

Report on an unannounced short follow-up inspection of

HMP North Sea Camp

16–18 April 2012

by HM Chief Inspector of Prisons

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Introduction

North Sea Camp is a male open prison in the Lincolnshire Fens. At the time of the inspection it held 362 men. In our previous inspection in 2009, we found that much of the accommodation badly needed refurbishment. There was a high proportion of short-term prisoners whose needs were not matched to the regime and this led to weaknesses in resettlement but, overall, there was sufficient activity and prisoners felt safe.

At this short follow-up inspection, we found that sufficient progress had been made in three out of four healthy prison criteria. Levels of violence and the number of self-harm incidents were low. Routine strip-searching no longer took place and there was a more proportionate approach toward security and discipline. Despite an increase in the size of the population, as well as in the number of high-risk individuals, a successful balance had been struck between care and control, and the establishment remained an essentially safe place.

The refurbishment work which had been carried out had resulted in some improvements but, overall, living conditions remained broadly similar to those we had found previously. As a result of the increase in the size of the population, more prisoners were now required to share cells, which meant that most prisoners now lived in extremely cramped accommodation.

Relationships between officers and prisoners remained good but, although some work had been done to reinvigorate the personal officer scheme, it was still not particularly effective. No progress had been made in developing work on diversity and given the significant changes in the profile of the population since the previous inspection, this was a key weakness.

All prisoners continued to have ample time unlocked. The number and range of accredited courses had increased, classroom attendance had improved and course completion rates were now good. The resources available to provide prisoners with opportunities in learning and skills were well managed but the level of provision was too limited, as there were still not enough places. Too many of the jobs available to prisoners were mundane. Considerable improvements had been made to the PE facilities and there was a broader range of activities provided in the evening.

Greater priority was now being given to resettlement. A large amount of effort had already been made to develop a more strategic approach, and efforts were beginning to be made to develop purposeful pathway work. Release on temporary licence was used effectively and the procedural delays in completing assessments, which we had found previously in a number of areas, were no longer evident. The regime provided for long-term prisoners adequately met their basic needs. The number and range of employers available to provide support to help prisoners to resettle had increased. Constructive work was being carried out within the 'offsite' resettlement unit to help to normalise the experience of long-term prisoners.

The isolated location of North Sea Camp, along with the poor state of the built environment, undoubtedly create barriers to what can be achieved there. Nevertheless, it continues to fulfil its function as an open prison relatively successfully. In order to build on the incremental progress we saw, the prison needs to give greatest attention to the areas of diversity and resettlement.

Nick Hardwick
HM Chief Inspector of Prisons

June 2012

Fact page

Task of the establishment

HMP North Sea Camp is an open male category D prison.

Prison status

Public

Region

East Midlands

Number held

362

Certified normal accommodation

378

Operational capacity

420

Date of last full inspection

May 2009

Brief history

HMP North Sea Camp was originally a borstal, which opened in 1935. The original staff and trainees were from HMP Stafford and they established a tented camp at the site while they began to build permanent buildings. They also built a new sea bank to reclaim further land from The Wash. This work was completed in 1979. The reclaimed land was used for farming before being sold in 2004.

Short description of residential units

Single accommodation is available for up to 84 prisoners; the remaining facilities are shared and consist of cells and dormitories. In addition to this, there are a further 42 beds within four detached houses, which are used for long-term prisoners living independently.

Name of governor/director

Graham Batchford

Escort contractor

GeoAmey

Health service commissioner and provider

Commissioner: NHS Lincolnshire

Provider: Lincolnshire Partnership NHS Foundation Trust

Learning and skills providers

Lincoln College

IMB chair

Steve Knox

Section 1: Summary

Introduction

- 1.1 Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, immigration detention facilities and police custody.
- 1.2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.
- 1.3 The purpose of this inspection was to follow up the recommendations made in our last full inspection of 2009 and assess the progress achieved. All full inspection reports include a summary of outcomes for prisoners against the model of a healthy prison. The four criteria of a healthy prison are:

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

- 1.4 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. Inspectors draw up a brief healthy prison summary setting out the progress of the establishment in the areas inspected and giving an overall assessment against the following definitions:

Making insufficient progress

Overall progress against our recommendations has been slow or negligible and/or there is little evidence of improvements in outcomes for prisoners.

Making sufficient progress

Overall there is evidence that efforts have been made to respond to our recommendations in a way that is having a discernible positive impact on outcomes for prisoners.

Safety

- 1.5 At our inspection in 2009 we found that outcomes for prisoners against this healthy prison test were reasonably good. We made 31 recommendations in this area, of which 18 had been

achieved, five partially achieved and eight had not been achieved. We have made one further recommendation.

- 1.6 Routine strip-searching on reception and discharge no longer took place. Strip-searching was rarely carried out, and only following a risk assessment.
- 1.7 Procedures in the reception area were generally efficient and staff were friendly and helpful. There were avoidable delays because of the slow processing of prisoners' property.
- 1.8 The first night arrangements had improved. Staff exchanged relevant background information about newly admitted prisoners and night staff were able to identify them easily. Prisoner orderlies were supportive and reassuring to new arrivals throughout the early days process. The induction programme was informative and balanced.
- 1.9 The number of violent incidents was low, with 11 assaults occurring in 2011; however, these included some serious incidents which were not discussed at the safer custody meetings.
- 1.10 Operational efficiency in the area of safer custody was no longer dependent on the presence of a single safer custody coordinator. More managers than at the time of the previous inspection had been briefed about the violence reduction strategy and they were alert to the need to open intervention plans. A large number of plans were opened but they were of limited value, as the content was mostly observational.
- 1.11 Levels of self-harm were low, with an average of one assessment, care in custody and teamwork (ACCT) booklet opened each month. The ACCT documentation was of a good standard. Only 73% of operational staff had received ACCT training. Additional support was now available to prisoners through the trained family liaison officers.
- 1.12 The overall level of security was proportionate for the population profile. Prisoners were no longer required to squat during searches, and routine searching on visits no longer occurred.
- 1.13 Adjudications were administered fairly and the punishments issued were proportionate. The segregation unit had been taken out of commission, with no apparent adverse outcome. Despite considerable changes in the population, including the admission of a larger number of higher-risk prisoners, a successful balance had been maintained between care and control.
- 1.14 Integrated drug treatment system (IDTS) protocols were being implemented and training had been introduced to raise awareness about IDTS. Although repairs had been carried out, the mandatory drug testing suite remained a poor facility.
- 1.15 On the basis of this short follow-up inspection, we considered that the establishment was making sufficient progress against our recommendations.

Respect

- 1.16 At our inspection in 2009 we found that outcomes for prisoners against this healthy prison test were reasonably good. We made 75 recommendations in this area, of which 28 had been achieved, 14 partially achieved and 30 had not been achieved. Three recommendations were no longer applicable. We have made three further recommendations.
- 1.17 There was an ongoing programme of repair and decoration. Some remedial work had been carried out and showers on both north and south residential units had been improved.

However, the living conditions for too many prisoners were still inadequate. Prisoners were still required to share cells designed for one, and this resulted in them living in extremely cramped conditions. Since the previous inspection, the operational capacity had increased from 318 to 420; given the limited availability of single accommodation, this meant that a higher proportion, indeed most prisoners, were required to share.

- 1.18 The relationships we observed between staff and prisoners were consistently polite and respectful. Although some work had been done to reinvigorate the personal officer scheme, it was not sufficiently effective and prisoners had little knowledge about how it worked.
- 1.19 Work relating to diversity had not been developed. The policy was out of date and did not cover all diversity strands. The most recent diversity meeting had taken place more than seven months before the inspection.
- 1.20 Black and minority ethnic prisoners in our groups did not report any racial difficulties but there were no consultation forums for any minority group. Discrimination incident report forms were not scrutinised independently. Provision for prisoners from a foreign national background remained inadequate.
- 1.21 Reasonable adjustments were made for some prisoners with mobility problems but none of them had care plans.
- 1.22 Newly arrived prisoners were seen by a member of the chaplaincy team. The team played a wider role in prison life than at the time of the previous inspection but the multi-faith room was small and shabby.
- 1.23 The quality of responses to formal complaints had improved. Replies were respectful and governance arrangements had also improved. Prisoners had access to suitable legal services.
- 1.24 There had been some improvements in the standard of health services. All health services staff had been trained in relation to resuscitation and defibrillation and had also completed ACCT training.
- 1.25 Prescriptions were now documented correctly and regular audits had been introduced. Pharmacy-led clinics and medicine use reviews had been introduced. Problems associated with in-possession medication were being addressed constructively.
- 1.26 Advances had been made in relation to mental health provision and support to prisoners was now available from a wider range of professionals.
- 1.27 The range and standard of food provided were good and mealtimes were reasonably spaced through the day. The dining room was poorly furnished, shabby and too small to cater for the increased population.
- 1.28 On the basis of this short follow-up inspection, we considered that the establishment was making insufficient progress against our recommendations.

Purposeful activity

- 1.29 At our inspection in 2009 we found that outcomes for prisoners against this healthy prison test were reasonably good. We made 10 recommendations in this area, of which five had been

achieved, four partially achieved and one had not been achieved. We have made three further recommendations.

- 1.30 All prisoners continued to have ample time unlocked. Outdoor seating had been provided within easy reach of the residential units but the association areas were still poorly equipped. The quality of activities taking place in the evenings was now adequate.
- 1.31 The resources available to provide prisoners with opportunities in learning and skills were well managed but the level of provision was still too limited. The number and range of accredited courses had increased but the number of places was limited.
- 1.32 Classroom attendance had improved and course completion rates were now good. There was still no system to record and recognise skills developed through community projects and paid employment. Too many of the jobs available to prisoners were mundane, particularly in relation to cleaning and farming.
- 1.33 Considerable improvements had been made to the PE facilities with the refurbishment of the showers and toilets and provision of accommodation to house cardiovascular and fitness equipment.
- 1.34 On the basis of this short follow-up inspection, we considered that the establishment was making sufficient progress against our recommendations.

Resettlement

- 1.35 At our inspection in 2009 we found that outcomes for prisoners against this healthy prison test were not sufficiently good. We made 44 recommendations in this area, of which 21 had been achieved, 9 partially achieved and 12 had not been achieved. Two recommendations were no longer applicable. We have made three further recommendations.
- 1.36 A considerable amount of work had been carried out in an attempt to develop a strategic approach towards resettlement. A draft strategy has been produced and a committee structure was ready to be introduced. A needs analysis had still not been carried out and insufficient thought had been given to how the pathways would be managed.
- 1.37 All prisoners were seen at induction and again shortly before discharge to ensure that their resettlement needs had been addressed. Delays in assessing indeterminate-sentenced prisoners for outwork, and collating parole dossiers had been addressed successfully.
- 1.38 Initial sentence plans were completed but prisoners were confused about the subsequent process, and some were unaware of the content of their sentence plans. The level of release on temporary licence (ROTL) being granted was comparable with that in other open prisons. Relatively good use was made of voluntary placements but access to paid work was poor.
- 1.39 The lifer population had trebled and no longer represented a minority. The regime provided for long-term prisoners adequately met their basic needs.
- 1.40 Prisoners were aware of the community engagement team, which dealt primarily with voluntary and paid work placements, but they had little knowledge about how to gain assistance with other resettlement issues. Prisoners found it difficult to access to the offender management unit.

- 1.41 Prisoners still had no access to a specialist housing advice/provision, although induction staff were well trained in accommodation issues and had developed links with a range of housing providers.
- 1.42 Employability courses helped prisoners to develop job search and application skills, although the number of places available was small. A local charity provided information and support to prisoners applying for employment. The existing arrangements to provide vocational support did not provide the structured training and help necessary for all prisoners. The number and range of employers to support resettlement had increased but were still underdeveloped.
- 1.43 Health services staff now routinely contacted community services to ensure continuity of care on release for prisoners with mental health needs. Prisoners who had not registered with a GP were supported to do so before release. There were good links with Macmillan Cancer Support services, and an early prevention of cancer initiative had been set up.
- 1.44 The demand for drug and alcohol support was limited but there was adequate help available for those who needed it.
- 1.45 There was no provision of specialist finance, benefit and debt advice but prisoners who were eligible for ROTL were encouraged to open bank accounts.
- 1.46 The visitors' waiting area remained an austere environment, with dirty toilets, holes in the walls and no refreshment facilities. Prisoners were no longer required to wear prison-issue clothes during visits or family days.
- 1.47 Work had recently begun in modifying the regime to try to normalise the experience of long-term prisoners placed on the Jubilee House resettlement unit.
- 1.48 Prisoners were able to maintain close contact with their family and friends through their relatively frequent opportunities to participate in town visits and ROTL. Storybook Dads had recently been introduced, which was a useful initiative as there were no parenting or relationship courses available.
- 1.49 On the basis of this short follow-up inspection, we considered that the establishment was making sufficient progress against our recommendations.

Section 2: Progress since the last report

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

Main recommendations (from the previous report)

- 2.1 The remedial work required to bring the prison buildings up to standard should be undertaken, with the showering facilities on north and south units taking priority. (HP43)

Partially achieved. Some remedial and maintenance work had been undertaken since the previous inspection. New roof coverings had been installed, some exteriors of the prefabricated units cladded and showers on both the north and south residential units improved. Much of the accommodation, however, remained substandard, with residential and non-residential areas still in need of attention. Conditions in most residential units remained poor. Too many cells were small and cramped, and some were grubby. Prisoners had little personal space and nowhere private to store possessions. Many communal areas were old, worn and poorly maintained. Association rooms were generally in a poor state and toilets, particularly on the south units, were badly stained. However, the gardens and grounds were maintained to a high standard.

We repeat the recommendation.

- 2.2 The segregation unit should be taken out of commission and removed from the cell certification. (HP44)

Achieved. The segregation unit had been decommissioned during the previous inspection and was not in use. We were told that its absence had resulted in no adverse consequences.

- 2.3 There should be no routine strip-searching of prisoners on reception and discharge. (HP45)

Achieved. The routine strip-searching of prisoners on reception and at discharge had ceased. Generally, strip-searches in reception were rare and conducted only following specific intelligence.

- 2.4 Managers should review the establishment's diversity strategy to ensure that it covers all minority groups and that each strand is underpinned by appropriate policies and structures. (HP46)

Not achieved. Equality and diversity work was an area that had been neglected. The diversity strategy had been reviewed and listed aims to promote equality, diversity and inclusion. While the strategy described the protected characteristics covered, the policy underpinning it was out of date and made no mention of the Equality Act 2010. Structures to support the strategy were inadequate. The equality adviser had lead responsibility for implementing the strategy. She worked alone and was responsible for all the protected characteristics. There was no member of staff to cover her absences (see also recommendation 2.56).

We repeat the recommendation.

- 2.5 The number of mundane orderly jobs should be reduced and opportunities for gaining accredited qualifications increased. (HP47)

Partially achieved. The number of mundane orderly jobs remained high, particularly in cleaning and farming. The number and range of accredited qualifications had increased, with enhanced provision at level 2. However, the number of opportunities was limited. A minority of courses now provided exemption from some elements of apprentice framework requirements which was welcome.

Further recommendation

- 2.6 The number of mundane orderly jobs should be reduced, particularly in cleaning and farming. The number of places on courses leading to accreditation should increase.

- 2.7 There should be an up-to-date, pathway-based resettlement strategy, informed by a needs analysis, which addresses the needs of the different groups within the population. (HP48)

Not achieved. A draft reducing reoffending strategy had been produced. It was based on the pathway model and action plans were being developed. However, as there was no up-to-date needs analysis, it was not clear if the pathway provision proposed met the needs of the population, which had changed considerably since the previous inspection.

We repeat the recommendation.

- 2.8 All prisoners should be seen formally before release to ensure that resettlement needs have been addressed. (HP49)

Achieved. The induction team interviewed prisoners on arrival and again at least four weeks before release to ensure that resettlement issues such as accommodation and financial affairs had been addressed. Where specialist services were not available in the prison (for example, see recommendation 2.161), staff signposted prisoners to relevant community provision.

Recommendations – safety

Early days in custody

- 2.9 Managers should ensure that reception is adequately staffed, especially in the early afternoon, to ensure that reception procedures are carried out efficiently. (1.12)

Partially achieved. Generally, reception protocols were effective and staffing levels adequate. The reception area was reasonably clean and well organised. Staff were welcoming and clearly focused on the needs of newly arriving prisoners. However, some procedures still took too long. Delays occurred because of the slow processing of prisoners' property by reception staff.

Further recommendation

- 2.10 Prisoners' property should be processed efficiently.

2.11 All prisoners should be offered a free telephone call on their day of arrival. (1.13)

Achieved. Prisoners were offered a telephone call to inform their families or close friends of their arrival at the prison.

2.12 Managers should introduce appropriate first night arrangements to ensure that prisoners' wellbeing is regularly monitored, supported and recorded. (1.14)

Achieved. Trained induction staff identified the immediate needs of arriving prisoners, during a private interview. Issues were dealt with quickly and sensitively. The prisoner peer support scheme was excellent. Trained prisoners met, informed and helped all new prisoners on arrival and during their first few days. Handover procedures for night staff were better developed than at the time of the previous inspection and included specific information about the location of new prisoners.

2.13 Managers should arrange an induction programme structured to provide constructive activity throughout the core day. (1.15)

Achieved. The five-day induction programme contained a range of useful information. For example, newly arrived prisoners were advised on how to access resettlement services and activities. Most prisoners were occupied for most of the core day. Induction officers interviewed all new prisoners to explain the contents of the published induction programme. Interviews took place in the well-equipped induction centre, were informative and covered relevant issues. Prisoners were encouraged to ask questions and given the opportunity to discuss matters of concern to them. Individual needs were reassessed and recorded in the first night and induction assessment booklet.

Bullying and violence reduction

2.14 All staff should be trained in the violence reduction strategy, focusing especially on intervention plans. (3.11)

Not achieved. Staff did not receive training in the violence reduction strategy. The safer custody coordinator provided *ad hoc* 15-minute briefings to groups of staff. Otherwise, staff were expected to read the violence reduction policy on the prison's shared computer drive. **We repeat the recommendation.**

2.15 Senior managers should ensure that all managers are competent in violence reduction procedures, so that operational efficiency in this area does not depend on the presence of the safer custody manager. (3.12)

Achieved. Managers had received briefings from the safer custody coordinator on violence reduction procedures, which helped to provide continuity. When he was on leave, other members of staff opened violence reduction intervention plans when necessary.

2.16 The safer custody meeting should consider patterns and trends in violent behaviour, and shape policy accordingly. (3.13)

Not achieved. Violence reduction was a standing item at safer custody meetings; however, the number of fights and assaults was not discussed. While the levels of violent behaviour were low, with 11 assaults in 2011 and one in 2012 to date, some incidents had been serious. In one, a prisoner had been stabbed and an ambulance and police called. This incident had not been discussed at the meeting. Security staff did not regularly attend the meetings. All

discussion was around the number of violence reduction intervention plans opened. Learning points from the plans were discussed.

We repeat the recommendation.

2.17 Prisoner representatives should be invited to attend the safer custody meetings. (3.14)

Not achieved. Other than Listeners, prisoners were not invited to the safer custody meetings.

We repeat the recommendation.

2.18 Entries in intervention plan documents should record interactions between staff and the prisoner at least once in each of the three main sessions of the day. (3.15)

Not achieved. Few intervention plan documents recorded interactions between staff and the prisoner. Many simply recorded repetitive entries, such as 'seen at roll check', with no indication of the prisoner's mood or behaviour. Some documents recorded meaningful interactions but not for each of the three main sessions in the day.

We repeat the recommendation.

2.19 Violence reduction intervention plans should be initiated in every case where there is evidence of intimidatory behaviour. (3.16)

Achieved. Violence reduction intervention plans were initiated following incidents of intimidatory behaviour.

Self-harm and suicide prevention

2.20 Managers should evaluate the care plan system and, if it is continued, include relevant guidance in the suicide and self-harm strategy. (3.30)

Not achieved. The care plan system was still in use, although the number of plans opened was low, with one in 2010 and four in 2011. There was no specific guidance in the suicide and self-harm policy on when or how a care plan should be used.

We repeat the recommendation.

2.21 Senior managers should check the quality of assessment, care in custody and teamwork (ACCT) documentation regularly and feed back specific guidance to improve quality. (3.31)

Achieved. Few ACCT documents were opened, with approximately one opened each month in the previous year. Orderly and duty officers checked ACCT documents daily. Those we reviewed were of good quality.

2.22 All staff working face to face with prisoners should receive training on suicide prevention and self-harm risk management, and those working night shifts should be prioritised for this training; all operational managers should receive case management training. (3.32)

Partially achieved. Not all operational staff had received training on self-harm and suicide prevention; 27% of staff had yet to receive training. All 14 operational managers had completed case management training.

We repeat the following part of the recommendation: All staff working face to face with prisoners should receive training on suicide prevention and self-harm risk management.

2.23 Managers should introduce a contingency plan for Listener training, ready for implementation if numbers drop. (3.33)

Not achieved. There was no contingency plan for Listener training. The prison was reliant on using prisoners who had received the training in other establishments. It was not clear what the prison would do if the number of Listeners dropped.

We repeat the recommendation.

2.24 Managers should revise the suicide and self-harm strategy to ensure that effective multidisciplinary support is offered during the first days at the establishment, and especially the first 24 hours. (3.34)

Achieved. The suicide and self-harm policy dealt in detail with the early days in custody. The staff we observed in reception and induction were supportive towards prisoners. The peer supporters used in the induction programme were particularly helpful and supportive to new arrivals (see section on early days in custody).

2.25 There should be a clear system for giving potentially distressing personal news to prisoners, using the skills of those with relevant training and experience. (3.35)

Achieved. Two members of staff had received four days' training as family liaison officers. Part of the training involved imparting distressing personal news. Their shift patterns were arranged so that one of them was on duty every weekend.

2.26 A family liaison officer should be appointed. (3.36)

Achieved. See recommendation 2.25.

2.27 Guidance on use of the care suite and on personal support overnight should be included in the suicide and self-harm strategy. (3.37)

Achieved. There was no care suite but the Listeners' suite was used to manage prisoners in crisis. The suicide and self-harm policy contained a section on 'location and accommodation' which addressed overnight support.

2.28 Uniformed staff should carry anti-ligature knives at all times. (3.38)

Achieved. Uniformed staff carried anti-ligature knives.

Security

2.29 Prisoners should only be asked to squat if intelligence suggests that there is a high probability that they have contraband concealed. In all cases, authority to request a prisoner to squat should be given by a senior manager and the circumstances should be logged and monitored by the senior management team to ensure that any use of squat searching is reasonable and proportionate. (6.9)

Achieved. Prisoners were not required to squat during strip-searches. Instructions had been issued and the security manager monitored arrangements. Rub-down searches were no longer carried out routinely on visits.

2.30 Monthly security intelligence objectives should be specific, measurable, achievable, and realistic and time bound (SMART). (6.10)

Achieved. The small security department was well managed and the security committee appropriately structured. Committee meetings were well attended by managers and staff representatives from relevant departments. Communication was good. The standing security agenda was reasonable and included an analysis of the security information reports. Monthly security objectives were agreed through the appropriate consideration of intelligence.

Incentives and earned privileges

- 2.31 Staff from a prisoner's place of work or activities should contribute to an incentives and earned privileges (IEP) review. (6.38)

Partially achieved. IEP reviews were conducted by residential staff as needed but there was little input from other areas, such as the prisoner's place of work.
We repeat the recommendation.

Disciplinary procedures

- 2.32 The adjudication standardisation meeting should be held every quarter as scheduled and should analyse statistics to identify and monitor any trends. (6.24)

Partially achieved. Standardisation meetings were not held every quarter but records showed that the application of punishments was proportionate and consistent.

The use of force

- 2.33 Video-recording facilities should be available to record any planned use of force incidents. (6.25)

Not achieved. Although use of force was low, when it occurred there were no facilities to record it.
We repeat the recommendation.

Segregation

- 2.34 A log should be kept for all prisoners held in the reception holding room before transfer to closed conditions, and this should be monitored by the senior management team. (6.26)

Not achieved. A log was not kept for prisoners held in the reception holding room before transfer to closed conditions. Prisoners were rarely held in these conditions.
We repeat the recommendation.

- 2.35 A protocol should be developed, implemented and published for the management of prisoners who present a risk to others or of abscond. (6.27)

Achieved. Risk assessments and management systems were effective. Assessments were informed by the prisoner's recent behaviour and historical data. A balanced approach was adopted towards risk management and this led to proportionate responses. Intelligence was communicated effectively to all relevant areas of the prison, including the residential areas. This enabled staff to make informed decisions when managing risk.

Substance misuse

2.36 Detoxification protocols should be introduced. (3.101)

Partially achieved. Substance use services operated in accordance with national guidance. Local integrated drug treatment system (IDTS) guidance had been developed and was awaiting ratification from Lincolnshire Partnership NHS Foundation Trust (LPFT).

2.37 Staff should receive integrated drug treatment system (IDTS) awareness training. (3.102)

Achieved. Approximately 70% of officers had received IDTS awareness training from the substance misuse lead nurse.

2.38 Appropriate flooring should be fitted in the mandatory drug testing (MDT) suite. (3.103)

Achieved. While the flooring had been replaced since the previous inspection, the MDT suite remained in poor condition.

Recommendations – respect

Residential units

2.39 Cells designed for one should not accommodate two. (2.21)

Not achieved. Cells designed for one prisoner were being used to accommodate two.
We repeat the recommendation.

2.40 The telephones located in the association areas on Harrison and Llewellyn units should be moved to allow the limited association area to be used. (2.22)

Not achieved. Telephones on Harrison unit had not been moved and continued to limit association space.
We repeat the recommendation.

2.41 The association areas should be made more attractive to encourage use, both in terms of decoration and facilities available. (2.23)

Not achieved. Association areas remained stark, poorly decorated and dirty. Equipment, such as pool and table tennis tables, was not properly maintained.
We repeat the recommendation.

2.42 Prisoners on Harrison and Llewellyn units and the long-term houses should be able to do their own laundry. (2.24)

Not achieved. There were no facilities for prisoners on Harrison and Llewellyn units to wash their clothing. Laundry facilities for all prisoners were located on north unit, and they could have their clothing washed once a week. Orderlies collected clothing on Harrison and Llewellyn units in laundry bags; the clean clothes were usually returned within a few days. Prisoners complained that clothing often went missing, so many on Harrison and Llewellyn units washed clothing in sinks and showers.
We repeat the recommendation.

2.43 The offensive display policy should be enforced. (2.25)

Achieved. A notice to staff and prisoners had been issued about the displaying of offensive or degrading material. Its content was clearly understood by staff and prisoners, and staff enforced the policy.

2.44 The showers in all units should be deep cleaned to prevent mould from building up, and the problems with water pressure should be remedied. (2.26)

Achieved. Showers were generally in a reasonable state and all were in working order.

Staff–prisoner relationships

2.45 Staff should routinely knock before entering prisoners' cells. (2.38)

Not achieved. Most staff that we spoke to said that they would not routinely knock because they did not have enough time. Some of the prisoners we spoke to were unhappy about this practice and regarded it as an unnecessary intrusion.

We repeat the recommendation.

2.46 Staff should use prisoners' titles and surnames or preferred names. (2.39)

Achieved. The interactions we observed between staff and prisoners were consistently positive and methods of address were polite and mutually respectful.

2.47 The use of prisoners as peer supporters should be extended. (2.40)

Not achieved. We received positive feedback from prisoners about the helpfulness of the peer supporters throughout the early days procedures. There were plans to extend the work carried out by the peer supporters to resettlement but this had not yet been carried out.

We repeat the recommendation.

2.48 The effectiveness of the existing personal officer scheme should be reviewed and improvements introduced. (2.46)

Not achieved. Some changes had been introduced to the personal officer scheme approximately 18 months before the inspection. Designated officers were allocated approximately 12 prisoners, for whom they were responsible. There was no policy or training covering this work and there seemed to be little enthusiasm for it among staff and little awareness about it among prisoners.

We repeat the recommendation.

2.49 Managers should ensure that personal officers make time to discuss relevant issues with those on their caseload, and personal information about individual prisoners should be noted in their wing history files to ensure that all staff have access to important facts. (2.47)

Partially achieved. As part of the new arrangements (see recommendation 2.48), personal officers were required to produce a written monthly update on each of the prisoners for whom they were responsible. In practice, these updates were short and contained little detail.

We repeat the recommendation.

Equality and diversity

Strategic management

- 2.50 A disability liaison officer should be appointed and given sufficient profiled time to meet the needs of the population. (3.49)

No longer relevant. The prison had not appointed a disability liaison officer. All work in relation to prisoners with disabilities was covered by the equality adviser.

- 2.51 The disability learning officers should have job descriptions and their roles advertised around the prison. (3.50)

No longer relevant. Disability learning officers were no longer in post. Work with prisoners with disabilities was the responsibility of the equality adviser.

Protected characteristics

- 2.52 Regular reviews of the needs of each prisoner with a disability should take place, with involvement from the prisoner. (3.51)

Not achieved. While reasonable adjustments were made for some prisoners with mobility problems, multidisciplinary reviews of the needs of prisoners with disabilities did not routinely take place.

We repeat the recommendation.

- 2.53 Policy guidance on the management of older prisoners and gay, bisexual and transgender prisoners should be developed. (3.52)

Not achieved. The diversity policy did not provide guidance on working with older or gay, bisexual and transgender prisoners.

We repeat the recommendation.

- 2.54 The prison should ensure that information about a prisoner's disability and his consequent needs is communicated to all those involved in his care. (3.53)

Achieved. Prisoners with disabilities were identified in reception and information about their disability was recorded on their computer record (P-Nomis). Staff around the prison were able to access this information.

- 2.55 Analysis of the experience of prisoners with disabilities should take place and be considered by the diversity and race equality action team. (3.54)

Not achieved. An analysis of the experiences of prisoners with disabilities had not taken place.

We repeat the recommendation.

- 2.56 Attendance at the diversity and race equality action team (DREAT) meetings should be consistent and represent all areas of the prison. (3.60)

Not achieved. The DREAT meetings no longer took place. The most recent one had occurred

in August 2011, although there were plans to restart them. Meetings had taken place bimonthly and been generally well attended, with representatives from across the prison. Prisoner representation had been limited, usually with only one diversity representative in attendance.

Further recommendation

2.57 Diversity and race equality action team (DREAT) meetings should be reinstated, with consistent multidisciplinary attendance.

2.58 Efforts should be made to secure attendance from an external body at DREAT meetings. (3.61)

Partially achieved. When the DREAT meetings had run (see recommendation 2.56), external organisations had not always attended. A representative from South Lincolnshire Community and Voluntary Service had attended some meetings in 2011.

We repeat the recommendation.

2.59 The race equality officer (REO) should be supported in obtaining all the training she requires to be fully effective in her role. (3.62)

Achieved. Race equality was now the responsibility of the equality adviser, who told us that she had received relevant training for her role.

2.60 Meetings of the prisoner representatives should be minuted and action points followed through. (3.63)

Not achieved. At the time of the inspection there was only one prisoner representative. The prison was unable to provide us with the minutes of previous meetings.

We repeat the recommendation.

2.61 The REO should ensure that formal consultation meetings with black and minority ethnic prisoners take place and that prison managers attend. (3.64)

Not achieved. A quarter of the population were from a black and minority ethnic background but there was still no consultation for this group of prisoners. Black and minority ethnic prisoners in our groups said that they did not encounter any racial difficulties.

We repeat the recommendation.

2.62 External quality assurance for completed racist incident report forms should be introduced. (3.65)

Not achieved. A member of the local community and voluntary service had been identified to carry out this task; however, she had yet to scrutinise any discrimination incident investigations.

We repeat the recommendation.

2.63 A foreign nationals coordinator should be appointed, with sufficient profiled time to be effective in the role. (3.71)

Not achieved. A foreign nationals coordinator had not been appointed but responsibility for this area of work had been allocated to the equality adviser. Despite this, the needs of prisoners from a foreign national background were still not being adequately met.

- 2.64 The foreign nationals policy should be publicised around the prison so that staff and prisoners are aware of it. (3.72)
- Not achieved.** A foreign nationals policy had not been published since the previous inspection. The diversity policy did not address issues faced by foreign nationals.
We repeat the recommendation.
- 2.65 A formal analysis of the needs of foreign national prisoners should be undertaken. (3.73)
- Not achieved.** The needs of foreign national prisoners had not been analysed.
We repeat the recommendation.
- 2.66 The prison should arrange for access to independent specialist legal advice for foreign national prisoners. (3.74)
- Not achieved.** Prisoners from a foreign national background still did not have access to independent specialist legal advice.
- 2.67 Consultation meetings with foreign national prisoners and staff should take place regularly. (3.75)
- Not achieved.** There were no consultation meetings with foreign national prisoners.
We repeat the recommendation.
- 2.68 Local policies, routines and rules should be readily available in languages other than English. (3.76)
- Partially achieved.** Induction booklets were available in 11 different languages. Little else around the prison was translated, although the prison held few non-English speakers.
- 2.69 Managers should review whether the use of other prisoners and staff as the main source of interpreting support is appropriate. (3.77)
- Achieved.** Managers had reviewed the use of prisoners and staff as interpreters and concluded that a mix of resources would be used, including staff where appropriate. We were told that external interpreting services would be used where necessary.
- 2.70 There should not be a limit on the amount of PIN credit that a foreign national prisoner is given, if he has sufficient funds. (3.78)
- Achieved.** The £50 PIN credit limit was no longer applicable to foreign national prisoners.

Faith and religious activity

- 2.71 All prisoners should have access to a chaplain of their own faith. (5.41)
- Not achieved.** As at the previous inspection, Hindu, Sikh and Pagan ministers did not attend the prison. The chaplaincy team had made efforts to obtain access to ministers of these faiths but, due to the location of the prison, none were willing to attend.
We repeat the recommendation.

- 2.72 A multi-faith area with washing facilities, large enough to accommodate the number of prisoners using it should be provided. (5.42)

Not achieved. The multi-faith area had not changed since the previous inspection and was unfit for purpose. It was shabby, small and lacked washing facilities.
We repeat the recommendation.

- 2.73 A separate music room should be provided to enable the music group to practise without restricting the use of the chapel for other activities. (5.43)

No longer relevant. A separate music room had not been created. Music groups still practised in the chapel; however, they did not clash with other chapel-based activities.

- 2.74 The chaplaincy team should be enabled to play a wider role in the establishment, including seeing all new arrivals, attending key meetings and contributing to assessment, care in custody and teamwork (ACCT) reviews. (5.44)

Partially achieved. The chaplaincy team, comprising one full-time, one part-time and five sessional chaplains, was supported by a range of volunteer chaplains and volunteers. The team played a wider role in prison life than at the time of the previous inspection. As well as seeing all new arrivals, they attended ACCT reviews when invited but not did not attend all key meetings.

Further recommendation

- 2.75 The chaplaincy team should attend all key meetings.

Complaints

- 2.76 Managers should analyse complaints received each month and determine any actions or changes needed in response to patterns and trends. (3.84)

Achieved. The quality of responses to complaints had improved. They were generally respectful and, on the whole, adequately addressed the issues raised. Governance arrangements were good. The governor carried out regular quality checks and the types of complaint were analysed monthly. Emerging problems were dealt with.

Legal rights

- 2.77 The session on legal services should be included every week in the induction programme. (3.90)

Achieved. Induction staff provided information about domestic and civil matters, procedures for appeals and recalls.

- 2.78 Managers should consult widely among prisoners about the reasons for their dissatisfaction with provision for communicating and meeting with legal representatives, and take steps to improve confidence in the practical processes. (3.91)

Not achieved. Managers had not consulted with prisoners about communicating with and

meeting legal representatives.
We repeat the recommendation.

- 2.79 **Managers should emphasise to staff, and monitor compliance with, the requirements in relation to legal correspondence. (3.92)**

Achieved. Published written instructions adequately set out procedures. There was no evidence that staff did not deal with legal correspondence properly. Prisoners we spoke to confirmed that the instructions were carried out properly.

Health services

Governance arrangements

- 2.80 **All staff should have at least annual resuscitation and defibrillation training. (4.40)**

Partially achieved. All nursing staff were up to date with their resuscitation and defibrillation training to intermediate life support standard. Not all officers were up to date with their first-aid or emergency life support training.

Further recommendation

- 2.82 **The pharmacy technician should work under appropriate supervision. (4.41)**

Achieved. The pharmacy technician received support from the chief pharmacy technician.

- 2.83 **The dental SLA should be reviewed to ensure that it meets the needs of prisoners. (4.42)**

Not achieved. At the time of the previous inspection, dental services had been delivered by a private provider. This had changed in April 2011, and services were now provided by an NHS dentist. There was no Service Level Agreement. The waiting list was managed by the local provider and we received complaints of long waits. Prisoners saw a nurse before they were given a dental appointment, enabling pain relief or antibiotic treatment to start before treatment.

- 2.84 **Clinical supervision should be available and staff encouraged to access it. (4.43)**

Partially achieved. Clinical supervision was available to staff, although there was limited uptake. Management supervision was available.

- 2.85 **All health services staff who have contact with prisoners should be assessment, care in custody and teamwork (ACCT) trained. (4.44)**

Achieved. All health services staff had received ACCT training and one member of staff was an ACCT assessor.

- 2.86 **Record keeping should conform to professional guidelines. (4.45)**

Partially achieved. SystmOne, an electronic record keeping system, was used and records

generally complied with professional standards. However, SystmOne was not always used to its best effect – for example, it was not used to create care plans.

- 2.87 All prisoners who require them should have care plans and these should be subject to regular review. (4.46)**

Not achieved. There were no care plans for prisoners who required them, such as those with palliative care needs or disabilities.
We repeat the recommendation.

Delivery of care (physical health)

- 2.88 Professional interpreting services should be used for clinical consultations with any prisoner who is unable to communicate effectively in English. (4.53)**

Achieved. The health services team had access to a professional interpreting service when it was required but there was little demand for its use.

- 2.89 Systems should be introduced to ensure that health services staff receive information on care received by prisoners when they have attended external health care appointments. (4.54)**

Partially achieved. Health services staff received letters from consultants if prisoners received an overnight stay in hospital. However, the health care department did not always receive information from outpatient appointments or via accident and emergency departments.
We repeat the recommendation.

Pharmacy

- 2.90 Methadone which has been dispensed by the methadone pump should be given directly to patients, without being re-measured. (4.47)**

Achieved. Methadone was administered directly to prisoners without being re-measured. The contents of the medicine store was poorly organised but there were plans to address this.

- 2.91 All prescriptions should be legally written, include the date, the quantity prescribed and a diagnosis, and be signed by the prescriber. (4.48)**

Achieved. All prescriptions reviewed were accurate and in line with professional standards, and there was a three-monthly audit process in place.

- 2.92 The pharmacist should be supported to develop pharmacy-led clinics and medicine use reviews for the prison population. (4.49)**

Achieved. The pharmacist undertook pharmacy-led clinics and medicine use reviews. These were intended to link with the new initiative to set up pain clinics. Action was also being taken to ensure that these clinics would continue when the pharmacy technician went on maternity leave.

- 2.93 Pharmacy procedures and policies should be formally reviewed and adopted through the medicines and therapeutics committee. All staff should read and sign the agreed adopted procedures. (4.51)**

Partially achieved. All policies and procedures had been reviewed and were in the process of being adopted via the medicines and therapeutics committee. Plans for staff to confirm that they had read and understood policies had yet to be implemented.

- 2.94 Patients should have adequate risk assessments, which are adhered to, both for in-possession and see-to-take medication. A patient assessed as needing see-to-take medication should not be given their medication in-possession. (4.52)

Achieved. Prisoners were risk assessed during the reception screen and reviews were undertaken as part of the medicine review use clinics or according to changing health-related circumstances. An up-to-date in-possession policy was in the process of being ratified.

Dentistry

- 2.95 Access to dental services should not be dependent on the length of sentence. (4.50)

Achieved. Prisoners were assessed and referred to the dentist according their needs. There had been progress in the management of dental services, although waiting times were still not managed sufficiently robustly.

Delivery of care (mental health)

- 2.96 There should be clear pathways for the delivery of mental health care, and staff should be aware of them. (4.55)

Partially achieved. Pathways had been developed, although some staff remained uncertain about the referrals processes.

- 2.97 A Service Level Agreement (SLA) should be in place for the provision of secondary and tertiary mental health services. (4.56)

Achieved. Mental health services were provided by Lincolnshire Partnership NHS Foundation Trust (LPFT) and there was a Service Level Agreement in place. There was access to a mental health nurse, counsellors, a psychiatrist, the community assessment team, an occupational therapist and a learning disabilities nurse.

Catering

- 2.98 The kitchen flooring should be repaired to improve the drainage of water. (7.13)

Achieved. The kitchen floor had been repaired and allowed adequate water drainage.

- 2.99 The dining room should be refurbished. (7.14)

Not achieved. The dining room had not been refurbished. It remained in a poor condition and was too small to accommodate the number of prisoners that used it.
We repeat the recommendation.

- 2.100 The serving of meals should start at the published times. (7.15)

Achieved. Published mealtimes were reasonable and usually adhered to.

- 2.101 The prison should make use of the dining area to display pictures and posters to brighten up the environment and promote healthy lifestyles and diversity. (7.16)

Partially achieved. Some pictures and photographs were displayed in the communal dining room. However, this had little impact on the area and it remained dull, dreary and unwelcoming. Healthy lifestyle and diversity posters were displayed.

- 2.102 Drinking water and cups should be available in the dining room. (7.17)

Not achieved. Drinking water and cups were not available.
We repeat the recommendation.

- 2.103 The prison should consult with black and minority ethnic prisoners to explore the reasons for their more negative perceptions of the food. (7.18)

Partially achieved. A prisoner survey had been conducted and the forum was attended by members of the catering staff. However, specific consultation with black and minority ethnic prisoners had not taken place.
We repeat the recommendation.

- 2.104 The menu should reflect the diversity of the population. (7.19)

Achieved. The menu offered choices which adequately reflected the diverse make-up of the prison population. The quality of the food being served remained good.

- 2.105 Long-term prisoners should have access to facilities to enable them to cook for themselves. (7.20)

Partially achieved. Prisoners in the two long-term prisoner units could prepare their own meals in well-equipped kitchens on the units. Long-term prisoners in other residential units were unable to do this.
We repeat the recommendation.

- 2.106 The food comments book should be easily assessable to prisoners, who should be encouraged to use it. (7.21)

Achieved. The food comments book was kept in the main dining room near the communal servery. Prisoners had good access to it and it was used often. It was checked every day by catering staff and comments were used to inform menu changes.

Purchases

- 2.107 The range of goods available should be extended, especially to provide more items requested by black and minority ethnic prisoners. (7.24)

Achieved. More effort was being made to take into account the needs of minority groups. The extensive prison shop list contained over 400 items, including fresh fruit, snack meats and halal products. Many of these were offered following consultation at prisoner forum meetings.

- 2.108 Prisoners should not be charged for the occasional issue of a statement of their personal accounts. (7.25)

Achieved. Prisoners were no longer charged for a statement of their personal accounts.

- 2.109 Managers should explore, by negotiation with the supplier or by other means, how the unit delivery cost of catalogue orders can be reduced. (7.26)

Not achieved. There was no evidence of negotiation with suppliers in terms of the unit delivery cost of catalogue items. However, prisoners we spoke to said that, overall, they were satisfied with catalogue services.

- 2.110 Consultations on prison shop issues should be held regularly, with a representative group of prisoners; they should be minuted, and agreed actions followed up. (7.27)

Achieved. Consultation arrangements had improved. Prisoner representatives attended monthly consultation meetings with staff, where issues about the shop were raised. Meetings were minuted, reasonably well attended and prisoners' views were acted on.

Recommendations – purposeful activity

Time out of cell

- 2.111 Managers should ensure that all equipment in association rooms is kept in working order and, if possible, provide less cramped indoor recreational areas. (5.51)

Not achieved. Many recreation areas were still small and cramped. There was little recreational equipment and it was not well maintained.

We repeat the recommendation.

- 2.112 A broader range of evening activities should be provided. (5.52)

Achieved. A range of evening activities and classes was available, including music and art classes, religious groups and the gym.

- 2.113 Outdoor seating, appropriate for older prisoners and those with back problems, should be provided within easy reach of the residential units. (5.53)

Achieved. Wooden benches and tables had been provided, and were located close to the residential units.

- 2.114 Managers should take action to reduce the time spent on administrative tasks by those supervising prisoners during evenings and at weekends. (5.54)

Not achieved. Prisoners continued to have free access to all outside areas until 8pm and could associate on their unit until midnight. There was no meaningful supervision on the residential units during association periods. Officers were predominantly based in unit offices, dealing with queries and applications.

We repeat the recommendation.

Learning and skills and work activities

- 2.115 Prisoners' attendance at education classes should be planned and prioritised to increase the number completing courses before leaving the prison. (5.14)

Achieved. Education classroom attendance was suitably planned and prioritised. Prisoners

could start most courses on a roll-on, roll-off basis. Classroom attendance had improved and course completion rates were generally good. Good use continued to be made of the teaching resources available.

2.116 Training and accreditation should be provided to those who work in the farm and gardens, and as cleaners. (5.15)

Partially achieved. Prisoners working in the farm and gardens could follow a level 2 horticulture course. The level 1 course was in abeyance but there were plans to reintroduce it. The prison had yet to introduce a nationally recognised cleaning qualification.

Further recommendation

2.117 Appropriate cleaning qualifications should be introduced. Subject to demand, the horticultural level one course should be reintroduced.

2.118 Systems should be introduced to recognise and record the skills developed through community projects and paid employment. (5.16)

Not achieved. Systems had not been introduced to recognise and record the skills developed through community projects and paid employment.
We repeat the recommendation.

2.119 Training should be provided for prisoners in finding, applying for and sustaining employment on release. (5.17)

Partially achieved. The education department offered an employability course to help prisoners to develop their job search and application skills. Prisoners had adequate access to computer facilities to produce CVs and letters of application. A local charity provided information and support to those applying for employment in their preferred resettlement area. However, the current arrangements did not support comprehensive training for all prisoners.
We repeat the recommendation.

2.120 Accredited courses and other learning activities should be introduced to support resettlement. (5.18)

Achieved. The number of courses and activities to support resettlement had increased, with enhanced provision at level 2. The range was adequate but the number of places was limited.

Further recommendation

2.121 There should be more accredited courses and other learning activities to support resettlement.

2.122 The information, advice and guidance interview should consider the full range of development opportunities across the prison and link to resettlement needs. (5.19)

Achieved. Interventions now covered the full range of development opportunities across the prison. The information, advice and guidance (IAG) adviser now attended prisoners' sentence planning interviews and a dedicated adviser dealt with all pre-release interviews. IAG interviews effectively considered prisoners' needs on release.

Physical education and health promotion

- 2.123 Additional accommodation should be provided to use and permanently house cardiovascular and fixed fitness equipment. (5.26)

Achieved. The appropriate additional accommodation had been provided.

- 2.124 The showering and toilet facilities in the gym should be improved. (5.27)

Achieved. The showers and toilet facilities had been refurbished and were fit for purpose.

- 2.125 A drinking water facility should be provided. (5.28)

Partially achieved. Drinking water was available from a tap in the shower room. However, no cups or suitable alternatives were available.

Recommendations – resettlement

Strategic management of resettlement

- 2.126 The resettlement strategy should be driven and monitored by a regular meeting, chaired by a senior manager and attended by key managers representing all strands of resettlement. (8.5)

Not achieved. A reducing reoffending meeting structure, terms of reference and objectives had been developed but the meetings had yet to take place. The head of reducing reoffending was to chair the meetings, and function heads, a member of the Independent Monitoring Board and prisoner representatives would attend.

Offender management and planning

- 2.127 Home detention curfew (HDC) releases should not be delayed by late probation reports. (8.34)

Not achieved. The number of prisoners released on HDC had reduced considerably. Twenty-seven had been approved in the first three months of 2012. Late probation reports had delayed four releases beyond the eligibility date, including one by three weeks.
We repeat the recommendation.

- 2.128 The progress of indeterminate-sentenced prisoners towards eligibility for outwork should not be delayed by late probation reports. (8.37)

Achieved. We found no evidence of delays caused by late probation reports in these circumstances, and prisoners in our groups did not report any such difficulties.

- 2.129 There should be appropriate interview rooms for resettlement staff to speak to prisoners in confidence. (8.29)

Achieved. Three rooms were now available on north unit for private interviewing.

- 2.130 All prisoners should have a sentence plan. A multidisciplinary team should review this with the prisoner shortly after arrival, and a log should be kept of all reviews and boards. (8.30)**

Partially achieved. The prison had implemented layered offender management and all prisoners had a sentence plan, including those who would normally have been out of scope. In our groups, most prisoners reported having had an initial sentence planning meeting with their offender supervisor. However, many said that they had had few or no reviews and were unsure if they had completed all the requirements of their sentence plan. One prisoner said that he had been at the prison for six months and was still waiting to see his offender supervisor. A new quarterly process, amalgamating a number of review boards, such as release on temporary licence (ROTL) and HDC, into a single sentence planning review had been introduced shortly before the inspection but was not yet embedded. Prisoners told us that it was difficult to access the offender management unit; they had to knock and then wait to be let in, but were often ignored and left waiting outside the unit. We observed this to be the case in practice.

Further recommendation

- 2.131 Sentence plans should be reviewed regularly and prisoners should be able to obtain advice easily from staff in the offender management unit.**

- 2.132 Procedures should be put in place to ensure that unit staff are aware of which prisoners on their units are subject to public protection monitoring. (8.31)**

Not achieved. Following the previous inspection, information identifying prisoners subject to public protection monitoring had begun to be shared with residential staff. However, after a data breach this had ceased. The information was now tightly controlled and shared on a need-to-know basis, as determined by the prison.

- 2.133 The number of prisoners being released on temporary licence should be comparable with that in other open prisons, and work placements should not be restricted by the number of spaces on the resettlement residential units. (8.32)**

Achieved. The number of prisoners being awarded ROTL was reasonable and comparable with that in other open prisons, at approximately 95 per day and a total of 29,329 in 2011. Work placements were not restricted by the number of spaces on the resettlement units. Prisoners accommodated on other units were now on work placements. Prisoners were helped to maintain contact with their family and friends through fairly frequent opportunities to participate in town visits, through the ROTL scheme.

- 2.134 More help should be given to prisoners to help them find paid work. (8.33)**

Partially achieved. Only six prisoners were in paid work at the time of the inspection. This was still unacceptably low for a resettlement prison. Links had been made with a national employer, creating five additional placements which were due to start shortly after the inspection. Managers had arranged a meeting with a local recruitment agency to examine how the prison could meet the needs of local employers.

We repeat the recommendation.

Public protection

2.135 Recalled prisoners should routinely be flagged and specifically monitored. (8.35)

Not achieved. Recalled prisoners were not flagged or monitored. The rationale for this approach was that prisoners were initially recalled to closed conditions, where they were reassessed, subsequently transferring to North Sea Camp with a sentence plan which addressed the risks identified. As such, they were treated in the same way as any other prisoner. The existing arrangements did not adequately address the increased risk of a breach of licence presented by recalled prisoners.

We repeat the recommendation.

2.136 A video link facility should be installed to assist with probation assessments and review boards. (8.36)

Not achieved. Although telephone conferencing was used more frequently than at the time of the previous inspection for assessments and sentence planning boards, there was still no video link facility.

Indeterminate-sentence prisoners

2.137 There should be regular lifer forums and at least two lifer days each year. (8.38)

Not achieved. The number of lifers had increased from 42 at the time of the previous inspection to 150. There was no specific provision for them. However, they were well represented on the prisoner council, where lifer issues could be discussed. Prisoners in our lifer discussion group said that their needs were met through the provision of family days, ROTL, town visits and work.

2.138 Indeterminate-sentenced prisoners should be prioritised for single cell accommodation. (8.39)

No longer relevant. Indeterminate-sentenced prisoners were still allocated accommodation in the same way as other prisoners. However, the number of prisoners serving short sentences had decreased considerably since the time of the previous inspection, so the problem of indeterminate-sentenced prisoners sharing with short-sentenced prisoners had greatly reduced. Prisoners no longer reported this as a problem.

2.139 The establishment should review the causes of delays in progressing parole hearings and dossier submissions, and resolutions sought. (8.40)

Achieved. In 2011, 146 of 179 parole dossiers requested had been completed and delivered to the parole board on time. The prison had reviewed the causes of delays and had trained additional staff. Since June 2011, all dossiers had been submitted on time.

Reintegration planning

2.140 There should be improved checks on addresses given to support early conditional licence discharges. (8.61)

No longer relevant. The early conditional licence scheme had ended.

2.141 There should be nominated leads for all pathway areas. (8.56)

Not achieved. There were no nominated leads for pathway areas, although this was being considered under the new strategic management structure (see recommendation 2.126).
We repeat the recommendation.

2.142 Regular pathway meetings should be held, with representatives from all pathway areas. (8.57)

Not achieved. Regular meetings were not held for all the pathways, but were being considered under the new structure being developed (see recommendation 2.126). Managers did not appear to understand the importance of these meetings in ensuring that pathway work was delivered consistently and effectively.
We repeat the recommendation.

2.143 There should be greater use of prisoners as peer supporters in resettlement. (8.58)

Achieved. Resettlement orderlies, including ROTL orderlies, had been introduced. Prisoners were aware of individuals acting in this capacity and took advantage of the support they provided.

2.144 Prisoners should know how to access resettlement services in the establishment. (8.59)

Partially achieved. Prisoners knew how to access the community engagement team, which dealt with voluntary and paid work placements. However, some prisoners in our groups were not aware of other resettlement support services provided by the induction officers.
We repeat the recommendation.

Accommodation

2.145 A specialist housing provider should be available to all prisoners. (8.60)

Partially achieved. There was still no specialist housing provider available, although induction officers were trained in housing and had established links with a number of accommodation providers.
We repeat the recommendation.

Education, training and employment

2.146 Education and training should be better linked to resettlement needs. (8.62)

Partially achieved. The number of courses to support resettlement had been increased and included a range of programmes to enhance prisoners' employability skills and self-employment. Opportunities for prisoners to develop their computer skills within a vocational context had improved. However, both the range of vocational provision and the number of places to support resettlement were still too small.

2.147 There should be more training and support for prisoners to find, apply for and sustain a job on release. (8.63)

Partially achieved. See recommendation 2.119 and further recommendation 2.121.

2.148 Voluntary work placements should be used to develop employability skills. (8.64)

Achieved. The opportunities to develop work skills in voluntary work placements had improved but this information was not being recorded (see recommendation 2.118). At the time of the inspection, approximately a quarter of the population was undertaking a placement.

2.149 A pre-release course should be available. (8.65)

Partially achieved. The prison did not offer a formal pre-release course but introduced prisoners to relevant aspects of resettlement throughout their stay. For example, the education department provided a two-week course developing independent living skills and a one-week course aimed at enhancing job applications. However, not all prisoners received appropriate and timely support before release.

Further recommendation

2.150 A comprehensive system should be introduced to ensure that all prisoners benefit from

2.151 There should be better links with national employers. (8.66)

Partially achieved. The number of employers used by the prison to support resettlement had increased; however, there was insufficient variety and there were too few employers involved. **We repeat the recommendation.**

Health care

2.152 Staff should routinely contact community services to ensure continuity of care on release for prisoners with mental health needs. (8.67)

Achieved. There were reliable links to community services for prisoners with mental health needs.

2.153 All prisoners on prescribed medication at the time of release should be offered take-home medication. (8.68)

Achieved. Prisoners were offered seven days' medication on release. Those being discharged to a hostel received 14 days' medication. There was a system for prescriptions to be supplied so that prisoners on home leave could receive medication.

2.154 Prisoners who are not registered with a GP should be given sufficient information to be able to do this on their release. (8.69)

Achieved. Offender management staff offered all prisoners information about GP services on release.

2.155 There should be appropriate arrangements for prisoners requiring palliative care that can not be provided at the establishment. (8.70)

Achieved. There were links with Macmillan Cancer Support services. An early prevention of cancer initiative had been set up between Macmillan and the health care department.

Prisoners had been recruited to develop health promotion initiatives for men, to raise awareness around prostate, testicular, bowel, breast and skin cancer.

Good practice

- 2.156 *An early prevention of cancer initiative had been set up between Macmillan Cancer Support services and the health care department. This was a progressive example of relevant preventative work.*

Drugs and alcohol

- 2.157 **The drug and alcohol strategies should be informed by needs analysis and include action plans. (8.85)**

Achieved. A substance misuse needs assessment had been undertaken for HMPs North Sea Camp and Lincoln by the public health directorate in 2011 as a response to the changes in commissioning of drug and alcohol services. Action plans were being monitored by the Lincolnshire Prisons drug strategy committee meeting. The demand by prisoners for support in relation to drugs and alcohol was limited but support was available for those who needed it.

- 2.158 **The counselling, assessment, referral, advice and throughcare (CARAT) team should be sufficiently resourced to provide group work sessions. (8.86)**

Achieved. The CARAT team provided group work which included managing relapse, triggers and cravings and addressing issues related to alcohol and drugs.

- 2.159 **CARAT and health services staff should have regular meetings. (8.87)**

Achieved. CARAT and health services staff met regularly but this was often informal. Action was being taken to ensure that senior staff met regularly to discuss management issues. There were regular health care team meetings, which were open to mental health staff and substance misuse workers.

Finance, benefit and debt

- 2.160 **A one-to-one debt advice service should be reinstated. (8.71)**

Not achieved. There was no specialist debt advice service available.
We repeat the recommendation.

- 2.161 **Prisoners with financial management needs should be better identified and directed toward courses. (8.72)**

Partially achieved. Prisoners with financial issues were identified at the induction assessment. However, it was not clear how or if prisoners were signposted to relevant courses.
We repeat the recommendation.

- 2.162 **Help with opening a bank account should be more widely available. (8.73)**

Achieved. The prison encouraged prisoners who were eligible for ROTL to open bank

accounts, and provided a signed letter for identification purposes. Links had been established with two banks. The possibility of those living in Jubilee House (see recommendation 2.170) having debit cards was being investigated.

Children, families and contact with the outside world

- 2.163 The visitors' waiting area should be upgraded to provide more information and improved facilities for visitors. (8.95)

Not achieved. Despite a recent refurbishment, the waiting area was poor, with dirty toilets, holes in the walls and no facilities for buying food or drinks. The information displayed was limited.

We repeat the recommendation.

- 2.164 The prison should explore means by which visitors could book their next visit before leaving the prison. (8.96)

Achieved. Visitors were able to book their next visit at the gate on arrival or when leaving the prison.

- 2.165 Visits should start at the advertised time. (8.97)

Achieved. Visitors were escorted to the visits hall promptly and visits started on time. The prisoners and visitors we spoke to did not report difficulties with visits starting later than advertised.

- 2.166 Prisoners should not be required to wear prison-issue shirts during visits or family days. (8.98)

Achieved. Prisoners were no longer required to wear prison-issue clothes.

- 2.167 The need for relationship and parenting courses should be explored. (8.99)

Not achieved. No relationship and parenting courses were available. However, Lincolnshire County Council had expressed an interest in running a short parenting course as a pilot and discussions were ongoing. In the absence of a formal needs analysis, it was not possible to determine the extent of the need for such courses.

We repeat the recommendation.

- 2.168 Storybook Dads and other, similar schemes should be introduced. (8.100)

Achieved. Storybook Dads had recently been introduced. Applications from two prisoners were going through the approval processes at the time of the inspection. A homework scheme was advertised, whereby prisoners were provided with a free telephone call with their children, to help them to complete school work.

Attitudes, thinking and behaviour

- 2.169 There should be routine access to psychology services. (8.107)

Achieved. The prison was now able to access psychology services and one-to-one work was provided as part of a cluster arrangement with HMPs Lincoln and Whatton.

2.170 There should be more help to support prisoners who have become institutionalised, including the opportunity to prepare their own meals. (8.108)

Achieved. Jubilee House, located a short distance from the prison, comprised three self-contained units, one of which had opened and accommodated eight prisoners. The regime being introduced there was intended to encourage long-term prisoners to become more self-reliant and responsible. Prisoners there lived independently of the prison. They worked or volunteered in the community and cooked their own meals. There were plans for two of the houses in the prison to become feeders into Jubilee House.

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.

	Recommendation	To NOMS
3.1	Home detention curfew (HDC) releases should not be delayed by late probation reports. (2.127)	
	Recommendations	To the governor
	Courts, escorts and transfers	
3.2	Prisoners' property should be processed efficiently. (2.10)	
	Bullying and violence reduction	
3.3	All staff should be trained in the violence reduction strategy, focusing especially on intervention plans. (2.14)	
3.4	The safer custody meeting should consider patterns and trends in violent behaviour, and shape policy accordingly. (2.16)	
3.5	Prisoner representatives should be invited to attend the safer custody meetings. (2.17)	
3.6	Entries in intervention plan documents should record interactions between staff and the prisoner at least once in each of the three main sessions of the day. (2.18)	
	Self-harm and suicide prevention	
3.7	Managers should evaluate the care plan system and, if it is continued, include relevant guidance in the suicide and self-harm strategy. (2.20)	
3.8	All staff working face to face with prisoners should receive training on suicide prevention and self-harm risk management. (2.22)	
3.9	Managers should introduce a contingency plan for Listener training, ready for implementation if numbers drop. (2.23)	
	Incentives and earned privileges	
3.10	Staff from a prisoner's place of work or activities should contribute to an incentives and earned privileges (IEP) review. (2.31)	

The use of force

- 3.11 Video-recording facilities should be available to record any planned use of force incidents. (2.33)

Segregation

- 3.12 A log should be kept for all prisoners held in the reception holding room before transfer to closed conditions, and this should be monitored by the senior management team. (2.34)

Residential units

- 3.13 The remedial work required to bring the prison buildings up to standard should be undertaken, with the showering facilities on north and south units taking priority. (2.1)
- 3.14 Cells designed for one should not accommodate two. (2.39)
- 3.15 The telephones located in the association areas on Harrison and Llewellyn units should be moved to allow the limited association area to be used. (2.40)
- 3.16 The association areas should be made more attractive to encourage use, both in terms of decoration and facilities available. (2.41)
- 3.17 Prisoners on Harrison and Llewellyn units and the long-term houses should be able to do their own laundry. (2.42)

Staff–prisoner relationships

- 3.18 Staff should routinely knock before entering prisoners' cells. (2.45)
- 3.19 The use of prisoners as peer supporters should be extended. (2.47)
- 3.20 The effectiveness of the existing personal officer scheme should be reviewed and improvements introduced. (2.48)
- 3.21 Managers should ensure that personal officers make time to discuss relevant issues with those on their caseload, and personal information about individual prisoners should be noted in their wing history files to ensure that all staff have access to important facts. (2.49)

Equality and diversity

- 3.22 Managers should review the establishment's diversity strategy to ensure that it covers all minority groups and that each strand is underpinned by appropriate policies and structures. (2.4)
- 3.23 Regular reviews of the needs of each prisoner with a disability should take place, with involvement from the prisoner. (2.52)
- 3.24 Policy guidance on the management of older prisoners and gay, bisexual and transgender prisoners should be developed. (2.53)

- 3.25 Analysis of the experience of prisoners with disabilities should take place and be considered by the diversity and race equality action team. (2.55)
- 3.26 Diversity and race equality action team (DREAT) meetings should be reinstated, with consistent multidisciplinary attendance. (2.57)
- 3.27 Efforts should be made to secure attendance from an external body at DREAT meetings. (2.58)
- 3.28 Meetings of the prisoner representatives should be minuted and action points followed through. (2.60)
- 3.29 The REO should ensure that formal consultation meetings with black and minority ethnic prisoners take place and that prison managers attend. (2.61)
- 3.30 External quality assurance for completed racist incident report forms should be introduced. (2.62)
- 3.31 The foreign nationals policy should be publicised around the prison so that staff and prisoners are aware of it. (2.64)
- 3.32 A formal analysis of the needs of foreign national prisoners should be undertaken. (2.65)
- 3.33 Consultation meetings with foreign national prisoners and staff should take place regularly. (2.67)

Faith and religious activity

- 3.34 All prisoners should have access to a chaplain of their own faith. (2.71)
- 3.35 A multi-faith area with washing facilities, large enough to accommodate the number of prisoners using it should be provided. (2.72)
- 3.36 The chaplaincy team should attend all key meetings. (2.75)

Legal rights

- 3.37 Managers should consult widely among prisoners about the reasons for their dissatisfaction with provision for communicating and meeting with legal representatives, and take steps to improve confidence in the practical processes. (2.78)

Health services

- 3.38 All uniformed officers should have at least annual resuscitation and defibrillation training. (2.81)
- 3.39 All prisoners who require them should have care plans and these should be subject to regular review. (2.87)
- 3.40 Systems should be introduced to ensure that health services staff receive information on care received by prisoners when they have attended external health care appointments. (2.89)

Catering

- 3.41 The dining room should be refurbished. (2.99)
- 3.42 Drinking water and cups should be available in the dining room. (2.102)
- 3.43 The prison should consult with black and minority ethnic prisoners to explore the reasons for their more negative perceptions of the food. (2.103)
- 3.44 Long-term prisoners should have access to facilities to enable them to cook for themselves. (2.105)

Time out of cell

- 3.45 Managers should ensure that all equipment in association rooms is kept in working order and, if possible, provide less cramped indoor recreational areas. (2.111)
- 3.46 Managers should take action to reduce the time spent on administrative tasks by those supervising prisoners during evenings and at weekends. (2.114)

Learning and skills and work activities

- 3.47 The number of mundane orderly jobs should be reduced, particularly in cleaning and farming. The number of places on courses leading to accreditation should increase. (2.6)
- 3.48 Appropriate cleaning qualifications should be introduced. Subject to demand, the horticultural level one course should be reintroduced. (2.117)
- 3.49 Systems should be introduced to recognise and record the skills developed through community projects and paid employment. (2.118)
- 3.50 Training should be provided for prisoners in finding, applying for and sustaining employment on release. (2.119)
- 3.51 There should be more accredited courses and other learning activities to support resettlement. (2.121)

Strategic management of resettlement

- 3.52 There should be an up-to-date, pathway-based resettlement strategy, informed by a needs analysis, which addresses the needs of the different groups within the population. (2.7)

Offender management and planning

- 3.53 Sentence plans should be reviewed regularly and prisoners should be able to obtain advice easily from staff in the offender management unit. (2.131)
- 3.54 More help should be given to prisoners to help them find paid work. (2.134)
- 3.55 Recalled prisoners should routinely be flagged and specifically monitored. (2.135)

- 3.56 There should be nominated leads for all pathway areas. (2.141)
- 3.57 Regular pathway meetings should be held, with representatives from all pathway areas. (2.142)
- 3.58 Prisoners should know how to access resettlement services in the establishment. (2.144)

Reintegration planning

- 3.59 A specialist housing provider should be available to all prisoners. (2.145)
- 3.60 A comprehensive system should be introduced to ensure that all prisoners benefit from relevant, timely resettlement support before release. (2.150)
- 3.61 There should be better links with national employers. (2.151)
- 3.62 A one-to-one debt advice service should be reinstated. (2.160)
- 3.63 Prisoners with financial management needs should be better identified and directed toward courses. (2.161)
- 3.64 The visitors' waiting area should be upgraded to provide more information and improved facilities for visitors. (2.163)
- 3.65 The need for relationship and parenting courses should be explored. (2.167)

Example of good practice

Reintegration planning

- 3.66 An early prevention of cancer initiative had been set up between Macmillan *Cancer Support* services and the health care department. This was a progressive example of relevant preventative work. (2.156)

Appendix I: Inspection team

Ian MacFadyen	Team leader
Bev Alden	Inspector
Colin Carroll	Inspector
Gordon Riach	Inspector
Helen Carter	Health care inspector
Nigel Bragg	Ofsted inspector

Appendix II: Prison population profile

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

Status	18-20 yr olds	21 and over	%
Sentenced		371	98.1
Recall		7	1.9
Convicted unsentenced			
Remand			
Civil prisoners			
Detainees			
Total		378	

Sentence	18-20 yr olds	21 and over	%
Unsentenced			
Less than 6 months		1	0.3
6 months to less than 12 months			
12 months to less than 2 years		4	1.1
2 years to less than 4 years		28	7.4
4 years to less than 10 years		89	23.5
10 years and over (not life)		15	4
ISPP	1	91	24
Life		150	39.7
Total	1	378	

Age	Number of prisoners	%
Please state minimum age	-	-
Under 21 years		
21 years to 29 years	78	20.6
30 years to 39 years	107	28.3
40 years to 49 years	98	26
50 years to 59 years	65	17.2
60 years to 69 years	22	5.8
70 plus years	8	2.1
Please state maximum age	-	-
Total	378	100

Nationality	18-20 yr olds	21 and over	%
British		369	97.6
Foreign nationals		9	2.4
Total		378	

Security category	18-20 yr olds	21 and over	%
Uncategorised unsentenced			
Uncategorised sentenced			
Cat A			
Cat B			
Cat C			
Cat D		378	100

Other			
Total		378	100

Ethnicity	18–20 yr olds	21 and over	%
White			
British		283	74.9
Irish		2	0.5
Other white		14	3.7
		299	79.1
Mixed			
White and black Caribbean		6	1.6
White and black African			
White and Asian		1	0.3
Other mixed		4	1.1
		11	2.9
Asian or Asian British			
Indian		6	1.6
Pakistani		12	3.2
Bangladeshi			
Other Asian		4	1.1
		22	5.8
Black or black British			
Caribbean		28	7.4
African		8	2.1
Other black		9	2.4
		45	11.9
Chinese or other ethnic group			
Chinese			
Other ethnic group		1	0.3
		1	0.3
Not stated			
Total		378	100

Religion	18–20 yr olds	21 and over	%
Baptist		1	0.3
Church of England		129	34.1
Roman Catholic		45	11.9
Other Christian denominations		27	7.1
Muslim		43	11.4
Sikh		2	0.5
Hindu			
Buddhist		18	4.8
Jewish		1	0.3
Other		10	2.6
No religion		102	27
Total		378	100

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month			44	11.6

1 month to 3 months			62	16.4
3 months to 6 months			55	14.6
6 months to 1 year			108	28.6
1 year to 2 years			96	25.4
2 years to 4 years			11	2.9
4 years or more			2	0.5
Total			378	100

Unsentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	0		0	
1 month to 3 months	0		0	
3 months to 6 months	0		0	
6 months to 1 year	0		0	
1 year to 2 years	0		0	
2 years to 4 years	0		0	
4 years or more	0		0	
Total	0		0	

Main offence	18–20 yr olds	21 and over	%
Violence against the person		148	39.2
Sexual offences		71	18.8
Burglary		24	6.4
Robbery		51	13.5
Theft and handling		3	0.01
Fraud and forgery		9	2.4
Drugs offences		36	9.5
Other offences		36	9.5
Civil offences			
Offence not recorded/holding warrant			
Total		378	100