



REPORT ON AN UNANNOUNCED INSPECTION OF  
**MAGILLIGAN  
PRISON**

9 - 26 SEPTEMBER 2025

MARCH 2026



Education and  
Training Inspectorate  
Empowering Improvement



The Regulation and  
Quality Improvement  
Authority



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

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

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\* Appendix 3, 4 and 5 are available to view or download from the report page for this Inspection on the CJI website - [www.cjini.org](http://www.cjini.org)

# LIST OF ABBREVIATIONS

<b>AD:EPT</b>	Alcohol and Drugs: Empowering People through Therapy
<b>ASD</b>	Autism Spectrum Disorder
<b>CAB</b>	Challenging Antisocial Behaviour
<b>CJI</b>	Criminal Justice Inspection Northern Ireland
<b>CSU</b>	Care and Supervision Unit
<b>ETI</b>	Education and Training Inspectorate
<b>GOALS</b>	Gaining Opportunities and Living Skills
<b>GP</b>	General Practitioner
<b>HMI Prisons</b>	His Majesty's Inspectorate of Prisons in England and Wales
<b>ICT</b>	Information and Communications Technology
<b>IRC</b>	Immigration Removal Centre
<b>LAPPP</b>	Local Area Public Protection Panel
<b>NDPB</b>	Non-Departmental Public Body
<b>NIPS</b>	Northern Ireland Prison Service
<b>NPM</b>	National Preventive Mechanism
<b>NWRC</b>	North West Regional College
<b>OPCAT</b>	Optional Protocol to the Convention Against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment
<b>OST</b>	Opiate Substitution Therapy
<b>OU</b>	Open University
<b>PDP</b>	Personal Development Plan
<b>PDU</b>	Prisoner Development Unit

<b>PEEP</b>	Personal Emergency Evacuation Plan
<b>PPANI</b>	Public Protection Arrangements Northern Ireland
<b>PQC</b>	Promoting Quality Care
<b>PREPS</b>	Progressive Regimes and Earned Privileges Scheme
<b>PRISM</b>	Prison Record Information System Management
<b>PSST</b>	Prisoner Safety and Support Team
<b>RNLD</b>	Registered Nurse for Learning Disability
<b>RQIA</b>	Regulation and Quality Improvement Authority
<b>SEHCST</b>	South Eastern Health and Social Care Trust
<b>SEN</b>	Special Educational Needs
<b>SENCo</b>	Special Educational Needs Co-ordinator
<b>SPAR Evo</b>	Supporting People at Risk Evolution
<b>SMART</b>	Self-Management and Recovery Training
<b>STEM</b>	Science, Technology, Engineering and Mathematics
<b>UK</b>	United Kingdom

**Note:** Electronic links to documents and information sources referenced within this report are correct at time of publication but may be subject to change where the information is outside CJI’s control.

# CHIEF INSPECTORS' FOREWORD

It was a pleasure to inspect this very well-run category 'C' prison. The long-serving Governor had set a clear direction for the jail and the scores of 'good' in each of our healthy prison assessments are a credit to his dynamic leadership and his personal investment in making improvements across the prison.

The excellent staff-prisoner relationships at the jail underpinned much of the good work that we saw and Inspectors frequently noted positive interactions. This was one of the reasons why levels of violence and use of force were much lower than equivalent prisons – staff knew the men in their care and were able to offer bespoke support to individual prisoners.

While levels of drug taking were much lower than in most jails in England, there was a problem with prescribed medication finding its way to the wrong prisoners. Leaders will need to develop a more dynamic drugs strategy to prevent current and future threats. While the treatment on offer from the hard-working team was very good, there were not enough practitioners to meet the needs of the many prisoners with addiction issues.

Time out-of-cell was some of the best we have seen in recent years and only a few prisoners were not involved in one of the impressive range of activities. Education was generally of good quality with a much greater proportion of prisoners getting Level Two qualifications than on our last inspection. There was also some good

support in place for non or poor readers, with the education provider working in collaboration with Bridging the Gap mentors. The Northern Ireland Prison Service leaders at Magilligan and other stakeholders had not yet done enough to provide a more joined-up service to make sure more prisoners got work on release.

The accommodation standards at Magilligan had improved, with better showers on some wings, while prisoners and staff worked hard to maintain standards on the older wings which were, however, showing their age. Foyleview had been expanded and the impressive new House of Worship had opened. In the longer term however, the Northern Ireland Prison Service will need to take some strategic decisions on the remodelling of a site that still relies on second World War Nissen huts to accommodate workshops.

The Care and Supervision Unit continued to be the best that Inspectors have seen in the United Kingdom. There was bespoke support and challenge to the segregated men who had a wide variety of needs. The regime was better than we usually see and most prisoners were moved out after just a few days.

Although the prison had developed work arounds to support progression, there were insufficient spaces on accredited offending programmes to accommodate the needs of the population. The Northern Ireland Prison Service must do more to make sure that men can undertake the programmes prescribed in their sentence plans.

The use of data continues to be a weakness both in the prison and within the Northern Ireland Prison Service. Leaders need to develop greater expertise in using data to analyse, act and measure progress in areas such as safety and fair treatment. There are also some data sources that could be better tapped to assess outcomes, such as stable accommodation on release and employment levels of men who have left the prison.

Appropriate social care arrangements for an aging population continues to be an issue that needs a sustainable solution.

In this very positive report, we highlight some challenges which remain both for Magilligan Prison leadership and more widely for the Northern Ireland Prison Service, the South Eastern Health and Social Care Trust and the Strategic Planning and Performance Group. Magilligan, however, is now one of the very best prisons in the United Kingdom, and leaders and staff can rightly be proud of the positive, rehabilitative environment they have created.

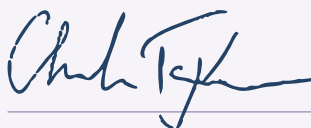


**Jacqui Durkin**

Chief Inspector of Criminal Justice  
in Northern Ireland

**March 2026**

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



**Charlie Taylor**

HM Chief Inspector of Prisons  
in England and Wales

**March 2026**



# WHAT NEEDS TO IMPROVE AT MAGILLIGAN PRISON (MAGILLIGAN)

During this inspection we identified 11 key concerns, of which four should be treated as priorities. Priority concerns are those that are most important to improving outcomes for prisoners. They require immediate attention by leaders and managers. Key concerns are those that require leaders<sup>1</sup> and managers to change a practice and/or identify new or redirected resources to address the concern.

Leaders should make sure that all concerns identified here are addressed and that progress is tracked through a plan which sets out how and when the concerns will be resolved. The plan should be provided to Criminal Justice Inspection Northern Ireland (CJI).

## PRIORITY CONCERNS

- 1. The supply and misuse of drugs, particularly medication not prescribed to the prisoner, was the most significant threat to safety and stability at Magilligan.**  
Weaknesses in the local strategy hindered the prisons' ability to respond effectively.
- 2. Many of Magilligan's buildings were old, worn and in need of replacement.**  
Significant investment from the Department of Justice was needed to upgrade living conditions to secure the prison's long-term place in the prison estate.
- 3. Substance misuse and addiction services were not adequately funded and did not meet the demand for support.** The quality of the service was good, but prisoners waited too long to be added to caseloads, resorting to illegitimate drug use to manage their addictions.
- 4. There was no overarching employability strategy from the Northern Ireland Prison Service (NIPS) and education leaders to bring together all stakeholders to ensure coherence and continuity in prisoners' targeted pathways to employment.**

<sup>1</sup> In this report the term 'leader' refers to anyone with leadership or management responsibility in the prison system. Our narrative is directed at the level of leadership which has the most capacity to influence a particular outcome.

## KEY CONCERNS

5. **Body-worn video cameras were significantly underused.** Leaders had not implemented effective strategies to address this issue.
6. **Additional measures were needed to ensure the availability of an efficient General Practitioner (GP) service that delivers timely care to patients.**  
The waiting list for non-urgent appointments was unacceptably long and did not align with timescales in the community.
7. **Adult safeguarding arrangements were not fully effective.** There still was no agreed policy and system in place to make referrals when needed.
8. **Not all allegations of discrimination were being identified and those that were did not evidence thorough investigation.**
9. **There was no formalised professional learning strategy for staff to help them meet the needs of an increasingly neurodivergent population.**
10. **The provision of accredited offending behaviour programmes and psychology resources were not sufficient for the population.**
11. **Public protection arrangements were still not sufficiently robust.**  
Video calls and correspondence were not monitored by staff.

# ABOUT MAGILLIGAN PRISON

## TASK OF THE PRISON

Magilligan Prison is a medium/low security prison holding sentenced prisoners received on transfer from Maghaberry Prison and on occasion from Hydebank Wood Secure College.

## CERTIFIED NORMAL ACCOMMODATION AND OPERATIONAL CAPACITY<sup>2</sup>

Prisoners held at the time of inspection:	Baseline certified normal capacity:	In-use certified normal capacity:	Operational capacity:
496	444	444	502

## POPULATION OF THE PRISON

532 new prisoners were received in the last year.	21 prisoners were foreign nationals and a further 98 were from the Republic of Ireland.	95% of prisoners were from a white background.
42 prisoners were released into the community each month.	Over 80% of prisoners were involved in education, skills and work.	

<sup>2</sup> Baseline Certified Normal Accommodation (CNA) is the sum total of all certified accommodation in an establishment except cells in the Care and Supervision Unit, healthcare cells or rooms that are not routinely used to accommodate long stay patients. In-use CNA is baseline CNA less those places not available for immediate use, such as damaged cells, cells affected by building works, and cells taken out of use due to staff shortages. Operational capacity is the total number of prisoners that an establishment can hold without serious risk to good order, security and the proper running of the planned regime.

## PRISON STATUS AND KEY SERVICE PROVIDERS

### Status: Public:



South Eastern Health  
and Social Care Trust

Physical and mental health provider



South Eastern Health  
and Social Care Trust



which is commissioned by  
the South Eastern Health  
and Social Care Trust

Substance use treatment providers



north west  
regional college  
Derry-Londonderry • Limavady • Strabane

Learning and skills provider  
with delivery sub-contracted to  
North West Regional College

## DEPARTMENT



Department of  
**Justice**

[www.justice-ni.gov.uk](http://www.justice-ni.gov.uk)

## DIRECTOR OF PRISONS

David Kennedy.

## BRIEF HISTORY

The prison opened in May 1971 as a 'compound prison' and in May 1972 became Magilligan Prison. The original Nissen huts and compound accommodation were replaced in the early 1980s. In 1994, Foyleview Unit was commissioned as a semi-open facility. Alpha Unit, a 50-bed unit, was opened in 2008 and Halward House, a 60-cell residential unit, opened in 2009. The H-Blocks are still in use and have been refurbished to include double-glazed windows, in-cell sanitation or wooden doors to allow 24-hour access to toilets.

## SHORT DESCRIPTION OF THE RESIDENTIAL UNITS

### ***Halward House***

Lower landing induction unit/committals  
Upper landing general population.

### ***House 1***

A wing: General Population (including Enhanced Workers)  
B to D wings: General population.

### ***House 2***

A and B wings: Complex needs/older prisoners  
C and D wings: Vulnerable prisoners/general population.

### ***House 3***

A to D wings: General population.

### ***Alpha – (Foyleview Assessment Unit):***

50-bed single rooms (not cells) with low supervision and 24-hour access to toilet.

### ***Foyleview (low security semi-open unit):***

Three modular buildings (known as the terrapins) with 34 single rooms (not cells).

***Care and Supervision Unit:*** 14 single cells, one observation cell and one drug recovery cell.

### **Name of Governor and date in post**

Gary Milling, 3 May 2021 – present.

### **Leadership changes since the last Inspection**

None.

### **Independent Monitoring Board (IMB) Chair**

Margaret McCrory.

### **Date of last Inspection**

21 May – 10 June 2021 (published February 2022).

### **Independent Review of Progress**

31 October - 2 November 2023 (published February 2024).

# ABOUT THIS INSPECTION

CJI is an independent statutory Inspectorate, established under the Justice (Northern Ireland) Act 2002, constituted as a Non-Departmental Public Body (NDPB), a Corporation Sole, in the person of the Chief Inspector. CJI was established in accordance with Recommendation 263 of the Review of the Criminal Justice System in Northern Ireland in March 2000.

His Majesty's Inspectorate of Prisons in England and Wales (HMI Prisons) is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, secure training centres, immigration detention facilities, police and court custody and military detention.

The Regulation and Quality Improvement Authority (RQIA) is a NDPB responsible for monitoring and inspecting the quality, safety and availability of health and social care services across Northern Ireland. It also has the responsibility of encouraging improvements in those services. The functions of the RQIA are derived from the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003. In addition to this inspection report, as a regulatory body, the RQIA provide an additional report to the South Eastern Health and Social Care Trust (SEHSCT).

All inspections carried out by HMI Prisons and those prison inspections jointly carried out with CJI in Northern Ireland with support from the RQIA, contribute to the United Kingdom's (UK's) response to its international obligations under the Optional Protocol to the United Nations Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies - known as the National Preventive Mechanism (NPM) - which monitor the treatment of and conditions for detainees. CJI, HMI Prisons and RQIA are three of over 20 NPM member bodies in the UK.

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

All CJI and HMI Prisons reports carry a summary of the conditions and treatment of prisoners, based on HMI Prison's four tests of a healthy prison that are *Safety, Respect, Purposeful activity* and *Preparation for release*. Magilligan Prison was assessed against the criteria for assessing the treatment of and conditions for men in prison (the *Expectations*) as updated in September 2023.<sup>3</sup>

The detail of how the outcomes for prisoners were assessed against the healthy prisons tests, how findings are reported and who carried out this inspection is set out in Appendices 1 and 2. The prison population profile at the time of the inspection is included at Appendix 3. The methodology used to conduct the prisoner and staff surveys and the results are published as separate documents on the CJI website.

This Inspection was assisted by the use of Microsoft Copilot, an Artificial Intelligence (AI) powered tool, guided and reviewed by CJI Inspectors, in line with UK Government AI policy and CJI's interim AI policy.

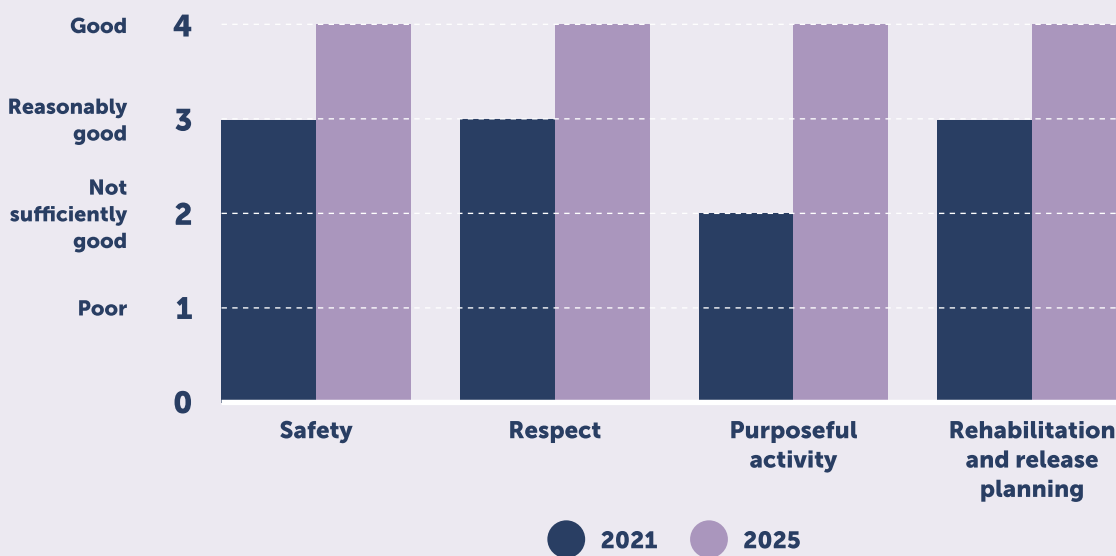
<sup>3</sup> HMI Prisons, *Expectations, Criteria for assessing the treatment of and conditions for men in prison, Version 6, 2023* available at <https://cloud-platform-e218f50a4812967ba1215eaecede923f.s3.amazonaws.com/uploads/sites/19/2025/09/Mens-Expectations-2023-FINAL.pdf>.

# CHAPTER 1: SUMMARY OF KEY FINDINGS

## OUTCOMES FOR MEN IN PRISON

- 1.1 We assess outcomes for men in prison against four healthy prison tests: *Safety*, *Respect*, *Purposeful activity*, and *Preparation for release* (see Appendix 1 for more information about the tests). We also include a commentary on leadership in the prison (see Chapter 2).
- 1.2 At this inspection of Magilligan Prison we found that outcomes for men were:
- good for safety;
  - good for respect;
  - good for purposeful activity;
  - good for preparation for release.
- 1.3 We last inspected Magilligan Prison in 2021. Figure 1 shows how outcomes for men have changed since the last inspection.

**Figure 1: Magilligan Prison healthy prison outcomes 2021 and 2025**



## PROGRESS ON RECOMMENDATIONS FROM THE LAST INSPECTION

- 1.4 At our last inspection in 2021, we made 30 recommendations, two of which were about areas of key concern.
- 1.5 At this inspection, we found that both of the recommendations about key areas of concern had been achieved. Overall, 20 of our recommendations had been achieved, two had been partially achieved and eight had not been achieved. For a full list of progress against all of the recommendations, see Chapter 7.

## NOTABLE POSITIVE PRACTICE

- 1.6 We define notable positive practice as:

**Evidence of our expectations being met to deliver particularly good outcomes for prisoners, and/or particularly original or creative approaches to problem solving.**

- 1.7 Inspectors found 19 examples of notable positive practice during this inspection, which other prisons may be able to learn from or replicate. Unless otherwise specified, these examples are not formally evaluated, are a snapshot in time and may not be suitable for other establishments. They show some of the ways our expectations might be met but are by no means the only way.

### Examples of notable positive practice

a) Prisoners were motivated to behave positively and engage with their sentence plan because there was a clearly defined and publicised pathway through different types of accommodation, culminating with the working out unit on Foyleview.	<b>See paragraph 3.13</b>
b) The Prisoner Safety and Support Team (PSST) Safety and Support Hub provided a safe and welcoming space, where prisoners who were struggling could relax and receive support from their peers.	<b>See paragraph 3.15</b>
c) The Care and Supervision Unit (CSU) therapeutic garden and well-equipped exercise yard provided a positive environment that supported prisoner wellbeing.	<b>See paragraph 3.26</b>
d) The PSST were exceptional in responding to prisoner needs. They met regularly with prisoners who required additional support, maintaining robust oversight and good recording mechanisms to protect the prisoners in their care.	<b>See paragraphs 3.39 and 3.41</b>

Examples of notable positive practice	
e) An impressive therapy room, created by the PSST, provided a calming environment for neurodivergent prisoners. Featuring sensory displays and reduced noise levels, the room was available to prisoners who needed time away from the bright lights and noise of the house blocks.	See paragraph 3.43
f) A formal data-sharing agreement between the prison and the South Eastern Health and Social Care Trust (SEHSCT) represented the first electronic shared record of its kind and is considered a leading example across the UK.	See paragraph 4.51
g) The addition of a registered nurse for learning disability had positively impacted patients with learning disabilities and other neurodiverse conditions, including acquired brain injury and autism. There were ongoing plans in place to enhance communication and help staff across the prison better understand and support those with a learning disability or other neurodiverse conditions.	See paragraph 4.54
h) Magilligan is the first prison in the UK to receive the Communication Access UK Award, recognising outstanding support for patients with communication difficulties.	See paragraph 4.71
i) The distribution of nasal naloxone kits for those commencing periods of leave or at the point of release demonstrated good practice, ensuring access to a vital, life-saving intervention for prisoners with a history of addiction.	See paragraph 4.89
j) The prison had a varied and creative offering of enrichment activities taking place on both the residential units and other parts of the prison. The Prison Arts Foundation was particularly prominent, delivering a wide range of art, creative writing and music activities across the prison that was highly valued by prisoners.	See paragraph 5.3
k) Magilligan was the second prison in the UK to have established a regular Parkrun, enabling prisoners to participate in the increasingly popular community event to enhance participants' health and wellbeing.	See paragraphs 5.7
l) The Trauma Talks programme, delivered by Start 360 through its AD:EPT (Alcohol and Drugs: Empowering People Through Therapy) service, was designed to educate prisoners about childhood trauma. The programme shows them tools to help calm their nervous system, reduce prison aggression, find resilience, and become a productive member of society upon their release. The impact of this programme was well tracked and monitored and demonstrated reduced adjudications and fewer positive drug testing for those taking part.	See paragraph 5.32

## Examples of notable positive practice

<p><b>m)</b> It was notable that the NIACRO-supported Springboard Hospitality initiative has provided training programmes for 40 prisoners. This has resulted in 58% of them gaining employment on release, providing a critical direct link from custody to work in the community.</p>	<p>See paragraph 5.33</p>
<p><b>n)</b> Each year prisoners, together with members of the community, shared their creative work by taking part in the Koestler Awards. Entrants of all abilities were encouraged to submit entries in visual art, design, writing and music. It was notable that in 2025 the prisoners in Magilligan achieved 78 Koestler Arts Awards including five Platinum awards; no other prison in the UK gained as many awards in total.</p>	<p>See paragraph 5.34</p>
<p><b>o)</b> The needs of children with autism attending social visits were better met with the introduction of sensory visits. These sessions had fewer visitors and were prepared with sensory resources, meals and refreshments suited to each child's needs.</p>	<p>See paragraph 6.1</p>
<p><b>p)</b> The Speech and Language Therapist provided an exceptional person-centred service. They had improved communication, enhanced inclusivity and diversity across the prison, and improved engagement between patients and their children, most notably through programmes such as 'Help Kids Talk' which helped prisoners to build confidence in supporting their child's communication.</p>	<p>See paragraph 6.6</p>
<p><b>q)</b> Newly arrived prisoners were given a helpful sentence booklet that included key dates, such as eligibility for conditional early release, information about courses available at the prison and in the community.</p>	<p>See paragraph 6.12</p>
<p><b>r)</b> There was an impressive range of non-accredited personal development and resettlement courses delivered by staff, partners and prisoners. This included the Gaining Opportunities and Living Skills (GOALS) course which focused on improving self-esteem and personal responsibility.</p>	<p>See paragraph 6.27</p>
<p><b>s)</b> Leaders had started to track data on prisoners' behaviour before and after participation in some courses, which in many cases demonstrated an improvement after completion.</p>	<p>See paragraph 6.28</p>

## CHAPTER 2: **LEADERSHIP**

Leaders provide the direction, encouragement and resources to enable good outcomes for prisoners.

- 2.1 The Governor and his team had clearly worked hard to make the rehabilitative vision for the prison a reality, which stakeholders at every level were committed to delivering. A committed and capable team of staff, prisoners and partners worked together to create a positive culture characterised by trust, collaboration and care.
- 2.2 Almost everyone living or working at Magilligan was motivated and enabled to contribute to the delivery of its aims and objectives. There was a clear pathway for progression, and many prisoners were being equipped with the skills and behaviour they needed to fulfil their potential on release, but a lack of investment in accredited offending behaviour programmes left some gaps in offence-related work.
- 2.3 Senior leaders valued their staff and trusted and encouraged them to make decisions and find solutions to problems. This had led to the creation of a capable and motivated team of first-line managers.
- 2.4 Teamwork was a strength and, despite staffing shortfalls at Officer level, staff pulled together to make sure that the regime for prisoners was delivered fully and consistently.
- 2.5 Compared to many similar prisons in England and Wales, Magilligan was a safe institution. While evidence of adherence checks indicated minimal diversion, the diversion and misuse of medication not prescribed to the prisoner was a threat to the prison's stability and positive culture, and leaders needed a firmer grip on this issue. The AD:EPT service provided by Start360 was excellent, but it was not reaching enough prisoners. Greater investment in healthcare was needed to provide timely access to medication, treatment and support to reduce drug-related harm and support safer, sustained recovery on release from prison.
- 2.6 The prison was made up of a series of old, and some dilapidated, buildings that required significant investment from the NIPS.
- 2.7 There were many examples of excellent partnership work which provided opportunities for prisoners to improve their skills and wellbeing and prepared them for release. This work could, however, be better co-ordinated and communicated.

- 2.8 There were gaps in the effective use of data in several areas including safety, particularly in relation to understanding trends over time and measuring improvement. For example, the analysis of equalities data was too narrow and the overwhelming focus was limited to comparing outcomes for Catholic prisoners against those for other faiths. The number of ethnic minority prisoners had doubled since our last inspection and 5% of prisoners now came from backgrounds other than white. However, while acknowledging the Governor’s engagement efforts there was no interrogation of data to understand their experiences.
- 2.9 Overall, Magilligan was a well-led institution. The Governor’s passion, energy and commitment inspired and motivated others and had clearly contributed to the good outcomes we found on this inspection.

## CHAPTER 3: SAFETY

Prisoners, particularly the most vulnerable, are held safely.

### EARLY DAYS IN CUSTODY

**Expected outcomes:** Prisoners transferring to and from the prison are safe and treated decently. On arrival, prisoners are safe and treated with respect. Risks are identified and addressed at reception. Prisoners are supported on their first night. Induction is comprehensive.

- 3.1 In our survey, 86% of respondents said they were treated well by reception staff, and our observations supported this.
- 3.2 Most new arrivals were prisoners on a progressive transfer from Maghaberry Prison. They typically arrived on Tuesdays around lunchtime, a predictability that enabled staff to be well prepared. Reception procedures were generally efficient, and efforts were made to ensure prisoners moved off the unit to their residential accommodation promptly.
- 3.3 A useful information booklet with key information about Magilligan was issued to all prisoners before transfer so they knew what to expect on arrival. Although most prisoners spoke English, a good range of information, including this booklet, had been translated into other languages.
- 3.4 The reception area was small but functioned well. Holding rooms were clean, albeit basic, and newly arrived prisoners spent limited time in these spaces. A useful frequently asked questions poster was displayed on noticeboards, addressing key concerns such as the status of phone credit previously purchased at Maghaberry Prison.



Photograph 1: Reception holding room

- 3.5 The PSST met with new arrivals to complete an initial assessment of vulnerability and risk. This took place in a private space and was a good opportunity for prisoners to raise concerns. Any issues raised were referred to partner agencies and the team followed these through to completion.
- 3.6 Prisoners moved from reception through Healthcare and on to Halward House, where staff checked them in before commencement of an initial induction. Officers explained how to access key services, such as placing shop orders, which were delivered the following day. The induction process was supported by peer mentors, who outlined what prisoners could expect over the coming days. Prisoners convicted of a sexual offence were housed and appropriately inducted on a separate vulnerable prisoner wing.
- 3.7 A more structured programme began the following day, starting with a gym induction, followed by a session on the work of the Prisoner Development Unit (PDU) which covered key aspects of prison life. The induction programme concluded with education assessments to determine learning requirements and suitable activity placements.
- 3.8 Cells on both induction units were mostly clean and equipped with appropriate items. During their first night, new arrivals were checked by staff every two hours.
- 3.9 The new arrivals we observed received their property promptly, although there was evidence this was not always the case. Property was one of the most common issues raised in complaints from prisoners and the system for retrieving property was not always efficient (see paragraph 4.15).
- 3.10 The regime for prisoners on the induction unit (Halward House) was better than we usually see with prisoners unlocked for most of the day, as was the case on all units (see paragraph 5.2).

## PROMOTING POSITIVE BEHAVIOUR

**Expected outcomes:** Prisoners live in a safe, well-ordered and motivational environment where their positive behaviour is promoted and rewarded. Unacceptable conduct is dealt with in an objective, fair, proportionate and consistent manner.

### Encouraging positive behaviour

- 3.11 Levels of violence at Magilligan remained extremely low, with just 25 incidents in the previous 12 months. Most incidents were low-level fights or scuffles, and overall rates of violence remained among the lowest of all category 'C' prisons. Serious incidents were exceptionally rare.
- 3.12 Magilligan was calm and well ordered. Behaviour was formally managed through the Progressive Regimes and Earned Privileges Scheme (PREPS) but, in practice, the most powerful driver of good behaviour was the positive culture.
- 3.13 Prisoners were provided with a wide range of opportunities, interventions and support that encouraged them to engage in their sentence. Leaders had set a clear pathway for progression through the different residential wings with increasing privileges and benefits at each stage, culminating at Foyleview which offered opportunities for release on temporary licence (see paragraph 6.16). In our survey, while some (16%) prisoners reported feeling unsafe at the time of inspection, significantly fewer than elsewhere said they had been victimised by staff (20% compared to 35%), and the excellent relationships we found were clearly a protective factor within the safe culture.
- 3.14 The PSST was a real strength. It was led by two capable and knowledgeable Senior Officers, supported by a team of enthusiastic staff members and an impressive Administrative Support Officer. The team was proactive and well known to prisoners, with high levels of daily contact with the men on their caseloads. A weekly safety and support meeting, and a monthly strategy meeting ensured that risks were identified promptly, and action was taken to maintain safe outcomes for prisoners.
- 3.15 The Safety and Support Hub, run by the PSST, was another notable strength. It provided a safe, welcoming and well-managed space where prisoners who might be struggling could relax, feel supported and engage with their peers in a constructive environment.



Photographs 2-5: Safety and Support Hub

3.16 Low-level antisocial behaviour was managed through the challenging antisocial behaviour (CAB) system. In the past year, staff had opened 15 CAB booklets and staff monitored these cases closely, involving prisoners in the process. While supervision in these cases was good, there were rarely any clear targets or interventions identified to help staff understand and address the underlying causes of poor behaviour.

3.17 Prisoners who were vulnerable due to the nature of their offence were kept safe in separate residential accommodation on House 2 and could access a comparable regime to the general population. In some limited cases, there was evidence of these prisoners being able to progress to residential units with more benefits and rewards.

### Adjudications

3.18 The number of adjudications remained low and most related to drug charges, either for failed tests or refusals to be tested. The introduction of a fully electronic system allowed staff to generate records swiftly and enabled better monitoring of both current and outstanding charges. Hearings were held in a relaxed setting near the Care and Supervision Unit (CSU). Prisoners were given the opportunity to present their case and all hearings were recorded.



Photograph 6: Adjudication suite.

- 3.19 Leaders took a rehabilitative approach to managing prisoners who tested positive for drugs. The failed drug test programme encouraged men to engage with addiction support services. Where they did so, adjudications could be reviewed and, in some cases, withdrawn.
- 3.20 Governance arrangements for adjudications had improved, with a good quality assurance process led by a Governor. However, leaders reduced their opportunity to identify and address longer-term trends, by limiting their analysis of data to the previous two months.
- Use of force**
- 3.21 The positive culture and low levels of violence at Magilligan meant that staff rarely resorted to the use of force. In the last 12 months there had been 67 incidents, which was lower than in most comparator prisons and the lowest in the Northern Ireland prison estate. All but one of these incidents were spontaneous and most involved low-level guiding holds, with only 12 resulting in the use of full control and restraint techniques.
- 3.22 In the 12 months before inspection, batons had been drawn once but not used.
- 3.23 The footage we reviewed indicated that force was used as a last resort and its use was generally justified and reasonable. However, the incident reports lacked sufficient detail; many did not explain factors that had led to the incident or what was done to attempt de-escalation.

3.24 Oversight processes had improved and all incidents were now reviewed. However, a lack of depth in the scrutiny of these incidents hindered opportunities to improve practice. For example, little had been done to improve the quality of documentation completed by staff or the poor use of body-worn video cameras. The duty Governor did not provide sufficient challenge in relation to these omissions and instead signed off each incident with a repetitive line to say that the force used was appropriate. Data was not analysed well to help leaders make improvements.

### Segregation

3.25 Use of the CSU had increased since the last inspection, mainly because of the introduction of the body scanner to prevent the ingress of illicit items. This was reflected in our survey, where 33% of prisoners said they had been segregated, compared to 19% in similar prisons in England and Wales. Despite this, overall use remained relatively low compared with elsewhere, at an average stay of six days, and, in many cases, less than 24 hours for those who were lodged there temporarily following a positive indication on the body scanner.

3.26 Since the last inspection, living conditions in the CSU had improved further. Cells had been refurbished with new furniture and were clean, graffiti-free, and well-equipped. Communal areas were also clean and well maintained. The therapeutic garden and exercise yard were bright and welcoming, and far better than we normally see in segregation units.



Photographs 7- 8: Therapy garden (left) and CSU cell.



Photograph 9: CSU exercise yard

- 3.27 The regime was basic but consistent, with a small number of prisoners attending activities off the wing following risk-assessment. Staff kept electronic records of their contact with prisoners which confirmed they had been offered their daily entitlements (shower, phone call and exercise).
- 3.28 In our survey, 70% of prisoners said they were treated well by staff, and we observed positive relationships on the unit during our visit. Staff were clearly focused on reintegration, encouraging prisoners to return to their normal location as soon as possible. This approach was consistent with the wider culture of Magilligan to promote and support prisoner progression.
- 3.29 The prison held regular multidisciplinary boards to review the segregation of individual prisoners. Discussions did not always explore the underlying issues that had led to the prisoner being moved to the CSU, which made them less effective as an intervention to change behaviour. There was no other forum to provide oversight of the CSU, examine long-term data or identify any trends. This was a missed opportunity for learning and further improvement.

## SECURITY

**Expected outcomes:** Security and good order are maintained through an attention to physical and procedural matters, including effective security intelligence and positive staff-prisoner relationships. Prisoners are safe from exposure to substance use and effective drug supply reduction measures are in place.

- 3.30 Both physical and procedural security arrangements at Magilligan were proportionate and enabled leaders to provide a purposeful regime and deliver the positive outcomes we found across the prison.
- 3.31 The small team of experienced staff were led by two proactive Senior Officers. Risks were well understood, and intelligence was used effectively to identify and respond to most emerging threats. The team worked closely with the PSST and other departments and this contributed to a calm and well-ordered environment.
- 3.32 The main threat to stability at Magilligan was still the misuse of drugs by prisoners, particularly medication not prescribed to them. In our survey, 41% of prisoners said it was easy to obtain illicit drugs and 43% said it was easy to get medication not prescribed to them. In addition, 23% said they had developed a problem with drugs (including medication not prescribed to them) while at Magilligan, which was significantly worse than in similar prisons in England and Wales (15%).
- 3.33 Random drug testing in the previous 12 months showed a positive rate of 10.8% (17% including refusals). This placed the prison at the lower end of the category 'C' estate and most positive tests were for medication not prescribed to the prisoner. However, given the risks presented, leaders needed a stronger strategic grip on this issue to stop it becoming a more serious threat to safety and the positive culture they had worked hard to cultivate.
- 3.34 A local Drug Strategy and Action Plan were in place alongside a NIPS framework, but both lacked any meaningful data specifically about Magilligan so it was hard to see how these could be used to drive improvement. There was little analysis of trends over time or of the types of drugs being used, which limited leaders' ability to target actions effectively.
- 3.35 The introduction of an X-ray body scanner had helped reduce the risk of contraband entering the prison but some weaknesses remained, particularly at the gate, where searching of staff and others entering the prison was inconsistent.
- 3.36 Corruption prevention was taken seriously, with a good training package provided to staff. Visits were managed appropriately and, where incidents of trafficking were identified, robust action was taken, including the use of restrictions and bans that were monitored through the NIPS process.

## SAFEGUARDING

**Expected outcomes:** The prison provides a safe environment which reduces the risk of self-harm and suicide. Prisoners at risk of self-harm or suicide are identified and given appropriate care and support. All vulnerable adults are identified, protected from harm and neglect and receive effective care and support.

### Suicide and self-harm prevention

- 3.37 Since our last inspection, there had been one natural and one self-inflicted death. The Prisoner Ombudsman for Northern Ireland had not yet published his investigation report for either incident. However, Magilligan had carried out both hot and cold debriefs to identify any issues and learning. This resulted in the publication of a Governor's order, but the Death in Custody Action Plan had not been updated to reflect learning or confirm action taken.
- 3.38 Following both deaths, excellent support had been provided to prisoners and staff. Senior leaders were quick to respond and remove prisoners from the wing to spend the day in the wellbeing hub, receiving support from one another and the staff.
- 3.39 Self-harm was low compared to similar prisons in England and Wales, with around 75 incidents involving 34 prisoners in the last year. Staff provided good support to these prisoners with direct oversight and regular intervention from the PSST. The PSST also provided good support for other prisoners who were struggling to cope effectively.
- 3.40 Prisoners identified as being at risk of self-harm or suicide were managed through the Supporting People at Risk Evolution (SPAR Evo) case management process. There were no prisoners on a SPAR Evo during the Inspection, and over the last 12 months, 74 cases had been opened and closed. The prisoners we spoke to were positive about their experience of a SPAR Evo and the support received.
- 3.41 The cases of all prisoners receiving extra support were discussed at the weekly safety meeting to ensure their needs were being met. The PSST maintained robust oversight of prisoners on their caseload and had good recording mechanisms. They collated useful data, although leaders did not use the analyses effectively to inform actions to improve outcomes further.
- 3.42 An enthusiastic team of Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) provided an excellent service to their peers. They were supported well by the local Samaritans group and staff ensured they had good access to prisoners in need.

3.43 A well-designed therapy room had been established outside the PSST office to support prisoners with neurodivergent needs. It provided a calming environment featuring sensory displays and reduced noise levels. It was encouraging that the space was accessible to any prisoner requiring time away from the bright lights and noise of the house blocks.

3.44 Prisoners who had been assessed as requiring enhanced observation (every 15 minutes) were still routinely placed in a camera-recorded cell which, as an intrusive measure, should only be used as a last resort. Additionally, while leaders had successfully reduced the use of anti-ligature clothing, it was still too common. In the past year, there had been 56 uses of camera-recorded cells, 33 of which involved anti-ligature clothing, even when there was no history of tying ligatures. The Governor had taken steps to address this, including training sessions for Duty Governors delivered by the NIPS lead for prisoner welfare. Despite this, Duty Governors were still too quick to authorise the use of both these intrusive interventions.



Photograph 10: Safety and Support Sensory Room

### Protection of adults at risk<sup>4</sup>

3.45 Leaders were taking some steps to improve adult safeguarding. A new adult safeguarding lead had been appointed, and governor grades and a small number of staff had received training in this area in the past few weeks. However, all concerns and referrals were dealt with by NIPS managers and there was still no effective system for staff to make referrals to a Designated Adult Protection Officer in line with adult regional policy. Progress towards introducing a workable NIPS-wide adult safeguarding policy was too slow.

4 *Adult safeguarding is based on fundamental human rights and on respecting the rights of adults as individuals, treating all adults with dignity and respecting their right to choose. It involves empowering and enabling all adults, including those at risk of harm, to manage their own health and wellbeing and to keep themselves safe. It extends to intervening to protect where harm has occurred or is likely to occur and promoting access to justice. All adults at risk should be central to any actions and decisions affecting their lives. Adult Safeguarding: Prevention and Protection in Partnership, June 2015, page 5, available at [Adult Safeguarding: Prevention and Protection in Partnership key documents \(health-ni.gov.uk\)](https://www.health-ni.gov.uk).*

## CHAPTER 4: **RESPECT**

Prisoners are treated with respect for their human dignity.

### **STAFF-PRISONER RELATIONSHIPS**

**Expected outcomes:** Prisoners are treated with respect by staff throughout their time in custody and are encouraged to take responsibility for their own actions and decisions.

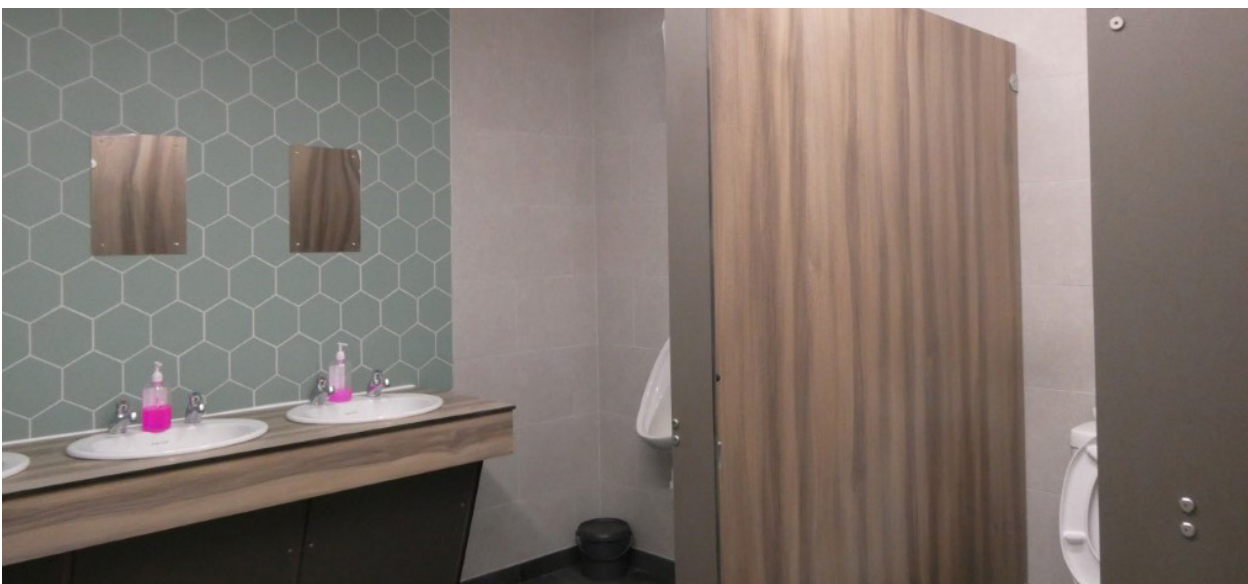
- 4.1 Relationships between staff and prisoners were excellent across much of the prison. In our survey, 87% of respondents said most staff treated them with respect, which was significantly better than last time (73%) and in similar prisons (71%). Our observations and interactions during the week supported this.
- 4.2 Relationships in Halward House, on enhanced landings and low-supervision units were particularly strong. Staff had a good understanding of prisoners' experiences and their wider personal and family circumstances. The support provided by staff and partners across the prison, personal development plan (PDP) co-ordinators, Family Officers, PSST staff, tutors, instructors and healthcare staff was highly regarded by many prisoners.
- 4.3 There was a strong sense of community which was evidenced by the care and commitment demonstrated by leaders and staff to support prisoners in many aspects of prison life. Leaders led by example, they regularly engaged with prisoners who praised their standards of care and humanity, and this engagement set the tone for staff and prisoner relationships across the prison.
- 4.4 Trained mentors were making an excellent contribution to prison life. They were highly motivated and committed to their roles. Their contribution was extremely well valued and respected by staff and leaders. In all, 40 prisoners covered 60 roles including Listeners, Bridging the Gap (formerly Shannon Trust), Barnardo's, ASK HIM (Health Information Mentor) and *AD:EPT* mentors. Formal arrangements for mentor supervision, training and support were being finalised.

## DAILY LIFE

**Expected outcomes:** Prisoners live in a clean and decent environment and are aware of the rules and routines of the prison. They are provided with essential basic services, are consulted regularly and can apply for additional services and assistance. The complaints and redress processes are efficient and fair.

### Living conditions

- 4.5 As reported in previous inspections, and despite some investment by NIPS in the infrastructure, there were still too many old buildings in need of replacement. In stark contrast to the last inspection, when all prisoners lived in single cells, almost 100 men now shared a cell with others and the prison was operating at around its full operational capacity.
- 4.6 Despite these weaknesses, there had been marked improvements to living conditions underpinned by effective arrangements to set, monitor and maintain high standards of cleanliness in residential units.
- 4.7 Prisoners were significantly more positive about many aspects of their daily life compared to similar prisons, including access to showers, clean clothing, bedding and cleaning materials.
- 4.8 Areas identified for immediate attention in the last inspection had been addressed and there was a rolling maintenance programme, supported by prisoner work parties and the prisons' trades team, to maintain the fabric of and facilities in residential units. This was an ongoing challenge given the age and condition of the older accommodation, but problems were responded to quickly. Much-needed plans to upgrade the showers, dining and recreation facilities in Houses 1, 2 and 3 were due to commence before the end of 2025.



Photograph 11: Refurbished sanitary facilities - Alpha House

- 4.9 In keeping with the Governor’s vision for the prison, the removal of razor wire and metal screens in yards and the landscaping of outdoor spaces contributed to the positive community feel of the site. The outdoor spaces had been substantially softened with the introduction of more greenery and planting. Entrance areas to all accommodation were clean and bright.



Photograph 12: Privacy screening House 2



Photographs 13: Outdoor area

- 4.10 Cells across the prison were generally clean and well presented. There was no graffiti and prisoners we spoke to took pride in keeping their cells in good order. Prisoners who were sharing cells and those with more property had limited storage in their cells.



Photograph 14: Cell

- 4.11 Most prisoners could make calls in private, apart from in Halward House where prisoners, particularly those who were key workers, experienced delays in accessing the landing phones. Prisoners on lower-supervision units had access to in-cell telephones.
- 4.12 There was good access to exercise yards and most had seating, tables and some outdoor gym equipment. The outdoor facilities in the CSU, for older prisoners in House 2 and prisoners living in Foyleview were impressive.
- 4.13 A new 10-bed unit at Foyleview was due to open shortly to provide additional places for prisoners preparing for their release into the community. This was the only new accommodation built since the last inspection, although the Closed Circuit Television (CCTV), power, heating and ventilation infrastructure across the prison had been replaced and provided the foundation for the future development of the prison.
- 4.14 The cell bell call system had been replaced in all residential units, except for the CSU, and call activations were being monitored effectively.
- 4.15 More prisoners than at the last inspection and in similar prisons said that they could access their stored property promptly (56%), but this was still a problem area. Difficulties accessing property were consistently among the highest areas of complaint and leaders had more to do to understand and address the issues being raised.

- 4.16 The prison held an appropriate range of personal, work and gym clothing. A clothing bank had recently been re-established. It was overseen by a dedicated Senior Officer and operated by three prisoners who took great care to ensure that clothing donated to the bank was decent and displayed well. Thirteen prisoners who had been identified on transfer as having very little clothing by staff and prison mentors had already benefited from the scheme.



Photograph 15: Clothing bank

### Residential services

- 4.17 In our survey significantly more prisoners than in similar prisons said that the quality of food was good (57% compared with 35%) and that they had enough to eat at mealtimes (62% compared with 31%).
- 4.18 Well-attended food forums took place regularly and it was evident that the catering team had actioned some of the suggestions raised at these meetings.
- 4.19 In all residential units, prisoners had the opportunity to eat together in spacious dining areas. The dining rooms in House 2 were particularly well presented and had a homely feel which encouraged prisoners to dine together. Other dining facilities were more basic, but plans were in place to address this.



Photograph 16: Dining area House 2

4.20 The evening meal was served from around 4pm, which was too early. However, all residential units had a good range of self-catering facilities with ample supplies of bread, milk and cereal available throughout the day. Prisoners could fill flasks with hot water before being locked in their cells and those men in the low-supervision units had access to hot water at any time of the day or night.



Photograph 17: Landing catering equipment

4.21 Prisoners living on most progression landings and low-supervision units had the opportunity to budget for, plan and make their own food to help them prepare for living independently. Some chose to cook together in groups and eat their meals together.

4.22 As well as catering for those with dietary and religious needs, the catering team also supported events to celebrate prisoner and staff achievements and other events for prisoners and their families, including child-centred visits (see paragraph 6.5). Over the summer there had been a series of barbecue evenings and these had contributed to the community ethos fostered by leaders.

4.23 Since the last inspection, a new shop (The Shore Store) had opened and this had increased the volume and range of products available. In our survey, 71% of prisoners said that the shop sold the things they needed which was significantly better than at similar prisons (60%). Weekly orders were well managed with few complaints.

### **Prisoner consultation, requests and redress**

4.24 Prison leaders recognised the value of consultation with prisoners to inform their own planning. They achieved this through regular forums on residential units where prisoners were able to raise concerns and make suggestions. Issues were addressed by Residential Managers or escalated to senior leaders for consideration.

4.25 Leaders demonstrated a genuine openness to the views of prisoners and there were many examples of positive change being initiated through this consultation process, including the development of a progression landing in House 3. Changes that were attributable to consultation were well communicated by 'you said...we did' posters in residential areas. In our survey, significantly more prisoners said that consultation led to change than we have seen in similar prisons (65% compared to 36%).

4.26 The request system was functioning well. Prisoners could resolve many day-to-day issues informally on the wing but completed request forms for matters dealt with by other departments. Once request forms were received by unit staff they were input to a digital system and forwarded to the relevant department for action.

4.27 In our survey, prisoners were much more positive about the ease of making requests, the ease of the timeliness, and the fairness of responses than in similar prisons.

4.28 The complaints system was generally working effectively. Most complaints were initially considered by junior managers and those that we reviewed were dealt with appropriately. In our survey, 68% of prisoners said complaints were dealt with fairly, which was significantly higher than in similar prisons (32%).

- 4.29 There was no facility for prisoners to direct serious complaints to senior managers confidentially, but we were satisfied that the process whereby junior managers sifted out potentially serious complaints for escalation was working effectively. However, we observed that after review by senior managers, the vast majority of these complaints were downgraded into the general complaints process. We did not consider this appropriate for allegations of discrimination (see paragraph 4.44) or any alleged abuse of prisoners by staff. For the latter category we identified several instances where prisoners alleged verbal abuse by staff that had been rejected as not being serious and had been sent back to junior managers to action. Those that we reviewed did not evidence thorough consideration. We noted that a particular staff member had been subject to several similar complaints of this nature by different prisoners over an extended period of time and, while it was apparent that some senior managers were aware of this pattern, no attempt had been made to explore it further.
- 4.30 A complaints report was analysed at the monthly equality and diversity meeting but the focus of the report, and discussions at the meeting, were limited to the experience of Catholic prisoners compared to others (see paragraph 4.43). Consequently, leaders were missing the opportunity to explore other complaint themes and trends.
- 4.31 Legal provision was reasonable. In our survey, prisoners were more positive about both the ease of communicating with legal representatives and attending legal visits than in similar prisons.

## FAIR TREATMENT AND INCLUSION

**Expected outcomes:** There is a clear approach to promoting equality of opportunity, eliminating unlawful discrimination and fostering good relationships. The distinct needs of prisoners with protected characteristics, or those who may be at risk of discrimination or unequal treatment, are recognised and addressed. Prisoners are able to practise their religion. The chaplaincy plays a full part in prison life and contributes to prisoners' overall care, support and rehabilitation.

- 4.32 The culture of the prison provided a solid foundation for the promotion of fair treatment. Prisoners were generally treated well and there were many examples of thoughtful support for prisoners with particular needs. However, there remained some gaps in the consideration of, or provision for, certain groups of prisoners.
- 4.33 In our survey, 55% of respondents said that they considered themselves to have a disability. Healthcare staff carried out prompt assessments on new arrivals, and the need for any adaptations was flagged. The PSST worked with the healthcare team to make sure that daily living aids were provided to prisoners.

- 4.34 In Halward House, there were two adapted cells and staff had a good understanding of the needs of the prisoners located there. Most other prisoners with physical disabilities were located on House 2 where there was clear evidence of individual support from residential staff, who knew these prisoners and their needs well.
- 4.35 Disabled prisoners with day-to-day support needs were paired with peer support orderlies. Personal emergency evacuation plans (PEEPs) were in place for those who needed them, and staff were broadly familiar with how to support these prisoners in an emergency.
- 4.36 There was some good support for prisoners with hidden disabilities, including a dedicated nurse specialising in learning disabilities and support for those with special educational needs (see paragraph 4.54). In our survey 34% of prisoners considered themselves to be neurodivergent. The prison had been working with external agencies to raise awareness of neurodiversity but, at the time of inspection, there had been no needs analysis and there was no clear strategy to guide their work with neurodivergent prisoners.
- 4.37 In total, 20% of prisoners were over 50, with around half of these being over 60. Many of the older prisoners were located in House 2 and benefited from a range of support and activities, including a 'man shed' where they could go to relax and read, an attractive yard with an aviary, and quiz and games nights.
- 4.38 There was also good provision for foreign national prisoners. Translated materials for many aspects of prison life were readily available. Staff from the PDU co-ordinated with the Home Office and worked well with groups, individually and within facilitated forums. Consultation had led to positive changes for these prisoners, including a broadened range of food items available at the tuck shop.
- 4.39 Nearly half (48%) of prisoners were Catholic. Unlike at our last inspection, our survey did not reveal poorer perceptions among these prisoners in most aspects of prison life. The exception was that fewer Catholic prisoners said that staff treated them with respect than their Protestant peers (82% against 98%). While both scores were objectively positive in relation to respect, the difference in perception was worthy of exploration by the prison.
- 4.40 At the time of inspection, there were only nine Muslim prisoners. It was noteworthy that the Governor had arranged for these prisoners to prepare meals together before Friday prayers and eat together afterwards and often joined them.
- 4.41 The prison was now systematically identifying LGBT+ prisoners on their arrival and there were good links with specialist external agencies.

- 4.42 The number of ethnic minority prisoners had doubled since our last inspection and 5% of prisoners now came from backgrounds other than white. There was limited specific consideration of their needs and no interrogation of data.
- 4.43 The prison's analysis of equalities data was too narrow and the overwhelming focus was limited to comparing outcomes for Catholic prisoners against those for other faiths. Moreover, a focus on monthly 'snapshot' data meant that longer-term trends, particularly among smaller groups, were not being identified.
- 4.44 The number of discrimination complaints was low, with only six submitted in the eight months before our inspection. There was no discrete discrimination reporting process in place, and such allegations were considered within the main complaints system (see paragraph 4.29). Although a junior manager was tasked with identifying potentially serious complaints for consideration by senior managers, there was at least one instance where an allegation of discrimination had not been picked up. Moreover, those discrimination complaints that had been identified for referral to senior managers were referred back to junior managers on the basis they were not serious. On review we found that the responses to these complaints did not evidence the thorough consideration that we would expect to see.

### **Faith and religion**

- 4.45 In our survey a high proportion of prisoners said that they were able to attend religious services if they wanted to (93%) and that their religious beliefs were respected at Magilligan (74%).
- 4.46 Since the previous inspection, Magilligan's first House of Worship had opened and provided an important focal point for pastoral services within the prison. Situated in the heart of the prison, it was also well used for other enrichment activities and events.
- 4.47 There had been gaps in the Chaplaincy team for some time, but at the time of inspection it was now fully resourced and supported by the Prison Fellowship. Chaplains were visible, an integral part of the prison and on site most days to conduct religious services. They met prisoners during induction, made regular visits to residential units and the CSU, responded to requests, and supported prisoners with limited funds to receive financial assistance through the St Vincent de Paul Society. Prison Fellowship continued to deliver the Sycamore Tree Programme in partnership with the PDU. A designated Chaplain contributed positively to monthly equality and diversity meetings.
- 4.48 Regular meetings with prison leaders provided opportunities to raise issues impacting Chaplaincy service delivery, although some long-standing issues around improving attendance at certain Catholic masses had not been fully resolved.

- 4.49 Remote attendance at funerals, memorial services and other significant religious occasions was facilitated and valued.

## HEALTH, WELLBEING AND SOCIAL CARE

**Expected outcomes:** Patients are cared for by services that assess and meet their health, social care and substance misuse needs and promote continuity of health and social care on release. The standard of provision is similar to that which patients could expect to receive elsewhere in the community.

The inspection of health services was jointly undertaken by the RQIA and HMI Prisons. The RQIA also assessed the delivery of healthcare against The Quality Standards for Health and Social Care, Supporting Good Governance and Best Practice in Health and Personal Social Services (HPSS), March 2006.<sup>5</sup>

## STRATEGY, CLINICAL GOVERNANCE AND PARTNERSHIPS

- 4.50 Healthcare played a valued and integral role within the prison, supported by strong leadership, a compassionate culture, collaborative team working and a commitment to continuous learning and improvement. Regular meetings and interactions at both senior and operational management levels demonstrated a shared vision and purpose aimed at achieving positive health outcomes for those living in the prison.
- 4.51 A formal data-sharing agreement between the prison and the SEHSCT had been developed and approved. Plans were in place for the launch of the Encompass digital health record which will interface with the Prisoner Record Information System Management (PRISM). This will enable real-time information sharing to enhance patient safety and care co-ordination. This initiative also represents the first electronic shared record of its kind and is considered a leading example across the UK.
- 4.52 A culture of openness and learning was reflected through a clear and effective complaints process. Robust governance oversight ensured that incident and complaint data were used to drive continuous improvement and enhance the quality of care provided.
- 4.53 Staff morale was good; staff spoke positively about their role and said they were well supported by senior management. Temporary staff were being utilised to ensure adequate or safe staffing levels while recruitment was being progressed.

5 Department of Health, Social Services and Public Safety, *The Quality Standards for Health and Social Care, Supporting Good Governance and Best Practice in the HPSS, March 2006* available at <https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/the-quality-standards-for-health-and-social-care.pdf>.

- 4.54 Since the last inspection, a learning disability pathway had been implemented and a Registered Nurse for Learning Disability (RNLD) appointed. The RNLD had a demonstrable positive impact on the care and support provided to patients with learning disabilities, autism and other neurodiverse conditions, including acquired brain injury. This role had improved access to healthcare, promoted the use of easy read materials, and enhanced staff awareness in meeting diverse needs. There were also ongoing plans to further strengthen communication and ensure a consistent, person-centred approach across the prison.
- 4.55 Primary healthcare nurses were appropriately trained to assess the needs of patients and to plan care as necessary. Nurses were encouraged to complete the health assessment module to equip them to perform comprehensive physical checks, enabling early detection of health issues, improving patient safety and supporting co-ordinated, timely care for patients.
- 4.56 While nurses were encouraged to complete identified areas of training, not all mandatory training was up-to-date for all staff. Budget constraints, restricting staff release for face-to-face training, were cited as a contributing factor.
- 4.57 Healthcare staff demonstrated good understanding of adult safeguarding, but not all had completed the appropriate level of training. A revised 2024 procedure developed by the SEHSCT in consultation with the NIPS, had improved the recording of concerns and outcomes. However, the NIPS policy and guidance, last updated in 2023, did not provide sufficient clarity in relation to the sharing of information or provide assurances on patient safety.
- 4.58 At the time of this inspection, the Department of Health and the Strategic Planning and Performance Group were still progressing a review of adult safeguarding arrangements in prison.
- 4.59 Patients seeking help with drug addictions were not receiving timely access to treatment and support. The AD:EPT service was excellent in its approach and delivery, but it did not reach everyone in need. Even with the additional recruitment of a clinical addictions practitioner, the service was not meeting the needs of patients.
- 4.60 The utilisation of commissioned healthcare resources and the requirement for further investment in healthcare remained under review.
- Promoting health and wellbeing**
- 4.61 All individuals arriving at the prison were seen by healthcare staff. The inter-prison transfer process included a review of committal information, and initial screening process checks were reviewed and re-offered as appropriate.

- 4.62 'Well-Men' screening was offered to every person on arrival and promoted the early identification of potential health issues. In line with public health guidance, sexual health advice and screening were also available. Barrier protection was available on request, supporting improved sexual health for patients.
- 4.63 Age-appropriate vaccinations were available to patients across all age groups, with good uptake in line with recommended guidelines.
- 4.64 Improved access is needed to ensure all individuals in prison can obtain health promotion information. While healthcare provided a broad range of health promotion literature to support awareness and self-management across various health and lifestyle topics, this information was not available within residential areas and communal spaces.
- 4.65 Smoking cessation services were provided in line with regional policy. Patients had access to a range of nicotine replacement therapies, alongside advice and guidance from healthcare staff.

### **Primary care and inpatient services**

- 4.66 Patients spoke positively about their experience with healthcare staff and, overall, the quality of primary healthcare was very good.
- 4.67 While patients requiring urgent care were able to see a GP promptly, and in emergency situations individuals were supported to attend emergency departments outside the prison, the waiting list to see a GP was unacceptably long. The governance arrangements in place to monitor the availability of GP services were not adequate, which impacted patient access.
- 4.68 Access to an optician, podiatry, a respiratory physiotherapy, occupational therapy and dentistry services were within equivalent waiting times to the community.
- 4.69 Waiting lists for speech and language therapy, dietetics, and physiotherapy were significantly longer than they should be, but consistent with community average.
- 4.70 Care for patients with long-term health conditions was well planned and effectively managed, enabling individuals to maintain their independence for as long as possible. However, too many external appointments (6.2% within the previous 12-month period) were being missed by patients due to inadequate transport escort arrangements provided by Prisoner Escort and Court Custody Services. Patients were not informed when their appointment could not be facilitated and were therefore unable to complain.

4.71 Magilligan is the first prison in the UK to be awarded the Communication Access UK Award, recognising the prison's commitment to promoting accessible communication methods and enhancing understanding for individuals with communication difficulties. This initiative was carried out in collaboration with the Governor to foster a wider culture of awareness and support within the prison, ensuring that those living and working within the prison community are better equipped to understand and respond to the needs of those with communication challenges.

### Social care<sup>6</sup>

4.72 While no prisoners required a care package at the time of this inspection, the absence of commissioned social care arrangements presented a risk to the prison's ability to return patients from acute care promptly. The continued lack of such arrangements is likely to result in delays in patient transitions or place additional pressures on healthcare staff and/or prison staff.

### Mental health

4.73 Collaboration and good relationships between healthcare staff and Officers promoted early identification, intervention and timely access to mental health services when required.

4.74 The Towards Zero Suicide practitioner position was vacant and funding constraints had delayed filling this appointment, reducing capacity to deliver suicide and self-harm prevention and awareness work, including prison-wide training.

4.75 The waiting list for a routine mental health assessment was low and well within the regional target. Patients requiring an urgent mental health appointment were seen promptly.

4.76 In-person consultant psychiatry appointments were not happening for all patients. An over-reliance on online video consultations resulted in patients experiencing an unsatisfactory consultant psychiatry service.

4.77 Collaboration between the prison's healthcare team and Health and Social Care Trusts varied in the application of the Promoting Quality Care (PQC) Framework, a best practice risk management framework used by mental health and learning disability care professionals. While the PQC was under regional review, led by the Department of Health, this inconsistency had the potential to compromise continuity of care and increase risk for patients transitioning to the community.

<sup>6</sup> A package of assistance with personal care to address the needs of individual prisoners at risk (that is assistance with activities of daily living such as washing, bathing, toileting but not amounting to medical care) and to enable the individual to return to self-caring where possible.

4.78 There was no agreed care pathway in place for patients with a personality disorder and access to psychological therapies remained insufficient. Positive steps had been taken to build staff understanding, including dedicated group sessions with psychology for Officers.

4.79 The addition of a Learning Disability Nurse to the healthcare team had positively impacted patients with learning disabilities and other neurodiverse conditions, including acquired brain injury and autism. Patients had been signposted, where appropriate, for formal psychometric assessment and there were good examples of engagement with community learning disability teams demonstrating improved pre-release planning. Accessible resources were in use within residential areas, including easy read documentation, communication passports (with patient consent), and the 'Just a Minute' JAM card, a recognised tool that helps individuals with a learning disability, autism or other communication barrier, discreetly request a minute of patience or understanding during communication.

### **Support and treatment for prisoners with addictions and those who misuse substances**

4.80 Overall, we found services to support prisoners with substance use and addiction issues were failing to meet the need due to chronic underfunding.

4.81 Relationships between the prison and providers was a strength, with good evidence of joined up working and providers attending key safety meetings led by the prison. It was positive that providers held a weekly multidisciplinary team meeting involving all four prisons in Northern Ireland.

4.82 Waiting lists for clinical addictions, and psychology were significantly longer than they should be.

4.83 Clinical substance misuse services were providing treatment to 49 patients on opiate substitution therapy (OST). It was troubling that, despite our concerns last time, there remained a waiting list of 20 prisoners who were waiting to access OST, the longest wait being over 12 months.

4.84 There was a flexible, patient-centred approach to prescribing and it was commendable that a high number of patients (21) were prescribed long-acting buprenorphine injections. Clinical reviews were taking place at the necessary intervals. We observed confidential administration of OST in healthcare but repeat our findings of 2017 and 2021 that it is a waste of valuable clinical time to be using manual measuring equipment.

4.85 AD:EPT delivered psychosocial support to 79 patients. Concerningly, a further 195 were on the waiting list, with the longest wait being four months. The waiting list was partly due to some sickness within the team but, overall, it was significantly insufficiently resourced.

- 4.86 All prisoners arriving at Magilligan were seen by AD:EPT and a team of suitably trained and supervised harm reduction peer mentors were available for advice in the committals unit and on the induction wing. Mentors also delivered weekly induction sessions for new arrivals.
- 4.87 The care that was being delivered was of a particularly good standard. An impressive range of individual one-to-one and group therapies were being facilitated which included Self-management and Recovery Training (SMART), acupuncture, art therapy, horticulture, yoga and emotional freedom techniques. Veterans could access specialist support through the providers 'Rendezvous' project<sup>7</sup> which was positive.
- 4.88 Weekly mutual aid was facilitated, and it was notable that the provider employed two workers with experience of addiction in custody who delivered one-to-one support and co-facilitated groupwork. There was no incentivised substance free living wing within the prison and mutual aid support was limited to Alcoholics Anonymous, who attended the prison weekly.
- 4.89 Release and discharge arrangements included the routine provision of nasal naloxone, a life-saving intervention used to treat opiate overdose. This practice demonstrated a commitment to patient safety ensuring continued access to harm-reduction measures for those with a history of addiction.
- Medicines optimisation and pharmacy services**
- 4.90 Medicines were stored securely and were available for administration as prescribed. Arrangements were in place to ensure that patients had a supply of their prescribed medicines on release.
- 4.91 Nurses were responsible for the management and administration of medicines; Nursing Assistants provided support within their scope of practice.
- 4.92 With one exception, standard operating procedures for controlled drugs were out of date but did reflect current practices.
- 4.93 Records for controlled drugs subject to safe storage requirements were well maintained and stock balances were accurate. Controlled drug audits were completed by a pharmacist, at a minimum of every three months.

<sup>7</sup> The Rendezvous Project is funded by the Royal British Legion to support ex-service members who have been in custody or had contact with the criminal justice system. Delivered by AD:EPT, the project provides a range of interventions.

- 4.94 In accordance with the prison’s policy, the majority of patients held their medicines, including controlled drugs in Schedules 3 and 4, in-possession. Individual risk assessments were in place. Governance arrangements were in place to monitor compliance and reduce the likelihood of diversion. Schedule 3 and Schedule 4 controlled drugs supplied as in-possession is outside the Royal Pharmaceutical Society Professional Standards for Optimising Medicines for People in Secure Environments 2017. This practice remains on the prison’s risk register.
- 4.95 Records for the disposal of medicines at high risk of diversion were maintained. These medicines were stored securely until denatured by two members of staff.

**Dental services and oral health**

- 4.96 The Dentist and Dental Nurse were providing an appropriate number of dental sessions each week to meet patient need. Those in need of urgent dental care were seen promptly and waiting times for routine dental appointments were consistent with the current community average.

## CHAPTER 5: **PURPOSEFUL ACTIVITY**

Prisoners are able and expected to engage in activity that is likely to benefit them.

### **TIME OUT OF CELL**

**Expected outcomes:** All prisoners have sufficient time out of cell and are encouraged to engage in recreational and social activities which support their wellbeing and promote effective rehabilitation.

- 5.1 Leaders had established a rehabilitative culture in which prisoners were encouraged and motivated to engage in one of the many purposeful activities available, and staff were proactive in ensuring that men had excellent time out of cell. In our roll checks only two prisoners were locked up, one of whom was located in the CSU. Most men were engaged in education, skills or work.
- 5.2 Prisoners on the enhanced wings were unlocked for at least 10 hours a day Monday to Friday. At the other end of scale, unemployed prisoners and those at the basic level of the incentives scheme were out of their cells for nearly eight hours, which was far more than we usually see. It was also positive that prisoners had at least six hours out of cell each day at weekends, rising to eight hours for those on enhanced units.
- 5.3 Prisoners benefited from a wide range of purposeful enrichment activities both on the residential units and at other locations. The Prison Arts Foundation ran a series of creative activities that were popular with prisoners (see paragraph 5.22) and there were several other activities to choose from including pottery, language classes and quizzes, some of which were facilitated by peer mentors.
- 5.4 Library provision was generally good although the facility was closed at the weekend. Access to the library was equitable and there was a reasonable stock of books and consideration had been given to providing reading material for foreign nationals. The collection of reading materials for prisoners with limited literacy skills had improved since our last inspection but, less was being done by the library to promote literacy than we usually see.

- 5.5 Gym provision and access was also good. The facilities included a good-sized area with weights and aerobic exercise machines, a sports hall for games such as football, and an outdoor gravel area was being used for running activities. All housing units had reasonably equipped mini gyms, although in one location there had been lengthy delays in sourcing repairs for faulty equipment.
- 5.6 Residential units were allocated specific time slots to access the gym and there was good availability. The evening sessions were particularly popular with full-time workers.
- 5.7 A reasonable range of training courses leading to qualifications were available and there were good links with external sporting bodies. Magilligan was the second prison in the UK to have established a regular Parkrun, where participants run a timed 5 kilometres, enabling the prisoners to take part in this popular community event to enhance participants' health and wellbeing.

## EDUCATION, SKILLS AND WORK ACTIVITIES

**Expected outcomes:** All prisoners are expected and enabled to engage in education, skills or work activities that promote personal development and employability. There are sufficient, suitable education, skills and work places to meet the needs of the population and provision is of a good standard.

ETI Inspectors made the following evaluations about the education, skills and work provision using ETI's inspection framework.<sup>8</sup>

## SETTING THE VISION

- 5.8 Since the last inspection, North West Regional College (NWRC) had strengthened its leadership team by appointing a Deputy Regional Head of Prison Programmes, with responsibility for strategic planning and the effectiveness of delivery across prisons. Additionally, a head of learning and skills based at Magilligan provided enhanced oversight and drove quality improvements to good effect across the education and skills provision.
- 5.9 The vision for Magilligan Prison was to increase prisoners' confidence and potential, expressed in the vision statement 'SEE BEYOND – Safe, Engage, Empower'. It was grounded in mutual respect, community ethos, positive relationships and recognition of achievement. Both NWRC and NIPS staff understood clearly the critical role of learning, skills and work activities as central to impactful rehabilitation, resettlement and wellbeing, making these activities a clear priority.

<sup>8</sup> ETI, *Empowering Improvement - New Framework for Inspection (May 2024 - updated September 2024)* available at <https://www.eti.gov.uk/publications/empowering-improvement-new-framework-inspection>

- 5.10 NWRC and NIPS leaders collaborated effectively with planning and scheduling provision to ensure the right people were in the right place at the right time, providing prisoners with high levels of purposeful activity aligned well to their individual learning plans.
- 5.11 The college's self-evaluation and quality improvement planning were detailed, informed by a wide range of data, and supported by Specific, Measurable, Achievable, Realistic and Timely actions that monitored their impact. However, NIPS planning lacked a holistic approach and did not sufficiently include the work of voluntary and community partners.
- 5.12 Although there was good practice across skills and education programmes, there was no overarching employability strategy to unite stakeholders and maximise opportunities within and beyond the prison, to create more coherent and continuous pathways to employment.
- Implementing and improving to achieve the vision**
- 5.13 A broad curriculum was delivered through the education and skills provision, catering well for prisoners' interests and needs. It included art and design, barbering, construction (bricklaying, carpentry, joinery, painting and decorating, plastering, and tiling), English for speakers of other languages, horticulture, welding, short hospitality and catering qualifications including barista skills, and essential skills in literacy, numeracy and Information and Communications Technology (ICT).
- 5.14 A good range of work activities was available, enabling prisoners to work productively while gaining useful skills and experience. There were meaningful roles in the prison kitchens, the Coffee Cove, the printing workshop, the laundry and the tuck shop. Most prisoners reported that they enjoyed their work, were positive about their role and recognised how their contribution supported the daily running of the prison.
- 5.15 In June 2025, an application was submitted to create five new Level 2 construction certificates with greater focus on site skills, and to address limitations of current qualifications. This was an important development to improve the provision so prisoners could acquire more progressive and in-demand skills for the workplace.
- 5.16 Almost all teaching, training and work we observed was well planned, built on prior achievement and appropriately paced, enabling prisoners to learn securely and confidently. The men demonstrated good engagement and responded positively to tutor feedback, which increased motivation. Respectful and supportive relationships between tutors and prisoners underpinned successful outcomes and progression. Notably, over the previous six months, average attendance at learning and skills had been 98%.

- 5.17 The ICT infrastructure had improved, with internet access extended to all workshops and classrooms to support contemporary teaching, independent learning and collaboration. Staff were able to use digital applications to enhance lessons, although the range of options remained limited. Well-targeted ICT courses, from entry level to Level 3, provided access to recognised qualifications. However, opportunities to develop broader digital skills for life and work were too limited. In particular, there was no provision for prisoners to practise personal or commercial internet use in preparation for reintegration into an increasingly digital society.
- 5.18 A small number of prisoners were engaged in Open University (OU) courses ranging from access courses in Science, Technology, Engineering and Mathematics (STEM) and criminology to an undergraduate diploma in arts and humanities. The prisoners who met with Inspectors told them that access to higher education, including the Ulster University Inside Out Exchange programme, was 'the key to rehabilitation'. They reported that increased access to digital resources and additional one-to-one support would greatly enhance the OU provision.
- 5.19 Monitoring systems were well structured and used to good effect, with enrolment, retention and achievement data captured, reported and validated through a robust management information system. At classroom level, portfolios and individual learning plans provided a clear record of achievement, though personalised targets were not yet consistently embedded.
- 5.20 Analysis of waiting lists for courses was not used well enough at leadership level to inform planning, manage throughput or maximise capacity, leaving some prisoners waiting for enrolment on suitable education courses.
- 5.21 Prisoners were encouraged to participate in non-accredited programmes, as well as recreational and social activities, which developed their broader skills and dispositions, including raising aspirations, confidence and self-esteem. The uptake of these courses was good and effective in helping prisoners become more resilient and focused on their rehabilitation.
- 5.22 A well-considered programme of art, digital media, creative writing and music, delivered by the Prison Arts Foundation, enabled prisoners to address trauma, build self-expression and confidence, and make positive changes to their outlook and behaviour.

## Building equity

- 5.23 There was a well-structured induction programme to support and inform new prisoners about the courses, recreational and work activities available to aid progression and rehabilitation. On arrival, each prisoner was allocated a PDP co-ordinator who built a needs profile, including prior learning, employment and future aspirations. After induction, each prisoner completed literacy and numeracy assessments, and the results informed a Magilligan activity panel meeting, where a personal plan for learning, skills and purposeful work was agreed. Provision for vulnerable prisoners was carefully managed to ensure access to education and purposeful activity.
- 5.24 A full-time Special Educational Needs Co-ordinator (SENCo) had been appointed in 2024 and had established a bespoke provision to support prisoners effectively. This included records of concern, SEN assessments, reasonable adjustments, meetings with prisoners and arrangements for access to examinations. The SENCo also worked collaboratively with a counterpart in another prison, using consistent templates for SEN learning plans.
- 5.25 Foreign national prisoners developed confidence and communication skills to cope with prison life and beyond. Cultural inclusion was a clear priority: Muslim prisoners worked with the Governor to access the House of Worship for Friday prayers and to provide food for cultural days and the annual Hidden Heroes event<sup>9</sup>. Prisoners told Inspectors that their needs were further supported through active engagement with the Governor, peer mentors and representatives for equality and diversity, Autism Spectrum Disorder (ASD) and foreign national prisoners.
- 5.26 A progression pathway was established for prisoners with very low literacy through a partnership with 'Bridging the Gap' (formerly Shannon Trust). As part of this pathway, the NWRC provided non-accredited foundation classes to prepare them for enrolment in essential skills courses. The prison worked well with outside agencies to promote healthy lifestyles and support prisoners' emotional health and wellbeing. The Gaelic Athletic Association and Irish Football Association delivered coaching awards at Levels 1 and 2, followed by signposting to further coaching opportunities on release.
- 5.27 Extensive gardening and horticulture opportunities, along with access to the gym and outdoor exercise facilities, effectively supported healthy lifestyles. Other notable initiatives included the weekly Parkrun, the Duke of Edinburgh's Award and peer support mentors.

<sup>9</sup> A national initiative to recognise the demanding jobs done by staff in UK prisons, immigration removal centres, probation and youth justice.

### Embedding success

- 5.28 During the inspection, most prisoners were participating in education, skills and work activities or attending the gym. These provided meaningful work, prisoners were developing technical and employability skills, and contributing positively to motivation, confidence and a sense of purpose.
- 5.29 The NWRC used detailed data analysis to monitor and evaluate improvements in learning and skills outcomes. Over the last three years, almost all (98%) prisoners enrolled on accredited vocational programmes or essential skills completed training, and almost all of them (over 90%) achieved their targeted qualification.
- 5.30 From 2022-23 to 2024-25, it was positive that the proportion of all qualifications achieved at Level 2 had increased, rising from 30% to 66%. One-third of these courses were short, accredited courses relevant to industry. Uptake of Level 3 courses remained too low.
- 5.31 Over the same period, good progress was made in improving literacy, numeracy and ICT outcomes, with 43% of the qualifications achieved at Level 2 compared to 24% in 2022-23.
- 5.32 The Trauma Talks programme, delivered by the *AD:EPT* service, was designed to educate prisoners about childhood trauma, showing them tools to help calm their nervous system, reduce prison aggression, find resilience and become a productive member of society on their release. The impact of this programme was well monitored and demonstrated reduced adjudications and positive drug testing for those taking part.
- 5.33 It was notable that the NIACRO-supported Springboard Hospitality initiative has provided training programmes for 40 prisoners. This has resulted in 58% of men gaining employment on release, providing a critical direct link from custody to work in the community.
- 5.34 The Koestler Awards encouraged positive change through the arts, offering feedback to entrants in visual art, design, writing and music. In 2025, prisoners achieved 78 awards, including five Platinum, more than any other UK prison.
- 5.35 Feedback from prisoners, gathered through surveys and scheduled discussions with the learning and skills team, was used effectively to update and improve the provision of purposeful activities that were engaging and relevant to employment needs on release.
- 5.36 The impact and engagement of the programmes on the lives of the prisoners were celebrated through a range of prison and community achievement and success events, and an in-house newsletter.

### **Growing a community of learning**

- 5.37 There was clear evidence of a developing community of learning where collaboration, communication and continuous improvement were valued. The positive ethos was reinforced through inclusive language, with staff and residents referring to ‘those who live here and those who work here’. Respectful and inclusive relationships underpinned compassionate, purposeful and professional environments across learning and skills, where learners collaborated effectively with peers and tutors, including through peer and tutor feedback.
- 5.38 Project-based activities in bricklaying, horticulture and woodwork enabled prisoners to contribute meaningfully to the prison environment and the wider community. The high quality of work on display and in use across the prison demonstrated the respect prisoners had for their contributions and the improvements made to the environment.
- 5.39 Creative initiatives, such as Bloomin’ Smart and the Koestler Awards, enriched the learning culture. Prisoners in ‘Industries’ produced high-quality furniture for use within the prison and for external sale, providing external validation of standards and reinforcing the workplace relevance of their skills.
- 5.40 Foyleview provided a more open and supportive environment for prisoners nearing release. At the time of inspection, 23 prisoners were working in the community, 11 of whom were in paid employment. The unit offered greater independence and responsibility, helping to build confidence and self-management for life after custody. Access to community-based work placements and resettlement leave strengthened reintegration, offering a positive atmosphere and supportive relationships that reflect its focus on preparing prisoners for release. Progression to Foyleview was viewed as a privilege that motivated prisoners in closed conditions and aligned closely with vocational training and employability pathways.
- 5.41 Strong internal and external partnerships with organisations such as NIACRO, Start360 and Barnardo’s extended the prison’s learning community beyond the gate, while programmes such as Trauma Talks and Springboard Hospitality created direct bridges into the workplace and society.
- 5.42 There was no evidence of a formalised staff professional learning strategy to address the needs of an increasingly neurodivergent population. More structured professional development would strengthen staff capacity to respond to learners’ needs more effectively and ensure that barriers to progression are addressed in a timely and consistent manner.

## CHAPTER 6: **PREPARATION FOR RELEASE**

Preparation for release is understood as a core function of the prison. Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release back into the community.

### **CHILDREN AND FAMILIES AND CONTACT WITH THE OUTSIDE WORLD**

**Expected outcomes:** The prison understands the importance of family ties to resettlement and reducing the risk of reoffending. The prison promotes and supports prisoners' contact with their families and friends. Programmes aimed at developing parenting and relationship skills are facilitated by the prison. Prisoners not receiving visits are supported in other ways to establish or maintain family support.

- 6.1 There was a strong emphasis on maintaining family ties at Magilligan. In our survey, far more respondents than at similar prisons said staff encouraged them to keep in touch with family and friends. Family work was supported by a range of partners and included child-centred visits, dedicated family days and the promotion of parent-child interaction through play. Sensory visits were an impressive initiative which had improved the visiting experience for children with autism. These visits accommodated a smaller number of families and provided sensory resources, meals and refreshments suited to each child's particular needs.



Photograph 18: Visits hall set up for sensory visit

- 6.2 The family team adopted a collaborative and imaginative approach to meeting the needs of prisoners and their families which was supported by Barnardo's peer mentors. There was a key focus on enhancing relationships and information sharing with Children's Social Services.
- 6.3 Contact with children and families was assessed for appropriateness, but some special events and visits were determined by a prisoner's level on the incentive scheme rather than need. Data was not used effectively to inform service delivery and the family strategy had not been updated for some time.
- 6.4 Access to social and virtual visits was good and survey respondents were more positive than in similar prisons about the visiting experience. Some staff had participated in autism awareness training and had used their learning to improve the visiting experience for families with autistic children. The visits hall had child-friendly search procedures, a crèche, private family room and an impressive outdoor play park. Staff had also introduced a children's clothing bank.



Photographs 19-20: Child friendly search area and lockers (top) and play park in the visits area

6.5 Recognising that many visitors travelled long distances, extended visits were facilitated and the prison provided transport from the nearest train station. NIACRO visitors' centre was a welcoming space, providing refreshments, information about the prison, referrals for support, wellbeing gifts on special occasions and children's brunch bags during the summer holidays. A NIACRO Visitors' Forum hosted presentations from prison staff and partners. Staff used visitors' feedback well and, in response, the team had introduced child-centred visits on Saturdays and sheltered seating in the outdoor waiting area.

- 6.6 Many prisoners benefited from structured family and parenting courses. The contributions of a Speech and Language Therapist had improved communication, enhanced inclusivity and diversity across the prison. 'Help Kids Talk' was an excellent example facilitated by Barnardo's and a Speech and Language Therapist to increase fathers' confidence in supporting their child's communication. In addition, a session facilitated by a Speech and Language Therapist and NIACRO had helped fathers connect with their children through play. Two NIPS staff had also attended the play workshop which was followed by a child-centred visit with Brick Club stations for each family (a Lego-based therapy aimed at building social interaction between children and their fathers).
- 6.7 Staff routinely identified those men who had not received visits and offered referrals to partner organisations and engagement activities within the prison. Compared to similar establishments, prisoners in our survey were more positive about the ease of sending and receiving emails, letters and parcels.

## REDUCING REOFFENDING

**Expected outcomes:** Prisoners are helped to change behaviours that contribute to offending. Staff help prisoners to demonstrate their progress.

- 6.8 Work to support reducing reoffending was delivered by a wide range of partner agencies who worked in the PDU. These staff met prisoners face-to-face and supported them with issues such as alcohol and drug dependency, bereavement, counselling for victims of sexual and domestic abuse, maintaining family ties, developing skills to find employment and finding accommodation for release.
- 6.9 We saw evidence of effective communication between partners and PDP co-ordinators on a case-by-case basis, but we also saw some duplication of effort and some examples where staff were unsure about who was doing what for each prisoner. The prison did not have an overarching prison-level action plan for work to reduce reoffending. There was no process to collect and analyse data from each department and partner in areas such as accommodation or employment on release to identify potential opportunities to improve outcomes for all prisoners. However, the prison was in the process of designing the job description for an additional manager in the PDU whose responsibility would include co-ordinating and monitoring this outcome data.
- 6.10 The absence of robust processes to monitor and scrutinise the totality of work to reduce reoffending was partly mitigated by the fact that each prisoner had a PDP co-ordinator who was responsible for managing their sentence plan. It was positive that staff on Alpha and Foyleview now received regular casework supervision and told us they were confident in their role.

- 6.11 In our survey, far more respondents than at similar prisons said that they had a sentence plan, that they were involved in setting the targets and that staff were helping them to achieve these.
- 6.12 Prisoners met their allocated PDP co-ordinator soon after arrival and were given a useful sentence guide booklet that included key dates such as eligibility for conditional early release, information about courses available at the prison and in the community and a section for prisoners to maintain their own record of their progress.
- 6.13 Within a month of sentencing, co-ordinators worked with prisoners to create a prisoner needs profile, which were shared with the relevant partners who then commenced resettlement support. Within 40 days, co-ordinators met with prisoners to agree a PDP. In our reviews, we found that PDPs largely reflected the assessed risks and needs of offenders, with some very good examples. In our case audits we found some delays in the provision of timely psychological risk assessments being provided to Parole Commissioners.
- 6.14 The prisoner record system, PRISM, included helpful target dates for completion of prisoner needs profiles and PDPs, and the six-monthly reviews of PDPs. These were almost all completed on time, which is something seldom seen in England or Wales.
- 6.15 Most prisoners had regular, often monthly, meetings with their co-ordinators and, between planned appointments, requests to see co-ordinators were responded to promptly. Most prisoners told us their co-ordinator had been helpful, for example encouraging them to engage with one of the many personal development courses available (see paragraph 6.27).
- 6.16 There was a clear progression route from the main residential houses to the lower-supervision unit at Alpha House and then Foyleview where prisoners could work in the local community as they approached release. Indeterminate sentenced prisoners were now eligible to move to Foyleview to engage with pre-release testing on temporary licence before their parole eligibility. The progression pathway was promoted during the induction phase and on posters around the establishment. The prison had also highlighted the link between positive behaviour and sentence progression which encouraged prisoners to work towards a place on one of the enhanced landings as a stepping-stone on this pathway (see paragraph 3.13).
- 6.17 Applications to move to Alpha and Foyleview were assessed by a panel, and there was regular management oversight to ensure that prisoners continued to meet the criteria once on the units. While there were no explicit exclusions regarding prisoners convicted of sexual offences, there were very few in practice who either applied or were selected to progress to these units. Managers stated that moves to Foyleview were dependent on the prisoner engaging with paid work in the community and that many local employers were reluctant to offer places to prisoners convicted of sexual offences.

## PUBLIC PROTECTION

**Expected outcomes:** Prisoners' risk of serious harm to others is managed effectively. Prisoners are helped to reduce high risk of harm behaviours.

- 6.18 At the time of the inspection there were more than 200 prisoners identified for management under Public Protection Arrangements Northern Ireland (PPANI), including 82 who had been convicted of a domestic violence offence.
- 6.19 Release plans for these prisoners were discussed at a multi-agency Local Area Public Protection Panel (LAPPP). The records prepared by the prison for this meeting included relevant information to support the assessment of risk. A central team then set licence conditions with a period of supervision in the community.
- 6.20 Some PDP co-ordinators had been assigned additional responsibility for public protection matters, such as completing documentation to support LAPPPs, which ensured consistency and quality of approach. In addition, these staff had become subject matter experts able to advise their colleagues when dealing with public protection matters.
- 6.21 In the previous year there had been only nine prisoners identified to have their phone calls monitored, which seemed low considering the number of prisoners managed under PPANI. The low number did mean that staff were able to listen to calls promptly and we saw evidence that relevant intelligence was shared when concerning comments or actions were identified. There was no facility to monitor video calls made by prisoners who were subject to call monitoring, which presented a risk.
- 6.22 In addition, the establishment did not have a complete list of prisoners with an active non-molestation order issued by the Court. Staff on the wings, who filtered outgoing mail, did not know the details of individuals that prisoners were prohibited from contacting.

## INTERVENTIONS AND SUPPORT

**Expected outcomes:** Prisoners are able to access support and interventions designed to reduce reoffending and promote effective resettlement.

- 6.23 All newly sentenced prisoners were assessed for suitability for an accredited offending behaviour programme by staff from the psychology team. However, a chronic shortage of staff in that team across Northern Ireland meant that opportunities to benefit from such a programme were extremely limited.

- 6.24 The Thinking Skills Programme, suitable for many types of offending and designed to help prisoners make better decisions to avoid crime, had been paused since August 2024. The Horizon programme for prisoners convicted of sexual offences was no longer being delivered. At the time of inspection, the Building Better Relationships course, for perpetrators of domestic abuse, had also been paused but was due to resume in the coming weeks.
- 6.25 In the previous 12 months, several prisoners assessed as suitable for the Thinking Skills Programme, Building Better Relationships or Horizon had been released, or were due to be released, before completing these interventions.
- 6.26 Psychology resources had been prioritised to deliver a 12-month intervention for prisoners assessed as posing the highest risk of serious harm. At the time of the inspection, 10 prisoners were engaged in this Life Minus Violence programme. In the last 12 months the Psychology Team had also delivered individualised risk-focused work to 10 prisoners who were unsuitable for an offending behaviour programme.
- 6.27 Despite the lack of accredited programmes, many prisoners had benefited from a broad range of non-accredited personal development and resettlement-themed courses, such as the Gaining Opportunities and Living Skills (GOALS) course which focused on improving self-esteem and personal responsibility. It was positive that, in addition to delivery by partners, some courses were facilitated by PDP co-ordinators and, in some cases, co-facilitated by serving or former prisoners, who brought valuable experience to the intervention.
- 6.28 Impressively, the prison tracked data on prisoners' custodial behaviour before and after some courses, which in many cases demonstrated a reduction in failed drug tests and adjudications after completion (see paragraph 5.32).
- 6.29 There was good support for prisoners to develop the knowledge and skills needed to find employment when they returned to the community. For example, the Springboard programme which prepared prisoners for employment in the hospitality industry (see paragraph 5.33) had supported many prisoners into employment on release.
- 6.30 The focus on preparing prisoners for employment was particularly evident on Foyleview where, at the time of the inspection, 14 out of the 26 prisoners were accessing paid work in the community on temporary release.

## RETURNING TO THE COMMUNITY

**Expected outcomes:** Prisoners' specific reintegration needs are met through good multi-agency working to maximise the likelihood of successful resettlement on release.

- 6.31 In the last year, an average of 42 prisoners were released to the community each month, compared with 32 in the same period before the previous inspection. Resettlement partners and PDP co-ordinators met prisoners to agree a release plan and the quality of those we reviewed was reasonably good, including, where relevant, licence conditions to manage any residual risks (see paragraph 6.19).
- 6.32 Although we identified some duplication of effort between staff, we did not find examples of prisoners who had not received a plan. In our survey, 79% of respondents who expected to be released in the next three months said that someone at the prison was helping them to prepare for this.
- 6.33 Staff from Housing Rights, a charity working on housing and homelessness, worked in the PDU and supported prisoners with accommodation needs, including securing tenancies and claiming housing benefit. Prisoners at risk of homelessness were referred to the Northern Ireland Housing Executive to be assessed for emergency accommodation on release.
- 6.34 The prison did not collect and analyse data about accommodation on release to identify whether there were any opportunities to improve outcomes for prisoners. Data on the number of prisoners who were issued with the higher discharge grant suggested that in the previous year 61 prisoners (12% of all discharges) were released homeless.
- 6.35 On the day of release, prisoners received a useful pack containing toiletries, bottled water and a snack bar as well as information about where to go for support in the community.
- 6.36 In our survey, far more respondents (72%) than at similar prisons (52%) said their experiences at Magilligan had made them less likely to offend in the future.

## CHAPTER 7: PROGRESS ON RECOMMENDATIONS FROM THE LAST FULL INSPECTION REPORT

The following is a summary of the main findings from the last full Inspection Report and a list of all the Priority concerns, key concerns and/or recommendations made, organised under the four tests of a healthy prison.

### SAFETY

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2021, we found that outcomes for prisoners were reasonably good against this healthy prison test.

### KEY RECOMMENDATION

The drug strategy action plan should be up-to-date, widely communicated and closely tracked to reduce the supply and demand for drugs and alcohol.

✔ **Achieved**

#### Recommendations

Screening interviews for new arrivals should be sufficiently comprehensive to identify risk and this should be shared with the appropriate staff.

✔ **Achieved**

Adjudications should be subject to quality assurance and data analysed to understand and improve prisoner behaviour.

✔ **Achieved**

All staff should complete their control and restraint refresher training annually.

✘ **Not achieved**

Plans to improve the level of governance of use of force should be implemented and this should include the effective oversight of the use of body worn camera footage.

✔ **Achieved**

## RESPECT

### Prisoners are treated with respect for their human dignity.

At the last inspection, in 2021, we found that outcomes for prisoners were reasonably good against this healthy prison test.

## KEY RECOMMENDATION

Effective arrangements should be put in place to set, monitor and maintain high standards of cleanliness and hygienic practice in residential units.

✔ **Achieved**

### Recommendations

The prison should investigate and address prisoner perceptions of staff victimisation reported in our survey.

✔ **Partially achieved**

Response times to cell call bells should be monitored.

✔ **Achieved**

The scope of consultation with prisoners should be expanded, with greater clarity about how such consultation will be used to effect positive change.

✔ **Achieved**

Monitoring and quality assurance should be improved, to ensure that prisoners receive adequate responses through the request system.

✔ **Achieved**

The recommendations identified in the internal review of complaints should be implemented and complaints about staff should be more rigorously dealt with.

✔ **Achieved**

Equality work should be underpinned by a comprehensive equality policy and driven through a strategic action plan that has been informed by regular consultation, to ensure that the needs of prisoners from protected groups are met.

✘ **Not achieved**

The Chaplaincy department should be more integrated and visible, in order to provide adequate spiritual and pastoral support.

✔ **Achieved**

The Northern Ireland Prison Service should enable healthcare staff to provide prisoners with access to barrier protection, in line with National Institute for Health and Care Excellence public health guidance.

✔ **Achieved**

The South Eastern Health and Social Care Trust should review access to the General Practitioner for non-urgent appointments, so that it is in line with that in the community.

✘ **Not achieved**

The South Eastern Health and Social Care Trust should improve the forensic psychiatry cover and access to psychological services based on the health needs assessment of the patient population.

✘ **Not achieved**

The South Eastern Health and Social Care Trust, along with their partners at the Health and Social Care Board, should work together to review the current capacity and capability of the addiction service to meet the needs of prisoners who require treatment and support for addiction.

✘ **Not achieved**

Standard Operating Procedures for controlled drugs should be up-to-date.

✘ **Not achieved**

The disposal arrangements for controlled drugs should be in accordance with best practice guidelines.

✔ **Achieved**

The Northern Ireland Prison Service and the South Eastern Health and Social Care Trust should introduce a robust monitoring procedure for in-possession medication to ensure compliance and reduce the likelihood of diversion.

✔ **Achieved**

## PURPOSEFUL ACTIVITY

Prisoners are able, and expected, to engage in activity that is likely to benefit them.

At the last inspection, in 2021, we found that outcomes for prisoners were not sufficiently good against this healthy prison test.

### Recommendations

Access to the library should be extended to weekends.

✘ **Not achieved**

Leaders should make sure that there is a further education college leadership presence on-site as soon as possible, to ensure good levels of communication, effective monitoring and co-ordination between prison and college staff as provision resumes.

✔ **Achieved**

Leaders should develop and implement effective arrangements for the strategic overview and evaluation of the quality of education, skills and work at all levels, demonstrating a clear impact on better outcomes for the prisoners.

✔ **Achieved**

Leaders should increase the number and quality of work activities for the prisoners and ensure suitable access for them to relevant qualifications and accreditation, to improve their future opportunities for employment and/or further training.

✔ **Achieved**

Leaders should develop a digital strategy to support the delivery of the learning and skills provision.

✔ **Partially achieved**

Leaders should implement more effective strategies to improve the essential skills provision, including to increase engagement and enrolments, and make sure that more prisoners progress and attain at the higher levels.

✔ **Achieved**

## REHABILITATION AND RELEASE PLANNING

Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release back into the community.

At the last inspection, in 2021, we found that outcomes for prisoners were reasonably good against this healthy prison test.

### Recommendations

The availability of face-to-face social visits should be increased and alternatives found to the standard use of closed or barrier visits.

✔ **Achieved**

Probation Board for Northern Ireland staff in the Prisoner Development Unit should have face-to-face contact with prisoners in order to build trust and meet the rehabilitative needs of prisoners on their caseload.

✔ **Achieved**

Prisoner Development Unit managers should make sure that the objectives in Personal Development Plans are current, specific and designed to support prisoners' progress through their sentence.

✔ **Achieved**

Arrangements for monitoring prisoners' mail should minimise the opportunity for contact in breach of civil orders.

✘ **Not achieved**

# APPENDIX 1: ABOUT OUR INSPECTIONS AND REPORTS

All prison 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 HMI Prison's thematic review *Suicide is everyone's concern*, published in 1999. For men's prisons the tests are:

- **Safety:** Prisoners, particularly the most vulnerable, are held safely;
- **Respect:** Prisoners are treated with respect for their human dignity;
- **Purposeful activity:** Prisoners are able, and expected, to engage in activity that is likely to benefit them; and
- **Preparation for release:** Preparation for release is understood as a core function of the prison. Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release back into the community.

We have also included expectations for judging the effectiveness of leadership in the establishment.

Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. There are four possible judgments: in some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the NIPS. They are:

- **Outcomes for prisoners are good:** There is no evidence that outcomes for prisoners are being adversely affected in any significant areas;
- **Outcomes for prisoners are reasonably good:** There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns;
- **Outcomes for prisoners are not sufficiently good:** There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the wellbeing of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern; or
- **Outcomes for prisoners are poor:** There is evidence that the outcomes for prisoners are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.

Our assessments might result in identification of areas of concern.

**Priority concerns** are those that Inspectors believe are the most urgent and important and which should be attended to immediately.

**Key concerns** identify the areas where there are significant weaknesses in the treatment of and conditions for prisoners. To be addressed they will require a change in practice and/or new or redirected resources. Priority concerns and key concerns are summarised at the beginning of inspection reports and the body of the report sets out the issues in more detail.

We also provide examples of **notable positive practice** in our reports. These list innovative work or practice that leads to particularly good outcomes from which other establishments may be able to learn. Inspectors look for evidence of good outcomes for prisoners; original, creative or particularly effective approaches to problem-solving or achieving the desired goal; and how other establishments could learn from or replicate the practice.

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

Other than in exceptional circumstances, all prison inspections in Northern Ireland are unannounced and include a follow-up of recommendations from the previous Inspection.

## THIS REPORT

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This report provides a summary of our inspection findings against Leadership and the four healthy prison tests. Each Chapter contains a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of and conditions for men in prisons* (Version 6, 2023) (available on the HMI Prisons website at <https://www.justiceinspectorates.gov.uk/hmiprison/our-expectations/prison-expectations/>).

The key concerns identified during the inspection are listed under 'What needs to improve at Magilligan Prison' on page 8. Chapter 7 lists the recommendations from the previous full inspection and our assessment of whether they have been achieved.

Findings from the survey of prisoners and a detailed description of the survey methodology can be found in separate documents published on the CJI website. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant. The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

## APPENDIX 2: INSPECTION TEAM

### This inspection was carried out by:

Jacqui Durkin	Chief Inspector, CJI
Charlie Taylor	Chief Inspector, HMI Prisons
Deborah Butler	Team leader, HMI Prisons
Ian Dickens	Inspector, HMI Prisons
Roisin Devlin	Inspector, CJI
Maureen Erne	Inspector, CJI
David Owens	Inspector, HMI Prisons
Chris Rush	Inspector, HMI Prisons
Nadia Syed	Inspector, HMI Prisons
Shaun Thomson	Inspector, HMI Prisons
Sam Moses	Researcher, HMI Prisons
Helen Ranns	Researcher, HMI Prisons
Sam Rasor	Researcher, HMI Prisons

A team of RQIA Inspectors inspected and reported on health, wellbeing and social care.

A team of ETI Inspectors inspected and reported on education, skills and work provision.

# APPENDICES 3, 4 AND 5 FURTHER RESOURCES

Some further resources that should be read alongside this report are published on the CJI website (they also appear in the printed reports distributed to the prison).

For this report, these are:

## Prison population profile at 10 September 2025

- We request a population profile from the prison as part of our information gathering during our inspection. The figures were supplied by the establishment and any errors or omissions are the establishments own. We have published this breakdown alongside this report on our website - [www.cjini.org](http://www.cjini.org).

## Prisoner survey methodology and results (Part a and b)

- A representative survey of prisoners is carried out at the start of every inspection, the results of which contribute to the evidence base for the inspection. A document with information about the methodology and the survey, and comparator documents showing the results of the survey, are published alongside the report on our website. The survey was conducted by HMI Prisons on behalf of Criminal Justice Inspection Northern Ireland.

## Prison staff survey methodology and results (Part a and b)

- Prison staff are invited to complete a staff survey. The results are published alongside the report on our website. The survey was conducted by HMI Prisons on behalf of Criminal Justice Inspection Northern Ireland.



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the CJI Website**