Report on an unannounced short followup inspection of

HMYOI Deerbolt

17 – 20 August 2009by HM Chief Inspector of Prisons

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Introduction

Deerbolt Young Offender Institution holds convicted young adults aged 18–21, mostly from the north and north-east of England. On our last visit, we commended the safe and constructive environment that the establishment was able to provide despite its volatile population. On our return for this unannounced short follow-up inspection, we were pleased to find that many of our recommendations had been achieved and the good progress sustained.

Deerbolt maintained a strong focus on safety and prisoners told us they felt safe. Reception remained unacceptably cramped but early days were largely well managed and suicide prevention arrangements were appropriate. The violence reduction programme was effective and ensured that poor behaviour was tackled and bullying challenged. There was minimal substance misuse and security was generally proportionate. However, the volatility of the population was clearly evidenced by a large number of incidents, increased use of force and a high number of adjudications. We were also concerned by the condition of the special cells, which required urgent refurbishment and better management oversight.

Staff-prisoner relations remained sound and the personal officer scheme had improved. The incentives and earned privileges scheme continued to be implemented inconsistently. Better access to showers was required and some were in poor condition. Prisoners could not wear their own clothes. Race issues were well managed and there was good support for foreign national prisoners. Chaplaincy provision had increased and healthcare remained good.

Time out of cell varied. Too many prisoners were needlessly unemployed and allocation to, and programming of, activities required better management. However, the quality and range of education and the quality of work were both excellent. Accreditation was available in all work areas and there were some well-developed links with local employers. There was a good library and PE was well managed.

Resettlement had improved, with an up-to-date strategy based on a detailed needs assessment. All prisoners received some form of assessment of their individual needs and were allocated an offender supervisor. There was an improved range of services along all the resettlement pathways. The high intensity training programme had been renamed and was being re-launched; it had considerable potential but some staff remained unclear about its role.

Deerbolt remained an essentially safe, respectful and purposeful establishment, with a sound focus on resettlement. It is commendable that many of our previous recommendations had been achieved and that the progress we charted on our previous visit had been sustained. This is all the more impressive given the volatile and challenging nature of many of the young people in the establishment's care.

Anne Owers HM Chief Inspector of Prisons October 2009

Fact page

Task of the establishment

A closed young offender institution holding convicted young male prisoners aged 18-21 drawn mainly from the north and north east.

Area organisation

NOMS North East Area Office

Prison population

467 on 17 August 2009

Certified normal accommodation

513

Last inspection

24-28 April 2006

Brief history

The prison opened in 1973 on the site of a former military camp.

Description of residential units

Purpose-built residential units were constructed during the 1970s and early 1980s. These have been reroofed and renovated over the years. The residential accommodation has been enhanced with the building of G wing and a ready-to-use accommodation unit with integral showers on J wing.

Section 1: Healthy prison assessment

Introduction

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

Safety prisoners, even the most vulnerable, are held safely

Respect prisoners are treated with respect for their human dignity

Purposeful activity prisoners are able, and expected, to engage in activity that

is likely to benefit them

Resettlement prisoners are prepared for their release into the community

and helped to reduce the likelihood of reoffending.

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

...performing well against this healthy prison test.

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

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

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

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

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

...performing poorly against this healthy prison test.

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

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 previous inspection in 2006, we considered that the prison was performing well against this healthy prison test. Of 19 recommendations in this area, 14 had been achieved and five not achieved. We have made 11 further recommendations.
- HP5 Prisoners were handcuffed between the escort van and reception, even though they were in a secure area. A bid for a new reception building had not yet been accepted and the current area was slightly more cramped than previously because one holding room was now used to accommodate a body orifice scanning chair. New arrivals were usually moved quickly to the first night centre. Induction started the day after arrival, but depended on prisoners completing interviews with all departments and varied in length. It covered all areas, but there was no peer involvement and prisoners could be locked up for long periods when unoccupied.
- Prisoners said the prison was safe. The violence reduction programme was very well integrated into all areas and there were some good interventions to tackle poor behaviour. All indicators of violence were investigated. The number of reported violent incidents was high, but these mostly involved low level skirmishes rather than violent assaults. Allegations of bullying were investigated promptly.
- The suicide and self-harm policy had recently been updated and was specific to the needs of young adult prisoners. Incidents of actual self-harm were rare, but 79 assessment, care in custody and teamwork (ACCT) documents had been opened in 2009. The safer custody group carried out regular quality checks of ACCT paperwork. There were only three Listeners and no Listener suites.
- HP8 The security department was efficient and security information report work was up to date. Some work had been carried out to upgrade physical security and there were few finds of illicit substances. Security measures were proportionate, with free flow arrangements in place to get prisoners to work.
- The number of adjudications and minor reports was high, but there were good governance arrangements. However, records did not show that charges were always fully investigated and some adjudications were for relatively minor matters that could have been dealt with less formally. Use of force incidents had increased, but a third related to the application of ratchet handcuffs. De-escalation techniques were used effectively. The special cells had been used 11 times in 2009 and the records did not provide assurance that all use was fully justified or that prisoners were held for the shortest possible time. These cells were unfit for use, with no natural light, and prisoners were routinely put in strip clothing, which was wholly unnecessary.
- HP10 The mandatory drug testing rate had been 0% for the previous six months and the prison had introduced the integrated drug treatment system. Drug workers provided one-to-one and group work to prisoners with a history of substance use problems. Some alcohol work was available, but not enough to meet prisoners' needs.
- HP11 On the basis of this short follow-up inspection, we considered that the prison was still performing well against this healthy prison test.

Respect

- HP12 At our previous inspection in 2006, we considered that the prison was performing reasonably well against this healthy prison test. Of 46 recommendations in this area, 31 had been achieved, four partially achieved, 10 not achieved and one was no longer relevant. We have made 20 further recommendations.
- HP13 Some of the showers were in an unacceptable condition and restrictions on association meant most prisoners could use them only every other day. Prisoners could not wear their own clothes and laundry arrangements were problematic.
- HP14 Prisoners described staff as helpful and respectful and we observed positive interactions, although almost all prisoners were referred to by surname alone. The application of the personal officer scheme had improved and wing files mostly reflected some good awareness of prisoners' issues, with notes made of sentence planning targets.
- HP15 The wider diversity agenda, which included issues about disability and sexuality, was being addressed by a seconded senior manager and work was starting to train prisoner representatives in this area. There was also evidence of some adjustments being made in the cases of individuals with identified disabilities.
- HP16 Ten per cent of the population were from black and minority ethnic backgrounds and those in our focus groups were positive about their experience. The race equality policy and action plan were up to date. Regular race equality meetings were held and included prisoners. Racist incident report forms were investigated promptly and prisoners had confidence in the management of this area.
- HP17 The number of foreign national prisoners was still low. Enough time was allocated to foreign national work and the staff responsible provided a good level of support to foreign national prisoners.
- HP18 The applications system had been improved and every application could now be tracked. Legal services were almost exclusively focused on immigration issues.
- HP19 The chaplaincy provision had increased with a new part-time Christian chaplain and more hours provided by the Muslim chaplain. Muslim prisoners were mostly positive about faith provision, but could not shower before Friday prayers.
- HP20 Three prisoners were on the basic level of the incentives and earned privileges (IEP) scheme and only about 100 were on enhanced. The scheme was still inconsistently applied and prisoners were not always made aware of IEP warnings. Some enhanced prisoners had not benefited from the additional privilege of daily association as the number allowed out on association was capped, although this did not affect any prisoners at the time of the inspection.
- There were regular food surveys and prisoners were generally satisfied with the food, but the range of halal lunches was limited and prisoners had to eat in their cells.
 Prisoners were mostly satisfied with the goods available from the shop, but order mistakes were not resolved immediately and new arrivals could wait a long time for their first order.

- HP22 Health services were still good and prisoners were positive about them. A local GP provided a good level of cover and dental provision had improved significantly, but some treatment rooms and the dental surgery were inadequate. The reception healthcare room was also unfit for purpose. Most medication was allowed inpossession. Mental health services were well developed and there was a range of support available.
- HP23 On the basis of this short follow-up inspection, we considered that the prison was still performing reasonably well against this healthy prison test.

Purposeful activity

- HP24 At our previous inspection in 2006, we considered that the prison was performing reasonably well against this healthy prison test. Of 12 recommendations in this area, five had been achieved, five partially achieved and two not achieved. We have made six further recommendations.
- HP25 The prison reported an average of just over seven hours a day out of cell, but this masked some wide variations and time out of cell was poor for some prisoners. During a roll check, we found almost a third of prisoners locked up. Around 75 prisoners were unemployed and the number locked up was exacerbated by poor attendance at some workshops. Those not on the enhanced regime could expect association only on alternate evenings due to local staffing profiles, set because of perceived safety issues. Prisoners did not get daily exercise, although this was shortly to be introduced alongside a new staff profile.
- Allocation to education and employment was not well managed. Individual prisoners were not case managed and waiting lists for workshops and courses were based on requests rather than need. However, the programming of education, training and offence-focused interventions was haphazard, with areas often competing over the same prisoner. The range of education and workshops was excellent and all areas offered accreditation, with some well developed links with local employment needs and courses focused on employability. Achievement levels in all areas were high. Education accommodation had improved and most areas were well equipped. Teaching was delivered to a high standard.
- HP27 The library was well stocked and the librarian had access to some online resources, including foreign language websites.
- HP28 Physical education was well managed and there were some good links into employment. Access was adequate, but restricted to two sessions a week due to high demand. There was accredited training and a good range of facilities, including outside sport areas and some well-developed community links.
- HP29 On the basis of this short follow-up inspection, we considered that the prison was still performing reasonably well against this healthy prison test.

Resettlement

HP30 At our previous inspection in 2006, we considered that the prison was performing reasonably well against this healthy prison test. Of 29 recommendations in this area,

- 18 had been achieved, six partially achieved, four not achieved and one was no longer relevant. We have made 15 further recommendations.
- HP31 An up-to-date resettlement strategy was underpinned by a detailed needs analysis. This highlighted particular concerns about alcohol misuse and the number of prisoners serving sentences for violence.
- All prisoners were allocated an offender supervisor and a resettlement needs assessment was completed with all prisoners during induction. Offender assessment system (OASys) reviews were mostly up to date, but only those in scope had a sentence planning board. Most areas contributed to sentence plans, but the prison still struggled with getting responses to OASys requests for information. Those serving less than 12 months were given a short-term custody plan, but there was some duplication as resettlement support staff collected the same information. There were some good relationships with external offender managers, although the large catchment area meant many were unable to come to the prison for boards. Telephone conferencing was sometimes used.
- HP33 Discharge boards covering pathway issues were run by the resettlement support team before release to address any outstanding resettlement issues, although many prisoners stayed for short periods.
- Ninety per cent of prisoners were released to settled accommodation and there were some good links to local housing providers. A job club helped with job search and interviews and increased use was made of release on temporary licence for work, community placements and education. Citizens Advice staff helped with debt advice, but the prison struggled to set up bank accounts. Budgeting courses were run, but only for prisoners on F wing who were eligible for extra education through the high intensity training (HIT) programme.
- HP35 Work with mental health services was well developed. Discharge clinics ensured that prisoners were registered with a GP on release. Drugs workers had good links with community drug teams and support included some post-release mentoring and meeting prisoners at the gate.
- HP36 The HIT programme was now called Matrix. It was in the process of being relaunched but some staff were unclear about its role or purpose. Other interventions were mainly the thinking skills programme and a substance use programme (P-ASRO). Some non-accredited courses, such as managing emotions, were run based on the needs analysis, but there was nothing specific to address violent offending. The small number of sex offenders were identified by offender supervisors at initial assessment and encouraged to complete courses at other establishments.
- HP37 There was now a pro-active visitors' centre, but delays in processing visitors meant not all visits started on time. The system for imposing, and facilities for, closed visits had improved, although prisoners and visitors still had to communicate using a telephone rather than an intercom. Fathers' and family visits were not held regularly due to staffing issues and, apart from fathers inside, no relationship courses were run.
- HP38 On the basis of this short follow-up inspection, we considered that the prison was still performing reasonably well 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

To the Chief Executive of NOMS

2.1 There should be a new, purpose designed, reception facility. (HP45)

Not achieved. The reception building was unchanged. A bid to move and refurbish the area had been submitted, but not yet accepted. The current area was small with a holding room on either side, one to use before and one after prisoners were processed. Two further holding rooms were now used for a body orifice security scanner (BOSS) chair and new computer terminals. An interview room was available for healthcare staff to see all new arrivals. On average, there were about 18 new arrivals each week, although 90 had been received in the first two weeks of August following the re-opening of one wing. The reception area was usually adequate for small numbers, but was sometimes under pressure.

We repeat the recommendation.

A visitors' centre should be provided. (HP46)

Achieved. There was now a reasonably spacious and welcoming visitors' centre run by the north eastern prison aftercare society (NEPACS). It was open on Tuesday, Thursday and weekend afternoons, when visits took place. Visitors could get drinks and snacks as well as information and advice about provision at Deerbolt and support in the wider community.

Main recommendations

To the Governor

2.3 All prisoners, including those on basic regime, should have daily access to time in the open air, association, showers and telephones. (HP44)

Not achieved. Time out of cell for some prisoners was poor for a training prison, with the prison reporting an average of just 7.3 hours a day against our expectation of 10. The main reason was that only the 100 or so prisoners on the enhanced regime had daily association, while those on standard had association every other day and those on basic twice a week. There were enough activity places on paper, but our roll check found 30% locked up, including unemployed prisoners, and those who had attended gym and healthcare who did not always return to work but returned to the wing. Staff and managers said this figure was not unusually high. With no built in domestic period for those not getting daily association, access to showers and telephones was problematic and a significant minority could be locked up for 23 hours a day on the days there was no association. Exercise yards had been built, but were not used because alarm bells and cameras had yet to be installed.

We repeat the recommendation.

2.4 Strip-searching of prisoners should take place only when indicated by a risk assessment. (HP47)

Achieved. Prisoners admitted into the segregation unit were not routinely strip searched unless admitted into special accommodation (see section on discipline).

2.5 The new governor should seek to embed Deerbolt's core resettlement function across all departments. There should be training and briefings to explain this to all staff. (HP48) Achieved. The resettlement policy group had focused on the resettlement pathways and individual managers were responsible for the different pathways. Briefing information had been

2.2

given to staff to raise the profile of resettlement needs, and wing managers were required to ensure that staff were aware of prisoners' resettlement needs and that this was reflected into sentence planning.

2.6 Activity spaces should be fully used. (HP49)

Not achieved. Not enough emphasis was put on fully using the existing activity places. In workshops, only about 67% of prisoners allocated to work actually attended (see section on work). Changes to the allocation process had resulted in fewer clashes between education and the gym, but sequencing of interventions still frequently disrupted learning and skills activities as prisoners were regularly removed from courses to undertake other interventions. **We repeat the recommendation.**

Recommendation

To the Chief Executive of NOMS

Public protection

2.7 Field probation offices should be requested to inform the establishment well in advance of multi-agency public protection panel meetings in the community so that staff can attend or submit a report. (8.46)

Achieved. An experienced probation officer was responsible for attending multi-agency public protection meetings and the dates of these were provided with enough notice. The probation officer attended in person where possible and otherwise submitted a report to the board.

Recommendation

To the Director General

Courts, escorts and transfers

2.8 Prisoners should be given at least 24 hours notice of planned transfer to give them time to inform family and legal advisors. (1.5)

Achieved. Most prisoners we spoke to said they had been given some days notice of their transfer to Deerbolt unless this had not been possible for security reasons.

Recommendations

To the Governor

First days in custody

2.9 Arriving prisoners should receive a free telephone call to let family know of their transfer. (1.22)

Achieved. Prisoners could shower and make a telephone call once on the first night and induction unit on I wing. Most prisoners arrived before lunch or in the early afternoon so staff could organise these relatively easily. All the prisoners we spoke to had been offered a short free telephone call.

2.10 Prisoners on the induction wing should have a period of association every day. (1.23) Not achieved. Prisoners on the induction wing were managed in much the same way as on other wings, which meant association was provided every other day during the week and on either Saturday or Sunday.

We repeat the recommendation.

- 2.11 Televisions should be installed in the reception holding rooms. (1.24)
 Achieved. Both reception holding rooms contained a television and DVD player.
- 2.12 The strip-search area in reception should be modified to ensure privacy. (1.25)

 Achieved. The windows looking in to the strip-search area were part-screened and a curtain had been put up. Staff searched prisoners respectfully and treated them appropriately.

Additional information

- 2.13 Reception was closed at lunch and any van arriving after midday had to wait in an enclosed area until the unit reopened. Prisoners kept waiting were usually offered a drink, but only at the discretion of staff on duty. Reception was a short walk away and prisoners were handcuffed between the vehicle and the entrance despite it being a sterile area.
- 2.14 New arrivals were usually quickly moved to the first night centre. There were no dedicated first night cells, but new arrivals were identified on a list produced by day staff. Only those about whom there were specific concerns were seen by night staff. An induction officer interviewed all new arrivals, completed a cell-sharing risk assessment, gave basic information and handed out a detailed induction booklet that covered prison rules and processes. Induction staff also gave a brief presentation each evening that reiterated most of the information in the booklet, but this was quite bland and did not include any visual aids. No peer supporters or Insiders were based on the wing.
- 2.15 Most prisoners had a more detailed interview with an induction officer the next day, although some had to wait two or three days. There was no published induction programme or specific timescale for prisoners to be seen by staff from a range of departments and representatives of the Independent Monitoring Board. Some prisoners completed the programme within a couple of days, while for others it was spread over a fortnight. All prisoners were supposed to be seen by learning and skills staff, but this rarely happened and assessments were often based on questionnaires they completed just before moving wings. Prisoners who were not being interviewed or on the two-day gym induction spent most of their time locked up. They could not work or attend education. Many prisoners complained about lack of activity on the wing. At 11am on one day, we found 46 prisoners locked up on I wing, with only the six cleaners out of their cells.

- 2.16 Prisoners should not have to wait on escort vans when reception is closed for lunch.
- 2.17 Unless there are specific security concerns, prisoners should not be routinely handcuffed between the van and the entrance to reception.
- 2.18 Peer advisers/Insiders should be based on the induction unit.
- 2.19 The induction presentation given on the first evening should be more interactive and include visual aids.
- 2.20 The induction programme should be clearly defined and timetabled and kept as brief as practical.
- 2.21 All prisoners should be interviewed by learning and skills staff before leaving the induction wing.

2.22 Prisoners not involved in a timetabled induction activity should be kept productively occupied.

Residential units

2.23 All showers should be refurbished to the same standard. (2.8)

Not achieved. Showers were cleaned regularly, but the fabric and condition of several were unacceptable. None of the showers on A, B and E wings had their door left on and floor and wall tiles were cracked or missing. Poor ventilation meant there was a strong smell of damp in the showers on A wing and most air vents were thick with dust and dirt. **We repeat the recommendation.**

2.24 All wings should be fitted with a laundry facility. (2.9)

Not achieved. F wing was still the only wing with a laundry. All enhanced prisoners could use the F wing laundry, but those on basic and standard regimes had to wash their underwear and socks in their sinks. The main prison laundry had been closed for refurbishment for some time, but was due to reopen shortly.

Further recommendation

- 2.25 All prisoners should have at least weekly access to a laundry facility to wash personal clothing.
- 2.26 All prisoners on standard and enhanced regimes should be allowed to wear their own clothes. (2.10)

Not achieved. The only items of personal clothing allowed were underwear and socks. Managers said the lack of laundry facilities made it unfeasible to allow other personal clothing, but that they planned to review the situation when the main laundry reopened. **We repeat the recommendation.**

2.27 The policy about own clothes should be clearly published in all residential areas and applied consistently across the establishment. (2.11)

Achieved. Notice boards clearly communicated that only underwear and socks could be brought in.

Staff-prisoner relationships

2.28 Staff should not swear or use other inappropriate language when speaking to prisoners. (2.18)

Achieved. The exchanges we heard between staff and prisoners were mostly respectful and there was no evidence that officers used inappropriate language when speaking to prisoners.

Additional information

2.29 Relationships between staff and prisoners were generally good and staff were usually confident and respectful towards prisoners, although most addressed prisoners using surnames alone. Most staff were aware of the importance of setting an example in how they carried out their duties and we saw them engaging in a relaxed but controlled way when prisoners were unlocked. However, not all officers encouraged prisoners to attend activities. Some staff did not always ensure that prisoners were unlocked in time to attend education or work, and prisoners arriving back on the wing after gym sessions or short appointments

elsewhere were not always encouraged to return to their scheduled activity (see section on main recommendations).

Further recommendations

- 2.30 Staff should address prisoners by their title or preferred names.
- 2.31 Prisoners should be encouraged to attend scheduled activities.

Personal officers

2.32 The principles and practices of the personal officer scheme used on F wing should be introduced to the rest of the prison. (2.23)

Achieved. The personal officer scheme had been re-launched across the prison in December 2008. A comprehensive published policy document detailed the principles of the scheme, operational instructions and required management arrangements. It also set out the responsibilities of residential officers and supplied written guidance. There had since been improvements in the operation of the scheme. All prisoners were allocated a personal officer within 24 hours of arriving on their residential unit and levels of continuing contact were good. The diary of weekly contact kept by personal officers in wing files showed they were actively involved in supporting prisoners to achieve sentence plan objectives. Personal officer entries in wing files were better than we generally see and mostly demonstrated an awareness of prisoners' personal circumstances. Most prisoners we spoke to said their personal officer was responsive and easy to contact.

Bullying/violence reduction

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

Additional information

- 2.33 The structures and protocols to deal with bullying and overall levels of violence continued to be given a high priority. An overarching violence reduction strategy had been put in place based on analysis of the pattern of violence and a survey of staff and prisoners. Its day-to-day operation was managed by a competent violence reduction/suicide prevention coordinator working within a dedicated safer custody team. These staff met monthly as part of a safer custody committee, which also included oversight of the suicide prevention policy.
- 2.34 The safer custody team had created a database of violent incidents covering their nature, location and the names of perpetrators based on information from wing observation books, formal prisoner complaints and security information reports. This was properly analysed and presented to the safer custody committee to inform necessary changes to the violence reduction strategy. At an average of 18 a month, the number of recorded violent incidents was high, but many involved minor fights or threats of violence. Indicators of violence such as unexplained injuries and suspected bullying incidents were properly interrogated. Prisoners said the prison was safe.
- 2.35 Allegations of bullying were treated consistently and investigated promptly. Investigations were good quality and outcomes were recorded and consistently acted on, usually by the violence reduction coordinator or safer custody manager. Officers were actively engaged in the day-to-day management of alleged bullies. Formal interventions had recently been put in place to help

deal with the number of violent incidents connected to bullying. The physical education department continued to deliver short courses on the consequences of bullying behaviour.

Self-harm and suicide

2.36 Listener suites should be provided. (3.17)

Not achieved. Prisoners could speak with a Listener at any time, but this had to take place in cells as there were no crisis suites or dedicated rooms. There were only three Listeners in post so there was not one based on every wing.

We repeat the recommendation.

Further recommendation

- 2.37 The number of trained Listeners should be increased.
- 2.38 Prisoners at risk of self-harm and moved into special/safe healthcare cells should not be made to wear strip-clothing. (3.18)

Achieved. Special accommodation was not used as an intervention to prevent self-harm and there was no evidence that prisoners at risk of self-harm were made to wear strip-clothing.

Additional information

- 2.39 A comprehensive published suicide prevention strategy set out procedures to minimise the risk of self-harm among prisoners. The policy document was specific to the identified needs of young adult prisoners and was understood by them and staff. The safer custody committee monitored the implementation of the strategy at monthly meetings. Minutes showed that individual cases were appropriately discussed and that prisoners' specific needs were met consistently. The committee also used historical information provided by the suicide prevention coordinator to help identify trends and patterns of behaviour in terms of type, timing and peripheral circumstances of individual incidents. This was used to develop the strategy.
- 2.40 Detailed support plans prepared through consultation with the prisoner identified specific needs and apportioned responsibilities to a nominated key worker. The progress of plans was reviewed at predetermined times in agreement with the prisoner.
- 2.41 Incidents of actual self-harm were rare, but 79 assessment, care in custody and teamwork (ACCT) documents had been opened to date in 2009. Five were currently open. Regular management checks of the quality of entries were made by the safer custody manager and residential senior officers. Entries were good quality, with most demonstrating an in-depth understanding of prisoners' circumstances and feelings. The mental health in-reach team was also regularly involved in dealing with particularly disturbed prisoners.

Race relations

2.42 Ethnic monitoring should be interrogated in detail during race relations meetings and the possible reasons for 'warning' indicators should always be considered. (3.25)

Achieved. Minutes from the monthly race equality action team (REAT) meeting showed that 'warning' indicators of relatively higher or lower representation by any ethnic group in aspects of Deerbolt's regime were discussed and appropriate follow-up action points agreed. Ten per

cent of prisoners were from black and minority ethnic backgrounds and those in our focus groups were positive about their experience at Deerbolt.

2.43 Staff and prisoner representatives should be given clear job descriptions, and prisoner representatives should be able to meet together. (3.26)

Achieved. There were 10 prisoner race equality representatives, with each wing having at least one. There was also a staff representative on each wing. Prisoner and staff representatives had a job description specific to their role. Prisoner representatives met regularly at meetings organised by the REAT coordinator whenever requested by the prisoners. They had a high profile on their units, with their photographs and an explanation of their role clearly displayed on notice boards. Six had received training normally provided only to staff, with the remaining four more recently recruited representatives scheduled to attend the training shortly. All those we spoke to were enthusiastic and positive about the support and importance afforded to their role by staff of all grades.

2.44 Racist graffiti should be challenged by staff and training should provide staff with a thorough understanding of race relations responsibilities. (3.27)

Achieved. A graffiti policy included guidance for staff in dealing with racist graffiti. Cells were regularly checked for all types of graffiti during daily fabric checks. All the staff we spoke to said they would immediately challenge any graffiti found. There was no evidence of such graffiti. REAT meeting minutes illustrated one occasion when racist graffiti had been discovered, appropriately investigated and challenged as well as the submission of racist incident paperwork.

Foreign nationals

2.45 The foreign national policy should be developed, building on the current individualised model of work, recognising that the possibility of rising numbers will require more robust systems and procedures. (3.37)

Achieved. The number of foreign national prisoners remained low, with 12 currently held. Foreign national work was carried out by segregation unit staff, who were allocated daily time to carry out their duties. These staff were also the main legal officers for the prison and the key focus of their work was on immigration matters. They provided good support to foreign national prisoners, routinely meeting with each one every month and visiting them on request. The foreign national policy detailed this work, as well as language, family contact and potential immigration issues.

2.46 Prisoners should be encouraged to use the multilingual computer touch-screens, which should contain information in a wider range of languages. (3.38)

Partially achieved. All prisoners were encouraged to use the four available multilingual touch screens, but the range of languages used was unchanged.

Further recommendation

2.47 The information on the multilingual computer touch screens should be available in a wider range of relevant languages.

Family and friends

2.48 Prisoners should be allowed to have stamped addressed envelopes sent in by their families and friends. (3.52)

Not achieved. Stamped addressed envelopes could not be sent in by families and friends, but stationery and stamps were available to buy from the prison shop. We repeat the recommendation.

2.49 Arrangements should be made to transport visitors to the prison from the nearest main line rail and bus terminals. (3.53)

Partially achieved. There was no prison-funded transport from the railway or bus stations. The prison had concluded there was insufficient demand as few families actually used the public bus service from the nearest railway station at Darlington. However, this evaluation had been made almost two years previously and, as no surveys were undertaken, it was not possible to establish how easy visitors found it to get to Deerbolt. The visitors we spoke to used private transport.

Further recommendation

- 2.50 Visitors should be consulted about the level of need for prison-funded transport from the railway or bus stations.
- 2.51 The practice of allowing only closed visits to a whole party of visitors following a single drug dog indication on one member should be discontinued. (3.54)

 Achieved. If a drug dog indicated against one person in a party, the rest of the group was allowed to continue the visit as normal.
- 2.52 Closed visits should be imposed only when there is a significant risk justified by security intelligence and not automatically following single incidents. (3.55)
 Achieved. The published closed visits policy required two separate pieces of information about drug use or related activity before closed visits were imposed. Exceptions to this included smuggling drugs into the prison or definitive evidence of inappropriate activity. Three prisoners were on closed visits.
- 2.53 The closed visits area should be clean and free from graffiti and arrangements made to ensure privacy. (3.56)

Partially achieved. The closed visits area had been refurbished and was kept reasonably clean. Partitions afforded some privacy, but there was no intercom system and prisoners with more than one visitor at a time, which was usually the case, had to speak in turn using the telephone receiver.

Further recommendation

2.54 An intercom should be installed in the closed visits area to enable more than one visitor at a time to talk.

Additional information

- 2.55 The visits area was bright and airy and could accommodate up to 39 prisoners at any one time. The children's play area was now staffed by workers from NEPACS.
- 2.56 Prisoners were usually brought down to the visits area just before the start of visits. The prison had introduced a staggered visiting system where visitors booking a visit were allocated a number indicating when they would be taken over. Only four visitors were processed at a time,

- so it was not unusual for those going in last to get only 45 minutes instead of two hours. As the booking line was open only during office hours, those unable to call during the day could be adversely affected because they were less likely to be able to book early for a visit.
- 2.57 Wider provision for children and families was underdeveloped. Six fathers' visits and two family visits had been scheduled during the previous year, but only two and one respectively had actually taken place, mainly due to staff shortages. The education department delivered the three-week fathers inside programme two or three time a year and this was highly valued by prisoners. However, there was no follow-up work to this programme and no other parenting courses were provided. Apart from some informal advice and guidance provided by the chaplaincy, no relationship courses or interventions were available.

Further recommendations

- 2.58 Visitors should be able to have the full visits period.
- 2.59 The visits booking office should be open longer hours and alternative booking methods such as email should be explored.
- **2.60** Fathers' and family visits should be provided regularly.
- 2.61 The range of parenting and relationship provision should be extended.

Applications and complaints

2.62 All stages of applications including the outcome should be recorded and the process should be tracked and monitored from start to finish. (3.63)

Achieved. Each application was given a unique number and could be tracked as required.

Legal rights

2.63 Legal services officers should have some time to meet to review and discuss the problems they are dealing with and new issues emerging. (3.69)

Partially achieved. Time for legal services was allocated exclusively to staff responsible for dealing with foreign national prisoners. As a result, any legal issues that could be dealt with almost wholly related to immigration matters (see section on foreign nationals). Legal advice was not advertised on residential areas or in other relevant places like the library, and prisoners had a limited awareness of who could provide this service.

- 2.64 The services provided by legal officers should be widely advertised and not restricted to foreign national prisoners.
- 2.65 The librarian should have direct access to the intranet. (3.7)

 Achieved. The librarian had good access to internet materials and could download information, including from foreign national websites, when required.

Healthcare

- 2.66 To reduce the dental waiting list, the provision of routine treatment for patients no longer in pain should be delayed. Patients on the list should be brought in as soon as possible and their needs assessed and prioritised by the dentist. A separate waiting list for treatment should then be set up, with needs prioritised. Once the waiting list has been cleared, the required number of sessions should be reviewed by the primary care trust (PCT) dental lead and healthcare managers. (4.45)
 - Achieved. Dental provision had improved significantly. There were three dental sessions a week. Initial requests for treatment were dealt with by the administrative team and the average wait for initial assessment was up to nine weeks. Once assessed, all future appointments were arranged by the dentist. Patients complaining of severe dental pain were assessed by senior nurses and, where appropriate, brought forward on the waiting list. Out-of-hours treatment was through the local dental access service.
- 2.67 Prisoners should be given information on how to access primary care services on their release and support in accessing the services if required. (4.46)

 Achieved. All prisoners were seen in the discharge clinic the day before release and given a discharge pack with information on how to access health services in the community and NHS Direct. They were also given a letter for their GP outlining their care at the prison and those who did not have a GP were advised how to access one. On the day of release, they were seen in reception by a nurse and, if appropriate, given up to seven days' medication.
- 2.68 The dental surgery layout should be redesigned to include two sinks, additional wall cupboards, a desk and paper storage area and sufficient electric sockets. The surgery walls should be finished in a smooth, easily washable material. (4.47)
 Not achieved. The dental surgery was unchanged and remained poorly configured. The demarcation of clean and dirty areas was blurred and there continued to be a risk of cross-infection. The sinks were inappropriate and had normal rather than elbow taps. Other dental equipment was held in the room next to the surgery, but staff could access this room only from the main corridor. The surgery had no air conditioning and was very oppressive in warm temperatures. We were told this recommendation was being addressed by the prison and the PCT, although there was no evidence that work was due to be undertaken in the near future, and that a capital bid to refurbish the dental surgery was planned for the 2010-11 financial year

- 2.69 The dental surgery should be refurbished as soon as possible to ensure it meets NHS standards and complies with dental regulations. The dentist and the healthcare manager should be involved with its configuration. Air conditioning should be provided to ensure acceptable conditions for practitioners and patients. The adjacent room, currently housing the compressor, should be accessible directly from the surgery.
- 2.70 All wing treatment rooms should have running water and suitable waste disposal facilities. Stable doors should be fitted to improve security. (4.48)

 Not achieved. The nine wing-based treatment rooms were all of differing clinical standards. The room on I wing, for example, had been refurbished and included a telemedicine facility, but the sink taps were incorrect and there was no soap or towel dispenser. The J wing room was unfit for purpose and healthcare staff had clearly not been consulted about its design. We were told that, in fact, there had been no treatment area when the wing opened so a toilet area

had been hastily converted. The room was small and very narrow. The hole left in the flooring by the toilet had simply been covered over by a sheet of wood and the joints did not appear to be sealed. The room was not suitable or safe for the administration of medicines or for prisoners to have a confidential discussion with health staff. Few other treatment rooms had proper storage or writing facilities, and shelving and cupboard space was very limited. All rooms were superficially clean, but there was no regular cleaning schedule and cleaners who were jointly funded by the PCT and the prison were often diverted to clean other areas of the prison. Stable doors had not been fitted.

Further recommendations

- 2.71 A fully documented infection control audit should be undertaken by the primary care trust to ensure all healthcare facilities meet NHS standards. The audit recommendations should be fully implemented.
- 2.72 Cleaners should be not be diverted to clean other areas of the prison instead of healthcare.
- 2.73 The J wing treatment room should be decommissioned as a matter of urgency and a more suitable and appropriately equipped location identified.
- 2.74 All treatment rooms should be equipped with stable doors to improve safety for staff administering medication and to ensure confidentiality for prisoners receiving medication.
- 2.75 Appropriate hand washing facilities should be installed as a matter of urgency to ensure infection control guidelines are met and the risk of cross-infection significantly reduced.
- 2.76 The reception room used by healthcare staff should have access to toilet facilities for prisoners and clinical equipment so that a full assessment can be completed. (4.49)

 Not achieved. Toilet facilities were accessed through the reception area itself. The healthcare room was unfit for purpose and was not appropriately equipped to undertake initial health assessments. There were no hand washing facilities and the floor was carpeted. All prison staff had access to the room and a fax machine used by reception staff was located there.

- 2.77 The reception healthcare room should be used only by healthcare staff and the fax machine relocated. Hand washing facilities should be provided as well as appropriate clinical equipment to allow initial health assessments to be conducted safely and appropriately.
- 2.78 EMIS should be available for use by all healthcare professionals. (4.50)

 Achieved. An electronic medicine management system was in place and working successfully in all areas of healthcare. There were terminals in all clinical areas. A link had been made with the provider GP practice to allow GPs remote access to prisoners' clinical records from their practices, which improved their ability to provide advice on the management of prisoners when they were not in the prison.
- 2.79 Administrative staff should be employed to free nursing staff for clinical care. (4.51)
 Achieved. Clinicians were supported by a well-staffed administrative team. The generic health team included 2.5 whole time equivalent administrators and the mental health team had a dedicated full-time administrator. The health team administrators handled all internal and external appointments. Systems were well organised and managed, with clear audit trails. All

internal waiting lists were within acceptable limits. External appointments were also very well managed and administrative staff had built up excellent relationships with external health providers. Prisoners benefited from the local hospital rule that all referrals had to be seen within five weeks. The system worked well and very few NHS appointments were cancelled for staffing reasons. Any that were cancelled were rearranged quickly. Anecdotal evidence was that only five appointments had been rearranged to date in 2009.

2.80 All staff should avail themselves of the opportunities for clinical supervision and reflective practice. (4.52)

Achieved. All staff were supported and encouraged to access clinical supervision either internally or externally. Some remained reticent about supervision, but all participated in informal peer supervision through lunchtime meetings. Professional training was well supported and several nurses had additional qualifications, including in the management of patients with asthma, diabetes and epilepsy. Staff were encouraged to extend professional knowledge through various avenues. All staff completed PC mandatory training.

2.81 The medical out-of-hours service should be reviewed to ensure that it meets patient need and is value for money. (4.53)

Achieved. The current model had not changed, but fully met patients' needs. Out-of-hours provision was through the PCT emergency nurse practitioners network. When called, the response was satisfactory, but we were told that most patients were sent out to hospital for assessment.

2.82 The need for all new prisoners and those leaving the establishment to be seen by a GP should be reviewed, and nurses' skills and competencies used more appropriately. (4.54)

Achieved. GPs no longer saw all new receptions or discharges unless there was a clinical need. New arrivals were seen in reception by nursing staff who carried out an initial health screening. Any prisoner showing signs of physical or mental health needs was referred to the relevant health professional. A more comprehensive second health screening took place within 72 hours and again onward referrals were made where necessary. Prisoners were seen in reception on the day of release (see paragraph 2.67).

2.83 The healthcare application system should be confidential. (4.55)

Achieved. Administrative staff operated a robust application system that ensured confidentiality for prisoners. Application forms were available on all wings with an envelope attached addressed 'medical in confidence' to the healthcare department. The form included pictorial diagrams of various health services and was sent through the internal post, with appointment times sent back to prisoners the same way. Only the prisoner's name and attendance date at healthcare were documented and the free flow system allowed prisoners to attend healthcare without escort. Very few prisoners failed to attend appointments and any who did were followed up.

2.84 Nursing staff should use formal triage algorithms to ensure consistency of advice and treatment provided. (4.56)

Achieved. Formal documented triage algorithms had been introduced and all nurses had been trained in their use. Algorithms were completed electronically. A senior nurse held a daily triage clinic and the system worked well. If onward referral to the GP was indicated, the patient was seen within 48 hours.

2.85 The wait for a GP appointment should be in line with national guidance. (4.57)

Achieved. GP waiting times were well within national guidelines and prisoners were seen within 48 hours of an application being received. A local GP practice provided medical support

and a GP attended every weekday for about two hours. The same GP service provided telephone support on Saturday mornings. Several GPs had a particular interest in medical specialities, including substance use and minor operations.

2.86 The unnecessary transcription of prescriptions should cease. All prescriptions should be dated in accordance with the requirements of the Medicines Act 1968 and the original prescription should be faxed through to the pharmacy supplier. (4.58)

Achieved. GPs wrote original prescriptions, which were faxed through to the pharmacy.

2.87 Prisoners should be able to consult a pharmacist. (4.59)

Achieved. There was no pharmacist on site, but patients could speak to the provider pharmacist by telephone on request. An assistant technical officer was due to start imminently and would be able to provide limited on-site support.

2.88 The pharmacy policy document should be updated. (4.60)

Achieved. The local medicines protocol had been reviewed in June 2009 and was patient focused. It contained protocols on the management of pharmacy items, including controlled drugs, their storage and administration. A documented in-possession risk assessment was incorporated in the document.

- 2.89 A medicines and therapeutics committee should be formed and meet regularly. It should include the pharmacist, GP, healthcare manager and a PCT representative. (4.61) Achieved. A drugs and therapeutics committee met bi-monthly. Membership included the healthcare manager, pharmacist and a GP.
- 2.90 The in-possession policy document should be updated. It should include a risk assessment tool and the appropriate use of in-possession medication should be encouraged. (4.62)

Achieved. The in-possession policy was contained in the local medicines policy and documented the guidelines to be followed when considering prisoners for in-possession medication. The risk assessment criteria were contained in the policy. Following recommendations from 'A Pharmacy Service for Prisoners', the default position for medicines was in-possession. Medicines were prescribed using the local formulary risk assessment tool of individual drugs. In-possession medicines were given for up to 28 days and were subject to review at any time.

2.91 The use of patient group directions should be investigated and implemented where appropriate. (4.63)

Achieved. There was a comprehensive list of patient group directives (PGDs) covering the administration of drugs, including paracetamol, ibuprofen and certain vaccinations. PGDs were used frequently by nurses during medicine rounds. There was 24-hour nurse cover so nurses could administer medicines day and night. A medicine round was carried out at 10pm for those on night-time medicines.

2.92 The special sick policy document should be amended to reflect accurately the current practice in the prison. (4.64)

Achieved. The special sick policy document reflected practice. The normal procedure was for prisoners to report sick to nurses at wing medication rounds. Prisoners who became unwell at other times could report sick to their wing officers, who would arrange for them to attend healthcare.

2.93 Each patient should have only one medication and administration chart, unless absolutely necessary and highlighted. (4.65)

Not achieved. Some patients had two prescription and administration charts. Those we saw had the same medication on both charts, but one prescription had been rewritten because either the administration boxes had all been used or there was a change in the dosage of the prescribed medicine. There was no evidence of two identical medicines being prescribed at the same time.

We repeat the recommendation.

2.94 All medicines administered as special sick should be accurately recorded on the medicine and administration chart. (4.66)

Achieved. All prescription and administration charts were reviewed. All medicines administered through the special sick protocol were accurately recorded on individual prescription and administration charts.

2.95 All pre-packs should be dual-labelled. When the pre-pack is dispensed against a prescription, one label should be removed and carefully attached to the prescription form, which should then be faxed to the pharmacy supplier. (4.67)

Achieved. All pre-packs were dual-labelled by the pharmacy. When dispensed, one label was removed and attached to the prescription form and faxed to the supplying pharmacy.

Education and library provision

2.96 The development and use of individual learning plans should be improved. (5.21)

Partially achieved. The individual learning plans had improved and had recently been introduced into the non-OLASS provision. The prison had been helped and supported in this by the education provider, including some support with staff development. Target setting took place, but some targets were not sufficiently clear and prisoner personal development was not identified and recorded. Quality assurance systems in education were comprehensive and monitored the progress made.

Further recommendation

- 2.97 The use of individual learning plans should be improved.
- 2.98 Computer facilities should be made more accessible for prisoners not following ICT programmes. (5.22)

Achieved. Computer equipment had been upgraded and more machines were available to learners. Interactive whiteboards had been introduced in most classrooms and staff trained in their use. Laptops had recently been introduced for use by learners, but had been removed to enable a modification to the equipment to meet security concerns.

- 2.99 The modified computer laptops should be introduced without delay.
- 2.100 Improved management information systems should be implemented. (5.23)

 Partially achieved. A new management information system had been introduced, and data available provided detailed information on all aspects of learners' achievement. However, this system had been inoperative for three months, during which the level of information had been poor. Data on achievement of qualifications were used well to inform curriculum planning. In

the most recent self assessment report dated December 2008, data were used to inform and support judgements on strengths and areas for improvement.

Further recommendation

2.101 The management information system for assessing data should be restored as a priority.

Work

2.102 Level 2 courses should be introduced where appropriate to provide progression routes from the existing courses. (5.35)

Achieved. The average length of stay for prisoners at Deerbolt had reduced and a needs analysis carried out in April 2009 indicated that the curriculum should be developed to provide a short course that prisoners could achieve in the shorter time. Where appropriate, courses had been introduced to provide opportunities for learners to progress to higher levels. In the industrial cleaning course, qualifications were available up to level 3, and a car valet course had been introduced. Level 2 qualifications had been introduced in waste management and performing arts. Progression opportunities had also been developed for learners to develop as peer mentors, but this was not formally recognised with an accredited qualification. The prison and the education contractor had worked well to modify and adapt the curriculum to meet prisoners' needs. There was a strong focus on employability.

2.103 The new opportunities for prisoners in work activities to gain qualifications should be maximised. (5.36)

Partially achieved. Opportunities for prisoners to gain qualifications had increased, with most work activities now having an accredited qualification attached. However, attendance at workshops was low (see section on main recommendations) and regime timetabling frequently prevented prisoners from achieving the qualification or completing the course. The standard of work was good. Workshop accommodation replicated commercial standards

Further recommendation

2.104 A policy should be put in place and rigorously enforced to improve attendance at workshops.

2.105 Better coordinated regime timetables should be introduced to reduce absence from work and education. (5.37)

Not achieved. Learning and skills were not well coordinated with other interventions taking place and there was no common understanding between departments to maximise the effect of the provision. Information, advice and guidance had little impact on ensuring that prisoners accessed the correct courses. There were waiting lists for most courses in education and vocational training, but allocation was based on spaces rather than identified need. Some prisoners had little opportunity to access a specific course before leaving the prison. Allocation to activities was not sufficiently clear and learning and skills departments had little specific input.

Further recommendation

2.106 A system should be developed and implemented that better coordinates the interventions taking place in the prison.

Physical education and health promotion

- 2.107 Learning support for key skills and literacy and numeracy should be improved. (5.47) Partially achieved. The education contractor had worked with gym staff to develop skills and procedures in recognising and assessing opportunities to link activities to key skills. Literacy and numeracy support was still not available within the gym. Staff had a better understanding of how they could support learners to develop their key skills. Training had been provided for gym staff on the introduction of individual learning plans and the results of literacy and numeracy assessments were communicated to staff.
 We repeat the recommendation.
- 2.108 Health and safety measures in the weights/gym room should be improved. (5.48)

 Achieved. The free weights area was less cluttered following the introduction of multi-purpose equipment. More appropriate cushion flooring had also been introduced.
- 2.109 Attendance levels at sessions should be improved and those who do not attend the gym should be actively encouraged to do so. (5.49)
 Partially achieved. Attendance at the gym had improved and designated gym sessions were now available, but this had meant the number of gym sessions per prisoner had reduced to two a week. Gym records indicated that over 80% of prisoners used the gym each week.

Further recommendation

2.110 The number of gym sessions should be increased.

Faith and religious activity

2.111 The poor access to ministers and lack of respect for religious beliefs reported by prisoners should be investigated and resolved. Resources to chaplaincy services should be increased if the outcome of such an investigation suggests that this is required. (5.56)

Achieved. A part-time Christian chaplain had been recruited with the intention of raising the profile of the chaplaincy team and ensuring that all new prisoners were seen within 24 hours of arrival. The role of the Muslim chaplain had also been expanded, with an increase in working hours from six to 20. Prisoners in groups, particularly Muslim prisoners, were positive about their experience of faith and religious activity (see also additional information).

2.112 The expansion of structured study groups should be implemented as planned. (5.57)

Achieved. An additional Bible study class was now run on Tuesday afternoons and a Muslim Our'an study group on Thursday afternoons.

Additional information

2.113 We spoke to most of the 24 Muslim prisoners. While they were generally positive about their ability to practise their faith in a respectful and supportive environment, all said they were not given access to showers before Friday prayers. This was confirmed by staff and managers.

Further recommendation

2.114 All Muslim prisoners should be able to use the showers before Friday prayers.

Discipline

2.115 There should be closer management oversight of the minor report system to ensure that matters are dealt with within prescribed timescales. (6.29)

Achieved. Monitoring of the minor report system had been included in the quarterly adjudication standardisation meeting chaired by the deputy governor. Minor reports were dealt with within prescribed timescales by trained senior officers (see also additional information).

2.116 Prisoners should not be banned from physical education (PE) without going through the safeguards of a formal system. (6.30)

Achieved. Prisoners were no longer banned from PE without formal process.

2.117 Use of force documentation should be certified by an appropriate manager who was not involved in the actual incident. (6.31)

Achieved. All use of force documentation was properly authorised and certified.

2.118 The special cells in the segregation unit should be provided with adequate levels of natural light or removed from use. (6.32)

Not achieved. The two special cells in the segregation unit remained in an unacceptable condition. They were dark, with no natural light, and poorly furnished with only a concrete plinth and a cardboard pot (see additional information).

We repeat the recommendation.

2.119 Prisoners placed in special accommodation should not be strip-searched without risk assessment and should not routinely be deprived of normal clothing. (6.33) Not achieved. Prisoners placed in a special cell were routinely strip searched. Of the 11 prisoners admitted in the previous six months, 10 had been strip searched without a risk assessment. Prisoners were still routinely deprived of their normal clothes. We repeat the recommendation.

2.120 Planned control and restraint (C&R) removals should routinely be videoed and the tapes stored securely. (6.34)

Achieved. Planned removals of prisoners using C&R techniques were routinely video recorded. Tapes were kept in a secure area in the security department and reviewed by the head of operations and the C&R coordinator.

2.121 Cleanliness in the segregation unit cells should be improved and maintained at an acceptable standard. Graffiti should be removed. (6.35)

Achieved. Segregation unit cells were clean and bright and graffiti had been removed. Communal areas were clean and freshly decorated. Up-to-date notices had been published and showers were clean.

2.122 Mental health awareness training should be provided to segregation unit staff in accordance with the published selection policy. (6.36)

Achieved. A half-day mental health training course was delivered by mental health workers as mandatory training for segregation staff. All staff working in the segregation unit had received training.

- 2.123 Prisoners should be held in the segregation unit for the shortest possible period. (6.37) Achieved. Prisoners were not segregated for inappropriate periods. The average stay was about four days, most of which was due to cellular confinement given as punishment following a formal adjudication. Of the 131 segregation admissions from March to the end of July 2009, only 15 prisoners were segregated under prison rule 49 (good order or discipline young offenders). Prisoners segregated under prison rule 49 were not kept in segregation for more than 10 days.
- 2.124 Staff from the education department should visit all prisoners in the segregation unit weekly to encourage them to participate in in-cell education. (6.38)
 Achieved. Education staff visited the segregation unit every week to provide in-cell education activities.
- 2.125 Written records of good order or discipline reviews should be comprehensive and demonstrate any active plans considered to assist the individual's return to normal location. (6.39)

Achieved. Records of good order or discipline reviews showed that staff were engaged in helping prisoners return to normal location. Reviews took place on time, behaviour targets were set and prisoners were able to return to the mainstream quickly, usually within 10 days. There was also evidence of positive involvement by personal officers, who regularly visited their prisoners in the segregation unit.

Additional information

- 2.126 The number of adjudications was high at 743 from January to July 2009. Records of formal adjudications showed that punishments were mostly awarded consistently and adjudicating governors were prepared to dismiss charges due to lack of evidence or anomalies in process. However, some records did not show that charges were always fully investigated, written descriptions of incidents were often limited and adjudicators were not always recording indepth questions about the issues. The reason why prisoners pled guilty to charges were not followed through and it was not always clear that mitigation had been taken into consideration. There was an over-reliance on formal disciplinary procedures to deal with day-to-day management of prisoner behaviour. Some charges were relatively petty and could have been dealt with through less formal procedures, such as the incentives and earned privileges (IEP) scheme or interaction between staff and prisoners.
- 2.127 The number of minor reports was also high at 364 for the same period. Some punishments for these offences were harsh, including loss of gym, association and television. Many of these could also have been better dealt with using less formal interventions.

Use of force

2.128 The level of use of force was high, at 121 from January to July 2009, but 40 of these were recorded following the application of ratchet handcuffs and did not involve full C&R techniques. Planned intervention was well organised and properly executed, and paperwork was completed correctly. Proper authority was recorded and all incidents were appropriately supervised by senior staff. Accident report forms were completed in all cases regardless of injuries being sustained. Prisoners were seen by healthcare staff immediately following an incident. Subsequent searching of prisoners was carried out sensitively and strip searches took place only after an assessment of risk had been completed unless the prisoner was placed in special accommodation. Management checks of the quality of paperwork were carried out regularly by an appointed C&R coordinator. The use of de-escalation was

encouraged by managers and techniques were often used to good effect during particularly difficult situations.

2.129 Information on the nature of the incident, its location and the ethnicity of the prisoners involved was collated each month and presented to the safer custody committee. This was used to identify trends to inform changes in strategy as required. There were good communication protocols between the C&R coordinator and the security department. All incidents were reviewed at the monthly security meeting and information was shared effectively through regular security reports.

Segregation

2.130 Relationships between staff and prisoners in the segregation unit were generally good, but the use of special accommodation was a concern. Special cells had been used 11 times between January and July 2009, compared to 12 times during the whole of 2005. Although authorisation was always given according to Prison Service protocols, we were not assured that all use was fully justified. Written entries in documents did not always indicate that incidents were extreme enough to warrant the use of these cells. There were two examples where prisoners had clearly been calm enough following an incident to be located in an ordinary cell in the segregation unit rather than the special cell. The average time spent in special cells was about four hours. It was not clear that prisoners were released from special cells as soon as it could no longer be justified. Observations in written documents described prisoners who were no longer violent and refractory being kept in these conditions. One prisoner had calmly asked to be removed to an ordinary cell and had been told he would be reassessed in an hour.

Further recommendations

- 2.131 The records of adjudication should show that charges are always sufficiently investigated.
- **2.132** Minor infringements of prison rules should be dealt with through less formal procedures.
- 2.133 Special cells should be used only as a last resort, until the prisoner is no longer violent and refractory and for the minimum amount of time.

Incentives and earned privileges

2.134 There should be no limit on how many enhanced prisoners each unit can cater for. (6.55)

Partially achieved. During our previous inspection, standard prisoners had been given association only on alternate days. In theory, those on enhanced could have daily association, but accommodating this meant there was a limit to the number of enhanced prisoners each residential unit could hold. Some prisoners had therefore not been able to achieve enhanced status. At this inspection, the situation had changed and prisoners could now progress on the IEP scheme. The number who could associate at one time was still capped, so some enhanced prisoners had to wait to enjoy this additional privilege, although this was not affecting any prisoners during the inspection.

Further recommendation

2.135 Standard and enhanced prisoners should have equal access to all privileges available to them as detailed in the local incentives and earned privileges (IEP) policy.

Additional information

2.136 Most prisoners were on standard level, with only three on basic and about 100 on enhanced. Managers said the IEP scheme had recently been standardised across the prison to ensure it was applied consistently on all residential units. However, prisoners were uncertain how the scheme operated and described different treatment. One prisoner had been put on basic level for what he regarded as trivial matters for which he said he had not received a behaviour warning, while others had received both behaviour and verbal warnings from senior officers before being put on basic level. The forms completed daily by staff charting a prisoner's progress on basic level were also different from what was detailed in the policy. Management and staff were inconsistent when reporting how the scheme operated and what was available for prisoners on the different levels. Prisoners also had to wait three months for enhanced status, which meant some were released before they could gain the extra privileges.

Further recommendation

2.137 The assessment period for gaining enhanced status should be reduced to ensure that shorter-stay prisoners are able to achieve it.

Catering

- 2.138 Breakfast packs should be distributed on the day they are to be eaten. (7.6)
 No longer relevant. All prisoners were now given a cold breakfast on weekdays and a hot breakfast at weekends instead of breakfast packs.
- 2.139 The sandwiches distributed as evening meals at weekends should be replaced by a cooked meal. (7.7)

Not achieved. The prison still served sandwiches or an alternative cold meal in the evening/afternoon at weekends.

We repeat the recommendation.

2.140 Prisoners should be able to eat together in communal facilities. (7.8)

Not achieved. There were no facilities for prisoners to eat together and all meals were eaten in cells.

We repeat the recommendation.

2.141 There should be a standard menu across the establishment. This should include more healthy eating options and a wider variety of food, including some of the popular dishes served during themed nights. (7.9)

Achieved. The same meals were served on all wings. The choice was generally appropriate and particularly varied for the evening meal.

2.142 Staff shortages should not prevent prisoners from progressing in their catering NVQs. (7.10)

Achieved. Along with the main kitchen, the prison had a training kitchen where prisoners could

train up to NVQ level 1. The full course lasted 12 weeks and was provided for up to 11 prisoners. A dedicated trainer had been in post since October 2008 and the prison was delivering its third course.

Additional information

2.143 The main kitchen was well managed. A catering manager and seven civilian staff managed the preparation of meals and up to 20 prisoners were employed in shifts. Lunch was usually bought in, but evening meals were made in the kitchen. Prisoners said the food was generally reasonable, although the range of halal lunches was quite limited. A food survey was completed twice a year and the results were published on wings. The catering manager managed a food group that met about every two months, but food comments books on wings were not responded to regularly.

Further recommendations

- **2.144** A wider range of halal meals should be provided at lunchtime.
- 2.145 Complaints in wing food comments books should be collected monthly and responded to.

Prison shop

2.146 Tinned goods and healthy snacks, including fresh fruit, should be available through the prison shop. (7.17)

Partially achieved. Items such as tinned fruit and fish and healthy snack bars were now available, but fresh fruit was not.

Further recommendation

2.147 Fresh fruit should be available through the prison shop.

Additional information

2.148 Prisoners were generally satisfied with the range of items available from the shop, but many complained that items were either not received or were incorrect. Canteen was issued on Fridays and mistakes could not be resolved until the following Monday. As goods were ordered a week in advance, new arrivals could wait up to 12 days to receive their first order.

- 2.149 Problems with shop orders should be resolved on the day of delivery.
- 2.150 New prisoners should be able to order from the shop within 24 hours of arrival.

Resettlement strategy

2.151 The results of the recent needs assessment should inform the resettlement strategy and identified areas for development should be prioritised and driven forward by the resettlement policy committee. (8.7)

Achieved. The reducing reoffending strategy 2009-10 was about to be published and had been informed by a detailed needs analysis that took into account offender assessments, core prison records and educational records. These findings were flagged up by the quarterly pathway and resettlement policy committee meetings (see additional information).

Sentence and custody planning

2.152 Formal, multidisciplinary sentence planning boards should be held following an OASys assessment or review. (8.14)

Not achieved. Prisoners receiving an OASys review were given targets, but boards were rarely multidisciplinary and usually involved only the offender supervisor and prisoner. There were plans to introduce a case management system (see additional information). **We repeat the recommendation.**

- 2.153 All prisoners should have a custody plan of some description. (8.15)
 - Achieved. All prisoners were allocated an offender supervisor, irrespective of whether they were in scope for offender management, and all were seen within a week of arrival to assess any resettlement needs such as housing. There was some duplication as work in this area was also carried out by the resettlement support team (see additional information).
- 2.154 All requests for information should be completed and returned by the relevant departments before assessments are carried out. (8.16)

Partially achieved. Offender management staff did not always get written information from staff in other departments. When this was the case, they made telephone calls to obtain a verbal report. Some areas were still reluctant to engage in the electronic system. **We repeat the recommendation.**

- 2.155 Management supervision of assessments and reviews should be improved to ensure that standards are kept consistently high. (8.17)
 - **Achieved.** An experienced probation officer regularly carried out quality checks.
- 2.156 The timetable for subsequent reviews of sentence plans should be based on individual circumstances and agreed at the initial assessment so that expectations are structured. (8.18)

Partially achieved. Sentence plan reviews took individual circumstances into account, but there was no system to hold reviews outside the timetable depending on a prisoner's sentence length (six months for shorter sentences and yearly for longer sentences). (See additional information.)

- 2.157 Reviews of OASys assessments should be thorough and involve the prisoner. (8.19) Achieved. Prisoners subject to OASys assessments were seen in person by offender supervisors and their views were taken into account.
- 2.158 Prisoners should be given a copy of their targets and objectives in writing following assessments or reviews. (8.20)

Achieved. Following an OASys assessment, prisoners were given a written copy of their targets and objectives.

2.159 The principles of the offender management model on the high intensity training (HIT) unit should be adopted across the rest of the establishment. (8.21)
Achieved. There was no differentiation between the offender management system for prisoners on F wing and the rest of the prison (see additional information).

Additional information

- 2.160 The prison operated the offender management model for all prisoners. The department was a mix of uniformed staff and probation officers. There were 115 prisoners identified as in scope for offender management, of which 71 were classified as high risk. Offender supervisors usually saw these prisoners within five weeks for an induction interview, although this was occasionally later. Contact took place every three months and contact logs reflected some good knowledge of individual prisoners, including records maintained by the counselling, assessment, referral, advice and throughcare (CARAT) service and other resettlement staff. Links with external offender managers were largely good, although the wide geographical area covered by the prison meant it was difficult for some offender managers to attend Deerbolt. There was no video conferencing facility and staff sometimes used telephone conferencing. There was no private interview space so all interviews took place in a partitioned area of the corridor. Managers had identified a new area, but had only just started refurbishment work.
- 2.161 Assessments and reviews for prisoners eligible for OASys were almost all up to date and the offender management model was well integrated into the establishment. However, there were some areas of duplication, including that the short-term custody plans completed by offender supervisors were very similar to the information required by resettlement support staff. Prisoners on F wing were also subject to their own HIT reviews, which were not integrated fully into offender management. Offender supervisors could get information about educational assessments, but education staff did not attend sentence planning boards.

Further recommendations

- 2.162 The prison should introduce a case management system that effectively brings together all departments so that a prisoner's needs are addressed as a whole throughout their stay at Deerbolt.
- **2.163** The area identified as a private space for offender management interviews should be refurbished and put into use as quickly as possible.

Offending behaviour programmes

2.164 The establishment should make the various interventions on the HIT programme available to the mainstream population if a clear need is identified. (8.27) Partially achieved. The HIT programme was changing to a new programme (see additional information). Most accredited programmes were available to all prisoners, but some interventions, particularly those focused on life skills, were available only to prisoners on F wing.

We repeat the recommendation.

Additional information

- 2.165 The HIT programme for prisoners on F wing was changing and was now called Matrix, which was just starting up again after a gap of over a year. New staff were in post and were being trained for a more dynamic role working with prisoners and tackling behaviours. Prisoners on F wing were specially selected according to sentence length (having enough time to engage in courses) and willingness to engage. The unit adjacent to F wing acted as the main centre for all interventions and programmes and also held some educational classes, such as life skills, specifically aimed at F wing prisoners. Some staff seemed unclear about the role and purpose of the HIT.
- 2.166 Accredited interventions were limited to P-ASRO (drugs) and a thinking skills programme. Further non-accredited interventions included fathers inside, managing emotions, and alcohol and offending. The latter two had just started after a long gap. A focus on resettlement course was about to be introduced. The prison had recognised the lack of any alcohol programme or anything specifically targeted at violent behaviour, even through 17% of the population were serving sentences for violence. However, the violence reduction strategy was well developed (see section on bullying/violence reduction).
- 2.167 The prison also held a small number of prisoners with an index sex offence. There were arrangements to assess the risk of these individuals and, if they were willing, to transfer them to a prison to complete a sex offender programme. A trained member of staff was responsible for this area. A sex offender course for young offenders was available only in the Midlands so some were reluctant to transfer as this would affect visits. The prison had an arrangement to move some 21 year olds to HMP Acklington to complete programmes as adults.

Further recommendations

- 2.168 The role and purpose of the HIT/Matrix programme should be fully defined within a clear statement of purpose. Staff should receive awareness training on the role of the programme.
- 2.169 The resettlement policy committee should examine, with some input from regional specialists, the scope for increasing the range of interventions for prisoners serving sentences for violence.

Reintegration planning

2.170 Greater use should be made of release on temporary licence (ROTL) as a resettlement tool for all prisoners. (8.35)

Achieved. There had been an increase in the use of ROTL, largely for community initiatives such as the Duke of Edinburgh award and voluntary work, but also to allow prisoners to attend college and job interviews and paid work placements. In the previous 12 months, 182 prisoners had been released on licence.

2.171 Exit surveys should be carried out with prisoners on final discharge. (8.36)

Achieved. A new discharge survey that included questions about resettlement, safer custody and offending behaviour had been introduced the week before the inspection. It was too early to evaluate the responses, but early indicators suggested this was a useful exercise.

Additional information

- 2.172 Resettlement services were provided under the umbrella of a resettlement support team. This included staff from De Paul UK (a housing service), Job Club, Citizens Advice and JobCentre Plus. The Prince's Trust was also available, but staff no longer worked in the prison due to financial constraints. The prison could still access a useful 12-week self-development course for prisoners on release. Staff from all departments on a rota saw all new arrivals to go through the various resettlement pathways and make practical plans for release. Information was collected by education staff which suggested that prisoners were staying for shorter periods but this was not used to inform and adjust resettlement provision. As a result, staff often had to address pressing resettlement concerns within a matter of weeks.
- 2.173 Most prisoners (90%) were released to settled accommodation and the prison had also introduced some 'meet at the gate' mentoring schemes for prisoners from areas where this ongoing support was available.
- 2.174 A prison job club was available to all prisoners and provided the support and facilities for prisoners to look for work. Broadband internet access to assist in job searches was ready to be introduced following a successful business case. The prison had recently hosted an open day for regional colleges and had achieved 40 college placements post release.
- 2.175 Citizens Advice staff helped with debt management and there was assistance with housing arrears. The prison sometimes found it difficult to get official identification for prisoners to help them open bank accounts. Some finance and budgeting courses were run, but mostly only for prisoners on the HIT/F wing unit.

Further recommendations

- 2.176 The prison should use education and other data on the length of time prisoners spend at Deerbolt to inform the resettlement and pathways strategy.
- 2.177 Deerbolt should link with other prisons in the area to provide a scheme where prisoners can obtain official identification and open bank accounts before release.
- 2.178 Courses on budgeting and money management should be available to all prisoners.

Substance use

- 2.179 Clear developmental targets should be incorporated to support the drug strategy. (8.64) Achieved. The drug strategy had been written in May 2008 to cover a two-year period to May 2010. It had been revised, with minor changes made over the previous year, making it a dynamic and evolving document. It contained a series of action points, most of which were linked to the standards audit. These action points were further expanded on and added to bimonthly with action points from the drug strategy meeting. These points were clearly included in an action plan update in the meeting minutes, with the action, person responsible and date required listed.
- 2.180 A mechanism for evaluating CARAT-based treatment outcomes should be developed, including service-user feedback. (8.65)
 Achieved. Service-user feedback was collected through evaluation forms. Group session

facilitators also completed reflective evaluation forms at the end of each course. Headline issues and trends were monitored and fed back to CARAT worker supervision sessions and three-monthly management meetings.

2.181 A comprehensive needs analysis should be conducted on all prisoners and include alcohol misuse. (8.66)

Partially achieved. The drug strategy document included a needs analysis conducted in January 2009. Needs in relation to drugs and alcohol were examined separately. While there was a reasonably thorough approach to the quantitative data reported in the needs analysis, there was little written discussion of the data or implications for prisoners' treatment and care. There was also virtually no examination of qualitative data (such as prisoners' views, treatment staff views, views of resettlement workers in the community and other stakeholders) that would have been a beneficial addition to the needs analysis.

Further recommendation

- 2.182 The annual drug and alcohol needs analyses should seek the views of prisoners and other stakeholders concerned with drug- and alcohol-related education, treatment and resettlement.
- 2.183 The clinical services for substance misuse policy should be up-dated to reflect Deerbolt's current practice and take account of current guidelines. (8.67)

 Achieved. The integrated drug treatment system (IDTS) had been introduced in September 2008. Since then, only two prisoners had required opiate substitution, but several had needed medication for the relief for anxiety and other stimulant drug withdrawal symptoms. The facilities were in place for the correct administration of opiate substitution medication in the likely event that the number of prisoners requiring such treatment increased in the future.
- 2.184 Joint work between healthcare and CARATs should be extended to include drug-related health promotion. (8.68)

Achieved. There were many good examples of joint working between healthcare and CARATs. These included joint facilitation of drug and alcohol awareness groups, healthy living and blood-borne virus awareness. There was also a joint approach to a dual diagnosis care pathway, with both the CARAT and mental health departments taking part in care plan reviews and case conferences.

2.185 Compliance and voluntary testing compacts should be clearly differentiated. (8.69)

Not achieved. The use of compliance testing had ceased and all testing was called 'voluntary'.

However, there were several situations, for prisoners wanting to work in the laundry, kitchens and other key jobs, where compacts were clearly instituted for compliance reasons rather than as an entirely voluntary scheme.

We repeat the recommendation.

2.186 Dedicated facilities for voluntary testing should be made available on A and I wings. (8.70)

No longer relevant. A and I wings were no longer used as voluntary drug testing (VDT) wings. B wing was now the main VDT wing, with additional facilities on F and J wings. Testing facilities in the three locations were appropriately equipped, clean and tidy, and had adequate holding rooms with a good range of information for prisoners to read while waiting.

2.187 Voluntary testing should be carried out by two officers and the current practice of using cameras should stop. (8.71)

Achieved. Two officers were present for each test and all cameras had either been removed or disabled.

2.188 The prison should develop a full alcohol strategy. (8.72)

Not achieved. An entry in the drug strategy indicated that an alcohol strategy would be developed, but this had not been done. There were several interventions for prisoners covering alcohol awareness and poly-drug users could have further sessions with CARAT workers, although the CARAT service was not funded to work with primary alcohol users. A four-session, non-accredited course on alcohol and offending was also available for primary alcohol misusers, and poly-drug users. This course had been non-operational for several months, but had re-started recently.

We repeat the recommendation.

Additional information

2.189 The mandatory drug testing (MDT) positive rate for February to July 2009 was 0% and there had been just one positive suspicion test in the same period. Prisoners generally reported that drugs were extremely rare and hard to get. There was no regular monitoring of how many suspicion test requests fell outside the 72-hour window, although concerns about the time taken between a security information report being received and a test taking place had been recorded in the most recent (May 2009) drug strategy minutes.

Further recommendation

2.190 A mechanism to manage target testing more effectively should be developed to ensure tests are undertaken within the required timeframe.

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.

To the Director General, NOMS

Main recommendation

There should be a new, purpose designed, reception facility. (2.1)	
Main recommendations To t	he Governor
All prisoners, including those on basic regime, should have daily access to time in association, showers and telephones. (2.3)	the open air,
Activity spaces should be fully used. (2.6)	
Recommendations To t	he Governor
First days in custody	
Prisoners on the induction wing should have a period of association every day. (2	.10)
Prisoners should not have to wait on escort vans when reception is closed for lun	ch. (2.16)
Unless there are specific security concerns, prisoners should not be routinely han between the van and the entrance to reception. (2.17)	dcuffed
Peer advisers/Insiders should be based on the induction unit. (2.18)	
The induction presentation given on the first evening should be more interactive a visual aids. (2.19)	nd include
The induction programme should be clearly defined and timetabled and kept as b practical. (2.20)	rief as
All prisoners should be interviewed by learning and skills staff before leaving the i wing. (2.21)	nduction
Prisoners not involved in a timetabled induction activity should be kept productive (2.22)	ly occupied.
Residential units	
All showers should be refurbished to the same standard. (2.23)	
All prisoners should have at least weekly access to a laundry facility to wash pers (2.25)	onal clothing.

3.14 All prisoners on standard and enhanced regimes should be allowed to wear their own clothes. (2.26)

Staff-prisoner relationships

- 3.15 Staff should address prisoners by their title or preferred names. (2.30)
- 3.16 Prisoners should be encouraged to attend scheduled activities. (2.31)

Self-harm and suicide

- 3.17 Listener suites should be provided. (2.36)
- 3.18 The number of trained Listeners should be increased. (2.37)

Foreign nationals

3.19 The information on the multilingual computer touch screens should be available in a wider range of relevant languages. (2.47)

Family and friends

- 3.20 Prisoners should be allowed to have stamped addressed envelopes sent in by their families and friends. (2.48)
- 3.21 Visitors should be consulted about the level of need for prison-funded transport from the railway or bus stations. (2.50)
- 3.22 An intercom should be installed in the closed visits area to enable more than one visitor at a time to talk. (2.54)
- 3.23 Visitors should be able to have the full visits period. (2.58)
- 3.24 The visits booking office should be open longer hours and alternative booking methods such as email should be explored. (2.59)
- **3.25** Fathers' and family visits should be provided regularly. (2.60)
- 3.26 The range of parenting and relationship provision should be extended. (2.61)

Legal rights

3.27 The services provided by legal officers should be widely advertised and not restricted to foreign national prisoners. (2.64)

Healthcare

3.28 The dental surgery should be refurbished as soon as possible to ensure it meets NHS standards and complies with dental regulations. The dentist and the healthcare manager should be involved with its configuration. Air conditioning should be provided to ensure

- acceptable conditions for practitioners and patients. The adjacent room, currently housing the compressor, should be accessible directly from the surgery. (2.69)
- 3.29 A fully documented infection control audit should be undertaken by the primary care trust to ensure all healthcare facilities meet NHS standards. The audit recommendations should be fully implemented. (2.71)
- 3.30 Cleaners should be not be diverted to clean other areas of the prison instead of healthcare. (2.72)
- 3.31 The J wing treatment room should be decommissioned as a matter of urgency and a more suitable and appropriately equipped location identified. (2.73)
- 3.32 All treatment rooms should be equipped with stable doors to improve safety for staff administering medication and to ensure confidentiality for prisoners receiving medication. (2.74)
- 3.33 Appropriate hand washing facilities should be installed as a matter of urgency to ensure infection control guidelines are met and the risk of cross-infection significantly reduced. (2.75)
- 3.34 The reception healthcare room should be used only by healthcare staff and the fax machine relocated. Hand washing facilities should be provided as well as appropriate clinical equipment to allow initial health assessments to be conducted safely and appropriately. (2.77)
- 3.35 Each patient should have only one medication and administration chart, unless absolutely necessary and highlighted. (2.93)

Education and library provision

- 3.36 The use of individual learning plans should be improved. (2.97)
- 3.37 The modified computer laptops should be introduced without delay. (2.99)
- 3.38 The management information system for assessing data should be restored as a priority. (2.101)

Work

- 3.39 A policy should be put in place and rigorously enforced to improve attendance at workshops. (2.104)
- 3.40 A system should be developed and implemented that better coordinates the interventions taking place in the prison. (2.106)

Physical education and health promotion

- 3.41 Learning support for key skills and literacy and numeracy should be improved. (2.107)
- 3.42 The number of gym sessions should be increased. (2.110)

Faith and religious activity

3.43 All Muslim prisoners should be able to use the showers before Friday prayers. (2.114)

Discipline

- 3.44 The special cells in the segregation unit should be provided with adequate levels of natural light or removed from use. (2.118)
- 3.45 Prisoners placed in special accommodation should not be strip-searched without risk assessment and should not routinely be deprived of normal clothing. (2.119)
- 3.46 The records of adjudication should show that charges are always sufficiently investigated. (2.131)
- 3.47 Minor infringements of prison rules should be dealt with through less formal procedures. (2.132)
- 3.48 Special cells should be used only as a last resort, until the prisoner is no longer violent and refractory and for the minimum amount of time. (2.133)

Incentives and earned privileges

- 3.49 Standard and enhanced prisoners should have equal access to all privileges available to them as detailed in the local incentives and earned privileges (IEP) policy. (2.135)
- 3.50 The assessment period for gaining enhanced status should be reduced to ensure that shorter-stay prisoners are able to achieve it. (2.137)

Catering

- 3.51 The sandwiches distributed as evening meals at weekends should be replaced by a cooked meal. (2.139)
- 3.52 Prisoners should be able to eat together in communal facilities. (2.140)
- 3.53 A wider range of halal meals should be provided at lunchtime. (2.144)
- 3.54 Complaints in wing food comments books should be collected monthly and responded to. (2.145)

Prison shop

- **3.55** Fresh fruit should be available through the prison shop. (2.147)
- 3.56 Problems with shop orders should be resolved on the day of delivery. (2.149)
- 3.57 New prisoners should be able to order from the shop within 24 hours of arrival. (2.150)

Sentence and custody planning

- **3.58** Formal, multidisciplinary sentence planning boards should be held following an OASys assessment or review. (2.152)
- 3.59 All requests for information should be completed and returned by the relevant departments before assessments are carried out. (2.154)
- 3.60 The prison should introduce a case management system that effectively brings together all departments so that a prisoner's needs are addressed as a whole throughout their stay at Deerbolt. (2.162)
- 3.61 The area identified as a private space for offender management interviews should be refurbished and put into use as quickly as possible. (2.163)

Offending behaviour programmes

- 3.62 The establishment should make the various interventions on the HIT programme available to the mainstream population if a clear need is identified. (2.164)
- 3.63 The role and purpose of the HIT/Matrix programme should be fully defined within a clear statement of purpose. Staff should receive awareness training on the role of the programme. (2.168)
- 3.64 The resettlement policy committee should examine, with some input from regional specialists, the scope for increasing the range of interventions for prisoners serving sentences for violence. (2.169)

Reintegration planning

- 3.65 The prison should use education and other data on the length of time prisoners spend at Deerbolt to inform the resettlement and pathways strategy. (2.176)
- 3.66 Deerbolt should link with other prisons in the area to provide a scheme where prisoners can obtain official identification and open bank accounts before release. (2.177)
- 3.67 Courses on budgeting and money management should be available to all prisoners. (2.178)

Substance use

- 3.68 The annual drug and alcohol needs analyses should seek the views of prisoners and other stakeholders concerned with drug- and alcohol-related education, treatment and resettlement. (2.182)
- 3.69 Compliance and voluntary testing compacts should be clearly differentiated. (2.185)
- 3.70 The prison should develop a full alcohol strategy. (2.188)
- 3.71 A mechanism to manage target testing more effectively should be developed to ensure tests are undertaken within the required timeframe. (2.190)

Appendix I : Inspection team

Hayley Folland Team leader
Gordon Riach Inspector
Keith McInnis Inspector
Martin Owens Inspector

Paul Roberts Substance misuse inspector
Bridget McEvilly Healthcare inspector
Stephen Miller Ofsted inspector

Appendix 2: Prison population profile

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

Status	18-20 yr olds	21 and over	%
Sentenced	401	27	91.6
Recall	32	7	8.4
Convicted unsentenced			
Remand			
Civil prisoners			
Detainees			
Total	433	34	100

Sentence	18-20 yr olds	21 and over	%
Unsentenced			
Less than 6 months	26		5.5
6 months to less than 12 months	39	1	8.6
12 months to less than 2 years	89	9	21
2 years to less than 4 years	236	19	54.6
4 years to less than 10 years	42	5	10.1
10 years and over (not life)			
ISPP	1		0.2
Life			
Total	433	34	100

Age	Number of prisoners	%
Please state minimum age (18)		
Under 21 years	433	92.7
21 years to 29 years	34	7.3
30 years to 39 years		
40 years to 49 years		
50 years to 59 years		
60 years to 69 years		
70 plus years		
Maximum age		
Total	467	100

Nationality	18-20 yr olds	21 and over	%
British	421	34	97.4
Foreign nationals	12		2.6
Total	433	34	100

Security category	18-20 yr olds	21 and over	%
Uncategorised unsentenced			
Uncategorised sentenced			
Cat A			
Cat B			
Cat C			

Cat D			
Other Young Offenders	433	34	100
Total	433	34	100

Ethnicity	18–20 yr olds	21 and over	%
White			
British	387	31	89.5
Irish			
Other White	5		1.1
Mixed			
White and Black Caribbean	4	1	1.1
White and Black African			
White and Asian	2	1	0.6
Other Mixed	3		0.6
Asian or Asian British			0.4
Indian	3		0.6
Pakistani	10		2.1
Bangladeshi	2	1	0.6
Other Asian	4		0.9
Black or Black British			
Caribbean	4		0.9
African	6		1.3
Other Black	2		0.5
Chinese or other ethnic group			
Chinese	1		0.2
Other ethnic group	·		
Not stated			
TWO Stated			
Total	433	34	100

Religion	18-20 yr olds	21 and over	%
Baptist			
Church of England	114	9	26.3
Roman Catholic	74	4	16.7
Other Christian denominations	4	1	1.1
Muslim	23	1	5.1
Sikh			
Hindu			
Buddhist			
Jewish			
Other			
No religion	218	19	50.8
Total	433	34	100

Main offence	18-20 yr olds	21 and over	%
Violence against the person	74	7	17.3
Sexual offences	6	1	1.5
Burglary	46	5	10.9
Robbery	65	7	15.4
Theft and handling	5		1.0
Fraud and forgery	2		0.4
Drugs offences	38	1	8.4
Other offences	45		9.6
Civil offences			
Offence not recorded/holding	152	13	35.5
warrant			
Total	433	34	100