a comprehensive review of their situation. The atmosphere was relaxed, and the prisoner signed off a copy of his initial plan at conclusion of the board. Work placements, education, training and offending programme participation were all agreed at the board. Prisoners' relatives occasionally attended the resettlement board, making useful contributions, and there were plans to increase this involvement.
- 8.14 The good work invested in initial assessment and planning processes was not subsequently sustained. We read a number of resettlement plans. Many of their targets were more aspirational than specific, and there was very little evidence of follow-up activity or clear case management. This was not helped by the fact that there were no personal officers. Some clearer targets and follow-up could have been identified in other agency files, but the limited material held in resettlement files suggested that there was little continuity of interventions, and no comprehensive overview of the process. This was confirmed by prisoner feedback in groups and interviews, and also in our survey, where, despite the numbers completed, only 15% of prisoners said they had a resettlement plan. This and other poor responses in the survey about resettlement issues suggested that prisoners did not feel involved and informed about resettlement planning matters.
- 8.15 Separated prisoners did not have an opportunity to engage in resettlement planning. While some were unwilling to participate, others said they would be prepared to do so, and needed the opportunity to demonstrate that they were addressing their offending behaviour.
- 8.16 All resettlement files followed prisoners who were transferred to Magilligan (264 since the inception of the resettlement team), and files were reactivated if the offender returned to prison within six months. This was a sensible development, which helped provide continuity at times when prisoners were experiencing major change in their circumstances.

## Recommendations

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- 8.17 Separated prisoners should be involved in resettlement planning.
- 8.18 Short-term and unconvicted prisoners should have a custody plan that specifies how their needs will be met during and after custody. (See also main recommendation HP50)

## Life-sentenced prisoners

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### Expected outcomes:

Life-sentenced prisoners should receive equal treatment in terms of their treatment and the conditions in which they are held. These expectations refer to specific issues, which relate to the management of life-sentenced prisoners.

- 8.19 Specific work with life-sentenced prisoners began too late in their sentence, sometimes not until the three-year pre-tariff stage. Very few lifers had fully completed life-sentence plans.

There were no lifer groups or lifer days, and very few staff had received lifer training. There was not enough realistic work for lifers, with determinate-sentenced prisoners being prioritised for training. There was little progression other than to Martin House, which had been very recently introduced, and to the pre-release unit at Crumlin Road. A strategic review of the position of lifers in Northern Ireland had just been completed. It acknowledged some of these difficulties. Decisions as a result of the review had yet to be taken.

- 8.20 The lifer management unit of the Northern Ireland Prison Service (NIPS) was based at Maghaberry's Mourne House. This unit was responsible for a total of 142 life-sentenced prisoners and 86 potential lifers at the time of the inspection. The vast majority were at Maghaberry, which held 127 life-sentenced prisoners and 71 potential lifers. The resources of the small lifer management unit were stretched.
- 8.21 Until very recently, potential lifers were not identified as a specific group within the remand or untried population. A system had been put in place to identify potential lifers, and a senior officer had been given responsibility for day-to-day management of this group, including preparation of a remand planning record, but none of this work had actually begun.
- 8.22 Tariffs for life-sentenced prisoners in Northern Ireland had been introduced for the first time in 2002, following the Life Sentence (Northern Ireland) Order 2001. At the time of the inspection, there were still 20 prisoners who had not had their tariffs set.
- 8.23 There had been no life-sentence planning at all at Maghaberry before 2002. Consequently, the task of producing life-sentence plans for all life-sentenced prisoners was onerous. We were told that the considerable time and resources that had been consumed across the prison by separation issues had severely hampered progress in lifer work since then, and that little had been achieved until recently. In November 2004 a decision had been made to prioritise work with lifers at the three-year pre-tariff referral stage, and no plans were being drawn up for lifers before this stage. This was far too late to motivate lifers, many of whom had spent more than ten years without any form of life-sentence planning. The lack of progress in this area had been reflected in the recent NIPS review of life-sentenced prisoners.
- 8.24 We were unable to establish the exact number of life-sentence plans that had been completed, but the total was less than 20. The life-sentence plans were being prepared in isolation at the three-year pre-tariff stage, and not as part of a process of continuous updated assessment and needs-led planning. The small sample of life-sentence plans we examined were little more than lists of targets that had been set, without the full involvement of the prisoner.
- 8.25 Regular staff engagement with the sentenced lifer population was minimal before the three-year pre-tariff stage. Lifers were informed of their tariff by letter, and explanations were given only if a prisoner raised a query.
- 8.26 Multi-agency risk-assessment meetings were taking place at the beginning of sentence for each life-sentenced prisoner, and these were attended by a governor with responsibility for writing reports on life-sentenced prisoners. Other relevant departments within the establishment also attended. The minutes of these meetings were detailed, and contained useful information to assist with initial assessments. But, for the majority of prisoners, this information was simply being stored on file, and very few life-sentenced prisoners had had formal risk assessments completed for them.
- 8.27 Lifers were now being informed when their annual review was due to take place, and invited to make representations, whereas previously they would have been unaware that a review was taking place. They were still not invited to their annual reviews, and they were not offered the

opportunity to read any reports presented to the review in advance (although, in reality, few reports were prepared in advance). Neither were lifers prepared in any way, by way of a verbal briefing or other means, of the issues that were likely to arise, and they were not always given feedback.

- 8.28 The majority of the lifers (99) were located in Erne House. Small numbers of lifers were also located on every other house unit – including the separated units – for a variety of reasons, usually associated with incompatibility with other prisoners. The regime for lifers was no different from that for any other category of prisoner. There were no proper facilities to cook their own food on their house unit. Of the 99 lifers on Erne House, 24 were unemployed and 22 worked as orderlies. Determinate-sentenced prisoners were prioritised over lifers for work-related training.
- 8.29 Very few staff had received lifer training, and the manager of the lifer management unit was not trained. A few officers and one of the lifer-reporting governors had been trained in lifer work six years previously but had not implemented any of their training, and many no longer worked regularly with the lifers in Erne House.
- 8.30 There were no lifer groups, and the prison did not hold lifer days.
- 8.31 There were five lifers working out at the pre-release unit and detention centre (PRU) operating from the Crumlin Road. This provided a good facility, towards the end of their sentences, for lifers to prepare for release. Unfortunately, the lack of life-sentence planning meant that some in the PRU still had offending behaviour needs that had not yet been fully addressed. The PRU had insufficient staff to provide full cover at weekends, which meant that some of the lifers there had to spend their weekends in Maghaberry, which was unsettling for them and an unsatisfactory arrangement. While there was an assumption that most lifers would progress to release through the PRU, there was no clear strategic approach as to how this would be achieved through a staged progression. This issue was being addressed in the NIPS review of lifers.
- 8.32 Not long before the inspection, seven lifers who had been assessed as low risk had been moved to Martin House, within the Mourne House complex. (Mourne House is a separate annex to Maghaberry which, until the end of 2004, had been used to accommodate women prisoners). HMP Magilligan does not accommodate lifers, and consequently, until the introduction of Martin House, the only opportunity of any move for a lifer (prior to pre-release at Crumlin Road) was a change of landing or unit within Maghaberry.
- 8.33 We were told that Martin House was to be developed as an intermediate step between the main prison and the PRU scheme. Managers employed a set of criteria to select prisoners for Martin House, but these had not been published, and lifers in the main prison complained to us about the unfairness of the selection process. The prisoners living in Martin House told us that they were very happy to be there, and saw it as the first progression they had made at Maghaberry; but even they were not clear about what they were expected to do to progress further to the PRU. There was no detailed strategy setting out the precise role and function of Martin House, and there was a great deal of work to be done in order to develop the policies and procedures that would be necessary for it to be managed successfully.

## Recommendations

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- 8.34 A detailed strategy should be developed to meet the needs of potential lifers.

- 8.35 Life-sentenced prisoners should have their tariffs explained to them by a lifer-reporting governor.
- 8.36 All stages of life-sentence planning should take place within the required timescales.
- 8.37 Lifers should be adequately prepared for their annual reviews. They should always be invited and encouraged to attend.
- 8.38 There should be sufficient work and training to meet the needs of all life-sentenced prisoners.
- 8.39 All staff working with lifers should receive lifer training.
- 8.40 Lifer groups and lifer days should be introduced.
- 8.41 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.

## Offending behaviour programmes

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### Expected outcomes:

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

- 8.42 Maghaberry had good programmes in place, which were supported by prison managers and underpinned by an interagency programme delivery. However, eligibility criteria, while appropriate, meant the numbers of programme participants were low. A wider range and more generic resettlement programmes were needed for prisoners who did not qualify for the specialist offending behaviour programmes.
- 8.43 Prisoners undertook a series of assessments upon committal, including the Probation Service's Assessment Case Management and Evaluation system (ACE), and the Risk Assessment 1 (RA1) form was completed, to identify risk factors and resettlement needs. These validated exercises were specially designed for the Northern Ireland context. Between April and October 2005, 122 newly committed prisoners were found to be at high risk of reoffending.
- 8.44 Targeting of programmes and access to programmes were deemed sufficient by Maghaberry. However, the eligible population was small in relation to the overall prison population. Eligibility was affected by several factors, such as risk level (only high to medium-risk prisoners were eligible), motivation, length of time to serve (at least 12 months), appellant status, and literacy level. These were appropriate criteria, and any deviation from them would have compromised programme integrity. A Programme Approval Panel, which comprised NIPS, PBNI and Youth Justice Agency, was involved in the approval of all prisoners' programmes. An Offending Behaviour Programme External Accreditation Panel had been set up sponsored jointly by NIPS, IPS, PBNI, Probation and Welfare Service (Republic of Ireland) and a number of independent experts in the field of offending behaviour programme design and delivery to accredit programmes.

- 8.45 Eligible sentenced prisoners could be referred for offending behaviour programmes by the resettlement board, or by individual agencies. It was not possible to include remand prisoners, short-sentenced prisoners or fine defaulters in offending behaviour programmes. This strengthened the case for providing them with generic resettlement assistance.
- 8.46 The range of offending behaviour programmes available in Maghaberry at the time of inspection comprised:
- an anger management programme;
  - an alcohol management programme;
  - a sex offender treatment programme (SOTP) and booster SOTP. Due to there being an insufficient number of prisoners who were programme-ready, no SOTP had been run since 2004, and Maghaberry was therefore considering transfer of potential participants from Magilligan. An information group was being designed as a precursor to the SOTP, particularly aimed at sex offenders in denial;
  - a cognitive self-change programme (CSCP). This was piloted in March 2005, and had a rolling intake. It was designed for non-sexually violent offenders;
  - an enhanced thinking skills programme, intended to provide a foundation for the CSCP and SOTP, and aimed at prisoners deemed to present a high risk of reoffending.
- 8.47 Most programme delivery was undertaken on an interagency basis, jointly facilitated by a pool of PBNI staff, psychologists, teachers and discipline staff. Even after staff had undertaken extensive training, there could be logistical difficulties in freeing them to run groups, if other operational pressures intruded and were accorded higher priority. Staffing difficulties had caused little programme slippage during the previous year, although it was an ongoing struggle to manage the logistics of composing and maintaining offending behaviour groups, and to provide consistent staffing to deliver the programmes.
- 8.48 We saw minuted evidence of positive developments in the weekly Magilligan Transfer Board – prison managers had worked to ensure that security concerns were balanced by consideration of other relevant factors, including programme participation, and these meetings had agreed to retain prisoners who were taking programmes at Maghaberry. Training for discipline staff aimed, among other things, to generate a climate that reinforced the objectives of treatment programmes.
- 8.49 There were no separated prisoners participating in offending behaviour programmes, and were therefore unable to demonstrate progress in addressing their offending behaviour. We believe this is inappropriate – if they fulfil all the other criteria, then their separated status, which is intended to protect them from other prisoners, should not preclude participation in offending behaviour programmes.
- 8.50 We found that there were insufficient alternative interventions for prisoners who were deemed ineligible for the available accredited programmes. There was also considerable scope for future development of new programmes. In particular, the men overcoming domestic violence programme, a short-duration drugs course, and a programme dealing with sectarianism could prove beneficial in Maghaberry.

## Recommendations

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- 8.51 Broadly based interventions should be provided that contribute to reducing reoffending by prisoners who are not eligible for offending behaviour programmes – including personal development, education about alcohol and substance misuse, and social skills.
- 8.52 Separated prisoners should be permitted to participate in offending behaviour programmes.
- 8.53 New programmes should be developed to address specific offending behaviours.

## Reintegration planning

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### Expected outcomes:

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

- 8.54 Good efforts were made to help maintain family links during sentence and home leave was well used to aid successful reintegration at the end of sentence. A throughcare centre with a drop in facility for prisoners had been established to provide advice but this was not staffed consistently and not all prisoners were able to access it. Few prisoners were aware of how to get help in the prison on important reintegration areas such as housing, employment and benefits issues.
- 8.55 The vast majority of Maghaberry prisoners served their sentence relatively close to home. This made it relatively easy to maintain family links. Practical arrangements for the retention of personal property during sentence, laundry and discharge of vulnerable prisoners were managed as routine elements of the prison operation, and functioned well. But the limited differentiation within the Northern Ireland Prison Service (NIPS) estate meant that relatively few prisoners were able to progress in their sentence to lower security conditions. There was no open prison to prepare prisoners for a return to the community and only very few working out opportunities.
- 8.56 Home leave was an important factor in assisting prisoners' reintegration – 62% (179/287) of Maghaberry home leave applications between September 2004 and September 2005 were granted. Decisions were taken on an interagency basis, and refusals were primarily based upon risk. In addition to ordinary home leave, resettlement leave could be provided for specific events, such as job interviews or to view accommodation.
- 8.57 Some careers education and advice was provided and the resettlement team ran a job club to help prisoners seek and secure work on release. Careers advice and guidance were informally offered by the education department, and teachers relied on their knowledge and experience of further education courses and work opportunities in their respective subject areas. Informal links had been made with a number of external organisations, such as NIACRO and the Educational Guidance Service for Adults (EGSA). Posters on the walls of the education

department in the throughcare centre advertised a number of external support organisations and work opportunities for prisoners.

- 8.58 A throughcare centre had been established in 2005, and was a very positive development. It was located in the workshop complex, and comprised an attractive drop-in facility where prisoners could browse material and discuss employment, accommodation and any other issues of concern. However, it was overly dependent on one discipline officer, and therefore frequently closed when he was unavailable. Nor could all prisoners access this facility.
- 8.59 Although Maghaberry provided dedicated resources for reintegration planning, 26% of prisoners who completed our questionnaire reported that they did not know how to access advice and help on key aspects of reintegration while in the prison, including employment, accommodation, benefits, drugs courses, education and training. This was significantly worse than the benchmark and indicated that services needed to be extended to reach all prisoners.

## Recommendations

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- 8.60 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.
- 8.61 All prisoners should be provided with and made fully aware of services available within the prison to aid their reintegration.
- 8.62 Specific opening times and dedicated resources should be established for the throughcare centre, so that prisoners have predictable access to its services.

## Public protection

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Expected outcomes:

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

- 8.63 Maghaberry participated fully in the Northern Ireland MASRAM (Multi-Agency Sex Offender Risk Assessment and Risk Management) arrangements. Although these procedures were formally limited to sex offenders, the prison also applied similar interagency procedures in respect of other prisoners about whom there were concerns. Prisoners and their representatives were well informed about the licence conditions on release.
- 8.64 Regular risk assessment and management meetings were held in Maghaberry, usually on a monthly basis. These were not limited just to dealing with sex offender cases but covered all offenders about whom there were concerns about risk to the public on release. The extent of risk management work had increased considerably in the past three years, imposing a significant demand upon resources. Probation staff chaired the area sex offender risk management committee (ASORMC) meetings, and led on the risk assessment function. Both probation and prison staff, usually at governor grade, could fulfil the designated risk manager function. This was an important case management role, particularly in the case of prisoners

who were on temporary release. Relevant external agencies participated in the Multi-Agency Sex Offender Risk Assessment and Risk Management Arrangements (MASRAM) process as required.

- 8.65 There was no personal officer scheme in Maghaberry. This reduced the amount of knowledge available about individual prisoners, including those who posed a risk to the public. A meaningful personal officer scheme could be expected to enhance the Northern Ireland Prison Service's provision of security and intelligence information to inform individual risk assessments.
- 8.66 Governors and probation staff informed prisoners of outcomes promptly after ASORMCs. Inspectors found that prisoners being discharged had licence and other conditions explained to them. These were sometimes unpopular, especially when they entailed the application of restrictive interventions. MASRAM decisions in particular were reported as unwelcome – and sometimes illogical from their point of view – by prisoners on the working out scheme with whom we spoke. These prisoners knew how to challenge decisions, both personally and, when appropriate, by engaging their representatives.

## Recommendation

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- 8.67 **A personal officer scheme should report fully on prisoners subject to MASRAM processes and other high-risk prisoners.**

## Substance use

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### Expected outcomes:

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

- 8.68 The drug strategy included alcohol, but lacked detailed action plans and performance measures. Monthly meetings focused on supply reduction, and there was little coordination or joint working between service providers.
- 8.69 New clinical management guidelines had been developed by the specialist consultant, and continuation prescribing for opiate users was successfully implemented.
- 8.70 There was no multidisciplinary substance misuse team, and there was restricted access to the counselling service, with little for remand and short-term prisoners. Alcohol and drug awareness courses lacked dedicated facilitators, and were in danger of being stopped altogether.
- 8.71 While we saw pockets of good work being done by motivated and committed staff, service provision was poorly integrated, and did not meet the needs of the population.
- 8.72 The prison's drug strategy dated from 2001, and was in line with the Northern Ireland Prison Service Drugs policy. The strategy included alcohol, but the document did not contain detailed action plans, targets or performance measures.

- 8.73 Monthly drug strategy group meetings were chaired by the director of inmate services and activities. A governor's post, which included drug strategy coordination, was temporarily vacant. The meetings focused mainly on supply reduction, and lacked specialist healthcare input. Treatment issues were rarely discussed, and there was little evidence of joint work and overall service coordination.
- 8.74 Prisoners received a healthcare screen on arrival, and first-night symptom relief if required. Over the four months preceding the inspection, almost 20% of new prisoners experienced alcohol problems. Those with complex health problems were admitted as inpatients, while the majority underwent detoxification on the wings.
- 8.75 Benzodiazepine use was high, reflecting prescribing trends in the community; a mental health team was available to provide assessments and ongoing support.
- 8.76 At the time of the inspection, 11 patients were prescribed dihydrocodeine, either for pain relief or detoxification. A specialist community substance misuse consultant had developed comprehensive clinical management protocols and guidelines on substitution treatment for opiate dependence, which had been partly implemented. Prisoners maintained on methadone or Subutex in the community could continue this treatment following a referral to the consultant, who offered two weekly sessions. Reflecting the relatively low level of heroin use in Northern Ireland, only eight prisoners had had needs in this area during the year preceding the inspection.
- 8.77 A team of substance-misuse nurses had been reduced to two over the past year; they were part of the mental health support team, and no longer profiled to undertake dedicated substance misuse work. Both their induction input and a wide range of group work had ceased, and no longer formed part of their role. However, they tried to see prisoners on substitution treatment once a week, and, together with the consultant, the nurses liaised with community prescribers to facilitate throughcare.
- 8.78 There was little communication and no joint working between the healthcare department and the Dunlewey substance advice centre, which held the contract to deliver a counselling service to drug and alcohol users. Access to this service was limited – at the time of the inspection, the 3.5 counsellors had ongoing contact with 42 clients, while a further 69 were on the waiting list for assessments and allocation.
- 8.79 A four-week group for sentenced prisoners who had engaged in one-to-one counselling ran twice a year, and had been completed by 11 prisoners in the last year.
- 8.80 Staff prioritised prisoners due to be released, attended resettlement boards, and liaised with community agencies. Between April and August 2005, 100 prisoners had been referred for counselling as part of their resettlement plan, 32 of whom had started and 11 completed it. Remand and short-term prisoners had little access to the service.
- 8.81 An alcohol management course of eight sessions, and a drug education and awareness programme over 10 sessions and accredited through the open college network, were available to sentenced prisoners. The two remaining groupwork trained officers facilitating these courses were not dedicated to this task, and only 13 prisoners had been able to participate during the year. A five-session course for remand prisoners was planned, but the imminent relocation of one of the officers meant that all programmes would stop.
- 8.82 Prisoners reported that they lacked information about available help with substance-related problems. An induction pack was due to be introduced.

- 8.83 In our survey, 29% knew who to contact in the prison to get help with external drug courses, compared to a benchmark of 40%, and 17% thought that the drug or alcohol programme would help them on release, compared to a benchmark of 21%.
- 8.84 Those with alcohol-related problems could attend weekly AA meetings, but all staff we spoke to were sure that current service provision failed to meet the needs of the large number of problem alcohol users.
- 8.85 Prisoners suggested that a dedicated drug-free wing could offer them additional support, especially if this was combined with good access to one-to-one counselling, group work and voluntary drug testing (VDT).
- 8.86 The establishment operated a VDT scheme for all but the separated prisoners and remand prisoners who were not on the enhanced level. Drug testing could be random or targeted, replicating mandatory drug testing run elsewhere in the UK. This was linked to the prison's progressive regimes and earned privileges (PREP) scheme. Those who refused testing could not progress, and a positive result meant an automatic downgrading to standard or basic level. Prisoners on the basic level reported that it could take a long time to be put forward for another test.
- 8.87 Testing took place in reception, following a full search – conducted until recently by the dedicated search team. The senior officer in charge of drug testing was part of the resettlement team, and lacked dedicated staff. There were no testing targets, and the number of tests conducted each month varied greatly.
- 8.88 Names for random testing were picked from the nominal rolls of the units, rather than randomly computer-generated. Wing staff requested suspicion tests, and there was no formal system of targeting.
- 8.89 The year-to-date rate of positive tests stood at just over 30%, mainly for cannabis. An external laboratory was used to test samples.
- 8.90 Security measures were comprehensive, and included a searching strategy, PIN phone monitoring, Security Information Reports, CCTV and passive drug dogs in both open and closed visits. During September, dogs had indicated 92 times. Seventy-three visitors accepted a closed visit, 18 had refused, and one visit was terminated. At the time of the inspection, 12 visitors had been banned.
- 8.91 Finds were mainly cannabis, and prescription drugs with some heroin and anabolic steroids.
- 8.92 In our survey, 41% of prisoners thought it was easy to get hold of illegal drugs, compared to a benchmark of 33%.

## Recommendations

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- 8.93 The drug and alcohol strategy should be updated, and should contain detailed action plans, targets and performance measures.
- 8.94 A strategy leader for the coordination of treatment services should be appointed.
- 8.95 Treatment providers should develop joint working protocols and integrated care pathways for prisoners with substance problems.

- 8.96 Prisoners should be informed of available substance misuse services during induction.
- 8.97 Every prisoner with substance-related needs should receive an assessment within a set timeframe, followed by a care plan.
- 8.98 The new clinical management guidelines should be fully implemented, and a dedicated substance misuse team established.
- 8.99 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.
- 8.100 A drug-free unit should be established that offers structured support, including voluntary drug testing.
- 8.101 A random mandatory drug testing scheme should be introduced.
- 8.102 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.



## Section 9: Recommendations, housekeeping points and good practice

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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.

### Main recommendations

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To the Governor

- 9.1 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)
- 9.2 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)
- 9.3 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)
- 9.4 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)
- 9.5 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)
- 9.6 The kitchen should be fully refurbished or replaced. (HP45)
- 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. (HP46)
- 9.8 Management of movements should improve so that prisoners reach their work and education places on time and remain for the published duration. (HP47)
- 9.9 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)
- 9.10 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)

- 9.11 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)

### **First days in custody**

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- 9.12 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)
- 9.13 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)
- 9.14 Refreshments, as well as means to pass the time in holding rooms, should be provided in reception. (1.32)
- 9.15 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)
- 9.16 Night staff should be aware of the location and needs of new prisoners. (1.34)

### **Residential units**

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- 9.17 The square houses should be replaced as part of the Northern Ireland Prison Service Estate review. (2.24)
- 9.18 Cells on Bush and Roe Houses designed for one prisoner should not be shared. (2.25)
- 9.19 Some opportunities should be introduced for prisoners, particularly new committals, to eat together. (2.26)
- 9.20 Staff should actively patrol landings and communal facilities whenever prisoners are unlocked. (2.27)
- 9.21 Glen House should not be used for women prisoners. (2.28)
- 9.22 Adequate screening of all cell toilets should be installed. (2.29)
- 9.23 Broken telephones should be replaced. (2.30)
- 9.24 Additional interview rooms should be provided for Erne House. (2.31)
- 9.25 Recreational facilities should be improved. Damaged pool tables should be repaired or replaced. (2.32)
- 9.26 Monthly minuted house meetings should be introduced between prisoner representatives and staff. (2.33)

## **Staff-prisoner relationships**

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- 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. (2.39)

## **Personal officers**

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- 9.28 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)

## **Bullying**

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- 9.29 A survey of prisoners' perceptions and experiences of bullying should be carried out to inform the development of local policy and strategy. (3.16)
- 9.30 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)
- 9.31 Monitoring information about bullying should be improved, to enable managers to develop a profile of this behaviour. (3.18)
- 9.32 All staff working directly with prisoners should receive training in the anti-bullying training strategy. (3.19)

## **Suicide and self-harm**

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- 9.33 A greater range of disciplines should be represented at the suicide and self-harm prevention meetings, and should also be involved in planned PAR 1 reviews. (3.35)
- 9.34 A Listener scheme should be established with access to Listener suites, and Listeners should participate in suicide and self-harm prevention meetings. (3.36)
- 9.35 There should be improved monitoring and analysis of incidents of self-harm. (3.37)
- 9.36 Senior managers should make regular quality checks of PAR 1 procedures. (3.38)
- 9.37 All use of special accommodation and strip clothing for prisoners at risk of self-harm should be recorded. (3.39)
- 9.38 There should be a periodic review of recommendations from previous death investigations, to ensure that changes to practice are being sustained. (3.40)
- 9.39 To minimise delays, the emergency procedures for entering cells at night should be improved. (3.41)

## **Equality, race relations and foreign nationals**

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- 9.40 All staff should receive relevant training in cultural, racial and diversity issues. (3.50)
- 9.41 Foreign national prisoners should be properly identified, regularly consulted, and service provision appropriately targeted. (3.51)
- 9.42 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. (See also main recommendation HP48) (3.52)

## **Family and friends**

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- 9.43 Sufficient working telephones should be provided to allow prisoners to keep in easy contact with their families. (3.75)
- 9.44 An accessible and monitored feedback system procedure should be introduced to allow visitors to suggest improvements or complain if necessary. (3.76)
- 9.45 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)
- 9.46 Visits should begin at the published time, and the visitors' reception building should be opened in readiness for visitors. (3.78)
- 9.47 The capacity of the visits room serving the majority of prisoners should be increased. (3.79)

## **Applications and complaints**

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- 9.48 Request and complaint forms and respective guidelines should be available in languages other than English. (3.96)
- 9.49 Consultative committees should be introduced. (3.97)
- 9.50 Complaints and requests should be monitored and evaluated so that any patterns or trends can be identified. (3.98)
- 9.51 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)

## **Healthcare**

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- 9.52 Access to healthcare rooms, wherever they are in the prison, should be limited to healthcare staff. (4.50)
- 9.53 The inpatient beds should not form part of the prison's certified normal accommodation. (4.51)
- 9.54 Nursing staff should not carry staves. (4.52)

- 9.55 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)
- 9.56 There should be a fair and auditable system for the allocation of continuing professional development. (4.54)
- 9.57 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)
- 9.58 All clinical records should be made contemporaneously. (4.56)
- 9.59 The applications and triage system that has been piloted on Lagan wing should be adopted on the other wings. (4.57)
- 9.60 Nurses should stop the risky practice of redispensing and/or repacking dispensed medicines. (4.58)
- 9.61 Reviews should take place of treatment times, accessibility to patients and assessments for suitability to be included on the self-medication scheme. (4.59)
- 9.62 Prisoners receiving a night-time dose of a medicine should be able to receive the dose at an appropriate time. (4.60)
- 9.63 The complicated Cardex system for issuing prescriptions should be discontinued, and a prescription and administration record sheet introduced. (4.61)
- 9.64 The method of ordering medications should be revised to ensure a system that has robust auditing to reconcile prescriptions against orders. (4.62)
- 9.65 A repeat slip system for patients who have had their medication written up for 84 days should be introduced. (4.63)
- 9.66 Nurses should follow the NMC guidelines for the safe administration of medications. (4.64)
- 9.67 Prisoners should be provided with lockers in which to store prescribed medicines. (4.65)
- 9.68 Formal clinical governance arrangements should be put in place for recording pharmacy interventions, and adverse incidents such as errors. (4.66)
- 9.69 Smoking cessation services should be introduced. (4.67)
- 9.70 The use of strip clothing in healthcare should be recorded in a central register. (4.68)

### **Education and library provision**

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- 9.71 A wider range of education courses should be offered to meet the needs of more prisoners. (5.12)
- 9.72 More opportunities, particularly essential skills classes, should be provided for remand prisoners. (5.13)
- 9.73 Prisoner movements should be better managed to improve attendance and punctuality at education classes. (5.14)

- 9.74 Library opening hours should be increased to offer more sessions in the evenings and at weekends. (5.15)
- 9.75 More materials for those with learning difficulties should be stocked in the library. (See also main recommendation HP46) (5.16)

### **Work**

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- 9.76 Measures should be taken to increase general work opportunities, allowing prisoners to acquire relevant employment skills. (5.22)
- 9.77 Remand and separated prisoners should have the opportunity to work. (5.23)
- 9.78 Prisoners should arrive at their workplaces as scheduled. (5.24)

### **Physical education and health promotion**

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- 9.79 Prisoners on the committal wing should have regular access to the gym and other PE facilities. (5.30)
- 9.80 A wider range of accredited courses should be offered. (5.31)

### **Faith and religious activity**

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- 9.81 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)
- 9.82 A multi-faith room should be provided. (5.44)
- 9.83 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)
- 9.84 Prisoners in Martin House should be able to attend relevant services. (5.46)
- 9.85 Chaplains should not be denied access to segregated prisoners in the SSU, unless there is a serious temporary security emergency. (5.47)
- 9.86 Prisoners should be escorted to the chapel for pastoral visits when requested by the chaplains. (5.48)
- 9.87 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)

### **Time out of cell**

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- 9.88 More time out of cell should be provided for all prisoners. (5.55)
- 9.89 Regime activities should start and finish at the published times. (5.56)
- 9.90 Better equipment should be provided in association rooms. (5.57)

## **Security and rules**

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- 9.91 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)
- 9.92 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)
- 9.93 Prisoners' cells should be searched respectfully and left in a decent condition afterwards. (6.15)
- 9.94 The security department should acknowledge all security reports submitted by staff. (6.16)
- 9.95 Attendance at the security committee should be increased, with greater representation from non-security staff. (6.17)
- 9.96 Decisions on a prisoner's security classification should not be taken by a single officer. (6.18)
- 9.97 All prisoners should have their security classification reviewed at least annually. (6.19)
- 9.98 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)
- 9.99 The practice of the SST removing staff's keys from them during targeted searching is unnecessary, and should cease. (6.21)

## **Discipline**

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- 9.100 Punishment ranges for various types of offence should be agreed and published to staff and prisoners, to ensure consistency among adjudicating governors. (6.49)
- 9.101 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)
- 9.102 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)
- 9.103 Staff should complete use of force documentation immediately after every occasion when force is used against prisoners, before they go off duty. (6.52)
- 9.104 Governors who sign off use of force paperwork should, before countersigning it, satisfy themselves that all the documentation is present. (6.53)
- 9.105 All planned use of force interventions should be video-recorded. (6.54)
- 9.106 Duty governors should attend all planned cell removals. (6.55)
- 9.107 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)

- 9.108 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)
- 9.109 All use of special accommodation should be separately logged. (6.58)
- 9.110 The high-security cell should be decommissioned and sealed off. (6.59)
- 9.111 There should be greater staff interaction with prisoners held in the SSU. This interaction should be recorded. (6.60)
- 9.112 Prisoners entering the SSU should not be strip-searched without an individual risk assessment. (6.61)
- 9.113 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)
- 9.114 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)
- 9.115 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)

### **Progressive regimes and earned privileges scheme**

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- 9.116 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)
- 9.117 Prisoners on the basic regime should be given an opportunity to use the phone during the evening. (6.85)
- 9.118 There should be an equitable application of the scheme for sentenced and remand prisoners. (6.86)
- 9.119 There should be improved monitoring of PREPS. (6.87)

### **Catering**

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- 9.120 Meal times should be revised, and the evening meal served after 5pm. (7.5)
- 9.121 All prisoners should be given training in basic food hygiene, and should be provided with appropriate personal protective clothing. (7.6)
- 9.122 Food temperatures should be checked at serving points. (7.7)
- 9.123 Additional catering staff should be recruited. (7.8)
- 9.124 A healthy choice of menus should be introduced. (7.9)

## **Prison shop**

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- 9.125 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)
- 9.126 Nationalist families should be able to order newspapers from a shop located in an area in which they feel comfortable. (7.18)

## **Resettlement policy, strategy and management**

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- 9.127 NIPS should seek to ensure that other statutory bodies play their part in the Northern Ireland Resettlement Strategy. (8.8)
- 9.128 Maghaberry should extend its resettlement planning strategy to cater more fully for short-term prisoners, remand prisoners and fine defaulters. (8.9)

## **Sentence and custody planning**

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- 9.129 Separated prisoners should be involved in resettlement planning. (8.17)
- 9.130 Short-term and unconvicted prisoners should have a custody plan that specifies how their needs will be met during and after custody. (8.18)

## **Life-sentenced prisoners**

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- 9.131 A detailed strategy should be developed to meet the needs of potential lifers. (8.34)
- 9.132 Life-sentenced prisoners should have their tariffs explained to them by a lifer-reporting governor. (8.35)
- 9.133 All stages of life-sentence planning should take place within the required timescales. (8.36)
- 9.134 Lifers should be adequately prepared for their annual reviews. They should always be invited and encouraged to attend. (8.37)
- 9.135 There should be sufficient work and training to meet the needs of all life-sentenced prisoners. (8.38)
- 9.136 All staff working with lifers should receive lifer training. (8.39)
- 9.137 Lifer groups and lifer days should be introduced. (8.40)
- 9.138 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)

## **Offending behaviour programmes**

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- 9.139 Broadly based interventions should be provided that contribute to reducing reoffending by prisoners who are not eligible for offending behaviour programmes – including personal development, education about alcohol and substance misuse, and social skills. (8.51)
- 9.140 Separated prisoners should be permitted to participate in offending behaviour programmes. (8.52)
- 9.141 New programmes should be developed to address specific offending behaviours. (8.53)

## **Reintegration planning**

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- 9.142 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)
- 9.143 All prisoners should be provided with and made fully aware of services available within the prison to aid their reintegration. (8.61)
- 9.144 Specific opening times and dedicated resources should be established for the throughcare centre, so that prisoners have predictable access to its services. (8.62)

## **Public protection**

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- 9.145 A personal officer scheme should report fully on prisoners subject to MASRAM processes and/or other high-risk prisoners. (8.67)

## **Substance use**

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- 9.146 The drug and alcohol strategy should be updated, and should contain detailed action plans, targets and performance measures. (8.93)
- 9.147 A strategy leader for the coordination of treatment services should be appointed. (8.94)
- 9.148 Treatment providers should develop joint working protocols and integrated care pathways for prisoners with substance problems. (8.95)
- 9.149 Prisoners should be informed of available substance misuse services during induction. (8.96)
- 9.150 Every prisoner with substance-related needs should receive an assessment within a set timeframe, followed by a care plan. (8.97)
- 9.151 The new clinical management guidelines should be fully implemented, and a dedicated substance misuse team established. (8.98)
- 9.152 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)

- 9.153 A drug-free unit should be established that offers structured support, including voluntary drug testing. (8.100)
- 9.154 A random mandatory drug testing scheme should be introduced. (8.101)
- 9.155 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)

## Housekeeping points

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### **First days in custody**

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- 9.156 A comprehensive information booklet should be provided. (1.35)
- 9.157 Graffiti in reception holding rooms should be removed. (1.36)
- 9.158 Prisoners should be asked about their use of alcohol as well as other drugs in their interview with the duty governor. (1.37)

### **Residential units**

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- 9.159 There should be better opportunity for new committal prisoners and remand prisoners on Roe House to use the Astroturf facilities. (2.34)

### **Family and friends**

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- 9.160 A visitors' forum should be introduced. (3.80)
- 9.161 The closed visits facilities should be refurbished. (3.81)
- 9.162 The role of the family support officer should be better advertised within the prison. (3.82)

### **Healthcare**

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- 9.163 The healthcare holding room should have appropriate health promotion literature displayed. (4.69)
- 9.164 Records of professional registrations of healthcare staff should be available locally. (4.70)
- 9.165 Healthcare staff should receive training so that they can supervise prisoners using the newly installed gym equipment in the inpatient unit. (4.71)
- 9.166 The print quality on drug labels should be of an acceptable standard. (4.72)
- 9.167 A signature should be obtained from the patient to confirm receipt of any medication supplied that is intended for self-administration. (4.73)

## **Discipline**

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- 9.168 Copies of injury to inmate forms should be filed for safekeeping with use of force paperwork. (6.65)
- 9.169 Prisoners should be routinely provided with written confirmation of any punishments, and with information about their right of appeal. (6.66)
- 9.170 The salient points of an adjudication hearing should be recorded on the written transcript. (6.67)

## **Progressive regimes and earned privileges scheme**

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- 9.171 The leaflet explaining PREPS should be given to all newly received inmates. (6.88)

# Good practice

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## **First days in custody**

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- 9.172 The availability of a free smokers' pack for prisoners arriving without money removed their need to borrow tobacco from others, thus reducing the opportunity for bullying. (1.38)

## **Family and friends**

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- 9.173 The variety of visit booking methods ensured that bookings could be made easily and at the convenience of visitors. (3.83)
- 9.174 Visitors could leave their children to be cared for in the visitors' centre, which enabled carers to visit without the responsibility of having to look after their child. (3.84)
- 9.175 The family support officer provided a necessary 'bridge' between prisoners and their families, and also ensured that a high priority was given to the needs of children and of fathers in prison. (3.85)

## **Healthcare**

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- 9.176 The pharmacy staff had trained officers working at Crumlin Road in the care of medicines. This ensured the safety of medicines in an environment where there were no healthcare professionals. (4.74)

## **Prison shop**

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- 9.177 Prisoners who arrived without their own money were given free 'comfort packs', in an initiative funded by a local charity. (7.19)

## **Resettlement policy, strategy and management**

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- 9.178 An imaginative range of programmes had been introduced to help prisoners maintain family links and helped promote successful resettlement. (8.10)



## Appendix 1: Inspection team

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Anne Owers	HM Chief Inspector of Prisons
Kit Chivers	Chief Inspector, Northern Ireland Criminal Justice Inspectorate
Brendan McGuigan	Deputy Chief Inspector, Northern Ireland Criminal Justice Inspectorate
Michael Loughlin	Team Leader
Joss Crosbie	Inspector
Fay Deadman	Inspector
Paul Fenning	Inspector
Jonathan French	Inspector
Tom McGonigle	Inspector (NICJI)
Elizabeth Tysoe	Healthcare Inspector
Siggi Engelen	Specialist Drugs Inspector
Jill Williams	Pharmacy Inspector
Kevin Moseley	Dental Inspector
Angela Whiteside	Department of Education, Northern Ireland

The Adult Learning Inspectorate

## Appendix II: Stakeholder organisations canvassed

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The following organisations responded to a request to express their views about Maghaberry's efficiency and the quality of the service it provides, and to raise any issues which it might be useful for the inspectors to examine:

Barnardo's

Democratic Unionist Party

Duke of Edinburgh's Award

Dunlewey Substance Advice Centre (N.I. Ltd)

Extern

Lisburn City Council

Maghaberry Independent Monitoring Board

NIACRO

Northern Ireland Court Service

Northern Ireland Human Rights Commission

Police Service of Northern Ireland - Lisburn District Command Unit

Prisoner Ombudsman for Northern Ireland

Prison Link

Probation Board for Northern Ireland

Ulster Political Research Group

Ulster Quaker Service Committee

## Appendix III: Prison population profile

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### Sentence

<i>Sentence</i>	<i>Males</i>	<i>%</i>
Unsentenced	404	54.0
< 6 Months	26	3.5
6 Months< 12 Months	22	2.9
12 Months< 2 Years	33	4.4
2 Years< 4 Years	39	5.2
4 Years< 6 Years	26	3.5
6 Years< 8 Years	15	2.0
8 Years< 10 Years	14	1.9
10 Years< Life	42	5.6
Life+SOSP	127	17.0
<b>Total</b>	<b>748</b>	<b>100.0</b>

### Status

	<i>Male</i>	<i>%</i>
Sentenced	344	46.0
Unsentenced	404	54.0
<b>Total</b>	<b>748</b>	<b>100.0</b>

### Age and Status Remand

<i>Age</i>		<i>Percentage</i>		
		<i>Remand</i>	<i>Of Total</i>	<i>Of Remand</i>
16	17	0	0.0	0.0
18	20	1	0.1	0.2
21	24	93	12.4	23.0
25	29	88	11.8	21.8
30	34	80	10.7	19.8
35	39	56	7.5	13.9
40	44	45	6.0	11.1
45	49	21	2.8	5.2
50	59	19	2.5	4.7
60	65	1	0.1	0.2
<b>Total</b>		<b>404</b>	<b>54.01</b>	<b>100.0</b>

### Age and Status Sentenced

<i>Age</i>		<i>Percentage</i>		
		<i>Sentenced</i>	<i>Of Total</i>	<i>Of Sentenced</i>
16	17	0	0.0	0.0
18	20	1	0.1	0.3
21	24	48	6.4	14.0
25	29	56	7.5	16.3

30	34	56	7.5	16.3
35	39	65	8.7	18.9
40	44	49	6.6	14.2
45	49	32	4.3	9.3
50	59	26	3.5	7.6
60	65	11	1.5	3.2
<b>Total</b>		344	45.99	100.0

#### Main Offence – Sentenced Prisoners

Main Offence	Male	%
ABH	5	1.6
Arson	3	0.9
Behaviour	6	1.9
Blackmail	1	0.3
Buggery	5	1.6
Burglary	13	4.1
Deception	2	0.6
Driving	18	5.7
Drugs	17	5.4
Explosives	9	2.8
Firearms	9	2.8
Fraud	2	0.6
GBH	8	2.5
Hijacking	0	0.0
Insurance	6	1.9
Licence	1	0.3
Manslaughter	10	3.2
Murder	130	41.0
Rape	22	6.9
Robbery	32	10.1
TADA	2	0.6
Terrorism	2	0.6
Theft	14	4.4
<b>Total</b>	<b>317</b>	<b>100.0</b>

#### Main alleged Offence – Unsentenced Prisoners

Main Offence	Male	%
ABH	22	7.1
Arson	7	2.2
Behaviour	4	1.3
Blackmail	5	1.6
Buggery	1	0.3
Burglary	9	2.9
Deception	1	0.3
Driving	16	5.1
Drugs	29	9.3
Explosives	12	3.8
Firearms	4	1.3
Fraud	1	0.3

GBH	39	12.5
Hijacking	0	0.0
Insurance	2	0.6
Licence	0	0.0
Manslaughter	0	0.0
Murder	68	21.8
Rape	9	2.9
Robbery	40	12.8
TADA	1	0.3
Terrorism	1	0.3
Theft	41	13.1
<b>Total</b>	<b>312</b>	<b>100.0</b>

### Home Area

Home Area	Male	Overall %
Antrim	18	3.2
Ardglass	0	0.0
Armagh	22	3.9
Ballymena	21	3.8
Ballymoney	2	0.4
Ballynahinch	4	0.7
Banbridge	8	1.4
Bangor	19	3.4
Belfast	235	42.0
Carrickfergus	1	0.2
Castlewellan	0	0.0
Clough	0	0.0
Coleraine	14	2.5
Comber	3	0.5
Comber	3	0.5
Cookstown	10	1.8
Craigavon	7	1.3
Derry	45	8.1
Downpatrick	10	1.8
Dromore	2	0.4
Dundonald	4	0.7
Dundrum	0	0.0
Dungannon	9	1.6
Dunmurray	0	0.0
Enniskillen	7	1.3
Glengormley	4	0.7
Hollywood	1	0.2
Keady	2	0.4
Kilkeel	0	0.0
Killyleagh	0	0.0
Kilrea	1	0.2
Larne	5	0.9
Limavady	5	0.9
Lisburn	16	2.9
Lurgan	15	2.7
Markethill	1	0.2
Moira	0	0.0

Newcastle	4	0.7
Newry	13	2.3
Newtownabbey	5	0.9
Newtownards	8	1.4
Omagh	9	1.6
Portadown	11	2.0
Portaferry	0	0.0
Portrush	3	0.5
Rathcoole	5	0.9
Strabane	4	0.7
Warrenpoint	3	0.5
	<b>559</b>	<b>100</b>

NB. The majority of local locations are recorded. However, there are a number of locations not included e.g. addresses in Republic of Ireland, England, Scotland, Wales, etc.

#### Ethnic Groups

<i>Nationality</i>	<i>Males</i>	<i>%</i>
GB	43	5.7
IRE	22	2.9
NI	654	87.4
Other	27	3.6
None Stated	2	0.3
<b>Total</b>	<b>748</b>	<b>100.0</b>

NB. Information regarding Ethnic Groups is not recorded. However, we do maintain information on nationality and this is included.

#### Religion – sentenced population

<i>Religion</i>	<i>Percentage</i>		
	<i>Sentenced</i>	<i>Of Total</i>	<i>Of Sentenced</i>
Church of Ireland	48	6.4	14.0
Free Presbyterian	50	6.7	14.5
Methodist	6	0.8	1.7
Nil	19	2.5	5.5
Other	18	2.4	5.2
Presbyterian	61	8.2	17.7
Roman Catholic	141	18.9	41.0
Moslem	0	0.0	0.0
Jew	1	0.1	0.3
<b>Total</b>	<b>344</b>	<b>45.99</b>	<b>100.0</b>

#### Religion – unsentenced population

<i>Religion</i>	<i>Percentage</i>		
	<i>Unsentenced</i>	<i>Of Total</i>	<i>Of Unsentenced</i>
Church of Ireland	40	5.3	9.9
Free Presbyterian	35	4.7	8.7

Methodist	5	0.7	1.2
Nil	22	2.9	5.4
Other	36	4.8	8.9
Presbyterian	57	7.6	14.1
Roman Catholic	207	27.7	51.2
Moslem	2	0.3	0.5
Jew	0	0.0	0.0
<b>Total</b>	<b>404</b>	<b>54.01</b>	<b>100.0</b>

# Appendix IV: Summary of prisoner questionnaires and interviews

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## **Prisoner survey methodology**

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A voluntary, confidential and anonymous survey of a representative proportion of the main prisoner population was carried out for this inspection. In addition, a survey of all prisoners on the separated wings was conducted. The results of this survey formed part of the evidence-base for the inspection.

## **Choosing the sample size**

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

At the time of the survey on the 5th September 2005 the main prisoner population at HMP Maghaberry was 618. The baseline sample size was 120. Overall, this represented 19% of the main prisoner population.

In addition, all prisoners on the separated Roe and Bush wings were sampled. Therefore the baseline sample size for Roe separated prisoners was 30 and 49 for Bush separated prisoners. This represented 100% of the separated prisoners.

## **Selecting the sample**

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

Completion of the questionnaire was voluntary. Refusals were noted and no attempts were made to replace them. From the main prison population, six respondents refused to complete a questionnaire. Four prisoners from Roe separated wings and four from Bush separated wings refused to complete a questionnaire.

Interviews were carried out with any respondents with literacy difficulties. In total, six respondents were interviewed from the main population and none from the separated wings.

## **Methodology**

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

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

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

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

## **Response rates**

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In total, 105 main respondents completed and returned their questionnaires. This represented 17% of the prison population. The response rate was 88%. In addition to the six respondents who refused to complete a questionnaire, ten questionnaires were either not returned or were returned blank.

24 Roe separated prisoners completed and returned their questionnaires. The response rate was 80%. Four prisoners refused to complete a questionnaire and two questionnaires were not returned.

41 Bush separated prisoners completed and returned their questionnaires. The response rate was 84%. Four prisoners refused to complete a questionnaire and four were not returned.

## **Comparisons**

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

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

In addition, three further comparative documents are attached. Statistically significant differences between the responses of the Roe separated prisoners and the main prison population are reported in the first document. The second document compares Bush separated prisoners to the main prison population and the third compares Roe separated prisoners to Bush separated prisoners.

In all the above documents, statistically significant differences are highlighted. Statistical significance merely indicates whether there is a real difference between the figures, i.e. the

difference is not due to chance alone. Results that are significantly better are indicated by grey shading, results that are significantly worse are indicated by a black background and where there is no significant difference, there is no shading.



## Prisoner Survey Responses HMP Maghaberry 2005

**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

		HMP Maghaberry	Local Prisons Benchmark
	Any numbers highlighted in grey are significantly better than the local prisons benchmark		
	Any numbers highlighted in black are significantly worse than the local prisons benchmark		
	Numbers which are not highlighted show there is no significant difference between the 2005 survey and the local prisons benchmark		
<b>SECTION 1: General Information (not tested for significance)</b>			
1	Number of completed questionnaires returned		
2	Are you under 21 years of age?	3	3
3	Are you sentenced?	50	66
4	Is your sentence more than four years?	30	22
5	Do you have less than six months to serve?	15	30
6	Have you been in this prison less than a month?	12	21
7	Are you a foreign national?	13	12
8	Is English your first language?	97	92
9	Are you from a minority ethnic group? (including all those who did not tick White British, White Irish or White other categories)	0	24
10	Have you been in prison more than five times?	32	33
11	Do you have any children?	67	59
<b>SECTION 2: Transfers and Escorts</b>			
12a	We want to know about the most recent journey you have made either to or from court or between establishments. How was the cleanliness of the van? (very good/good)	26	40
12b	We want to know about the most recent journey you have made either to or from court or between establishments. How was your personal safety during the journey? (very good/good)	47	58
12c	We want to know about the most recent journey you have made either to or from court or between establishments. How was the comfort of the van? (very good/good)	13	11
12d	We want to know about the most recent journey you have made either to or from court or between establishments. How was the attention paid to your health needs?	21	27
12e	We want to know about the most recent journey you have made either to or from court or between establishments. How was the frequency of comfort breaks? (very good/good)	8	11
13	Did you spend more than four hours in the van?	3	5
14	Were you treated well/very well by the escort staff?	54	67
15a	Did you know where you were going when you left court or when transferred from another establishment?	88	80
15b	Before you arrived here did you receive any written information about what would happen to you?	12	13
15c	When you first arrived here did your property arrive at the same time as you?	75	83

## Key to tables

		HMP Maghaberry	Local Prisons Benchmark
	Any numbers highlighted in grey are significantly better than the local prisons benchmark		
	Any numbers highlighted in black are significantly worse than the local prisons benchmark		
	Numbers which are not highlighted show there is no significant difference between the 2005 survey and the local prisons benchmark		
<b>SECTION 3: Reception, first night and induction</b>			
17	Did you have any problems when you first arrived?	74	75
18	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	20	29
19a	Please answer the following question about reception: were you seen by a member of healthcare staff?	69	83
19b	Please answer the following question about reception: when you were searched, was this carried out in a sensitive and understanding way?	46	66
20	Were you treated well/very well in reception?	49	56
21a	Did you receive a reception pack on your day of arrival?	3	70
21b	Did you receive information about what was going to happen here on your day of arrival?	18	38
21c	Did you receive information about support for feeling depressed or suicidal on your day of arrival?	11	40
21d	Did you have the opportunity to have a shower on your day of arrival?	50	36
21e	Did you get the opportunity to have a free telephone call on your day of arrival?	18	47
21f	Did you get information about routine requests on your day of arrival?	21	28
21g	Did you get something to eat on your day of arrival?	51	81
21h	Did you get information about visits on your day of arrival?	22	37
22a	Did you have access to the chaplain/priest within the first 24 hours of you arriving at this prison?	26	46
22b	Did you have access to someone from healthcare within the first 24 hours?	64	64
22c	Did you have access to a Listener/Samaritans within the first 24 hours of you arriving at this prison?	4	30
22d	Did you have access to the prison shop/canteen within the first 24 hours?	30	19
23	Did you feel safe on your first night here?	53	71
24	Did you go on an induction course within the first week?	52	51
25	Did the induction course cover everything you needed to know about the prison?	31	37
<b>SECTION 4: Legal Rights and Respectful Custody</b>			
27a	Can you get access to legal reference books?	29	43
27b	Can you get access to communication with your solicitor or legal representative?	82	65
27c	Can you get access to information about leave to appeal?	32	44
27d	Can you get access to legal visits?	85	72
27e	Can you get access to help with legal costs?	54	49
27f	Can you get access to bail information?	43	42
28a	Please answer the following question about the wing/unit you are currently on: are you normally offered enough clean, suitable clothes for the week?	68	50
28b	Please answer the following question about the wing/unit you are currently on: are you normally able to have shower every day?	85	69

## Key to tables

	Any numbers highlighted in grey are significantly better than the local prisons benchmark	HMP Maghaberry	Local Prisons Benchmark
	Any numbers highlighted in black are significantly worse than the local prisons benchmark		
	Numbers which are not highlighted show there is no significant difference between the 2005 survey and the local prisons benchmark		
28c	Please answer the following question about the wing/unit you are currently on: do you normally receive clean sheets every week?	86	78
<b>SECTION 4: Legal Rights and Respectful Custody (continued)</b>			
28d	Please answer the following question about the wing/unit you are currently on: do you normally get cell cleaning materials every week?	75	61
28e	Please answer the following question about the wing/unit you are currently on: is your cell call bell normally answered within five minutes?	37	32
28f	Please answer the following question about the wing/unit you are currently on: is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	60	63
28g	Please answer the following question about the wing/unit you are currently on: can you normally get your stored property, if you need to?	41	31
29	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	60	41
30	Is the food in this prison good/very good?	17	20
31	Does the shop/canteen sell a wide enough range of goods to meet your needs?	46	39
32a	Is it easy/very easy to get a complaints form?	65	76
32b	Is it easy/very easy to get an application form?	56	83
33a	Do you feel applications are sorted out fairly?	16	41
33b	Do you feel complaints are sorted out fairly?	8	17
33c	Do you feel applications are sorted out promptly?	20	40
33d	Do you feel complaints are sorted out promptly?	11	17
33e	Are you given information about how to make an appeal?	24	29
34	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	22	12
35	Do you know how to apply to the Prisons and Probation Ombudsman?	41	37
36	Is it easy/very easy to contact the Independent Monitoring Board (IMB)?	22	31
37	Are you on the enhanced (top) level of the IEP scheme?	47	25
38	Do you feel you have been treated fairly in your experience of the IEP scheme?	44	44
39a	In the last six months have any members of staff physically restrained you (C & R)?	16	8
39b	In the last six months have you spent a night in the segregation unit?	22	13
40a	Do you feel your religious beliefs are respected?	58	53
40b	Are you able to speak to a religious leader of your faith in private if you want to?	67	60
41	Are you able to speak to a Listener at any time, if you want to?	25	64
42a	Do you have a member of staff, in this prison, that you can turn to for help if you have a problem?	54	63
42b	Do most staff, in this prison, treat you with respect?	67	68
<b>SECTION 5: Safety</b>			
44	Have you ever felt unsafe in this prison?	62	38
46	Have you been victimised (insulted or assaulted) by another prisoner?	31	23
47a	Have you had insulting remarks made about you, your family or friends since you have been here? (By prisoners)	18	12

## Key to tables

		HMP Maghaberry	Local Prisons Benchmark
	Any numbers highlighted in grey are significantly better than the local prisons benchmark		
	Any numbers highlighted in black are significantly worse than the local prisons benchmark		
	Numbers which are not highlighted show there is no significant difference between the 2005 survey and the local prisons benchmark		
47b	Have you been hit, kicked or assaulted since you have been here? (By prisoners)	16	9
<b>SECTION 5: Safety (continued)</b>			
47c	Have you been sexually abused since you have been here? (By prisoners)	1	1
47d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	5	4
47e	Have you been victimised because of drugs since you have been here? (By prisoners)	1	3
47f	Have you ever had your canteen/property taken since you have been here? (By prisoners)	4	4
47g	Have you ever been victimised because you were new here? (By prisoners)	3	5
47h	Have you ever been victimised because you were from a different part of the country than others since you have been here? (by prisoners)	4	4
48	Have you been victimised (insulted or assaulted) by a member of staff?	30	25
49a	Have you had insulting remarks made about you, your family or friends since you have been here? (By staff)	18	13
49b	Have you been hit, kicked or assaulted since you have been here? (By staff)	12	6
49c	Have you been sexually abused since you have been here? (By staff)	3	1
49d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	6	5
49e	Have you been victimised because of drugs since you have been here? (By staff)	1	4
49f	Have you ever been victimised because you were new here? (By staff)	9	4
49g	Have you ever been victimised because you were from a different part of the country than others since you have been here? (By staff)	3	4
50	Did you report any victimisation that you have experienced?	22	12
<b>SECTION 6: Healthcare</b>			
52	Do you think the overall quality of the healthcare is good/very good?	25	31
53a	Do you think the quality of healthcare from the doctor is good/very good?	25	33
53b	Do you think the quality of healthcare from the nurse is good/very good?	59	48
53c	Do you think the quality of healthcare from the dentist is good/very good?	41	21
53d	Do you think the quality of healthcare from the optician is good/very good?	29	14
53e	Do you think the quality of healthcare from the dispensing staff/pharmacist is good/very good?	40	37
54	Is it easy/very easy to get illegal drugs in this prison?	41	33
55a	Do you think you will have a problem with drugs when you leave this prison?	13	19
55b	Do you think you will have a problem with alcohol when you leave this prison?	19	13
<b>SECTION 7: Purposeful Activity</b>			
57a	Do you feel your job will help you on release?	26	20
57b	Do you feel your vocational or skills training will help you on release?	22	22
57c	Do you feel your education (including basic skills) will help you on release?	35	34

## Key to tables

		HMP Maghaberry	Local Prisons Benchmark
	Any numbers highlighted in grey are significantly better than the local prisons benchmark		
	Any numbers highlighted in black are significantly worse than the local prisons benchmark		
	Numbers which are not highlighted show there is no significant difference between the 2005 survey and the local prisons benchmark		
57d	Do you feel your offending behaviour programmes will help you on release?	21	18
57e	Do you feel your drug or alcohol programmes will help you on release?	17	21
<b>SECTION 7: Purposeful Activity (continued)</b>			
58	Do you go to the library at least once a week?	29	39
59	Can you get access to a newspaper every day?	55	40
60	On average, do you go to the gym at least twice a week?	46	29
61	On average, do you go outside for exercise three or more times a week?	51	46
62	On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	2	9
63	On average, do you spend ten or more hours out of your cell on a weekend day?(This includes hours at education, at work etc)	3	4
64	On average, do you go on association more than five times each week?	36	38
65	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	9	15
<b>SECTION 8: Resettlement</b>			
67	Did you first meet your personal officer in the first week?	10	11
68	Do you think your personal officer is helpful/very helpful?	18	20
69	Do you have a custody/sentence plan?	15	23
70	Were you involved/very involved in the development of your sentence plan?	14	14
71	Have you had any problems with sending or receiving mail?	47	44
72	Have you had any problems getting access to the telephones?	40	37
73	Did you have a visit in the first week that you were here?	65	34
74	Does this prison give you the opportunity to have the visits you are entitled to? (e.g. number and length of visit)	63	64
75a	Do you know who to contact, within this prison, to get help with finding a job on release?	25	38
75b	Do you know who to contact, within this prison, to get help with finding accommodation on release?	32	39
75c	Do you know who to contact, within this prison, to get help with your finances in preparation for release?	23	30
75d	Do you know who to contact, within this prison, to get help with claiming benefits on release?	29	45
75e	Do you know who to contact, within this prison, to get help with arranging a place at college/continuing education on release?	19	28
75f	Do you know who to contact within this prison to get help with external drugs courses etc	29	40
75g	Do you know who to contact, within this prison, to get help with continuity of healthcare on release?	31	32
76	Have you done anything, or has anything happened to you here that you think will make you less likely to offend in the future?	27	33



## Prisoner Survey Responses HMP Maghaberry 2005

**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

		Main wing prisoners	Bush separated prisoners
	Any numbers highlighted in grey are significantly better than the local prisons benchmark		
	Any numbers highlighted in black are significantly worse than the local prisons benchmark		
	Numbers which are not highlighted show there is no significant difference between the Bush separated unit and the main prisoner population		
<b>SECTION 1: General Information (not tested for significance)</b>			
1	Number of completed questionnaires returned	104	41
2	Are you under 21 years of age?	3	2
3	Are you sentenced?	50	51
4	Is your sentence more than four years?	26	44
5	Do you have less than six months to serve?	15	8
6	Have you been in this prison less than a month?	12	4
7	Are you a foreign national?	13	4
8	Is English your first language?	97	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	0
10	Have you been in prison more than five times?	32	10
11	Do you have any children?	67	65
<b>SECTION 2: Transfers and Escorts</b>			
12a	We want to know about the most recent journey you have made either to or from court or between establishments. How was the cleanliness of the van? (very good/good)	26	21
12b	We want to know about the most recent journey you have made either to or from court or between establishments. How was your personal safety during the journey? (very good/good)	47	35
12c	We want to know about the most recent journey you have made either to or from court or between establishments. How was the comfort of the van? (very good/good)	13	10
12d	We want to know about the most recent journey you have made either to or from court or between establishments. How was the attention paid to your health needs?	21	11
12e	We want to know about the most recent journey you have made either to or from court or between establishments. How was the frequency of comfort breaks? (very good/good)	8	10
13	Did you spend more than four hours in the van?	3	11
14	Were you treated well/very well by the escort staff?	54	38
15a	Did you know where you were going when you left court or when transferred from another establishment?	88	85
15b	Before you arrived here did you receive any written information about what would happen to you?	12	9
15c	When you first arrived here did your property arrive at the same time as you?	75	78

## Key to tables

		Main wing prisoners	Bush separated prisoners
	Any numbers highlighted in grey are significantly better than the local prisons benchmark		
	Any numbers highlighted in black are significantly worse than the local prisons benchmark		
	Numbers which are not highlighted show there is no significant difference between the Bush separated unit and the main prisoner population		
<b>SECTION 3: Reception, first night and induction</b>			
17	Did you have any problems when you first arrived?	74	71
18	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	20	11
19a	Please answer the following question about reception: were you seen by a member of healthcare staff?	69	57
19b	Please answer the following question about reception: when you were searched, was this carried out in a sensitive and understanding way?	46	21
20	Were you treated well/very well in reception?	49	26
21a	Did you receive a reception pack on your day of arrival?	3	8
21b	Did you receive information about what was going to happen here on your day of arrival?	18	8
21c	Did you receive information about support for feeling depressed or suicidal on your day of arrival?	11	4
21d	Did you have the opportunity to have a shower on your day of arrival?	50	35
21e	Did you get the opportunity to have a free telephone call on your day of arrival?	18	8
21f	Did you get information about routine requests on your day of arrival?	21	17
21g	Did you get something to eat on your day of arrival?	51	58
21h	Did you get information about visits on your day of arrival?	22	15
22a	Did you have access to the chaplain/priest within the first 24 hours of you arriving at this prison?	26	9
22b	Did you have access to someone from healthcare within the first 24 hours?	64	53
22c	Did you have access to a Listener/Samaritans within the first 24 hours of you arriving at this prison?	4	0
22d	Did you have access to the prison shop/canteen within the first 24 hours?	30	9
23	Did you feel safe on your first night here?	53	30
24	Did you go on an induction course within the first week?	52	57
25	Did the induction course cover everything you needed to know about the prison?	31	18
<b>SECTION 4: Legal Rights and Respectful Custody</b>			
27a	Can you get access to legal reference books?	29	6
27b	Can you get access to communication with your solicitor or legal representative?	82	91
27c	Can you get access to information about leave to appeal?	32	24
27d	Can you get access to legal visits?	85	91
27e	Can you get access to help with legal costs?	54	68
27f	Can you get access to bail information?	43	42
28a	Please answer the following question about the wing/unit you are currently on: are you normally offered enough clean, suitable clothes for the week?	68	82
28b	Please answer the following question about the wing/unit you are currently on: are you normally able to have shower every day?	85	63
28c	Please answer the following question about the wing/unit you are currently on: do you normally receive clean sheets every week?	86	85

## Key to tables

		Main wing prisoners	Bush separated prisoners
	Any numbers highlighted in grey are significantly better than the local prisons benchmark		
	Any numbers highlighted in black are significantly worse than the local prisons benchmark		
	Numbers which are not highlighted show there is no significant difference between the Bush separated unit and the main prisoner population		
<b>SECTION 4: Legal Rights and Respectful Custody (continued)</b>			
28d	Please answer the following question about the wing/unit you are currently on: do you normally get cell cleaning materials every week?	75	35
28e	Please answer the following question about the wing/unit you are currently on: is your cell call bell normally answered within five minutes?	37	27
28f	Please answer the following question about the wing/unit you are currently on: is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	60	84
28g	Please answer the following question about the wing/unit you are currently on: can you normally get your stored property, if you need to?	41	35
29	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	60	64
30	Is the food in this prison good/very good?	17	0
31	Does the shop/canteen sell a wide enough range of goods to meet your needs?	46	32
32a	Is it easy/very easy to get a complaints form?	65	87
32b	Is it easy/very easy to get an application form?	56	71
33a	Do you feel applications are sorted out fairly?	16	11
33b	Do you feel complaints are sorted out fairly?	8	4
33c	Do you feel applications are sorted out promptly?	20	17
33d	Do you feel complaints are sorted out promptly?	11	13
33e	Are you given information about how to make an appeal?	24	35
34	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	22	30
35	Do you know how to apply to the Prisons and Probation Ombudsman?	41	68
36	Is it easy/very easy to contact the Independent Monitoring Board (IMB)?	22	10
37	Are you on the enhanced (top) level of the IEP scheme?	N/A	N/A
38	Do you feel you have been treated fairly in your experience of the IEP scheme?	N/A	N/A
39a	In the last six months have any members of staff physically restrained you (C & R)?	16	8
39b	In the last six months have you spent a night in the segregation unit?	22	27
40a	Do you feel your religious beliefs are respected?	58	35
40b	Are you able to speak to a religious leader of your faith in private if you want to?	67	56
41	Are you able to speak to a Listener at any time, if you want to?	25	2
42a	Do you have a member of staff, in this prison, that you can turn to for help if you have a problem?	54	10
42b	Do most staff, in this prison, treat you with respect?	67	38
<b>SECTION 5: Safety</b>			
44	Have you ever felt unsafe in this prison?	62	75
46	Have you been victimised (insulted or assaulted) by another prisoner?	31	29
47a	Have you had insulting remarks made about you, your family or friends since you have been here? (By prisoners)	18	18
47b	Have you been hit, kicked or assaulted since you have been here? (By prisoners)	16	11

## Key to tables

		Main wing prisoners	Bush separated prisoners
	Any numbers highlighted in grey are significantly better than the local prisons benchmark		
	Any numbers highlighted in black are significantly worse than the local prisons benchmark		
	Numbers which are not highlighted show there is no significant difference between the Bush separated unit and the main prisoner population		
<b>SECTION 5: Safety (continued)</b>			
47c	Have you been sexually abused since you have been here? (By prisoners)	1	0
47d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	5	18
47e	Have you been victimised because of drugs since you have been here? (By prisoners)	1	0
47f	Have you ever had your canteen/property taken since you have been here? (By prisoners)	4	2
47g	Have you ever been victimised because you were new here? (By prisoners)	3	0
47h	Have you ever been victimised because you were from a different part of the country than others since you have been here? (By prisoners)	4	9
48	Have you been victimised (insulted or assaulted) by a member of staff?	30	52
49a	Have you had insulting remarks made about you, your family or friends since you have been here? (By staff)	18	33
49b	Have you been hit, kicked or assaulted since you have been here? (By staff)	12	17
49c	Have you been sexually abused since you have been here? (By staff)	3	10
49d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	6	13
49e	Have you been victimised because of drugs since you have been here? (By staff)	1	2
49f	Have you ever been victimised because you were new here? (By staff)	9	4
49g	Have you ever been victimised because you were from a different part of the country than others since you have been here? (By staff)	3	10
50	Did you report any victimisation that you have experienced?	22	28
<b>SECTION 6: Healthcare</b>			
52	Do you think the overall quality of the healthcare is good/very good?	25	27
53a	Do you think the quality of healthcare from the doctor is good/very good?	25	22
53b	Do you think the quality of healthcare from the nurse is good/very good?	59	53
53c	Do you think the quality of healthcare from the dentist is good/very good?	41	44
53d	Do you think the quality of healthcare from the optician is good/very good?	29	10
53e	Do you think the quality of healthcare from the dispensing staff/pharmacist is good/very good?	40	27
54	Is it easy/very easy to get illegal drugs in this prison?	41	4
55a	Do you think you will have a problem with drugs when you leave this prison?	13	5
55b	Do you think you will have a problem with alcohol when you leave this prison?	19	9
<b>SECTION 7: Purposeful Activity</b>			
57a	Do you feel your job will help you on release?	26	0
57b	Do you feel your vocational or skills training will help you on release?	22	2
57c	Do you feel your education (including basic skills) will help you on release?	35	12
57d	Do you feel your offending behaviour programmes will help you on release?	21	0



## Prisoner Survey Responses HMP Maghaberry 2005

**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

		Main population	Roe separated prisoners
	Any numbers highlighted in grey are significantly better than the main prison population		
	Any numbers highlighted in black are significantly worse than the main prison population		
	Numbers which are not highlighted show there is no significant difference between the Roe separated unit and the main prison population		
<b>SECTION 1: General Information (not tested for significance)</b>			
1	Number of completed questionnaires returned	104	24
2	Are you under 21 years of age?	3	3
3	Are you sentenced?	50	58
4	Is your sentence more than four years?	26	53
5	Do you have less than six months to serve?	15	10
6	Have you been in this prison less than a month?	12	0
7	Are you a foreign national?	13	18
8	Is English your first language?	97	66
9	Are you from a minority ethnic group? (including all those who did not tick White British, White Irish or White other categories)	0	0
10	Have you been in prison more than five times?	32	10
11	Do you have any children?	67	59
<b>SECTION 2: Transfers and Escorts</b>			
12a	We want to know about the most recent journey you have made either to or from court or between establishments. How was the cleanliness of the van? (very good/good)	26	10
12b	We want to know about the most recent journey you have made either to or from court or between establishments. How was your personal safety during the journey? (very good/good)	47	11
12c	We want to know about the most recent journey you have made either to or from court or between establishments. How was the comfort of the van? (very good/good)	13	4
12d	We want to know about the most recent journey you have made either to or from court or between establishments. How was the attention paid to your health needs?	21	12
12e	We want to know about the most recent journey you have made either to or from court or between establishments. How was the frequency of comfort breaks? (very good/good)	8	0
13	Did you spend more than four hours in the van?	3	10
14	Were you treated well/very well by the escort staff?	54	37
15a	Did you know where you were going when you left court or when transferred from another establishment?	88	79
15b	Before you arrived here did you receive any written information about what would happen to you?	12	0
15c	When you first arrived here did your property arrive at the same time as you?	75	32

## Key to tables

		Main population	Roe separated prisoners
	Any numbers highlighted in grey are significantly better than the main prison population		
	Any numbers highlighted in black are significantly worse than the main prison population		
	Numbers which are not highlighted show there is no significant difference between the Roe separated unit and the main prison population		
<b>SECTION 3: Reception, first night and induction</b>			
17	Did you have any problems when you first arrived?	74	84
18	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	20	4
19a	Please answer the following question about reception; were you seen by a member of healthcare staff?	69	46
19b	Please answer the following question about reception; when you were searched, was this carried out in a sensitive and understanding way?	46	10
20	Were you treated well/very well in reception?	49	3
21a	Did you receive a reception pack on your day of arrival?	3	3
21b	Did you receive information about what was going to happen here on your day of arrival?	18	0
21c	Did you receive information about support for feeling depressed or suicidal on your day of arrival?	11	0
21d	Did you have the opportunity to have a shower on your day of arrival?	50	28
21e	Did you get the opportunity to have a free telephone call on your day of arrival?	18	10
21f	Did you get information about routine requests on your day of arrival?	21	0
21g	Did you get something to eat on your day of arrival?	51	48
21h	Did you get information about visits on your day of arrival?	22	3
22a	Did you have access to the chaplain/priest within the first 24 hours of you arriving at this prison?	26	14
22b	Did you have access to someone from healthcare within the first 24 hours?	64	35
22c	Did you have access to a Listener/Samaritans within the first 24 hours of you arriving at this prison?	4	0
22d	Did you have access to the prison shop/canteen within the first 24 hours?	30	17
23	Did you feel safe on your first night here?	53	13
24	Did you go on an induction course within the first week?	52	69
25	Did the induction course cover everything you needed to know about the prison?	31	21
<b>SECTION 4: Legal Rights and Respectful Custody</b>			
27a	Can you get access to legal reference books?	29	12
27b	Can you get access to communication with your solicitor or legal representative?	82	76
27c	Can you get access to information about leave to appeal?	32	25
27d	Can you get access to legal visits?	85	85
27e	Can you get access to help with legal costs?	54	65
27f	Can you get access to bail information?	43	50
28a	Please answer the following question about the wing/unit you are currently on: are you normally offered enough clean, suitable clothes for the week?	68	65
28b	Please answer the following question about the wing/unit you are currently on: are you normally able to have shower every day?	85	66

## Key to tables

		Main population	Roe separated prisoners
	Any numbers highlighted in grey are significantly better than the main prison population		
	Any numbers highlighted in black are significantly worse than the main prison population		
	Numbers which are not highlighted show there is no significant difference between the Roe separated unit and the main prison population		
28c	Please answer the following question about the wing/unit you are currently on: do you normally receive clean sheets every week?	86	22
<b>SECTION 4: Legal Rights and Respectful Custody (continued)</b>			
28d	Please answer the following question about the wing/unit you are currently on: do you normally get cell cleaning materials every week?	75	29
28e	Please answer the following question about the wing/unit you are currently on: is your cell call bell normally answered within five minutes?	37	22
28f	Please answer the following question about the wing/unit you are currently on: is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	60	46
28g	Please answer the following question about the wing/unit you are currently on: can you normally get your stored property, if you need to?	41	22
29	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	60	66
30	Is the food in this prison good/very good?	17	0
31	Does the shop/canteen sell a wide enough range of goods to meet your needs?	46	3
32a	Is it easy/very easy to get a complaints form?	65	72
32b	Is it easy/very easy to get an application form?	56	55
33a	Do you feel applications are sorted out fairly?	16	11
33b	Do you feel complaints are sorted out fairly?	8	14
33c	Do you feel applications are sorted out promptly?	20	32
33d	Do you feel complaints are sorted out promptly?	11	36
33e	Are you given information about how to make an appeal?	24	46
34	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	22	32
35	Do you know how to apply to the Prisons and Probation Ombudsman?	41	83
36	Is it easy/very easy to contact the Independent Monitoring Board (IMB)?	22	20
37	Are you on the enhanced (top) level of the IEP scheme?	n/a	n/a
38	Do you feel you have been treated fairly in your experience of the IEP scheme?	n/a	n/a
39a	In the last six months have any members of staff physically restrained you (C & R)?	16	0
39b	In the last six months have you spent a night in the segregation unit?	22	12
40a	Do you feel your religious beliefs are respected?	58	23
40b	Are you able to speak to a religious leader of your faith in private if you want to?	67	77
41	Are you able to speak to a Listener at any time, if you want to?	25	11
42a	Do you have a member of staff, in this prison, that you can turn to for help if you have a problem?	54	11
42b	Do most staff, in this prison, treat you with respect?	67	32
<b>SECTION 5: Safety</b>			
44	Have you ever felt unsafe in this prison?	62	83
46	Have you been victimised (insulted or assaulted) by another prisoner?	31	67

## Key to tables

		Main population	Roe separated prisoners
	Any numbers highlighted in grey are significantly better than the main prison population		
	Any numbers highlighted in black are significantly worse than the main prison population		
	Numbers which are not highlighted show there is no significant difference between the Roe separated unit and the main prison population		
47a	Have you had insulting remarks made about you, your family or friends since you have been here? (By prisoners)	18	47
47b	Have you been hit, kicked or assaulted since you have been here? (By prisoners)	16	20
<b>SECTION 5: Safety (continued)</b>			
47c	Have you been sexually abused since you have been here? (By prisoners)	1	0
47d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	5	30
47e	Have you been victimised because of drugs since you have been here? (By prisoners)	1	0
47f	Have you ever had your canteen/property taken since you have been here? (By prisoners)	4	0
47g	Have you ever been victimised because you were new here? (By prisoners)	3	0
47h	Have you ever been victimised because you were from a different part of the country than others since you have been here? (by prisoners)	4	17
48	Have you been victimised (insulted or assaulted) by a member of staff?	30	66
49a	Have you had insulting remarks made about you, your family or friends since you have been here? (By staff)	18	48
49b	Have you been hit, kicked or assaulted since you have been here? (By staff)	12	0
49c	Have you been sexually abused since you have been here? (By staff)	3	0
49d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	6	28
49e	Have you been victimised because of drugs since you have been here? (By staff)	1	3
49f	Have you ever been victimised because you were new here? (By staff)	9	10
49g	Have you ever been victimised because you were from a different part of the country than others since you have been here? (By staff)	3	17
50	Did you report any victimisation that you have experienced?	22	44
<b>SECTION 6: Healthcare</b>			
52	Do you think the overall quality of the healthcare is good/very good?	25	10
53a	Do you think the quality of healthcare from the doctor is good/very good?	25	10
53b	Do you think the quality of healthcare from the nurse is good/very good?	59	38
53c	Do you think the quality of healthcare from the dentist is good/very good?	41	55
53d	Do you think the quality of healthcare from the optician is good/very good?	29	28
53e	Do you think the quality of healthcare from the dispensing staff/pharmacist is good/very good?	40	20
54	Is it easy/very easy to get illegal drugs in this prison?	41	4
55a	Do you think you will have a problem with drugs when you leave this prison?	13	0
55b	Do you think you will have a problem with alcohol when you leave this prison?	19	0
<b>SECTION 7: Purposeful Activity</b>			
57a	Do you feel your job will help you on release?	26	5
57b	Do you feel your vocational or skills training will help you on release?	22	5

## Key to tables

		Main population	Roe separated prisoners
	Any numbers highlighted in grey are significantly better than the main prison population		
	Any numbers highlighted in black are significantly worse than the main prison population		
	Numbers which are not highlighted show there is no significant difference between the Roe separated unit and the main prison population		
57c	Do you feel your education (including basic skills) will help you on release?	36	33
57d	Do you feel your offending behaviour programmes will help you on release?	21	5
57e	Do you feel your drug or alcohol programmes will help you on release?	17	0
<b>SECTION 7: Purposeful Activity (continued)</b>			
58	Do you go to the library at least once a week?	29	10
59	Can you get access to a newspaper every day?	55	87
60	On average, do you go to the gym at least twice a week?	46	87
61	On average, do you go outside for exercise three or more times a week?	51	80
62	On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	2	4
63	On average, do you spend ten or more hours out of your cell on a weekend day?(This includes hours at education, at work etc)	3	4
64	On average, do you go on association more than five times each week?	36	52
65	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	9	0
<b>SECTION 8: Resettlement</b>			
67	Did you first meet your personal officer in the first week?	10	0
68	Do you think your personal officer is helpful/very helpful?	18	0
69	Do you have a custody/sentence plan?	15	3
70	Were you involved/very involved in the development of your sentence plan?	14	3
71	Have you had any problems with sending or receiving mail?	47	83
72	Have you had any problems getting access to the telephones?	40	58
73	Did you have a visit in the first week that you were here?	65	87
74	Does this prison give you the opportunity to have the visits you are entitled to? (e.g. number and length of visit)	66	26
75a	Do you know who to contact, within this prison, to get help with finding a job on release?	25	17
75b	Do you know who to contact, within this prison, to get help with finding accommodation on release?	32	21
75c	Do you know who to contact, within this prison, to get help with your finances in preparation for release?	23	17
75d	Do you know who to contact, within this prison, to get help with claiming benefits on release?	29	17
75e	Do you know who to contact, within this prison, to get help with arranging a place at college/continuing education on release?	19	17
75f	Do you know who to contact within this prison to get help with external drugs courses etc	29	0
75g	Do you know who to contact, within this prison, to get help with continuity of healthcare on release?	31	17
76	Have you done anything, or has anything happened to you here that you think will make you less likely to offend in the future?	27	20



## Prisoner Survey Responses Maghaberry 2005

**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 Separated prisoners	Roe Separated prisoners
	Any numbers highlighted in grey are significantly better than the other response group		
	Any numbers highlighted in black are significantly worse than the other response group		
	Numbers which are not highlighted show there is no significant difference between the two response groups		
<b>SECTION 1: General Information (not tested for significance)</b>			
1	Number of completed questionnaires returned	41	24
2	Are you under 21 years of age?	2	3
3	Are you sentenced?	51	56
4	Is your sentence more than four years?	44	53
5	Do you have less than six months to serve?	8	10
6	Have you been in this prison less than a month?	4	0
7	Are you a foreign national?	4	18
8	Is English your first language?	98	66
9	Are you from a minority ethnic group? (including all those who did not tick White British, White Irish or White other categories)	0	0
10	Have you been in prison more than five times?	10	10
11	Do you have any children?	65	59
<b>SECTION 2: Transfers and Escorts</b>			
12a	We want to know about the most recent journey you have made either to or from court or between establishments. How was the cleanliness of the van? (very good/good)	21	10
12b	We want to know about the most recent journey you have made either to or from court or between establishments. How was your personal safety during the journey? (very good/good)	35	11
12c	We want to know about the most recent journey you have made either to or from court or between establishments. How was the comfort of the van? (very good/good)	10	4
12d	We want to know about the most recent journey you have made either to or from court or between establishments. How was the attention paid to your health needs?	11	12
12e	We want to know about the most recent journey you have made either to or from court or between establishments. How was the frequency of comfort breaks? (very good/good)	10	0
13	Did you spend more than four hours in the van?	11	10
14	Were you treated well/very well by the escort staff?	38	37
15a	Did you know where you were going when you left court or when transferred from another establishment?	85	79
15b	Before you arrived here did you receive any written information about what would happen to you?	9	0
15c	When you first arrived here did your property arrive at the same time as you?	78	32

## Key to tables

		Bush Separated prisoners	Roe Separated prisoners
	Any numbers highlighted in grey are significantly better than the other response group		
	Any numbers highlighted in black are significantly worse than the other response group		
	Numbers which are not highlighted show there is no significant difference between the two response groups		
<b>SECTION 3: Reception, first night and induction</b>			
17	Did you have any problems when you first arrived?	71	84
18	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	11	4
19a	Please answer the following question about reception: were you seen by a member of healthcare staff?	57	46
19b	Please answer the following question about reception: when you were searched, was this carried out in a sensitive and understanding way?	21	10
20	Were you treated well/very well in reception?	26	3
21a	Did you receive a reception pack on your day of arrival?	8	3
21b	Did you receive information about what was going to happen here on your day of arrival?	8	0
21c	Did you receive information about support for feeling depressed or suicidal on your day of arrival?	4	0
21d	Did you have the opportunity to have a shower on your day of arrival?	35	28
21e	Did you get the opportunity to have a free telephone call on your day of arrival?	8	10
21f	Did you get information about routine requests on your day of arrival?	17	0
21g	Did you get something to eat on your day of arrival?	58	48
21h	Did you get information about visits on your day of arrival?	15	3
22a	Did you have access to the chaplain/priest within the first 24 hours of you arriving at this prison?	9	14
22b	Did you have access to someone from healthcare within the first 24 hours?	53	35
22c	Did you have access to a Listener/Samaritans within the first 24 hours of you arriving at this prison?	0	0
22d	Did you have access to the prison shop/canteen within the first 24 hours?	9	17
23	Did you feel safe on your first night here?	30	13
24	Did you go on an induction course within the first week?	57	69
25	Did the induction course cover everything you needed to know about the prison?	18	21
<b>SECTION 4: Legal Rights and Respectful Custody</b>			
27a	Can you get access to legal reference books?	6	12
27b	Can you get access to communication with your solicitor or legal representative?	91	76
27c	Can you get access to information about leave to appeal?	24	25
27d	Can you get access to legal visits?	91	85
27e	Can you get access to help with legal costs?	68	65
27f	Can you get access to bail information?	42	50
28a	Please answer the following question about the wing/unit you are currently on: are you normally offered enough clean, suitable clothes for the week?	82	65
28b	Please answer the following question about the wing/unit you are currently on: are you normally able to have shower every day?	63	66
28c	Please answer the following question about the wing/unit you are currently on: do you normally receive clean sheets every week?	85	22

## Key to tables

		Bush Separated prisoners	Roe Separated prisoners
	Any numbers highlighted in grey are significantly better than the other response group		
	Any numbers highlighted in black are significantly worse than the other response group		
	Numbers which are not highlighted show there is no significant difference between the two response groups		
<b>SECTION 4: Legal Rights and Respectful Custody (continued)</b>			
28d	Please answer the following question about the wing/unit you are currently on: do you normally get cell cleaning materials every week?	35	29
28e	Please answer the following question about the wing/unit you are currently on: is your cell call bell normally answered within five minutes?	27	22
28f	Please answer the following question about the wing/unit you are currently on: is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	84	46
28g	Please answer the following question about the wing/unit you are currently on: can you normally get your stored property, if you need to?	35	22
29	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	64	66
30	Is the food in this prison good/very good?	0	0
31	Does the shop/canteen sell a wide enough range of goods to meet your needs?	32	3
32a	Is it easy/very easy to get a complaints form?	87	72
32b	Is it easy/very easy to get an application form?	71	52
33a	Do you feel applications are sorted out fairly?	11	11
33b	Do you feel complaints are sorted out fairly?	4	14
33c	Do you feel applications are sorted out promptly?	17	32
33d	Do you feel complaints are sorted out promptly?	13	36
33e	Are you given information about how to make an appeal?	35	46
34	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	30	32
35	Do you know how to apply to the Prisons and Probation Ombudsman?	68	83
36	Is it easy/very easy to contact the Independent Monitoring Board (IMB)?	10	20
37	Are you on the enhanced (top) level of the IEP scheme?	n/a	n/a
38	Do you feel you have been treated fairly in your experience of the IEP scheme?	n/a	n/a
39a	In the last six months have any members of staff physically restrained you (C & R)?	8	0
39b	In the last six months have you spent a night in the segregation unit?	27	12
40a	Do you feel your religious beliefs are respected?	35	23
40b	Are you able to speak to a religious leader of your faith in private if you want to?	56	77
41	Are you able to speak to a Listener at any time, if you want to?	2	11
42a	Do you have a member of staff, in this prison, that you can turn to for help if you have a problem?	10	11
42b	Do most staff, in this prison, treat you with respect?	38	32
<b>SECTION 5: Safety</b>			
44	Have you ever felt unsafe in this prison?	75	83
46	Have you been victimised (insulted or assaulted) by another prisoner?	29	67
47a	Have you had insulting remarks made about you, your family or friends since you have been here? (By prisoners)	18	47
47b	Have you been hit, kicked or assaulted since you have been here? (By prisoners)	11	20

## Key to tables

		Bush Separated prisoners	Roe Separated prisoners
	Any numbers highlighted in grey are significantly better than the other response group		
	Any numbers highlighted in black are significantly worse than the other response group		
	Numbers which are not highlighted show there is no significant difference between the two response groups		
<b>SECTION 5: Safety (continued)</b>			
47c	Have you been sexually abused since you have been here? (By prisoners)	0	0
47d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	18	30
47e	Have you been victimised because of drugs since you have been here? (By prisoners)	0	0
47f	Have you ever had your canteen/property taken since you have been here? (By prisoners)	2	0
47g	Have you ever been victimised because you were new here? (By prisoners)	0	0
47h	Have you ever been victimised because you were from a different part of the country than others since you have been here? (by prisoners)	9	17
48	Have you been victimised (insulted or assaulted) by a member of staff?	52	66
49a	Have you had insulting remarks made about you, your family or friends since you have been here? (By staff)	33	48
49b	Have you been hit, kicked or assaulted since you have been here? (By staff)	17	0
49c	Have you been sexually abused since you have been here? (By staff)	10	0
49d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	13	28
49e	Have you been victimised because of drugs since you have been here? (By staff)	2	3
49f	Have you ever been victimised because you were new here? (By staff)	4	10
49g	Have you ever been victimised because you were from a different part of the country than others since you have been here? (By staff)	10	17
50	Did you report any victimisation that you have experienced?	28	44
<b>SECTION 6: Healthcare</b>			
52	Do you think the overall quality of the healthcare is good/very good?	27	10
53a	Do you think the quality of healthcare from the doctor is good/very good?	22	10
53b	Do you think the quality of healthcare from the nurse is good/very good?	53	38
53c	Do you think the quality of healthcare from the dentist is good/very good?	44	55
53d	Do you think the quality of healthcare from the optician is good/very good?	10	28
53e	Do you think the quality of healthcare from the dispensing staff/pharmacist is good/very good?	27	20
54	Is it easy/very easy to get illegal drugs in this prison?	4	4
55a	Do you think you will have a problem with drugs when you leave this prison?	5	0
55b	Do you think you will have a problem with alcohol when you leave this prison?	9	0
<b>SECTION 7: Purposeful Activity</b>			
57a	Do you feel your job will help you on release?	0	5
57b	Do you feel your vocational or skills training will help you on release?	2	5
57c	Do you feel your education (including basic skills) will help you on release?	12	33
57d	Do you feel your offending behaviour programmes will help you on release?	0	5

## Key to tables

		Bush Separated prisoners	Roe Separated prisoners
	Any numbers highlighted in grey are significantly better than the other response group		
	Any numbers highlighted in black are significantly worse than the other response group		
	Numbers which are not highlighted show there is no significant difference between the two response groups		
57e	Do you feel your drug or alcohol programmes will help you on release?	2	0
<b>SECTION 7: Purposeful Activity (continued)</b>			
58	Do you go to the library at least once a week?	11	10
59	Can you get access to a newspaper every day?	68	87
60	On average, do you go to the gym at least twice a week?	72	87
61	On average, do you go outside for exercise three or more times a week?	57	80
62	On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	2	4
63	On average, do you spend ten or more hours out of your cell on a weekend day?(This includes hours at education, at work etc)	2	4
64	On average, do you go on association more than five times each week?	37	52
65	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	2	0
<b>SECTION 8: Resettlement</b>			
67	Did you first meet your personal officer in the first week?	4	0
68	Do you think your personal officer is helpful/very helpful?	2	0
69	Do you have a custody/sentence plan?	0	3
70	Were you involved/very involved in the development of your sentence plan?	0	3
71	Have you had any problems with sending or receiving mail?	56	83
72	Have you had any problems getting access to the telephones?	59	58
73	Did you have a visit in the first week that you were here?	88	87
74	Does this prison give you the opportunity to have the visits you are entitled to? (e.g. number and length of visit)	58	26
75a	Do you know who to contact, within this prison, to get help with finding a job on release?	11	17
75b	Do you know who to contact, within this prison, to get help with finding accommodation on release?	15	21
75c	Do you know who to contact, within this prison, to get help with your finances in preparation for release?	9	17
75d	Do you know who to contact, within this prison, to get help with claiming benefits on release?	11	17
75e	Do you know who to contact, within this prison, to get help with arranging a place at college/continuing education on release?	11	17
75f	Do you know who to contact within this prison to get help with external drugs courses etc	14	0
75g	Do you know who to contact, within this prison, to get help with continuity of healthcare on release?	13	17
76	Have you done anything, or has anything happened to you here that you think will make you less likely to offend in the future?	24	20



**Maghaberry Prison Inspection October 2005**  
**N.I. Prison Service Action Plan**



# Maghaberry Prison Inspection October 2005 – N.I. Prison Service Action Plan

Rec No	Recommendation	Accept Y/N	Driver	Action	Target date
9.1	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)	Yes	GOV	Both a first night strategy and a comprehensive induction programme will be developed and implemented. Specific staff will be selected and trained to deliver the induction programme and Maghaberry will introduce a prisoner listener/peer support scheme.	30 September 2006.
9.2	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 victims.	Yes	GOV	A revised anti-bullying policy, as part of the Safer Custody agenda, has been developed and is being piloted in Bann House. After evaluation the procedures will be introduced to the rest of the establishment. In addition the Scottish Prison Service (SPS) has been commissioned to conduct a full prisoner survey in September 2006 which will encompass anti-bullying and self harm and suicide issues. The learning from this survey will be incorporated into the policy as it becomes available.	Procedures initially rolled out by July 2006. Survey conducted September 2006. Policy revised by December 2006.
9.3	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)	Yes	HQ/GOV	A revised local procedure will be introduced to reflect the needs of the prison population in Maghaberry and will include appropriate supportive therapeutic interventions. Also, the Prison Service Management Board (PSMB) has decided on a twin track approach for the Service in line with the McClelland report. This will include making improvements to the PAR 1 process, whilst, at the same time, developing (by the end of March 2007) a system similar to HMPS ACCT, appropriately tailored to the needs of NIPS. In addition, a Safer Custody group has been established, chaired by the Deputy Governor and improvements have been made to case conferencing procedures. (See also 9.33)	Ongoing. 31 March 2007. Safer Custody Group in place.

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9.4	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)	Yes (in principle)	HQ	In line with Blueprint programme the Prison Service will develop initiatives to take forward a culture change and, in particular, to ensure that all staff are provided with training in the skills and attributes which Personal Officers should display. Training and familiarisation with resettlement issues will be provided to staff, with the emphasis on the role of the officer in helping prisoners address their offending behaviour in preparation for release.	To be developed in line with Blueprint, as a priority for active engagement.
9.5	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)	Yes	HQ	A review of the internal complaints system was completed in March 06, and further training, to enhance the skills of staff in managing complaints at the initial stages, will be provided by October 06. A prisoner may make formal complaints about any issue, including mistreatment by staff, using the procedure laid down in Prison Rules, which includes the prisoner's right to seek redress through the Prisoner Ombudsman. Prisoners may also approach a member of the IMB and discuss any issue confidentially. Investigations against staff are completed following the required procedures laid down in the COCD for staff. Complaints will be monitored at a local level and at PSHQ.	Training to be provided by October 2006.
9.6	The kitchen should be fully refurbished or replaced. (HP45)	Yes	HQ	Options for the replacement of Maghberry kitchen are under active consideration. A final list of options has been agreed and capital costs are being prepared for inclusion in an outline business case. Discussions with contractors are ongoing.	Work scheduled for completion by October 2007.
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. (HP46)	Yes	HQ/GOV	Initiatives are currently being developed to provide additional constructive activity places, including the redevelopment of the workshops and reviewing the length of the working day. A second classroom is being provided in each of the separated houses. However, the scope is inevitably constrained by funding and space available. A pilot programme will be implemented in September 2006 to provide vocational skills training to help address the needs of the high turnover of short sentenced prisoners.	Pilot programme in place by September 2006.

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9.8	Management of movements should improve so that prisoners reach their work and education places on time and remain for the published duration. (HP47)	Yes	GOV	PSHQ conducted an audit in February 2006. An activity co-ordinator has been appointed in support of the movements Senior Officer to comply with this recommendation.	Actioned.
9.9	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)	Yes	HQ/GOV	A Senior Officer has been appointed to fulfil the role of Equality & Diversity Officer and a method of monitoring statistics will be developed. An Equality and Diversity Policy is being drafted.	Policy & procedures drafted by October 2006.
9.10	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)	Yes	HQ/GOV	A comprehensive review of the management of life sentence prisoners will be published shortly. This will include a detailed action plan to address the issues raised in this recommendation. In addition to current facilities in Martin House, Management are considering opening A, B & C landings of Mourne House for life sentenced prisoners.	Review of Life Sentenced Prisoners published by July 2006.
9.11	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)	Yes	GOV	The Governor of Inmate Services will conduct a review of policy and develop an action plan. Local policy will be quality assured by PSHQ.	Review to be completed by December 2006.
9.12	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)	Yes	GOV	Estate Management will take this project forward and will submit recommendations to Maghaberry Management for their approval. The erection of two booths, with seating facilities, within the Reception area to Perspex facilitate private committal interviews is one of the options being considered.	Recommendations submitted by June 2006.
9.13	Prisoner should be given information, in reception or on their first night, in a form they can understand about what to expect in their first 24 hours in custody. (1.31)	Yes	GOV	A Principal Officer has been appointed to produce a short information booklet for prisoners. Induction information will be made available in several languages and advice is currently being sought from other agencies. Induction information will also be made available via the use of television screens in Reception and multi-lingual headphone sets will be provided for foreign nationals.	All information in place by 30 September 2006.

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9.14	Refreshments, as well as means to pass the time in holding rooms, should be provided in reception. (1.32)	Yes	GOV GOV	Televisions will be installed in the holding rooms in the Reception area. Newspapers and hot drinks will be made available for new committals in the Reception area.	31 May 2006.
9.15	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. (See also main recommendation HP40) (1.33)	Yes	GOV	All newly committed prisoners will be given the opportunity to shower on the day of their arrival. Telephones are being installed in Reception, and all prisoners will be given the opportunity to make a telephone call on the day of their arrival.	31 May 2006.
9.16	Night staff should be aware of the location and needs of new prisoners.	Yes	GOV	All new prisoners are centrally located on the committal landing. A cell location plan will be completed each evening to ensure night staff are aware of the location of new committals, this will be greatly enhanced with the introduction of PRISM from November 2006 onwards. In addition, the Governor, in conjunction with Healthcare, has introduced a robust, documented, medical committal screening process. Information concerning mental health needs are highlighted and passed to all staff. This is displayed in residential areas in the form of healthcare markers.	PRISM to be introduced November 2006.  Actioned.
9.17	The square houses should be replaced as part of the Northern Ireland Prison Service Estate review. (2.24)	Not in the short term.	HQ	The Service shares the Inspectorate's analysis, and the Strategic Estate Review includes an assessment of the existing square houses and the scope for future development within Government wide funding constraints. However, given the increasing prisoner population and the need to provide additional accommodation for prisoners and plan for the replacement of Magilligan, the replacement of the square houses can only be a long term objective.	To be taken forward in the Service's wider estate strategy and within Government funding constraints.
9.18	Cells on Bush and Roe designed for one prisoner should not be shared. (2.25)	No	HQ	A cell sharing review was conducted in February 2006. Due to the increasing prisoner population and subsequent need for cell sharing, it is not possible to guarantee that cells in Bush and Roe House will not be required for cell sharing. However, additional accommodation is being planned as soon as possible in the form of a ready to use (RTU) block built on the Mourne House site.	The situation will be kept under review to ensure that cell sharing is kept to a minimum.

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9.19	Some opportunities should be introduced for prisoners, particularly new committals, to eat together. (2.26)	Yes	GOV	Additional tables have been provided in the dining hall of Roe House and new committals will be given the opportunity to eat together. In-workshop dining will also be introduced.	31 May 2006.  31 August 2006.
9.20	Staff should actively patrol landings and communal facilities whenever prisoners are unlocked. (2.27)	Yes	GOV	The whole issue of more active engagement between staff and prisoners is high on the Service's agenda in the Blueprint context. In the meantime, the Governor will review the current staff profile and promote dynamic security through existing staff forums.	Completed in line with Blueprint.
9.21	Glen House should not be used for women prisoners. (2.28)	Yes	HQ	Glen House is presently occupied by the Vulnerable Prisoner Unit (VPU). There are no plans to bring it into use for female prisoners.	Actioned.
9.22	Adequate screening of all cell toilets should be installed. (2.29)	Yes	GOV/HQ	Estate management have evaluated the different methods available for screening off in-cell toilets and options have been submitted to Maghaberry Management for decision.	Proposals agreed by May 2006, though implementation would have to be phased.
9.23	Broken telephones should be replaced. (2.30)	Yes	GOV	The contract for prisoner pay phones was transferred to BT in December 2005. All telephone handsets have been replaced or repaired, and additional telephones have been installed in the establishment.	Actioned December 2005.
9.24	Additional interview rooms should be provided for Erne House. (2.31)	Yes	GOV	Estate Management have provided detailed drawings for approval to Maghaberry Management and will seek agreement with the Director of Operations to include this item on the agreed project list.	Proposals agreed by May 2006.
9.25	Recreational facilities should be improved. Damaged pool tables should be repaired or replaced. (2.32)	Yes	GOV	Residential Principal officers have been tasked to review current recreational facilities available to prisoners. Damaged pool tables have been repaired and a contractor will be contacted immediately any further damage is discovered.	Review completed by 31 May 2006.

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9.26	Monthly minuted house meetings should be introduced between prisoner representatives and staff. (2.33)	No	GOV	Past experience has shown this practice to be divisive in the Northern Ireland context. Maghaberry promotes engagement with prisoners on an individual basis and prisoners are consulted on initiatives. The issue of active engagement between staff and prisoners is high on the Prison Service agenda, and is being addressed in the context of Blueprint.	
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. (2.39)	Yes	GOV	A Corporate Training Needs Analysis will be carried out during 2006/07 which will identify the training required to enable staff to engage with prisoners at all levels. The Governor will promote dynamic security through existing staff forums.	30 June 2006.
9.28	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)	Yes	HQ	The PREPS system has recently been reviewed to facilitate recording resettlement and sentence plan progress on a weekly basis. This will be monitored by a Principal Officer.	Actioned.
9.29	A survey of prisoners' perceptions and experiences of bullying should be carried out to inform the development of local policy and strategy. (see also main recommendation HP41) (3.16)	Yes	GOV	A prisoner survey is being conducted by SPS in September 2006. This will incorporate issues of bullying.	Survey conducted September 2006.
9.30	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)	Yes	GOV	A residential Governor will be appointed to oversee and monitor the introduction of the revised anti-bullying policy.	31 July 2006.
9.31	Monitoring information about bullying should be improved, to enable managers to develop a profile of this behaviour. (3.18)	Yes	GOV	Current procedures will be modified to enhance sharing of information in relation to profiling bullying behaviour. The Anti-Bullying Monitoring Board will table an agenda which will include profiles of prisoners under review.	31 July 2006.
9.32	All staff working directly with prisoners should receive training in the anti-bullying training strategy. (3.19)	Yes	GOV	Staff will be provided with anti-bullying awareness. Managers will receive training in monitoring procedures and this will be cascaded down. This will be identified within the Corporate Training Needs Analysis.	31 October 2006.

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9.33	A greater range of disciplines should be represented at the self-harm and suicide prevention meetings, and should also be involved in planned PAR 1 reviews. (3.35)	Yes	GOV/HQ	A new Suicide & Self Harm Policy is being developed. This will include a clear requirement for multi-disciplinary meetings to be held within 24 hours of a vulnerable prisoner being identified. In the meantime, the Governor of Inmate Services has been appointed to make amendments to the local policy to define the role and responsibilities of those required to attend case conferences. In addition, all PAR 1 reviews will be scheduled for specific days, to enable planned attendance (see also 9.3).	New policy developed by September 2006.  Current local Policy amended by June 2006.
9.34	A Listener scheme should be established with access to Listener suites, and Listeners should participate in self-harm and suicide-prevention meetings. (3.36)	Yes	GOV	Trained listeners will be transferred to Maghaberry from Magilligan, on a voluntary basis, to encourage and facilitate the development of a listener scheme. Due to accommodation pressures in the square houses it has been agreed that safer cells will initially be fitted in the SSU, Healthcare and Mourne House. A review of prisoner involvement at self-harm and suicide meetings will be undertaken in accordance with the McClelland Report. Listeners will be encouraged to participate in the meetings.	Completion of installation of safer cells by November 2006.
9.35	There should be improved monitoring and analysis of incidents of self harm. (3.37)	Yes	GOV	A Principal Officer has been appointed to review the current arrangements and develop a meaningful, local, shared statistical information system to analyse the frequency of incidents of self-harm. Any trends or patterns identified will be raised at meetings of the Safer Custody Group and appropriate action will be taken.	Systems in place by 30 May 2006.
9.36	Senior managers should make regular quality checks of PAR 1 procedures. (3.38)	Yes	GOV	The Safer Custody Group will monitor the consistency and standards of all PAR 1s. A compliance manager has been appointed to review standards quarterly and report the findings to the Governor of Inmate Services.	31 May 2006.
9.37	All use of special accommodation and strip clothing for prisoners at risk of self harm should be recorded. (3.39)	Yes	GOV/HQ	NIPS accept that dry cells will be classified as special accommodation. With immediate effect, all use of special accommodation, including dry cells, will be recorded. These proformas will be included in Chapter 8 of the Security Manual.	New forms available for use by 31 May 2006.

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9.38	There should be a periodic review of recommendations from previous death investigations, to ensure that changes to practice are being sustained. (3.40)	Yes	HQ	Recommendations from investigations into deaths in custody and Coroners Inquests are discussed at Suicide Prevention meetings attended by the Suicide Management Co-ordinators from each of the three establishments. Action plans are circulated to other establishments for information and to ensure consistency of procedures.	Actioned.
9.39	To minimise delays, the emergency procedures for entering cells at night should be improved. (See also main recommendation HP42) (3.41)	Yes	GOV	Cell keys are currently located in a "break glass" in the secure pod of each residential area and are readily accessible in the event of an emergency. However, existing emergency night unlock procedures will be reviewed with a view to reducing the average response time to within 90 seconds of an alarm being raised. To date, 82 newly recruited Night Custody officers have been trained in these procedures as part of their induction training.	Review completed by 31 May 2006.
9.40	All staff should receive relevant training in cultural, racial and diversity issues. (3.50)	Yes	HQ/GOV	A diversity policy is currently being developed. Managers will be trained in Equality and Diversity issues, and this will be cascaded down to all staff in the form of in-house training.	Policy drafted by October 2006 and training will follow.
9.41	Foreign national prisoners should be properly identified, regularly consulted, and service provision appropriately targeted. (3.51)	Yes	GOV	A separate nominal role identifying foreign national prisoners will be introduced. HQ is currently developing an Equality and Diversity policy which will include issues pertaining to foreign national prisoners. An Equality & Diversity Officer has been appointed.	Policy drafted by October 2006.
9.42	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. (See also main recommendation HP48) (3.52)	Yes	GOVHQ	All complaints of this nature will be dealt with via the existing internal complaints process. However, arrangements will be put in place at a local level to monitor trends in relation to race and ethnicity etc. (see 9.5).	Monitoring arrangements in place by 30 July 2006.
9.43	Sufficient working telephones should be provided to allow prisoners to keep in easy contact with their families. (3.75)	Yes	GOV	The contract for prisoner pay phones was transferred to BT in December 2005. All telephone handsets have been replaced or repaired, and additional telephones have been installed in the establishment.	Actioned December 2005.

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9.44	An accessible and monitored feedback system procedure should be introduced to allow visitors to suggest improvements or complain if necessary. (3.76)	Yes	GOV	The Family Liaison officers will develop and implement a mechanism for visitors to raise complaints or make suggestions regarding existing procedures. The Family Liaison officers will then facilitate feedback sessions for the visitors.	Mechanisms in place by 31 May 2006.
9.45	Closed visits should not be imposed automatically on a single drug dog indication without any supporting intelligence or consideration of alternatives. (3.77)	No	HQ	The current Drug & Alcohol Policy requirement to reduce the supply of drugs into the establishment necessitates the use of a range of initiatives including the use of passive drug dogs. The current procedure is known to have significant benefits in curtailing the supply of drugs. This practice was upheld by Judicial review in October 2005 and has also been supported by the Prisoner Ombudsman. However, as recommended by the recent review of the separated regime, should any visitor not wish to take up the offer of a closed visit they will be permitted to leave whilst the remainder of the party continue with a closed visit.	30 September 2006.
9.46	Visits should begin at the published time, and the visitors' reception building should be opened in readiness for visitors. (3.78)	Yes	GOV	The Activity Co-ordinator will be tasked to oversee and manage compliance in relation to visitor service provision.	Advice sought by 31 May 2006.
9.47	The capacity of the visits room serving the majority of prisoners should be increased. (3.79)	No	HQ/GOV	Given the limitations on availability of space in the visits complex, this recommendation cannot be implemented. However, the visits room will be refurbished. Advice will be taken from relevant agencies.	Forms available by 30 September 2006.
9.48	Request and complaint forms and respective guidelines should be available in languages other than English. (3.96)	Yes	HQ/GOV	A range of request and complaint forms in different languages will be provided. Advice is currently being sought from other agencies.	
9.49	Consultative committees should be introduced. (3.97)	No	GOV	Prisoners are regularly consulted when new initiatives are being considered. NIPS would prefer not to formalise arrangements for consultative committees in the light of past experience, and because of the difficulties that arise where there is not a stable population (see also 9.26).	

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9.50	Complaints and requests should be monitored and evaluated so that any patterns or trends can be identified. (See also main recommendation HP44) (3.98)	Yes	GOV/HQ	Complaints will be monitored at a local level and at PSHQ. Operational Policy Branch, in liaison with each establishment, provides a monthly breakdown of the level of complaints, numbers upheld, trends, and responses to recommendations from the Prisoner Ombudsman. A comprehensive action plan is maintained and updated regularly.	Actioned.
9.51	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)	Yes	GOV	Each Residential area maintains a complaints register. A computerised version is also maintained on the ED RMS system. The introduction of PRISM to residential areas of Maghaberry, scheduled for late 2006 onwards will greatly improve this process. In the meantime, Principal Officers will review the current procedures for maintaining the complaints register and ensure that staff document the date on which a complaint is resolved. A compliance manager will monitor processes quarterly.	Actioned.
9.52	Access to healthcare rooms, wherever they are in the prison, should be limited to healthcare staff. (4.50)	Yes	GOV	Access to healthcare rooms is limited to healthcare staff.	Actioned.
9.53	The inpatient beds should not form part of the prison's certified normal accommodation. (4.51)	No	HQ	The in-patient beds in Maghaberry Healthcare Centre are included in Maghaberry's certified normal accommodation because the beds are permanently occupied.	
9.54	Nursing staff should not carry staves. (4.52)	No	HQ	Most nursing staff do not carry staves, and this is preferred situation, but NIPS is conscious of the health and safety of staff. However, the issue will be kept under close review.	
9.55	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)	Yes	GOV	This is the preferred situation and the skills mix of healthcare staff will be reviewed. However, there are wider issues regarding agreed terms and conditions negotiated with the POA which results in set shift patterns which provide current limitations.	Review to be completed by April 2007.

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9.56	There should be a fair and auditable system for the allocation of continuing professional development. (4.54)	Yes	HQ/GOV	NIPS has appointed a Clinical Governance Manager with effect from 1 April 2006. Requests for continuing professional development are discussed as part of the staff appraisal system and PDPs are agreed with line managers. Priorities are allocated in keeping with clinical developments based on the business needs of the service and pressures arising from public health/community/DHSSPS priorities for health.	Ongoing.
9.57	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)	Yes	GOV/HQ	GP input to primary care procedures is reviewed regularly. Responsibility for commissioning this service will transfer to the Health Service in April 2007.	Transfer to DHSSPS April 2007.
9.58	All clinical records should be made contemporaneously. (4.56)	Yes	GOV	Current arrangements on accessibility are in the process of being reviewed in the context of a new computerised system (Electronic Patient Medical Information System) which is going into each establishment. In the meantime healthcare staff will ensure that records are made contemporaneously.	New IT system introduced by 30 June 2006.
9.59	The applications and triage system that has been piloted on Lagan wing should be adopted on the other wings. (4.57)	Yes	GOV	The Healthcare manager has evaluated a triage system which was initially piloted in Lagan House. This system has now been introduced into all other residential areas.	Actioned.
9.60	Nurses should stop the risky practice of redispensing and/or repackaging dispensed medicines. (4.58)	Yes	GOV	A working group has been established under the direction of the Deputy Governor to review current practices.	Review to be completed by 30 June 2006.
9.61	Reviews should take place of treatment times, accessibility to patients and assessments for suitability to be included on the self-medication scheme. (4.59)	Yes	GOV	Healthcare manager and Pharmacist are currently reviewing policy in relation to in-possession medication assessments and treatment times.	Review to be completed by 30 June 2006.
9.62	Prisoners receiving a night-time dose of a medicine should be able to receive the dose at an appropriate time. (4.60)	Yes	GOV	A review of existing procedures will be conducted with the emphasis placed on procedures to facilitate exceptional night-time dispensing.	Review to be completed by 31 May 2006.
9.63	The complicated Cardex system for issuing prescriptions should be discontinued, and a prescription and administration record sheet introduced. (4.61)	Yes	HQ/GOV	The Kardex system was reviewed recently and new arrangements will be introduced. In addition, it is anticipated that the new Healthcare IT system will provide a prescription/administration facility.	New arrangements introduced by 31 October 2006.

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9.64	The method of ordering medications should be revised to ensure a system that has robust auditing to reconcile prescriptions against orders. (4.62)	Yes	HQ/GOV	The new Healthcare IT system will have an agreed prescription form template and the possibility of direct communication to pharmacy will be examined. Prescriptions are individually checked against dispensed items and all dispensed items are recorded centrally. Original prescriptions are held for a minimum of five years.	New IT system introduced by 30 June 2006.
9.65	A repeat slip system for patients who have had their medication written up for 84 days should be introduced. (4.63)	Yes	HQ/GOV	A repeat medication card has been introduced.	Actioned January 2006.
9.66	Nurses should follow the NMC guidelines for the safe administration of medications. (4.64)	Yes	GOV/HQ	Discussions were initiated to resolve this issue but due to other operational priorities these have been adjourned. Access, movement and restrictions impinge on introducing new arrangements but the need to do so is recognised. Best practice in other jurisdictions will be examined.	November 2006.
9.67	Prisoners should be provided with lockers in which to store prescribed medicines. (4.65)	Yes	HQ/GOV	In cell lockers, in which prisoners can store their medication will be piloted at Magilligan. On completion of the trial at Magilligan, and a subsequent evaluation process, lockers will be installed in other prison establishments if found to be suitable for purpose.	Pilot at Magilligan to commence June 2006.
9.68	Formal clinical governance arrangements should be put in place for recording pharmacy interventions, and adverse incidents such as errors. (4.66)	Yes	HQ	All medicines management interventions are noted at the appropriate pharmacy.	Actioned January 2006.
9.69	Smoking cessation services should be introduced. (4.67)	Yes	GOV	Smoking cessation services were introduced throughout Maghaberry in February 2006.	Actioned February 2006.
9.70	The use of strip clothing in healthcare should be recorded in a central register. (4.68)	Yes	GOV	Protocols outlining all aspects of the use of canvas clothing will be written and published. A register recording authorisation of the use of canvas clothing will be maintained in Healthcare and an entry recorded in the Governor's journal. Further to this a proforma for recording the use and authorisation of special accommodation and canvas clothing have been drafted by PSHQ and will be published in the Security Manual by the end of May 2006.	Protocols to be written and published by 30 June 2006.  Forms available by 31 May 2006.

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9.71	A wider range of education courses should be offered to meet the needs of more prisoners. (5.12)	Yes	GOV/HQ	The learning and skills facility in the VT area will enable increased work-based Essential Skills, including IT to be delivered. IT, cookery, leather craft and music courses will be offered to life sentence prisoners in Martin House. Plans are being drawn up for educational provision – curriculum, resources, staffing etc - for the new RTU block being built on the Mourne House site. All education courses from pre-entry level upwards will attract nationally recognised accreditation. In the meantime, the present curriculum will continue to be delivered in all areas of the prison and education staff will address assessed individual learning needs.	July 2006.  Courses available by March 2006.  March 2007.  Ongoing.
9.72	More opportunities, particularly essential skills classes, should be provided for remand prisoners. (5.13)	Yes	GOV/HQ	Creating additional accommodation on the ground floor area of the education centre will enable delivery of a range of classes to remand prisoners. Courses will be based on assessed individual student needs, but the emphasis will be on improving levels of literacy and numeracy.	30 September 2006.
9.73	Prisoner movements should be better managed to improve attendance and punctuality at education classes. (5.14)	Yes	GOV	An activity co-ordinator has been appointed in support of the movements Senior Officer to comply with this recommendation (see 9.8).	Actioned.
9.74	Library opening hours should be increased to offer more sessions in the evenings and at weekends. (5.15)	Yes	GOV	Library opening hours will be extended to include Saturday mornings.	31 May 2006.
9.75	More materials for those with learning difficulties should be stocked in the library. (See also main recommendation HP46) (5.16)	Yes	GOV	The existing library stock will be updated to include additions from the catalogue for prisoners with recognised learning difficulties.	31 May 2006.
9.76	Measures should be taken to increase general work opportunities, allowing prisoners to acquire relevant employment skills. (5.22)	Yes	HQ/GOV	Work is ongoing to facilitate the introduction of two additional work areas – plastering & tiling and industrial cleaning. This will provide prisoners with employable skills relevant to the needs of industry. A pilot programme will also be put in place where ongoing assessments in education and work skills will be delivered. It is envisaged that this will become part of the current resettlement strategy. During 2006/07 attention will be placed on generating challenging work places for sentenced prisoners.	Ongoing.  July 2006.

Rec No	Recommendation	Accept Y/N	Driver	Action	Target date
9.77	Remand and separated prisoners should have the opportunity to work. (5.23)	Yes (in principle)	HQ	Ideally all prisoners should have the opportunity to participate in constructive activity. Unfortunately, Maghaberry does not currently have the availability of workshop space and the necessary infrastructure that would be required to meet the needs of 360 remand prisoners. Although separated prisoners are unable to work, they do have the opportunity to participate in a wing based regime including education and programmes and all cell crafts.	
9.78	Prisoners should arrive at their workplaces as scheduled. (5.24)	Yes	GOV	An activity co-ordinator has been appointed in support of the movements Senior Officer to comply with this recommendation.	Actioned.
9.79	Prisoners on the committal wing should have regular access to the gym and other PE facilities. (5.30)	Yes	GOV	Principal officer PEI will conduct a review of the current gymnasium provision and will include weekly committal gymnasium access.	Review to commence 31 May 2006.
9.80	A wider range of accredited courses should be offered. (5.31)	Yes	HQ/GOV	The new courses in plastering & tiling and industrial cleaning which are being introduced will attract nationally recognised accreditation e.g. through AQA and/or City & Guilds.	New courses available 31 July 2006.
9.81	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)	Yes	GOV	All new committals will be asked if they wish to see a chaplain or priest on reception and their request will be facilitated within 24 hours of committal.	31 May 2006.
9.82	A multi-faith room should be provided. (5.44)	Yes	HQ/GOV	The existing chapel in Maghaberry will be refurbished to meet this requirement. Advice will be sought from other agencies.	Advice sought by 31 May 2006.
9.83	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)	No	GOV	It is not operationally feasible to operate separate services for the various denominations of prisoner in the SSU or VPU. However, prisoners in these areas can see a chaplain of their choice at their request.	
9.84	Prisoners in Martin House should be able to attend relevant services. (5.46)	Yes	GOV	The present arrangements in Martin House will be reviewed. Life sentenced prisoners will be able to attend an appropriate service in a designated room.	30 June 2006.

Rec No	Recommendation	Accept Y/N	Driver	Action	Target date
9.85	Chaplains should not be denied access to segregated prisoners in the SSU, unless there is a serious temporary security emergency. (5.47)	Yes	GOV	Chaplains are not denied access to prisoners in the SSU, unless there is a serious temporary security emergency.	Actioned.
9.86	Prisoners should be escorted to the chapel for pastoral visits when requested by the chaplains. (5.48)	Yes	GOV	Protocols will be established in agreement with chaplains. Prisoners will be escorted to the chapel for pastoral visits when required.	Protocols in place by 30 June 2006.
9.87	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)	Yes	GOV	A chaplains forum will agree formalised procedures for engagement in case conferences and appoint a representative for particular aspects of prisoner care. These issues have also been addressed in a Service wide review of the chaplaincy which is nearing fruition.	Procedures in place by 30 June 2006.
9.88	More time out of cell should be provided for all prisoners. (5.55)	Yes	GOV	Steps will be taken to ensure that more time out of cell is provided for all prisoners. (see 9.7).	Options available by 31 March 2007.
9.89	Regime activities should start and finish at the published times. (5.56)	Yes	GOV	An activity co-ordinator has been appointed in support of the movements Senior Officer to oversee implementation of this recommendation. (see 9.8).	Actioned.
9.90	Better equipment should be provided in association rooms. (5.57)	Yes	GOV	Principal officer PEI has been tasked to conduct a prison wide review of association equipment. Prisoners will be consulted with regard to making improvements.	Review completed by 31 May 2006.
9.91	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)	Yes	HQ/GOV	Improved security risk assessment procedures will be introduced, and specific arrangements for the management of high risk prisoners will be identified. All other prisoners will be treated as medium/low risk.	Procedures introduced by 30 October 2006.
9.92	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)	No	HQ/GOV	The recent review of the separated regime identified the need to retain controlled movement, as this is vital to ensure that staff remain in control. There has, however, been limited relaxation of existing arrangements for separated prisoners – the number of prisoners allowed out when the full complement of staff is not available has been increased to a ratio of 4:2 from 4:1 and from 3:0 to 3:1. Movement of separated prisoners to the gymnasium has also been relaxed – prisoner movement is now monitored as opposed to escorted.	

Rec No	Recommendation	Accept Y/N	Driver	Action	Target date
9.93	Prisoners' cells should be searched respectfully and left in a decent condition afterwards. (6.15)	Yes	GOV	Principal officer responsible for SST will conduct a 10% check of all completed SST cell searches to quality assure the condition of the cell following the search. A record of checks will be maintained.	31 May 2006.
9.94	The security department should acknowledge all security reports submitted by staff. (6.16)	Yes	GOV	The Security Governor will review the current procedures. The SIR form will be revised to include an acknowledgement slip to be issued to all staff who have submitted information. A general service grade will be appointed to assist in the process.	31 August 2006.
9.95	Attendance at the security committee should be increased, with greater representation from non-security staff. (6.17)	No	GOV	Due to the sensitive nature of issues discussed at security committee meetings it is not accepted that attendance should be increased to include non-security staff.	
9.96	Decisions on a prisoner's security classification should not be taken by a single officer. (6.18)	Yes	GOV	All security classifications will be recommended by the security team and a final decision will be agreed and signed off by the security manager.	30 April 2006.
9.97	All prisoners should have their security classification reviewed at least annually. (6.19)	Yes	GOV/HQ	All high risk prisoners have their security classification reviewed annually. A high risk review board was conducted in March 2006 and 17 high risk prisoners had their security classification reduced to medium risk. Medium or low risk prisoners can have their security classification reviewed on an individual basis as required. A new prisoner security classification system will be implemented during 2006/07.	Actioned.
9.98	The role, selection, training and oversight of the SST should be re-examined to ensure that the team operates effectively and respectfully throughout the prison. (6.20)	Yes	GOV	This will be addressed through the Governor's routine group transfers. The recently appointed SST Principal Officer will monitor performance in all areas.	30 April 2006.
9.99	The practice of the SST removing staff's keys from them during targeted searching is unnecessary, and should cease. (6.21)	Yes	GOV	This practice has ceased. Residential staff will remain in charge of landing keys during all searches.	Actioned.

<b>Rec No</b>	<b>Recommendation</b>	<b>Accept Y/N</b>	<b>Driver</b>	<b>Action</b>	<b>Target date</b>
9.100	Punishment ranges for various types of offence should be agreed and published to staff and prisoners, to ensure consistency among adjudicating governors. (6.49)	Yes	GOV/HQ	A standardised scale of punishments for all offences has been developed, as well as advice for adjudicators regarding aggravating and mitigating factors. This will be included in the revised Adjudication Manual.	Internal consultation of the revised Adjudication Manual will be concluded by June 2006.
9.101	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)	Yes	GOV/HQ	The revised draft of the Adjudication manual states that prisoners awarded cellular confinement will be allowed all privileges, except those that are not compatible with cellular confinement, unless an award of forfeiture of privileges has been awarded (6.12). In such cases, specific privileges lost will be stated. An Instruction to Governors will be produced and published in due course.	Internal consultation of the revised Adjudication Manual will be concluded by June 2006.
9.102	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)	Yes	GOV/HQ	The revised Adjudication Manual sets out that prisoners will not automatically lose access to telephones when awarded Cellular Confinement and will have the opportunity to contact their solicitor. Where loss of telephone is awarded, staff will contact the prisoner's solicitor and advise accordingly. Legal visits can be arranged.	Internal consultation of the revised Adjudication Manual will be concluded by June 2006.
9.103	Staff should complete use of force documentation immediately after every occasion when force is used against prisoners, before they go off duty. (6.52)	Yes	GOV	A notice to staff advising all staff of the correct procedures will be issued. Further to this an aide memoir will be produced and issued to all staff. Principal Officer SST will audit compliance. 31 May 2006.	Ongoing.
9.104	Governors who sign off use of force paperwork should, before countersigning it, satisfy themselves that all the documentation is present. (6.53)	Yes	GOV	Governors Order 1.8 will be amended to reflect the necessity of countersigning use of force documents. A compliance manager has been appointed to quality assure the process.	Ongoing.
9.105	All planned use of force interventions should be video-recorded. (6.54)	Yes	HQ/GOV	The Service is currently addressing this requirement in specific areas and further consideration will be given. A training pack is currently being produced to facilitate this requirement and is due to be completed by the end of May 2006. Implementation is subject to ongoing consultation with the POA.	31 May 2006.

<b>Rec No</b>	<b>Recommendation</b>	<b>Accept Y/N</b>	<b>Driver</b>	<b>Action</b>	<b>Target date</b>
9.106	Duty governors should attend all planned cell removals. (6.55)	Yes	GOV	The Deputy Governor will issue new instructions and nominate a Governor to attend all planned use of force incidents involving cell removals.	31 May 2006.
9.107	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)	No	HQ	The practice of placing a returning home leave prisoner in a dry cell in the SSU for a period of 48 hours following indication by a Passive Drug Dog was upheld at Judicial Review in July 2004. Prison Rule 47 (temporary confinement) will be amended accordingly.	June 2006.
9.108	All use of special accommodation should be separately authorised by a governor and a doctor, and regular observations should be made by staff at least every 15 minutes. (6.57)	Yes	HQ/GOV	All authorisation and use of special accommodation will be recorded using new forms currently being drafted by PSHQ to be included in the Security Manual.	Forms to be available by end of May 2006.
9.109	All use of special accommodation should be separately logged. (6.58)	Yes	GOV	A proforma has been drafted for the recording of use and authorisation of all special accommodation. These forms will be included in the Security Manual.	Forms to be available by end of April 2006.
9.110	The high-security cell should be decommissioned and sealed off. (6.59)	Yes	GOV/HQ	This high security cell has not been used in its present form since the prisoner for whom it was specially adapted was released from Maghberry in August 2003. This cell cannot be used without authorisation from PSHQ, and there are no plans to use this cell to hold a prisoner until it has been converted back to normal cell accommodation. . .	Actioned.
9.111	There should be greater staff interaction with prisoners held in the SSU. This interaction should be recorded. (6.60)	Yes	GOV	Estates Management have commenced work to refurbish the current SSU building. Improvements to increase recreational facilities will include provision of a gymnasium and common room. Options for recording levels of staff/prisoner interaction will be considered by August 2006.	Work commenced March 2006. To be completed by 31 August 2006. August 2006.
9.112	Prisoners entering the SSU should not be strip-searched without an individual risk assessment. (6.61)	No	HQ	Full searching is considered a necessary protection to ensure that prisoners are not in possession of any contraband when entering the SSU. In particular, prisoners located in the SSU may be under threat of attack from other prisoners and it is essential that security of this area is maintained. Full searching reduces the risk to other prisoners accommodated within the SSU.	

Rec No	Recommendation	Accept Y/N	Driver	Action	Target date
9.113	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)	No	HQ	All prison officers, whether working in residential areas or as part of the SST, should possess the necessary skills required for prisoner management including interpersonal skills and the use of de-escalation techniques to resolve potentially volatile situations. NIPS agree that there should be a selection process to identify staff who are suitable to work in the SSU, and that specific training should be provided. However, it is not agreed that such staff should necessarily come from residential areas.	
9.114	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)	Yes	GOV	The security department will produce a written record of all use of force incidents on a monthly basis. This report will be submitted to the senior management team and PSHQ for analysis.	31 July 2006.
9.115	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)	Yes	GOV	Security Governor has been appointed to review the status of current orderlies. Prisoners on Rule 32 for the interest of their own safety will be considered for employment as orderlies within the SSU in those areas unoccupied by prisoners.	31 July 2006.
9.116	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)	Yes	GOV/HQ	All prisoners on the basic level of regime will be interviewed after four weeks. The interview will include a progression plan to assist the prisoner in moving up to standard level regime. A written record will be maintained and signed off by both the prisoner and the Principal Officer.	31 May 2006.
9.117	Prisoners on the basic regime should be given an opportunity to use the phone during the evening. (6.85)	Yes	GOV	The Deputy Governor will look at options with a view to allowing time for prisoners on basic regime to make use of the telephone in the evenings.	Review completed by 31 May 2006.
9.118	There should be an equitable application of the scheme for sentenced and remand prisoners. (6.86)	Yes	HQ/GOV	A Service wide review of PREPS was recently completed. It is proposed that where possible, the scheme will be offered on an equitable basis to both sentenced and remand prisoners.	Ongoing throughout 2006/07.

Rec No	Recommendation	Accept Y/N	Driver	Action	Target date
9.119	There should be improved monitoring of PREPS. (6.87)	Yes	GOV	A Corporate review of the PREPS system has taken place and will be implemented across the service during 06/07.	Ongoing throughout 2006/07.
9.120	Meal times should be revised, and the evening meal served after 5pm. (7.5)	Yes	GOV	The Deputy Governor will look at options for implementing this recommendation.	Review completed 31 May 2006.
9.121	All prisoners should be given training in basic food hygiene, and should be provided with appropriate personal protective clothing. (See also main recommendation HP40) (7.6)	Yes	GOV	A Governor has been appointed to conduct a review of training in basic food hygiene. Basic food hygiene training will now form part of the induction process. Computerised training for prisoners is currently being piloted in Lagan House and will be made available to all residential areas. Compliance will be emphasised through health and safety and instructions to Governors.	31 May 2006.
9.122	Food temperatures should be checked at serving points. (7.7)	Yes	GOV	Measures will be put in place to ensure that food is an appropriate temperature when served.	31 May 2006.
9.123	Additional catering staff should be recruited. (7.8)	Yes	HQ/GOV	Steps are being taken to ensure that staffing levels are sufficient to provide adequate service delivery.	Additional staff in place by 31 August 2006.
9.124	A healthy choice of menus should be introduced. (See also main recommendation HP45) (7.9)	Yes	HQ/GOV	Further menu choices will be made available as soon as the catering staff complement is at full capacity. The Catering Principal Officer will review choice of menus and conduct a benchmark exercise with other jurisdictions.	Review completed by 31 May 2006.
9.125	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)	Yes	GOV	Tuck shop manger will conduct a survey of shop provision every six months.	Survey to be completed by 30 June 2006.
9.126	Nationalist families should be able to order newspapers from a shop located in an area in which they feel comfortable. (7.18)	No	GOV	As orders can be placed remotely by telephone and paid by debit card it is not considered viable to set up alternative arrangements which could be some distance from the prison, making management of the delivery and ordering process more problematic.	

Rec No	Recommendation	Accept Y/N	Driver	Action	Target date
9.127	NIPS should seek to ensure that other statutory bodies play their part in the Northern Ireland Resettlement Strategy. (8.8)	Yes	GOV	A number of agencies and voluntary bodies are included in the Multi-Agency Resettlement Steering Group and do engage directly with the Resettlement teams in establishments.	Actioned.
9.128	Maghaberry should extend its resettlement planning strategy to cater more fully for short-term prisoners, remand prisoners and fine defaulters. (8.9)	Yes	HQ/GOV	A wider Criminal Justice review is taking place to consider how fine defaulters should be managed in the future. A pilot programme will be implemented in September 2006 to provide vocational skills training to address the need in respect of the high turn over of short sentence prisoners (see also 9.7). A corporate vocational training and education strategy will be developed which will take account of the needs of remand prisoners during 2006/07.	September 2006.
9.129	Separated prisoners should be involved in resettlement planning. (8.17)	Yes (in principle)	HQ/GOV	The action plan drawn up to address the recent review of the separated prisoner regime includes installing a second classroom and extending the range of educational activity on offer. Separated prisoners will have their resettlement needs routinely addressed in the period prior to their discharge. Separately, life sentence prisoners can/do attend offending behaviour programmes if risk assessments identify a need.	This will be kept under review.
9.130	Short-term and unconvicted prisoners should have a custody plan that specifies how their needs will be met during and after custody. (See also main recommendation HP50) (8.18)	Yes	HQ/GOV	Will be addressed in conjunction with 9.7 & 9.128. Arrangements will be put in place to offer all unsentenced prisoners a custody plan that will take account of their most urgent needs, to be delivered within realistic time scales. Resettlement plans for short term prisoners will take place with immediate effect. Consideration will be given to implementing resettlement plans for unsentenced prisoners later in 06/07.	September 2006.  Immediate.
9.131	A detailed strategy should be developed to meet the needs of potential lifers. (8.34)	Yes	HQ	A review of Life Sentence Prisoners has been carried out. A report will be published and an action plan drawn up to take forward the proposals made by the review team.	Report to be published by end of July 2006.

Rec No	Recommendation	Accept Y/N	Driver	Action	Target date
9.132	Life-sentenced prisoners should have their tariffs explained to them by a lifer-reporting governor. (8.35)	Yes	GOV	On receipt of a certified tariff all life sentence prisoners are interviewed by the Life Sentence Governor and their tariffs are explained to them. This is documented by the Lifer Management Unit.	Actioned.
9.133	All stages of life-sentence planning should take place within the required timescales. (8.36)	Yes	GOV	The training unit at Maghaberry will deliver appropriate training, including report writing, to all staff working with life sentence prisoners to ensure that all stages of life-sentence planning take place within the required timescales.	30 September 2006.
9.134	Lifers should be adequately prepared for their annual reviews. They should always be invited and encouraged to attend. (8.37)	Yes	GOV	Meetings will convene on a weekly basis, to conduct the individual life sentenced prisoners annual reviews. Prisoners will be encouraged to attend these meetings.	30 October 2006.
9.135	There should be sufficient work and training to meet the needs of all life-sentenced prisoners. (8.38)	Yes	HQ/GOV	Additional training places will be made available through the refurbishment and expansion of the workshop facilities, though constraints will remain.	31 March 2007.
9.136	All staff working with lifers should receive lifer training. (8.39)	Yes	GOV	A training needs analysis will be conducted to identify any skills deficit. A training programme will be developed to enable staff to foster life sentence support skills.	31 October 2006.
9.137	Lifer groups and lifer days should be introduced. (8.40)	Yes	GOV	A Family Support Officer has been appointed to research a suitable model and benchmark against current provisions.	30 June 2006.
9.138	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)	Yes	GOV	Through multi-disciplinary forum, the life sentence Governor will produce a mission statement and set clear aims and objectives in relation to the function and purpose of Martin House.	30 September 2006.
9.139	Broadly based interventions should be provided that contribute to reducing reoffending by prisoners who are not eligible for offending behaviour programmes – including personal development, education about alcohol and substance misuse, and social skills. (8.51)	Yes	HQ/GOV	A programme of life skills development will be developed and implemented during 2006/07 which will include reintegration into the community, good citizenship, financial awareness and budgeting skills, and dealing with addiction on release from prison.	March 2007.

Rec No	Recommendation	Accept Y/N	Driver	Action	Target date
9.140	Separated prisoners should be permitted to participate in offending behaviour programmes. (8.52)	Yes	HQ/GOV	Separated prisoners are permitted to participate in offending behaviour programmes on completion of a risk assessment supporting inclusion in the course. Psychology do engage with all prisoners including separated prisoners.	Actioned.
9.141	New programmes should be developed to address specific offending behaviours. (8.53)	Yes	HQ	Psychology are currently exploring a Domestic Violence Programme and an Anger Management Programme for Maghaberry. They will also look at Cognitive Behavioural Substance Abuse programmes. A short duration drugs course will be taken forward later this year and a programme dealing with sectarianism is actively being explored as part of a wider good citizenship programme.	Implemented as soon as practicable.
9.142	The drug and alcohol strategy should be updated, and should contain detailed action plans, targets and performance measures. (8.79)	Yes	HQ	A new Drugs and Alcohol Strategy was agreed by the Prison Service Management Board in February 2006. Each establishment will develop a local action plan which sets out how the specific requirements of the policy will be implemented.	Action plan developed by May 2006.
9.143	A strategy leader for the co-ordination of treatment services should be appointed.	Yes	HQ	As stipulated in the revised Alcohol and Substance Misuse policy an addictions service manager with a Health Service background will be appointed to ensure strategic direction, partnership with voluntary agencies, co-ordination of clinical audit and the delivery of therapeutic interventions.	Action plan developed by May 2006.
9.144	Treatment providers should develop joint working protocols and integrated care pathways for prisoners with substance problems. (8.81)	Yes	GOV	The Governor will commission a survey to determine the needs of the client group and review against current service provision.	31 March 2007.
9.145	Prisoners should be informed of available substance misuse services during induction. (8.82)	Yes	GOV	As part of the induction process all prisoners will attend a session delivered by Dunlewey Substance Misuse Team informing them of the substance misuse programmes available to them whilst in custody.	31 July 2006.
9.146	Every prisoner with substance-related needs should receive an assessment within a set timeframe, followed by a care plan. (8.83)	Yes	GOV	Every prisoner will be assessed by Healthcare within 24 hours of committal and prisoners with substance related needs will be identified. Care plans for these prisoners will be developed by Dunlewey Substance Misuse Team within a set timeframe.	31 March 2007.

Rec No	Recommendation	Accept Y/N	Driver	Action	Target date
9.147	The new clinical management guidelines should be fully implemented, and a dedicated substance misuse team established. (8.84)	Yes	HQ/GOV	A dedicated substance misuse team is provided under contract from community sources. Ways to improve links between the Healthcare unit and the community addiction service are being explored. NIPS has appointed a Clinical Governance Manager, with effect from 1 April 2006.	1 April 2006.
9.148	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. (8.85)	Yes	GOV	A programme focusing on harm reduction and the effects of drugs in the community will be developed. This five session programme will be available to all remand prisoners who self refer. (See also 9.139)	31 August 2006.
9.149	A drug-free unit should be established that offers structured support, including voluntary drug testing. (8.86)	No (at present)	GOV	Due to the current population pressures at Maghaberry it is not possible to utilise existing accommodation for this purpose. Any further development of Martin House on the Mourne House site will include drug free landings.	The situation will be kept under review.
9.150	A random mandatory drug testing scheme should be introduced. (8.87)	Yes	HQ	Following amendment of prison Rules the Prison Service will introduce Mandatory Drug Testing (MDT). In February 2006, the PSMB agreed that a Prison Rule should be drawn up to allow for the operational introduction of MDT and consideration is being given to how it will be introduced operationally. Advice is being sought from other agencies.	Enabling power to be granted by end of Business year 2006/07.
9.151	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. (8.88)	Yes	HQ/GOV	The current Voluntary Drug Testing scheme is being reviewed to strategically standardise the system. However, it will remain linked to the PREPS process and the introduction of MDT will extend the testing programme.	Review to be completed by autumn 2006 and standardised systems introduced in January 2007.
9.152	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. (8.95)	Yes	HQ	The Prison Service has finalised proposals for a long term estates review which will include the future accommodation requirement and prisoner needs at Maghaberry. Subject to funding constraints the strategy includes this as an objective. Due to the increasing population demands at Maghaberry an additional RTU block to be built on the Mourne House site.	This will be kept under review.

Rec No	Recommendation	Accept Y/N	Driver	Action	Target date
9.153	All prisoners should be provided with and made fully aware of services available within the prison to aid their reintegration. (8.96)	Yes	GOV	Prisoners will be provided with an information booklet informing them of the various resettlement services available to aid their reintegration.	Booklet available by 31 May 2006.
9.154	Specific opening times and dedicated resources should be established for the throughcare centre, so that prisoners have predictable access to its services. (8.97)	Yes	GOV	A Governor has been appointed to review through care provision and ensure that prisoners are able to access the services on offer.	30 June 2006.
9.155	A personal officer scheme should report fully on prisoners subject to MASRAM processes and/or other high-risk prisoners. (8.102)	Yes	HQ/GOV	The Prison Service has agreed new Multi-Agency Sex Offender Risk Assessment and Management (MASRAM) guidelines to be implemented 1 May 2006 which will clarify the roles of all staff involved in the risk management process.	1 May 2006.
9.156	A comprehensive information booklet should be provided. (1.35)	Yes	GOV	A Principal Officer has been appointed to produce a short information booklet for prisoners. Induction information will be made available in other languages and advice is currently being sought from other agencies. Induction information will also be made available through the use of television screens in the Reception area and multi lingual headphone sets will be provided for foreign nationals.	All information in place by 30 September 2006.
9.157	Graffiti in reception holding rooms should be removed. (1.36)	Yes	GOV	The holding rooms in reception will be refurbished.	Work to be completed by 31 May 2006.
9.158	Prisoners should be asked about their use of alcohol as well as other drugs in their interview with the duty governor. (1.37)	Yes	GOV	This is now part of all Governor committal interviews. Committal forms have been amended to reflect the change. This is also achieved via the new resettlement prisoner needs profile system currently being piloted at Maghaberry.	Actioned.
9.159	There should be better opportunity for new committal prisoners and remand prisoners on Roe House to use the Astro turf facilities. (2.34)	Yes	HQ	The Governor is currently reviewing prisoner access to the Astro turf pitches. Consideration will be given to increasing access for non-separated prisoners from Bush and Roe House.	31 July 2006.

Rec No	Recommendation	Accept Y/N	Driver	Action	Target date
9.160	A visitors' forum should be introduced. (3.80)	No	HQ/GOV	Providing a visitor's forum is something that will be kept under consideration – it is more difficult in the Northern Ireland context. The two family liaison officers are available to discuss issues/concerns with visitors on an individual basis. There is also a corporate resettlement recommendation to create or develop a visitors/family charter during 2006/07.	
9.161	The closed visits facilities should be refurbished. (3.81)	Yes	GOV	The closed visits area will be refurbished.	Work to be completed by 31 May 2006.
9.162	The role of the family support officer should be better advertised within the prison. (3.82)	Yes	GOV	Leaflets explaining the role of the Family Liaison Officers will be issued to prisoners on induction and this facility will be advertised throughout the prison.	Leaflets available by 31 May 2006.
9.163	The healthcare holding room should have appropriate health promotion literature displayed. (4.69)	Yes	GOV	Health promotion literature will be displayed in various forms within the holding area.	Literature available by 31 May 2006.
9.164	Records of professional registrations of healthcare staff should be available locally. (4.70)	No	HQ	For administration purposes the database is held centrally at PSHQ Central Pay Branch. When registrations require renewing, reminder notices are issued by HQ to nursing staff to ensure that all registrations are kept up to date and valid.	
9.165	Healthcare staff should receive training so that they can supervise prisoners using the newly installed gym equipment in the inpatient unit. (4.71)	Yes	GOV	Principal Officer PEI will review current processes and develop training for Nursing staff.	Review completed by 31 May 2006.
9.166	The print quality on drug labels should be of an acceptable standard. (4.72)	Yes	GOV	Healthcare manager and Pharmacist will review and consult with the supplier to effect the necessary changes in labelling.	Review completed by 31 May 2006.
9.167	A signature should be obtained from the patient to confirm receipt of any medication supplied that is intended for self-administration. (4.73)	No	GOV/HQ	This is not practice in the community either at local pharmacy or in a hospital/care home environment. It is considered to be impracticable and time consuming in the prison setting.	

<b>Rec No</b>	<b>Recommendation</b>	<b>Accept Y/N</b>	<b>Driver</b>	<b>Action</b>	<b>Target date</b>
9.168	Copies of injury to inmate forms should be filed for safe-keeping with use of force paperwork. (6.65)	Yes	GOV	Health & Safety will co-ordinate completion of injury to inmate forms within seven days of the incident.	31 May 2006.
9.169	Prisoners should be routinely provided with written confirmation of any punishments, and with information about their right of appeal. (6.66)	Yes	GOV	The revised draft of the Adjudication Manual stipulates that prisoners will be provided with written confirmation of any awards and information on their right of appeal. Prisoners will be provided with an awards sheet.	Internal consultation of the revised Adjudication Manual will be concluded by June 2006.
9.170	The salient points of an adjudication hearing should be recorded on the written transcript. (6.67)	Yes	HQ/GOV	The revised draft of the Adjudication Manual sets out that adjudicators are now required to record the main points of the adjudication on the written transcript.	Internal consultation of the revised Adjudication Manual will be concluded by June 2006.
9.171	The leaflet explaining PREPS should be given to all newly received inmates. (6.88)		GOV	The PREPS leaflet is currently being updated and will be included as part of the induction package at each establishment.	30 September 2006.



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