

Report on an unannounced short follow-up inspection of

HMP/YOI Drake Hall

31 August – 2 September 2010

by HM Chief Inspector of Prisons

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Introduction

Drake Hall is a public sector closed prison for adult and young women aged 18 and above. At the time of our last inspection in September 2007, Drake Hall was a female semi-open prison. Its function changed in March 2009.

In 2007, inspectors found the performance of the prison was good or reasonably good in most areas although not sufficiently good in resettlement. In this short follow-up inspection, inspectors found that the prison had made good progress in implementing their previous recommendations and outcomes for prisoners were good or reasonably good in all areas. The prison was generally a safe place with few fights or assaults. Although the number of self-harm incidents had increased since the last inspection, they still involved relatively few women. Drug use appeared to be low. Drake Hall was originally designed as an open prison and women appreciated the relative freedom of the environment.

In this context, inspectors found that formal disciplinary processes were used when informal measures would have been more appropriate and some punishments were excessive. Adjudicators were sometimes not sufficiently rigorous in their enquiries and quality checks were inconsistent.

Staff-prisoner relationships overall were varied and although most interactions we observed were good, some were poor. Many women did not believe they were treated with appropriate respect as responsible adults. The performance of personal officers had been a major concern at the last inspection. There had been improvements and personal officer entries in some case notes provided an excellent overview of the woman's stay at Drake Hall but others were perfunctory, sporadic or non-existent. The written applications process remained complex and confusing. Health services were satisfactory overall but we were concerned that the prison did not fully appreciate the importance that some women, often for cultural reasons, placed on their ability to see a woman doctor.

The physical environment of the prison was generally good and, although more needed to be done, two of the older residential units about which we had most concerns at our last inspection had had some repairs.

There was no overarching diversity strategy and some diversity strands, such as sexuality and faith, were not effectively addressed. However, race equality work had improved and women with disabilities spoke positively about the support they received. The disability liaison officer worked hard to identify and address the needs of older prisoners and those with disabilities but there were no formal care plans and so there was over-reliance on informal approaches to ensure these women's needs were met.

Drake Hall was a designated centre for foreign national women. Work with foreign national women had improved with the appointment of a full-time foreign national officer but needed further development. There was no plan to take forward issues identified in a recent needs analysis. Professional interpreting, particularly for confidential health issues, and translated written material were inadequate. The Hibiscus worker was a good resource.

There was a good amount of purposeful activity available. Women could spend much time out of their rooms and the grounds were a generally attractive area for exercise and recreation. There were reasonable opportunities for work and a good library and PE facilities. However, an up-to-date learning and skills strategy was needed, data were not used effectively to drive improvements and some targets in individual learning plans were not sufficiently clear. It was

particularly disappointing that opportunities for vocational training linked to formal qualifications had decreased.

Resettlement work had improved. It was underpinned by a reasonable strategy that could be further strengthened by identifying the specific needs of particular groups of women among the prison's diverse population. The offender management unit was well established and the prison was a pilot site for the introduction of 'layered offender management' which aimed to ensure all women – rather than just those convicted of more serious offences – received appropriate levels of support and supervision to address their offending behaviour. In this short follow-up inspection it was not possible to examine the quality of sentence planning but offender management was now delivered more consistently and reliably than was the case previously.

There was suitable support to help women with housing, employment and money management on release. Working out schemes and release on temporary licence (ROTL) were used to support this. Work to support women in maintaining contact with their families had improved and a new visitors' centre had been opened. However, more could be done to help women maintain contact with older children and other close family members, and the administration of visits needed improvement.

There was a good range of interventions to help women with drug addictions but there was a significant gap in support for women whose primary addiction was alcohol.

Drake Hall had improved since our last inspection and is producing reasonably good outcomes for prisoners. Work with foreign national women and women with alcohol problems stand out as areas where more attention is required. Overall, the prison could improve further by reducing inconsistencies in staff-prisoner relationships, and reducing over-reliance on some very effective and committed staff in some areas by underpinning their work with effective strategies and clearer policies.

Nick Hardwick
HM Chief Inspector of Prisons

October 2010

Fact page

Task of the establishment

Drake Hall is a public sector closed prison for sentenced adult women and young women. Prisoners at Drake Hall serve sentences from three days to life imprisonment. There are 15 houses, most with single accommodation. Employment consists of education, industrial workshops, a large gardens department, laundry, orderly work and some outdoor work. A range of vocational qualifications are available.

Area organisation

West Midlands Area

Number held

295

Certified normal accommodation

315

Operational capacity

315

Last full inspection

September 2007 (full)

September 2004 (short)

Brief history

Drake Hall developed from a wartime hostel for women munitions workers. It closed in 1946 and reopened in 1956 to house refugees from the Suez crisis. From 1956 to 1974, it was a male open prison before becoming a female open prison in September 1975. In January 2002, Drake Hall changed its role to a female semi-open establishment with the erection of a secure perimeter and became a designated foreign national establishment. New building includes a reception, health care unit, gym and kitchen. In March 2009, Drake Hall changed its role to a closed resettlement prison.

Description of residential units

Accommodation consists of 15 house units containing mainly single rooms, all fitted with courtesy locks. Each house unit has a small kitchen, a laundry room and a television lounge.

Section 1: Healthy prison assessment

Introduction

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

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

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

- outcomes for prisoners are good against this healthy prison test.

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

- outcomes for prisoners are reasonably good against this healthy prison test.

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

- outcomes for prisoners are not sufficiently good against this healthy prison test.

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

- outcomes for prisoners are poor against this healthy prison test.

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

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

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

Safety

- HP4 In 2007, Drake Hall was performing well against this healthy prison test. Of the 33 recommendations in this area, 19 have been achieved, six partially achieved and eight not achieved. We have made eight further recommendations.
- HP5 Most women prisoners we spoke to did not report very long journeys, although some had been given little notice of their transfers. The reception area was clean and comfortable. It contained a lot of information and reading material but only in English, even though Drake Hall was a designated specialist centre for foreign nationals. New arrivals were given good informal support by an induction orderly but still received only a two-minute telephone call, which was insufficient, particularly for those who had received little or no notice of their transfer. There was a satisfactory induction programme with individual sessions using translated documents and telephone interpreting services for women who did not speak or understand English sufficiently well.
- HP6 There were relatively few staff on most units but the prison was a generally safe place with few fights or assaults. Usually only about two women were subject to monitoring for anti-social behaviour. Women were occasionally consulted about issues of safety at prisoner forums and exit surveys were carried out but the response rates to these were very low and there had been no full safety survey. The violence reduction strategy was being reviewed.
- HP7 The number of incidents of self-harm had increased from previously but still involved relatively few women. Counselling services had improved but some women had to wait up to six weeks. Listeners did not work in reception or attend the induction unit to meet new arrivals but had a slot on the induction programme to inform women of their services. There was no system to ensure there were always first aid-trained staff on duty at night when there was no health care presence.
- HP8 The status of the prison had changed from semi-open to closed but there were few apparent physical differences. Security priorities were around drugs, although there was little indication that this was a major problem in the prison. Suspicion drug tests were clearly linked to intelligence. Actions arising from security information reports were followed through and recorded. Some staff and prisoners agreed that rules were often applied inconsistently.
- HP9 A number of adjudications were for very minor issues that ought to have been resolved without the use of formal procedures and did not suggest that staff involved had handled the incidents well. Some punishments were excessive and a number of charges were inadequately investigated. While there was some quality assurance of adjudications, there was little identification of training needs. Women were no longer

routinely strip searched on entry to the segregation unit. The segregation unit itself was clean and well ordered but the exercise yard remained poor. Force had been used only twice in the previous 12 months and records were properly kept.

- HP10 The positive mandatory drug testing rate was currently zero and women said drugs were not easily available. The integrated drug treatment system had been implemented and there were good links between drug services and health care. Some women said they were not always fully involved in decisions about their clinical management and the speed of detoxification. Mandatory and compact-based drug testing were appropriately separate, with established procedures to refer prisoners to drug services or health care.
- HP11 On the basis of this short follow-up inspection, we considered that outcomes for prisoners remained good against this healthy prison test.

Respect

- HP12 In 2007, Drake Hall was performing reasonably well against this healthy prison test. Of the 93 recommendations in this area 35 have been achieved, 28 partially achieved, 28 not achieved and two are no longer applicable. We have made 35 further recommendations.
- HP13 The quality of relationships between staff and prisoners varied and a number of women said a minority of officers were very unhelpful. Some staff reported that they had sometimes felt uncomfortable with the negative conduct of some of their colleagues. Although most interactions we observed were positive, some were poor. No strategy had been devised to help identify problem areas and improve relationships. There was some consultation about relationships at prisoner forums but some responses to issues raised did not reassure women that their views were respected or taken seriously. The quality of personal officer work varied significantly. Some personal officer case notes were very good and referred to sentence planning and family issues but others were perfunctory or non-existent. There was no specific training for personal officers but the policy document provided good clear guidance.
- HP14 The general environment of the prison was good, with most areas clean and well maintained. The showers in Richmond and Plymouth units were in poor condition. Not all women in shared rooms had a lockable cupboard or enough furniture. Access to stored property in reception had recently improved. There was generally good access to laundries but insufficient detergent was supplied.
- HP15 There was no overarching diversity strategy and there was no policy for all of the diversity strands, such as sexuality and faith. Although there were no formal care plan arrangements on living units for women with disabilities, they reported receiving excellent care and support from the disability liaison officer (DLO) and health care. The DLO had sufficient time to carry out her responsibilities but had received little training.
- HP16 Race relations work had improved with more dedicated staff resources. Most staff had received the Prison Service diversity training but there was still a lack of general support from residential staff for black and minority and foreign national women, many of whom were unnecessarily referred to the diversity team for help with issues that did not require specialist intervention. Prisoners spoke highly of the individual support

they received from the diversity team but there were no regular consultation forums specifically for black and minority ethnic women, whose main dissatisfaction appeared to be about catering and the shop. Reported racist incidents were well investigated and an independent scrutiny panel had just been established.

- HP17 There were 38 foreign national women, including one immigration detainee. The foreign national policy was generic and did not outline the prison's designated specialist role or all the services available. It did not reflect the issues identified in a recent needs analysis and there was no action plan to take work forward. All foreign national women were seen individually on arrival by the foreign national officer, who aimed to ensure that individual needs were recorded and met. There were regular surgeries with an immigration officer and monthly foreign national forums. No information was displayed on the residential units in languages other than English and, although some information was available in other languages, it was not always offered. Staff appeared reluctant to use telephone interpreting services. Liaison with Hibiscus was much improved. Eligible foreign national women were invited to apply for release on temporary licence (ROTL) but most did not do so as they knew it was unlikely to be granted.
- HP18 The written applications policy remained complex and confusing. Forms were not always available on all units but women could get them easily from the prisoner-run Signpost office. The complaints log was now better kept and copies of all completed complaints were retained. Satisfactory legal services were provided through the offender management unit.
- HP19 Overall health care services were satisfactory, with a range of staff whose skills were used appropriately, including a lead nurse for older women and women with disabilities. Arrangements for breast screening were inadequate. Women could request to see a female GP but not all were aware of this and there was no regular service. The health care complaint systems were not well promoted or monitored and, despite a health care forum, many women did not believe their views were taken seriously and they did not always report positive treatment by health care staff. Telephone interpreting services were rarely used. Mental health services had improved, with primary care and in-reach nursing services. There was a wide range of patient group directions and two nurse prescribers were used effectively. More women than previously had medication in-possession but it was still not possible to collect medications with appropriate confidentiality.
- HP20 On the basis of this short follow-up inspection, we considered that outcomes for prisoners remained reasonably good against this healthy prison test.

Purposeful activity

- HP21 In 2007, Drake Hall was performing reasonably well against this healthy prison test. Of the 12 recommendations in this area nine have been achieved, two partially achieved and one not achieved. We have made four further recommendations.
- HP22 Women could spend a good amount of time out of their rooms and appreciated the relative freedom of Drake Hall. All had lots of opportunities to spend time in the open air and the grounds were generally attractive areas for exercise and association.

- HP23 There were enough activity places to meet women's needs and effective links with the offender management system to help allocation to activities. The careers information and advisory service was well established. Education and vocational training provision was managed by the Manchester College and was much improved. Attendance, retention and achievement of qualifications in education were good and education courses were well subscribed and popular. English for speakers of other languages provision was also much improved. Better use was made of information collected to inform the use of activity places but data were not always used effectively to drive forward improvements in the provision and there was no up-to-date learning and skills strategy. Target setting in individual learning plans had improved but not all targets were sufficiently clear and many simply recorded the activity the woman had undertaken rather than what had been learned. Women now had some managed access to the internet for careers information and some education courses. The library was well run and led a range of activities.
- HP24 All women had the opportunity to work and allocation arrangements had improved, with a clear process for initial allocation to work following the induction programme. Women at work could also attend education part time with no detriment to their pay. There was a reasonable range of different work options and, although much of the work was mundane, there were also opportunities for supervisory roles in most areas. In addition, there were around 40 peer support workers in responsible roles such as health trainers, classroom, library and housing assistants and Signpost workers. About 20 women had jobs outside the prison. It was disappointing that there was no longer any accreditation in work areas except a low level qualification in the DHL packing workshop which had little take up so women had little opportunity to gain qualifications at work. Although some gained good skills, these were not often well recognised to help develop self-esteem and to use in preparing for release.
- HP25 PE facilities were good and women had good access to recreational activities, including some popular sessions for specific groups such as older prisoners. There was a good focus on healthy living. An appropriate range of vocational training programmes was provided, with good achievement of qualifications. Suitably qualified peer mentors were used effectively to deliver PE sessions for other prisoners and staff. Outside facilities were limited but yoga, Pilates and walking activities were organised in the grounds.
- HP26 On the basis of this short follow-up inspection, we considered that outcomes for prisoners remained reasonably good against this healthy prison test.

Resettlement

- HP27 In 2007, Drake Hall was not performing sufficiently well against this healthy prison test. Of the 33 recommendations in this area, 15 have been achieved, six partially achieved, eight not achieved and four are no longer applicable. We have made eight further recommendations.
- HP28 There was a reasonably good resettlement strategy that covered all the resettlement pathways including those specific to women. However, it still did not identify sufficiently well the specific resettlement needs of particular groups such as young adult women and foreign nationals. A satisfactory resettlement needs analysis had been completed and progress against the reducing reoffending strategy action plan was regularly monitored.

- HP29 The offender management unit was now well established and offender supervisors had good knowledge of the women prisoners and their circumstances. Disruption to offender management work by redeployment of resettlement officers to other work in the prison had reduced, although this was beginning to happen again more frequently to cover staffing shortages. The prison was a pilot site for the introduction of layered offender management and this meant that all women had at least initial assessments of resettlement needs and some contact with offender supervisors. Most offender assessments were up to date, which was a big improvement from previously, and there was an appropriate quality check procedure. Sentence plan reviews for those in full scope for offender management arrangements were generally multidisciplinary but reviews for others usually involved only the offender supervisors. Risk management arrangements were satisfactory and those involved were informed by their offender supervisor of the implications. The prison now took second stage lifers and, although life sentenced women were well managed individually, there was little contact with them as a group or through formal lifer days.
- HP30 The only accredited offending behaviour programme run was the thinking skills programme, which had just been introduced following a gap in provision for some time. The prison's action plan indicated that an offending behaviour needs analysis conducted in 2008 had identified no significant gaps in offending behaviour programmes and that most needs were met. It was now recognised that this was unlikely to be the case and a new needs analysis was about to be commissioned and was expected in particular to identify deficits for those with alcohol problems.
- HP31 There continued to be suitable access to housing support and the services of JobCentre Plus backed up by a trained peer adviser. More prisoners than previously participated in the employability programme before release. Courses in financial literacy were run and there was support from an external agency for women wanting to prepare for self-employment. Working out schemes provided good opportunities to help women prepare for release, as did the use of ROTL to help maintain and re-establish links with families.
- HP32 The children and families pathway was a clear part of the overall resettlement strategy, with a regularly updated action plan. Regular children's days were run but only for women's own children up to the age of 16 and they did not extend to grandchildren or younger siblings. A designated senior officer for social care helped women to maintain contact with their children and liaised with families and social services but there was no general relationship counselling for prisoners and their families. A new visitors' centre was a huge improvement but visits did not start at the advertised time despite visitors arriving well in advance. A number of visitors complained about difficulties getting through to the booking line and that visits sessions were often fully booked.
- HP33 A drugs needs analysis had just been completed and an action plan was being developed. The drugs therapeutic community had closed in 2009 because of lack of demand for places but a good range of interventions was provided through drug workers. There was only very limited support for women whose primary addiction was alcohol.
- HP34 On the basis of this short follow up inspection, we considered that outcomes for prisoners were now reasonably good against this healthy prison test.

Section 2: Progress since the last report

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

Main recommendations (from the previous report)

- 2.1 **Personal officers should get to know prisoners' personal circumstances by actively engaging with them to build up relationships that allow them to record in wing files an accurate chronological account of a woman's time at Drake Hall, her achievements against sentence plan and resettlement objectives and any significant events affecting her or her family. (HP43)**
Partially achieved. Some case notes provided an excellent overview of a woman's stay at Drake Hall, including good insight into family circumstances and contact and progress against sentence targets. Others were regular but perfunctory, focusing mainly on whether the woman was conforming. Some case notes contained either sporadic or no personal officer entries.
We repeat the recommendation.
- 2.2 **A diversity policy for prisoners should be produced with a senior manager responsible that meets the requirements of anti-discrimination legislation and outlines how the needs of minority groups will be met. (HP44)**
Not achieved. There was no overarching diversity policy and the faith and sexual orientation diversity strands did not have a separate policy.
We repeat the recommendation.
- 2.3 **There should be a comprehensive foreign nationals policy based on a needs assessment, including health and resettlement needs, with a full-time coordinator who understands the needs of foreign national prisoners. (HP45)**
Partially achieved. Support for foreign national prisoners had improved following the creation of a diversity team. This included a full-time foreign national officer, who was well known, knowledgeable and accessible but had not received any specific training. The foreign national policy (April 2010) was available only in English and did not mention Drake Hall's role as a designated centre for foreign national women. It continued to focus on formal processes rather than practical support, did not include all services provided and did not reflect issues identified by a needs analysis in March 2010. As in 2007, it did not contain strategies for action or for monitoring outcomes.
- 2.4 The needs analysis itself had been based on only 24 questionnaires (58% of foreign national women at the time) and the survey focused on current services rather than identifying unmet need. Women were asked if they had used any resettlement pathway services but not specifically about important areas such as health, communication difficulties, staff-prisoner relationships and problems maintaining contact with children and family abroad. Recommendations had been made but there was no related action plan. (See also section on foreign nationals.)

Further recommendation

- 2.5 The foreign national policy should be based on a comprehensive needs assessment and should include all services available as well as strategies for action and for monitoring outcomes.
- 2.6 **The learning and skills strategy should be revised to take into account needs identified in sentence plans, the demand for literacy, numeracy and English for speakers of other languages and to provide work and training to match the employment potential of the women prisoners. (HP46)**
Not achieved. The learning and skills strategy had not been revised and the proposed training needs analysis had been postponed as prisoners' learning and skills needs were due to be included in the forthcoming prison-wide needs analysis.

Further recommendation

- 2.7 A new learning and skills strategy should be produced to provide a clear direction for the development of the learning and skills activities based on a training needs analysis and with a detailed implementation plan, with clear targets, review and completion dates.
- 2.8 **A resettlement needs analysis should be undertaken to inform service delivery. It should take account of demographics, such as length of stay at Drake Hall, as well as needs of specific groups, such as young adults and foreign nationals. (HP47)**
Partially achieved. A thorough and detailed resettlement needs analysis of the population had been undertaken in December 2008 based on a questionnaire completed by a 100 prisoners. This gave some good in-depth information about the demographics of the population and their offences and information across each of the resettlement pathways. It also outlined the relevant services provided but it was not clear whether these matched the scale of need. Although gaps in service provision were not always clearly identified, some were addressed in the reducing reoffending action plan attached to the reducing reoffending strategy. Some questions were specifically aimed at foreign national women but there was no other analysis of the resettlement needs of specific groups, such as young adults, black and minority ethnic women or those serving indeterminate sentences.

Further recommendation

- 2.9 The reducing reoffending strategy should outline the specific needs of different groups of women and how they will be met.

Recommendations

Courts, escorts and transfers

- 2.10 **Women moving to Drake Hall should not be transported in handcuffs. (1.5)**
Achieved. None of the new arrivals during the inspection were in handcuffs. Prisoners and reception staff said they had not seen handcuffs used.

2.11 Prisoners with special needs that make travelling in a cellular vehicle inappropriate should be transferred in suitable vehicles. (1.6)

Not achieved. A number of women with disabilities had inappropriately been transferred in cellular vehicles. Their prisoner escort records indicated that their circumstances were not taken into consideration by sending establishments before transfer.

We repeat the recommendation.

2.12 The prison should be notified of new arrivals. (1.7)

Achieved. Reception staff said they were advised every Friday of planned transfers for the following week. Not all women arrived on time but there were no unexpected arrivals.

First days in custody

2.13 A formal peer support scheme to assist new arrivals should be introduced. (1.19)

Partially achieved. There was no formal peer support scheme but one of the cleaners on the induction unit acted as induction orderly and was the point of contact for new arrivals. She provided a good range of support and was spoken of highly by staff and other prisoners. She was studying for a level 2 qualification in counselling and was due to begin a degree course but had not received any formal training from the prison. It was not certain that the level of initial support to new arrivals would continue when this particular woman was no longer in the role.

Further recommendation

2.14 Formal arrangements should be established to ensure that new arrivals consistently receive adequate peer support.

2.15 First night procedures should concentrate on essential information for the first night. (1.20)

Partially achieved. New arrivals were given less information than previously. However, this still included details that were not essential for the first night, such as about legal services, work times, applications and adjudications.

Further recommendation

2.16 First night procedures should focus on essential information for the first night focusing on prisoner welfare, with routine prison regime information left for the induction programme.

2.17 New receptions should be issued with advance canteen packs that include sufficient telephone credit to contact family and friends. (1.21)

Partially achieved. New arrivals were now offered a smoker's or non-smoker's pack but these did not include telephone credit. As previously, women were allowed to make a two-minute telephone call to family or friends but this was not enough, particularly for the many women transferred without notice.

Further recommendation

2.18 Prisoners, particularly those who have been transferred without notice, should be given enough time to make a telephone call to family and friends on arrival.

- 2.19 **Induction sessions should include the use of audio-visual material. (1.22)**
Achieved. PowerPoint and video presentations were now included in a number of induction sessions.
- 2.20 **Suitable induction for those whose first language is not English should be provided. (1.23)**
Achieved. Women whose first language was not English were given an individual induction using translated documents or, when necessary, a professional telephone interpreting service.
- 2.21 **Prisoners should be allocated to start work or education as soon as the induction period has finished. (1.24)**
Achieved. Women now had to wait only up to six days instead of two weeks before starting a job. Most said they had been allocated to work within two to four days.

Accommodation and facilities

- 2.22 **Richmond and Plymouth houses should be replaced. (2.15)**
Not achieved. The houses had been re-roofed which had made them watertight but the buildings were still far inferior to the other accommodation in the prison. Shower areas were in poor condition, with mould and peeling paintwork.

Further recommendation

- 2.23 The shower areas in Richmond and Plymouth houses should be refurbished.
- 2.24 **All women prisoners should have a lockable cupboard and their own table and chair in their room. (2.16)**
Not achieved. Not all shared rooms contained lockable cupboards or enough furniture for two people.
We repeat the recommendation.
- 2.25 **Notices should be published in languages other than English. (2.17)**
Not achieved. There were still no notices in languages other than English, even though Drake Hall was a centre for foreign national women. A notice in 20 languages invited women to ask for notices to be translated but it was difficult to see how those who did not read English could identify which notices they wanted to be translated. (See repeated recommendation at paragraph 2.96.)
- 2.26 **Smoking should be allowed in suitable outside areas. (2.18)**
Achieved. Smoking was allowed in designated outside areas.
- 2.27 **The facilities list and footwear allowed should be reviewed in discussion with women prisoners. (2.19)**
Achieved. The facilities list, including footwear, had been reviewed with prisoner representatives in January 2010.
- 2.28 **All prisoners should have access to stored property within a reasonable time. (2.20)**
Achieved. While poor access to property in reception had been raised at prisoner forums as recently as August 2010, this had been addressed and there were no backlogs at the time of the inspection.

- 2.29 **Sufficient laundry detergent should be readily available to all prisoners. (2.21)**
Not achieved. Women were still given enough laundry detergent for only one wash each week.
We repeat the recommendation.

Additional information

- 2.30 The environment was reasonably good, with inside and outside areas generally clean and well maintained. Some association rooms were basic and unattractive, none contained enough seating and many chairs were stained or torn. The large association room completed in 2007 was now used for another purpose.
- 2.31 Women could receive up to their entitlement of clothing and property on a visit or by post within 28 days of their arrival. After this, all clothes had to be bought through approved catalogues, which was difficult for those on limited income who did not receive money from family or friends, which was a particular problem for some foreign national women. The reasons given were 'security' and 'pressure on reception staff'.

Further recommendations

- 2.32 Association rooms and furniture should be refurbished.
- 2.33 Women prisoners should be allowed to have clothes bought in on a visit or posted in irrespective of how long they have been at Drake Hall.

Staff-prisoner relationships

- 2.34 **Managers should develop a strategy to enhance relationships between staff and prisoners, including regular forums with prisoners to identify what improvements could be made and providing regular feedback to all staff and prisoners. (2.29)**
Not achieved. There was no strategy to enhance relationships between staff and prisoners. Staff-prisoner relationships were a standing agenda item at the monthly prisoner consultative committee but minutes indicated that issues raised by prisoners were not responded to or dismissed. Prisoners had complained, for example, about staff ignoring a distressed woman in the dining area but the committee chair had simply said staff would not have done so. Interactions between staff and prisoners were mostly good but we observed a number of occasions where staff responded poorly to prisoners. Managers and some officers acknowledged that the behaviour of some staff caused concern but there was little to indicate that these staff were either challenged by managers or reported to managers by other staff.
We repeat the recommendation.

Personal officers

- 2.35 **Personal officers should receive a specific job description, together with training and guidance about their role and what is expected of them. (2.35)**
Partially achieved. An excellent personal officer policy clearly detailed what was expected of personal officers. However, no additional training had been carried out and the policy's section on training simply referred officers to 'notices to staff' about the offender assessment system (OASys) and the HMIP *Expectations*.

Further recommendation

2.36 All personal officers should receive training to carry out the role.

2.37 **Those with specific care needs, such as older prisoners and those with disabilities, should have regularly monitored care plans as part of their wing files. (2.36)**
Not achieved. Although the disability liaison officer (DLO) worked hard to identify and address the needs of older prisoners and those with disabilities, there were no formal care plans. Further needs were addressed informally by prisoners approaching the DLO when necessary. **We repeat the recommendation.**

Bullying and violence reduction

2.38 **Restrictions on visits should not be included as part of the anti-bullying strategy. (3.12)**
Achieved. The strategy had been revised and no longer included a three-stage approach where prisoners on the third stage had restricted visits. It still remained an option for senior officers to review the incentives and earned privileges (IEP) level of suspected bullies.

2.39 **The anti-bullying register should be accurate and kept up to date. (3.13)**
Achieved. The register was held electronically and updated by the safer custody team. It was accurate and up to date.

2.40 **Prisoners should be widely and regularly consulted on ways to improve safety. (3.14)**
Partially achieved. Two prisoner forums in November 2008 and January 2009 had discussed prisoners' perceptions of safety. The main themes from these and the findings from 155 'discharge bullying questionnaires' completed in 2008 were analysed and a subsequent report had been completed in March 2009 (see additional information). The survey questionnaire was offered to all prisoners being discharged but only 25% of women had completed one in 2008. There had been no survey of all women in recent years to ask about their perceptions of safety. A Listener regularly attended the safer custody meetings. Although safer custody was not a standing agenda item at regular prison forums, the monthly safer custody meeting had identified issues relating to safety for discussion at the forums.

Further recommendation

2.41 A survey of all prisoners should be completed to establish their views on safety.

2.42 **A clear definition of bullying should be set out in the community safety policy to make clear to staff which type of incidents should always be dealt with within the formal strategy. (3.15)**
Achieved. Clear definitions were now included in the violence reduction policy.

Additional information

2.43 Safer custody procedures seemed to be working well. Safer custody meetings were regular, with a comprehensive agenda, and reviewed a good range of indicators of safety, including suspicious injuries. Weekly meetings also took place to consider the needs of individuals at risk or who were particularly challenging and strategies for their management were agreed.

- 2.44 The violence reduction policy had last been updated in July 2009 and was being reviewed. Reported anti-social behaviour was investigated and three women were being monitored, all because of fighting. Of the 23 people monitored in 2010, nine (39%) were young adult women under 21, who represented only 6% of the total population. There was, however, no particular emphasis on young women in the local policy. One safer custody meeting had discussed integrating young women on to the adult units.
- 2.45 The few monitoring booklets we looked at contained regular entries and reviews. Prisoners subject to monitoring were required to complete a workbook, described as the anti-social behaviour programme, which aimed to make them reflect on the impact of their behaviour. Some completed workbooks made reference to completed exercises at case reviews as a tool to discuss behaviour. Support books were also completed for victims.
- 2.46 Some key themes from the two forums held in 2008 and 2009 included prisoners' concerns about the quality of investigations and the need for more staff to patrol the units. Some had raised concerns about the safety of foreign national and gay women prisoners. As the forums were voluntary, it was not clear how representative they were of the general population. There was no record of the number of women attending the first forum and only 19 (8%) had attended the second.
- 2.47 Ninety per cent of the 155 women who had completed the discharge bullying questionnaire in 2008 reported feeling safe or very safe. Despite little supervision on most units, the prison felt a generally safe place. There were few recorded fights or assaults.

Further recommendation

- 2.48 The violence reduction policy should outline any particular approaches needed for the management of young adult women.

Self-harm and suicide

- 2.49 **More counselling services should be provided to meet the needs of women. (3.25)**
Achieved. A professional counsellor, funded through the primary care trust, continued to provide a well used service for 10 hours a week, which was the same as in 2007. Of the 19 women on the waiting list, three had been waiting six weeks. In a new service since 2007, Staffordshire Women's Aid visited fortnightly to support women who had been victims of abuse and domestic violence. Only one woman was waiting to be seen. The agency had also provided some training for staff. Women in Prison provided a fortnightly service and support was also available for women from Birmingham and Stoke who were due to be released and who had been sex workers. Health care, the chaplaincy and counselling, assessment, referral, advice and throughcare (CARAT) staff also provided counselling.
- 2.50 **Arrangements should be put in place for Listeners to have an opportunity to meet new receptions shortly after their arrival. (3.26)**
Not achieved. Listeners did not work in reception or routinely visit the induction unit to meet new arrivals. One Listener had previously worked as an orderly in reception and said this had worked well as she was able to identify women who appeared distressed. She had not been replaced by a Listener when she moved jobs. Listeners participated in the induction programme every Wednesday but this could be several days after women had arrived.
We repeat the recommendation.

- 2.51 **The barred gate should be removed from the Haven and the protocol for its use revised to emphasise its purpose as a supportive environment for women who need additional help in a crisis. A record should be kept of its use. (3.27)**
Not achieved. The Haven did not have a clear role. Minutes of several safer custody meetings indicated that concerns had been raised about misuse of the Haven and the conditions had been described as not fit for purpose. A recent notice to staff authorised use of the Haven for the constant supervision of a woman in crisis as an alternative to the care and separation unit. It also allowed the Haven to be used as a care suite for Listeners and as a meeting place for Listeners and Samaritans. The key for the Haven was held in a sealed pack and each time the seal was broken was reported to the deputy governor. The deputy governor had decided that the barred gate would not be removed. Little use was made of the Haven to care for women at risk, with a log started during the inspection recording just one use. Staff recalled four other uses since November 2009, two of which had been for just a few hours. The direct telephone line to the Samaritans had been removed and there was no portable telephone (see below).
We repeat the recommendation.
- 2.52 **Prisoners should be able to contact the Samaritans free of charge at any time. (3.28)**
Partially achieved. Prisoners could contact the Samaritans from unit telephones free of charge but this service was not well advertised. Listeners said posters advertising the service had previously been displayed. There was still no portable telephone with a direct line to the Samaritans that women could use in private. As in 2007, we were told one was on order.

Further recommendation

- 2.53 The free telephone lines to the Samaritans on the living units should be advertised and a portable telephone allowing free direct calls to the Samaritans provided.

- 2.54 **There should be sufficient first aid trained staff working each night. (3.29)**
Not achieved. Senior officers acted as orderly officers at night but plans to provide them all with first aid training had not been achieved. There was still no strategy to ensure there was always a first aid-trained member of staff working at night.
We repeat the recommendation.

Applications and complaints

- 2.55 **The applications policy should be simplified so that it is clearly understood by staff and prisoners. (3.116)**
Not achieved. The policy first given to inspectors pre-dated the previous inspection. When we questioned this, we were given the same document with an amended date on the front cover. Senior managers insisted that there was an amended policy but could not provide a copy as the manager responsible was on holiday. This did not suggest there was a clearly understood policy.
We repeat the recommendation.
- 2.56 **Application and complaint forms should be freely available on residential units. (3.117)**
Achieved. Although application and complaint forms were not freely available on all units, stocks of both were kept in the central prisoner-run Signpost office that women could go to during much of the day and evening.
- 2.57 **The request and complaints log should be clear and concise. Different complaints should not be put on the same number. (3.118)**

Achieved. Both a paper and an electronic log were well and clearly maintained, with each complaint given an individual number.

- 2.58 **Applications and complaints should be replied to using a suitable form of address, courteously, in plain language, answering fully the issues raised. (3.119)**
Not achieved. Many of the application responses shown to us by women did not use a suitable form of address and did not always fully answer the issues raised. The quality of complaint responses varied. Most were polite and most but not all used a suitable form of address. A number did not fully address the issue raised, particularly those responding to release on temporary licence (ROTL) decision appeals where women did not believe additional information had been taken into account in the original decision.
We repeat the recommendation.
- 2.59 **Confidential access enquiries should be logged and monitored, with a copy of the reply held centrally. (3.120)**
Achieved. All confidential access complaints were logged and monitored in the same way as routine complaints, with copies of replies held centrally.

Legal rights

- 2.60 **A log should be kept of all applications for legal advice monitoring the date of the application and the date seen by legal services staff. (3.125)**
Not achieved. Legal services were now provided by offender management unit (OMU) staff and applications for legal services could be dealt with by any one of eight offender supervisors. No separate central log was kept of the work completed.
We repeat the recommendation.
- 2.61 **Sufficient time for legal services staff to carry out their duties should be allocated to the staff profile. (3.126)**
Achieved. Legal services work was now undertaken by offender supervisors alongside other tasks. Two offender supervisors had received some training several years previously. The service appeared sufficient and there were no outstanding applications.
- 2.62 **Legal services staff should receive some advice and guidance about immigration law. (3.127)**
Achieved. The new arrangements meant that prisoners requiring immigration advice were referred by offender supervisors to the foreign national officer. Good links had been made with the Immigration Advisory Service and the UK Border Agency held regular surgeries (see section on foreign nationals).
- 2.63 **The legal services office should be equipped with a telephone. (3.128)**
No longer applicable. The work was now handled by the OMU.

Faith and religious activity

- 2.64 **The hours of the Muslim leader should be increased to meet the need of prisoners. (5.53)**
Achieved. The Muslim chaplain's hours had been increased and she was now employed for 15 hours a week.
- 2.65 **A Pagan leader should be employed. (5.54)**
Achieved. A Pagan chaplain was employed for one hour a week.

- 2.66 The chapel should be freely accessible to all women prisoners to allow contemplation, reflection and prayer. (5.55)
Achieved. The chapel was open throughout the core day when a chaplain was on duty.

Substance use

- 2.67 Joint work between health services, the CARAT service and the mental health in-reach team should include multidisciplinary meetings to plan and coordinate women's care. (3.139)
Achieved. There were weekly multidisciplinary team meetings of CARATs, health care and primary mental health staff. Clinical reviews were undertaken with health care, CARATs and the relevant woman. There were also meetings with safer custody where women with complex needs were discussed. Joint interventions with health care, such as relaxation classes, had started. A CARAT team member was available three days a week to discuss women's needs during methadone administration.
- 2.68 The mental health in-reach team's skills mix should include dual-diagnosis expertise. (3.140)
Not achieved. There were no nurses with dual diagnosis expertise in the primary mental health team or mental health in-reach team.
We repeat the recommendation.
- 2.69 Mandatory and voluntary drug testing should not be conducted by the same officers. (3.141)
Achieved. There was clear demarcation between mandatory drug testing (MDT) and compliance-based drug testing (CBDT), with named staff detailed to undertake testing for either MDT or CBDT.

Additional information

- 2.70 The MDT rate was 0% with a target of 10%. All positive tests were related to medication use and this had been confirmed with health care staff.
- 2.71 The integrated drug treatment system (IDTS) had been introduced. Nursing staff had undertaken Royal College of General Practitioners (RCGP) part 1 and the GP had completed RCGP part 2. The two nurse prescribers worked under clinical management plans and most women were on a detoxification programme. About 40 women were on methadone and no one was prescribed Subutex. Symptomatic relief was available. Medicines were administered from a separate IDTS suite. There was no forum where women on IDTS could discuss their concerns and prisoners had mixed views about the service. Their main concerns were about the speed of detoxification, the lack of opportunity to change from methadone to Subutex and the time methadone was administered.

Further recommendation

- 2.72 A forum should be established to consult women and gain feedback about integrated drug treatment system services.

Diversity

- 2.73 **Disabled prisoners should be involved in the development of a disability policy that includes the arrangements to help the establishment carry out its duties under the DDA. (3.39)**
Achieved. The disability policy detailed how Drake Hall would ensure that obligations under the Disability Discrimination Act were to be met. It had been drafted primarily by the DLO, who had consulted prisoners through the prisoners with disabilities forum.
- 2.74 **The diversity manager should have an accurate job description, suitable training and time and resources to carry out the duties required to ensure that the needs of prisoners are met. (3.40)**
Achieved. The diversity manager was now full time, had a job description and had received training including the Prison Service diversity training for managers.
- 2.75 **The disability liaison officer should have a job description, appropriate training and sufficient time for the work so that the needs of disabled prisoners are appropriately met. (3.41)**
Achieved. The DLO post was now full time, which was helpful as 78 women had declared themselves to have a disability. She had a comprehensive job description but had not received any training, mainly because the Prison Service did not provide national training and no other training opportunities had been explored. Despite the lack of training, it appeared that the needs of prisoners with disabilities were met.

Further recommendation

- 2.76 The disability liaison officer should receive appropriate training.
- 2.77 **Prisoners with disabilities and older prisoners should be consulted about their individual needs and care. (3.42)**
Achieved. Prisoners with disabilities and older prisoners spoke highly of the support and help they received, particularly from the DLO. All met the DLO shortly after arrival and good efforts were made to make appropriate adjustments where necessary. Prisoners were regularly consulted through the monthly prisoners with disabilities forum.
- 2.78 **Monitoring should be introduced to ensure that prisoners from minority groups are not being victimised or excluded from activities. (3.43)**
Not achieved. Only black and minority ethnic prisoners were subject to monitoring, with nothing covering other minority groups such as prisoners with disabilities, older prisoners and gay or bisexual prisoners.
We repeat the recommendation.

Race equality

- 2.79 **Race equality should be monitored and managed by a multidisciplinary committee dealing only with this issue. (3.55)**
Achieved. Although race equality was managed along with all aspects of diversity by the diversity and race equality action team (DREAT), support for black and minority ethnic women had improved following the creation of a diversity team. All members of the team attended the DREAT, as did a cross-section of prison staff and external representatives. Minutes of

meetings showed the team considered all aspects of race equality, including SMART monitoring, racist incident report investigations, equality impact assessments and training issues. The race equality senior officer presented a report at each meeting.

- 2.80 **The race equality action team should include external representation. (3.56)**
Achieved. External representatives had recently been included in the DREAT membership.
- 2.81 **The role of race equality officer should be full time, there should be an up-to-date job description and the post-holder should receive the necessary training. (3.57)**
Partially achieved. The full-time race equality senior officer (RESO) managed the diversity team, who were well known and respected by prisoners. The RESO had a job description and had undertaken the Prison Service 'Challenge it, Change it' diversity training as well as race equality officer awareness and managing and promoting race equality training. He had not received investigations training. The foreign national officer and deputy race equality officer were knowledgeable and responsive to prisoners but had not received any other training apart from the 'Challenge it, Change it' course. The deputy race equality officer carried out investigations into racist incident reports but had not received any investigations training.

Further recommendation

- 2.82 All diversity officers should receive appropriate training.
- 2.83 **Prisoner diversity representatives should receive appropriate training and support and should meet regularly with the race equality officer other than at race equality action team meetings. (3.58)**
Achieved. Prisoner diversity representatives received comprehensive in-house training, met regularly with diversity staff and continued to attend DREAT meetings.
- 2.84 **All staff should receive race equality and diversity training. (3.59)**
Partially achieved. About a quarter of the population were black and minority ethnic women. Most described relationships between prisoners as generally good but they complained about the attitude of some officers. Eighty per cent of staff had attended the 'Challenge it, Change it' course. However, there continued to be a lack of general support from residential staff for black and minority ethnic and foreign national women, many of whom were unnecessarily referred to the diversity team for help with issues that did not require specialist intervention. Many white British women also complained about lack of respect and support from staff.

Further recommendation

- 2.85 All staff should receive training that enables them to understand and actively engage with all racial and ethnic groups.
- 2.86 **There should be regular forums for black and minority ethnic women prisoners. (3.60)**
Not achieved. Black and minority ethnic women were particularly dissatisfied with the food and canteen items but had no general forums where they could raise these issues. Prisoner representatives attended DREAT and foreign national committee meetings but it was unclear how issues raised and actions taken were cascaded to other women.
We repeat the recommendation.
- 2.87 **Racist incident complaints should be more rigorously pursued and completed investigations should contain full evidence of all interviews. (3.61)**

Achieved. Racist incident complaints were fully investigated and included details of all interviews. External quality checks of completed investigations by a scrutiny panel were soon to be introduced.

2.88 There should be effective interventions for those found guilty of racist misconduct. (3.62)

Not achieved. There were no formal interventions for those found guilty of racist misconduct. **We repeat the recommendation.**

2.89 Displays should reflect the diversity of the population and regular events organised to celebrate racial, ethnic and cultural diversity. (3.63)

Partially achieved. No displays on accommodation units reflected the diversity of the population, although frequent events were organised to celebrate diversity.

Housekeeping point

2.90 Displays should reflect the diversity of the population.

Foreign nationals

2.91 A multidisciplinary committee should be introduced to ensure that the needs of foreign national prisoners are represented and acted on. This should involve external representatives. (3.79)

Partially achieved. Monthly foreign national committee meetings (FNCMs) had been introduced in April 2010. These were chaired by a senior manager and attended by diversity staff, residential managers, the Independent Monitoring Board, the Hibiscus worker and prisoner representatives. Monthly foreign national forums chaired by diversity staff were open to all foreign national women. Minutes of forums and FNCMs indicated that foreign national women's needs were often addressed but that some issues, such as dissatisfaction with the canteen and underwear items, were raised repeatedly without resolution. The FNCM did not always discuss issues raised by women at other meetings. Minutes of foreign national forum meetings in June, July and August 2010 recorded complaints about officers' lack of respect towards prisoners but there had been no subsequent discussion of this at the FNCM. The Hibiscus reports of April, May and June 2010 also recorded an increase in women, particularly mothers, asking for emotional support and those for April and May 2010 an increase in women requesting help with resettlement issues but neither topic appeared to have been raised at the FNCM.

Further recommendation

2.92 All areas of concern raised by foreign national women should be made known to senior managers and the foreign national committee meeting should take action to address and resolve these.

2.93 Staff should be aware of the distinct needs of foreign national prisoners and be trained to help them. (3.80)

Not achieved. No specific training in the needs of foreign national prisoners had been provided (see further recommendation at paragraph 2.85).

- 2.94 **All foreign national prisoners should be seen individually on arrival and a record kept of their immigration status, domestic situation and any other identified need. (3.81)**
Achieved. The foreign national officer saw all foreign national women on arrival to identify their immigration and domestic status. She kept a record of contact with, and action taken on behalf of, each woman.
- 2.95 **The pay situation of foreign nationals should be reviewed to ensure that they are not disadvantaged compared to other women and to enable women to maintain family ties. (3.82)**
Not achieved. While many women who did not have family or friends to send in money had to manage on a limited income, this still impacted disproportionately on foreign national women. Many foreign national women had an income of £9 a week after paying for their television. They had few opportunities to work outside and many did not have the language or numerical skills to get the better paid prison work. Many also continued to try to send money home to their families while having to buy telephone credit for overseas calls and clothes from catalogues (see section on accommodation and facilities). The FNCM minutes for July and August 2010 recorded that foreign national women 'tend to have less money'.
We repeat the recommendation.
- 2.96 **Information should be provided in a range of languages to meet the needs of the population. (3.83)**
Not achieved. There were no notices in reception in languages other than English and nothing to let new arrivals know about interpreting services. There was a file of some translated basic information but this was not advertised and did not include all the relevant languages. Reception staff said they had no information in other languages and that this was provided on the first night and induction unit. Some first night and induction information, including the first night 'talk', the offender compact and induction booklet, was available in several, but not all the required, languages. There was nothing, for example, in Vietnamese even though eight of the foreign national women were from Vietnam. Prisoner information booklets were available in 21 languages but the information and guidance for immigration booklets were out of date. Information displayed on accommodation units was all in English (see section on accommodation and facilities).
We repeat the recommendation.
- 2.97 **A senior manager should meet regularly and formally with the Hibiscus worker to discuss and support her work with women and to help develop service delivery. (3.84)**
Partially achieved. Liaison with Hibiscus had improved and the worker met regularly with the foreign national officer but not a senior manager. She attended FNCMs and the large amount of work she undertook with individual foreign national women was detailed in comprehensive reports available to senior managers. Some issues raised in these reports were discussed and acted on but others were not. (See paragraph 2.91.)
- 2.98 **Foreign national women should be encouraged to apply for release on temporary licence and managers should take decisions only on the basis of an individual risk assessment. (3.85)**
Not achieved. Foreign national women were invited to apply for ROTL but many said there was no point in doing so. Minutes of the FNCM in April 2010 stated that women at Drake Hall were 'less likely' to be granted ROTL because it was a closed prison. The foreign national policy stated that a detainee was 'very unlikely' to be granted ROTL due to 'too great' a risk of absconding. Minutes of the DREAT meeting of 19 August 2010 recorded 'that community visits for foreign national prisoners may be conducted with handcuffs', although FNCM minutes from 5 August said women 'would be escorted without handcuffs'. This indicated that the situation

was unclear and that there remained an unwillingness to examine individual risk.
We repeat the recommendation.

Additional information

- 2.99 There were 38 foreign national women from 18 countries. One woman was an immigration detainee and 16 women had been served with an IS91 notice (authority to detain). Approximately 75% of the women were serving sentences for drug-related offences. Regular immigration surgeries were held and diversity staff ran surgeries for foreign national women every weekday morning.
- 2.100 A foreign national needs analysis in March 2010 had been based on a small number of women (see section on main recommendations). Sixty-five per cent of respondents did not think that the OMI supported foreign national women and none reported using the children and families services. Ninety-five per cent had received support from the Hibiscus worker, 75% said reception and induction information should be provided in different languages and 66% said foreign national women should be given more support.
- 2.101 Prisoners and staff suggested that some staff were reluctant to use telephone interpreting services and this was reinforced by the minutes of numerous meetings. Prisoners were paid 60 pence for interpreting for others. The Hibiscus report of April 2010 stated that some important information had 'been misinterpreted and in some areas, for example health care matters, it is not always appropriate for prisoners to do interpreting'.

Further recommendations

- 2.102 Senior managers should ensure that all staff are confident in using the telephone interpreting service and use should be monitored.
- 2.103 Prisoners should have access to accredited translation and interpreting services whenever accuracy and confidentiality are a factor.

Health services

- 2.104 **Consultations with patients should take place in rooms with adequate soundproofing to ensure confidentiality. (4.31)**
Partially achieved. Action had been taken to improve sound proofing of the treatment room and an alternative consultation room was used more frequently. Consultations we saw taking place in the treatment room were frequently disrupted and lacked confidentiality.

Further recommendation

- 2.105 Confidentiality and minimal disruption should be maintained during the morning triage sessions.
- 2.106 **Simple information on health and health services in relevant languages should be widely available throughout the prison, including reception. (4.32)**
Partially achieved. There was a range of information in the department and some at the prisoner-run Signpost office. The health care information leaflet could be provided in languages other than English. Health care information was not displayed throughout the

prison, although there were plans to introduce notice boards in some houses. (See repeated recommendation at paragraph 2.96.)

2.107 Other prisoners should not be used to interpret for healthcare matters for patients who do not speak English without their explicit consent. (4.33)

Partially achieved. Health care staff had access to telephone interpreting services but there was no record of how often these were used. Staff said interpreters from within the prison were used more often and prisoners were asked to sign consent forms agreeing to this. (See further recommendation at paragraph 2.103.)

2.108 Healthcare policies and procedures should be up to date and regularly reviewed. (4.34)

Achieved. A range of policies, some of which were prison-specific, had been developed by South Staffordshire Primary Care Trust (PCT) but it was not easy to access the PCT intranet and there was no clear process for staff to sign that they had read and understood the policies.

Housekeeping point

2.109 Staff should be required to sign that they have read and understood the health care policies.

2.110 Systematic monitoring and quality assurance of chronic disease management should be introduced. (4.35)

Partially achieved. Life-long conditions were adequately monitored and there was a named nurse for asthma and coronary heart disease. Audit information was collated and sent to South Staffordshire PCT. Recall processes had not been fully established as the electronic waiting list system was used mainly for case management.

Further recommendation

2.111 A robust recall system for women with long-term conditions should be implemented.

2.112 Women prisoners should be systematically consulted to allow feedback and suggestions about health services. (4.36)

Partially achieved. The quarterly health care forum had been established in April 2010 and was attended by the head of health care, the Independent Monitoring Board (IMB), a governor and prisoners. However, women did not feel their concerns were taken seriously, a perception that was reinforced by some of the members. There were plans to change the format of the forum.

Further recommendation

2.113 Feedback and suggestions should be fully considered and used to improve health services for women.

2.114 Steps should be taken to identify and minimise any barriers to health services and provide assurance of fairness to all. (4.37)

Partially achieved. A range of clinics was available in the department and access to external appointments was generally satisfactory. Action had been taken to improve waiting times. The health needs assessment did not indicate that black and minority ethnic and foreign national women's needs had been reviewed.

Further recommendation

2.115 There should be a health needs assessment for black and minority ethnic and foreign national women.

2.116 **A member of staff with sufficient knowledge, experience and seniority should act as the older person lead. (4.38)**

Achieved. The identified nurse for older prisoners was also the disability liaison nurse and there were good links with the DLO. Prisoners were positive about the service.

2.117 **Prisoners should be able to complain about health services in confidence and information on how to use the NHS complaints system should be clearly displayed throughout the prison. (4.39)**

Not achieved. Most complaints were made through the prison complaints system or through the health care forum, which did not provide confidentiality. Information about the Independent Complaints Advisory Service was available and the Patient Advice and Liaison Service was advertised in the health care department, although not more widely around the prison. Not all prisoners knew how to make a complaint.

We repeat the recommendation.

2.118 **Responses to health services complaints should be in plain English, legible, respectful and acknowledge the concerns of the prisoner. (4.40)**

Partially achieved. Complaints were responded to in a reasonable timescale, usually by the head of health care. Not all acknowledged the issues raised and many were deemed unfounded by the investigating manager. Women said their complaints were not always taken seriously and there was a reluctance to make written complaints. There was no evidence of strategic monitoring of complaints or feedback from complaints received at South Staffordshire PCT.

Further recommendations

2.119 Responses to health care complaints should fully address the issues raised.

2.120 A robust system should be established to ensure that prisoners can raise issues or make complaints verbally or in writing.

2.121 Strategic monitoring of all health care complaints and trends, including those to South Staffordshire Primary Care Trust, should be used by clinical staff to identify lessons learned and improve services for prisoners.

2.122 **Staff should be able to access external clinical supervision. (4.41)**

Achieved. Health care staff had access to internal and external clinical supervision but few took advantage of it.

Further recommendation

2.123 The uptake of clinical supervision should be promoted among health care staff.

2.124 **Inefficient deployment of nurses to non-nursing duties, such as supervision of cleaning, chaperoning the GP and pharmacy administration, should be minimised. (4.42)**

Partially achieved. The situation had improved following the appointment of an administrator but nurses still undertook a significant amount of pharmacy administration, such as stock checks and ordering medicines.

Further recommendation

2.125 Nurses should be relieved of pharmacy duties in order to undertake clinical activities with patients.

2.126 **All clinical records should conform to professional guidance from the regulatory bodies. (4.43)**

Partially achieved. Record-keeping was generally satisfactory but SystmOne was not used to its best effect, which hampered multidisciplinary communication.

Further recommendation

2.127 Action should be taken to ensure that all health care staff can use SystmOne effectively.

2.128 **All new arrivals should have their immediate health and social care needs identified, documented and responded to, and all should have a further comprehensive health assessment within 72 hours of arrival. (4.44)**

Achieved. All new arrivals were given a full health screen in reception using SystmOne and an appointment was made with the GP within 72 hours when necessary.

2.129 **Clinical triage algorithms should be used by nursing staff to ensure consistency of advice and treatment to prisoners. (4.45)**

Partially achieved. Templates were available and well used on SystmOne but there was not a full range of clinical triage algorithms for nurse triage and not all nurses had received training for minor injuries or nurse triage.

We repeat the recommendation.

2.130 **Patients should be able to see a female GP and female psychiatrist easily and this should be advertised and made clear to them. (4.46)**

Not achieved. There was no routine service and a female GP and female psychiatrist were available only on request. This was not widely advertised and not all prisoners were aware of it.

We repeat the recommendation.

2.131 **Healthcare should maintain emergency childbirth equipment and ensure staff are trained in its use. (4.47)**

Partially achieved. Emergency childbirth equipment was available in the department but not all health care staff knew where it was kept. No nursing staff had been trained in emergency childbirth.

Further recommendation

2.132 All health care staff should be trained in emergency childbirth.

2.133 **Patients should have access to the full range of sexual health advice, screening and treatment in line with NHS targets. (4.48)**

Achieved. Contraception and sexual health advice was available and a chlamydia screening clinic and smear clinic were run. A comprehensive poster was displayed in the health care department. Monthly access to genito-urinary medicine (GUM) was about to start.

2.134 Barrier protection should be freely available. (4.49)

Partially achieved. Barrier protection was available but only on request from the health care department or reception.

Further recommendation

2.135 Access to barrier protection should be confidential.

2.136 Women with injuries and disabilities should have access to advice and treatment from a physiotherapist. (4.50)

Achieved. A pilot physiotherapy project was running until March 2011. It offered a good service and waiting times were acceptable. There were good links with the gym. Referrals were made by the GP. Women could not self refer, although this was under review.

2.137 All eligible women should have access to the national breast screening programme. (4.51)

Not achieved. Access to the national breast screening programme at the local hospital was poor. There were 14 women waiting and only two had been screened to date in 2010. Discussions with the local hospital to address this had recently started.

We repeat the recommendation.

2.138 Women with disabilities should receive an occupational therapy assessment, and equipment and adaptations provided without delay. (4.52)

Achieved. Women could see an occupational therapist when required. They said they received any equipment in good time and that adaptations were made to their rooms when necessary, such as following surgery.

2.139 The service level agreement for the pharmacy service should ensure sufficient pharmacist and technician time to undertake all appropriate tasks, including development and review of policies, stock management, clinical audit and medication reviews. (4.53)

Partially achieved. Pharmacy services had been provided by Lloyds Pharmacy since October 2008. There was access to a pharmacist for four hours a month and to a technician three hours a week. The medicines and therapeutics committee was responsible for developing and reviewing policies. Availability of stock was adequate but waste management was poor and an excessive number of products were waiting to be returned to the pharmacy. Audit of waste management had just started. There were expired controlled drugs that had not been destroyed.

Housekeeping point

2.140 Action should be taken to dispose of expired or unused medication and expired controlled drugs should be destroyed.

2.141 Prisoners should have access to the advice of a pharmacist. (4.54)

Achieved. Medication reviews were available but not widely advertised and many women did

not know they could ask to see the pharmacist. The pharmacist saw about two women each time she attended Drake Hall.

Housekeeping point

2.142 The availability of medicine reviews by the pharmacist should be more effectively promoted.

2.143 **Requests for stock and prescriptions not on the agreed list or not within the prison formulary should be queried by the pharmacist and the information used to inform regular reviews of prescribing trends. (4.55)**

Achieved. Prescribing trends were generated electronically and, where relevant, the pharmacist discussed issues with the GP. There was an agreed prescribing formulary.

2.144 **All prescriptions issued should be faxed through to the pharmacy (clearly marked 'for information only' if dispensing is not required) for checking by a pharmacist to maintain complete patient medication records for all prescribed medication and to enable regular audit of faxes against original prescriptions. (4.56)**

Partially achieved. Prescriptions were faxed to the pharmacist. The pharmacist checked original prescriptions when attending the prison but not against the fax. Formal audits were not completed, although any discrepancies were checked.

Further recommendation

2.145 There should be a system to enable regular audit of original prescriptions against faxed prescriptions.

2.146 **Patients should be able to collect their medicines in privacy. (4.57)**

Not achieved. While queues in the health care department and IDTS suite were managed, women could not collect their medicines in private and those collecting in possession medicines had raised this as a concern at the health care forum.

We repeat the recommendation.

2.147 **Simple medicines not requiring prescription, including basic analgesia, should normally be issued in possession. (4.58)**

Achieved. In possession medication, including analgesia, was available.

2.148 **Risk assessment for prescribed medicines to be held in possession should be systematic, multidisciplinary and conclusions documented and regularly reviewed. (4.59)**

Partially achieved. In possession risk assessments took place during the reception screen and we observed relevant discussions about in possession during a GP clinic. However, the in possession policy was out of date and there was little evidence of any ongoing review and assessment of in possession medication.

Further recommendation

2.149 There should be regular reviews of in possession medication and these should be recorded on SystemOne.

Housekeeping point

2.150 The in possession policy should be updated to reflect changes in practice.

2.151 **There should be a more appropriate range of patient group directions to enable supply of more potent medication by the nurse and avoid unnecessary consultations with the doctor. (4.60)**

Achieved. The wide range of patient group directions was about to be reviewed. There were two nurse prescribers whose knowledge and skills were used appropriately.

2.152 **More space should be provided for the dental surgery so that necessary equipment can be accommodated safely, in line with infection control requirements and in a way that does not hinder communication between patient and dentist. (4.61)**

Not achieved. Although there was a refurbishment programme, changes to the dental suite had not progressed.

We repeat the recommendation.

2.153 **Dental services provision should meet the need for oral health promotion and dental health treatment and care and should be sufficient to maintain the waiting list at reasonable levels. (4.62)**

Achieved. Additional clinics had been provided and dental waiting lists were now shorter.

Some oral health promotion had been provided and more was planned when the new provider started in October 2010.

2.154 **Mental health services should be reviewed so that women with common mental illness are able to receive the full range of appropriate multidisciplinary treatment and care as set out in National Institute for Health and Clinical Excellence (NICE) guidelines. (4.63)**

Partially achieved. Mental health services had been reviewed. Women had access to primary and secondary mental health services and a range of support. There was also access to social work, occupational therapy and a psychiatrist but not to a psychologist or learning disabilities expertise.

Further recommendation

2.155 Mental health services should include some provision for women in need of expertise in learning disabilities and psychological support.

Additional information

2.156 The only defibrillators were in health care and the gym, although there were plans to buy another four and West Midlands Ambulance Service was about to provide defibrillation training. Not all health care staff were up to date in their first aid training.

2.157 Five prisoner health trainers had completed their course in May 2010. They worked with about 40 women a week, setting goals to improve health around diet, nutrition, smoking cessation and general fitness. They had excellent working relationships with the gym and some links with the health care department but were not yet used to their full effect.

2.158 A number of women presented with pain as a chronic complaint but there was no pain triage information or care pathway. Apart from analgesia, there were limited interventions for pain

management. Women expressed dissatisfaction with the nurse triage system in the morning and said their health concerns were not always taken seriously.

Further recommendations

- 2.159 Emergency equipment should be available across the site and all health care staff should have up-to-date resuscitation training.
- 2.160 There should be more pain management expertise in the health care team.

Learning and skills and work activities

- 2.161 **The prison should make better use of the information it collects to improve education, training and employment outcomes for prisoners. (5.24)**
Partially achieved. Senior prison managers had not made sufficient use of data and information to evaluate and improve the learning and skills provision and there had been no annual self-assessments to inform improvements. The OLASS education and training contracted provision had been effectively evaluated by The Manchester College management, who had used a wide range of data and information and produced annual self-assessment reports to inform developments.

Further recommendation

- 2.162 An effective annual self-assessment process should be implemented by the prison learning and skills managers to prepare a self-assessment report that informs a quality improvement plan for improvements in the provision.
- 2.163 **The prison and its provider should clarify accountabilities for the provision of information advice and guidance and ensure a wider range of information is used to agree their needs with each prisoner. (5.25)**
Achieved. The OLASS contract for the careers information and advice service (CIAS) had supported the clarification of the CIAS contractor, JHP Training's, accountabilities. There were good links between JHP staff and education, regimes and the OMU to share information about prisoners' learning choices and sentence plans.
- 2.164 **Recruitment to undersubscribed courses should be improved. (5.26)**
Achieved. Education courses were now run in four-week blocks, which better met the needs of shorter-stay prisoners and allowed women access to a range of different subjects. Courses were popular and well subscribed and waiting lists were used effectively.
- 2.165 **Individual learning plans should contain SMART targets. (5.27)**
Partially achieved. Target setting on individual learning plans had improved but not all targets were sufficiently focused on what prisoners needed to do to progress. Tutors and prisoners recorded the activity completed at the end of each session, which did not take enough account of what had been learned. Targets for personal development, such as improved attendance and engaging in discussion, were not routinely set.

Further recommendation

- 2.166 Target setting for prisoners should be further improved to give clearer information about actions required for good progress and include targets for personal development.
- 2.167 **Women attending education and particularly those on Open University courses should have managed access to the intranet. (5.28)**
Achieved. Prisoners on distance learning and Open University courses could have four study support sessions a week. They could also use the secure web-based learning virtual campus all day and in the evening on Thursdays when controlled access to the intranet was available.
- 2.168 **The English for speakers of other languages provision should be developed to meet the immediate needs of prisoners. (5.29)**
Achieved. English for speakers of other languages sessions were offered four times a week, one of which was in foreign national women's work areas (the craft workshop and waste management unit). Good use was made of prisoners' experiences and visual materials to enhance speaking and listening exercises and prisoners enjoyed the sessions.
- 2.169 **The prison should ensure that disruptions to education are minimised. (5.30)**
Achieved. The number of interruptions had considerably reduced. Education class timetabling had improved and individual timetables were produced weekly and effectively communicated to each prisoner. Attendance at education classes was good at around 85%.
- 2.170 **The prison should improve the arrangements for work allocation. (5.31)**
Achieved. Initial allocation to work, education and training courses followed a clear process, as did applications for change of activity. Communications between the CIAS, education, regimes and psychology departments were good and withdrawal from an activity for attendance at behavioural programmes was negotiated effectively.
- 2.171 **The library should monitor the population and education and training programmes to plan the selection of stock. (5.32)**
Achieved. The library had improved its links with the education department and the acquisition of new stock was based on supporting prisoners on education and vocational programmes. The inter-loan library service had considerably improved and books not available in the library were quickly provided through the external central library service.
- 2.172 **The library should increase the availability of newspapers, including foreign papers. (5.33)**
Achieved. The number of newspapers and periodicals available in languages other than English had been increased to reflect the population. New arrivals could request specific titles during the library induction and these were sourced through the external central library service. There were plans to introduce a daily Chinese newspaper.

Additional information

- 2.173 The choice of education courses had been adjusted to take account of the changing needs of the population, the range was good and more personal development courses were run. Achievement of qualifications was good, with an 85% success rate for 2009/10. Accommodation was generally good. The hairdressing and beauty department was well resourced, with good skills development and progression opportunities into employment and through further training using ROTL and/or on release. The provision of distance learning had

been improved. Twenty-four prisoners were following distance learning programmes and four were on Open University courses.

- 2.174 Opportunities to take qualifications relating to skills learned through work had ceased in 2009/10, except in the DHL warehouse. The few prisoners who had already started NVOs were completing them. Skills learned and standards of work achieved were not effectively recognised and recorded.
- 2.175 There were enough activity places, with a good variety of work available. Most areas provided opportunities for supervisory roles requiring higher levels of responsibility but without related accreditation to recognise skills. Around 40 prisoners worked in peer support roles, such as classroom assistants, health trainers, PE activity supervision, Toe by Toe mentors, Listeners and orderlies, and many had been able to take related qualifications before starting these roles. The laundry and DHL warehouse had successfully referred prisoners to employment on release. Some staff in prison work areas held trainer and assessor qualifications but these were not used to benefit prisoners' learning and gaining of qualifications. Cleaning qualifications were not offered and links between work, vocational training and courses such as business start-up for self-employment, community or craft activities on release were not well promoted.

Further recommendation

- 2.176 Ways of prisoners recognising and recording skills learned through work that would be useful on release should be developed.

Physical education and health promotion

- 2.177 **The prison should improve the opportunities to exercise outside. (5.42)**
Achieved. The PE department had improved the opportunities for prisoners to exercise outside, including yoga and Pilates on the grassed area adjacent to the sports hall. Peer health trainers worked with individual women to develop walking programmes.

Additional information

- 2.178 Women were allowed time out of work to attend three gym sessions a week and further sessions were run in the evening and at weekends. There were 14 gym orderlies, most of whom had achieved their gym instructor award and were used effectively to lead staff and peer PE sessions. PE activities were appropriate to the population and included a well attended 'mature divas' class for older women. There were links with health care and remedial programmes were available. There was a good focus on healthy living and a range of appropriate courses and good achievements.
- 2.179 Links with the OMU were insufficiently developed to help inform sentence planning, although there had been recent efforts to improve these.

Security and rules

- 2.180 **Documentation for suspicion drug tests and searches should specify the link to security intelligence. (6.11)**
Achieved. Suspicion drug tests were carried out only further to a local authorisation form

being raised following the submission of a security information report (SIR) and signed off by the security operational manager. Target searches were similarly carried out following intelligence received through SIRs.

- 2.181 **Actions arising from security information reports should be followed through and recorded. (6.12)**
Achieved. Such actions were now consistently recorded on the back of SIRs and signed off when completed.
- 2.182 **Staff should be consistent in their enforcement of dress code rules. (6.13)**
Not achieved. The rules simply stated that underwear garments were not to be worn as outdoor clothing and private parts should be covered in public but individual staff imposed their own standards of what they considered acceptable. This led to extremely inconsistent decisions, particularly from reception staff, about what women could wear and in some cases the imposition of standards that did not reflect those in the wider community.
We repeat the recommendation.
- 2.183 **In line with national security procedures, the procedure of having two morning roll checks should be reviewed. (6.14)**
Achieved. Roll checks were in line with national procedures.
- 2.184 **Prisoners' progression to fully open prisons should not be held up in order to maintain a high prison roll at Drake Hall. (6.15)**
Achieved. There was no evidence to suggest this was happening. Decisions to approve or decline a woman's progression to an open prison appeared appropriate.

Discipline

- 2.185 **Adjudicators should make thorough inquiries into possible defences, always question the reporting officer where prisoners deny the offence and ensure that the accused prisoner has the opportunity to question and challenge any evidence taken into account at the hearing. (6.36)**
Not achieved. A number of adjudications had been inadequately investigated by adjudicators. Notes from the governor's quality assurance checks were referred to at the quarterly adjudication review meetings. These had also identified some areas for improvement, including prisoners not being given the opportunity to question evidence or asked about mitigation following a finding of guilt. The appeals procedure was not always explained.
We repeat the recommendation.
- 2.186 **The adjudications review meetings should quality-check adjudications by examining a sample of cases to learn lessons, encourage good practice and identify training needs. (6.37)**
Not achieved. The governor had chaired one of the previous four adjudication review meetings, when scrutiny of procedures had been significantly more thorough. At the other three meetings, the governor's concerns arising from quality checks were referred to and had led to some discussion around improving practice but this was not always completed in a sufficiently critical or analytical way. While there had been some improvements to the quality assurance of adjudications, training needs were not fully identified. Some punishments given at adjudication were excessive. A member of the Independent Monitoring Board had requested in September 2009 that a sample of records of hearings be brought to the review meeting as part of quality assurance procedures. This had not happened and in the meeting in March 2010 the deputy governor had considered that adjudicators and staff would regard such scrutiny as a public criticism of their work. This was not indicative of a willingness to learn and

improve.

We repeat the recommendation.

2.187 Procedures should be in place for healthcare staff to draw any relevant health issues to the attention of adjudicators. (6.38)

Achieved. The health care department was notified of prisoners due for adjudication and records indicated that it was consulted about the prisoner's fitness for adjudication and before punishments of cellular confinement were given.

2.188 The segregation unit should not be used for prisoners punished by loss of association. (6.39)

Achieved. The punishment of loss of association was no longer used as it was a difficult punishment to enforce unless the prisoner was moved to a unit with staff supervision.

2.189 Collective punishments should not be used. (6.40)

Achieved. There was no evidence that collective punishments were used.

2.190 All authorisations and records of injuries following use of force should be completed. (6.41)

Achieved. Force had been used only twice in the previous 12 months. In both cases, authorisations and forms for recording any injuries sustained had been completed.

2.191 The segregation exercise yard environment should be improved. (6.42)

Not achieved. Apart from a picnic bench, the exercise yard was little changed and remained a stark environment.

We repeat the recommendation.

2.192 Prisoners should not be routinely strip-searched when placed in segregation. Records should be kept recording reasons for such searches and the correct procedure published to prisoners. (6.43)

Achieved. New procedures for full searches of women had been introduced in January 2009 and published to staff and prisoners. Prisoners were given a strip search when placed in segregation only if they were suspected to be concealing illicit items. A record was kept of all full searches, seven of which had taken place in 2009 and nine to date in 2010. Most took place in reception. Two were recorded as having taken place in the segregation unit in 2009 and two to date in 2010. The log identified the SIR completed for each full search. Information given to prisoners located in the segregation had been amended to reflect the changed procedures.

2.193 Information about segregation routines and procedures should be available in a range of languages. (6.44)

Partially achieved. Information about the segregation routines and procedures was available in five European languages and Russian but this did not reflect other nationalities represented in the population. (See repeated recommendation at paragraph 2.96.)

Additional information

2.194 The prison had become a closed establishment in March 2009. There was some suggestion that this had resulted in the prison holding prisoners who were more difficult to manage but there had been no significant increase in the number of adjudications. Between January and August 2010, there had been an average of 36 adjudications a month compared to 35 in the same period in 2009, 23 in 2008 and 36 in 2007. Some adjudications were about minor issues that could have been resolved by different means. More than we normally see related to 'being

disrespectful to staff'. The records of some of these indicated that the staff involved had not handled the incidents in the way described in the personal officer policy, which encouraged officers to ask the prisoner about their behaviour, offer guidance and support and consider giving a verbal or written warning before escalating the incident.

Further recommendation

- 2.195 Staff should use more appropriate strategies and sanctions as described in the personal officer policy when responding to prisoners' behaviour, reserving the use of formal report and adjudication procedures for more serious infractions of the rules.

Incentives and earned privileges

- 2.196 Local information about the operation of the incentives and earned privileges scheme should be available in languages other than English. (6.53)
Partially achieved. Information about the IEP scheme was available in five European languages and Russian but this did not reflect other nationalities represented in the population. (See repeated recommendation at paragraph 2.96.)
- 2.197 The incentives and earned privileges scheme should provide alternative incentives for foreign national prisoners who do not have family support in this country and who are unable to take advantage of community visits. (6.54)
Not achieved. There were no alternative incentives for foreign national prisoners who did not have family support in this country and could not take advantage of community visits.
We repeat the recommendation.
- 2.198 A senior manager should monitor the operation of the incentives and earned privileges scheme by sampling the decisions of boards to check the scheme is operated fairly across the prison. (6.55)
Achieved. Although this was not stipulated in the policy, two senior managers responsible for the residential areas 1 and 2 chaired all IEP boards. This new arrangement had been in place for around eight months and provided an adequate degree of oversight of the operation of the scheme.

Catering

- 2.199 All women working in the kitchen should be given the opportunity to participate in vocational qualifications. (7.9)
Not achieved. NVQs were no longer offered due to lack of funding, although three prisoners were finishing NVQ L2s they had already started.
We repeat the recommendation.
- 2.200 All kitchen workers should undertake the food hygiene course. (7.10)
Partially achieved. All prisoners took the prison 'Highfield' level 1 basic food hygiene course on induction. Kitchen workers who handled food and who had not already achieved the Royal Institute for Public Health level 2 food hygiene course before arriving at Drake Hall were expected to gain this level in their first eight weeks in the kitchen. However, over half of kitchen workers had yet to achieve level 2.

Further recommendation

2.201 All kitchen workers who handle food should have achieved the Royal Institute for Public Health level 2 food hygiene award before starting in that role.

2.202 **Women on the outworker unit should be able to cook for themselves. (7.11)**

Not achieved. Outworkers were given packed lunches but could not cook for themselves on their return. Rather than choosing a microwave meal as previously, prisoners could now select from the daily menu and their meals were kept in heated containers but this was not always satisfactory depending on what time they returned to the prison.

We repeat the recommendation.

Prison shop

2.203 **There should be better consultation with black and minority ethnic and foreign national prisoners about the range of goods available from the shop. (7.19)**

Partially achieved. Minutes of some meetings referred to discussions about canteen provision for black and minority ethnic and foreign national prisoners. Discussion at a DREAT meeting had resulted in pictures of the shop products being made available. The foreign nationals committee had raised the need to introduce a wider choice of music catalogues. However, foreign national representatives had complained at a recent meeting that none of their requests to change canteen items had been actioned. There were few products for black and minority ethnic and foreign national prisoners on the canteen list. There was no specific catalogue of black and minority ethnic products. Some black and minority ethnic prisoners complained about the lack of suitable hair products and black hair treatments were not offered in the hairdressing and beauty salons. Prisoners could request changes to the canteen list quarterly through the prisoner-run Signpost office but there had been no prison-wide survey about canteen provision. (See also sections on race equality and foreign nationals.)

Further recommendation

2.204 The range of products to meet the needs of black and ethnic minority and foreign national prisoners should be improved.

Strategic management of resettlement

2.205 **The resettlement strategy should include reference to the two additional pathways specific to women and services should support victims of abuse or those who have been involved in prostitution. (8.10)**

Achieved. The strategy now included these pathways and some services had begun to be provided.

2.206 **An analysis of the resettlement needs of foreign national women and use of the Hibiscus service should be completed to establish whether the current three days a month is sufficient. (8.11)**

Not achieved. No needs analysis had been undertaken and the level of service remained the same as previously.

We repeat the recommendation.

2.207 Formal communication between sentence planning and Hibiscus should take place to ensure that the needs of foreign national women are addressed. (8.12)

Partially achieved. The Hibiscus project worker provided very useful monthly reports that identified some general trends and issues with resettlement needs for foreign national women and the work carried out with individual women. Some good support was provided. However, there was no clear link with the OMU and managers referred inspectors to the foreign national officer, suggesting that resettlement work for foreign national women was not fully integrated into the work of the OMU and women's sentence plans and was seen too much as a separate diversity issue.

Further recommendation

2.208 A manager from the offender management unit should meet periodically with the Hibiscus project worker to ensure that any general resettlement needs identified for foreign national women are incorporated into the reducing reoffending action plan and that offender supervisors are aware of and help meet the resettlement needs of individual foreign national women.

2.209 The proposals to change the funded transport for all release on temporary licence (ROTL) from trains to coaches should be re-evaluated and used only where it has a minimal impact on the quality of ROTL. (8.13)

Achieved. It had been recognised that the previous proposals to introduce coach travel for ROTL were unfeasible. All ROTL was by rail, for which rail warrants were issued. Unfortunately, the prison could not take advantage of the significant savings available by booking in advance over the internet as it was prohibited from making rail card purchases using a government procurement card.

Further recommendation

2.210 Prisons should be able to use government procurement cards to book specific trains in advance to take advantage of the significant savings available.

Offender management and planning

2.211 Offender supervision should be delivered in line with the offender management unit (OMU) policy document. Records of contact should be up to date. (8.26)

Partially achieved. The OMU policy document was dated 2007 and the introduction of layered offender management, for which Drake Hall was a pilot site, had made much of the document out of date. Layered offender management had introduced a custody plan for all prisoners, with a critical needs analysis completed for those arriving with less than three months left to serve. Every woman prisoner had an allocated offender supervisor who had case loads of approximately 55. No minimum standards for contact had been set for offender supervisors and there was no standard guidance on how or where to record contact. Some contact records were in hard copy on case notes while others were in electronic form on the P-Nomis system but there was no consistent approach. We were satisfied that the introduction of the new system had improved contact. Now that the system had bedded in, there was a need to draw up a new policy that clarified to prisoners and staff the role of the OMU and offender supervisors, including minimum expected contact and contact recording arrangements.

Further recommendation

2.212 A new offender management policy should be produced to clarify the role of the offender management unit and minimum expected contact with offender supervisors and to set out how layered offender management operates at Drake Hall.

2.213 **The management of the OMU should be multidisciplinary. (8.27)**

No longer applicable. This recommendation referred to the establishment of offender management at the time of the previous inspection and the need to involve experienced probation staff in its development. The unit was now well established and, although managed by prison operational managers, a range of staff from different disciplines were appropriately involved in its daily operation.

2.214 **All prisoners should have an up-to-date sentence or custody plan that is developed or reviewed shortly after their arrival at Drake Hall. (8.28)**

Achieved. The introduction of layered offender management had ensured that custody plans were developed for all women. Although many who should have had up-to-date OASys sentence plans arrived without them, most plans were up to date and this was a big improvement from previously. At the time of the inspection, there were about 20 new plans waiting to be completed, most of which dated back no longer than July.

2.215 **Annual sentence plan reviews should include multidisciplinary team input. They should review against targets from the previous year and set SMART targets for the coming year. (8.29)**

Achieved. Although generally only those in formal scope for offender management (layer 3) had fully multidisciplinary boards, others had their plans reviewed at least annually by offender supervisors when targets were reviewed and new ones set taking into account information from a range of sources. We were satisfied this was an appropriate model.

2.216 **OASys assessments should be checked for accuracy and quality. (8.30)**

Achieved. There was a formal system to quality-assure OASys assessments and feedback was provided as necessary.

2.217 **The new traffic lights passport scheme should take account of the needs of specific groups such as foreign nationals, young adults and lifers. (8.31)**

No longer applicable. The traffic light passport scheme, which was about to be introduced at the time of the last inspection, had been superseded by the introduction of layered offender management.

2.218 **Resettlement staffing hours should be protected. (8.32)**

Partially achieved. We were told that resettlement officers had rarely been redeployed to other tasks since the OMU had been set up and new work profiles introduced allowing dedicated resettlement officers based in the unit. More recently, staffing pressures in the prison meant that on most days officer offender supervisors were diverted to cover other tasks such as supervising medications. While this was inevitable on occasions, there was a need to ensure that these interruptions to their core work were kept to a minimum so that the main function of Drake Hall as a resettlement prison and the good work of the OMU was not undermined.

Further recommendation

2.219 Redeployment of offender management unit staff should be kept to a minimum to ensure the effective operation of the unit.

2.220 **Women who are managed as prolific and priority offenders should routinely be made aware of this and any implications for them. (8.33)**

Achieved. Offender management arrangements ensured that the few women identified as prolific and priority offenders were informed and seen by their offender supervisors.

2.221 **At least two lifer days should be held each year. (8.34)**

Not achieved. No lifer days had been held. The prison had misinterpreted this recommendation to mean special family days for lifers, which it had not run, rather than specific days set aside to deal with issues relevant to serving an indeterminate sentence such as the parole process, dealing with licence conditions or what to expect in an open prison.
We repeat the recommendation.

2.222 **Lifer groups should be introduced. (8.35)**

Not achieved. Regular lifer groups were not run.
We repeat the recommendation.

Resettlement pathways

2.223 **Opportunities to enable prisoners to look for external employment should be increased. (8.44)**

Achieved. Prisoners used the secure virtual campus to research local, regional and national job vacancies. Prisoners eligible for ROTL also visited local libraries to use newspapers and Internet job sites.

2.224 **The number of prisoners attending the employability programme should be increased. (8.45)**

Achieved. Attendance was good at the regular four-session employability programme, with around 12 prisoners at each session. The programme was offered 12 weeks before expected release dates. There were not enough places for the number of prisoners released each month but additional individual appointments were also offered by the CIAS provider.

2.225 **Women should have the opportunity to discuss their health needs and be given appropriate information to protect and promote their health as an integral aspect of their resettlement planning. (8.51)**

Achieved. There were weekly discharge clinics and all women were offered the opportunity to attend. Where appropriate, women were prescribed one week's supply of medication that was collected on release. Information about accessing a GP was also available if required.

2.226 **Condoms and other barrier protection should be freely available for women going on home leave or being released without having to ask prison staff. (8.52)**

Not achieved. Condoms and barrier protection were available in the reception suite but only on request.
We repeat the recommendation.

2.227 **A senior officer with responsibility for implementing and coordinating the drug and alcohol strategies should be identified. (8.65)**

Achieved. The establishment drug coordinator was responsible for implementing and coordinating drug and alcohol strategies.

2.228 A thorough needs analysis should be conducted to inform drug treatment programme provision. (8.66)

Achieved. A drugs needs analysis completed in July 2010 contained clear recommendations for improvements for drug and alcohol users. Overall, there was a lack of provision for women whose primary addiction was alcohol and associated training for staff was not in place. The report had been presented to the drug strategy meeting and an action plan was about to be produced.

2.229 The therapeutic community should receive regularly and consistently the number of officer hours each week to allow appropriate officer input and the required voluntary drug testing to take place. (8.67)

No longer applicable. The therapeutic community had closed in March 2010.

2.230 Suitable move-on accommodation should be provided for programme graduates. (8.68)

No longer applicable. The therapeutic community had closed in March 2010.

2.231 The required level of voluntary drug testing should take place. (8.69)

Achieved. Compliance-based drug testing targets were being met.

2.232 The resettlement strategy should clearly state how it plans to deliver the families and children of offenders pathway. (8.84)

Achieved. The reducing reoffending strategy and action plan 2009-10 included an action plan for the children and families pathway that was reviewed and updated at each monthly meeting. A social care officer had recently taken the lead for the pathway.

2.233 Prisoners should be able to undertake general relationship counselling with their immediate family when the need is identified. (8.85)

Not achieved. There was no opportunity for prisoners to undertake general relationship counselling with their immediate family.
We repeat the recommendation.

2.234 The facility to exchange unused visiting orders for extra telephone credit should be published to prisoners. (8.86)

Not achieved. Prisoners could no longer exchange unused visiting orders for telephone credit.

Further recommendation

2.235 Prisoners should be able to exchange unused visiting orders for telephone credit.

2.236 Prisoners should be able to have incoming calls from children or to deal with arrangements for them. (8.87)

Not achieved. There were no facilities for incoming calls from children or to deal with arrangements for them.

We repeat the recommendation.

2.237 A qualified family support worker should be employed to help women maintain relationships with their children and families. (8.88)

Partially achieved. A full-time social care officer was based in the OMU and her name and role were advertised on all accommodation units. She had a job description and spoke to all

new arrivals during induction about the support available, acting as a link between prisoners and families and social services. The officer kept a record of the women seen and action taken. She had been in post for three years but had not been formally trained for this work.

Further recommendation

- 2.238 The social care officer should receive suitable training for her work.
- 2.239 **If Richmond and Plymouth houses are to be retained, an additional telephone should be provided. (3.100)**
Not achieved. Richmond and Plymouth houses still had only one telephone.
We repeat the recommendation.
- 2.240 **Telephones should be placed in booths to allow prisoners to use them in private. (3.101)**
Not achieved. None of the telephones were in booths and calls could not be made in private.
We repeat the recommendation.
- 2.241 **Foreign national prisoners should be able to exchange their visit for one 10-minute call, which should not automatically be lost if they receive a visit but assessed on an individual basis. The allocation of supplementary free calls to enable women to maintain family ties should also be individually assessed. (3.102)**
Partially achieved. Foreign national women were given a free 10-minute monthly call, although many complained that the money given did not actually ensure a 10-minute call. The call was lost if a woman received a visit but could be reinstated by the foreign national officer depending on her individual circumstances. There were no supplementary free calls to enable foreign national women to maintain family ties.

Further recommendation

- 2.242 Supplementary free calls should be given to help women maintain family ties.
- 2.243 **Visitors should be able to book their next visit at the prison. (3.103)**
Achieved. Visitors could book their next visit while at the prison.
- 2.244 **Privilege visiting orders should not be restricted to weekdays. (3.104)**
No longer applicable. Privilege visiting orders were no longer issued.
- 2.245 **A well-run and properly equipped visitors' centre should be provided. (3.105)**
Achieved. A comfortable visitors' centre was staffed by operational support grade officers who identified and offered information to first time visitors.
- 2.246 **The play area in the visits room should be supervised. (3.106)**
Not achieved. The play area was still unsupervised.
We repeat the recommendation.

Additional information

- 2.247 The resettlement needs analysis in 2008 had identified that 71% of prisoners were mothers and that most of their children were cared for by a family member. The children of 8% of these women were in foster care and 7% of women had had a child adopted. Six per cent said they

had no contact with their children. Regular children's days were held during each school holiday. These were managed by officers and lasted a full day, with lunch provided, but were open only to prisoners' own children up to the age of 16 and did not include grandchildren or younger siblings.

- 2.248 The booking line was open for two hours in the evening from Monday to Thursday and some visitors said it was often engaged or went unanswered. There was no facility to leave a number to be called back if the line was busy. Many visitors complained that limited availability meant they had to book their visit some weeks ahead. Senior managers were reviewing the number of visits available.
- 2.249 Not all women could have a weekly visit. Those on the basic level of the IEP scheme could have two monthly visits, those on standard could have three and those on enhanced could have four. Visits took place on Tuesdays and at weekends from 1.30pm to 3.45pm. Visitors were given a number when they booked into the visitors' centre and were called into the prison in groups of 10. Some arrived up to 90 minutes early in order to be in the first group. Visitors then waited to be searched in the locked entrance foyer of the visits area and we saw a group of 17 adults and seven children waiting in the small cramped area with no seating. Few visitors actually arrived in the visits room by 1.30pm and we saw many getting to the room between 15 and 30 minutes late despite arriving at the visitors' centre in good time.

Further recommendations

- 2.250 Children's visits should be available for older children, grandchildren and younger siblings.
- 2.251 All prisoners should be able to receive at least one weekly visit.
- 2.252 Visitors should wait to be searched in an appropriate and comfortable area.
- 2.253 Visits should start at the advertised time.
- 2.254 **An offending behaviour needs analysis that takes account of specific groups of women, such as foreign nationals, young women and lifers, should be completed and inform service provision. Results should be considered alongside need at other women's establishments. (8.97)**
Partially achieved. An offending behaviour needs analysis report had been compiled in 2008 but this had been based on only 10% of the population and limited to OASys data so women serving sentences less than 12 months were not covered. Information by offence type was broken down and needs were analysed across the resettlement pathways rather than whether there were interventions available to deal with specific offending behaviour. Although a significant proportion of the women were identified as having committed violent offences, there was no consideration of whether interventions were needed to address this. Little account was taken of how the diverse needs of different groups of women would be met. Some of the recommendations included the introduction of work focusing on drug importation, alcohol abuse, additional work on finance, benefit and debt and support for women who had been victims of abuse. There was little evidence to support the view in the prison's action plan that women had usually completed relevant interventions before arriving at Drake Hall and that the current provision was appropriate. A new head of interventions agreed there were gaps in provision and was about to commission a new offending behaviour needs analysis. She believed the lack of interventions for women with alcohol problems was a major gap.

Further recommendation

2.255 The forthcoming offending behaviour needs analysis should identify and take into account the diverse needs of different groups of women and the role of Drake Hall in the women's estate.

2.256 **Personal officers should be given time to attend post-programme reviews. (8.98)**
Achieved. Personal officers were able to attend post-programme reviews.

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.

Main recommendations (from the previous report)

- 3.1 Personal officers should get to know prisoners' personal circumstances by actively engaging with them to build up relationships that allow them to record in wing files an accurate chronological account of a woman's time at Drake Hall, her achievements against sentence plan and resettlement objectives and any significant events affecting her or her family. (2.1)
- 3.2 A diversity policy for prisoners should be produced with a senior manager responsible that meets the requirements of anti-discrimination legislation and outlines how the needs of minority groups will be met. (2.2)
- 3.3 The foreign national policy should be based on a comprehensive needs assessment and should include all services available as well as strategies for action and for monitoring outcomes. (2.5)
- 3.4 A new learning and skills strategy should be produced to provide a clear direction for the development of the learning and skills activities based on a training needs analysis and with a detailed implementation plan, with clear targets, review and completion dates. (2.7)
- 3.5 The reducing reoffending strategy should outline the specific needs of different groups of women and how they will be met. (2.9)

Recommendation

To the CEO, NOMS

Strategic management of resettlement

- 3.6 Prisons should be able to use government procurement cards to book specific trains in advance to take advantage of the significant savings available. (2.210)

Recommendations

To the governor

Courts, escorts and transfers

- 3.7 Prisoners with special needs that make travelling in a cellular vehicle inappropriate should be transferred in suitable vehicles. (2.11)

First days in custody

- 3.8 Formal arrangements should be established to ensure that new arrivals consistently receive adequate peer support. (2.14)

- 3.9 First night procedures should focus on essential information for the first night focusing on prisoner welfare, with routine prison regime information left for the induction programme. (2.16)
- 3.10 Prisoners, particularly those who have been transferred without notice, should be given enough time to make a telephone call to family and friends on arrival. (2.18)

Accommodation and facilities

- 3.11 The shower areas in Richmond and Plymouth houses should be refurbished. (2.23)
- 3.12 All women prisoners should have a lockable cupboard and their own table and chair in their room. (2.24)
- 3.13 Sufficient laundry detergent should be readily available to all prisoners. (2.29)
- 3.14 Association rooms and furniture should be refurbished. (2.32)
- 3.15 Women prisoners should be allowed to have clothes bought in on a visit or posted in irrespective of how long they have been at Drake Hall. (2.33)

Staff-prisoner relationships

- 3.16 Managers should develop a strategy to enhance relationships between staff and prisoners, including regular forums with prisoners to identify what improvements could be made and providing regular feedback to all staff and prisoners. (2.34)

Personal officers

- 3.17 All personal officers should receive training to carry out the role. (2.36)
- 3.18 Those with specific care needs, such as older prisoners and those with disabilities, should have regularly monitored care plans as part of their wing files. (2.37)

Bullying and violence reduction

- 3.19 A survey of all prisoners should be completed to establish their views on safety. (2.41)
- 3.20 The violence reduction policy should outline any particular approaches needed for the management of young adult women. (2.48)

Self-harm and suicide

- 3.21 Arrangements should be put in place for Listeners to have an opportunity to meet new receptions shortly after their arrival. (2.50)
- 3.22 The barred gate should be removed from the Haven and the protocol for its use revised to emphasise its purpose as a supportive environment for women who need additional help in a crisis. A record should be kept of its use. (2.51)

- 3.23 The free telephone lines to the Samaritans on the living units should be advertised and a portable telephone allowing free direct calls to the Samaritans provided. (2.53)
- 3.24 There should be sufficient first aid trained staff working each night. (2.54)

Applications and complaints

- 3.25 The applications policy should be simplified so that it is clearly understood by staff and prisoners. (2.55)
- 3.26 Applications and complaints should be replied to using a suitable form of address, courteously, in plain language, answering fully the issues raised. (2.58)

Legal rights

- 3.27 A log should be kept of all applications for legal advice monitoring the date of the application and the date seen by legal services staff. (2.60)

Substance use

- 3.28 The mental health in-reach team's skills mix should include dual-diagnosis expertise. (2.68)
- 3.29 A forum should be established to consult women and gain feedback about integrated drug treatment system services. (2.72)

Diversity

- 3.30 The disability liaison officer should receive appropriate training. (2.76)
- 3.31 Monitoring should be introduced to ensure that prisoners from minority groups are not being victimised or excluded from activities. (2.78)

Race equality

- 3.32 All diversity officers should receive appropriate training. (2.82)
- 3.33 All staff should receive training that enables them to understand and actively engage with all racial and ethnic groups. (2.85)
- 3.34 There should be regular forums for black and minority ethnic women prisoners. (2.86)
- 3.35 There should be effective interventions for those found guilty of racist misconduct. (2.88)

Foreign nationals

- 3.36 All areas of concern raised by foreign national women should be made known to senior managers and the foreign national committee meeting should take action to address and resolve these. (2.92)

- 3.37 The pay situation of foreign nationals should be reviewed to ensure that they are not disadvantaged compared to other women and to enable women to maintain family ties. (2.95)
- 3.38 Information should be provided in a range of languages to meet the needs of the population. (2.96)
- 3.39 Foreign national women should be encouraged to apply for release on temporary licence and managers should take decisions only on the basis of an individual risk assessment. (2.98)
- 3.40 Senior managers should ensure that all staff are confident in using the telephone interpreting service and use should be monitored. (2.102)
- 3.41 Prisoners should have access to accredited translation and interpreting services whenever accuracy and confidentiality are a factor. (2.103)

Health services

- 3.42 Confidentiality and minimal disruption should be maintained during the morning triage sessions. (2.105)
- 3.43 A robust recall system for women with long-term conditions should be implemented. (2.111)
- 3.44 Feedback and suggestions should be fully considered and used to improve health services for women. (2.113)
- 3.45 There should be a health needs assessment for black and minority ethnic and foreign national women. (2.115)
- 3.46 Prisoners should be able to complain about health services in confidence and information on how to use the NHS complaints system should be clearly displayed throughout the prison. (2.117)
- 3.47 Responses to health care complaints should fully address the issues raised. (2.119)
- 3.48 A robust system should be established to ensure that prisoners can raise issues or make complaints verbally or in writing. (2.120)
- 3.49 Strategic monitoring of all health care complaints and trends, including those to South Staffordshire Primary Care Trust, should be used by clinical staff to identify lessons learned and improve services for prisoners. (2.121)
- 3.50 The uptake of clinical supervision should be promoted among health care staff. (2.123)
- 3.51 Nurses should be relieved of pharmacy duties in order to undertake clinical activities with patients. (2.125)
- 3.52 Action should be taken to ensure that all health care staff can use SystemOne effectively. (2.127)
- 3.53 Clinical triage algorithms should be used by nursing staff to ensure consistency of advice and treatment to prisoners. (2.129)

- 3.54 Patients should be able to see a female GP and female psychiatrist easily and this should be advertised and made clear to them. (2.130)
- 3.55 All health care staff should be trained in emergency childbirth. (2.132)
- 3.56 Access to barrier protection should be confidential. (2.135)
- 3.57 All eligible women should have access to the national breast screening programme. (2.137)
- 3.58 There should be a system to enable regular audit of original prescriptions against faxed prescriptions. (2.145)
- 3.59 Patients should be able to collect their medicines in privacy. (2.146)
- 3.60 There should be regular reviews of in possession medication and these should be recorded on SystmOne. (2.149)
- 3.61 More space should be provided for the dental surgery so that necessary equipment can be accommodated safely, in line with infection control requirements and in a way that does not hinder communication between patient and dentist. (2.152)
- 3.62 Mental health services should include some provision for women in need of expertise in learning disabilities and psychological support. (2.155)
- 3.63 Emergency equipment should be available across the site and all health care staff should have up-to-date resuscitation training. (2.159)
- 3.64 There should be more pain management expertise in the health care team. (2.160)

Learning and skills and work activities

- 3.65 An effective annual self-assessment process should be implemented by the prison learning and skills managers to prepare a self-assessment report that informs a quality improvement plan for improvements in the provision. (2.162)
- 3.66 Target setting for prisoners should be further improved to give clearer information about actions required for good progress and include targets for personal development. (2.166)
- 3.67 Ways of prisoners recognising and recording skills learned through work that would be useful on release should be developed. (2.176)

Security and rules

- 3.68 Staff should be consistent in their enforcement of dress code rules. (2.182)

Discipline

- 3.69 Adjudicators should make thorough inquiries into possible defences, always question the reporting officer where prisoners deny the offence and ensure that the accused prisoner has the opportunity to question and challenge any evidence taken into account at the hearing. (2.185)

- 3.70 The adjudications review meetings should quality-check adjudications by examining a sample of cases to learn lessons, encourage good practice and identify training needs. (2.186)
- 3.71 The segregation exercise yard environment should be improved. (2.191)
- 3.72 Staff should use more appropriate strategies and sanctions as described in the personal officer policy when responding to prisoners' behaviour, reserving the use of formal report and adjudication procedures for more serious infractions of the rules. (2.195)

Incentives and earned privileges

- 3.73 The incentives and earned privileges scheme should provide alternative incentives for foreign national prisoners who do not have family support in this country and who are unable to take advantage of community visits. (2.197)

Catering

- 3.74 All women working in the kitchen should be given the opportunity to participate in vocational qualifications. (2.199)
- 3.75 All kitchen workers who handle food should have achieved the Royal Institute for Public Health level 2 food hygiene award before starting in that role. (2.201)
- 3.76 Women on the outworker unit should be able to cook for themselves. (2.202)

Prison shop

- 3.77 The range of products to meet the needs of black and ethnic minority and foreign national prisoners should be improved. (2.204)

Strategic management of resettlement

- 3.78 An analysis of the resettlement needs of foreign national women and use of the Hibiscus service should be completed to establish whether the current three days a month is sufficient. (2.206)
- 3.79 A manager from the offender management unit should meet periodically with the Hibiscus project worker to ensure that any general resettlement needs identified for foreign national women are incorporated into the reducing reoffending action plan and that offender supervisors are aware of and help meet the resettlement needs of individual foreign national women. (2.208)

Offender management and planning

- 3.80 A new offender management policy should be produced to clarify the role of the offender management unit and minimum expected contact with offender supervisors and to set out how layered offender management operates at Drake Hall. (2.212)
- 3.81 Redeployment of offender management unit staff should be kept to a minimum to ensure the effective operation of the unit. (2.219)

- 3.82 At least two lifer days should be held each year. (2.221)
- 3.83 Lifer groups should be introduced. (2.222)

Resettlement pathways

- 3.84 Condoms and other barrier protection should be freely available for women going on home leave or being released without having to ask prison staff. (2.226)
- 3.85 Prisoners should be able to undertake general relationship counselling with their immediate family when the need is identified. (2.233)
- 3.86 Prisoners should be able to exchange unused visiting orders for telephone credit. (2.235)
- 3.87 Prisoners should be able to have incoming calls from children or to deal with arrangements for them. (2.236)
- 3.88 The social care officer should receive suitable training for her work. (2.238)
- 3.89 If Richmond and Plymouth houses are to be retained, an additional telephone should be provided. (2.239)
- 3.90 Telephones should be placed in booths to allow prisoners to use them in private. (2.240)
- 3.91 Supplementary free calls should be given to help women maintain family ties. (2.242)
- 3.92 The play area in the visits room should be supervised. (2.246)
- 3.93 Children's visits should be available for older children, grandchildren and younger siblings. (2.250)
- 3.94 All prisoners should be able to receive at least one weekly visit. (2.251)
- 3.95 Visitors should wait to be searched in an appropriate and comfortable area. (2.252)
- 3.96 Visits should start at the advertised time. (2.253)
- 3.97 The forthcoming offending behaviour needs analysis should identify and take into account the diverse needs of different groups of women and the role of Drake Hall in the women's estate. (2.255)

Housekeeping points

Race equality

- 3.98 Displays should reflect the diversity of the population. (2.90)

Health services

- 3.99 Staff should be required to sign that they have read and understood the health care policies. (2.109)
- 3.100 Action should be taken to dispose of expired or unused medication and expired controlled drugs should be destroyed. (2.140)
- 3.101 The availability of medicine reviews by the pharmacist should be more effectively promoted. (2.142)
- 3.102 The in possession policy should be updated to reflect changes in practice. (2.150)

Appendix I: Inspection team

| | |
|------------------|-----------------------|
| Michael Loughlin | Team leader |
| Joss Crosbie | Inspector |
| Paul Fenning | Inspector |
| Martin Owens | Inspector |
| | |
| Helen Carter | Health care inspector |
| | |
| Julia Horsman | Ofsted lead inspector |
| Stephen Miller | Ofsted inspector |

Appendix II: Prison population profile

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

| (i) Status | Number of women | Number of YOs | % |
|--------------|-----------------|---------------|------------|
| Sentenced | 276 | 18 | 100 |
| Recall | | | |
| Detainees | | | |
| Total | 276 | 18 | 100 |

| (ii) Sentence | Number of sentenced women | Number of sentenced YOs | % |
|---------------------------------|---------------------------|-------------------------|------------|
| Less than 6 months | 1 | 1 | 0.68 |
| 6 months to less than 12 months | 9 | 0 | 3.06 |
| 12 months to less than 2 years | 43 | 3 | 15.65 |
| 2 years to less than 4 years | 86 | 8 | 31.97 |
| 4 years to less than 6 years | 61 | 6 | 22.79 |
| 6 years to less than 8 years | 29 | 1 | 10.20 |
| 8 years to less than 10 years | 11 | 0 | 3.74 |
| 10 years and over (not life) | 21 | 0 | 7.14 |
| Life | 8 | 0 | 2.72 |
| Total | 276 | 18 | 100 |

| (iii) Length of stay | Sentenced women | | |
|----------------------|-----------------|-----------|------------|
| | Women | YOs | % |
| Less than 1 month | 35 | 2 | 12.59 |
| 1 month to 3 months | 70 | 5 | 25.51 |
| 3 months to 6 months | 62 | 7 | 23.47 |
| 6 months to 1 year | 76 | 3 | 26.87 |
| 1 year to 2 years | 31 | 1 | 10.88 |
| 2 years to 4 years | 2 | 0 | 0.68 |
| 4 years or more | 0 | 0 | 0 |
| Total | 276 | 18 | 100 |

| (iv) Main offence | Number of women | Number of YOs | % |
|--------------------------------------|-----------------|---------------|------------|
| Violence against the person | 69 | 5 | 25.17 |
| Sexual offences | 5 | 1 | 2.04 |
| Burglary | 14 | 1 | 5.10 |
| Robbery | 20 | 1 | 7.14 |
| Theft and handling | 8 | 0 | 2.72 |
| Fraud and forgery | 21 | 0 | 7.14 |
| Drugs offences | 100 | 4 | 35.37 |
| Other offences | 36 | 5 | 13.95 |
| Offence not recorded/holding warrant | 3 | 1 | 1.36 |
| Total | 276 | 18 | 100 |

| (v) Age | Number of women | Number of YOs | % |
|----------------------|-----------------|---------------|-------|
| 18 years to 20 years | 0 | 18 | 6.12 |
| 21 years to 29 years | 103 | 0 | 35.03 |

| | | | |
|----------------------|------------|-----------|------------|
| 30 years to 39 years | 82 | 0 | 27.89 |
| 40 years to 49 years | 60 | 0 | 20.41 |
| 50 years to 59 years | 27 | 0 | 9.18 |
| 60 years to 69 years | 4 | 0 | 1.36 |
| 70 plus years | 0 | 0 | 0 |
| Total | 276 | 18 | 100 |

| (vi) Home address | Number of women | Number of YO's | % |
|--|-----------------|----------------|------------|
| Within 50 miles of the prison | 83 | | 28.23 |
| Between 50 and 100 miles of the prison | 15 | 17 | 10.88 |
| Over 100 miles from the prison | 8 | | 2.72 |
| Overseas | 37 | 1 | 12.93 |
| NFA | | | |
| Not known | 136 | | 46.25 |
| Total | 276 | 1 | 100 |

| (vii) Nationality | Number of women | Number of YO's | % |
|-------------------|-----------------|----------------|------------|
| British | 239 | 17 | 87.07 |
| Foreign nationals | 37 | 1 | 12.93 |
| Total | 276 | 18 | 100 |

| (viii) Ethnicity | Number of women | Number of YO's | % |
|--------------------------------------|-----------------|----------------|------------|
| <i>White</i> | | | |
| British | 203 | 13 | 73.46 |
| Irish | 2 | 0 | 0.68 |
| Other white | 5 | 0 | 1.70 |
| <i>Mixed</i> | | | |
| White and black Caribbean | 4 | 1 | 1.70 |
| White and black African | 2 | 0 | 0.68 |
| White and Asian | 2 | 0 | 0.68 |
| Other mixed | 4 | 0 | 1.36 |
| <i>Asian or Asian British</i> | | | |
| Indian | 4 | 1 | 1.70 |
| Pakistani | 3 | 1 | 1.36 |
| Bangladeshi | 1 | 0 | 0.34 |
| Other Asian | 2 | 0 | 0.68 |
| <i>Black or black British</i> | | | |
| Caribbean | 9 | 0 | 3.06 |
| African | 14 | 0 | 4.76 |
| Other black | 12 | 1 | 4.42 |
| <i>Chinese or other ethnic group</i> | | | |
| Chinese | 2 | 0 | 0.68 |
| Other ethnic group | 7 | 1 | 2.72 |
| Total | 276 | 18 | 100 |

| (ix) Religion | Number of women | Number of YO's | % |
|-------------------------------|-----------------|----------------|------------|
| Baptist | 1 | 0 | 0.34 |
| Church of England | 69 | 4 | 24.83 |
| Roman Catholic | 57 | 0 | 19.39 |
| Other Christian denominations | 30 | 3 | 11.22 |
| Muslim | 14 | 1 | 5.10 |
| Sikh | 4 | 1 | 1.70 |
| Hindu | 1 | 0 | 0.34 |
| Buddhist | 6 | 0 | 2.04 |
| Jewish | 0 | 0 | 0 |
| Other | 9 | 0 | 3.06 |
| No religion | 85 | 9 | 31.97 |
| Total | 276 | 18 | 100 |