

Report on an unannounced short follow-up inspection of

HMP Kirklevington

Grange

9–12 March 2009

by HM Chief Inspector of Prisons

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Introduction

Kirklevington Grange is one of only three male resettlement prisons in England. Its role is actively to prepare men, who have often spent long periods in prison, for release. This is a difficult and important task, requiring prisoners to take responsibility for themselves and negotiate the transition back into the community.

As at previous inspections, the prison remained a safe environment, even though its population had expanded and diversified, with the addition of a 60-bed unit for category C prisoners who were not yet suitable for open conditions. The changed population had led to some increased vulnerability and an increase in the availability of drugs, which the establishment's own statistics had masked. Nevertheless, these risks were being managed, and most prisoners reported feeling safe.

Good relationships between staff and prisoners remained at the heart of Kirklevington's work and culture. However, this was not reflected in effective personal officer work or wing records. The physical condition of one wing, K wing, had deteriorated, and the showers and toilets were in an unacceptable state at the time of the inspection. There were some weaknesses in healthcare, particularly mental health, and unacceptably long waits for some prisoners with acute dental problems.

Education provision had improved and there was more vocational training within the prison than at the time of the last inspection, though far too many prisoners were under-employed as cleaners. The opportunities for prisoners able to work outside the prison had, however, shrunk: far fewer were in paid employment, and too few unpaid community placements offered accreditation for skills gained.

The prison was, rightly, focused on resettlement, though there was no current analysis of the resettlement needs of prisoners. Offender management and sentence planning were strong areas, with the active engagement of prisoners. Some of the arrangements for home leave were confusing, and the management of life-sentenced prisoners needed to be strengthened. Nevertheless, Kirklevington continued to perform well in this area.

Since its last inspection, the prison had seen a 25% rise in its population, with more higher-risk prisoners, and a decrease in external work opportunities. These pressures had been contained, but this inspection identified areas that needed to be strengthened or improved. Nevertheless, Kirklevington Grange remains an impressive prison, performing well or reasonably well against all four of our key indicators.

Anne Owers
HM Chief Inspector of Prisons

June 2009

Fact page

Task of the establishment

HMP Kirklevington Grange is a semi-open resettlement prison for adult men.

Area organisation

North-east

Number held

273

Certified normal accommodation

283

Operational capacity

283

Last inspection

18–22 July 2005

Brief history

HMP Kirklevington Grange opened as a junior detention centre in 1962, continuing in that role until it became a young offender institution in 1988. In 1992 it closed briefly and opened in October 1992 as a specialist resettlement prison. It is one of only three such prisons, of which it is the largest.

In 2008, an additional housing block was built, increasing the population to 283.

Description of residential units

A, B, C, F, G, H, J and R units	single rooms in the main building situated off the main corridors on the ground and upper floors
D and E units	40 single rooms in two modern, prefabricated buildings
K unit	40 single rooms in a modern, prefabricated building
L unit	60 bed single room with en-suite shower, toilet and sink facility. It is the newest residential unit, opened in 2008

Section 1: Healthy prison assessment

Introduction

- HP1 All inspection reports include a summary of an establishment's performance against the model of a healthy prison. The four criteria of a healthy prison are:
- | | |
|----------------------------|---|
| Safety | prisoners, even the most vulnerable, are held safely |
| Respect | prisoners are treated with respect for their human dignity |
| Purposeful activity | prisoners are able, and expected, to engage in activity that is likely to benefit them |
| Resettlement | prisoners are prepared for their release into the community and helped to reduce the likelihood of reoffending. |
- HP2 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the National Offender Management Service.
- ...performing well against this healthy prison test.**
There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.
- ...performing reasonably well against this healthy prison test.**
There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns.
- ...not performing sufficiently well against this healthy prison test.**
There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.
- ...performing poorly against this healthy prison test.**
There is evidence that the outcomes for prisoners are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.
- 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 2005, the prison was performing well against this healthy prison test. Of the 13 recommendations in this area, five were assessed as achieved, three partially achieved and five not achieved. We have made 15 further recommendations.
- HP5 Reception processes were swift and effective and prisoners were offered a telephone call. There was useful information on display in reception. Information about Listeners and Samaritans was given on the day of arrival. Reception/induction interviews were not held in private. A comprehensive induction booklet was issued to prisoners.
- HP6 There was little evidence of bullying and most prisoners reported feeling safe. There was an up-to-date anti-bullying strategy but it was not informed by a prisoner survey. Anti-bullying procedures were rarely used. Relevant documents were reviewed at safer custody meetings to identify potential bullying, but no formal investigations were carried out.
- HP7 There had been a recent serious self-harm incident. The circumstances were being investigated promptly and thoroughly. Most Listeners felt unsupported and were not aware of the Listener coordinator. Few assessment, care in custody and teamwork (ACCT) documents were opened. Copies were not kept on site, and it was not therefore possible to examine the quality of entries or the circumstances of any subsequent transfers.
- HP8 Despite a rise in substance use, there was little evidence of increased disorder or bullying, suggesting that the risks were managed adequately. A high number of security information reports were submitted, suggesting appropriate staff vigilance. Security meetings routinely discussed a wide range of intelligence. There was random rather than targeted strip searching of a proportion of those returning from periods on temporary licence, and no monitoring data to expose any potentially discriminatory searching patterns.
- HP9 There was little use of force. Segregation was used predominantly to hold prisoners awaiting transfer, without evidence of individual risk assessment to show whether this was necessary. The governor's authorisation document for segregation was not always present in segregation paperwork, and the time that segregation began and ended was not always recorded. There was no evidence of management checks of segregation documentation in the examined sample. Routine strip searching took place on entry to the segregation unit.
- HP10 Our review of the previous six months of positive random drug tests revealed a rate of 10.77% (6.58% excluding buprenorphine), significantly more than the key performance target mandatory drug testing monthly rate, reported as 3.6%, and the actual figure to date, reported as 4.9%.
- HP11 On the basis of this short follow-up inspection, we considered that the prison was still performing well against this healthy prison test.

Respect

- HP12 In 2005, the prison was performing well against this healthy prison test. Of the 20 recommendations in this area, six were assessed as achieved, seven partially achieved and seven not achieved. We have made 17 further recommendations.
- HP13 R wing, which had been criticised during the previous inspection, had been refurbished. However, prisoners did not use the four new showers that had been installed because they were cold, and the other two shower cubicles were in poor condition. G wing prisoners had to use the toilets and showers on R wing. Of particular concern was the shabby state of K wing, where the condition of the toilets and showers was unacceptable. This was due to be rectified shortly after the inspection. A new 60-place unit had been opened since the previous inspection, to hold category C prisoners. D wing had only one washing machine for 40 prisoners, an issue that had been raised at consultation meetings, without progress. Most units were in good condition and clean, but bare and devoid of anything to humanise the living space. There were still no cooking facilities on the wings, with the exception of small microwave ovens.
- HP14 Prisoners reported generally good relationships with staff, and most staff and prisoners were on first name terms. Prisoners were still able to contribute to and read their own history sheets, promoting ownership and responsibility. However, there were few comments from staff, including personal officers, and management checks were insubstantial.
- HP15 The standard of catering was good. However, many prisoners complained about high canteen prices. They still could not receive canteen orders for up to eight days after arrival, although £6 packs were available with telephone credit and tobacco. The new canteen list had just over 300 separate items, which was insufficient to meet prisoners' needs.
- HP16 There was little evidence of racism or discrimination. A consultation meeting with black and minority ethnic prisoners was held but agreed actions were not always followed up. There were few racist incidents and they were appropriately dealt with. Some disparities highlighted by ethnic monitoring data had not been properly investigated.
- HP17 The foreign national prisoner policy made no reference to prisoners' support needs. There was no policy covering broader diversity issues such as gender, age, sexuality, disability and religion.
- HP18 There had been a significant increase in chaplaincy hours, and chaplaincy staff were prominent in the life of the establishment. Their numbers were being further increased by a half-time Muslim chaplain. The world faith room was bare and unwelcoming.
- HP19 The prison was now exempted from the traditional incentives and earned privileges (IEP) scheme. The system had been appropriately superseded by the whole regime and risk assessment and management process, which acted as a significant incentive for prisoners.
- HP20 We received reasonably good overall feedback from prisoners on the standard of healthcare. However, there were concerns about a long dental waiting list for category C prisoners, mainly as a result of inordinate delays in completing temporary

release risk assessments that would have allowed prisoners to visit dentists in the community. This had resulted in some desperate 'self-treatment' measures. There was no mental health provision. Staffing was minimal and resulted in a lack of healthcare staff presence at prison meetings, and occasionally in shorter healthcare opening times. GP provision was now all in-house and prisoners were no longer able to go to community doctors, which had been cited as good practice at the previous inspection. Prisoners did not have access to a pharmacist unless on town visits or home leave.

HP21 On the basis of this short follow-up inspection, we considered that the prison was now performing reasonably well against this healthy prison test.

Purposeful activity

HP22 In 2005, the prison was performing reasonably well against this healthy prison test. Of the seven recommendations in this area, six were assessed as achieved and one as not achieved. We have made seven further recommendations.

HP23 The range and quality of education and training provision had improved, although a substantial number of the education contract hours had not been delivered. A great deal of education curriculum development work had taken place. There had been an increase in the range and level of literacy and numeracy qualifications.

HP24 The prison now accredited all skills and there was an increased range of accredited vocational training, although none in PE. Well regarded qualifications had been introduced that were of use to prisoners in the job market.

HP25 Over 70 prisoners were in community placements outside the establishment. About 30 were in paid work, but there had been a significant drop in external paid employment, mainly due to the worsening economic climate. The prison had taken some steps to address this, for example by taking prisoners to an external job fair. In the meantime, over 50 prisoners were employed as cleaners, which was too many for the needs of the establishment. Efforts to expand the range of constructive work opportunities inside the prison had yet to show results.

HP26 The library was now open for longer and use of the library had greatly increased.

HP27 On the basis of this short follow-up inspection, we considered that the prison was still performing reasonably well against this healthy prison test.

Resettlement

HP28 In 2005, the prison was performing well against this healthy prison test. Of the 16 recommendations in this area, six were assessed as achieved, one partially achieved and nine not achieved. We have made 12 further recommendations.

HP29 There was a clear focus on resettlement as being at the heart of the prison's purpose. There was no overarching resettlement strategy document, although key resettlement targets and deliverables were included in the establishment business plan. There was no up-to-date resettlement needs analysis and there had been no wider National Offender Management Service evaluation of the experience of prisoners who had left Kirklevington Grange.

- HP30 The offender management unit was accessible and the helpfulness of staff was appreciated by prisoners. Many prisoners told us that they did not understand why arrangements for home leave at Kirklevington Grange differed from some category D establishments. They had raised this issue in several successive consultation meetings, with no follow-up or explanation.
- HP31 Prisoners were encouraged to take advantage of resettlement opportunities, and risk assessments for release on temporary licence were fair and appropriately robust.
- HP32 All prisoners had sentence plans, which were regularly reviewed. Sentence planning targets were generally well constructed, and the outcome focused and clear. A range of offending behaviour programmes was available, and most were appropriately completed in the community.
- HP33 Fewer than half of lifer staff had been trained in new procedures for managing life-sentenced prisoners. Some lifer prisoners' review boards were overdue. There was no current lifer policy or forum and no lifer family days.
- HP34 Prisoners reported positively on visits and there was excellent feedback in the visitors' comments book. The children's play area was too small, having been reduced to accommodate the larger number of visitors for the increased prison population.
- HP35 On the basis of this short follow-up inspection, we considered that the prison was still performing well against this healthy prison test.

Section 2: Progress since the last report

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

Main recommendations (from the previous report) To NOMS

- 2.1 Resettlement prisons should be exempted from the requirement to run incentives and earned privileges schemes. (HP43)

Achieved. The prison was now exempted from the traditional incentives and earned privileges (IEP) scheme, and the whole regime and risk assessment and management process had superseded the IEP process. Once a prisoner had reached his resettlement release date, and assessments had established that his behaviour was good, that he could be trusted to go out unsupervised and that criminogenic risk factors had been sufficiently addressed, he could be considered for category D status and take advantage of the benefits offered by an open prison, in particular release on temporary licence (ROTL). Prisoners eligible for ROTL were also allowed £40 (instead of £25) private cash each week, reflecting their need to take more responsibility for their finances. Breach of prison rules led to a risk management review, which could result in the removal of all or part of a prisoner's open prison status, and this acted as a powerful incentive for prisoners to conform to the rules. Most prisoners (206) had been approved for ROTL and there were, on average, 38,000 ROTLs each year (see section on resettlement).

- 2.2 The National Offender Management Service should examine Kirklevington Grange's operation and carry out an evaluation of the experience of prisoners who have left the establishment with a view to learning lessons that can be replicated elsewhere. (HP44)

Not achieved. No evaluation had been undertaken since the previous inspection. The governor had recently employed a trainee psychologist, who had been given the task of conducting a local study, although it was not yet under way.
We repeat the recommendation.

Main recommendation (from the previous report) To the governor

- 2.3 Opportunities should be taken to accredit all skills acquired at work, and work should reflect industrial practice and the skills needed for employment. (HP45).

Achieved. Opportunities to accredit all skills acquired at work in the prison had improved. For example, men working in the library, catering, cleaning and gardens could all take nationally recognised qualifications. The range of accredited vocational training offered had increased. New workshops had been opened in refurbishing white goods, welding, basic motor vehicle and repair, and brickwork and block paving. The construction site card scheme (CSCS), highly valued by employers, was offered. Generic skills needed for employment were accredited through newly introduced qualifications including first aid at work, health and safety in the workplace, preparation for work and money management. Four men were taking qualifications recently introduced by the prison in their community placements. The range and level of literacy and numeracy qualifications had increased from pre-entry level to level three. The range of evening provision had also increased.

Other recommendations

To NOMS

- 2.4 Standards of cleanliness in GSL vehicles should be maintained at an acceptable level. (1.4)

Achieved. The space for prisoners in vans was cramped, but they were kept clean. There were no complaints from prisoners about the conditions in which they were transferred. Journeys to the establishment had mainly been short, often from within Yorkshire and Humberside.

- 2.5 Establishments should not be required to complete OASys documentation as well as life sentence plan documentation for life sentence prisoners. (8.18)

Achieved. Under phase three of offender management, the life sentence plan was no longer in use. Life-sentenced prisoners were managed using offender assessment system (OASys) documentation.

- 2.6 The late arrival of counselling, assessment, referral, advice and throughcare services (CARATs) files from previous establishments should be addressed. (8.48)

Achieved. The prison had introduced a tracking system for files and also used the movements list to identify prisoners being transferred into the establishment, so that they could contact the 'sending' prison and request the file in advance. Staff we spoke to were confident that the late arrival of CARAT files was no longer a problem.

Other recommendation

To North Tees Primary Care Trust

- 2.7 There should be a new service level agreement between North Tees Primary Care Trust and the pharmacy. It should identify the amount of pharmacist time needed and should include using a pharmacist to provide counselling sessions, pharmacist-led clinics, clinical audit and medication review. (4.34)

Not achieved. There had been no change in the level of service provided by the pharmacy since the previous inspection, category C prisoners had no access to a pharmacist and category D prisoners were not told how they could access pharmacy services when on leave from the prison. There were no pharmacist-led counselling sessions, pharmacist-led clinics, clinical audit or medication reviews.

We repeat the recommendation.

Other recommendations

To the governor

Arrival in custody

First days in custody

- 2.8 New arrivals should receive a free telephone call in reception. (1.17)

Achieved. All new arrivals were offered a free telephone call in reception, and most made a call.

- 2.9 On their day of arrival, new receptions should be given specific information explaining the arrangements for contacting Listeners and the Samaritans. (1.18)

Achieved. Information was given as part of the initial briefing to prisoners on the day of their arrival. This interview was held in an open-plan office area with other staff present, and sometimes with other prisoners in the area. Staff interactions were positive and friendly throughout. Although private interview rooms were available, they were not usually used for these initial interviews. A comprehensive information booklet was given to all new arrivals, together with a clear prisoner compact booklet. A two-week induction programme balanced monitoring and support for the prisoner with an expectation that he should take some responsibility for familiarising himself with the establishment.

Further recommendation

- 2.10 Initial interviews on the day of arrival should be held in a private room.

Additional information

- 2.11 The reception process was swift and effective. The arriving prisoner was given the name of his personal officer and OASys officer in reception, along with his room key. Staff were on duty in reception at all times, with no interruptions for staff meal breaks. There was relevant information on display in reception, including details of support for those at risk of self-harm and bullying.

Environment and relationships

Residential units

- 2.12 The décor and maintenance on R wing should be brought up to the same standard as the rest of the establishment. Broken furniture should be replaced. (2.13)

Partially achieved. The cells and corridor on R wing had been refurbished. Four new showers had been installed, but were never used because they were cold, and the other two shower cubicles were in poor condition. The toilets and showers on the wing were used by G unit as well as R unit.

Additional information

- 2.13 K wing was shabby, and the condition of the toilets and showers was unacceptable, with hardboard nailed over large holes in the walls, no soap and no means of hand drying. This was due to be rectified shortly after the inspection. The other units were in good condition and clean, but bare and bleak, with nothing to humanise the living space.
- 2.14 D wing had one domestic washing machine for 40 prisoners, which was insufficient; this had been raised at consultation meetings, but not resolved.
- 2.15 A new unit (L) had been opened in 2008 and held 60 category C prisoners in single rooms, with their own showers, toilets and sinks. Although small, the rooms and communal areas were in good condition and prisoner feedback was positive.

Further recommendations

- 2.16 The toilet and shower rooms on K and R units should be brought into working order and a decent condition as a matter of urgency.
- 2.17 The décor of all residential units should be improved, in consultation with prisoners, to provide a normal living environment which reflects the diversity of the population.

- 2.18 **Prisoners on the main 'working out' wings should have some access to cooking facilities. (2.14)**

Not achieved. There were no cooking facilities on the wings, except for a small microwave oven. For some prisoners working in the community, their work hours meant that they missed the prison meal times (a packed lunch was provided where appropriate). While managers believed that the resettlement needs of these prisoners were best met by expecting them to provide for themselves, by sourcing food in the community, we did not share this view. Cooking facilities on the units would prepare men for life after release.

We repeat the recommendation.

Staff–prisoner relationships

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

Additional information

- 2.19 Prisoners reported good relationships with staff overall, and felt that they were treated with the respect, and given a level of responsibility, appropriate to a resettlement prison. Most prisoners and staff were on first name terms.

Personal officers

- 2.20 **Personal officers should make more regular entries in wing history files, and this should be monitored by managers. (2.26)**

Not achieved. Wing history sheets provided a good overall picture of a prisoner's progress, and prisoners were able to contribute to and read them. However, there were relatively few comments from staff, including personal officers, who had made no entries at all in several of the history sheets we looked at. Most prisoners we spoke to knew who their personal officer was, but many said that they rarely saw him. We saw no comments on the quality of history sheet entries from managers in our sample, although there were some management stamps indicating that files had been viewed.

We repeat the recommendation.

Duty of care

Bullying and violence reduction

- 2.21 **Staff should receive training in the use of the violence reduction strategy and the bully monitoring forms. (3.7)**

Not achieved. Two staff had completed a one-day course in anti-bullying two years previously. The process for reporting and managing bullying was described in the strategy but it had only been used once in the previous 12 months, after an adjudication indicated potential bullying. Most staff said that if they suspected bullying they would submit a security information report (SIR); they were not familiar with the three-stage model described in the strategy. **We repeat the recommendation.**

Additional information

- 2.22 There was an up-to-date anti-bullying strategy but it was mostly not specific to the establishment and had not been informed by a prisoner survey.
- 2.23 The anti-bullying coordinator monitored potential bullying incidents from details of assaults, adjudications, absconds, requests for protection, wing observations, self-harm incidents, complaints and a more detailed review of injuries and SIRs, and these were discussed at the quarterly safer custody meetings. However, there was no analysis over time to enable comparisons to be made month on month, and anti-bullying investigations were not formally carried out into potential bullying incidents. We were told that the coordinator was not given any facility time to carry out his role.
- 2.24 Monitoring suggested that levels of bullying were low, and most prisoners reported feeling safe, but some prisoners reported concerns about drug-related bullying. No concerns about bullying had been raised in exit interviews. A bullying survey had been carried out in 2008, but the return rate had only been 5%. Prisoners had been asked to give their name, number and length of sentence, which may have deterred prisoners from completing it. In this survey, 26% said that they did not feel safe but 40% said that staff always intervened when someone was being picked on.

Further recommendations

- 2.25 The anti-bullying strategy should be tailored to meet the specific needs of the prisoners held and should be informed by the anti-bullying survey.
- 2.26 The anti-bullying survey should be repeated, allowing respondents to remain anonymous.
- 2.27 All incidents of potential bullying should be reported on a bullying incident report form and investigated.
- 2.28 The anti-bullying coordinator should be given facility time to carry out the role.
- 2.29 Monitoring of anti-bullying information should include month-on-month data to allow trends to be analysed.

Self-harm and suicide

- 2.30 **The safer custody meeting should always include the self-harm and suicide and anti-bullying coordinators, a member of healthcare staff and the race relations liaison officer. (3.14)**

Partially achieved. Quarterly safer custody/violence reduction meetings always included the

suicide prevention and anti-bullying coordinator, but they did not always include a race relations representative or a member of health services staff.

Further recommendation

- 2.31 The safer custody meeting should always include a member of health services staff and the race relations liaison officer.

Additional information

- 2.32 There was an up-to-date suicide prevention strategy but, like the anti-bullying policy, it was not specific to the establishment. The anti-bullying coordinator was also the suicide prevention coordinator, and he was assisted by another officer. No facility time was given to these roles.
- 2.33 There had been one serious self-harm incident in the previous 12 months, relating to an attempted suicide which had occurred three weeks before the inspection. A prompt staff response had probably prevented the suicide attempt from being successful. An investigation was being carried out by the governor and the head of safer custody, using the new area 'serious self-harm incident review form'.
- 2.34 Owing to limited healthcare cover, prisoners at risk of self-harm were usually transferred out to an establishment better able to manage them. In addition, prisoners who were considered unsuitable for segregation because of the safety algorithm were generally deemed to need more support than was possible in semi-open conditions and were therefore transferred out.
- 2.35 There were 11 Listeners, who met monthly with a member of the Samaritans. They were not aware who the current Listener coordinator was and felt that they received insufficient support. Listeners were not directly involved in the induction process.
- 2.36 Five assessment, care in custody and teamwork (ACCT) documents had been opened in the previous 12 months, all since November 2008. We were not able to comment on these, as all the prisoners had been moved and no copies of documentation had been kept on site.

Further recommendations

- 2.37 The suicide and self-harm prevention strategy should be tailored to meet the specific needs of prisoners at Kirklevington Grange.
- 2.38 The suicide prevention coordinator and assistant should be given facility time to carry out the role.
- 2.39 Listeners should be managed and supported by the establishment, and informed of the identity of the coordinator.
- 2.40 A Listener should meet all new arrivals.
- 2.41 Copies of assessment, care in custody and teamwork (ACCT) documentation should remain in the establishment when the prisoner has moved on, to allow monitoring and analysis.

Diversity

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

Additional information

- 2.42 Although a disability policy was displayed, little prominence was given to equality issues in relation to age, gender, religion and sexuality. The Equal Opportunities Committee, and the equal opportunities information given to prisoners on induction, related almost entirely to staff and to the establishment as an equal opportunities employer.

Race equality

- 2.43 There should be a prisoner consultative group for black and minority ethnic prisoners. (3.24)

Achieved. The consultation group for black and minority ethnic prisoners had met approximately quarterly. Although there was no reference in the minutes of the race equality action team to the discussions in the consultation group, common themes ran through them both. There was consistent attendance by managers and prisoners. Some items raised were dealt with; others were carried over without apparent action, sometimes for more than one meeting. Prisoners were positive about relationships between ethnic groups in the prison. Managers had taken seriously and investigated a perception that the number of black and minority ethnic prisoners was being kept low through a 'one-out-one-in' policy; this had proved unfounded.

Further recommendation

- 2.44 Action points from prisoner consultation meetings should be systematically followed up.

Additional information

- 2.45 Between November 2008 and February 2009, only 16.5% of the 10,200 prisoners approved for release on temporary licence (ROTL) were from black and minority ethnic backgrounds. With 20% of the population from black and minority ethnic backgrounds, this was a significant under-representation. The monthly monitoring of ROTL showed the same imbalance. The establishment believed that this was due to periodic influxes of new prisoners, but there was no evidence of any investigation into the disparity. Racist incidents were reported at a rate of about one a month; they were dealt with fairly and openly.

Further recommendations

- 2.46 There should be a comprehensive diversity policy and action plan, in relation to prisoners as well as staff.
- 2.47 The under-representation of black and minority ethnic prisoners in release on temporary licence should be investigated and appropriate action taken if necessary.

Foreign national prisoners

- 2.48 The prison should develop a policy and operating instruction for the support of foreign national prisoners. (3.31)

Not achieved. A policy had been issued, but it dealt only with administrative issues relating to immigration and eligibility for release. A policy was still required for the support of foreign national prisoners, including interpretation and translation, peer support, family contact and cultural needs, despite the small number of foreign nationals at the establishment (there were two at the time of the inspection).

We repeat the recommendation.

Substance use

- 2.49 Protocols for the clinical management of substance users should be developed in line with new national guidance. (8.49)

Not achieved. The establishment had been identified as an integrated drug treatment system (IDTS) site from April 2009. At the time of the inspection, there were no formal clinical guidelines in place, although the substance misuse policy for the period March 2008 to March 2010 referred to the fact that prisoners identified as having 'issues around substance misuse' could be referred to the GP, who would prescribe a 'treatment plan'. There were no specialist prescribers. The first meeting to discuss the introduction of IDTS was scheduled for shortly after the inspection.

We repeat the recommendation.

Additional information

- 2.50 Mandatory drug testing (MDT) was carried out in a separate suite from that for voluntary drug testing (VDT). Six staff were trained in MDT. There had been only one refusal in the previous 12 months. There had been four drug-related security finds in the previous three months and a total of 51 suspicion tests in the previous six months, of which 27 (52.9%) were positive. Our review of the positive random drug test results for the previous six months revealed a rate of 10.77% (6.58% excluding buprenorphine), but the key performance target MDT monthly positive rate was reported as 3.6% and the actual figure to date as 4.9%.

Further recommendation

- 2.51 There should be a review of the reporting of mandatory drug testing figures to ensure accuracy.

Health services

- 2.52 The prison health delivery plan should be revised, updated and include a full needs assessment to ensure that the healthcare services meet the needs of the population at HMP Kirklevington Grange. At the same time, healthcare policies and procedures should be updated so that they are relevant to the way healthcare is delivered at the prison, and reflect evidence-based practice. (4.35)

Partially achieved. The commissioner of services told us that a health needs assessment had been undertaken but was only available in draft form and required extra work to make it a comprehensive document that could be used to plan services to meet the needs of the population. The clinical policies and protocols that we looked at were out of date, most having been last reviewed in November 2005. Some were not prison specific.

We repeat the recommendation.

- 2.53 The opening hours of the healthcare department should be reviewed to ensure that staff are available when prisoners are at the prison rather than out at work. (4.36)**

Achieved. The opening times of the department had been altered and included three days a week when it was open until 6pm, and also alternate Saturday mornings. However, staff shortages meant that on occasions the opening hours had to be curtailed – for example, when one of them took annual leave. There were plans to increase the opening times to have evening and Saturday clinics once more staff had been recruited.

- 2.54 The internal layout of the healthcare department should be improved to make best use of the space available and ensure confidentiality for prisoners at all times. (4.37)**

Partially achieved. The administration office layout had been altered to provide better confidentiality for patients. However, the thin walls of the prefabricated building meant that, on occasion, prisoners in the waiting room could hear telephone calls being made by staff. A large room doubled as the GP surgery and group work room, and was also used to store equipment. There was a treatment room and a room where medications were stored. There was only one telephone line for the whole department, which was frustrating for staff. We were shown plans to expand the department, but no firm date had been set for the expanded department to be functional.

We repeat the recommendation.

Further recommendation

- 2.55 At least one more telephone line should be installed in the healthcare department.**

- 2.56 The arrangements for faxing patient information to and from the healthcare centre should be reviewed. (4.38)**

Achieved. Because patients no longer attended the GP surgery in the community, there was less need to fax patient information to anyone. Prescriptions were faxed to the local pharmacy but both fax machines were in 'safe haven' areas, so could be used without medical confidentiality being breached.

- 2.57 Nurses should use treatment triage algorithms to ensure consistency of advice and care to prisoners. (4.39)**

Not achieved. There were no triage algorithms in use to ensure consistency of advice and care to prisoners. This was a particular issue for prisoners with dental pain (see additional information).

We repeat the recommendation.

- 2.58 There should be a workforce and activity analysis of nursing staff, combined with a training needs analysis, to ensure they have the right skills and competences to deliver the standard of care that prisoners could expect to receive in the community. (4.40)**

Partially achieved. We were told that a skill mix review had been undertaken in conjunction with HMP Holme House, and that there was a training needs analysis, but we were not shown it. Staff had monthly peer group clinical supervision and were able to access training and continuing professional development organised by the foundation trust that employed them. **We repeat the recommendation.**

2.59 A medicines and therapeutics committee should be formed and meet at least four times a year. Membership should include a GP, the pharmacist and a nurse, and a representative from the primary care trust. It should organise:

- a formal, documented, in-possession risk assessment
- a formal special sick policy
- patient group directions
- a drugs formulary for use at Kirklevington Grange
- a policy for audit of medications
- provision of an induction pack containing paracetamol tablets and other simple remedies to all new prisoners
- arrangements for prisoners to buy simple remedies from the shop list. (4.41)

Partially achieved. There was an established medicines and therapeutics committee for HMPs Kirklevington Grange and Holme House which met regularly, and a review of pharmacy services had recently been undertaken. At the time of the inspection, Kirklevington Grange did not have a documented risk assessment for in-possession medications, although prisoners held most of their medications in possession. We were shown a draft policy for ratification at the next medicines and therapeutics meeting. The modern matron was an independent prescriber, but there were no patient group directions for prescription-only medications when he or the GPs were not on site, or for vaccinations. There were patient group directions for paracetamol and ibuprofen; both of these over-the-counter medications should have been part of a 'special sick' policy, but no such policy existed. There was no drugs formulary specific to the establishment. While it was possible to undertake audits of medication usage using the clinical electronic information system (SystemOne), none had been undertaken; one of the nurses kept an ongoing list of medications that were returned to pharmacy but no analysis of the reasons for returns, such as non-collection or wrong dosages, had been carried out. On arrival at the establishment, prisoners were given a pack of over-the-counter remedies, such as paracetamol, Rennie's, Vaseline and Strepsils, and were made aware that they could obtain paracetamol and ibuprofen from health services staff, while other simple remedies could be purchased from the canteen list.

Further recommendation

2.60 The medicines and therapeutics committee should organise a formal, documented, in-possession risk assessment, a formal special sick policy, patient group directions, a drugs formulary specific to the establishment and regular audits of medication usage.

- 2.61 Prisoners should be able to visit the pharmacy personally to present their prescriptions. This would enable access to a full pharmaceutical service and advice from the pharmacist, as well as enable prisoners to take advantage of other services, such as medicine use reviews, and care in the community consultations. (4.42)

Not achieved. Prisoners were unable to consult with a pharmacist. GPs undertook medication reviews for patients on long-standing medications.

We repeat the recommendation.

- 2.62 All medicines held in stock at the prison should be fully labelled in accordance with Medicines Act requirements, including batch number and expiry date. If pre-packs are used, a system of dual labelling should be introduced. (4.43)

Achieved. All stocks were correctly labelled, including the pre-packs of paracetamol and ibuprofen which nurses could dispense. There was no dual-labelling system but there were verbally agreed stock levels in place, and a record of items dispensed by nurses was kept on the prescription charts. Staff checked stock levels and expiry dates regularly but did not document that they had done so.

Further recommendations

- 2.63 There should be written agreed stock levels.

- 2.64 All expiry date checks should be documented.

- 2.65 Prisoners should be given information about how to access the full range of health services in the community on release from prison. (4.44)

Partially achieved. Health services staff saw all prisoners before release. They weighed and measured each prisoner and took his blood pressure, although it was unclear why this was necessary for all patients. They also discussed how patients should register with a GP in the community, and if a prisoner had ongoing medical issues they gave him a print-out of his clinical records from SystemOne to present to his new GP. They also arranged for those on medications to take a small supply with them. For prisoners staying in the area, staff advised them that they could remain as NHS patients with the dentist that they had been seeing at the establishment. However, none of the advice given was provided in written form for patients to refer to once they had left the establishment.

Further recommendation

- 2.66 Prisoners should be given comprehensive information and assistance to access health and social services on their release, and support in doing so if required.

Additional information

- 2.67 We received reasonably good overall feedback from prisoners on the standard of healthcare. Health services were commissioned by County Durham Primary Care Trust and primary care was provided by North Tees and Hartlepool Foundation Trust. Mental health services should have been provided by Tees, Esk and Wear Valley Mental Health Trust, but there were no

services in place. There were joint partnership boards between Kirklevington Grange and Holme House and the commissioners.

- 2.68 Staffing levels had decreased since the previous inspection. There was only one full-time band 7 nurse, who was the modern matron, and a part-time band 5 nurse; both were general nurses. A new head of prison health (band 8b) for both establishments had just taken up post; she had a clear action plan for improvements to health services across both sites. The staff shortage resulted in health services staff being unable to attend prison meetings, as well as sometimes limiting opening hours (see recommendation 2.53). Two other posts were being advertised at the time of the inspection.
- 2.69 At the time of the previous inspection, prisoners had been able to access health services in the community, and we had cited this as good practice, but this was no longer the case, as all the GP sessions (three a week) were run at the establishment. Cover at other times was provided by the local-out-of-hours service. However, staff from this service never attended the prison; the patient always had to be taken to their premises, despite the contract stating otherwise.
- 2.70 There was an inequity of dental service provision between category C and category D prisoners. Category D prisoners were able to attend a local NHS dental service; administrative staff in the healthcare department booked their appointments, which could be the next day if needed and in most cases were no more than a week away. However, category C prisoners were seen by a member of the health services team, who assessed their need (without the use of defined algorithms) and then referred them to the dentist. The administrative staff sent a pro-forma with the relevant details to the security department, which then arranged for the necessary ROTL assessments to be undertaken. At the time of the inspection, there were seven such cases waiting to see the dentist; the longest wait was over seven weeks. We spoke to some of the individuals concerned; all stated that they still had dental pain, two had obvious facial swelling, one showed us that he had pulled his own tooth out to try to relieve the pain and another admitted to 'self-medicating' with illegal medications. Two had had several healthcare appointments for pain control and antibiotics, and one had lost a considerable amount of weight while waiting for a dental appointment. We brought these findings to the attention of senior prison managers, and were told about plans for a mobile dentistry suite to be parked on the site and used for category C prisoners; however, this was going to take at least six weeks to be fully functional.
- 2.71 Health services staff assessed prisoners on arrival for their suitability for work, but did not then know where they were sent to work. They were therefore unable to provide relevant occupational health advice or vaccinations – for example, tetanus cover for those working in the gardens.
- 2.72 There were four automated external defibrillators (AEDs) across the site. Some discipline staff and some prisoners had received training in their use, and were clearly identified on first-aid notices around the prison, which were updated monthly. A spot check on one evening revealed that at least six AED-trained staff were on duty, and one was on night duty.

Further recommendations

- 2.73 Prisoners should have access to multi-professional primary, secondary and tertiary mental health services as required.

- 2.74 Health services staffing levels should be sufficient to meet the needs of the population, including health services representation at meetings such as safer custody and assessment, care in custody and teamwork (ACCT) reviews.
- 2.75 All prisoners should have access to dental services equivalent to those in the community, including immediate treatment for acute problems.
- 2.76 All workers should have appropriate occupational health checks and vaccinations for their place of work.

Good practice

- 2.77 *Some discipline staff and some prisoners had received training in the use of automated defibrillators, and were clearly identified on first-aid notices around the prison, which were updated monthly.*

Activities

Learning and skills and work activities

- 2.78 **There should be better use of learning plans to identify clear goals for prisoners and record specific achievements. (5.19)**

Achieved. The use of learning plans had improved since the previous inspection. Clear goals relating to achievement of qualifications were identified and monitored. Central files, accessed and updated by staff and prisoners, held all the information relating to learning and skills programmes.

- 2.79 **There should be integral support for literacy and numeracy throughout the prison. (5.20)**

Achieved. The range and levels of literacy and numeracy qualifications had increased since the previous inspection. Pre-entry provision and higher-level provision at level three were offered. Prisoners were encouraged and supported to take level one qualifications in literacy and numeracy before progressing to community placements and paid employment. Education tutors worked closely with workshop instructors to ensure that literacy and numeracy support was relevant. One-to-one and additional group support sessions had been introduced.

- 2.80 **Quality assurance procedures should be fully implemented for all areas of learning. (5.21)**

Achieved. Staff from all areas met regularly to standardise operations and share good practice. Observations of teaching and learning had been introduced. A quality manual and quality calendar had been circulated. All staff were involved in self-assessment. The self-assessment report was concise and combined the prison's and the education provider's contributions.

- 2.81 **The library should extend its opening hours to include more daytime opening. (5.22)**

Achieved. Library opening hours had increased from 12 hours a week to 28 hours a week; the library was open every weekday afternoon and evening.

Additional information

- 2.82 All internal education was part-time. Classes ran during the day and the evening, offering a maximum of 64 places a day. The maximum number of places at any one time was 18. All prisoners attending daytime education had another part-time activity, such as kitchen work. Men working in the gardens or outside the establishment attended evening provision.
- 2.83 Wider partnership working had developed and was effective. The education contract had been taken over by the Stockton Adult Education Service (SAES), which also held the information, advice and guidance (IAG) contract.
- 2.84 The curriculum had broadened and included a range of literacy and numeracy provision. IT, customer care, preparation for work, self-employment, mentoring and IAG courses were offered. Good one-to-one and small group learning support was provided. There were no waiting lists. However, of the planned 1,612 hours which should have been delivered at the time of the inspection, 300 had not been delivered. There were plans to offer additional courses to address the shortfall. Although the range and level of provision offered was limited, a high proportion of prisoners progressed to further training in the community. In the previous year, 94 men had taken external courses in a range of subjects and at a range of levels, from master-level degrees to lifeguard qualifications. At the time of the inspection, 28 men were attending external courses which were linked to enhancing their employability. IAG provision was good, and available 52 hours a week through induction and one-to-one sessions. It provided impartial, relevant and detailed ongoing support. Celebration of individual success was good, but the prison was unable to provide data showing how many men had successfully achieved qualifications.
- 2.85 Stockton Library Service held the library contract. Access to the library and usage had increased considerably and were good. Since 2005, library issues had increased by 363%. Library staff ensured that the stock met prisoners' needs.
- 2.86 All of the men were employed. All internal work was full time, with the exception of cleaning, which was part time and could be combined with part-time education. Any prisoners with a free day reported for cleaning duty. At the time of the inspection, there were 53 cleaners, which was too many. The prison was aware of this and had begun to look into providing work that would provide job opportunities on release. The number of men in paid employment outside the prison had reduced sharply from 83 to 30 in the previous year. Prison managers felt that this was a result of the worsening economic climate and had taken some steps to address the problem, for example, prisoners had recently been taken to a job fair (see paragraph 2.150). Seventy-one men were in community placements. A few community placements offered accredited training, but most men were unaware of the purpose of these placements and of the skills they would develop there. Skills developed in community placements (for example, time keeping and team working) were not always monitored and recorded. Although there were plans to introduce a more equitable pay structure, pay arrangements disadvantaged men who were in education and training.

Further recommendations

- 2.87 The prison should ensure that all the education contract hours are delivered.
- 2.88 Data collection and its use as a management tool should be improved.

- 2.89 The number of meaningful work opportunities in the prison should be increased.
- 2.90 The number of prisoners in external paid employment should be increased.
- 2.91 Staff should ensure that prisoners understand the purpose of community placements. The skills they develop in community placements should be monitored and recorded.
- 2.92 The prison should ensure that pay is equitable and does not disadvantage those attending education.

Physical education and health promotion

- 2.93 Prisoners who do not attend the gym should be actively encouraged to do so. (5.36)

Not achieved. There were plans to increase the promotion of healthy living, through collaboration with the gym, healthcare department and kitchens, but they had not yet been implemented. No designated sessions were available for older or unfit prisoners.
We repeat the recommendation.

- 2.94 There should be formal support for prisoners attending external courses. (5.37)

Achieved. Although no prisoners were attending external PE courses at the time of the inspection, education staff and PE staff were able to support men in that situation.

Additional information

- 2.95 A recently recruited PE senior officer and a PE instructor ran the department. Before the senior officer's recruitment, the PE department had operated with one member of staff short for a long time. This had restricted the range of activities offered, and no accredited training had taken place in the previous year. Plans to offer accredited provision based on the recruitment of a third member of staff had had to be revised. Accredited sports and recreation courses were not offered elsewhere in the prison.
- 2.96 According to the prison's data, around 75% of the population accessed PE regularly. There were links with community groups, and many prisoners benefited from the opportunity to interact with these groups.

Further recommendation

- 2.97 The prison should reintroduce accredited PE training.

Faith and religious activity

- 2.98 A member of the chaplaincy team should attend every day to carry out any required statutory visits. (5.47)

Partially achieved. Chaplaincy staff were in the prison every day apart from Saturday, and available until 8pm on four days a week. Funding had been obtained to employ one Muslim chaplain for 14 hours a week, and we were told that seven-day a week cover would be

provided from the time of that appointment, which was imminent. The coordinating Anglican chaplain, who had been in post for six months, was now full time and therefore had time to carry out statutory visits, except for on Saturdays. She was supported by a number of visiting chaplains, including a Methodist chaplain (10 hours a week), two Muslim chaplains (two hours each), a Roman Catholic chaplain (two hours) and a Sikh chaplain (two hours), while a range of other chaplains were available on call. Prisoners reported positively on access to chaplaincy services.

We repeat the recommendation.

- 2.99 **All new arrivals should have access to a member of the chaplaincy within their first 24 hours or, at the least, be given the information leaflet explaining chaplaincy services and how to contact the chaplaincy team. (5.48)**

Achieved. The coordinating or Methodist chaplain saw new arrivals every day they attended the prison, and a welcome leaflet was routinely given to prisoners to explain service times, activities and other information.

- 2.100 **The prison should increase its efforts to appoint an imam. (5.49)**

Achieved. Two Muslim chaplains came to the prison for two hours each a week, and one took Friday prayers. A half-time Muslim chaplain was to be employed imminently (see paragraph 2.98).

Additional information

- 2.101 There was a small, but attractively decorated and adequate chapel. However, the world faith room, the only other designated space for worship, was bare and unwelcoming.

Further recommendation

- 2.102 The world faith room should be redecorated and made more welcoming.

Good order

Security and rules

- 2.103 **Trained staff should be provided to monitor 10% of prisoner telephone calls. (6.11)**

Partially achieved. Five per cent of all telephone calls were randomly monitored by operational support grades, who received on-the-job training from more experienced colleagues. In addition, some calls were targeted for monitoring based on intelligence. This was sufficient to meet the need.

Additional information

- 2.104 A monthly security meeting included a discussion of details relating to assaults, SIRs, incidents, segregation, adjudications and use of force, but there was no month-on-month analysis, making it difficult to spot trends.

- 2.105 In the previous year there had been over 700 SIRs, most of which related to drug use and mobile telephones. There were approximately 10 recorded incidents each month and almost half of these were related to drugs. Most transfers out were related to drug use; in January 2009, this had accounted for nine of the 10 transfers.
- 2.106 While our review of the previous six months of positive random drug tests revealed a rate of 10.77% (see paragraph. 2.50), the actual figure to date was recorded as 4.9%. However, there were few concerns about drug-related bullying and little to indicate increased disorder, suggesting that the risks were managed appropriately.
- 2.107 There had been three absconds in the previous 12 months, and eight prisoners had been unlawfully at large (missing following a ROTL).

Further recommendation

- 2.108 Monitoring of security information should include month-on-month data to enable trend analysis over time.

Discipline

- 2.109 Segregation should not be used routinely to hold prisoners awaiting transfer. (6.26)

Not achieved. Moves to segregation aimed to minimise the disturbance anticipated by a regressive transfer. Managers said that there had been two occasions where prisoners had not been moved into the segregation unit before being transferred, based on an ad hoc assessment by the security manager, but no evidence of these cases could be found. There was still no formal risk assessment, and in virtually all cases prisoners being transferred were moved into segregation for an average of between three and a half and four and a half hours. **We repeat the recommendation.**

- 2.110 There should be proper authority to segregate prisoners and decisions should be recorded. (6.27).

Partially achieved. All the documentation we looked at had a completed safety algorithm, but not all had a governor's authorisation form. **We repeat the recommendation.**

- 2.111 The times that segregation begins and ends should be recorded. (6.28)

Not achieved. Start and end times were not specifically recorded, although in most cases it was possible to calculate times from the log; however, some cases did not have a log. **We repeat the recommendation.**

- 2.112 Managers should check all documentation, and record this. (6.29)

Not achieved. In the sample we looked at, there was no evidence of management checks of segregation documentation. **We repeat the recommendation.**

- 2.113 Prisoners entering the segregation unit should only be strip-searched if a risk assessment confirms that is necessary. (6.30)

Not achieved. It was still routine practice for prisoners to be strip searched when entering the segregation unit. Segregation unit risk assessment documentation stated, 'All prisoners will be strip searched before being located in the unit.'

We repeat the recommendation.

Additional information

- 2.114 In addition to intelligence-led searching, 5% of prisoners were randomly strip searched on reception, which included those returning from ROTL. There was no monitoring of who had been selected, and therefore no means of establishing whether there were any discriminatory patterns in staff selection.
- 2.115 Discipline measures were used proportionately, and usually related to drug use. Segregation was used, on average, five times each month and there was an average of six adjudications each week. Force was rarely used; there had been only one use of restraint since 2006, involving the use of handcuffs on a prisoner refusing to transfer.

Further recommendation

- 2.116 All random strip searching should be monitored, to prevent any discriminatory practices.

Incentives and earned privileges

- 2.117 **The incentives and earned privileges system should be reviewed and a published system that reflects practice should be put into place. (6.36)**

Achieved. The system described in recommendation 2.1 was published and given to all new arrivals during induction, although it did not describe the 'fast-tracking' process for those who had already been considered suitable for ROTL while at other establishments (see section on offender management and planning).

Services

Catering

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

Additional information

- 2.118 Prisoners we spoke to were positive about the food, and this was reflected in the prison's catering survey and in the foods comments book. Staff wrote responses next to comments made in the book, and the most recent survey results were displayed in the dining room.

Prison shop

- 2.119 **All newly arriving prisoners should have access to goods from the prison shop within 24 hours of arrival. (7.17)**

Not achieved. Newly arrived prisoners could wait up to eight days before receiving their first

order, although they could get an advance of £6 to buy PIN telephone credit and/or tobacco, repayable at 50 pence a week.

We repeat the recommendation.

Additional information

- 2.120 A new canteen list had only around 300 separate items on it, and prisoners consistently said that it was not sufficient to meet their needs. Some prices were high compared with standard supermarket prices.

Further recommendations

- 2.121 The canteen list should contain a sufficient number of items to meet the general needs of prisoners.
- 2.122 Canteen prices should reflect standard supermarket prices.

Resettlement

Strategic management of resettlement

- 2.123 **The resettlement strategy should be updated to provide key targets and deliverable outcomes, and to make clear links with the north east area strategy. (8.7)**

Not achieved. There was no overarching resettlement strategy which linked with an area strategy. Elements of a resettlement strategy were contained within the business plan, which incorporated targets and deliverable outcomes, but there was no resettlement action plan organised under the resettlement pathways, identifying pathway leads and containing specific, measurable, achievable realistic and time-bound (SMART) targets. There had been no local needs analysis.

We repeat the recommendation.

Further recommendation

- 2.124 An annual needs analysis should be undertaken to inform the development of the resettlement pathways.

- 2.125 **There should be greater emphasis on managing prisoners through the end of their custodial sentence into supervision after release, and better strategic links with local probation services. (8.8)**

Achieved. Implementation of the offender management model had greatly improved links with local probation services. Meetings at a strategic level regularly took place.

- 2.126 **The terms of reference and overall purpose of the resettlement policy committee should be updated. (8.9)**

Achieved. The terms of reference and purpose of the resettlement strategy group had been

updated in January 2009. The governor chaired the meetings, which were held quarterly, and were multidisciplinary and well attended.

2.127 There should be exit surveys of all prisoners before their final release, and information and trends should be monitored and analysed monthly. (8.10)

Achieved. Prisoners were interviewed for an exit survey by the duty governor. The structured interviews were usually conducted on the day before release. The results of the survey were reviewed every month by the head of residence. An annual report summarised the findings.

Additional information

- 2.128** Prisoners had good access to the offender management unit and appreciated the open reporting system that gave them access to their history sheets and sentence plans.
- 2.129** In accordance with the published system, most prisoners who were eligible for ROTL were risk assessed eight weeks after their arrival, and if they were assessed as suitable they were usually able to have their first community visit at nine weeks. The risk assessments were robust and thoughtful. There was a weekly risk assessment board for medium-risk prisoners and a separate inter-departmental risk management meeting, which met bi-weekly, dealing with high-risk and multi-agency public protection arrangements (MAPPA) 2 prisoners.
- 2.130** Prisoners complained that they had had to wait a long time after their arrival at the establishment before being risk assessed for ROTL. We found that between November 2008 and February 2009, there had been a backlog of risk assessments (up to three weeks). This was due to a number of reasons, including the increased number of assessments that had had to be completed after the opening of the new residential unit. As a result, prisoners who had been given a date for their first risk assessment board on arrival had this date put back, and had to enquire repeatedly about when their review was likely to take place, causing uncertainty and anxiety. Managers and other staff had made efforts to reduce the backlog, and at the time of the inspection the risk assessments were up to date.
- 2.131** Public protection arrangements were well managed. Offender managers were invited to the boards. Local offender managers sometimes attended but there were no video link facilities to enable contributions from offender managers who could not visit the prison.
- 2.132** OASys assessments were up to date and sentence planning review boards for determinate sentence prisoners were held on time. The sentence plans we reviewed were of a good standard, with relevant and SMART targets.
- 2.133** Prisoners who had achieved category D status before their transfer to the establishment complained that, on arrival, they had had to wait eight weeks to be risk assessed. In fact, there was a fast-track procedure for category D prisoners who had a proven record of successful ROTL, and we noted examples of prisoners being risk assessed within 10 days and having their first community visit within two and a half weeks of their arrival. All category D prisoners were considered for fast-tracking, but the process was not explained in any of the induction information packs, and any category D prisoners who had not had previous ROTL had to wait the full eight weeks.
- 2.134** Prisoners who were risk assessed as suitable had excellent access to ROTL, with approximately 38,000 taking place over the previous 12 months. Prisoners were informed of the arrangements for ROTL when they applied to the establishment and during their induction. The arrangements were in line with Prison Service guidelines. Several prisoners complained

that some category D prisons had shorter qualifying periods and longer periods at home. They had raised this issue at a number of prisoner representative meetings since July 2008 but had not been given a response.

Further recommendations

- 2.135 Video link facilities should be installed and video conferencing used when offender managers are unable to attend sentence planning boards.
- 2.136 Details of the fast-track risk assessment system for category D prisoners should be advertised and explained on induction.
- 2.137 A response to issues raised at prisoner representative meetings should be provided at the earliest opportunity and be recorded in the minutes of the following meeting.
- 2.138 Prisoners should be given the date of their first risk assessment review on arrival and subsequently notified of any delays, with details of the reasons.

Offender management and planning

- 2.139 **Sentence planning reviews should be held on time in all cases. (8.27)**

Not achieved. The new procedures for managing life-sentenced prisoners were still in the process of being implemented. OASys had been completed for each life-sentenced prisoner and they all had a sentence plan, but life sentence review boards were not held on time.
We repeat the recommendation.

- 2.140 **A local lifer policy document should be published. (8.27)**

Not achieved. There was no current lifer policy document. During the inspection, we were shown a draft policy but there had been no consultation on the development of this policy, which had not yet been published.

Further recommendation

- 2.141 In consultation with prisoners and other stakeholders, the prison should develop and publish a local lifer policy.

- 2.142 **Lifer family days should be held. (8.29)**

Not achieved. The prison held regular family days; although life-sentenced prisoners had equal access to these events, there were none specifically designated for life-sentenced prisoners and their families.
We repeat the recommendation.

- 2.143 **The lifer forum meeting should take place regularly and at predetermined times. (8.30)**

Not achieved. There was no regular lifer forum and the lifer governor could not recall when the last meeting had been held. A recently revised, but not yet published or implemented, life-sentenced prisoner policy statement indicated that a prisoner forum would be held at least six

times a year.
We repeat the recommendation.

Additional information

- 2.144 At the time of the inspection, there were 33 life-sentenced prisoners but no prisoners serving indeterminate sentences for public protection. There was a lifer management team, including the lifer governor, an assistant, two seconded probation officers and eight lifer personal officers. Four staff had received the new management of indeterminate sentence and review (MISAR) training and there were plans to train a further six staff.

Resettlement pathways

- 2.145 Drug testing compacts should clearly state that the prison operates a system of compliance rather than voluntary drug testing. (8.50)

Not achieved. At the time of the inspection, the compact still stated that the establishment operated a 'voluntary drug testing unit'.
We repeat the recommendation.

- 2.146 There should be greater effort to assist prisoners who wish to resettle locally to retain their employment on release. (8.63)

Partially achieved. The exit survey indicated that a number of prisoners had retained employment on release. Most of these prisoners had already lived locally. The overall number of prisoners with external employment had decreased sharply in the previous 12 months and few prisoners not normally based in the local area therefore required assistance to resettle there in order to retain jobs. However, such assistance was offered by probation staff if required.

- 2.147 There should be efforts to broker links with more national employers as potential employers of prisoners from Kirklevington Grange so that they could retain employment on release. (8.64)

Not achieved. There were few links with national employers. The poor economic climate was having an impact, and a national company that employed a number of prisoners from Kirklevington Grange had recently made them redundant.
We repeat the recommendation.

- 2.148 Prisoners should be allowed to have their own vehicles, if they need them for work. (8.65)

Achieved. The car park had been expanded and there were 60 spaces available. At the time of the inspection, 32 prisoners had their own vehicles for work and education. There was no waiting list.

Additional information

- 2.149 Nacro staff worked at the prison for 16 hours a week and interviewed all prisoners before release. The seconded probation officer who had responsibility for this area also provided prisoners with assistance in finding accommodation and had links with ClearSprings and local providers.

- 2.150 All prisoners took a preparation for employment qualification before starting their community placements. Self-employment and business start-up courses were offered. There was support with CV preparation and interview techniques. However, employers were not involved in mock interviews or training. Twenty-one men had visited a job fair, and moves had been made to invite employment agencies into the prison.
- 2.151 The job club was staffed by three discipline officers and two employment liaison officers. Only one had received any specific training for the role, and that had been some years previously. There were links with Jobcentre Plus staff, and all local vacancies available were posted in the job club. Prisoners complained that the job advertisements were not checked and that some specifically excluded prisoners or ex-prisoners.
- 2.152 All prisoners could access a three-day money management course, which was accredited at entry level three through the Open College Network. Prisoners we spoke to indicated that the course had been helpful. The local Citizens Advice provided debt advice, and prisoners were assisted to make appointments. For prisoners who were not yet eligible for ROTL, there was no face-to-face debt advice, but negotiations were under way with Citizens Advice to arrange for the adviser currently working at HMP Holme House to visit Kirklevington Grange. Prisoners were encouraged and assisted to open a bank account before their release, and the prison had links with a high street bank to facilitate this.
- 2.153 Substance use and alcohol services were commissioned by the Stockton Primary Care Trust Drug and Alcohol team. Counselling, assessment, referral, advice and throughcare (CARAT) workers had 90 prisoners on their active caseload and 130 suspended. They no longer ran the 'challenging the dealers' course, owing to the withdrawal of funding, despite the fact that 116 participants had taken the course in the previous 12 months. They continued to have links with a variety of community counselling services and had increased the range of provision for those with alcohol issues.
- 2.154 The most up-to-date drug strategy needs analysis was dated 2006. The drug strategy committee met quarterly and had appropriate attendance.
- 2.155 The drug testing compact stated that prisoners were tested within 48 hours of arrival at the establishment and at least once a month thereafter. Positive tests resulted in administrative measures being triggered, in line with individual circumstances. Such measures could include a move to another unit, restriction of movement until a risk assessment was carried out, or a multidisciplinary review. Prisoners testing positive were also subject to weekly testing for the following three months. There had been a marked increase in the rate of positive tests at the time the new unit for category C prisoners had been opened.
- 2.156 Prisoners were encouraged and supported to maintain and build relationships with their children, partners and families. There was no family support worker but prisoners gave us a number of examples where personal officers, managers and the seconded probation officers had been helpful in providing practical and emotional support. The prison arranged regular family events, such as the children's Christmas party and family craft days organised by the head of learning and skills.
- 2.157 Prisoners eligible for ROTL had good access to community visits and home leave. At the time of the inspection, 206 prisoners had been assessed as suitable for ROTL and there had been 561 overnight releases in the previous six months.
- 2.158 Prisoners who were unable to see their families on community visits and home leave were entitled to one two-hour visit a week. They could book these visits themselves, and prisoners

told us that they could invariably have a visit when they wished. There was no system for prisoners to exchange their visiting orders for telephone credits.

- 2.159 There was no visitors' centre but visitors were usually brought into the visits hall immediately after arrival. Visitors were not searched and prisoners were only searched if intelligence indicated that there were increased security risks. The visits room was bright and comfortable, staff were friendly and treated visitors with respect, and supervision was unobtrusive. A snack bar staffed by volunteers and prisoners provided hot and cold drinks and cold snacks. The size of the children's play area in the visits hall had been reduced to accommodate more seating for visitors and was inadequate. The soft flooring and some of the toys were grubby, although there was a good range of children's books. There was no play leader.
- 2.160 The prison had developed effective ties with the local community, through both community work and links with community groups coming into the prison, including a local bowls team, a group with disabilities who used the gym facilities and membership of a local football league.
- 2.161 Prisoners could access a good range of offending behaviour courses. Most of the courses were run in the community by local probation services but some were available in-house. The prison had recently run a 'think first' course for life-sentenced prisoners who were not yet eligible for ROTL or who might have found it difficult to complete offending behaviour courses in the community owing to the nature of their offence. There was also some one-to-one work available in the prison. At the time of the inspection, seven prisoners were undertaking one-to-one victim awareness work. The offender management unit maintained a waiting list for programmes, which was regularly updated.

Further recommendations

- 2.162 Job club staff should receive regularly refreshed training for their role.
- 2.163 Job vacancies posted in the job club should be vetted to remove any that are not suitable for ex-prisoners and prisoners doing paid work.
- 2.164 One-to-one debt advice should be available in the prison for prisoners not eligible for release on temporary licence.
- 2.165 There should be an up-to-date drug strategy and needs analysis, which includes the needs of those with alcohol problems. It should have an action plan with target dates.
- 2.166 The children's play area should be kept clean and be large enough to accommodate the number of children wishing to use it. Children's toys should be regularly checked.
- 2.167 There should be an advertised system for prisoners with family a long way away to exchange visiting orders for telephone credits.

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 recommendation (from the previous report) To NOMS

- 3.1 The National Offender Management Service should examine Kirklevington Grange's operation and carry out an evaluation of the experience of prisoners who have left the establishment with a view to learning lessons that can be replicated elsewhere. (2.2)

Recommendation To North Tees Primary Care Trust

- 3.2 There should be a new service level agreement between North Tees Primary Care Trust and the pharmacy. It should identify the amount of pharmacist time needed and should include using a pharmacist to provide counselling sessions, pharmacist-led clinics, clinical audit and medication review. (2.7)

Recommendations To the governor

First days in custody

- 3.3 Initial interviews on the day of arrival should be held in a private room. (2.10)

Residential units

- 3.4 The toilet and shower rooms on K and R units should be brought into working order and a decent condition as a matter of urgency. (2.16)
- 3.5 The décor of all residential units should be improved, in consultation with prisoners, to provide a normal living environment which reflects the diversity of the population. (2.17)
- 3.6 Prisoners on the main 'working out' wings should have some access to cooking facilities. (2.18)

Personal officers

- 3.7 Personal officers should make more regular entries in wing history files, and this should be monitored by managers. (2.20)

Bullying and violence reduction

- 3.8 Staff should receive training in the use of the violence reduction strategy and the bully monitoring forms. (2.21)
- 3.9 The anti-bullying strategy should be tailored to meet the specific needs of the prisoners held and should be informed by the anti-bullying survey. (2.25)

- 3.10 The anti-bullying survey should be repeated, allowing respondents to remain anonymous. (2.26)
- 3.11 All incidents of potential bullying should be reported on a bullying incident report form and investigated. (2.27)
- 3.12 The anti-bullying coordinator should be given facility time to carry out the role. (2.28)
- 3.13 Monitoring of anti-bullying information should include month-on-month data to allow trends to be analysed. (2.29)

Self-harm and suicide

- 3.14 The safer custody meeting should always include a member of health services staff and the race relations liaison officer. (2.31)
- 3.15 The suicide and self-harm prevention strategy should be tailored to meet the specific needs of prisoners at Kirklevington Grange. (2.37)
- 3.16 The suicide prevention coordinator and assistant should be given facility time to carry out the role. (2.38)
- 3.17 Listeners should be managed and supported by the establishment, and informed of the identity of the coordinator. (2.39)
- 3.18 A Listener should meet all new arrivals. (2.40)
- 3.19 Copies of assessment, care in custody and teamwork (ACCT) documentation should remain in the establishment when the prisoner has moved on, to allow monitoring and analysis. (2.41)

Race equality

- 3.20 Action points from prisoner consultation meetings should be systematically followed up. (2.44)
- 3.21 There should be a comprehensive diversity policy and action plan, in relation to prisoners as well as staff. (2.46)
- 3.22 The under-representation of black and minority ethnic prisoners in release on temporary licence should be investigated and appropriate action taken if necessary. (2.47)

Foreign national prisoners

- 3.23 The prison should develop a policy and operating instruction for the support of foreign national prisoners. (2.48)

Substance use

- 3.24 Protocols for the clinical management of substance users should be developed in line with new national guidance. (2.49)

- 3.25 There should be a review of the reporting of mandatory drug testing figures to ensure accuracy. (2.51)

Health services

- 3.26 The prison health delivery plan should be revised, updated and include a full needs assessment to ensure that the healthcare services meet the needs of the population at HMP Kirklevington Grange. At the same time, healthcare policies and procedures should be updated so that they are relevant to the way healthcare is delivered at the prison, and reflect evidence-based practice. (2.52)
- 3.27 The internal layout of the healthcare department should be improved to make best use of the space available and ensure confidentiality for prisoners at all times. (2.54)
- 3.28 At least one more telephone line should be installed in the healthcare department. (2.55)
- 3.29 Nurses should use treatment triage algorithms to ensure consistency of advice and care to prisoners. (2.57)
- 3.30 There should be a workforce and activity analysis of nursing staff, combined with a training needs analysis, to ensure they have the right skills and competences to deliver the standard of care that prisoners could expect to receive in the community. (2.58)
- 3.31 The medicines and therapeutics committee should organise a formal, documented, in-possession risk assessment, a formal special sick policy, patient group directions, a drugs formulary specific to the establishment and regular audits of medication usage. (2.60)
- 3.32 Prisoners should be able to visit the pharmacy personally to present their prescriptions. This would enable access to a full pharmaceutical service and advice from the pharmacist, as well as enable prisoners to take advantage of other services, such as medicine use reviews, and care in the community consultations. (2.61)
- 3.33 There should be written agreed stock levels. (2.63)
- 3.34 All expiry date checks should be documented. (2.64)
- 3.35 Prisoners should be given comprehensive information and assistance to access health and social services on their release, and support in doing so if required. (2.66)
- 3.36 Prisoners should have access to multi-professional primary, secondary and tertiary mental health services as required. (2.73)
- 3.37 Health services staffing levels should be sufficient to meet the needs of the population, including health services representation at meetings such as safer custody and assessment, care in custody and teamwork (ACCT) reviews. (2.74)
- 3.38 All prisoners should have access to dental services equivalent to those in the community, including immediate treatment for acute problems. (2.75)
- 3.39 All workers should have appropriate occupational health checks and vaccinations for their place of work. (2.76)

Learning and skills and work activities

- 3.40 The prison should ensure that all the education contract hours are delivered. (2.87)
- 3.41 Data collection and its use as a management tool should be improved. (2.88)
- 3.42 The number of meaningful work opportunities in the prison should be increased. (2.89)
- 3.43 The number of prisoners in external paid employment should be increased. (2.90)
- 3.44 Staff should ensure that prisoners understand the purpose of community placements. The skills they develop in community placements should be monitored and recorded. (2.91)
- 3.45 The prison should ensure that pay is equitable and does not disadvantage those attending education. (2.92)

Physical education and health promotion

- 3.46 Prisoners who do not attend the gym should be actively encouraged to do so. (2.93)
- 3.47 The prison should reintroduce accredited PE training. (2.97)

Faith and religious activity

- 3.48 A member of the chaplaincy team should attend every day to carry out any required statutory visits. (2.98)
- 3.49 The world faith room should be redecorated and made more welcoming. (2.102)

Security and rules

- 3.50 Monitoring of security information should include month-on-month data to enable trend analysis over time. (2.108)

Discipline

- 3.51 Segregation should not be used routinely to hold prisoners awaiting transfer. (2.109)
- 3.52 There should be proper authority to segregate prisoners and decisions should be recorded. (2.110)
- 3.53 The times that segregation begins and ends should be recorded. (2.111)
- 3.54 Managers should check all documentation, and record this. (2.112)
- 3.55 Prisoners entering the segregation unit should only be strip-searched if a risk assessment confirms that is necessary. (2.113)
- 3.56 All random strip searching should be monitored, to prevent any discriminatory practices. (2.116)

Prison shop

- 3.57 All newly arriving prisoners should have access to goods from the prison shop within 24 hours of arrival. (2.119)
- 3.58 The canteen list should contain a sufficient number of items to meet the general needs of prisoners. (2.121)
- 3.59 Canteen prices should reflect standard supermarket prices. (2.122)

Strategic management of resettlement

- 3.60 The resettlement strategy should be updated to provide key targets and deliverable outcomes, and to make clear links with the north east area strategy. (2.123)
- 3.61 An annual needs analysis should be undertaken to inform the development of the resettlement pathways. (2.124)
- 3.62 Video link facilities should be installed and video conferencing used when offender managers are unable to attend sentence planning boards. (2.135)
- 3.63 Details of the fast-track risk assessment system for category D prisoners should be advertised and explained on induction. (2.136)
- 3.64 A response to issues raised at prisoner representative meetings should be provided at the earliest opportunity and be recorded in the minutes of the following meeting. (2.137)
- 3.65 Prisoners should be given the date of their first risk assessment review on arrival and subsequently notified of any delays, with details of the reasons. (2.138)

Offender management and planning

- 3.66 Sentence planning reviews should be held on time in all cases. (2.139)
- 3.67 In consultation with prisoners and other stakeholders, the prison should develop and publish a local lifer policy. (2.141)
- 3.68 Lifer family days should be held. (2.142)
- 3.69 The lifer forum meeting should take place regularly and at predetermined times. (2.143)

Resettlement pathways

- 3.70 Drug testing compacts should clearly state that the prison operates a system of compliance rather than voluntary drug testing. (2.145)
- 3.71 There should be efforts to broker links with more national employers as potential employers of prisoners from Kirklevington Grange so that they could retain employment on release. (2.147)
- 3.72 Job club staff should receive regularly refreshed training for their role. (2.162)

- 3.73 Job vacancies posted in the job club should be vetted to remove any that are not suitable for ex-prisoners and prisoners doing paid work. (2.163)
- 3.74 One-to-one debt advice should be available in the prison for prisoners not eligible for release on temporary licence. (2.164)
- 3.75 There should be an up-to-date drug strategy and needs analysis, which includes the needs of those with alcohol problems. It should have an action plan with target dates. (2.165)
- 3.76 The children's play area should be kept clean and be large enough to accommodate the number of children wishing to use it. Children's toys should be regularly checked. (2.166)
- 3.77 There should be an advertised system for prisoners with family a long way away to exchange visiting orders for telephone credits. (2.167)

Example of good practice

Health services

- 3.78 Some discipline staff and some prisoners had received training in the use of automated defibrillators, and were clearly identified on first-aid notices around the prison, which were updated monthly. (2.77)

Appendix I: Inspection team

Hindpal Singh Bhui	Team leader
Susan Fenwick	Inspector
Lucy Young	Inspector
Martin Kettle	Inspector
Elizabeth Tysoe	Healthcare inspector
Nigel Scarff	Offender management inspector
Pippa Bennett	Offender management inspector
Marina Gaze	Ofsted inspector

Appendix II: Prison population profile

Status	18–20 year olds	21 and over	%
Sentenced		273	100
Recall		-	
Convicted unsentenced		-	
Remand		-	
Civil prisoners		-	
Detainees		-	
Total		273	100

Sentence	18–20 year olds	21 and over	%
Unsentenced		-	
Less than 6 months		-	
6 months to less than 12 months		-	
12 months to less than 2 years		6	2
2 years to less than 4 years		27	10
4 years to less than 10 years		176	65
10 years and over (not life)		31	11
ISPP		-	
Life		33	12
Total		273	100

Age	Number of prisoners	%
Please state minimum age		
Under 21 years	-	
21 years to 29 years	104	38
30 years to 39 years	91	33
40 years to 49 years	58	21
50 years to 59 years	13	5
60 years to 69 years	7	3
70 plus years	-	
Please state maximum age	68	
Total	273	100

Nationality	18–20 year olds	21 and over	%
British		271	94.6
Foreign nationals		2	5.4
Total		273	100

Security category	18–20 year olds	21 and over	%
Uncategorised unsentenced		-	
Uncategorised sentenced		-	
Cat A		-	
Cat B		-	
Cat C		52	19

Cat D		206	75.4
Other		-	
Total		258	94.4

Ethnicity	18-20 year olds	21 and over	%
White			
British		218	80
Irish		-	
Other White		5	2
Mixed			
White and Black Caribbean		1	0.25
White and Black African		-	
White and Asian		-	
Other Mixed		1	0.25
Asian or Asian British			
Indian		6	2
Pakistani		17	6
Bangladeshi		2	1
Other Asian		11	4
Black or Black British			
Caribbean		7	3
African		1	0.25
Other Black		3	1
Chinese or other ethnic group			
Chinese		1	0.25
Other ethnic group		-	
Not stated		-	
Total		273	100

Religion	18-20 year olds	21 and over	%
Baptist			
Church of England		106	39
Roman Catholic		34	12
Other Christian denominations		-	
Muslim		35	13
Sikh		6	2
Hindu		-	
Buddhist		5	2
Jewish		-	
Other		4	1
No religion		83	30
Total		273	99

Sentenced prisoners only

Length of stay	18–20 year olds		21 and over	
	Number	%	Number	%
Less than 1 month			-	
1 month to 3 months			-	
3 months to 6 months			-	
6 months to 1 year			-	
1 year to 2 years			2	0.73
2 years to 4 years			31	11.4
4 years or more			240	87.9
Total			273	100

Main offence	18–20 year olds	21 and over	%
Violence against the person		68	25
Sexual offences		-	
Burglary		15	5
Robbery		32	12
Theft and handling		3	1
Fraud and forgery		5	2
Drugs offences		86	32
Other offences		64	23
Civil offences		-	
Offence not recorded / holding warrant		-	
Total		273	100