Report on an unannounced short follow-up inspection of

HMP Buckley Hall

24–28 May 2010

by HM Chief Inspector of Prisons

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Introduction

Buckley Hall has gone through many changes of role in its short history and is now category C training prison. On our last visit, we were concerned that despite the prison's many strengths, including having overcome a serious drugs problem, it lacked sufficient purposeful activity for a training prison and faced a severe funding shortfall that meant that this and other gaps were unlikely to be filled. We were therefore pleased to find, on this unannounced short follow up visit, that the Ministry of Justice had resolved some of the funding issues with the prison and that measurable progress had been made - including an increase in the quality and quantity of purposeful activity.

The focus on reducing drug supply and maintaining order and control had been sustained and we were pleased to find that managers continued to review the proportionality of their approach. As a result, the prison was still regarded as a generally safe place by prisoners, drug supply remained under control, levels of assaults had fallen, but some of the previous security controls had been eased. Other aspects of safety were also generally sound: early days were satisfactorily managed, violence reduction and self-harm prevention arrangements had been rationalised and the integrated drug treatment system had been introduced. Commendably, use of force, adjudications and segregation had all reduced.

The environment remained satisfactory and good staff prisoner relations had been sustained, although the personal officer scheme was still underdeveloped. The prison had made good efforts to address the negative perceptions of minority groups which we highlighted at the previous inspection. Faith and healthcare provision were both satisfactory.
Time out of cell remained good and the quantity and quality of purposeful activity had increased, with more vocational training and expanded education provision. There were some impressive workshops but, disappointingly, funding for accreditation had been lost and this was likely to harm prisoners' future employability prospects. The library provided a good service and there some well appreciated PE provision, although there were no outdoor facilities.

The reducing reoffending strategy had been reviewed and its strategic management was now satisfactory. Offender management arrangements were generally good. The use of release on temporary licence to support resettlement had increased and work along most of the resettlement pathways had improved.
Buckley Hall continues to improve. It has overcome some significant issues of order and control, particularly a serious problem with drug supply, but has done so in a proportionate way that has ensured safety without being oppressive. Relationships between staff and prisoners remain good and appropriate efforts have been made to address diversity issues. There have also been significant improvements in both purposeful activity and resettlement. Staff and managers deserve considerable praise for what has been achieved.

Nigel Newcomen July 2010
HM Deputy Chief Inspector of Prisons

Fact page

Task of the establishment
Male category C prison.

Area organisation
North West

Number held
382

Certified normal accommodation
350

Operational capacity
385

Last inspection
Full inspection: April 2007

Brief history
Buckley Hall was the fourth contracted-out prison in the UK, and the first privately managed category C establishment to hold medium-security prisoners. It reverted to Prison Service control after a tendering process in June 2000. In November 2001, it was announced that the prison would re-role to a closed female training prison, and the first female prisoners arrived in April 2002. As a result of population pressures in the male estate, it was decided to re-role the establishment back to a male category C prison in September 2005, and it has held male prisoners since December 2005.

Description of residential units

	CNA	Op cap	
A wing	110	121	- mainstream: half voluntary drug testing/integrated drug treatment system (IDTS)
B wing	120	132	- mainstream: half induction
C wing	120	132	- mainstream prisoners
	350	385	

Section 1: Healthy prison assessment

Introduction

HP1 The purpose of this inspection was to follow up the recommendations made in our last full inspection of 2007 and examine progress achieved. We have commented where we have found significant improvements and where we believe little or no progress has been made and work remained to be done. All inspection reports include a summary of an establishment's performance against the model of a healthy prison. The four criteria of a healthy prison are:

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

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

- outcomes for prisoners are good against this healthy prison test.
There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.

- outcomes for prisoners are reasonably good against this healthy prison test.
There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.

- outcomes for prisoners are not sufficiently good against this healthy prison test.
There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.

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

HP3 This Inspectorate conducts unannounced follow-up inspections to assess progress against recommendations made in the previous full inspection. Follow-up inspections are proportionate to risk. Short follow-up inspections are conducted where the

previous full inspection and our intelligence systems suggest that there are comparatively fewer concerns. Sufficient inspector time is allocated to enable inspection of progress and, where necessary, to note additional areas of concern observed by inspectors. Inspectors draw up a brief healthy prison summary setting out the progress of the establishment in the areas inspected. From the evidence available they also concluded whether this progress confirmed or required amendment of the healthy prison assessment held by the Inspectorate on all establishments but only published since early 2004.

Safety

HP4 At our inspection in 2007 we found that the establishment was performing reasonably well against this healthy prison test. We made 35 recommendations in this area, of which 20 had been achieved, two partially achieved and 13 had not been achieved. We have made a further 33 recommendations.

HP5 G4S was the main contractor for escorting prisoners. Staff reported a good relationship with the contractors. Reception still remained closed during the lunch period, with the potential for delay in admission of new arrivals.

HP6 Reception was well laid out and clean, and holding rooms had a TV and written information. Prisoners often spent two or more hours in reception, which was too long. New arrivals were given a two-minute telephone call, and were taken to the wing to dine if they arrived before a meal. An Insider based in reception provided advice, issued menu order forms and handed out visiting orders.

HP7 First night officers were only available Monday to Thursday, and we were not assured about arrangements to see prisoners who arrived on Friday. The first night risk assessment was limited, and not every new arrival was risk-assessed within 24 hours. New arrivals received an information booklet in reception to help them settle for their first night. First night handover arrangements were comprehensive.

HP8 The fixed weekly induction programme involved two sessions in which staff introduced new arrivals to life at Buckley Hall and departments provided information on services. There was a weekly induction board, linked to offender management unit (OMU) work, but this took place on a landing with no privacy. New arrivals spent considerable periods locked up between induction sessions.

HP9 Violence reduction and suicide and self-harm prevention structures had been merged since the last inspection. There was now one full-time safer custody manager and a single Safer Buckley Hall committee, which met monthly. The overarching policy was well formulated and was being updated. Meetings were well attended, and consultation arrangements with prisoners and staff were generally good. Analysis of information on violence was generally reasonable. The prison used a three-tier tackling antisocial behaviour (TAB) system. The number of prisoners on this had risen in the last year, indicating greater awareness, but actual application was variable, and the placing of individuals on anti-bullying procedures was not done with clarity or consistency. TAB procedures were confined to monitoring and almost invariably ended after seven days. Input by staff also varied. Significantly, however, the number of assaults against staff and prisoners, as well as fights, had declined in the last 12 months, and most prisoners told us that they felt safe.

HP10 Staff had generally good awareness of suicide and self-harm issues, although only about 60% had been trained, and only one-third of staff on night duties had been trained in assessment, care in custody and teamwork (ACCT) self-harm monitoring procedures. Systems were generally good and ACCT review meetings were well attended and multidisciplinary. Many ACCTs demonstrated good levels of engagement, although the quality of documents varied too much, and there was no formal quality assurance. The incidence of self-harm and number of open ACCTs had reduced significantly in the last 12 months. The prison had eight well-supported Listeners, but no Listener suite.

HP11 Security arrangements were proportionate for dealing with the significant drug problem the prison had faced, and remained flexible and responsive. Access to the grounds, for example, was not too restrictive. Dynamic security was good with security liaison officers on all units and over 500 security information reports received in 2010 to date. Suspicion drug testing had achieved a 50% positive rate, and targeted searching had yielded 25 finds in the first five months of the year. Security management was generally effective, and security objectives were appropriate and based on intelligence. Rules were properly explained to new arrivals, but were not reinforced on the wings, which some prisoners complained about.

HP12 The care and separation (segregation) unit was clean but cells had some damage and toilets were not screened. All prisoners were fully searched on entry to the unit without risk assessment. Prisoners in the unit were allowed no facilities such as television or kettles, regardless of their behaviour or status. They had daily access to amenities, but access to the broader regime was rare. Staff-prisoner relationships were good, but no personal officers were allocated and care planning for long-term prisoners was underdeveloped. Management meetings were, however, good.

HP13 There had been 173 adjudications in 2010 to date, which was a significant reduction since the last inspection. Referrals to the independent adjudicator were also very low. Procedures were generally followed correctly, although there was insufficient exploration of circumstances and mitigation, and tariffs needed review.

HP14 Force had been used 62 times in 2009 and 19 times to date in 2010. Most of the incidents recorded were minor. Record keeping was good, authorisations appropriate, and planned interventions were videoed. The record of the security committee discussions of the use of force was limited. Use of special accommodation was not great and reducing, but not all paperwork was completed correctly, and some prisoners remained there for longer than needed.

HP15 The integrated drug treatment system (IDTS) had been introduced since our last inspection. There were currently 39 prisoners on the scheme, supported by three nurses and a visiting psychiatrist, but there was funding for up to 60 users. The mandatory drug testing positive rate for April 2009 to March 2010 was 7.8% against a target of 17.5%, and an improvement since our last inspection.

HP16 On the basis of this short follow-up inspection, we considered that outcomes for prisoners remained reasonably good against this healthy prison test.

Respect

HP17 At our previous inspection, we found that Buckley Hall was performing reasonably well against this healthy prison test. We made 53 recommendations in this area, of which 29 had been achieved, seven partially achieved and 13 had not been achieved. Four recommendations were no longer applicable. We made a further 16 recommendations.

HP18 All units were generally clean, as were cells, but there was insufficient screening for toilets. Doubled cells had no lockable cabinets and often insufficient furniture. Communal areas were not always well supervised, but cell bells were answered promptly. The offensive displays policy was applied inconsistently. All prisoners, even those on basic regime, could wear their own clothes. Access to basic cleaning materials, kit and facilities, such as telephones and showers, was good.

HP19 The incentives and earned privileges (IEP) policy was coherent and staff awareness was good, but it was not well publicised to prisoners. Differentials in regime between the status levels were not great, but provision for those on basic regime was reasonable. The vast majority of prisoners were on enhanced regime. The biggest incentive for enhanced prisoners was the twice-yearly parcels allowed from family or friends. Reviews for demotion and promotion were mostly appropriate and based on patterns of behaviour, although we did see some questionable decisions. There was some evidence that appeals were upheld in favour of prisoners.

HP20 Staff-prisoner relationships were very good. The staff approach was respectful, and common courtesies were the norm. Staffing levels were lean, and the quality of relationships had helped to ensure safety and allow staff to get things done. The personal officer scheme was, however, much less well developed, and inconsistent. Prisoners relied on the generally helpful staff as a whole, rather than on formal structures.

HP21 The quality of food was good. The kitchen was well run and the serveries had been refurbished. Most prisoners could dine in association. The four-week menu cycle included healthy options, and there was good provision for cultural and social celebrations. However, procedures to ensure the non-cross contamination of halal food were inadequate. Consultation arrangements were good and included an annual food survey, and there were few complaints from prisoners.

HP22 The prison shop was operated by DHL, procedures worked well, and prisoners could make weekly purchases. There was routine consultation on the shop list, and few prisoners had complaints about the service. There was access to a range of catalogues for large or specialist purchases.

HP23 There was a comprehensive diversity strategy that included pathways to progress for the diversity strands, such as staff training and prisoner representatives. The prison had recently gained the national Investors in Diversity accreditation. There were care plans for prisoners with disabilities, which linked into good quality personal emergency and evacuation plans. There were prisoner representatives for race, sexual orientation, age and Travellers, who were consulted at a monthly meeting chaired by the race equality officer. There was provision for the Traveller community, and a prisoner representative had links to outside agencies that supported gay

prisoners. There was an annual disability survey. Training in diversity had been introduced and 87 staff had been trained, along with prisoner diversity representatives. Representatives also attended the diversity and race equality action team (DREAT).

HP24 The comprehensive diversity race equality action plan was updated and actioned monthly. The monthly DREAT meeting, chaired by the governor, was very well attended, although some minutes did not accurately reflect the content of meetings. The six prisoner race representatives were well supported and properly linked into the diversity meetings and governance structures. The black and minority ethnic prisoners we spoke to talked favourably about race equality at the prison. In 2009, 57 racist incident report forms had been received, and 13 in 2010 to date. The standard of investigations was good, and each one was quality checked by the governor or deputy governor and externally verified by the Yorkshire Diversity Centre. Ethnic monitoring data suggested that black and minority ethnic prisoners were not obviously disadvantaged.

HP25 In 2009, most foreign national prisoners were decanted from the prison. Only three potential foreign nationals remained, all of whom disputed their status and claimed UK citizenship. Services for foreign national prisoners were limited.

HP26 Prisoner applications varied between wings and were high on some wings, although others worked more informally. There had been 570 formal complaints in 2010 to date, which was high. The quality of replies was reasonable and quality assurance arrangements were adequate. Legal services provision was limited, but demand was low.

HP27 The chapel was situated above the gymnasium, which affected noise levels during services. The small multi-faith room was adequate for the low number who attended formal services. There was one full-time chaplain and several part-time chaplains and volunteers, but currently no Muslim chaplain. The chaplaincy provided a wide programme of faith and non-faith courses.

HP28 The health care centre was clean and well maintained. Prisoner access to GPs was good, with daily clinics and short waiting times. Staffing levels were good with a stable workforce, and out-of-hours cover was satisfactory. There was a good range of nurse-led and specialist clinics Dental services were good, with three dental clinics a week. The mental health in-reach team was well staffed, with a caseload of 20 for each nurse. Mental health awareness training was provided for all prison staff. Two visiting psychiatrists and counselling services were also available.

HP29 On the basis of this short follow-up inspection, we considered that outcomes for prisoners remained reasonably good against this healthy prison test.

Purposeful activity

HP30 At our previous inspection, we found that Buckley Hall was not performing sufficiently well against this healthy prison test. We made 14 recommendations in this area, of which five had been achieved, five partially achieved and four had not been achieved. We have made five further recommendations.

HP31 There were 108 places in vocational training, with an improvement in both quantity and quality since our last inspection. The prison worked well with the training provider, and in partnership in some workshops to meet the needs of prisoners. Workshops provided work for about 96 prisoners, and included assembly, recycling, packing, kitchen and gardens. Workshop accommodation replicated commercial standards, and the practical application of some courses, notably groundwork, bricks and joinery, was very good, with a strong focus on useful work skills. Standards of work were good, the opportunities for progression impressive, and work was reasonably well structured, but some was repetitive. There was now no accreditation, owing to a loss of funding, but the prison was seeking to rectify this. There were a further 73 places in wing and orderly roles. About 50 prisoners (13% of the population) were unemployed.

HP32 The education curriculum had been reviewed and now had an appropriate focus on basic skills, as well as supporting vocational learning. There had been developments in personal and social education, and opportunities were available in design, art and information and communications technology (ICT). There was good provision for prisoners with poor literacy and numeracy. Lessons were well planned and there was opportunity for meaningful progression. The learning environment was good, but there were too many interruptions to classes. There were sufficient places in education classes to meet demand. Prisoners achieved well on vocational and education courses.

HP33 The library was welcoming and access was reasonable, especially for prisoners attending education. The stock was appropriate and met the needs of prisoners adequately. However, the library was not promoted well across the prison, and borrowing had fallen since the last inspection.

HP34 The quality of PE facilities was generally acceptable, and there were small cardiovascular gyms on the wings, but there were no outdoor facilities. Access to the gym depended on IEP status, but was good for all prisoners. There had been some limited increase in accredited learning, and the gym was active in organising charitable work.

HP35 The prison reported a time unlocked figure of about 8.5 hours a day, although the core day indicated that for the majority of prisoners engaged in activity over nine hours were possible. Unemployed prisoners had fewer than four hours available, although all got evening association, which was rarely cancelled. Access to exercise was limited to half an hour a day, but evening association could be spent in the open air. During a roll check, we found about 16% of the population locked in cell during the working part of the day.

HP36 Despite the loss of some accreditation in workshops and about 50 prisoners being unemployed, we considered that the improvements to education and vocational training, as well as a reasonable unlock regime, meant that outcomes for prisoners were now reasonably good against this healthy prison test.

Resettlement

HP37 At our previous inspection, we found that Buckley Hall was performing reasonably well against this healthy prison test. We made 28 recommendations in this area, of which 13 had been achieved, eight partially achieved and six had not been achieved.

One recommendation was no longer applicable. We have made a further 23 recommendations.

HP38 The reducing reoffending strategy, reviewed in April 2010, addressed all the resettlement pathways, but made minimal reference to links with the regional strategy or the good needs analysis completed in 2009. A separate action plan covered 2009-10, with a new action plan under development. There was only limited evidence of formal reviews and monitoring of the action plan at the monthly reducing reoffending meeting, where attendance was inconsistent. There were nominated pathway leads, however, and evidence of progress and development under individual pathways. Pre-release boards were convened weekly, but prisoners were not invited to attend until two weeks before release, which was too late to address all outstanding issues. Use of release on temporary licence had increased since the previous inspection, but was still underused.

HP39 There were seven offender supervisors to deal with a caseload of about 150 prisoners in scope for offender management. These included 35 prisoners on indeterminate sentences for public protection (IPPs). Redeployment of officer offender supervisors was problematic, but they were clear about their role and responsibilities. The expected monthly contact with prisoners was not consistently achieved. There were good relationships with offender managers in the Greater Manchester area, from where the majority of prisoners came. All prisoners had an initial induction assessment by offender supervisors, which focused on a review of sentence planning targets. Prisoners in scope for offender management were assessed against each resettlement pathway in a single cohesive document. The assessment of resettlement need was more fragmented for those not in scope. However, referrals were made and all prisoners were seen individually by relevant departments. Offender assessment system (OASys) assessments for prisoners not in scope (currently 197) were the responsibility of offender supervisors. There was no ongoing contact with these prisoners beyond sentence plan reviews. The sole prisoner serving less than 12 months received no sentence management.

HP40 The lifers were managed by the OMU. A separate lifer induction was delivered inconsistently, but there were monthly forums and meetings for IPP prisoners, and family days twice a year. Escorted absences could be applied for, but many longer term prisoners were frustrated by delays in processing these applications, as well as delays in parole hearings.

HP41 Recategorisation processes were effective, with about a quarter of prisoners considered in 2010 granted category D status. Despite this, recategorisation was the source of many prisoner complaints. Formal boards were not held, communication was limited and decision making appeared remote to applicants. Approximately 23 prisoners who had progressed to category D status had not yet been transferred due to a lack of spaces.

HP42 All prisoners were seen on induction to assess housing needs. Depaul UK provided a housing advice service for prisoners returning to Rochdale, funded by Rochdale Supporting People. There were also links with other community organisations, such as the Barnabas Trust, to assist prisoners discharged to Greater Manchester in securing accommodation. There was also a housing advice centre operated by a member of staff assisted by peer representatives, who were due to be trained. The number of prisoners discharged without fixed accommodation had reduced since the previous inspection to just under 6% in 2009.

HP43 A learning and skills strategy to develop vocational training had been implemented to improve links to the resettlement pathway, and a wider range of vocational courses had been introduced. Links with employers to assist resettlement remained underdeveloped, and there was no pre-release course.

HP44 Health care discharge planning for prisoners was satisfactory with good links with the local community. There were satisfactory procedures for the management of the terminally ill, and the care programme approach was used effectively to manage the release of prisoners with severe and enduring mental health problems.

HP45 A drug strategy had been developed and was reviewed twice a year, and included clear developmental targets. The counselling, assessment, referral, advice and throughcare service (CARATs) staff had a caseload of up to 50 clients each. Programmes staff provided alcohol-related courses, in addition to the one-to-one work by the CARATs team, where appropriate.

HP46 A partnership Lottery-funded project provided a worker in the prison once a fortnight to address finance, benefit and debt issues. Referrals were taken from induction and the housing advice centre. Education offered a budget management course, and prisoners could open bank accounts.

HP47 The visits centre was run by Partners of Prisoners, who also staffed the play area and tea bar in the visits hall. The centre was welcoming and displayed relevant information for visitors. Visits could be booked by telephone and email. Visits took place each afternoon and on weekend mornings, and sessions started on time. Prisoners wore bibs during visits, which was unnecessary given other security measures. A parent empowerment worker from Sure Start provided a service to families in the visits centre, including signposting to community services and support. Storybook Dads had a significant take-up by prisoners.

HP48 The prison offered only one accredited programme, the thinking skills programme, with 58 completions in 2009-10. There were currently 64 prisoners on the waiting list, with priority given to IPPs. The psychology department also conducted controlling anger and learning to manage it (CALM) assessments, which ensured that only those assessed as suitable were transferred on to undertake programme. Other externally accredited interventions available included the A2Z motivational programme, The Drink alcohol package, thinking skills in the workplace, and victim awareness. Greater Manchester probation had recently delivered a pilot integrated domestic abuse programme.

HP49 On the basis of this short follow-up inspection, we considered that outcomes for prisoners continued to be reasonably good against this healthy prison test.

Section 2: Progress since the last report

The paragraph reference number at the end of each recommendation below refers to its location in the previous inspection report.

Main recommendations (from the previous report)

2.1 The Area Manager and NOMS should resolve budgeting issues following the prison's conversion to a male establishment and ensure that the prison has sufficient resources to carry out its training role and operate safely. (HP53)

Achieved. We were assured this matter had been resolved in early 2009. There had been an agreement between the procurement division of the Ministry of Justice and the establishment about the disparity in budget following re-role, which was favourable to the establishment on how the shortfall was to be managed. The final detriment to the establishment was less than £200,000, and the impact on outcomes for prisoners had been managed to mitigate the worst effects.

2.2 The violence reduction committee should revise the anti-bullying strategy and implement it proactively. (HP47)

Achieved. The violence reduction committee had been merged with the suicide and self-harm prevention committee to form the Safer Buckley Hall group. There was one overarching policy and strategy, which was detailed and covered all aspects of violence reduction and suicide and self-harm. A related continuous improvement action plan, incorporating a range of objectives, was reviewed monthly. For the previous two years, the prison had also developed a violence reduction toolkit. This involved working with a group of approximately 30 staff, representative of the staff overall, to identify areas of concern and set targets for the coming year. Targets were incorporated into the continuous improvement plan.

2.3 The prison should ensure that its security objectives remain compatible with its role as a category C training prison. (HP48)

Achieved. The prison had consistently battled against significant drug issues, and had implemented additional physical security measures to tackle them. As a result, there had been a marked improvement and reduction in positive mandatory drug testing (MDT) rates, which stood at 7.8% for the year April 2009 to March 2010. The improvements had led to measures to relax the previously restrictive approach, including fewer staff to supervise movements to activities, increased numbers of trusted prisoners working unescorted, and the opening of a market garden at the rear of C wing, which had been vulnerable to parcels being thrown over the fence. Measures were constantly under review to ensure that security objectives remained compatible with the role of a category C training prison.

2.4 There should be better supervision of prisoners on the wing during the core day and during association. (HP49)

Not achieved. The level of staffing during association had not changed. Indeed, the atmosphere in the prison was good and relationships between staff and prisoners excellent. At the time of the inspection staffing levels did not appear to be an issue. Levels of violence, including assaults and fights, were lower than in 2009 and in 2008.

2.5 The prison should adopt strategies to understand and deal with the negative perceptions of black and minority ethnic prisoners. (HP50)

Achieved. The prison's diversity and race equality action plan looked at improving the strategies to deal with all aspects of race equality. The establishment had also completed several race equality impact assessments to a high level.

2.6 There should be an increase in the quantity of education and in the range and quality of vocational training. (HP51)

Partially achieved. The range and quality of vocational training had increased, as had the quantity of education. Prisoners now had vocational opportunities in joinery, groundwork, painting and decorating, industrial cleaning, food preparation, information and communication technology (ICT), and kitchen and bathroom fitting. There had been a strong focus on introducing courses to help develop work skills. Prisoners on joinery courses could progress from basic woodworking to level 2 qualifications in site joinery, and in groundwork there were opportunities to progress from level 1 to 2 qualifications. Prisoners could follow accredited courses in food preparation and cooking in the staff mess, but not in the prison contract services workshops (see further recommendation 2.284). Funding for some of the accredited training was due to end (see paragraph 2.160). There were not enough places in the workshops to ensure the all prisoners could access vocational training (see paragraph 2.160).

2.7 The resettlement strategy should be revised and relaunched. The delivery of the strategy should be championed by a member of the senior management team. (HP52)

Achieved. The resettlement policy was reviewed annually and the current published strategy was dated April 2010. The deputy governor was also the head of reducing reoffending and usually chaired reducing reoffending meetings. The published strategy described current provision across each resettlement pathway, but did not show clear links with the regional reducing reoffending strategy.

Further recommendation

2.8 The prison's reducing reoffending strategy should be clearly informed by and linked to the regional reducing reoffending strategy.

Recommendations

Courts, escorts and transfers

2.9 Female and male prisoners should be transported separately. (1.6)

Achieved. Reception staff told us that female prisoners were not transported with male prisoners.

2.10 Reception should remain open over the lunch period to receive prisoners. (1.7)

Not achieved. Staff said that the reception did not stay open over lunchtime, and that this would need a notice to revise the service level agreement.
We repeat the recommendation.

Additional information

2.11 Court escort and prison transfers were contracted to G4S, although other contractors were used for transfers from outside the North West area. Staff reported good relationships between prison and contractor escort staff.

First days in custody

2.12 Prisoners should not be held for long periods in reception. (1.23)

Not achieved. Staff said that prisoners were in reception for up to four hours, unless they arrived on their own, when they were processed within one hour. A log of times kept in reception indicated that prisoners stayed there for an average of two hours, ranging from one hour to 3.5 hours. All new receptions were planned. The practice was to complete the processing of each prisoner, including seeing health care and chaplaincy staff, before they were moved as a group. This resulted in longer than necessary periods in reception.
We repeat the recommendation.

2.13 The chaplain should see all new arrivals within their first 24 hours of arrival at Buckley Hall. (1.24)

Achieved. A member of the chaplaincy team saw each new arrival in the reception interview room.

Additional information

2.14 Movement through reception was low, with approximately 34 discharges and 29 new receptions over a three-week period. Reception opened from 8am till 5.30pm. Receptions after this time were dealt with by the orderly officer, but they were only given basic information and facilities. One prisoner told us he had arrived at 7pm after travelling seven hours, but was not given any food. Prisoners who arrived before mean meal times were taken on to the wing for a meal and then returned to reception to be processed fully.

2.15 The reception was suitable for purpose and relatively clean. The two reception holding rooms displayed written information and each had a television, but there were no magazines or newspapers for prisoners. Although the holding rooms were clean, the toilet in holding room two was very dirty. There was a holding cell, which was stark, but it was rarely used (once in 2010) and only when there were problems between prisoners arriving in reception.

2.16 An Insider was present when new receptions arrived, and started the induction process by speaking to them and going through all aspects of life at Buckley Hall. He also gave them menus for the week and two visiting orders to complete. New arrivals were allowed a two-minute telephone call in reception, and given a comprehensive induction booklet to read before they were located on to B wing.

2.17 Although there were no dedicated first night cells in B wing, cells were prepared before the prisoner was located there, and were clean and contained fresh bedding and basic amenities.

2.18 First night officers interviewed prisoners on their first night. The information on the risk assessment was very limited with no follow-up information. No first night staff were profiled for Friday receptions, although the prison still accepted prisoners on Friday (eight were booked in

for the Friday of our inspection). These staff told us that they still did this work up to 5pm on Fridays, but any prisoner arriving then did not see a first night officer till Saturday. One prisoner who arrived on a Tuesday at 7pm had not had a first night assessment interview, as the orderly officer who booked him in had not informed the duty first night officer.

2.19 The induction classroom was adequate for its purpose, and had plenty of information on display and for prisoners to take away. Multi-media were used, and the room could be used with no outside interruptions.

2.20 The induction programme ran on fixed days, and new arrivals joined it at the earliest point after arrival on a rolling programme. In between sessions, prisoners were locked up in their cell on B wing. B wing staff had limited understanding of the induction programme and their role in it. The programme included an induction board, which involved a needs assessment linked to the offender management process. Although we were told that this took place in the induction room, we observed it taking place on the landing on B wing in the sight and sound of other prisoners.

Further recommendations

2.21 All prisoners arriving in the evening should be provided with food.

2.22 The reception holding cell should be refurbished to make it less stark.

2.23 The first night risk assessment should include more comprehensive questions on the immediate needs of new arrivals.

2.24 All new arrivals should see a first night officer on the day they arrive at the prison.

2.25 Staff on B wing should be involved in the induction programme, which should allow prisoners to take part in purposeful activity between sessions.

2.26 Induction sessions should always take place in privacy in the dedicated induction room.

Housekeeping point

2.27 The holding rooms should contain magazines and newspapers, and the toilets should be cleaned.

Residential units

2.28 Cells without a separate closet for the in-cell toilet should not be used for double occupancy. (2.20)

Not achieved. Cells used for double occupancy still had no separate closet for the in-cell toilet. Although the toilet was usually partially screened by a shower curtain, there was insufficient privacy for prisoners.
We repeat the recommendation.

2.29 The policy on display of offensive material should be revised to ban material that prisoners and staff find offensive. (2.21)

Not achieved. The policy had been revised in March 2010 but its application was inconsistent. We found a few cells where material deemed offensive by the policy was on display, and staff were unclear about all the material that was included in the policy.

Further recommendation

2.30 The display of offensive material policy should be widely publicised to staff and prisoners, and should be adhered to.

2.31 Staff should respond to emergency cell bells without delay. (2.22)

Achieved. We observed staff responding to emergency cells bells quickly and always within five minutes. Prisoners told us that staff response to cell bells was generally good.

2.32 Staff should ensure that noise is kept to a minimum at night. (2.23)

Achieved. The residential units were calm and quiet at night. Prisoners told us that noise was minimal and did not affect their sleep.

2.33 The restrictions on the acceptance of property through the post should be relaxed for all prisoners. (2.24)

Not achieved. Unless there were exceptional circumstances, only prisoners on the enhanced level of the incentives and earned privilege (IEP) scheme were permitted to have property sent through the post. Prisoners on A wing could receive parcels with up to 10 items in May and November, which were processed and issued by the end of June and December respectively. Only in exceptional circumstances, and subject to authorisation by a residential governor, were prisoners permitted to receive a decency parcel, for example if they were without a set of serviceable clothes.
We repeat the recommendation.

2.34 Prisoners in double occupancy cells should have lockable lockers in which to secure their personal possessions. (2.25)

Not achieved. None of the double occupancy cells had lockable cabinets. Some had been fitted with safes designed for prisoners to secure in-possession medication. However, keys to these were not often issued, and prisoners in double cells still had no means of securing their personal possessions.
We repeat the recommendation.

Additional information

2.35 The three residential units were modern, clean and bright, but beginning to need redecoration. They were up a steep hill, which made the prison unsuitable for prisoners with mobility difficulties. The galleried style offered unit staff good lines of sight throughout the main communal areas. The two sides of each unit were well equipped with an individual servery, laundry, fitness suite and sufficient association equipment in a reasonable condition, including snooker, pool and table tennis tables.

2.36 Privacy locks were fitted in all cells, which were generally clean and well maintained, although there was graffiti in some. All cells had kettles and curtains, and televisions were available to

all prisoners except those on basic level. The furniture was in good condition, but double cells often lacked sufficient tables and chairs for both prisoners.

2.37 There were sufficient telephones for the number of prisoners. Telephones were in a booth or had a privacy hood; some booths contained a significant amount of graffiti.

2.38 Outside areas were generally clean.

2.39 The prisoner consultative committee met monthly but was often attended by few prisoners. There was, however, evidence that changes had been made as a result of issues raised.

2.40 A coherent and comprehensive published facility list set out the items that prisoners could hold in possession and the route for them to enter the prison. Most prisoners, except those on the enhanced level, had to buy items through catalogues. Registered post and parcels were managed by reception and, despite some complaints from prisoners about lengthy delays, there was no backlog of parcels or recorded letters at the time of the inspection.

2.41 All prisoners, regardless of privilege level, were permitted to wear their own clothes. Prison clothing was not routinely issued to all prisoners but was available on request. Wing laundry orderlies were employed, and all prisoners could have their clothes laundered at least twice a week.

2.42 Prisoners could exchange their sheets each week, and mattresses and pillows were of a good standard and could be replaced if necessary. All prisoners were issued with duvets, but could also buy their own duvets, pillows and duvet covers, depending on their IEP level.

2.43 Shower cubicles were generally clean and access was good. Prisoners could request a range of toiletries but most preferred to buy their own from the prison shop. Materials for cleaning cells were readily accessible.

Further recommendation

2.44 All cells used for double occupancy should have sufficient furniture for both prisoners.

Housekeeping point

2.45 Graffiti in cells and telephone booths should be removed.

Staff-prisoner relationships

No recommendations were made under this heading at the last inspection.

Additional information

2.46 We observed excellent relationships between staff and prisoners. Staff were courteous, approachable and friendly, and the use of prisoners' preferred name or titles was the norm. Despite lean staffing levels, the establishment was calm and there was no evidence of collusion. Prisoners felt safe and got responses to the issues they raised. However, the quality of relationships was not always reflected in the quality of formal structures, such as the personal officer scheme. Prisoner complaints were usually about bureaucratic procedures rather than individual staff.

Personal officers

2.47 The personal officer scheme should be deployed consistently throughout the prison. (2.36).

Not achieved. The prison had a comprehensive personal officer policy – the staff and prisoner relationship policy – revised in 2009, which provided guidance on the allocation of personal officers within 24 hours of a prisoner's arrival, their responsibilities, and mandatory actions to support the scheme. However, many staff had only a vague awareness of the policy and its requirements. Personal officers were allocated to a series of cells on their wing and were responsible for the occupants. The name of the personal officer was displayed above each cell door, and most prisoners were aware of who their personal officer was. In all other respects, the scheme was limited and variable. We were not assured that personal officers introduced themselves within 24 hours of a prisoner's arrival. and the quality of record keeping was very mixed. Weekly file entries were not made consistently, and many had a shortage of information. A recent needs analysis by the prison also suggested that prisoners had a similarly mixed view on the value of the scheme. In mitigation, the good quality staff-prisoner relationships generally meant that prisoners found staff helpful, and that less formal structures met their needs.
We repeat the recommendation.

Additional information

2.48 There was limited evidence of a wider engagement by personal officers in work such as sentence management. Similarly, while there was some evidence that managers had taken an interest in personal officer work, quality assurance procedures were limited and superficial.

Further recommendation

2.49 There should be effective quality assurance procedures for the personal officer scheme.

Bullying and violence reduction

2.50 The violence reduction coordinator's job description should be revised to enable him to take a more active role in overseeing some of the day-to-day arrangements for tackling anti-social behaviour. He should be given sufficient to time to fulfil these duties. (3.14)

Achieved. The role of the violence reduction coordinator had been merged with that of the suicide and self-harm prevention coordinator to form one overarching full-time post. This enabled more time for the safer custody manager to engage in the day-to-day running and implementation of both suicide and self-harm prevention and violence reduction work.

2.51 Managers should ensure that attendance at the violence reduction committee improves, and that all members attend meetings or send a deputy if they are unable to do so. (3.15)

Achieved. The violence reduction meeting had merged with the suicide and self-harm prevention meeting to form the monthly Safer Buckley Hall meeting. Attendance at this meeting was generally good, including representatives from key departments, as well as Listener representatives who attended the first part of the meeting. The inclusion of

representatives from both the regimes and activities group and drug strategy ensured a broad approach to managing violence across the establishment.

2.52 The discrepancies in the data collected by the violence reduction committee and the establishment's performance management unit should be resolved. (3.16)

Not achieved. There were still some discrepancies between the data on violence and violence reduction, including serious assaults, presented to the monthly Safer Buckley Hall meeting, and that recorded for the monitoring of key performance data. Although the figures were relatively low, and the incidents were recorded by both parties, there remained some discrepancies on what constituted a serious assault.

Further recommendation

2.53 The prison should clarify what it records as a serious assault, and should ensure that this information is reported consistently to the Safer Buckley Hall meetings.

2.54 All incidents of alleged bullying should be properly investigated. (3.17)

Not achieved. From a review during the inspection, the circumstances under which an individual prisoner would be placed on a tackling antisocial behaviour (TAB) log if he was suspected of bullying or if there was a specific incident were not clear. Some prisoners found guilty on adjudication of fighting were placed on a TAB while others were not. Although wing managers investigated incidents of alleged bullying, there was no system to ensure the consistency of these investigations or their outcome.
We repeat the recommendation.

2.55 Staff should be trained in the revised 'tackling anti-social behaviour' arrangements to increase their awareness and the arrangements publicised on each residential unit. (3.18)

Not achieved. Although 62 staff had been trained in the TAB arrangements, only 18 were officers primarily responsible for its implementation. Non-uniform staff, such as education and OMU staff, had been included in the training to raise awareness of TAB, but also some administrative staff who had no involvement at all.
We repeat the recommendation.

2.56 The purpose of tier three of the tackling anti-social behaviour scheme should be reviewed to ensure its relevance. (3.19)

Not achieved. The third stage of the TAB process had been reviewed and it had been decided to keep it in order to have a further sanction for prisoners beyond that of monitoring. However, stage three only differed from stage two in its potential to locate prisoners to segregation and possible transfer out of the prison – sanctions that were available regardless of the TAB system.
We repeat the recommendation.

2.57 Managers should ensure greater consistency in staff application of the new violence reduction strategy across all residential units. (3.20)

Not achieved. Although staff were aware of the TAB arrangements and wider provision under the violence reduction policy, the application of TAB varied widely. Staff were expected to

review behaviour three times a day and comment on identified concerns, but we saw several examples where there were gaps in this information, and sometimes only one comment a day. The focus of the safer custody manager's regular checks of documents was primarily on process, rather than content and the effectiveness of comments.

Further recommendation

2.58 There should be quality assurance of the tackling antisocial behaviour scheme that focuses on its quality and consistency.

Additional information

2.59 Prisoners were generally well aware of the prison's approach to violence reduction. Information was available on all units and included during induction. Prisoners that we spoke to said that they generally felt safe. Although there had been no anti-bullying survey, primarily because of the previous low response rate, the safer custody manager attended the monthly prisoner consultation group, and Listeners were encouraged to relay any concerns about violence to the monthly Safer Buckley Hall meeting.

2.60 The number of assaults had declined significantly in the previous 12-18 months. In 2009, there had been six assaults on staff, compared with 10 in 2008, and six assaults on prisoners, compared with 13 in 2008. In the first four months of 2010, there had been no assaults on staff and four on prisoners, compared with four on staff and six on prisoners in the first four months of 2009. The number of fights had also declined from 16 in 2008 to 14 in 2009.

2.61 The number of TABs opened in the previous 12 months had increased, primarily relating to victims. In 2008, 38 TABs had been opened on prisoners thought to be bullying or violent and 22 on victims. In 2009, the figures had increased to 40 and 43 respectively. The increase appeared to relate to an increased staff awareness of the programme.

2.62 The TAB process included three stages, although the number on stage three was very low. Prisoners could be placed on a 'covert' TAB to monitor behaviour, especially if negative behaviour was suspected rather than evidenced. Stage two was used when specific evidence of negative behaviour was identified. All those on a TAB were reviewed weekly, but it was rare for anybody to be monitored beyond a week. A 'victim' TAB was also used to monitor vulnerable prisoners. Although the psychology department could offer some one-to-one work with perpetrators or victims of violence or bullying, this was rare. There was no specific programme or course for those on TAB, and the programme was simply a process of monitoring.

Further recommendation

2.63 The prison should implement a programme of activity to challenge antisocial behaviour for prisoners subject to level two of TAB.

Self-harm and suicide

2.64 Managers should ensure that attendance at meetings of the suicide prevention team reflects the membership in its terms of reference. (3.34)

Achieved. See paragraph 2.51.

2.65 There should be a designated relief staff member to cover absences of the suicide prevention coordinator. (3.35)

Achieved. For approximately 12 months until April 2010, there had been a deputy safer custody manager. Since then the deputy had reverted to her previous role and had not been replaced. The roles of diversity manager and safer custody manager were planned to be merged in November 2010. In the interim, the current diversity manager covered absences.

2.66 Managers should ensure that monitoring entries in assessment, care in custody and teamwork (ACCT) documents demonstrate a high level of staff engagement with the prisoner concerned. (3.36)

Partially achieved. In our review of ACCT documentation, the quality of staff entries was generally good, and frequently demonstrated good staff engagement with those subject to ACCTs. There were, however, some exceptions to this. Although the safer custody manager reviewed documentation, this tended to focus on the ACCT process rather than the effectiveness of engagement.

Further recommendation

2.67 There should be quality assurance of suicide and self-harm prevention work to ensure consistency and share effective practice.

2.68 The Listener on the first night centre should routinely see all new arrivals within their first 24 hours. (3.37)

Not achieved. All new arrivals were given a talk by Listeners during induction and could see an Insider individually. Although Listeners were based on the first night and induction unit, they only saw new arrivals if there was a specific request.
We repeat the recommendation.

2.69 All permanent night staff should be trained in ACCT procedures and carry an anti-ligature device. (3.38)

Not achieved. Since September 2009, the prison no longer had permanent night staff, and all staff undertook night duties on a rota. Only 59% of staff were up to date on ACCT foundation training. During our night visit, only one of the three staff employed on the residential units had received ACCT training, although all were carrying anti-ligature devices.

Further recommendation

2.70 All staff should have up-to-date assessment, care in custody and teamwork (ACCT) training, in particular staff should not undertake night duties unless they have been trained in ACCT.

2.71 Care maps should be reviewed routinely at ACCT case reviews. (3.39)

Partially achieved. Our review of both open and closed ACCT cases indicated that care maps were regularly reviewed and updated at review meetings. However, there were some

exceptions to this, and targets identified in care maps were not always SMART (specific, measurable, achievable, realistic and time bound).

Further recommendation

2.72 Targets identified in ACCT care maps should be SMART (specific, measurable, achievable, realistic and time bound), and should be routinely reviewed at case reviews.

Additional information

2.73 The number of incidents of self-harm had declined from 23 in 2008 to only 14 in 2009. The number of ACCTs had also almost halved, from 63 to 32. Minutes of Safer Buckley Hall meetings indicated good discussions on patterns and trend of incidents. All cases of prisoners on ACCTs were discussed in the second half of meetings – after Listeners had left.

2.74 The prison did not investigate near misses routinely. Prisoners were interviewed by the safer custody manager, using an established pro forma, but the interview did not fully investigate the circumstances surrounding the event to learn any necessary lessons.

2.75 The prison usually had around 12 to 15 ACCT assessors with a rota to ensure at least two were always available. ACCT reviews were generally well attended. The safer custody manager attended most, and there was usually someone from the mental health services and other departments involved with the prisoner.

2.76 There were eight Listeners across the establishment, with at least two on each wing. Listeners told us they felt reasonably well supported, and met the Samaritans fortnightly. Although there was no significant limitations to prisoner access to Listeners, there was no crisis suite in the prison.

Further recommendations

2.77 There should be a full investigation following any self-harm 'near miss' to establish any lessons to be learned. These lessons should be shared with the membership of the Safer Buckley Hall group.

2.78 The prison should introduce a Listener suite that can be accessed, if needed, by any prisoner.

Applications and complaints

2.79 Details about applications and complaints should be publicised in a range of languages. (3.99)

No longer applicable. Information about applications and complaints was not available in languages other than English. However, since the last inspection Buckley Hall no longer accepted foreign national prisoners. At the time of the inspection, there were three foreign national prisoners, each of whom denied that they were foreign nationals and were being kept at Buckley Hall while the UK Border Agency (UKBA) investigated their status (see foreign nationals section).

2.80 Applications should be collected at a more appropriate time that does not distract staff from maintaining adequate levels of supervision. (3.100)

Achieved. Application forms were collected in the morning before work.

2.81 There should be arrangements for wing staff to chase up unanswered applications, which should normally be dealt with within three working days. (3.101)

Partially achieved. There were no targets for the completion of application forms. In some cases, the formal complaints process – which guaranteed a response within three days – was used instead. The speed with which applications were answered varied considerably. Although wings kept log books of applications, the completion of applications was rarely logged. Despite this, many applications had been responded to within 48 hours, and staff dealt with many informally. Wing managers made no regular checks to ensure effective application of this system.

Further recommendation

2.82 Wing managers should undertake regular quality assurance checks of applications to ensure consistent and timely responses within three working days.

2.83 Managers should ensure that prisoners always receive helpful and courteous replies to their complaints that fully address the concerns raised. (3.102)

Partially achieved. There was a database of complaints. Every complaint was logged when it was received, and when the answer was made and returned to the prisoner. Monthly reports indicated the range and type of complaints and any patterns. This information was forwarded to the senior management team. The performance manager checked 10% of all complaints a month for quality assurance. Some detail of these checks was included in the response to the senior management team. If concerns regarding a response were identified, specific action could be taken. We reviewed a large number of complaints logged in 2010; most responses were helpful and courteous.

Additional information

2.84 There had been 570 complaints submitted so far in 2010, an average of 115 a month. This compared with annual rates of 1,700 in 2009 and 1,234 in 2008. This number was high for the size of establishment. However, our review indicated that many prisoners used the complaints system inappropriately, and many could have been dealt with through general applications. Prisoners told us that they used the complaints system because it had a guaranteed timeframe for a response, unlike the application system.

2.85 Complaint forms and boxes were available on all wings. The night orderly officer opened the boxes each night and delivered complaints to the complaints clerk. This practice could undermine confidence in the system.

Further recommendation

2.86 Complaint boxes should only be opened by the complaints clerk.

Legal rights

No recommendations were made under this heading at the last inspection.

Additional information

2.87 There was only one officer in the role of legal services officer. Although he had been trained some years ago, there had been no recent refresher programme. Demand for the service was low, with only about one application a month to see the officer. Prisoners receiving legal papers sometimes had to be seen to ensure they signed to acknowledge receipt, but their numbers were relatively low.

2.88 The Citizens Advice Bureau offered sessions at the prison once a fortnight. Legal guidance and advice was limited primarily to information about solicitors and specialist help.

2.89 There were three booths for legal visits attached to the visits room, although only two were available at the time of the inspection. Legal visits were only available at the same time as domestic visits. Demand for these rooms was high, and no room was available for almost two weeks at the time of our inspection. When rooms were not available, legal visits were offered in the main visits hall as an alternative, but this had very little privacy.

Further recommendation

2.90 The prison should make sufficient legal visit rooms available to meet demand.

Faith and religious activity

2.91 The governor's monthly presentations at Muslim prayers should be extended to other prisoner groups. (3.62)

No longer applicable. This was stopped after prisoner consultation highlighted that Muslim prisoners felt that it impinged on their prayer time.

2.92 Measures should be taken to ensure that noise from the gym does not intrude into the chaplaincy area. (5.44)

Not achieved. The chapel was still in the same location above the gym, and noise was still a problem.
We repeat the recommendation.

2.93 A world faith room should be provided that is large enough to accommodate Muslim corporate worship comfortably. (5.45)

Achieved. The world faith room was the same as when we last inspected, but the number of Muslim prisoners had reduced with the decant of foreign national prisoners. The room was adequate for the number attending Muslim prayers (averaging 24 a week in 2009).

Additional information

2.94 There was a full-time Free Church chaplain supported by a multi-denominational chaplaincy team, which was fully integrated into the establishment. At the time of inspection, there was no Muslim chaplain, although recruitment was under way. The prison had been supported by visiting imams, but in some weeks this could not be facilitated and Muslim prisoners did not get Friday prayers.

2.95 The chaplaincy offered a range of faith and non-faith activities, including Islamic discussions, Buddhist meditation, music groups and quality of life. There were also several accredited and rehabilitative courses, such as Lantern project (counselling for adult survivors of child abuse), victim awareness and living with loss. Access to the chapel for courses was through an application or referral process, and the programme of activities was well publicised throughout the establishment.

Further recommendation

2.96 The prison should make adequate arrangements to ensure that all faith services can take place weekly.

Substance use

2.97 There should be a dedicated drug testing team. (3.121)

Achieved. The group of officers allocated to undertake mandatory drug testing had been trained in the process and were used on a rota.

2.98 Drug and alcohol detoxification protocols should be introduced. (3.122)

Achieved. A drug detoxification protocol had been introduced. It was primarily used for secondary detoxification when required, as prisoners had generally received primary detoxification before transfer to the prison. The contract for services did not fund alcohol detoxification, as this had not been identified as a major issue for transfers in.

2.99 Substitute prescribing regimes for opiate users should be flexible and based on individual need. (3.123)

Achieved. The prison had implemented the integrated drug treatment system (IDTS) since our last inspection and had a range of prescribing regimes for opiate users. These included methadone and Subutex mainly, with some additional support from naltrexone.

2.100 The health care department should issue disinfecting tablets for cleaning injecting equipment, and provide means of safe disposal. (3.124)

Achieved. Disinfecting tablets were issued to each wing and were available in the shower rooms. The health care centre provided safe disposal of injecting equipment.

2.101 There should be effective security measures and mandatory drug testing programmes to reduce the supply of drugs. (3.125)

Achieved. There had been a major programme of work to upgrade the CCTV, fencing, visits area, reception and perimeter lighting. The programme of mandatory drug testing (MDT) had been reviewed and was now more rigorous, including a more varied selection of prisoners. The MDT positive rate for April 2009 to March 2010 was 7.8% against a target of 17.5%. Figures given at the time of inspection showed that in the six months November 2009 to April 2010, 38 suspicion tests were performed with a positive rate of 50%. Drugs indicated were predominantly cannabis.

2.102 The drug strategy team should ensure that services are provided that address prisoners' treatment and support needs effectively. (3.126)

Achieved. The drug strategy had been developed and included clear developmental targets. It was reviewed twice a year, and improved to provide more programmes and groupwork. There were good links with community drug action teams. The drug strategy team met monthly on site, and there was a weekly meeting of the substance use team. Prisoners also had access to a service user group.

Additional information

2.103 Substance use and alcohol services were commissioned by Heywood, Middleton and Rochdale Primary Care Trust and provided by Pennine Care NHS Foundation Trust. IDTS had been introduced since our last inspection and worked in collaboration with the counselling, assessment, referral, advice and throughcare service (CARATs). Multidisciplinary case management took place weekly. At the time of our inspection, there were 39 prisoners on the IDTS scheme, supported by three nurses and a visiting psychiatrist. The service was funded for up to 60 users.

Diversity

2.104 The diversity policy should be updated to provide a coherent and relevant strategy to identify and meet the needs of all minority groups of prisoners at Buckley Hall, and comply with antidiscrimination legislation. (3.45)

Achieved. A comprehensive strategy document covered all strands of diversity and how the prison was working to meet the needs of specific groups. It was further enhanced by a series of policy statements supported by the governor, and a diversity and race equality action plan that was updated monthly.

Additional information

2.105 There was a comprehensive diversity policy and action plan, supported by a good community engagement strategy and equality impact assessments. Strategies for progress on the diversity strands was clearly laid out, for example, in the use of induction and training for staff, annual disability surveys for prisoners, and the need for prisoner representatives for each diversity strand. In 2009, the establishment was awarded the national Investors in Diversity Accreditation. Staff training was good and the prison had extended this to include prisoner representatives.

2.106 There was a well-attended diversity and race equality action team (DREAT) meeting that was chaired by the governor and included prisoner representatives. Prisoner diversity representatives also had their own separate DREAT meeting, chaired by the diversity manager.

2.107 A Travellers group met biweekly, and a Travellers meal was included once a month in the menu for all prisoners. The prison had held a Travellers family day in July 2009, and there were plans to repeat this in 2010.

2.108 A gay prisoner representative acted as the intermediary between gay prisoners and staff, offering support and ensuring that staff could signpost prisoners to information and support from external agencies. There were eight gay prisoners at the time of inspection, who used the prisoner representative as a support mechanism.

Race equality

2.109 The race equality officer role should be separated from that of safer custody officer so that adequate attention can be given to both areas. (3.59)

Partially achieved. The race equality officer (REO) had been a stand-alone post for the previous two years, but since April 2010 had been allocated part-responsibility for safer custody and was shadowing this role. The time spent by the REO on race equality had fallen from 100% in January 2010 to 35% in April .
We repeat the recommendation.

2.110 The local race equality strategy should be updated and improved. (3.60)

Achieved. The race equality strategy had been updated annually and was comprehensive in its approach.

2.111 Managers should ensure that attendance at the race equality action team is consistent, and all members attend meetings or send a deputy if they are unable to do so. (3.61)

Achieved. The DREAT was well attended and there was a consistent approach to who attended. The governor chaired the meeting.

2.112 The correct ethnic minority information on category D decisions should be publicised to prisoners and a formal investigation undertaken into the reasons for the significant ethnic imbalance in these decisions. (3.63)

Achieved. An investigation had been undertaken and the correct data was formulated through ethnic monitoring and publicised to prisoners and at the DREAT. This was consistently undertaken each month.

2.113 Data on the ethnicity of prisoner orderlies should be included in the monthly ethnic monitoring and monitored by the race equality action team. (3.64)

Achieved. The REO included this data in a comprehensive report for the DREAT. The DREAT investigated any data that was out of range and took action to address this.

2.114 The quality of investigations into racist complaints should be significantly improved. The diversity manager should check all racist incident report forms before replies are sent to the complainants to ensure that the investigation and response are adequate. (3.65)

Achieved. Racist complaints were thoroughly investigated by the REO, supported by a good evidence base. The governor or deputy governor quality checked and signed the paperwork at the end of the investigation, which was externally verified by Yorkshire Diversity Centre.

2.115 All racist incidents should be fully investigated. (3.66)

Achieved. All racist incidents were investigated. The REO had good links with the security department.

Additional information

2.116 At the time of inspection, 23% of the population was from black and minority ethnic backgrounds. There were good governance arrangements and support structures to oversee race equality, with a full-time diversity manager and a race equality senior officer.

2.117 Wing-based race equality prisoner representatives attended a monthly prisoner DREAT, and were also represented on the full monthly prison DREAT (see paragraph 2.111).

2.118 Black and minority ethnic prisoners told us that they had confidence in the management of race equality, and that their concerns were taken seriously by the establishment. They believed that racism was not an issue at Buckley Hall. This was borne out by the relatively low number of racist incident report forms – 57 in 2009 and 13 in the first five months of 2010. Proven racist incidents resulted in entries on the prisoner's wing history files, security record and OMU record, and they were flagged on a high risk racial log that all staff could access.

2.119 Ethnic monitoring data indicated few issues, although in one month there was evidence of a disproportionate number of black and minority ethnic prisoners on good order or discipline (GOOD). Although DREAT minutes did not indicate that this had been investigated, the key race equality staff told us that the investigation had taken place.

Housekeeping point

2.120 Diversity and race equality action team minutes should accurately reflect the content of the meeting, and any subsequent ethnic monitoring data investigations.

Foreign nationals

2.121 The staff identified as assistant foreign national coordinators should be given sufficient time, support and training to carry out their duties. (3.76)

No longer applicable. Buckley Hall was no longer a foreign national prison (see paragraph 2.125). Three prisoners who denied being foreign nationals were still kept at the prison, at the behest of the UK Border Agency (UKBA).

2.122 Formal links should be established with independent immigration advisory agencies that can provide free advice for foreign national prisoners. (3.77)

Achieved. Rochdale Centre for Diversity had provided independent advice for foreign national prisoners until the end of 2009, when it lost its funding stream. Since the beginning of 2010, Yorkshire Centre for Diversity and the Manchester Immigration Advisory Service had been available for independent advice.

2.123 The establishment should arrange for immigration staff to attend Buckley Hall regularly to meet foreign national prisoners and discuss their cases. (3.78)

Achieved. UKBA staff attended the prison on a needs basis for the three remaining foreign nationals.

2.124 A peer support group for foreign nationals should be re-established. (3.79)

No longer applicable. Due to the decant of foreign nationals and the claim by the three remaining foreign nationals that they were British, there was no requirement for a peer support group.

Additional information

2.125 Buckley Hall's role in holding foreign national prisoners had been downgraded in 2009, and it had been instructed to decant all foreign national prisoners. Only three foreign national prisoners remained at Buckley Hall, and their claim that they were not foreign nationals was being considered by UKBA. Due to the low number, the resources for foreign nationals had been downsized and only the coordinator dealt with foreign national issues.

Prisoners with disabilities and older prisoners

2.126 Formal multidisciplinary care plans should be drawn up for all prisoners with disabilities or other specific diversity needs. These prisoners should be involved in this process, and all relevant staff should be made aware of their relevant care needs. (3.46)

Achieved. New arrivals with disabilities or diversity needs were identified through the health screening on reception. This led to the formulation of a care plan, which was either a generic or a specific care plan. A personal emergency and evacuation plan was also drawn up for prisoners with disabilities.

Additional information

2.127 The disability liaison officer, working with the fire officer, ensured that reasonable adjustments were made for prisoners with disabilities. For example, a prisoner with no sense of smell who smoked had a smoke alarm fitted in his cell. There were no identified disabled-access cells. The ground floor cells were used for prisoners with mobility difficulties.

2.128 An over-50s senior citizen prisoner coordinator supported all prisoners over 50. His role was to ensure that these prisoners had a focal point through which they could be represented. At the time of inspection, only two prisoners were over 60.

Health services

2.129 A member of the health care team should have a specific focus on the care of older prisoners. (4.43)

Achieved. One of the nursing team focused on the care of older prisoners. Appropriate qualifications had been obtained in the care of older people, and there was an older adults clinic.

2.130 There should be specific health care application forms and dedicated health care application boxes on the wings, which are opened by health care staff. (4.44)

Achieved. There were specific health care application forms and boxes on the wings, which were only opened by health care staff.

2.131 Discipline officers should supervise prisoners awaiting collection of their medication. (4.45)

Not achieved. Discipline staff did not supervise prisoners awaiting collection or observe them taking their medication. We were told of many occasions when prisoners had become abusive or refused to be observed taking medication. Health care staff recorded these events to inform the governor and provide evidence for future re-profiling of the workforce.
We repeat the recommendation.

2.132 The prison should request that the primary care trust assess the level of pharmacist input required and ensure sufficient pharmacist and technician time is provided through a service level agreement, including counselling sessions, pharmacist-led clinics, clinical audit and medication reviews. (4.46)

Partially achieved. The pharmacist visited the prison weekly and a pharmacy technician two days a week. The pharmacist did not provide any clinics or counselling for prisoners, but the contract had ensured improved clinical audit and medication reviews.

Further recommendation

2.133 Prisoners should have access to a pharmacist.

2.134 The medicines and therapeutic committee should look at the practice of repeat dispensing and ensure that the medication supplied to prisoners does not exceed the amount prescribed. (4.47)

Achieved. This was a standing item on the meeting of the medicines and therapeutics committee. The pharmacist regularly audited prescriptions to ensure that amounts supplied did not exceed those prescribed.

2.135 Faxed prescriptions should be subject to audit, and the pharmacist should make regular visits to the prison to conduct a random check of dispensed faxes against the original prescription forms. (4.48)

Achieved. The pharmacist visited the prison weekly and conducted audits, including random checks of dispensed faxes against the original prescription forms.

2.136 The use of general stock medicines should be subject to audit, and the medicines and therapeutic committee should develop a policy to determine the circumstances in which it should be used. Wherever possible, named-patient dispensed medicines should be issued in preference to general stock. (4.49)

Achieved. General stock medicines were audited, and the medicines and therapeutics committee had developed a range of patient group directions, which were under review at the time of our inspection. The majority of dispensed medicines were to a named patient rather than from general stock.

2.137 The medicines and therapeutic committee should agree the levels of general stock medicines held at the prison, and there should be a system of audit to ensure these

levels are complied with. (4.50)

Achieved. The pharmacist monitored the levels of general stock medicines, which were agreed by the medicines and therapeutics committee.

2.138 Supply of pre-packs by nursing staff should be subject to audit to ensure these are supplied appropriately in accordance with prescription. (4.51)

Achieved. The pharmacist audited the supply of pre-pack medicines each week, ensuring that they were supplied appropriately in accordance with the prescription.

2.139 The medicines and therapeutic committee should develop a special sick policy to allow nurses to supply a range of treatments for minor ailments. (4.52)

Achieved. Continuous development and review of the patient group directions allowed nurses to supply a range of treatments. There was also a triage protocol using triage algorithms to enable consistency of treatment by nursing staff.

2.140 There should be patient group directives to allow nurses to supply more potent medicines and general sales list medicines. (4.53)

Achieved. Patient group directions were regularly reviewed to supply appropriate medicines to patients. Nursing staff were trained to supply medicines in accordance with levels of competence. There was one nurse prescriber, and a new clinical lead nurse was due in post.

2.141 The medicines and therapeutic committee should develop and implement a prescribing formulary for the prison. (4.54)

Partially achieved. The prescribing formulary used had been provided by the PCT. The GP and head of health care were reviewing the formulary and adapting it for the prison.

Further recommendation

2.142 A prison-specific prescribing formulary should be completed and approved by the medicines and therapeutics committee.

2.143 Notes relating to dental treatment should be entered in the patient's clinical records. (4.55)

Achieved. Dental notes were included in the new electronic clinical record that had recently been implemented.

2.144 Managers should ensure that the number of NHS appointments cancelled due to staff shortages continues to be reduced. (4.56)

Not achieved. The number of cancelled hospital appointments continued to be a problem. At the time of our inspection, two patients required bed watches, which had affected the availability of discipline staff for escorting patients. This was a regular occurrence, despite agreement with the PCT to fund up to eight appointment escorts a week.
We repeat the recommendation.

2.145 The mental health in-reach team should have appropriate accommodation in which to interview clients. (4.57)

Partially achieved. The new health care facility provided more accommodation to interview clients. Interview space on the wings was still a problem, and mental health staff often had to use the senior officer office for consultations.

Further recommendation

2.146 There should be appropriate consultation facilities on the wings for health care staff to see patients in privacy.

Additional information

2.147 Health services were commissioned and provided by Heywood, Middleton and Rochdale Primary Care Trust. The health care centre had been extended since our last inspection and provided a suitable facility, which was clean and well maintained. Prisoners had access to primary care, mental health and dental clinics, including a range of nurse-led and specialist clinics.

2.148 Staffing levels were good with a stable workforce and only one vacancy. Out of hours cover was satisfactory. Prisoners had good access to a GP, with daily clinics and short waiting times. Dental services were available every weekday, and the dentist provided clinics on three days. The dental waiting list remained high, although emergencies were seen within 24 hours.

2.149 The majority of treatments were carried out in the health care centre, including medicine administration. Clinical records were well managed and regularly audited. The health care centre had recently implemented SystmOne and was in the process of transferring records.

2.150 The mental health in-reach team was well staffed, and each nurse had a caseload of about 20. Mental health awareness training was provided on a rolling programme for all prison staff. There were two visiting psychiatrists and one visiting counsellor.

Learning and skills and work activities

2.151 The plans to develop the curriculum to meet the re-roled prison needs should be fully implemented. (5.19)

Achieved. The prison had implemented a thorough and radical curriculum review. The current curriculum was largely appropriate. It enabled prisoners to gain qualifications, skills and knowledge in vocational areas and improve their literacy and numeracy. Art, design and print, and information and communications technology (ICT) were also available, together with a 'flexi-learning' facility covering a small range of subjects up to and including degree level. There were good developments in personal and social education. External groups provided a range of activities in areas such as dance and drama. Higher level courses in subjects such as humanities were currently not provided. Diplomas were available in site carpentry, construction operations, and painting and decorating, although few prisoners to date had completed these.

2.152 Managers should take steps to communicate and explain the allocation process for activities to prisoners and demonstrate its fairness. (5.20)

Achieved. The allocation to activities process had been improved. The labour board was chaired by the regimes manager and included representatives from education, offender management unit (OMU), health care and a prisoner representative from the residential wings. Promotional material provided information to prisoners on how to access activities and the process to follow. The allocation process was open and transparent, and prisoners told us it was fair. However, there was a wait of several weeks to get on to some of the more popular workshops.

2.153 The establishment should plan and monitor learning and progress effectively. (5.21)

Partially achieved. There had been some improvement in the use of individual learning plans (ILPs), although the quality of these remained inconsistent, as was target setting. ILPs were generally used more effectively to set targets and plan work in the vocational areas than in education. A recent management audit had identified many of these issues.

2.154 The use of incentives for prisoners to achieve challenging targets and qualifications should be explored. (5.22)

Not achieved. After a review of work and education, it was decided that as pay rates were equitable, there was no need to include bonuses.

2.155 The specialist support for dyslexic prisoners should be improved. (5.23)

Partially achieved. The prison had invested in some external consultancy to support prisoners with dyslexia, which had helped raise awareness. One-to-one support was provided for the few prisoners who have been diagnosed informally with dyslexia. Appropriate staff had been trained further, up to level 2.

2.156 Vocationally related training should be provided for library orderlies. (5.24)

Not achieved. There was still no training for library orderlies. Although there were plans to introduce a customer service course for library orderlies, no training was yet in place.
We repeat the recommendation.

2.157 There should be more easy-reader books at different levels in the library. (5.25)

Achieved. The number of easy-read books had increased, and there was a broader range of reading materials for prisoners with different abilities, including up-to-date graphic texts.

2.158 The library should introduce activities to promote reading and literacy. (5.26)

Partially achieved. Some activities had been introduced to promote literacy, such as world book day. However, the library was not included in the induction programme and not promoted widely throughout the prison, apart from an information leaflet sent to the wings to promote new titles. Library use had reduced since the last inspection from almost two-thirds of prisoners to just a half.

Further recommendation

2.159 The library should be better promoted throughout the prison.

Additional information

2.160 Workshops provided work for 96 prisoners in glazed unit assembly, tea packing, electrical assembly, recycling, kitchens and gardens. There were a further 73 places in work such as wing cleaners and orderlies. Prison workshops were generally well managed and most provided some structured work to help prisoners develop a good work ethic. However, work in the packing workshop was repetitive and mundane. Approximately 50 prisoners were unemployed (13% of the population), which was fewer than at the last inspection. The prison had insufficient places in workshops to ensure that all prisoners had equal access to vocational training. A new workshop was due to open to provide additional work places for the planned increase in population. Since the last inspection the prison had introduced accreditation into most prison workshops, but the external funding for this was due to end and the prison was investigating a possible alternative provider. Relationships in workshops were respectful and the standard of behaviour was good.

2.161 The range of vocational training had improved with additional activities and there were now 108 places. The prison had a good working relationship with the Offender Learning and Skills Service (OLASS) provider, and they worked together to develop vocational courses to meet the needs of prisoners. OLASS tutors and prison instructors worked together in the groundwork and joinery workshops. Workshop accommodation was good and replicated commercial standards, including a realistic outside training area for brickwork and groundwork. Standards of prisoners' work were good. Almost all learners who completed their courses achieved the qualification, and most progressed to a higher level course.

2.162 Planning of learning was generally good, as was the standard of individual coaching. Quality assurance systems included the observation of teaching and learning. Staff were vocationally well qualified and had current industrial experience. There was literacy and numeracy support in workshops. There were waiting lists for most courses. Attendance was satisfactory, at 86%

2.163 Education provision focused on improving prisoners' levels of literacy and numeracy. The Access for All course enabled prisoners with poor literacy and/or numeracy to gain skills and confidence before moving on to mainstream education. Prisoners produced good quality work on the popular art course, and viable business ideas on the enterprise course, although their lack of access to the internet restricted their research. Teachers and learning support assistants knew the needs of prisoners well and planned lessons accordingly, but there were too many interruptions to classes. For example, prisoners were withdrawn from lessons to attend the gym, which disrupted the continuity of their learning.

2.164 The library was welcoming. Prisoners attending education had good access, but those who did not could visit it on only one evening a week, and the library was not open at weekends. Since the previous inspection, an improved private study area with good access to computers had been developed. The library had good links with the education department and supported education-based projects. There was an appropriate range of library stock. Legal practitioner texts were current, and Prison Service orders were also available to prisoners.

Further recommendations

2.165 All work should be stimulating and enable prisoners to gain relevant work skills and qualifications.

2.166 Gym sessions should not disrupt education classes.

2.167 There should be improved access to the library for prisoners not attending education.

Physical education and health promotion

2.168 The establishment should further develop and improve fitness suite facilities and their availability. (5.32)

Achieved. The fitness suite had appropriate cardiovascular and resistance equipment and was used well, but when it was full – it could take over 30 prisoners – it was cramped and short of space. Although sight lines were good, the suite was often supervised by just one PE instructor. Some fitness equipment had been installed on the residential wings for prisoners to use, mainly in the evening. These facilities were not managed by the PE department and prisoners could use the equipment even if they had not completed a PE induction or been passed fit for gym by health care staff.

2.169 The classroom facilities in the PE department should be improved. (5.33)

Not achieved. There was no classroom for PE theory lessons. These took place in a corner of the main sports hall, which meant that practical sessions were not available while lessons took place. There were plans to relocate parts of the fitness suite in other accommodation, where a good-sized classroom would be available.
We repeat the recommendation.

2.170 The range of vocationally relevant PE courses should be extended. (5.34)

Partially achieved. New courses in Community Sport Leader Award, British Amateur Weight Lifting Association and Focus levels 1 and 2 had been introduced. Heartstart qualifications and manual handling were included in the induction to the gym. None of the core PE was accredited, and no sports coaching awards were available. Levels of accreditation were relatively low.

Further recommendation

2.171 The opportunities for accreditation in PE should be increased.

2.172 The PE showers should be supervised effectively. (5.35)

Not achieved. Showers were in two locations in the sports hall, which made constant supervision impossible as often only one PE instructor was on duty. On occasions there was just one female PE instructor on duty to supervise over 30 prisoners.
We repeat the recommendation.

Additional information

2.173 The PE department staffing consisted of four PE instructors and a senior officer. The sports hall was of good quality, but there were no outdoor sports pitches or facilities. Access to PE was generally good and based on incentives and earned privileges (IEP) levels. A planned programme of activities allowed prisoners to access chosen sports. Surveys were carried out and changes made to provision where possible. The PE department had successfully raised money for a range of charities, and had good links with health care.

Time out of cell

2.174 Roll checks should not take longer than the allocated 15 minutes. (5.51)

Achieved. The core day operated on time with all aspects, including roll checks, completed within reasonable timescales. There was no evidence of negative outcomes in delays to the regime or routine regime slippage.

Additional information

2.175 The prison recorded a time out of cell figure of 8.5 hours a day against a target of 8.4. The published core day suggested that for a fully employed prisoner more than nine hours out of cell was possible, while unemployed prisoners were more likely to get fewer than four hours. The application of the core day was reasonable and included some domestic time for all at unlock and around meal times. There was enough time at the serving of meals for prisoners to dine in association. Evening association was available to all prisoners for 1.75 hours each evening, kept to time and was rarely cancelled. However, we found 60 prisoners (16% of the population) locked in cell during the working part of the day.

2.176 Exercise sessions were available for 30 minutes each morning, but prisoners could also use outside areas during evening association.

Security and rules

2.177 The hours allocated to the police liaison officer should be increased. (6.14)

Achieved. The police intelligence officer was now located at Buckley Hall for one and a half days a week and was available by telephone at other times if required. The prison described a positive and improving relationship with the local police, and received monthly information about local gangs.

Additional information

2.178 The security department was adequately resourced and the security committee met monthly, was generally chaired by the head of security and was well attended. There was a comprehensive standing agenda linking in with drug strategy, violence reduction and use of force. All residential units had an identified security liaison officer who also provided written contributions to the meetings. There were written reports on most agenda items at meetings. Security objectives were based on intelligence and were discussed at the meeting. The senior management team ratified the objectives before they were communicated to staff around the establishment.

2.179 Dynamic security arrangements were good and the systems to process and use intelligence were effective. From January to April 2010, over 500 security information reports (SIRs) were processed. Although this was a significant reduction since the last inspection, this was still a healthy number. However, despite extensive efforts to tackle drug problems in the prison, many SIRs were still about drugs and, by association, mobile telephones. Targeted searching that resulted had yielded 25 finds in the first five months of the year, including drugs and mobile telephones. Half of the 38 suspicion mandatory drug tests in the six months November 2009 to April 2010 had been positive. There were few SIRs relating to gang culture, but the

security department was aware of this potential issue, had a good knowledge of local activity, and took steps to prevent members of the same gang living close to one another in the prison.

2.180 Closed visits were used infrequently but appropriately. At the time of the inspection, only four prisoners were subjected to this. Authorisation and reviews of closed visits were completed correctly.

2.181 Rules were explained to new arrivals on reception and during induction, but there was little reinforcement of these and rules were not generally displayed on noticeboards. Many prisoners complained to us about lack of awareness and clarity on some wing rules.

Housekeeping point

2.182 Prison Service and local rules should be prominently displayed on all residential units.

Discipline

2.183 Adjudication hearings should be properly recorded and show that there has been a fair and thorough investigation of the evidence. (6.30)

Not achieved. Many of the records of adjudication that we sampled demonstrated insufficient exploration of the circumstances surrounding the charge. There was often no investigation of a guilty plea before the charge was proved. The governor quality checked all records of adjudications and was aware of the issues, and had begun to tackle them with individual adjudicators.
We repeat the recommendation.

2.184 Authorisation for the relocation of prisoners under restraint should be recorded in all cases. (6.31)

Achieved. Prisoners were located in the care and separation unit under the authority of the duty governor, who ensured that relevant documentation was completed.

2.185 There should be regular management checks of all use of force documentation. (6.32)

Achieved. A Developing Prison Service Manager (DPSM) submitted a comprehensive report on use of force to the security committee, but the minutes of the meeting did not reflect discussion of these reports (see paragraph 2.178).

2.186 There should be formal analysis of information on individual use of force incidents to identify trends and patterns of violence. (6.33)

Achieved. The report described above also identified any trends and patterns for the use of force, and the attendance of safer custody staff at the security committee allowed discussions of violence in the establishment. However, as before, the minutes of meetings did not reflect these discussions.

2.187 All cellular accommodation in the care and separation (segregation) unit should have integral sanitation. (6.34)

Achieved. All cells in the care and separation unit had been fitted with a toilet and sink.

However, some of these were in a poor state of repair and were not screened, which meant that prisoners had to eat their meals in the same area as their toilet.

Further recommendation

2.188 Toilets in cells in the care and separation unit should be screened, and kept in a good state of repair.

2.189 Prisoners located on to the care and separation (segregation) unit should only be strip-searched following an assessment of risk. (6.35)

Not achieved. All prisoners located to the care and separation unit were routinely strip-searched, regardless of the reason for their relocation.
We repeat the recommendation.

2.190 Prisoners segregated for reasons of good order and discipline should have access to televisions, according to their incentives and earned privileges status. (6.36)

Not achieved. No prisoner on the care and separation unit was permitted to have a television, regardless of his IEP status. We were told that this was because the governor wanted to prevent prisoners remaining there for long periods. Prisoners in the unit were also not allowed access to other electrical equipment, such as kettles and music systems, whatever their IEP level.

Further recommendation

2.191 Prisoners in the care and separation unit should have access to all facilities relevant to their IEP level, including television in their cell.

Additional information

2.192 Between January and April 2010, there had been 173 adjudication charges, which was over a third lower than at the last inspection. Many charges related to prisoners being threatening and/or abusive towards staff or having unauthorised items in possession, but there were far fewer than previously related to positive drug tests. During the same period, only one charge was deemed serious enough to be referred to the independent judge.

2.193 The hearing we observed was conducted well and the prisoner was put at ease and referred to by his first name. However, he was not offered writing materials or a copy of the Prison Service rules on proceedings. Prisoners were given their charge sheets the evening before the hearing, and records of adjudications indicated that all were offered the opportunity to seek legal advice. When a hearing resulted in a finding of guilt, the prisoner was given written details of the award and the appeal process was explained. There was some evidence of cases being dismissed due to lack of evidence or technical anomalies.

2.194 There was a standardised tariff system for awards, but it was not always specific and sometimes allowed adjudicators too much discretion, which resulted in variable awards for similar proven charges. Mitigating circumstances were not always properly considered when a punishment was given following a finding of guilt.

2.195 Adjudication standardisation meetings took place quarterly and were well attended by adjudicating governors. The minutes of these meetings indicated appropriate discussion and action to address any issues.

2.196 Incidents involving the use of force remained relatively low. Force had been used 62 times in 2009 and on 19 occasions In 2010 to date; at least 11 incidents in 2010 did not involve use of full control and restraint techniques.

2.197 Planned interventions were well organised and properly conducted, and paperwork was generally well completed and appropriately authorised. Accident report forms were completed in all cases, and prisoners were seen by a health care professional as soon as possible after the use of force. De-escalation techniques were encouraged and well used in many situations, including those where force had been used.

2.198 Special accommodation had been used four times in 2009 and once to date in 2010. There was evidence that some associated documentation had not been thoroughly completed. Although the level of observation was appropriate, the records showed that some prisoners had been kept in the special cell for longer than necessary after their behaviour had improved.

2.199 The care and separation unit had 12 cells, including a special cell, a holding room and a gated safer cell separated from the main residential unit. All cells were of a good size and functional but austere. There was some damaged flooring, and many had graffiti. The outside secure exercise yard had no seating or recreational equipment. The shower area was large and clean.

2.200 All prisoners located to the unit had to wear prison-issue clothing. They were allocated a locker away from the cell where they could keep their own clothes, food items, razors, lotions and creams. The latter could only be accessed by request to staff.

2.201 There was a staff selection policy for the unit and the governor approved all selections. Staff were routinely trained in ACCT and some had received mental health awareness training – those who had not were brought to the attention of the training manager. Two of the staff group of eight worked in the unit at any one time. Personal officers were not allocated, as it was felt that all staff would deal with any issues as they arose. Although we observed positive relationships between staff and prisoners and good levels of engagement, staff comments in prisoner history sheets were mainly observational and demonstrated limited engagement.

2.202 The average roll in the care and separation unit was between four and five. It was five during our inspection– one prisoner was held pending adjudication, two for their own interest, one for good order or discipline and one was serving a punishment of cellular confinement. The longest resident had been in the unit for three months and was there for his own protection. Use of the care and separation unit for prisoners seeking refuge was relatively low, but between January and April 2010, seven prisoners had been transferred from the unit as a result of feeling unsafe at Buckley Hall. Although segregation was properly authorised, we were concerned about the number of safety algorithms that were not completed within the required timescale of two hours.

2.203 Prisoners in the care and separation unit had daily access to showers, telephones, cell cleaning equipment and exercise, which took place in a metal cage and was not supervised by staff. There were no opportunities for these activities to take place in association. Although there was a small servery on the unit, staff delivered meals to prisoners in their cells. Access to other parts of the regime was poor. The education department provided in-cell education when requested. Although the published regime stated that the small library on the unit could only be accessed three times a week, staff allowed access on request. There was no access to the

gym but gym staff provided in-cell exercise programmes if requested. Prisoners were generally not permitted to attend work or religious services, although during the inspection the prisoner who had been in the unit for three months was allocated a job maintaining the unit garden.

2.204 Good order or discipline reviews took place appropriately with reasonably multidisciplinary attendance. A health care professional, usually a community psychiatric nurse, was always present and the Independent Monitoring Board usually attended. Paperwork for continued segregation took account of mental health concerns and generally set behaviour targets. However, there were no formal care plans for prisoners in the unit for more than one month. There was evidence that prisoners located in the unit for their own interest or for reasons of good order or discipline were returned to normal location.

2.205 Segregation monitoring and review group (SMARG) meetings took place quarterly and analysed information appropriately. The care and separation unit staff maintained good information management systems. SMARG meetings had identified that segregation had been used routinely for prisoners pending adjudication and, as a result, had advised staff and managers that prisoners should only be segregated if they were or continued to be violent.

Further recommendations

2.206 Prisoners attending adjudication hearings should be given writing materials and access to the rules on proceedings.

2.207 The punishment tariffs should ensure consistency.

2.208 Adjudication hearings should properly consider and record mitigating circumstances when giving an award following a finding of guilt.

2.209 Special accommodation should only be used in exceptional circumstances to house violent and/or refractory prisoners for the least time possible, and all paperwork relating to its use should be fully completed.

2.210 Damaged flooring in cells in the care and separation unit should be repaired, and graffiti should be removed and further graffiti prevented.

2.211 Prisoners located in the care and separation unit should be permitted to wear their own clothes.

2.212 Safety algorithms for all prisoners located to the care and separation unit should be completed within two hours.

2.213 There should be a full regime in the care and separation unit to provide all residents with consistent access to purposeful activity.

2.214 There should be formal care plans for all prisoners in the care and separation unit for longer than one month.

Housekeeping point

2.215 Prisoners in the care and separation unit should be allowed to collect their meals from the servery.

Incentives and earned privileges

2.216 The incentives and earned privileges scheme should be widely publicised throughout the establishment. This should include a summary of how prisoners are assessed for progression and demotion within the scheme. (6.50)

Not achieved. Information about the incentives and earned privileges (IEP) scheme was provided during induction, but there was little evidence of information about the scheme on noticeboards across all residential units.
We repeat the recommendation.

2.217 Prisoners should not be required to sign a voluntary drug testing compact in order to achieve enhanced status. (6.51)

Achieved. There was now no requirement for prisoners to routinely sign a voluntary drug testing compact in order to achieve enhanced status.

2.218 Activity supervisors should routinely contribute to incentives and earned privileges reviews. (6.52)

Not achieved. There was some evidence that activity supervisors had submitted written contributions towards applications for progression to the enhanced level, but this was inconsistent. For all other reviews, there was no evidence that they contributed to the process.
We repeat the recommendation.

2.219 The good citizen scheme should be withdrawn, and there should be much greater differential between standard and enhanced levels, which is not solely linked to a prisoner's spending power. (6.53)

Achieved. The good citizen scheme had been withdrawn, and its privileges were now available to prisoners on the enhanced level. Enhanced prisoners were entitled to family and enhanced visits and to have a parcel with additional property sent in twice yearly.

2.220 Televisions should not be removed from the cells of prisoners who are not on the basic level. (6.54)

Achieved. Prisoners on the standard or enhanced level were not disadvantaged if they shared accommodation with a prisoner on basic. We observed a television in a cell shared by a basic and standard prisoner.

2.221 Personal officers should be routinely involved in all incentives and earned privileges reviews, including those resulting in basic status. (6.55)

Not achieved. Staff told us that they were aware that they should be involved in IEP reviews but that this did not always happen. The majority of records we sampled showed that personal officers were not always present at reviews or given the opportunity to make a written contribution.
We repeat the recommendation.

Additional information

2.222 The prison operated the standard three-tier incentives and earned privileges scheme. At the time of the inspection, only four prisoners were on the basic level, while 130 were on standard, and 249 on enhanced; these were typical ratios. Prisoners transferred into Buckley Hall retained their previous IEP level.

2.223 Prisoners could progress through the tiers after three months in the prison, and when they had completed a self-assessment form. Personal officers and employers were required to complete a contribution form for a board chaired by a senior officer, usually with the prisoner, to make the final decision. There was sufficient evidence that the process was fair and that many prisoners could progress appropriately. Those who did not progress were given targets to make necessary improvements for the future.

2.224 Before demotion, prisoners were often given warnings and further chances to improve. Records of demotion were generally fair. Prisoners put on to the basic regime were given individual targets and regularly reviewed. Prisoners on the basic level could wear their own clothes, access work, dine out and have sufficient time in the open air, and had a daily but shortened period of association. The document used to monitor prisoners on basic recorded daily comments, but these were observational and often not related to the improvement objectives set.

2.225 Residential governors oversaw the process and checked all paperwork monthly. There was some evidence of decisions being overturned in favour of the prisoner. The scheme was more effective and better administered than many we encounter.

Further recommendation

2.226 Comments recorded in basic level monitoring sheets should reflect improvement objectives set by the review board.

Catering

2.227 New serveries should be provided on the wings. (7.9)

Achieved. New serveries had been installed on all residential units, and were well maintained

2.228 Servery workers should be managed by the catering department and should receive basic food hygiene training. (7.10)

Partially achieved. The catering manager maintained a full training record of all prisoners and staff who were allocated to work on serveries. All had completed food safety training and were not permitted to work on the servery until they had completed this. The catering department did not directly manage the servery workers but had some oversight and had developed an appropriate working relationship with residential staff and managers

2.229 There should be a protocol to cover the serving of halal meals. (7.11)

Not achieved. There was no written protocol covering the serving of halal meals. We observed non-halal food being served with halal utensils, and cross-contamination when food

was served by a servery worker using only a gloved hand. The kitchen was well equipped with separate storage, preparation and cooking areas for halal food, which was prepared by Muslim prisoners. However, it had no specific halal utensils. These failings needed to be addressed in a protocol.
We repeat the recommendation.

Additional information

2.230 The kitchen was clean, well maintained and well equipped. The catering service was contracted to ESS, and the catering manager worked with a team of five staff, one part-time administrative officer and up to 19 prisoners.

2.231 Breakfast was served on the day it was consumed. Lunch and dinner were selected from a four-week rolling menu that offered some variety, healthy options and met the needs of different diets, including vegetarian, vegan, halal, kosher, gluten-free and diabetic. Prisoners on the IDTS were given additional milk and sandwiches. However, the menu did not always allow prisoners to have five portions of fruit and vegetables a day. The catering manager was aware of this and considering options to rectify this.

2.232 Meals were served too early – with lunch at 11.45am and the evening meal at 4.45pm. Staff supervised queues appropriately, and temperatures of food were taken. Dining out in association was available to all prisoners and taken up by most.

2.233 The quality of meals we sampled was good and portions were adequate. However, prisoners were less positive about the food than previously and also felt that portion sizes were reducing. The catering manager was aware of these views as he (or a representative) regularly attended prisoner consultative meetings and the DREAT and also produced an annual food survey. Food comments books were available on all serveries and the catering manager responded to comments individually in the books. The catering team worked closely with the diversity manager and produced food for celebrations such as Christmas and Ramadan, as well as other cultural and social events, such as saints' days, black history month and the world cup. There was a commitment to consultation and evidence that the views of prisoners were acted on.

Further recommendations

2.234 All prisoners should be able to choose five portions of fruit and vegetables a day from the prison menu.

2.235 Lunch should not be served before noon and the evening meal not before 5pm.

Prison shop

2.236 Prisoners should not be charged an administration fee for catalogue purchases. (7.17)

Not achieved. Prisoners could make purchases through several catalogues. The only catalogue for which a charge was made was Argos, where there was a 50p levy to contribute toward delivery costs, which were usually about £5 a week to the establishment. This approach was unnecessary for the total costs involved.
We repeat the recommendation.

Additional information

2.237 The prison shop was part of the national DHL contract. Shop order forms were normally issued on Tuesday and orders delivered on Friday. Smokers' and non-smokers' packs were issued to new arrivals who missed this schedule. There were over 350 items on the shop list, which was reviewed three or four times a year and which was discussed at the prisoner consultation committee. There was little evidence of prisoner concerns about the shop and few complaints relating to it.

Strategic management of resettlement

2.238 The reducing reoffending action plan should be reviewed and updated on a quarterly basis. (8.7)

Not achieved. The prison had a pathways action plan for 2009-10. A reducing reoffending meeting to discuss the development of a new action plan was held during the inspection. Although review of the action plan was a standing agenda item at monthly reducing reoffending committee meetings, and individual pathways were discussed on a rota basis, there was limited evidence in the minutes that the committee formally reviewed and updated the action plan.
We repeat the recommendation.

2.239 The contribution of the voluntary and community sector to the delivery of resettlement services should be planned and reviewed regularly. (8.8)

Partially achieved. The prison worked in partnership with several voluntary and community sector organisations to deliver resettlement services. There had been voluntary sector forums to assist in the development of services, which had led to some new initiatives across the resettlement pathways, notably the children and families' pathway. However, the reducing reoffending committee did not regularly plan and review the contribution of the voluntary and community sector organisations across all the resettlement pathways to inform the development of the reducing reoffending policy.

Further recommendation

2.240 The reducing reoffending committee should regularly review the contribution of the voluntary and community sector to inform the delivery of resettlement services across all the pathways.

2.241 The number of prisoners released on temporary licence should be increased, especially where this could contribute to effective resettlement plans. (8.9)

Partially achieved. The number of prisoners released on temporary licence (ROTL) had increased since the last inspection, but ROTL remained underused, which frustrated some prisoners we spoke to. There was no reference in the reducing reoffending policy to the use of ROTL to support effective resettlement planning.

Further recommendation

2.242 The reducing reoffending strategy should detail how release on temporary licence will be used to support effective resettlement plans, and the number of prisoners released on temporary licence should be increased.

Additional information

2.243 The prison had a comprehensive needs analysis, which was primarily based on a self-reporting questionnaire of resettlement need across each resettlement pathways and also incorporated data from offender assessment system (OASys) assessments. The 2009 survey had covered 40% of prisoners.

2.244 The needs analysis was not incorporated into the reducing reoffending policy and did not appear to have been used to inform either the strategy or the pathways action plan, with little connectivity between the three documents. Nominated pathway leads were identified and there was evidence of developments across the pathways.

2.245 Although the membership of the reducing reoffending committee was appropriate, attendance at the monthly meeting was inconsistent and had been poor in recent months.

2.246 All prisoners had an initial induction needs assessment completed by an offender supervisor. For prisoners in scope for offender management, a cohesive document was used that identified resettlement needs across each resettlement pathway, with onward referrals as necessary. A local induction assessment tool was used to assess the initial needs of prisoners not in scope. This tool was more fragmented and did not assess need against each pathway, although some departments – such as the housing advice centre – did routinely see all new arrivals during induction and made referrals in response to identified needs.

2.247 Weekly discharge boards were organised by the offender management unit (OMU), chaired by a prison service manager, and attended by the housing advice officer, Jobcentre Plus and other relevant agencies who worked with the prisoner. Prisoners were not invited to attend a board until two weeks before their release, which was too late to address outstanding resettlement needs.

Further recommendations

2.248 The annual needs analysis should be used to inform and strategically develop the reducing reoffending policy and pathways action plan.

2.249 Core members of the reducing reoffending committee should consistently attend the monthly meetings, and should appoint a representative from their department to attend if they are unable to do so.

2.250 All prisoners should have an initial assessment of their resettlement needs against each resettlement pathway during their induction.

2.251 Discharge boards should be convened well in advance of a prisoner's release date to ensure that outstanding resettlement needs can be adequately addressed before his release.

Offender management and planning

2.252 All staff who have direct contact with children should receive training from the local safeguarding children training team, and there should be a central log of all staff who have received training and those who require it. (8.20)

Achieved. Safeguarding training was delivered primarily by the senior probation officer on an ongoing basis as part of the prison's training programme. Approximately 82 staff had attended the training to date, with a focus on staff who worked in visits.

2.253 Personal officers should play an active role in sentence planning boards. (8.21)

Not achieved. Personal officers were invited to attend sentence planning boards, but offender supervisors told us that their attendance was problematic given their shifts and the need to maintain staffing levels on residential units. Attendance at boards was often limited to the prisoner, the offender manager and offender supervisor. Staff from other departments occasionally attended or made a written contribution. The prison had trialled a system of offender supervisors working on residential units alongside an allocated personal officer to link the work of personal officers with that of OMU staff, but this had proved to be problematic and was no longer used.
We repeat the recommendation.

2.254 The lifer induction programme should be delivered to all indeterminate sentenced prisoners as soon as possible following their reception. (8.22)

Not achieved. The case management of lifers had recently changed. The prison no longer had a lifer manager. Instead, lifers were incorporated into offender management arrangements and were allocated to and case managed by an offender supervisor who was responsible for delivering the lifer induction programme. A residential governor had recently become responsible for lifers and chaired lifer forums. The records showed that not all lifers had received the lifer induction programme, but new arrivals now were under the new arrangements.
We repeat the recommendation.

2.255 All indeterminate sentenced prisoners should be allocated a trained lifer officer who has regular contact with them, which should be recorded. (8.23)

No longer applicable. All indeterminate sentenced prisoners were now allocated to an offender supervisor who was responsible for maintaining regular contact with them, which was recorded electronically on P-Nomis case notes.

2.256 The initial needs of indeterminate sentenced prisoners should be identified and recorded in their sentence plans. (8.24)

Not achieved. As with the lifer induction (see paragraph 2.254), records show that under the previous case management arrangements not all lifers appeared to have received an initial needs assessment. However, offender supervisors were now responsible for this assessment for new arrivals, which was beginning to ensure greater consistency and as a result newly arrived lifers were receiving an initial needs assessment.
We repeat the recommendation.

Additional information

2.257 The offender management unit (OMU) incorporated relevant functions, including public protection, observation, classification and allocation (OCA) and indeterminate-sentenced prisoner work. Seven case administrators were responsible for a range of OMU and custody work for their allocated caseload. Case administrators were also allocated specific lead responsibilities, such as for public protection work. Cases were allocated to case administrators alphabetically.

2.258 There were seven offender supervisors, two of whom were seconded probation officers and the remainder prison officers. Approximately 49% of prisoners (150) were in scope for offender management. A local system of case allocation was used to ensure an evenly weighted caseload, although the two probation officers tended to be allocated responsibility for indeterminate-sentenced prisoners. Two offender supervisors carried a smaller caseload as they were also responsible for first night and induction procedures.

2.259 The majority of prisoners were from the Greater Manchester area and OMU staff described positive relationships with community-based offender managers. Video-link and teleconferencing facilities in the prison were used to undertake sentence planning boards or to maintain contact with offender managers.

2.260 At the time of the inspection, 197 prisoners were eligible for an OASys (offender assessment system) assessment but were not formally in scope for offender management. Although several residential staff had been trained to undertake OASys assessments, OMU managers told us they were rarely given the time for the work and, therefore, offender supervisors were primarily responsible for completing OASys assessments alongside their offender supervisor work. Not all of these prisoners had an up-to-date assessment and current sentence plan. Approximately 78 assessments were being completed during the inspection, and a further 18 were late, although half of these had been overdue for completion when the prisoners were transferred to Buckley Hall.

2.261 Prison officers working in the OMU were frequently redeployed to other duties, which affected the timely completion of OASys assessments and their offender supervision work. Probation officers were also responsible for a range of other risk assessment reports, such as home detention curfew (HDC) and parole, and for public protection screening of all new arrivals.

2.262 Out-of-scope prisoners did not have ongoing involvement with offender management, apart from the completion of their sentence plan and subsequent OASys reviews. No one was responsible for ongoing contact with these prisoners to support the completion of sentence plan targets. Formal custody planning was not used for prisoners serving less than 12 months (currently only one), although their needs were assessed during induction.

2.263 Offender supervisors were clear about their role and responsibilities. Their expected level of contact with prisoners was monthly, but this was not consistently achieved. The electronic case notes we sampled indicated that the frequency of recorded levels of contact was variable. Although the quality of entries was generally good, with evidence of positive engagement and knowledge of individual prisoners' circumstances, entries were not always monthly. The senior probation officer who was head of offender management had conducted a quality assurance of offender management procedures in October 2009, but this was not a routine exercise to drive improvements in practice.

2.264 The public protection arrangements were described in a policy dated April 2009, which was due for review. All new arrivals were screened by one of the two probation officers to identify any public protection issues. Around 38 prisoners were subject to public protection arrangements at the time of the inspection, including 21 multi-agency public protection arrangements (MAPPA) cases, nine prisoners identified as a risk to children, and eight harassment cases. Monthly public protection meetings discussed the management of individual cases, and there were good links with community psychiatric nurses, who consistently attended meetings.

2.265 There were 35 prisoners sentenced to indeterminate sentences for public protection (IPPs) and 38 lifers. Just over half of IPP prisoners were past their tariff expiry date. Delays in Parole Board hearings also created additional work for the OMU, as reports initially submitted with parole dossiers could be out of date by the time of the hearing, and addenda to reports were requested. In 2010 to date, there had been requests for addenda to seven submitted dossiers.

2.266 Four IPPs and four lifers had been approved by the Parole Board for progression to open conditions in the previous six months. We were told it could be difficult to transfer indeterminate-sentenced prisoners to undertake offending behaviour work not available at Buckley Hall.

2.267 Two IPP prisoner meetings had been held, with a third planned for June 2010, and there were monthly forums for lifers. Two lifer family days a year were held, with the most recent event in April 2010. There were staff meetings to discuss the management of individual indeterminate-sentenced prisoners.

2.268 Escorted absences for lifers were administered by the case administrator with lead responsibility for lifers. Lifers we spoke to expressed frustration about lengthy delays in the application process for escorted absences. We found evidence that there could be delays in the timely processing of applications, mainly due to the failure of staff to submit required reports on time. Nine applications had been processed during the first four months of 2010, four of which were successful, and a further three prisoners were due to undertake escorted absences in May 2010.

2.269 There had been 224 categorisation reviews in 2010 to date, with approximately 26% of prisoners approved to be recategorised to category D, and 23 prisoners transferred. Despite this, the prison received many complaints from prisoners about recategorisation. There were 23 prisoners who had been successfully recategorised to category D but who had yet to be transferred to an open prison, and there had been no transfers to open conditions in the previous three months.

2.270 The case administrator with lead responsibility for categorisation compiled paperwork for recategorisation reviews in advance of the month that reviews were due, but records showed that reviews were not always completed in the month they were due. For example, of the 34 reviews due to be completed in April 2010, half were outstanding at the end of May. Recategorisation decisions were made by the head of interventions for prisoners in scope for phase two of offender management, and by one of three residential governors for prisoners not in scope. Formal boards were not convened. Prisoners received a brief letter and the governor's handwritten summary of the recategorisation documents, which provided only limited information about the reasons for the decision and the work needed to be undertaken in preparation for the next review.

Further recommendations

2.271 All eligible prisoners should have a current OASys (offender assessment system) assessment and an up-to-date sentence plan.

2.272 Staffing resources for the offender management unit and OASys should be consistent and adhered to.

2.273 Custody planning should be provided for short-term prisoners.

2.274 There should be a quality assurance system to ensure consistency of delivery of offender supervision work, particularly the level of contact with prisoners.

2.275 OMU managers should ensure that staff submit reports required to process escorted absence applications in a timely manner, and that action is taken to chase outstanding reports.

2.276 Recategorisation reviews should be completed within required timescales, and prisoners should be provided with clear information about the reasons for recategorisation decisions and the appeal process.

Resettlement pathways

Accommodation

2.277 The prison should ensure that housing advice services are funded following the completion of the current contractual arrangements. (8.30)

Achieved. The prison had ensured that the housing advice centre (HAC) was now staffed by a committed operational support grade staff member, who had taken on responsibility for the work when the previous post holder had retired. Peer representatives also worked in the HAC and assisted in a signposting and referral service to prisoners and the completion of initial housing needs assessments. Although peer advisers had not undertaken formal accredited training, this had been identified in the pathways action plan and Nacro had agreed to carry this out.

2.278 Housing advice services should be promoted more effectively at induction and throughout the prison. (8.31)

Partially achieved. The HAC officer and peer advisers saw all new arrivals during induction and delivered a presentation on HAC services. Follow-up appointments for prisoners to attend the HAC were made if required. There were some posters to promote and advertise the service across the prison. However, in the 2009 needs analysis, approximately one-third of respondents said they did not know where to seek help for accommodation problems.

Further recommendation

2.279 Housing advice services should be promoted more effectively throughout the prison.

2.280 The prison should liaise effectively with Supporting People Commissioning Bodies to ensure that sufficient and appropriate accommodation is available for those prisoners

who do not have a fixed address to go to on release. (8.32)

Achieved. The prison had established links with several housing providers. A prison liaison worker from Depaul UK, funded by Rochdale Supporting People, attended the prison each fortnight to provide a through-the-gate accommodation service for prisoners returning to the Rochdale area. The service had commenced in April 2009 and was funded for three years. Three community support workers continued to work with prisoners to secure sustainable accommodation following their release. A worker from the Greater Manchester Offender Project also attended the fortnightly housing surgery to work with prisoners planning to return to Manchester, Bolton and the Tameside area. The prison's records showed that the number of prisoners discharged with no address arranged on release had decreased since the previous inspection to just under 6% of prisoners released in 2009.

Additional information

2.281 The HAC could make referrals to other community organisations that were able to provide support in securing accommodation on release. For example, a representative from the Barnabas Trust visited the prison twice weekly and could provide through-the-gate support for prisoners due to be released to Greater Manchester, including assisting with accommodation. The chaplaincy team also had links with the Accrington-based Project Restore, which could provide resettlement assistance for prisoners, including accommodation support.

2.282 A rent arrears scheme was also administered through the HAC.

Education, training and employment

2.283 The establishment should fully implement the learning and skills strategy to support the resettlement pathway. (8.38)

Partially achieved. The learning and skills strategy to develop vocational training had better links to the resettlement pathway. A wider range of vocational courses had been introduced to focus on developing prisoners' employability skills. Vocational courses now provided opportunities for prisoners to develop work skills such as brickwork, site joinery and groundwork, helping to increase their employment opportunities. However, the production workshops still did not have opportunities for prisoner to accredit their work skills development

Further recommendation

2.284 Accredited training should be introduced into all prison workshops.

2.285 There should be improved links between learning and skills and sentence planning. (8.39)

Achieved. Links between learning and skills and sentence planning had improved. Representatives from the OMU now sat on the labour board to help inform the allocation process and improve the link to sentence planning. There were good links between learning and skills and the information, advice and guidance function.

2.286 The establishment should improve links with external partners, including employers. (8.40)

Partially achieved. The prison had improved the range of external links available to prisoners on release. The information, advice and guidance workers undertook individual interviews with prisoners before release and had links with a variety of external providers to support prisoners seeking employment and training on release. Some links had been made with employers, although the prison recognised that employer engagement needed to be improved further.

Further recommendation

2.287 The prison should continue to develop employer links to help provide work opportunities for prisoners on release.

2.288 Funding should be secured to ensure the continuation of the IMPACT project. (8.41)

Not achieved. The prison had been unsuccessful in securing funding to continue an IMPACT project (aimed at helping prisoners obtain employment and education on release). There were no alternative projects to help prisoners with the production of CV and job applications, although the information, advice and guidance workers had some links with external agencies to help support prisoners after release. There was no job club to help prisoners research the employment market.

Further recommendation

2.289 Provision should be introduced to help prisoners with preparation for employment.

2.290 There should be a wider employment strategy to ensure delivery against the education, training and employment resettlement pathway. (8.42)

Partially achieved. The employment strategy had increased the use of ROTL over the last 18 months, although this had resulted in only 20 prisoners accessing work and training. Links with employers had not resulted in any significant work opportunities for prisoners so far. The prison had been successful in achieving its targets of 29% of prisoners going into employment on release and 7% into training.

Finance, benefit and debt

2.291 There should be a wider range of services for prisoners to tackle debt and manage personal finance effectively. (8.46)

Achieved. Jobcentre Plus staff were available in the prison each week to see new arrivals and attend weekly discharge boards. Prisoners could access advice about benefit entitlements and community care grants. Under a four-year Lottery-funded partnership with the Citizens Advice Bureau, Rochdale Law Society and Rochdale Council, which had commenced in April 2009, a worker visited the prison fortnightly and offered a signposting and advice service to prisoners, which included advice on debt and benefits. The worker saw around four prisoners each fortnight, and prisoners were referred to the service during induction when needs were identified. The education department offered budget and money management units as part of the life skills course delivered five times a year. Units were delivered on a part-time basis over two weeks. If appropriate, prisoners could complete one of the units in preparation for release. Prison staff had been trained to deliver a budget management course, although none had been delivered to date.

2.292 Prisoners should be encouraged, and if necessary assisted, to open a bank account before their release. (8.47)

Achieved. Prisoners could now open bank accounts before their release, and 73 prisoners had done so in 2009. In the 2009 needs analysis, over a quarter of survey respondents had indicated that they would like assistance in opening a bank account.

Additional information

2.293 In the 2009 needs analysis, only 15% of prisoners indicated that they required help with their finances and only 8% said they needed support managing debt. The CAB worker said it was rare for prisoners to seek advice about priority debts, such as mortgage arrears.

Mental and physical health

No recommendations were made under this heading at the last inspection.

Additional information

2.294 Discharge planning for prisoners was satisfactory, with good links with the local community. There were satisfactory procedures for the management of the terminally ill, and inpatient beds at another local prison were used when required. The care programme approach was used effectively for prisoners with severe and enduring mental health problems.

Drugs and alcohol

2.295 There should be comprehensive prisoner needs analysis to inform the drug/alcohol strategy. (8.62)

Achieved. A prisoner needs analysis and health needs assessment both took into account the needs of substance users and were used to inform the drug and alcohol strategy. The analyses were reviewed and updated annually.

2.296 The drug strategy team should ensure that groupwork modules are introduced as planned, and monitor their effectiveness. (8.63)

Achieved. Groupwork modules had been introduced by the counselling, assessment, referral, advice and throughcare service (CARATs) and integrated drug treatment system (IDTS) teams. The standard 15 modules for IDTS included clinical and psychological activities. In addition, gym staff had introduced a healthy living module.

2.297 The remit of the prison's voluntary drug testing units should be reviewed, and prisoners based there should be offered additional support. (8.64)

Achieved. The voluntary testing unit had been relocated to A wing and co-located with the IDTS service. Prisoners on the unit were given the same opportunity to attend courses and receive care from the substance use nurses when required.

2.298 Voluntary drug testing should be clearly distinguished from compliance testing, and a separate compliance testing compact should be developed. (8.65)

Achieved. Voluntary drug testing was clearly distinguished from compliance-based drug testing. Separate compacts had been developed.

Additional information

2.299 The CARATs team comprised five staff, each of whom had a caseload of up to 50 clients, and there were about 15 referrals a month. The OMU and programmes staff provided alcohol-related courses, in addition to the one-to-one work by the CARATs team, when appropriate. The compact-based drug testing positive rate for the previous six months was 9.6%, with an average of 225 compacts.

Children and families of offenders

2.300 Prison staff should ensure that all prisoners are familiar with the processes for booking visits, and that induction literature is updated to clarify when visits can be received. (3.88)

Partially achieved. New arrivals were given visiting orders and information about visits, including the telephone number, and opening times of the visits booking line were included in the induction booklet. Although visits could now be booked by email, this information was not included in the induction booklet, and the visiting times in the booklet were incorrect.

Housekeeping point

2.301 The induction information booklet should be revised to provide accurate information about visiting times and visits booking procedures.

2.302 There should be a more efficient visits booking system. (3.89)

Partially achieved. In addition to the telephone booking line, visitors could now book visits by email. Partners of Prisoners staff in the visits lodge said they had received positive feedback from visitors about the increased flexibility for booking a visit. The visits booking line was open each weekday morning for two hours, and for two hours on three weekday afternoons. We tried the line several times, but it was always engaged.

Further recommendation

2.303 The prison should extend the opening times of the visits booking line.

2.304 The prison should consider the needs of visitors with disabilities and ensure there are adequate contingencies to assist those with mobility difficulties to access the hilly entrance to the prison's gate. (3.90)

Achieved. Visitors could use one of two disabled parking bays next to the main gate, subject to availability, and information about this facility was included on visiting orders. Visits lodge staff also told us that they could arrange support for visitors who needed assistance in walking up the steep incline to the main gate. For example, we were told of arrangements to meet a visitor with a visual impairment at the visits lodge to be escorted to the gate and visits room.

2.305 Families should be invited to participate in the sentence planning process, especially when resettlement plans are being agreed. (8.69)

Achieved. Prisoners could invite up to two family members to participate in sentence planning boards.

Additional information

2.306 Visits took place each afternoon and on weekend mornings. There were two weekday and two weekend sessions specifically for prisoners on the enhanced level of the IEP scheme. All visits session were two hours' long. There were no evening visits.

2.307 The visits lodge was staffed by Partners of Prisoners and was open approximately one hour before and after each visits session. The lodge was clean and welcoming and provided a range of relevant information to visitors, including first-time visitors. The lodge had a limited range of refreshments and a small play area.

2.308 Visitors were admitted to the prison in advance of the visits start time, and the session we observed started on time. The search areas at the gate and in the visits hall were cramped and had little privacy, particularly for the sensitive searching of religious artefacts or clothing.

2.309 There were toilets in the visits hall for both visitors and prisoners. The visitors' toilet and baby changing area were drab and needed refurbishment. Managers were aware of this and planned to improve these facilities as part of the forthcoming refurbishment of the visits hall.

2.310 There were 28 visits tables and two closed visits rooms. There was some graffiti on tables in the closed visits rooms. Staffing levels were appropriate, the atmosphere in the session we observed was relaxed, and furniture was not fixed. However, prisoners were required to wear bibs, which was unnecessary given other security measures.

2.311 The tea bar and play area were open for all visits sessions, and were staffed by Partners of Prisoners. Staff from Sure Start worked alongside play area staff on one session a week to provide activities for children.

2.312 Managers had facilitated several visitor consultative meetings, in conjunction with Partners of Prisoners, and the visits lodge had a visitors' book for feedback and comments.

2.313 The prison worked collaboratively with community organisations to provide a range of support services for prisoners' families, and to enable prisoners to maintain family ties while in custody. For example, there was an effective partnership with a local Sure Start children's centre. A six-week family play and learning course had recently been introduced, with two courses completed so far. The final session of the course enabled prisoners to demonstrate practical application of their learning during a special visit with their family and children in the visits hall.

2.314 There were regular themed activity weeks centred on the visits play area. A theatre company had presented an interactive production to prisoners and their families. The prison had received very positive feedback from visitors about family-themed activities. There were two family days a year for lifers and their families (see offender management).

2.315 A parent empowerment worker from Sure Start was available in the visits lodge one day a week to provide advice to visitors and signpost them to community support. Under a new service for families that had begun in the week of the inspection, a child and family support worker was based in the prison two days a week to provide support to families from the

Rochdale area. The prison had developed a family needs assessment document to be completed during induction to ensure appropriate and timely referrals to this service.

2.316 The library facilitated Storybook Dads, which had considerable take-up by prisoners – 175 prisoners took part in 2009.

Further recommendations

2.317 Evening visits should be available.

2.318 Searching areas for visitors should offer privacy to ensure visitors' property and clothing is searched in a religiously and culturally sensitive way.

2.319 Prisoners should not have to wear bibs in the visits room.

Housekeeping point

2.320 The closed visits rooms should be free from graffiti.

Attitudes, thinking and behaviour

2.321 The prison's portfolio of interventions should be expanded to include a programme for perpetrators of domestic abuse. (8.74)

Not achieved. Data extracted from OASys for the 2009 needs analysis indicated that domestic violence continued to be an area to be addressed, but there was no intervention available. Greater Manchester probation had recently delivered a pilot integrated domestic abuse programme in the prison with 10 prisoners. The head of psychology was evaluating this pilot to determine its effectiveness and longer term feasibility.
We repeat the recommendation.

Additional information

2.322 The thinking skills programme (TSP) was the only accredited offending behaviour programme available. Six programmes had been delivered in 2009 with 58 completions. There were 64 prisoners on the programme waiting list, which could result in lengthy waits. IPPs were given priority, and release dates were also taken into consideration when allocating course places.

2.323 There was a range of externally validated programmes, including the motivational programme A2Z, The Drink alcohol package, and three drug interventions. Thinking skills in the workplace had just received validation and had not yet been delivered. The chaplaincy delivered a victim awareness course, with four courses planned for 2010. In 2009, there had been 99 completions on these externally validated programmes. A group of staff had recently been trained to deliver the addressing alcohol related offending programme, which was due to replace The Drink.

2.324 Staff at Buckley Hall had been trained to undertake assessments for controlling anger and learning to manage it (CALM), which ensured that only prisoners assessed as suitable were transferred to other prisons to participate in the programme.

2.325 Psychology staff undertook some one-to-one work and took referrals from OMU staff.

Section 3: Summary of recommendations

The following is a list of both repeated and further recommendations included in this report. The reference numbers in brackets refer to the paragraph location in the main report.

Recommendations

To the governor

Courts, escorts and transfers

3.1 Reception should remain open over the lunch period to receive prisoners. (2.10)

First days in custody

3.2 Prisoners should not be held for long periods in reception. (2.12)

3.3 All prisoners arriving in the evening should be provided with food. (2.21, see paragraph 2.14)

3.4 The reception holding cell should be refurbished to make it less stark. (2.22, see paragraph 2.15)

3.5 The first night risk assessment should include more comprehensive questions on the immediate needs of new arrivals. (2.23, see paragraph 2.18)

3.6 All new arrivals should see a first night officer on the day they arrive at the prison. (2.24, see paragraph 2.18)

3.7 Staff on B wing should be involved in the induction programme, which should allow prisoners to take part in purposeful activity between sessions. (2.25, see paragraph 2.20)

3.8 Induction sessions should always take place in privacy in the dedicated induction room. (2.26, see paragraph 2.20)

Residential units

3.9 Cells without a separate closet for the in-cell toilet should not be used for double occupancy. (2.28)

3.10 The display of offensive material policy should be widely publicised to staff and prisoners, and should be adhered to. (2.30, see paragraph 2.29)

3.11 The restrictions on the acceptance of property through the post should be relaxed for all prisoners. (2.33)

3.12 Prisoners in double occupancy cells should have lockable lockers in which to secure their personal possessions. (2.34)

3.13 All cells used for double occupancy should have sufficient furniture for both prisoners. (2.44, see paragraph 2.36)

Personal officers

3.14 The personal officer scheme should be deployed consistently throughout the prison. (2.47)

3.15 There should be effective quality assurance procedures for the personal officer scheme. (2.49, see paragraph 2.48)

Bullying and violence reduction

3.16 The prison should clarify what it records as a serious assault, and should ensure that this information is reported consistently to the Safer Buckley Hall meetings. (2.53, see paragraph 2.52)

3.17 All incidents of alleged bullying should be properly investigated. (2.54)

3.18 Staff should be trained in the revised 'tackling anti-social behaviour' arrangements to increase their awareness and the arrangements publicised on each residential unit. (2.55)

3.19 The purpose of tier three of the tackling anti-social behaviour scheme should be reviewed to ensure its relevance. (2.56)

3.20 There should be quality assurance of the tackling antisocial behaviour scheme that focuses on its quality and consistency. (2.58)

3.21 The prison should implement a programme of activity to challenge antisocial behaviour for prisoners subject to level two of TAB. (2.63)

Self-harm and suicide

3.22 There should be quality assurance of suicide and self-harm prevention work to ensure consistency and share effective practice. (2.67)

3.23 The Listener on the first night centre should routinely see all new arrivals within their first 24 hours. (2.68)

3.24 All staff should have up-to-date assessment, care in custody and teamwork (ACCT) training, in particular staff should not undertake night duties unless they have been trained in ACCT. (2.70, see paragraph 2.69)

3.25 Targets identified in ACCT care maps should be SMART (specific, measurable, achievable, realistic and time bound), and should be routinely reviewed at case reviews. (2.72, see paragraph 2.71)

3.26 There should be a full investigation following any self-harm 'near miss' to establish any lessons to be learned. These lessons should be shared with the membership of the Safer Buckley Hall group. (2.77, see paragraph 2.74)

3.27 The prison should introduce a Listener suite that can be accessed, if needed, by any prisoner. (2.78, see paragraph 2.76)

3.28 Wing managers should undertake regular quality assurance checks of applications to ensure consistent and timely responses within three working days. (2.82, see paragraph 2.81)

3.29 Complaint boxes should only be opened by the complaints clerk. (2.86, see paragraph 2.85)

Legal rights

3.30 The prison should make sufficient legal visit rooms available to meet demand. (2.90, see paragraph 2.89)

Faith and religious activity

3.31 Measures should be taken to ensure that noise from the gym does not intrude into the chaplaincy area. (2.92)

3.32 The prison should make adequate arrangements to ensure that all faith services can take place weekly. (2.96, see paragraph 2.94)

Race equality

3.33 The race equality officer role should be separated from that of safer custody officer so that adequate attention can be given to both areas. (2.109)

Health services

3.34 Discipline officers should supervise prisoners awaiting collection of their medication. (2.131)

3.35 Prisoners should have access to a pharmacist. (2.133, see paragraph 2.132)

3.36 A prison-specific prescribing formulary should be completed and approved by the medicines and therapeutics committee. (2.142, see paragraph 2.141)

3.37 Managers should ensure that the number of NHS appointments cancelled due to staff shortages continues to be reduced. (2.144)

3.38 There should be appropriate consultation facilities on the wings for health care staff to see patients in privacy. (2.146, see paragraph 2.145)

Learning and skills and work activities

3.39 Vocationally related training should be provided for library orderlies. (2.156)

3.40 The library should be better promoted throughout the prison. (2.159, see paragraph 2.158)

3.41 All work should be stimulating and enable prisoners to gain relevant work skills and qualifications. (2.165, see paragraph 2.160)

3.42 Gym sessions should not disrupt education classes. (2.166, see paragraph 2.163)

3.43 There should be improved access to the library for prisoners not attending education. (2.167, see paragraph 2.164)

Physical education and health promotion

3.44 The classroom facilities in the PE department should be improved. (2.169)

3.45 The opportunities for accreditation in PE should be increased. (2.171, see paragraph 2.170)

3.46 The PE showers should be supervised effectively. (2.172)

Discipline

3.47 Adjudication hearings should be properly recorded and show that there has been a fair and thorough investigation of the evidence. (2.183)

3.48 Toilets in cells in the care and separation unit should be screened, and kept in a good state of repair. (2.188, see paragraph 2.187)

3.49 Prisoners located on to the care and separation (segregation) unit should only be strip-searched following an assessment of risk. (2.189)

3.50 Prisoners in the care and separation unit should have access to all facilities relevant to their IEP level, including television in their cell. (2.191, see paragraph 2.190)

3.51 Prisoners attending adjudication hearings should be given writing materials and access to the rules on proceedings. (2.206, see paragraph 2.193)

3.52 The punishment tariffs should ensure consistency. (2.207, see paragraph 2.194)

3.53 Adjudication hearings should properly consider and record mitigating circumstances when giving an award following a finding of guilt. (2.208, see paragraph 2.194)

3.54 Special accommodation should only be used in exceptional circumstances to house violent and/or refractory prisoners for the least time possible, and all paperwork relating to its use should be fully completed. (2.209, see paragraph 2.198)

3.55 Damaged flooring in cells in the care and separation unit should be repaired, and graffiti should be removed and further graffiti prevented. (2.210, see paragraph 2.199)

3.56 Prisoners located in the care and separation unit should be permitted to wear their own clothes. (2.211, see paragraph 2.200)

3.57 Safety algorithms for all prisoners located to the care and separation unit should be completed within two hours. (2.212, see paragraph 2.202)

3.58 There should be a full regime in the care and separation unit to provide all residents with consistent access to purposeful activity. (2.213, see paragraph 2.203)

3.59 There should be formal care plans for all prisoners in the care and separation unit for longer than one month. (2.214, see paragraph 2.204)

Incentives and earned privileges

3.60 The incentives and earned privileges scheme should be widely publicised throughout the establishment. This should include a summary of how prisoners are assessed for progression and demotion within the scheme. (2.216)

3.61 Activity supervisors should routinely contribute to incentives and earned privileges reviews. (2.218)

3.62 Personal officers should be routinely involved in all incentives and earned privileges reviews, including those resulting in basic status. (2.221)

3.63 Comments recorded in basic level monitoring sheets should reflect improvement objectives set by the review board. (2.226, see paragraph 2.224)

Catering

3.64 There should be a protocol to cover the serving of halal meals. (2.229)

3.65 All prisoners should be able to choose five portions of fruit and vegetables a day from the prison menu. (2.234, see paragraph 2.231)

3.66 Lunch should not be served before noon and the evening meal not before 5pm. (2.235, see paragraph 2.231)

Prison shop

3.67 Prisoners should not be charged an administration fee for catalogue purchases. (2.236)

Strategic management of resettlement

3.68 The prison's reducing reoffending strategy should be clearly informed by and linked to the regional reducing reoffending strategy. (2.8, see paragraph 2.7)

3.69 The reducing reoffending action plan should be reviewed and updated on a quarterly basis. (2.238)

3.70 The reducing reoffending committee should regularly review the contribution of the voluntary and community sector to inform the delivery of resettlement services across all the pathways. (2.240, see paragraph 2.239)

3.71 The reducing reoffending strategy should detail how release on temporary licence will be used to support effective resettlement plans, and the number of prisoners released on temporary licence should be increased. (2.242, see paragraph 2.241)

3.72 The annual needs analysis should be used to inform and strategically develop the reducing reoffending policy and pathways action plan. (2.248, see paragraph 2.244)

3.73 Core members of the reducing reoffending committee should consistently attend the monthly meetings, and should appoint a representative from their department to attend if they are unable to do so. (2.249, see paragraph 2.245)

3.74 All prisoners should have an initial assessment of their resettlement needs against each resettlement pathway during their induction. (2.250, see paragraph 2.246)

3.75 Discharge boards should be convened well in advance of a prisoner's release date to ensure that outstanding resettlement needs can be adequately addressed before his release. (2.251, see paragraph 2.247)

Offender management and planning

3.76 Personal officers should play an active role in sentence planning boards. (2.253)

3.77 The lifer induction programme should be delivered to all indeterminate sentenced prisoners as soon as possible following their reception. (2.254)

3.78 The initial needs of indeterminate sentenced prisoners should be identified and recorded in their sentence plans. (2.256)

3.79 All eligible prisoners should have a current OASys (offender assessment system) assessment and an up-to-date sentence plan. (2.271, see paragraph 2.260)

3.80 Staffing resources for the offender management unit and OASys should be consistent and adhered to. (2.272, see paragraph 2.261)

3.81 Custody planning should be provided for short-term prisoners. (2.273, see paragraph 2.262)

3.82 There should be a quality assurance system to ensure consistency of delivery of offender supervision work, particularly the level of contact with prisoners. (2.274, see paragraph 2.263)

3.83 OMU managers should ensure that staff submit reports required to process escorted absence applications in a timely manner, and that action is taken to chase outstanding reports. (2.275, see paragraph 2.268)

3.84 Recategorisation reviews should be completed within required timescales, and prisoners should be provided with clear information about the reasons for recategorisation decisions and the appeal process. (2.276, see paragraph 2.270)

Resettlement pathways

3.85 Housing advice services should be promoted more effectively throughout the prison. (2.279, see paragraph 2.278)

3.86 Accredited training should be introduced into all prison workshops. (2.284, see paragraph 2.283)

3.87 The prison should continue to develop employer links to help provide work opportunities for prisoners on release. (2.287, see paragraph 2.286)

3.88 Provision should be introduced to help prisoners with preparation for employment. (2.289, see paragraph 2.288)

3.89 The prison should extend the opening times of the visits booking line. (2.303, see paragraph 2.302)

3.90 Evening visits should be available. (2.317, see paragraph 2.306)

3.91 Searching areas for visitors should offer privacy to ensure visitors' property and clothing is searched in a religiously and culturally sensitive way. (2.318, see paragraph 3.308)

3.92 Prisoners should not have to wear bibs in the visits room. (2.319, see paragraph 3.310)

Attitudes, thinking and behaviour

3.93 The prison's portfolio of interventions should be expanded to include a programme for perpetrators of domestic abuse. (2.321)

Housekeeping points

3.94 The holding rooms should contain magazines and newspapers, and the toilets should be cleaned. (2.27, see paragraph 2.15)

3.95 Graffiti in cells and telephone booths should be removed. (2.45, see paragraph 2.37)

3.96 Diversity and race equality action team minutes should accurately reflect the content of the meeting, and any subsequent ethnic monitoring data investigations. (2.120, see paragraph 2.119)

3.97 Prison Service and local rules should be prominently displayed on all residential units. (2.182, see paragraph 2.181)

3.98 Prisoners in the care and separation unit should be allowed to collect their meals from the servery. (2.215, see paragraph 2.203)

3.99 The induction information booklet should be revised to provide accurate information about visiting times and visits booking procedures. (2.301, see paragraph 2.300)

3.100 The closed visits rooms should be free from graffiti. (2.320, see paragraph 2.310)

Appendix I: Inspection team

Martin Lomas	Team leader
Keith McInnis	Inspector
Andrea Walker	Inspector
Kevin Parkinson	Inspector
Kellie Reeve	Inspector

Specialist inspectors

Michael Bowen	Health services inspector
Stephen Miller	Ofsted inspector
Martyn Rhowbotham	Ofsted inspector

Appendix II: Prison population profile

Please note: the following figures were supplied by the establishment and any errors are the establishment's own.

Status	21 and over	%
Sentenced	379	*99*
Recall	2	*1*
Detainees	1	
Total	382	100

Sentence	21 and over	%
Less than 6 months	1	*0.5*
6 months to less than 12 months	3	*1*
12 months to less than 2 years	49	*13*
2 years to less than 4 years	86	*22.5*
4 years to less than 10 years	143	*37*
10 years and over (not life)	27	*7*
ISPP	35	*9*
Life	38	*10*
Total	382	100

Age	Number of prisoners	%
Under 21 years	6	*2*
21 years to 29 years	153	*40*
30 years to 39 years	135	*35*
40 years to 49 years	67	*17*
50 years to 59 years	18	*5*
60 years to 69 years	3	*1*
Total	382	100

Nationality	21 and over	%
British	379	*99*
Foreign nationals	3	*1*
Total	382	100

Security category	21 and over	%
Cat C	354	*93*
Cat D	28	*7*
Total	382	100

Ethnicity	21 and over	%
White:		
British	295	*77*
Irish	2	*0.5*
Other white	5	*1*
Mixed:		
White and black Caribbean	7	*2*
White and Asian	1	*0.5*
Other mixed	4	*1*

Asian or Asian British:		
Indian	10	*2.5*
Pakistani	17	*4*
Bangladeshi	2	*0.5*
Other Asian	13	*3.5*
Black or Black British:		
Caribbean	8	*2*
African	1	*0.5*
Other black	13	*3.5*
Not stated	4	*1*
Total	382	99.5

Religion	21 and over	%
Church of England	123	*32*
Roman Catholic	92	*24*
Other Christian denominations	14	*4*
Muslim	51	*13*
Sikh	2	*0.5*
Hindu	1	*0.5*
Buddhist	9	*2*
Other	25	*6.5*
No religion	65	*17*
Total	382	*99.5*

Sentenced prisoners only

Length of stay	21 and over	
	Number	%
Less than 1 month	35	*9*
1 month to 3 months	110	*29*
3 months to 6 months	84	*22*
6 months to 1 year	87	*22*
1 year to 2 years	54	*14*
2 years to 4 years	8	*2*
4 years or more	4	*1*
Total	382	99

Main offence	21 and over	%
Violence against the person	112	*29*
Burglary	52	*14*
Robbery	78	*20*
Theft and handling	5	*1*
Fraud and forgery	6	*2*
Drugs offences	78	*21*
Other offences	47	*12*
Civil offences		
Offence not recorded/holding warrant	1	*0.5*
Total	382	99.5